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CHAPTER I

प्रथमोऽध्यायः

अथातो ज्वरनिदानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानत्रेयः ॥ २ ॥

We shall now expound the chapter on the “Diagnosis of Jvara (fever). [1]

Thus said Lord Ātreya. [2]

In the preceding section, etiology and symptomatology of diseases have been briefly explained. It is now proposed to describe them in greater detail in the present section, for, the treatment of diseases is effective only when their etiology and symptomatology are ascertained in advance.

This section deals mainly with the diagnosis of diseases. The line of treatment of diseases is indicated here briefly. That too is in fact included under *upaśaya* (exploratory therapy). Moreover, the etiological and symptomatological studies are intended to guide the line of treatment and as such the line of treatment is also shown here.

Jvara (fever) occupies the first place among the physical ailments—cf. *Cikitsā* 3 : 4. So it is being described here first. It is true that in Chapter 8 : 11, it has been stated that *gulma* (abdominal tumour) originated in times of yore (*purā*). But this statement is not intended to show that *gulma* originated even prior to the manifestation of *jvara*. It is stated elsewhere that in the course of the disturbance of the *yajña* (sacrifice) being performed by Dakṣa the living beings being afflicted with *jvara* ran to and fro in all directions and so they where attacked by *gulma*.

The term *nidāna* relates both to etiology as well as diagnosis of diseases. The etiology helps in ascertaining the causative factors of a disease whereas diagnosis helps in the determination of the nature of the disease based on causative factors, promontory signs, actual signs, exploratory therapy and pathogenesis.

Synonyms of causative factor and its categories :

इह खलु हेतुनिमित्तमायतनं कर्ता कारणं प्रत्ययः समुत्थानं निदानमित्यनर्था-न्तरम् । तत्रिविधम्—असात्म्येन्द्रियार्थसंयोगः, प्रक्षापराधः, परिणामश्चेति ॥ ३ ॥

In the present context, *hetu*, *nimitta*, *āyatana*, *kartṛ*, *kāraṇa*, *pratyaya* and *samutthāna* are synonyms of *nidāna* (causative factor). Causative factors are of the following three categories :

1. unwholesome contacts of the sense organs with their objects ;
2. intellectual blasphemy ; and
3. seasonal vagaries. [3]

Diagnosis of *jvara* (fever) forms the subject matter of this chapter. It is, however, necessary to comprehend general etiological principles before attempting the description of the causative factors specific to individual diseases. To start with, various synonyms of *nidāna* are enumerated here so as to facilitate the comprehension of the salient features of the diseases caused. These are to be considered as synonyms only in the present context. These terms have different connotations in other contexts—cf. *Vimāna* 8 : 31, *Sūtra* 29 : 3 and *Śārira* 4 : 8. Eventhough these terms have different connotations in different contexts, they are used here in restricted sense so as to connote causative factors only.

In all, eight synonymous terms are enumerated in the above passage inasmuch as eight is an auspicious number. Moreover number eight is significant even otherwise. *Jvara* is of eight types; so the enumeration of eight synonyms of causative factors is significant in more than one way. As a matter of fact there can be many more synonyms like *yoni*, *mūla*, *mukha* and *prakṛti*. It would have been too lengthy to have enumerated them all here. Similarly, the omission of certain synonyms of diseases in para 5 of this Chapter can be explained.

These three categories of causative factors have already been explained in *Sūtra* 1 : 54 and *Sūtra* 11 : 37. There is an implied emphasis on *traividhya* (triplicity) with regard to the three categories of causative factors. Firstly, whatever the number of different individual causative factors may be, they are all included under these three categories. Secondly, every causative factor is involved in the non-utilisation, over-utilisation and wrong-utilisation of sense organs etc. In any case there is no harm in repeating the three-fold classification of causative factors even if it has already been described in the preceding section.

The above triplicity applies only to original causative factors and not to subsidiary ones. So even if the immediate cause of *raktapitta* (hemothermia) be *jvara* (fever), the latter cannot be included under the above triplicity. That is to say, even if *raktapitta* etc. be caused by *jvara* etc; it is the unwholesome contact of sense organs with their respective objects etc. that are to be considered as the original causative factors.

Of all the three categories of causative factors, the unwholesome contact of the sense organs with their respective objects deserves the first position. It is true that intellectual blasphemy appears to be the original and most important causative factor of all diseases. But at the same time, the wrong-utilisation of sense organs with harsh sounds etc. represents the most important causative factor; so it is mentioned first.

Being unavoidable, seasonal vagaries also constitute important causative factors for diseases. But then, they are of a secondary character inasmuch as they can cause diseases only in the event of over-utilisation, by the sense organs of their respective objects.

Dual classifications of disease :

अत्थिविधा व्याधयः प्रादुर्भवन्ति आग्नेयाः, सौम्याः, वायव्याश्च; द्विविधा-
श्चापरे-रजसाः, तामसाश्च ॥ ४ ॥

Diseases so caused are primarily of three types viz., *āgneya*, (*paitika*), *saumya* (*ślaiṣmika*) and *vāyavya* (*vātika*). Some others, that is minor ones, are of two types viz. *rājasa* and *tāmasa*. [4]

Three categories of causative factors are described in paragraph-3. It should not, however, be construed that these three categories are responsible for the causation of three types of disease (mentioned in paragraph-4) respectively. In fact any one category of causative factor can produce all the three types of diseases. This is indicated by the compound आग्नेयसौम्यव्याधयाः. It is not possible to enumerate all the diseases but this much is certain that all diseases are included under these three types.

Vata is responsible for the causation of most of the diseases and thus it should have been enumerated here first but *pitta* is the invariable causative factor of *jvara* (fever) which constitutes the most important disease; hence *pitta* is enumerated first.

Only somatic diseases alongwith their various aspects including treatment are described in this text. Psychic diseases, therefore, do not bear much importance in the present context. So such diseases (*rājasa* and *tāmasa*) are classified separately. The word 'apare' used here indicates that the psychic diseases do not bear that much of importance as the somatic ones. They are mentioned here in order to bring about comprehensiveness in the statement regarding the classification of diseases.

Exogenous diseases due to assault etc., come under these three categories viz., *āgneya*, *saumya* and *vāyavya* because vitiation of *dosas* takes place even in such diseases.

Synonyms of diagnosis :

तत्र व्याधिरामयो गद आतङ्को यक्षमा ज्वरो विकारो रोग इत्यनर्थान्तरम् ॥५॥

Vyādhi, *āmaya*, *gada*, *ātaṅka*, *yakṣamā*, *jvara*, *vikāra*, and *roga*—these words are synonymous meaning the disease. [5]

After the classification of diseases, various synonymous of diseases are described here with a view to specify their characteristic features.

Eventhough each of these synonymous words has different other meanings, still all of them are indicative of disease in its various aspects. The word 'vyādhi' indicates that diseases are associated with various types of pain. The word 'āmaya' indicates that 'āma' is invariable present in the pathogenesis of diseases. Ātanika indicates that an individual suffering from diseases leads a miserable life. Yaksma indicates that like yaksma-roga (tuberculosis) diseases are symptom complexes are associated with many disease entities. The word *jvara* is indicative of both psychic and somatic afflictions. 'Vikara' indicates the changes effected by the disease, both in the body as well as the mind. The term 'roga' indicates the painfulness of diseases.

Means of diseases :

तस्योपलब्धिनिर्दानपूर्वरूपलिङ्गोपशयसंप्राप्तिः ॥ ६ ॥

Diseases can be diagnosed by the study of *nidāna* (etiology), *pūrvarūpa* (premonitory symptoms), *linga* (actual symptoms), *upaśaya* (exploratory therapy) and *samprāpti* (pathogenesis). [6]

After the description of etiology, methods to be followed for the diagnosis of diseases is described here with a view to facilitate their treatment.

Definition of causative factor :

तत्र निदानं कारणमित्युक्तमग्रे ॥ ७ ॥

Nidāna is already described to constitute the causative factors of diseases. [7]

Immediate causes of a disease are the vitiated *dosas* and distant causes are unwholesome contacts with the objects of senses. The distant cause of *rakta-pitta* may be the hyperpyrexia of *jvara* (fever). The distant causes common of all diseases are the previous sinful acts—cf. *Vimāna* 3 : 24 and because of this, various types of atonements, worships, auspicious observances etc; are prescribed for their treatment. All these types of causative factors constitute *nidāna*.

Fever is mentioned to originate from 'Rudrakopa' (wrath of Lord Śiva) and this emphasis is the seriousness of this condition. This also indicates that *pitta* plays an important role in the pathogenesis of fever. As it is said, "Increased bodily temperature is the sole manifestation of the vitiated *pitta* and hyper pyrexia is an invariable symptom of fever (by implication, vitiation of *pitta* is the *sine-qua-non* for the genesis of fever); hence it is advised for patients suffering from fever to avoid as much as possible such regimens as would be antagonistic to (which aggravate) *pitta*"—cf. *Aṣṭāṅgahṛdaya : Cikitsā*, 1 : 16-17.

Knowledge of the etiological factors responsible for the genesis of a particular disease is useful inasmuch as it helps selection of a therapy to cure the disease by alleviating that particular vitiated *doṣa*. It also helps in obtaining the knowledge regarding the complications and diseases to be developed in future due to that particular vitiated *doṣa*. If anybody takes such diets as are unwholesome and ununctuous, among others, then the diseases to be caused in future by the intake of such diets can be very well inferred. In the case of doubt regarding the diagnosis of a particular disease, examination of the causative factors responsible for this disease can clarify the position. Thus the knowledge of etiology serves the above mentioned purposes.

Definition of premonitory symptom :

पूर्वरूपं प्रागुत्पत्तिं लक्षणं व्याख्येः ॥ ८ ॥

Symptoms which manifest themselves before the appearance of the disease (pre monitory symptoms) are known as *pūrvarūpa*. [8]

Symptoms indicative of the appearance of a particular disease in future are known as *pūrvarūpa*. *Nidāna* (causative factors) and *pūrvarūpa* (pre-monitory symptoms)—both are indicative of the future-disease but the mention of the word '*lakṣaṇa*' meaning symptom in the definition of *pūrvarūpa*, as given in the text above, makes it different from *nidāna* (etiological factors). As it is said elsewhere pre-monitory symptoms produced by the localised vitiated *doṣas* are called *pūrvarūpa*. As cloud is indicative of rain, and the rise of Rohini star is indicative of the rise of Kṛttikā, so also *pūrvarūpa* (pre-monitory symptom) indicates the diseases which are unmanifested and non-existent.

Pre-monitory symptoms are of two types—(1) actual symptoms of the disease which are not clearly manifested—cf. *Cikitsā*, 11 : 12 and *Aṣṭāngahṛdaya*; *Nidāna* 1 : 4 and (2) others which are different from the actual symptoms of diseases and which are manifested by the interaction of vitiated *doṣas* and *dhātus* (tissue elements), viz. dislike for children, horripilation etc., preceding fever. Pre-monitory symptoms of the second category do not necessarily manifest themselves as the actual symptoms of the disease; they only precede the disease. Wherever such symptoms manifest themselves even during the actual disease then it is described as incurable. It is with reference to this latter category of *pūrvarūpa* that it is mentioned, "Appearance of all the premonitory symptoms of *jvāra* during the manifestation of its actual symptoms lead to death". cf. *Indriya* 5 : 4 and 5. Had the former category of pre-monitory symptoms been indicated by the above, then all types of fever would become incurable because all the unmanifested symptoms of *pūrvarūpa* stage always appear during the fever in all cases. Thus the statements in *Indriya* 5 : 4 and 5

are indicative of such of the pre-monitory symptoms as appear exclusively during *pūrvarūpa* stage and not otherwise.

Symptoms observed during the *pūrvarūpa* stage due to the interaction of *doṣas* and *dhatu*s (second category) only indicates the nature of the disease to be manifested and do not indicate the vitiated *doṣas* dominating the pathogenesis of the disease cf. *Aṣṭāṅgahṛdaya : Nidāna* 1 : 3-4. The other type of *pūrvarūpa* (first category) indicates the dominance of vitiated *doṣas* alongwith the nature of the disease. As it is described in the *Hārita*, "The *pūrvarūpa* of *vātika* type of *jvara* is yawning, malaise etc., A similar statement is also made in the *Suśruta : Uttaratantra* 39 : 27-28. Such symptoms in the *pūrvarūpa* stage are very mild, that is not fully manifested, but during *rūpa* stage they are well manifested in intensity.

In view of the above mentioned two categories of *pūrvarūpa*, it is only when there appears a special symptom during the *pūrvarūpa* stage (belonging to the second category) that it is described in the text. If there is no such special symptom manifested during *pūrvarūpa* stage, then the unmanifested forms of the actual symptoms (*rūpa*) described in the text should be treated as the *pūrvarūpa* of a disease and in that case no description of *pūrvarūpa* will be furnished in the text.

Synonyms of symptom :

प्रादुर्भूतलक्षणं पुनर्लिङ्गम् । तत्र लिङ्गमाकृतिर्लक्षणं चिह्नं संस्थानं व्यञ्जनं रूपमित्यनर्थान्तरम् ॥ ९ ॥

Symptoms when fully manifested are called *liṅga* (*rūpa*), *Liṅga*, *ākṛti*, *lakṣaṇa*, *cihna*, *samsthāna*, *vyañjana* and *rūpa*—these words are synonymous in the present context. [9]

Signs and symptoms of the fully manifested disease indicating the specific characteristics of the disease like the dominance of *doṣas*, various stages viz., *āma*, *pakva* etc. are called *liṅga* (*rūpa*). They however, do not include such other factors of the diagnosis of diseases like *nidāna* (etiology), *upaśaya* (exploratory therapy) and *samprāpti* (pathogenesis). *Liṅga* includes the following :—

1. invariable symptoms of diseases like hyperpyrexia of fever and loose and frequent motions of *atisāra* (diarrhoea);
2. symptoms caused by the vitiation of *doṣas* vitiation of which is responsible for the causation of the disease like irregularity in onset and relief of attacks which is characteristic of fever caused by the vitiation of *vāta*;
3. symptoms indicative of specific stages of the disease like those observed during *āma* (primary stage), *pakva* (secondary stage—*pakva* literally means cooked ; during this stage *doṣas* are stated to undergo transformation so as to help their elimination or alleviation), and *jirṇa* (chronic stage);

4. symptoms which arise as complications of diseases, indicating thereby their curability; and
5. pre-monitory symptoms of death.

Eventhough *nidāna* (etiological factors) etc., help the diagnosis of even the manifested diseases, still they are not included here (under *linga*) as they are separately defined.

Synonyms furnished here are meant to throw light on various uses and also to help proper comprehension of the definition of this term (*linga*). Other meanings of words described here as synonymous with *linga* may be seen in *Cikitsā* 2 : 1 : 33, *Indriya* 7 : 8, *Vimāna* 8 : 3 and *Sārira* 2 : 42.

The term अस्मिन्दर्थे is used here to mean that these words are synonymous with *linga* in the present context only. Similarly, the term इह लक्ष्य is used while describing the synonyms of *nidāna* (etiology)—cf. paragraph 3 of this chapter. While describing the synonyms of *sam-prāpti*, the term 'vyādheḥ' is used for the same purpose. No such term has, however, been used while describing the synonyms of *gada* (disease) because these synonyms mostly carry this meaning. It is the characteristic feature of the writing of the author that he uses the term अस्मिन्दर्थे only when the words used in one context are used in other contexts as well to have but slightly variations in their meanings. For example, in paragraph 12 of this chapter अस्मिन्दर्थे is used to specify the contextual meaning of the term 'vikalpa' which carries different meanings when used in *Sutra* 10 : 10 and *Vimāna* 1 : 10.

Synonyms of *pūrvarūpa* and *upāsaya* are not given in this text because *pūrvarūpa* is a compound word where the prefix *pūrya* is added to *rūpa*. Synonyms of *rūpa* meaning symptoms are already given. The simple addition of the prefix *pūrya* to these synonymous words of *rūpa* will make the synonyms of *pūrvarūpa*. *Upāsaya* (exploratory therapy) is a form of *Cikitsā* (treatment) and the synonyms of the latter will be given in *Cikitsā* 1 : 1 : 3.

Definition of exploratory therapy :

उपशयः पुनर्हेतुव्याधिविपरीतानां विपरीतार्थकारिणां चौषधादारविहाराणा-
मुपयोगः सुखानुबन्धः ॥ १० ॥

Such of the medicines, diets and regimens as bring about happiness either by acting directly against the cause of the disease, and or the disease itself or by producing such effects indirectly are called *upāsaya* (exploratory therapy). [10]

Upāsaya implies such factors as bring about happiness. It provides diagnostic aid for diseases which are otherwise difficult for diagnosis—cf. *Vimāna* 4 : 8. As for example, in *Sutra* 18 : 10 it is stated that the

swelling which gets alleviated by the massage of unctuous and hot things is caused due to the vitiation of *vāta*.

Upaśaya is divided into the following two broad groups :

1. drugs etc., which are actually antagonistic to the cause of the disease and / or disease itself ; and

2. drugs etc., which are actually not antagonistic either to the cause of the disease or to the disease itself but when employed, they actually alleviate the condition by counteracting either the disease and / or the cause of it.

Following are the examples of various types of *upaśaya* (exploratory therapy).

1. *Drugs antagonistic to the cause of the disease* :—Administration of medicines having heating effect like *śunṭhi* (*Zingiber officinale* Rosc.) in fever caused by cold regimen and also by the vitiation of *kaphadoṣa*.

2. *Diets antagonistic to the cause of the Disease* :—Intake of meat soup in fever caused by fatigue and also by the vitiation of *vāta*.

3. *Regimen antagonistic to the cause of the Disease* :—Remaining awake during night when there is vitiation of *kapha* due to sleep during day time.

4. *Drugs antagonistic to the Disease itself* :—Administration of bowel binding drugs like *pāṭhā* (*Cissampelos pareira* Linn.) in diarrhoea.

5. *Diets antagonistic to the Disease itself* :—Intake of bowel binding diets like *masūra* (*Lens culinaris* Medic.) in diarrhoea.

6. *Regimen antagonistic to the Disease itself* :—*Pravāhaṇa* (causing downward pressure in abdomen) in *udāvarta* (misperistalsis).

7. *Drugs antagonistic to both the Disease and its Causative Factors* :—In oedema caused by the vitiation of *vāta* administration of *daśamūla* (roots of *Aegle marmelos* Corr., *Oroxylum indicum* Vent., *Gmelina arborea* Linn., *Stereospermum suaveolens* DC., *Clerodendrum phlomidis* Linn. f., *Desmodium gangeticum* DC., *Uraria picta* Desv., *Solanum indicum* Linn., *Solanum xanthocarpum* Schrad Wendl, and *Tribulus terrestris* Linn.) which are alleviators of both the *vāta* as well as oedema.

8. *Diets antagonistic to both the Disease and its Causative Factors* :—In the fever caused by cold things intake of hot and antipyretic gruel.

9. *Regimen antagonistic to both the Disease and its Causative Factors* :—Remaining awake during night which causes roughness, for the treatment of drowsiness caused by the sleep during day time which is unctuous.

10. *Drugs which work against the Causative Factors of Disease (even though they are not antagonistic)*—Application of hot ointment which normally aggravates *pitta* for the treatment of oedema dominated by the vitiated *pitta*.

11. *Diets which work against the Causative Factors of Disease (even though they are not actually antagonistic)*—Intake of diets which

cause burning (heating) sensation, by a patient suffering from oedema dominated by vitiated *pitta*.

12. *Regimen which work against the Causative Factors of Disease (even though they are not actually antagonistic)*—Terrorising a patient suffering from insanity caused by the vitiated *vāta*.

13. *Drugs which work against the Disease (even though they are not actually antagonistic)*—Administration of the fruit of *madana* (*Randia dumetorum* Lam.) which itself is an emetic for the treatment of vomiting.

14. *Diets which work against the Disease (even though they are not antagonistic)*—Intake of milk normally causes loose motions for the treatment of diarrhoea—cf. *Cikitsā*, 19 : 58.

15. *Regimen which work against the Disease (even though they are not antagonistic)*—Bringing about upward pressure in abdomen (which normally causes emesis) for the treatment of vomiting.

16. *Drugs which work against the Disease and its Causative Factors (even though they are not antagonistic)*—Application of ointment prepared of *aguru* (*Aquilaria agallocha* Roxb.) etc., for the cure of burns caused by fire both the disease and its causative factors are hot and the medicine applied over it is also hot.

17. *Diets which work against both the Disease and its Causative Factors (even though they are not antagonistic)*—Administration of intoxicating alcohol for the treatment of alcoholism caused by the intake of alcohol.

18. *Regimens which work against both the Disease and its Causative Factors (even though they are not antagonistic)*—Exercise in the form of swimming, for the treatment of *sandhigata vāta* (gout) caused by excessive physical exercise—swimming here appears to be favourable both for the cause that is physical exercise as well as the disease.

In addition to *upaśaya* (exploratory therapy) there is another factor viz., *anupaśaya* which also helps in the diagnosis of diseases—cf. *Vimāna*, 4 : 8 and *Aṣṭāṅgahṛdaya*, *Nidāna*, 1 : 7. But this is included under *nidāna* (etiological factors), hence not separately mentioned here.

Synonyms of pathogenesis :

संप्राप्तिरागतिरित्यनर्थान्तरं व्याख्ये: || ११ ||

Samprapti, *jāti*, *āgati*—these words are synonymous with the pathogenesis of a disease. [11]

Even though it is after the pathogenesis (*samprapti*) that the symptoms (' *linga*) of the disease manifest themselves, still for the purpose of diagnosis, the knowledge of *samprapti* (pathogenesis) is not as important as the knowledge of *linga* (symptoms); hence *samprapti* is described at the end.

Some scholars hold the view that the factor which finally determines the manifestation of a disease is *samprapti*. According to them, like *nidāna* etc., *samprapti* is not indicative of the unmanifested disease

but of the manifested one. Some other scholars do not agree with this view because in that case *samprapti* does not materially help in the diagnosis of the disease. It is also not necessary, according to them, that a disease should be diagnosed only when it is fully manifested because even in unmanifested stage diseases are diagnosed by the help of *nidāna* and *pūrvarūpa*. Therefore, the genesis of the disease by the specific action of vitiated *doṣas* responsible for its causation is called *samprapti*. Thus the synonym *āgati* which means the course of a disease right from the affliction by the causative factors upto its manifestation, is justified. This *samprapti* helps in the comprehension of the specific features of a disease. For example, the *samprapti* of *jvara* as detailed in paragraph 20 of this chapter indicates the (1) affliction of *āmāśaya* (stomach including small intestine) (2) suppression of the power of digestion as well as metabolism and (3) vitiation of *rasa dhātu* (plasma and other fluid constants of the body) etc. No doubt, afflictions of stomach etc. are manifested due to the etiological factors (*doṣas*) and as such should be comprehended by the mention of causative factors. But in view of the specific purpose served by these manifestations of causative factors, they are mentioned separately under *samprapti*. Similarly *pūrvarūpa* (premonitory symptoms) which forms a part of *rūpa* (actual symptoms) has been stated separately because it helps in the diagnosis of a disease before its manifestation. Vāgbhaṭa has defined this as, "The way in which the *doṣa* gets vitiated and the course it follows for the manifestation of the disease is called *samprapti* or *jāti* or *āgati*--cf. *Aṣṭāṅgahṛdaya* : *Nidāna* 1 : 8.

Classification of pathogenesis :

सा संख्याप्राधान्यविधिविकल्पबलकालविशेषैर्भिर्द्यते ॥ (१) ॥

Samprapti is further classified depending upon certain specific characteristics like the number of the types of disease, dominance of the *doṣa*, the varieties of the disease, dominance of one or the other attributes of *doṣas* and the time of manifestation or aggravation of the disease. [(1)]

Samprapti or pathogenesis of a disease varies in each individual case and enumeration of such vitiation is not needed in the case of every disease. Hence, the specific features of *samprapti* will be described only when found appropriate like the one in paragraph-20 of this chapter. In order to allay the apprehension of incomplete description of *samprapti* for each disease, the *samprapti* in general of all diseases is described here.

The *samprapti* varies in each types of the same disease because the process of manifestation obviously varies when there is a variation in the effect. But such variations in *samprapti* are not described in

each and every case unless it is considered necessary. For example, the causative factors, symptoms and treatment of different types of fever (*jvara*) are different, hence there is a need to describe the *samprāpti* along with its variations of each type of *jvara*.

Enumeration of disease :

संख्या तावद्यथा—अष्टौ ज्वराः, पञ्च गुल्माः, सप्त कुष्ठान्येवमादिः ॥ (२) ॥

The number of the (types of the) disease is responsible for the variation of the *samprāpti* for example—eight types of *jvara* (fever), five types of *gulma* (abdominal tumour), seven types of *kusṭha* (obstinate skin diseases including leprosy) etc. [(2)]

Number of a disease is different from its variety. The former is described in the nineteenth chapter of the *Sūtra* section. In the order of description *rakta-pitta* comes next to *jvara*. Types of *jvara* are eight in number whereas *rakta-pitta* is of two varieties. After describing the number of *jvara*, that of *rakta-pitta* has not been described here because the varieties as distinct from the number come under 'vidhi' which will be described later.

Degree of dosic-vitiation :

प्राधान्यं पुनर्दीशाणां तरतमाभ्यासु पलभ्यते । तत्र द्वयोस्तरः, त्रिषु तम
इति ॥ (३) ॥

If two out of the three *dosas* get vitiated, the comparative term, that is 'tara', is used to indicate the predominant one. If, however, all the three *dosas* get vitiated then the superlative term 'tama' is used to indicate the most predominant one. [(3)]

The *samprāpti* or pathogenesis of a disease varies, depending upon the dominance of a *dosa* in a condition where either two or three *dosas* are vitiated.

Variety of diseases :

विधिर्नाम—द्विविधा व्याधयो निजागन्तु भेदेन, त्रिविधालिंगदोषभेदेन, चतुर्विधाः
साध्यासाध्यमृदुवारुणभेदेन ॥ (४) ॥

Vidhi or variety of diseases can be illustrated as below :— Diseases are of two varieties according as they are exogenous or endogenous; on the basis of vitiation of *dosas* (which are three in number) diseases are of three varieties; they are also of four varieties, viz. curable, incurable, mild and acute. [(4)]

Such of the classification of diseases as are not included in the former two categories of *samprāpti* viz., number etc., are included under *vidhi* or variety.

Definition of vikalpa :

समवेतानां पुनर्दोषाणामंशांशबलविकल्पो विकल्पोऽस्मिन्नर्थे ॥ (५) ॥

Predominance of one or the other fraction of the three *dosas* (in the manifestation of a disease) is known as *vikalpa* in the present context. [(5)]

The term *vikalpa* in other contexts has a different meaning--cf. *Sutra* 10 : 10. When a *dosa* gets vitiated as a causative factor of a disease it does not necessarily follow that all its attributes also get vitiated. Vitiation of *vata* for example may aggravate either its coldness, lightness or ununctuousness.

Time of manifestation of disease :

बलकालविशेषः पुनव्याधीनामृत्वहोरात्राहारकालविधिविनियतो भवति ॥१२॥

Specific time for the aggravation manifestation of deases is determined on the basis of the variations in seasons, timings of the day, night and intake of food. [12]

Aggravation/manifestation of *ślaismika* type of fever during season is the example of seasonal variation. Examples of variations due to timings of the day and night are aggravation or manifestation of *ślaismika* type of fever in the forenoon and dusk respectively. Similarly *ślaismika* type of fever gets aggravated or manifested immediately after taking food; which illustrates that the variation is due to the timings of the intake of food.

Some scholars interprete 'vidhi' used in the above text as the result of the action during past life. If that is accepted then the variation in the disease (*samprapti*) will be determined by the stage of manifestation of the result of that action.

Even though the above indicating the time of aggravation manifestation does not help in the determination of the nature of the disease during its unmanifested stage still in the continuous process of manifestation of the disease, the timing in its manifestation shows the variation in the *samprapti* or pathogenesis. Further this aspect of *samprapti* helps determining clearly the specific characteristics of a disease.

What is described here as the classification of *samprapti* by number etc. is common to all diseases. Variations in *nidāna* (etiological factors), *pūrvarūpa* (premonitory symptoms) etc., apply to individual diseases; hence they will be mentioned while describing each disease. In view of this, in paragraph 18 of this chapter specific features of all diagnostic factors, viz., *nidāna*, *pūrvarūpa*, *linga* and *upaśaya* exclusive of *samprapti* of *jvara* (fever) are enumerated.

Properly understanding of disease by the physician :

तस्माद्व्याधीन् भिषग्नुपहतसत्त्ववृद्धिर्हेत्वादिभिर्मावैर्यथावदनुबुद्धयेत् ॥१३॥

On the basis of these factors, the physician with the peace of mind and unimpaired intellect should understand the disease properly. [13]

Diagnostic factors like *nidāna* (etiology) etc., described in paragraphs 6-12 of this chapter should be applied for examining a disease. Even though the disease can be diagnosed even by only one of these factors still there is a need to describe all the five factors which help in the diagnosis of a disease as all of them serve some specific purpose. For example, if the patient has forgotten about the *nidāna* or etiological factors which were responsible for the disease, then the disease can be examined by *pūrvavṛtūpa* etc. If such symptoms as appear in *pūrvavṛtūpa* or *rūpa* stage are either forgotten or are of doubtful nature, then the disease should be examined by *uyaśaya* (by exploratory therapy). In the case of doubt regarding the dominance of *dōṣa* for the causation of fever etc ; the time of manifestation or aggravation of the disease may provide adequate help so much so that if the fever manifests itself either immediately after the intake of food or during the forenoon, then it should be diagnosed as *kaphaja fvara*. Regarding the importance of the role of *pūrvavṛtūpa* it is described, "If a patient voids yellow or red (due to blood) urine without the premonitory symptoms of *prameha*, then he is suffering from *raktapitta* (a disease characterised by bleeding from different parts of the body) and not from *prameha* (obstinate urinary disorder)—cf. Cikitsā, 6 : 54. Even pre-monitory symptoms are indicative of the prognosis of the disease. It is said, "If all the pre-monitory symptoms manifest themselves in the *linga* (actual symptoms of the disease) stage then the fever is bound to cause death—cf. Indriya, 5 : 4. Therefore, it is necessary to describe all the five factors like *nidāna* which help in the diagnosis of a disease.

Is the disease distinct and different from its symptoms or it is nothing but only the conglomeration of symptoms ? It seems, fever is nothing but the combined manifestation of its symptoms like irregularity in onset, relief and hyperpyrexia ; *yakṣmā* (tuberculosis) is the conglomeration of eleven symptoms like cough and coryza. But it is made very clear in the scripture that symptoms owe their existence to diseases which by themselves are separate entities. A disease like *fvara* is the specific produce of the interaction of vitiated *dōṣas* and *dhātus*. Such of the diseases like *fvara* as are produced as a result of the interaction of *dōṣas* and *dhātus* are different from *aruci* (anorexia) etc., which represent only one aspect of this imbalance. As the body is different from (and not only a conglomeration of) its various

organs, similarly a disease as an entity is different from its symptoms and also from the conglomeration thereof. "The argument that disease is nothing but pain and therefore, it should not have parts" does not hold good because the identity of *duhkha* (pain) with disease has already been refuted. By themselves, symptoms (at times) may constitute the disease but as a part of the disease in which they are manifested, they continue as symptoms only—cf. *Nidāna*, 8 : 40. This will be discussed in greater details in its proper context cf. commentary on the *Nidāna*, 8 : 28-29. Thus the validity of the five factors which help diagnosis of diseases is established.

Topics dealt with the section :

इत्यर्थसंग्रहो निदानस्थानस्योद्दिष्टो भवति । तं विस्तरेणोपदिशन्तो भूयस्तर-
मतोऽनुव्याख्यास्यामः ॥ १४ ॥

The above are in brief the topics to be dealt with in this section 'Diagnosis of Diseases' (*Nidānasthāna*). The will again be elaborately discussed hereafter. [14]

Diagnosis and line of treatment of eight diseases :

तत्र प्रथमत एव तावदायाँल्लोभाभिद्रोहकोपप्रभवानष्टौ व्याधीश्चिदानपूर्वेण
क्रमेण व्याख्यास्यामः, तथा सूत्रसंग्रहमात्रं चिकित्सायाः । चिकित्सितेषु चोत्तर-
कालं यथोपचित्विकाराननुव्याख्यास्याम ॥ १५ ॥

In the following paragraphs, we shall describe the diagnosis as well as the line of treatment of eight diseases (of ancient times) which are manifested as a result of greed, enmity and anger in the order of the *nidāna* (causative factors etc.,). Later, in the section on the treatment of Diseases (*Cikitsāsthāna*), other diseases (alongwith those of this section) will be described. [15]

Rājayakṣmā or tuberculosis is mentioned to have been caused differently, that is due to over sexual indulgence which is not enumerated in the above paragraph. Still this disease is included for description in this section because of its importance. This disease *śōsa* or tuberculosis is described before the description of the diagnosis of *unmāda* (insanity) and *apasmāra* (epilepsy) because these latter two, even though caused due to the same reasons as the first five diseases, are exogenous in nature.

Diseases are described in the order of their *nidāna* (etiological factors), *pūrvarūpa* (premonitory symptoms), *rūpa* (actual symptoms), *upaśaya* (exploratory therapy) and *samprāpti* (pathogenesis). However in certain cases this order has been changed because of necessity. In this chapter itself, *rūpa* or actual symptoms are described before the

description of *pūrvartīpa* or premonitory symptoms. There was a necessity for the change of order in this particular case because symptoms (*rūpa*) are described for each type of *jvara* whereas premonitory symptoms (*pūrvartīpa*) are common for all types; hence after the description of events specific to each type (which include *rūpa* or symptoms), the common event that is *pūrvartīpa* is described at the end.

Only the line of treatment is described here in brief and the necessity for such description of treatment in the section on "Diagnosis of Diseases" (*Nidānasthāna*) has already been explained. Details of the line of treatment will not be given in this section.

In the section on Treatment (*Cikitsāsthāna*), after the description of the details of the diseases enumerated in this section, other diseases like *śotha* (oedema) and *arśas* (piles) will be described. In that section the *nidāna* (etiology) etc., will again be described with a view to facilitating proper understanding of the treatment prescribed for these diseases. In this section however the *nidāna* (etiology) etc. of diseases are described in greater details. Giving a separate section for the diagnosis of diseases in this text also indicates that *ayurveda* lays greater emphasis on the diagnosis of diseases as also on its treatment.

Priority of fever :

इह खलु ज्वर एवादौ विकाराणामुपदिश्यते, तत्प्रथमत्वाच्छारीराणाम् ॥१६॥

Among the somatic diseases, *jvara* (fever) appeared in the beginning; hence it is being described first. [16]

Causative factors of fever :

अथ खल्वधाभ्यः कारणेभ्यो ज्वरः संजायते मनुष्याणां; तद्यथा—वातात्, पित्तात्, कफात्, वातपित्ताभ्यां, कफकपाभ्यां, पित्तकपाभ्यां, वातपित्तकफेभ्यः, आगन्तोरष्टमात् कारणात् ॥ १७ ॥

The eight factors responsible for the causation of fever in human beings are 1. *vāta*, 2. *pitta*, 3. *kapha*, 4. *vātapiṭṭha*, 5. *vāta-kapha*, 6. *pittakapha*, 7. *vātapiṭṭakapha* and 8. extrinsic factors. [17]

Only the immediate causes of fever are mentioned here. These causes are concerned with the fever of human beings only; those of other animals like cows, elephants and birds may be different. For example, fevers of elephants etc. like *pākala* are not eight in number. Extrinsic causes are of four types, viz. assault etc. fever caused by all these four categories of causative factors have one thing in common, that is, pain precedes the occurrence of fever in all such cases; hence they are treated as of one type in the eight-fold classification of *jvara* (fever). Of course, different *dosas* dominate the pathogenesis of this fever, depending upon the causative factors involved--cf. *Cikitsā* 3 : 115.

Specific factors of disease :

तस्य निदानपूर्वरूपलिङ्गोपशयविशेषाननुव्याख्यास्यामः ॥ १८ ॥

We shall now explain the *nidāna* (etiology), *pūrvarūpa* (pre-monitory symptoms), *linga* (actual symptoms) and *upaśaya* (exploratory therapy)—all these factors as specific to the various types of this disease (*jvara* or fever). [18]

Pūrvarūpa (pre-monitory symptoms) of all these types of fever is the same; hence it is not mentioned separately for each type of fever. Further, *pūrvarūpa* is nothing but the unmanifested form of symptoms of all these various types of *jvara*. *Upaśaya* (exploratory therapy) as specific to this disease is not directly described here. *Upaśaya* is nothing but the factors having qualities opposite to those of *nidāna*, and *nidāna* (etiological factors) for all types of fever is described here; hence the description of *upaśaya* of all types of fever is implied. Thus, out of all these four factors only *nidāna* (etiology) and *linga* (symptomatology) as specific of each type of fever are described directly.

Even though *samprāpti* as specific to each type of fever is described in this chapter, still it is not enumerated in this paragraph because its classification has already been described in paragraph 12 of this chapter and also because it does not play an important role for the diagnosis of diseases. *Samprāpti* as specific to each type of *jvara*, mentioned here is identical in nature except perhaps the *dosas* taking part in it, and this difference is only of etiological importance in nature. Some scholars are of the view that in paragraph-20 as also in other paragraphs of this chapter, what is mentioned is not *samprāpti* at all but only the specific manifestations of different *dosas* which are nothing but etiological factors.

Causes of aggravation of Vāta :

रक्षलघुशीतवमनविरेचनास्थापनशिरोविरेचनातियोगव्यायामवेगसंधारणान-
शनाभिघातव्यवायोद्वेगशोकशोणितातिषेकजागरणविषमशरीरन्यासेभ्योऽतिसेविते-
भ्यो वायुः प्रकोपमापद्यते ॥ १९ ॥

Vāta gets aggravated by the over indulgence in the intake of ununctuous, light and cold things, over administration of emesis, purgation, *āsthāpana* type of enema, errhines, physical exercise, suppression of the natural urges, fasting, assault, sexual indulgence, anxiety, grief, blood letting in excess, vigil during the night and by maintaining irregular posture. [19]

Ununctuousness is one of the important attributes of *vāta*; therefore it is mentioned in the beginning. *Āsthāpana* type of enema no

doubt alleviates *vāta*-cf. *Sūtra* 20 : 13. But administration of this type of enema in excess aggravates *vāta*-cf. *Siddhi* 4 : 50. In order that the *āsthāpana* types of enema may be useful in the alleviation of *vāta*, it should be accompanied with the *anuvāsana* type of enema as well, and/or should be administered in proper dose.

Pathogenesis of fever :

स यदा प्रकुपितः प्रविश्यामाशयमूर्घणा सह मिश्रीभूयाद्यमाहारपरिणाम-
धातुं रसनामानमन्ववेत्य रसस्वेदवहानि स्नोतांसि पिधायाग्निमुपहत्य पक्षिस्थाना-
दूषणां बहिर्निरस्य केवलं शरीरमनुप्रपद्यते, तदा ज्वरमभिनिर्वर्तयति ॥ २० ॥

This aggravated *vāta* afflicts *āmāśaya* (stomach including small intestine), gets mixed up with *agni* (enzymes responsible for digestion), follows the course of *rasa* which is the first product after the transformation of food, obstructs the channels of *rasa* and sweat, suppresses the activity of *agni* (enzymes responsible for tissue metabolism), extradicts the heat from the site of digestion and spreads it all over the body, thus causing *jvara* (fever). [20]

In the above paragraph, pathogenesis of the disease is described. *Āmāśaya* (stomach including small intestine) is the organ which is primarily affected by *doṣas* in all types of *jvara*. With a view to correcting this, *langhana* (fasting) is prescribed for all types of *jvara*. The site of *agni* forms only a part of *āmāśaya*. It is not necessary that the former should automatically get vitiated by the vitiation of the latter; hence the affliction of the site of (mixing up with) *agni* is specially mentioned here.

The term '*rasa*' by virtue of its root meaning (√*rasa* to go or to circulate) may imply other fluid *dhātus* of the body. With a view to specifying the *rasadhātus*, the suffix '*nāmānam*' to the term '*rasa*' has been used here. In order to clarify the statements so as to make them comprehensible by disciples of different stages of intelligence, the author has used some additional words elsewhere on similar lines.

From the site of *agni*, the heat in its entirety is extradicted by the aggravated *vāta*. Use of the word *ūṣmā* in the present context indicates that *pācakāgni* manifests itself in the form of heat in the body and it does not represent *pitta* which causes burning sensation like the external fire. It is because of this extradition of *pācakāgni* that *agnimāndya* (loss of the power of digestion) will be described as one of the symptoms of *jvara* (fever). No doubt, *agni* or the power of digestion gets stimulated by *vāta* as it happens in the case of fatty persons, but in the present context excessive aggravation of *vāta* leads to the extradition of *agni* from its own site.

Symptoms of Vātic fever :

तस्येमानि लिङ्गानि भवन्ति; तदथा—विषमारम्भविसर्पित्वम्, ऊप्पणो वैषम्यं, तीव्रतनुभावानवस्थानानि उवरस्य, जरणान्ते दिवसान्ते निशान्ते धर्मान्ते वा ज्वरस्याभ्यागमनमिवृद्धिर्वा, विशेषेण परधारणवर्णत्वं नखनयनवदनमूत्रपुरीष-त्वचामत्यर्थं कल्पसीभावश्च; अनेकविधोपमाश्वलाचलाश्व वेदनास्तेषां तेषामङ्गावयवानां; तदथा—पादयोः सुस्तता, पिण्डिकयोरुद्देष्टनं, जानुनोः केवलानां च सन्धीनां विश्लेषणम्, ऊर्वोः सादः कटीपार्वपृष्ठस्कन्धबाह्दंसोरसां च भग्नहणमृदितमथितचटितावपाटितावनुशत्वमिव, हन्त्वोथ्राप्रसिद्धिः, स्वनश्च कर्णयोः, शङ्खयोर्निस्तोदः, कषायास्यता आस्यवैरस्यं वा, मुखतालुकण्ठशोषः, पिपासा, हृदयग्रहः, शुष्कच्छर्दिः, शुष्ककासः, क्षवथूदारविनिग्रहः, अन्धरसखेदः, प्रसेकारोचकाविपाकाः, विषादजूम्भाविनामवेपथुश्चमध्यमप्रलापप्रजागररोमहर्षदन्तहर्षाः, उच्छाभिग्रायता, निदानोक्तानामनुपशयो विपरीतोपशयश्चेति वातज्वरस्य लिङ्गानि भवन्ति ॥ २१ ॥

Following are the symptoms of this type of fever :—

1. irregularity in onset and alleviation;
2. irregularity in temperature;
3. irregularity in the acuteness and mildness of fever;
4. occurrence or aggravation of fever after the digestion of food in the afternoon during dawn or at the end of summer season;
5. excessive roughness and reddishness of nail, eyes, face, urine, stool and skin;
6. excessive retention of urine and stool,
7. occurrence of different types of fixed or shifting pain in various organs of the body, for example, numbness in feet and cramps in calf;
8. feeling of looseness in kneejoints as also in other joints;
9. inactivity of thigh;
10. breaking, bursting, grinding, churning, cracking, bursting and twisting pain in waist, sides, back, shoulders, arms, scapular region and chest;
11. stiffness of jaws;
12. noise in the ears;
13. pain in temples;
14. astringent taste in the mouth or disgesia;
15. dryness of mouth, palate and throat;
16. thirst;
17. impairment of the functions of heart;

18. dry vomiting;
19. dry cough;
20. suppression of sneezing and eructation;
21. aversion to the taste of food;
22. salivation, anorexia and indigestion;
23. depression, yawning, flexion of the body, trembling, exhaustion, giddiness, delirium, sleeplessness, horripilation, setting at edge of teeth;
24. liking for hot things;
25. aggravation of the condition by the administration of such things as are described to be its etiological factors; and
26. alleviation of the condition by the administration of such things as are of opposite qualities to its etiological factors. [21]

Symptoms like irregularity in onset and relief of fever, irregularity in temperature and irregularity in the acuteness and mildness of fever are all due to the *anavasthita* (unstability) property of *vāta*. That is to say, *vāta* does not always get aggravated after the digestion of food or in the afternoon—sometimes it does, sometimes it does not. The types of fever having periodicity like *sataṣa* etc. manifest themselves during the end of the summer season etc., whereas other types of fevers having continuity in their attack get only aggravated during this period.

In *vātika* type of fever skin all over the body becomes rough but the skin over the face of the patient is more affected.

Words like *bhagna* etc; denoting different types of pain convey the meanings as in common usage.

The characteristic features of *vātika jvara* as mentioned in item No. 36 above is already implied in item No. 35. But it has been separately mentioned just for the sake of clarity. The implied meanings can not always hold good. A circumstantial inference (*arthapatti*) is at times fallacious in nature. For example, in the beginning stage of fever, sleep during the day-time is prohibited. If one takes recourse to circumstantial inference, he may be led to believe that sleep during day time is prescribed in the chronic stage of fever. But as a matter of fact sleep during day time is equally harmful in both the stages of fever.

Aggravation of Pitta, pathogenesis and symptoms of Paittika fever :

उषणाम्ललवणक्षारकटुकाजीर्णभोजनेभ्योऽतिसेवितेभ्यस्तथा तीक्ष्णातपाग्नि-
संतापश्चमक्रोधविषमाहारेभ्यश्च पित्तं प्रकोपमापयते ॥ २२ ॥

तद्यथा प्रकुपितभासाशयादूष्माणसुपसृज्याद्यमाहारपरिणामधातुं रसनामान-
मन्ववेत्य रसस्वेदवहानि स्रोतांसि पिधाय द्रवत्वादग्निमुपहत्य पक्षिस्थाना-
दूष्माणं बहिर्निरस्य प्रपीडयत् केवलं शरीरमनुप्रपद्यते, तदा ज्वरमभिनिर्वर्त-
यति ॥ २३ ॥

तस्येमानि लिङ्गानि भवन्ति; तद्यथा—युगपदेव केवले शरीरे ज्वरस्याभ्याग-
मनमभिवृद्धिर्वा भुक्तस्य विदाहकाले मध्यन्दिनैर्धर्षरात्रे शरदि वा विशेषण,
कटुकास्यता, ग्राणमुखकण्ठैष्टतालुपाकः, तुष्णा, मदो, भ्रमो, मूच्छा, पित्तच्छर्द-
नम्, अतीसारः, अन्नद्रेषः, सदनं, खेदः, प्रलापः, रक्तकोटाभिनिर्वृत्तिः शरीरे,
हरितहारिद्रव्यं नखनयनवदनमूत्रपुरीषत्वचाम्, अत्यर्थमूष्मणस्तीवभावः, अति-
मात्रं दाहः, शीताभिप्रायता, निदानोक्तानुपशयो विपरीतोपशयश्चेति पित्तज्वर-
लिङ्गानि भवन्ति ॥ २४ ॥

Pitta gets aggravated by the excessive intake of hot, sour, saline alkaline and pungent food, intake of meals while suffering from indigestion and exposure to scorching sun, heat of fire, exhaustion, anger and irregular dieting.

This aggravated *pitta* approaches the site of *agni* in the *āmā-saya* (stomach including small intestine), follows the path of *rasa* which is the first product of food after transformation, obstructs the channel of circulation of *rasa* and sweat, impairs *agni* due to its liquidity, contradicts *agni* from the site of digestion, inflicts pressure and spreads all over the body, thus causing *jvara* (fever).

Following are the symptoms of this type of fever (*pitta jvara*)

1. Simultaneous manifestation or aggravation of fever in the entire body, all at a time, specially during the process of digestion, during the mid-day, mid-night and in the autumn;
2. pungent taste in the mouth;
3. inflammation of nose, mouth, throat, lips and palate;
4. thirst, intoxication, giddiness and fainting;
5. bilious vomiting, diarrhoea, aversion for food, lassitude, exhaustion and delirium;
6. appearance of reddish urticaria in the body;
7. greenish or yellowish colour of nails, eyes, face, urine, stool and skin;
8. hyper pyrexia;
9. excessive burning sensation;
10. liking for cold things;

11. aggravation of the condition by the administration of such things as are described to be its etiological factors; and
12. alleviation of the condition by the administration of such things as are of opposite qualities to its etiological factors. [22-24]

Hotness is the common attribute of *pitta doṣa* and *agni* (enzymes of digestion) but the former has a special attribute, viz. liquidity by virtue of which it works against the *agni*. As it is said in the chapter on the treatment of *grahārioga* (sprue), " *Pitta* afflicts *agni* as the fire is extinguished by water even though the latter is hot."—vide *Cikitsā* 15 : 65. Extradiction of *agni* in the case of *pattiķajvara* is a slow process and not as sudden as in the case of *vātika jvara*.

Aggravation of Ślesman and pathogenesis of ślaṣmika fever :

स्त्रिग्धगुरुमधुरपिच्छिलशीताम्ललवगदिवास्वप्रहर्षाव्यायामेभ्योऽतिसेविते-
भ्यः श्लेष्मा प्रकोपमापयते ॥ २५ ॥

स यदा प्रकुपितः प्रविश्यामाशयमूष्मणा सह मिश्रीभूयाद्यमाहारपरिणामधातुं
रसनामानमन्वयेत्य रसस्वेदवहानि स्रोतांसि पित्तायाग्निमुपहृत्य पक्तिस्थाना-
दूष्माणं बहिर्निरस्य प्रपीडयन् केवलं शरीरमनुप्रपयते, तदा ज्वरमभिनिर्वर्त-
यति ॥ २६ ॥

Kapha gets aggravated by the excessive intake of unctuous, heavy, sweet, slimy, cold, sour and saline food, sleep during day time, merriment and lack of physical exercise.

This aggravated *kapha* enters the *āmāśaya* (stomach including small intestine), gets mixed up with *agni* (enzymes responsible for digestion), follows the course of *rasa* which is the first product of food after transformation, obstructs the channels of circulation of *rasa* and sweat, suppresses the activity of *agni* (enzymes responsible for tissue metabolism) contradicts heat from the site of digestion, inflicts pressure and spreads it all over the body thus causing *jvara* (fever). [25-26]

In addition to *āmāśaya* (stomach), *uras* (chest) is also the important site of *kapha*. In the present context, the *kapha* from *uras* comes to *āmāśaya* to take part in the pathogenesis of *kaphajvara*. But in the case of *pitta* it is different. The only important site of *pitta* is *āmāśaya* (stomach including the small intestine). Hence, unlike the pathogenesis of *vātika* and *ślaṣmika* types of *jvara* there is no mention of *pitta* entering into *āmāśaya* (आमाशयं प्रविश्य). It is rather mentioned that *pitta* approaches the site of *agni* in *āmāśaya* (आमाशयादूष्माणमुपसज्ज्य).

The site of agni is *grahaṇī* (duodenum and other parts of small intestine) which is only a part of *āmāśaya*. *Pitta* which resides in *āmāśaya*, during the process of pathogenesis only moves to that particular part of the organ in the body which is the abode of *agni*.

Symptoms of ślaiṣmika fever :

तस्येमानि लिङ्गानि भवन्ति; तदथा—युगपदेव केवले शरीरे ज्वरस्याभ्याग-
मनमभिवृद्धिर्वा भुक्तमात्रे पूर्वाहे पूर्वरात्रे वसन्तकाले वा विशेषण, गुरुशाप्रत्वम्,
अनन्नाभिलापः, श्लेष्मप्रसेकः, मुखमाधुर्यं, हृलासः हृदयोपलेपः, स्तिमितत्वं,
छर्दिं, मृदग्निता, निदाधिकर्यं, स्तम्भः, तन्द्रा, कासः, श्वासः, प्रतिश्यायः, शैत्यं,
श्वैत्यं च नखनयनवदनमूत्रपुरीपत्वचाम्, अत्यर्थं च शीतपिडका भृशमङ्गेभ्य
उत्तिष्ठन्ति, उणाभिग्रायता, निदानोक्तानुपशयो विपरीतोपशयश्च; इति (श्लेष्म-
ज्वरलिङ्गानि भवन्ति) ॥ २७ ॥

Following are the symptoms of this type of fever (*kapha jvara*) :

1. simultaneous manifestation or aggravation of fever in the entire body specially immediately after-food, during the fore-noon, in the evening and during the spring season;
2. heaviness of the body, loss of appetite, salivation, sweet taste in the mouth, nausea, bradycardia, timidness and vomiting;
3. reduced power of digestion, excessive sleep, stiffness, drowsiness, cough, dyspnoea and coryza;
4. feeling of cold;
5. white colour of nails, eyes, face, urine, stool and skin;
6. frequent appearance of large number of cold pimples in the body;
7. liking for hot things;
8. aggravation of the condition by the administration of such thing as are described to be its etiological factors; and
9. alleviation of the condition by the administration of such things as having qualities opposite to its etiological factors. [27]

Etiological factors to aggeravat all the dosas :

विषमाशनादनशनादनशपरिवर्तादतुव्यापत्तेरसात्म्यगन्धोपघाणाद्विषोपहृतस्य
चोदकस्योपयोगाद्वरेभ्यो गिरीणां चोपश्लेषात् स्तेहस्वेदवमनविरेचनास्थापनानु-
वासनशिरोविरेचनानामयथावत्प्रयोगात् मिथ्यासंसर्जनाद्वा खीणां च विषम-

प्रजननात् प्रजातानां च मिथ्योपचाराद् यथोक्तानां च हेतूनां मिश्रीभावाद्यथा-
निदानं द्वन्द्वानामन्यतमः सर्वे वा त्रयो दोषा युगवत् प्रकोपमापद्यन्ते, ते प्रकुपिता-
स्तयैवानुपूर्व्या ज्वरमभिनिर्वर्त्यन्ति ॥ २८ ॥

Either two or all three *dosas* in the body get aggravated all at a time—because of the combination of the etiological factors described earlier (paragraph nos. 21, 24, 27) or due to the following : irregular dieting, fasting, sudden change in the food habit without following the proper procedure prescribed for it, seasonal vagaries, inhalation of substances having unwholesome smell, intake of poisonous water, habitation near poisonous (artificial) material or mountain, improper administration of oleation, fomentation, *emesis*, purgation, *āsthāpana* and *anuvāsana* types of enema and errhines, giving improper diet after the administration of *pañcakarma* therapy, improper child delivery and resorting to unwholesome regimen after delivery. Accordingly all the aggravated *dosas* manifest *jvaras* due to the simultaneous vitiation of two *dosas* or all the three *dosas*, [28]

The etiological factors enumerated above may aggravate all the three *dosas*. Fasting does not directly aggravate *pitta* and *kapha*. It suppresses the power of digestion by which all the three *dosas* get vitiated. Some of these etiological factors have, however, the property to vitiate selected *dosas*; e.g. fasting vitiates *vāta* and *pitta*. Fasting is also described as an alleviator of *pitta* but it is only one of the attributes, viz. liquidity (*drvatva*) which gets reduced due to fasting and not the other attributes.

It is only the unwholesome smell which causes fever and not the objects of other sense organs because smell has a material basis and objects of other senses like sight etc. do not have it.

Etiological factors for the causation of *jvara* due to the simultaneous vitiation of two of the *dosas* or of all the three *dosas* are given in the above paragraph. But which of these *dosas* are to be vitiated is dependant upon the causative factors employed.

Simultaneous vitiation of the dosas :

तत्र तथोक्तानां ज्वरलिङ्गानां मिश्रीभावविशेषदर्शनाद्वन्द्विकमन्यतमः ज्वरं
साञ्चिपातिकं वा विद्यात् ॥ २९ ॥

Syptoms of fever due to simultaneous vitiation of the three *dosas* (as described in para 21, 21 & 27) combine in different modes to constitute the symptoms of fever due to the simultane-

ous vitiation of two of the *dosas*, (viz. *vātapitta*, *vātakapha* and *pittakapha*) or of all the three *dosas* (*sāmnipāta*). [29].

Symptoms of four types of fever are indicated here. They are due to *vātapitta*, *pittakapha*, *vātakapha* and *vātapittakapha*. The former three types are *dvandyaja* (produced by the combination of two *dosas*) and the last type is *śāmnipātika* (produced by the combination of all the three *dosas*).

Causes of exogenous fever :

अभिघाताभिषङ्गाभिचाराभिशापेभ्य आगन्तुर्हि व्यथापूर्वोऽष्टमो ज्वरो भवति ।
स किञ्चित्कालमग्न्तुः केवलो भूत्वा पश्चाद्दृष्टैरनुबध्यते । तत्राभिघातो वायुना
दुष्टशोणिताधिष्ठानैन, अभिषङ्गजः पुनर्वीतपित्ताभ्याम्, अभिचाराभिशापज्ञौ तु
सन्निपातेनानुबध्यते ॥ ३० ॥

The exogenous one (*āgantu*) caused due to assault (by staff etc.), emotions (like libido etc.), spell (by the incantations prescribed by the Atharvan etc.) and imprecations (of preceptors and those who have attained spiritual perfection) is the eighth type of fever; this is preceded with pain. For sometime it remains exclusively exogenous and afterwards becomes associated with *dosas*.

The exogenous fever caused by assault is associated with *vāta* having its abode in the vitiated blood and the one caused by emotions is associated with vitiated *vāta* and *pitta*. The exogenous type of fever caused by spell and imprecation is associated with the vitiated *vāta*, *pitta* and *kapha*—all the three *dosas*. [30]

The four important causes of exogenous fever are assault, emotion, spell and imprecation. Other causes of this type of fever which are of lesser importance are the smell of (medicinal) herbs, affliction by evil spirits, vision of evil planets etc. During the primary stage exogenous type of fever is associated with pain only. Subsequently, the symptoms of the particular vitiated *dosa* 'manifest themselves. The duration of the primary stage may vary from a few moments to three days or even a week. It at times takes even more than a week.

But *vāta* and *pitta* get aggravated in exogenous type of fever caused by emotions—at times only *vāta* gets aggravated, at times only *pitta*, and at times, both *vāta* and *pitta*. As it is said, "Vāta gets aggravated due to libidinous urge and grief, pitta due to anger and all the three *dosas* due to affliction by evil spirits-vide Cikitsā, 3 : 115-116. In the exogenous fever caused by the etiological factors of the last category mentioned above, no doubt, all the three *dosas* get aggravated, but

three, *vāta* and *pitta* dominate in the pathogenesis of the fever. With that in view, only these two *dosas* are enumerated here.

Characteristic of exogenous fever and line of treatment :

स सप्तविधाज्ज्वराद्विशिष्टलिङ्गोपकमसमुत्थानत्वाद्विशिष्टे वेदितव्यः, कर्मणा
साधारणेन चोपचर्यते । इत्यष्टविधा ज्वरप्रकृतिरुक्ता ॥ ३१ ॥

The exogenous type of fever is different from the other seven types because of its specific symptoms, line of treatment and etiology. This is treated with spiritual therapy like oblation, auspicious acts and *yajña*, and other forms of rational therapy like fasting, intake of light diet, gruel and decoction. Thus the characteristic features of eight types of fever are described. [31]

Various types of fever :

ज्वरस्त्वेक पव संतापलक्षणः । तमेवाभिग्रायविशेषाद्विविधमाचक्षते, निजा-
गन्तुविशेषाच्च । तत्र निजं द्विविधं त्रिविधं चतुर्विधं सप्तविधं चाहुर्भिषजो वातादि-
विकल्पात् ॥ ३२ ॥

Jvara (fever) is, as a matter of fact, of one type only, characterised by hyperpyrexia. They are of two types depending upon the craving of the patient for hot or cold things. Similarly as exogenous and endogenous it is of two types. In endogenous type of fever only one *dosa* or a combination of *dosas* may take part in the pathogenesis and as such it is of two types. This is also of two types depending upon the craving of the patient for hot or cold things. This is of three types depending upon one or other of the three *dosas* viz., *vāta*, *pitta* *kapha* taking part in the pathogenesis of the disease. This is of four types viz., *vātika*, *paittika*, *ślaiśmika* and *samnipātika* (combination of all three *dosas*). This is also of seven types, viz. *vātika*, *paittika*, *ślaiśmika*, *vātāpaittika*, *pittāślaiśmika*, *vātāślaiśmika* and *samnipātika*. All these classifications are based on the permutation and combination of various *dosas*. [32]

In the four-fold classification, fever caused by the simultaneous vitiation of two *dosas* in the pathogenesis is not taken into account as they are not different from the types caused by single *dosas*. The *jvara* (fever) caused by all the three *dosas* is taken into account here because of its specific characteristics, viz. difficult to cure or incurability.

Premonitory symptoms of fever :

तस्येमानि पूर्वरूपाणि भवन्ति; तदथा—मुखवैरस्यं, गुरुगात्रत्वम्, अनज्ञाभिलाषः, चक्षुषोराकुलत्वम्, अश्वागमनं, निद्राधिक्यम्, अरतिः, जूम्हा, विनामः वेपथुः, श्रमभ्रमप्रलापजागरणरोमहर्षदन्तहर्षाः, शब्दशीतिवातातपसहत्वासहत्वम्, अरोचकाविपाकौ, दौर्बल्यम्, अङ्गमर्दः, सदनम्, अल्पप्राणता, दीर्घसृता, आलस्यम्, उचितस्य कर्मणो हानिः, प्रतीपता स्वकार्येषु, गुरुणां वाक्ये-ज्वरस्यसूया, वालैभ्यः प्रद्रेषः, स्वधर्मेऽवचिन्ता, मात्यानुलैपनभोजनपरिक्लेशनं, मधुरेभ्यश्वभक्षेभ्यः प्रद्रेषः, अग्नललवणकटुकप्रियता च, इति ज्वरस्य पूर्वरूपाणि भवन्ति प्राक्संतापात्; अपि चैनं संतापात्मनुष्ठधन्ति ॥ ३३ ॥

The premonitory symptoms of *jvara* (fever) are dysgeusia, heaviness in body, loss of appetite, congestion in the eyes, lacrimation, excessive sleep, disliking for work, yawning, flexion, tremors, exhaustion, giddiness, delirium, sleeplessness, horripilation, setting on edge of teeth, wavering liking and disliking of sound, cold, wind and sun; anorexia, indigestion, weakness, malaise, lassitude, low-vitality, dilatory tendency, laziness, loss of regular functions, aversion to work, disregard for the instructions of preceptors (superiors), disliking for children, indifference towards own duties, disliking for the use of garland, ointment and food; aversion to sweet food, liking for sour, saline and pungent food.

All these premonitory symptoms appear before the onset of hyperpyrexia. Some of these symptoms also continue to exist during the period of hyperpyrexia. [33]

Premonitory symptoms of endogenous type of fever are described in the above paragraph. Premonitory symptoms of exogenous fever are various types of pain. Some scholars however, hold the view that the above mentioned premonitory symptoms are of exogenous fever also.

If these premonitory symptoms continue to exist even during the *līṅga* (actual symptom) stage in excess then this indicative of bad prognosis—vide *Indriya* 5 : 4.

Some of these premonitory symptoms are also enumerated as actual symptoms. For example, anorexia is both a premonitory symptom and also the actual symptom of the *vātika* type of *jvara*. But this should not create any doubt as to whether this particular symptom when manifested is *pūrvarūpa* (pre-monitory symptom) or *rūpa* (actual symptom) sages. When this is associated with other symptoms of *rūpa* stage then it should be treated as *rūpa* (actual symptom) and otherwise *pūrvarūpa* (pre-monitory symptom).

Brief description of fever :

इत्येतान्यैकैकशो ज्वरलिङ्गानि व्याख्यातानि भवन्ति विस्तरसमाप्त्याम् ॥३४॥

Thus the etiology, premonitory symptoms, symptoms, pathogenesis etc. of *vātika*, *paitika* and *ślaiśmika* type of *jvara* have been described in detail; those of *dvandvaja* (due to the simultaneous vitiation of two *daśas*) and *samnipātika* (due to the simultaneous vitiation of three *dosas*) are also described in brief. [34]

Etiology etc. of certain types of *jvara* are mentioned in this chapter in brief. Their details will be furnished in chapter 3 of the Section on Treatment (*Cikitsāsthāna*).

Mythological origin of fever and its effect :

ज्वरस्तु खलु महेश्वरकोपप्रभवः, सर्वप्राणभूतां प्राणद्वरो, देहेन्द्रियमनस्ताप-
करः, प्रश्नाबलवणोद्धर्षोत्साहासकरः, श्रमकूममोदादारोपरोधसंजननः; ज्वरयति-
शरीणाणीति ज्वरः, नान्ये व्याधयस्तथा दारुणा बहूपद्रवा दुश्चिकित्स्याथ्य
यथाऽयम् । स सर्वरोगाधिपतिः, नानातिर्यग्योनिषु च बहुविधैः शब्दैरभिधीयते ।
सर्वे प्राणभूतः सज्वरा एव जायन्ते सज्वरा एव स्त्रियन्ते च; स मद्वामोदः, तेनाभि-
भूताः प्राप्तदेहिकं देहिनः कर्म किञ्चिदपि न स्मरन्ति, सर्वप्राणभूतां च ज्वर एवान्ते
प्राणानादत्ते ॥ ३५ ॥

Jvara (fever) is an outcome of the wrath of Maheśvara. It leads to the death of all living beings. It afflicts with misery the body (by producing heat), senses and mind. It diminishes the intelligence, strength, complexion, joyfulness and enthusiasm. It produces exhaustion, exertion, unconsciousness and obstruction to food. It is known as *jvara* because it brings miseries to the body (*jvarayati* = to bring misery). No other disease is so serious, so complicated and so difficult of cure as *jvara* (fever) is. This is the king of all diseases. In different animals it is known differently. All living beings are born with *jvara* (fever) and they die also with *jvara*. This is a great delusive factor. Being afflicted with this, living beings are unable to remember anything of their past life. At the end, it is *jvara* which takes away the life. [35]

Line of treatment :

The origin of *jvara* will be described in greater detail in *Cikitsā* 3 : 15-25. All types of *jvara*, even the one caused by *kapha* is essentially the manifestation of *agni*—cf. *Aṣṭāṅgahṛdaya* : *Cikitsā* 1 : 16-17,

This is implied in the allegorical meaning of the sentence where it is said that fever is an outcome of the wreath of the God Maheśvara. Even though fever is an outcome of wreath, its attack is precipitated by other factors mentioned in para-15 of this chapter, viz. greed, enmity etc; for manifesiation in human beings.

Miseries inflicted by *jvāra* on body, senses and mind are detailed in the Section on the "Treatment of Diseases"—cf. *Cikitsā* 3 : 36-37.

Jvāra in different animals is known differently, for example, the *jvāra* of elephants is known as *pākala*, in cows it is known as *Kheriko* (*Korako*), in fishes it is *Indrajāla* and in birds it is known as *Bhrāmaraka*.

Because of *jvāra*, it is stated .that human beings forget the events of their past life. But there are exceptions to this so much so that an individual having pure psychic faculty (*śuddha sattva*) may be able to remember the incidents of his previous life—vide *Sārīra* 3 : 13.

Line of treatment :

तत्र पूर्वरूपदर्शने ज्वरादौ वा हितं लघ्वशनमपतर्पणं वा, ज्वरस्यामाशय-
समुत्थत्वात्; ततः कषायपानाभ्यङ्गस्तेहस्वेदप्रदेहपरिषेकानुलेपनवमनविरेचना-
स्थापनानुवासनोपशमननस्तःकर्मधूपधूमपानाज्ञनक्षीरमोजनविधानं च यथास्वं
युक्त्या प्रयोज्यम् ॥ ३६ ॥

During the stage of *pūrvarūpa* (premonitory symptoms) or in the primary stage of *jvāra* (fever), intake of light food or fasting is useful because *āmāśaya* (stomach including small intestine) is the site of the origin of this disease. Thereafter, depending upon the *doṣa* involved and the therapeutic propriety, the patient should be administered decoction, drink, unction, oleation (therapy), fomentation, ointment, bath (application of) pasted medicine, emesis, purgation, *āsthāpana* type of enema, alleviation therapy, inhalation, fumigation, smoking, collyrium and milk preparations. [36]

In the section on "Treatment of Diseases" (*Cikitsāsthāna*) fasting is prescribed in the primary stage of fever. Here, intake of light diet in addition to fasting is prescribed. There is no contradiction in these statements because the intake of light diet is only a form of *lainghana* (lit. meaning fasting) and produces lightness in the body. Further, in *vātika* type of *jvāra* complete fasting is prohibited as it aggravates *vāta* taking part in the pathogenesis of the disease. In such a condition, intake of light diet is prescribed. Normally, even light diet should aggravate *vāta* but it does not do so in a patient suffering from *jvāra* because the site of origin of disease is *āmāśaya* and all aggravated *doṣas* residing here including *vāta* are corrected by fasting or by the intake

of light diet. As it is said, "The site of manifestation of a disease should be corrected by such a therapy as would not go against the *dosas* residing there.

Use of Ghee in fever :

जीर्णज्वरेषु तु सर्वेष्वेव सर्पिषः पानं प्रशस्यते यथास्वैषधयसिद्धस्य; सर्पिहिं
स्नेहाद्वातं शमयति, संस्कारात् कफं, शैत्यात् पित्तमूष्माणं च; तस्माज्जीर्णज्वरेषु
सर्वेष्वेव सर्पिहिंतमुदकमिवाग्निप्लुषेषु द्रव्येष्विति ॥ ३७ ॥

भवन्ति चात्र—

यथा प्रज्वलितं वेस्म परिषिञ्चन्ति वारिणा ।
नराः शान्तिमभिप्रेत्य तथा जीर्णज्वरे घृतम् ॥ ३८ ॥
स्नेहाद्वातं शमयति, शैत्यात् पित्तं नियच्छति ।
घृतं तुल्यगुणं दोषं संस्कारात् जयेत् कफम् ॥ ३९ ॥
नान्यः स्नेहस्तथा कथित् संस्कारमनुवर्तते ।
यथा सर्पिरतः सर्पिः सर्वस्नेहोत्तमं मतम् ॥ ४० ॥

In all the types of chronic fever, intake of ghee is beneficial. This ghee may however, be prepared by boiling with such drugs as would help alleviating the particular *dosha* (s) involved. *Vāta* is alleviated by ghee due to the latter's unctuousness, *kapha* due to the method of preparation (with drugs like those having pungent and bitter tastes, which alleviate *kapha*) and *pitta* and hyperpyrexia due to coldness. Thus, as water is useful for things burnt with fire, so also ghee is beneficial in all types of chronic fever (because it acts both against the disease as well as the *dosas* involved).

Thus it is said :—

As people spray water over a house set on fire, so also ghee should be used with a view to alleviate chronic fever. *Vāta* is alleviated due to latter's unctuousness, *pitta* due to coldness and even *kapha* which has identical properties (with ghee) due to suitable method of preparation. No other fact so carries the properties of drugs with which it is processed as ghee, hence ghee is considered to be the fat par excellence.

Attributes of ghee, viz. unctuousness and coldness are antagonistic to those of *vāta* and *pitta*, viz. roughness and heat respectively. But there is no such antagonistic property between *kapha* and ghee because both of them are unctuous and cold, so it is necessary to prepare the ghee by boiling with drugs as having pungent and bitter tastes for the

cure of chronic *jvara* due to *kapha*. Ghee will also be more useful even for chronic fevers due to *vāta* and *pitta* if prepared by boiling with such drugs as would alleviate these *doṣas*.

Pitta and *uṣman* mentioned in the prose section of the above paragraph are two different entities. The latter is not mentioned here as an attribute of the former. It rather refers to the hyperpyrexia caused by fever. Hence, ghee, not only, works against the three *doṣas*; it is also acts against the disease (*jvara*) caused by them. *Pitta* and the hyperpyrexia of fever both are relieved by the same attribute of ghee, viz. coldness; hence, after the description of the alleviation of *vāta*, that of *kapha* is mentioned together at the end. In the poetry portion of the above paragraph, however, *uṣman* (meaning hyperpyrexia) is not enumerated; hence the alleviation of *pitta* is described immediately after *vāta*.

Even though *uṣman* is an attribute of *pitta*, it is not necessary that *uṣman* should not increase when *pitta* is not aggravated as is happens in the case of *kahpajvara*. At times, *uṣman* also decreases even when *pitta* is aggravated, eg, *pittagnimāndya*. With a view to indicate this contradictory situation in the prose section of the above para, *uṣma* is enumerated alongwith *pitta* where as in the poetry section it is not mentioned. Due to the specificity of the *doṣas* and *dhātus* involved in the pathogenesis, there is hyperpyrexia in *jvara* (fever). Ghee is not useful in the primary stage (*āmāvasthā*) of the fever because attributes of ghee do not work against this condition.

Both *pitta* and ghee are unctuous, but ghee alleviates *pitta* because the unctuousness in the latter is but too insignificant (c. f. *Sūtra* 1 : 60) whereas heat is a dominant factor which is overcome by the coldness of ghee. Alongwith *tejas mahābhūta*, *jalamahābhūta* having cold property also enters into the composition of *pitta*. But the unctuousness and coldness of *jalamahābhūta* are superceded by the ununctuousness and heating property of the *tejasmahābhūta*. However, the liquidity of *pitta* caused by *jalamahābhūta* is not afflicted by *tejas*. Liquidity, reduced unctuousness and heat are also commonly observed in water when exposed to fire. It is very difficult to explain the rationality of different manifested attributes produced by the combination of various *mahābhūtas*. For example, *jalamahābhūta* which composes the *śāli* rice produces coldness and not heaviness in the latter. Thus, the various properties where it is difficult to give a rational explanation may be attributed to some unforeseen factors. Generally, during the chronic stage of the fever, roughness appears in the body due to the suppression of the unctuousness of *pitta* by the dominance of *uṣman*. Thus, ghee which is unctuous and cold is useful in this condition—cf. *Cikitsā* 3 : 217,

Like the unctuousness of *pitta*, roughness is also an invariable (*sāṁsiddhika*) attribute of *vāta*. Even though unctuousness of *pitta* undergoes a change still the roughness of *vāta* does not do so. On the other-hand, another attribute, viz. coldness of *vāta* at times undergoes a change,

No rational explanation can be given for these specific manifestations. Ghee carries the attributes of drugs with which it is processed. Such properties are absent or present in lesser extent in other types of fat, viz. oil etc. This has been explained in detail in the chapter on Oleation—cf. *Sūtra* 13 : 3.

Clarification regarding repetition :

गद्योक्तो यः पुनः श्लोकैरर्थः समनुगीयते ।
तद्व्यक्तिव्यवसायार्थं द्विरूपं तत्र गर्हते ॥ ४१ ॥

It is only for the sake of clarity that something already stated in prose is again repeated in verse. This kind of repetition does not constitute any defect.

What is described in para-37 in prose form is repeated in verses 38-40 of this Chapter. The prose passages in *Sūtra* 11 : 37-42 have been repeated in another prose passage in *Sūtra* 11 : 43. Similarly what is described in verse form in *Sūtra* 1 : 4-5 is repeated in the prose passage of *Cikitsā* 1 : 4 : 4.

Brief description :

तत्र श्लोकाः—

श्रिविधं नामपर्यायैहेतुं पञ्चविधं गदम् ।
गदलक्षणपर्यायान् व्याधेः पञ्चविधं ग्रहम् ॥ ४२ ॥
ज्वरमष्टविधं तस्य प्रकृष्टासन्नकारणम् ।
पूर्वरूपं च रूपं च भेषजं संग्रहेण च ॥ ४३ ॥
व्याजहार ज्वरस्याग्रे निदाने विगतज्वरः ।
भगवानश्चिवेशाय प्रणताय पुनर्बसुः ॥ ४४ ॥

Three varieties of etiological factors and their synonyms, the five fold classification of disease and its synonyms, five factors for the diagnosis of diseases, eight types of fever, its distant and immediate causes, its premonitory symptoms, actual symptoms, and treatment in brief—all these were explained to Lord Agniveśa by the enlightened One-Lord Punarvasu.

There is another reading of गदपर्यायमामानि occurring in verse-42, which is गदलक्षणपर्यायान्. This latter reading perhaps does not find favour with Cakrapāṇi.

इत्यश्चिवेशकृते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने
ज्वरनिदानं नाम प्रथमोऽध्यायः ॥ १ ॥

Thus ends the first Chapter on the “Diagnosis of Fever” of the *Nidāna* Section of Agniveśa’s work as redacted by Caraka.



द्वितीयोऽध्यायः CHAPTER II

अथातो रक्तपित्तनिदानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानश्रेयः ॥ २ ॥

We shall now expound the chapter on the “Diagnosis of *Raktapitta*” (a disease characterised by bleeding from various parts of the body).

Thus said Lord Ātreya. [1-2]

In the times of yore, *rakta* was caused by the heat of *jvara*; hence the description of *raktapitta* follows that of *jvara*.

Pathology responsible for Raktapitta :

पित्तं यथाभूतं लोहितपित्तमिति संज्ञा लभते, तद् व्याख्यास्यामः ॥ ३ ॥

We shall now explain the pathological changes which *pitta* undergoes for the manifestation of *raktapitta*. [3]

Raktapitta is not the combination of *rakta* (blood) and *pitta*. It is only a pathological state of *pitta*.

Causes and pathogenesis of Raktapitta :

यदा जन्तुर्यवकोहालकोरदूषप्रायाण्यज्ञानि भुञ्जे, भृशोष्णतीक्ष्णमपि चान्यदक्षजातं निष्पावमाशकुलत्थसूपक्षारोपसंहितं, दधिदधिमण्डोदश्वित्कद्वारा-
ङ्गलकाञ्जिकोपसेकं वा, वाराहमाहिषाविकमात्स्यगव्यपिशितं, पिण्याकपिण्डालु-
शुरुक्षाकोपहितं, मूलकसर्वपलशुनकरञ्जित्र्यमधुशित्र्य (खडयूष) भूस्तृणसुमुख-
सुरसकुठेरकगण्डीरकालमालकपर्णीसक्षवकफणिज्ञकोपदंशं, सुरासौवीरतुषोदक-
मैरेयमेदकमधुलकशुक्कुचलबदराम्लप्रायानुपानं वा, पिण्याज्ञोत्तरभूयिष्टम्; उष्णा-
भितसो वाऽतिमात्रमतिवेलं वाऽत्मं पयः पिबति; पयसा समश्वाति रौहिणीकं,
काणकूपोतं वा सर्वपतैलक्षारसिद्धं, कुलत्थपिण्याकजाम्बवलकुचपकैः शौकिकैर्वा
सह क्षीरं पिबत्युष्णाभितसः; तस्यैवमाचरतः पित्तं प्रकोपमापद्यते, लोहितं च
स्वप्रमाणमतिवर्तते। तस्मिन् प्रमाणातिवृत्ते पित्तं प्रकुपितं शरीरमनुसर्पदेव
यकृत्पीहप्रभवाणं लोहितवहानं च स्रोतसां लोहिताभिष्यन्दगुरुणि मुखान्यासाद्य
प्रतिरूपं यात् तदेव लोहितं दृष्यति ॥ ४ ॥

Pitta gets aggravated and *rakta* (blood) exceeds its normal quantity due to the following :

1. intake of food mostly containing *yavaka* (a type of *Hordeum vulgare* Linn.), *Uddālaka* and *Koradūṣa* (*Paspalum scrobiculatum* Linn.) and such other food products as are excessively hot and

sharp alongwith pulses like *nispāva* (a type of *Dolichos lablab* Linn.), *māṣa* (*Phaseolus radiatus* Linn.), *kulaṭṭha* (*Dolichos biflorus* Linn.), and alkalies or mixed with curd, whey, *udaśvit* (a mixture of water and butter milk in equal quantity MW.), *kaṭvara* (sour butter milk) and sour congee ;

2. intake of the meat of pig, buffalo, sheep, fish and cow, mixed with oil cake, *pīḍālu* (a tuber), dry vegetable or after taking radish, mustard, garlic, *karañja* (*Pongamia pinnata* Merr.) *śigru* (*Moringa oleifera* Lam.), *madhuśigru* (a type of *Moringa oleifera* Lam.), *khāḍayūṣa* (vide commentary), *bhūṣṭṛṇa* (*Cymbopogon citratus* Staph.), varieties of basil, viz. *sumukha*, *sarosa*, *kuṭheraka*, *gaṇḍiraka*, *ālamāla*, *parṇasa*, *kṣavaka*, *phaṇijjhaka* or followed by *surā*, *sauvīra*, *tuṣodaka*, *maireya*, *madhūlaka* and *śukta* types of wine, sour preparations of *kuvala* (*Zizyphus sativa* Gaertn) and *badara* (*Zizyphus jujuba* Lam.);

3. intake of pastries in excess after food.

4. frequent intake of un-boiled milk in excess while exposed to heat.

5. intake of vegetable of *rohiṇika* (*Picrorhiza kurroa* Royle ex Benth.) with milk;

6. intake of small pigeon boiled with mustard oil or alkalies. and

7. intake of milk with *kulaṭṭha* (*Dolichos biflorus* Linn.), oil cake ripe fruit of *jambu* (*Syzygium cumini* Skeels), *lakuca* (*Artocarpus lakoocha* Roxb.) or *badara* (*Zizyphus jujuba* Lam.) while exposed to heat.

When the *rakta* exceeds its normal quantity, it results in the opening of the entrances of channels of circulation which originate from spleen and liver. The aggravated fraction of *pitta* enters into these channels while circulating in the body and obstructs them resulting in the vitiation of blood. [4]

Koraduṣa (*Paspalum scrobiculatum* Linn.) is described in *Sutra 27 : 16* to be an alleviator of *pitta*. But when mixed with *nispāva* (a type of *Dolichos lablab* Linn.) etc., as is mentioned above, it causes *raktapitta*. Similarly can be explained the other causative factors of *raktapitta*, viz. milk etc.

Khāḍayūṣa is of two types viz., (a) prepared with butter milk and pulses in which fats and sour things are added and which is astringent.

(b) prepared with butter milk and vegetables in which *kapittha* (*Eeronia limonia* Swingle), *Cāṅgri* (*Oxalis corniculata* Linn.), *marica*

(*Piper nigrum* Linn.), *ajāji* (*Cuminum cyminum* Linn.) and *citraka* (*Plumbago zeylanica* Linn.) are added and boiled.

During the process of manifestation of *raktapitta*, spleen and liver from where originates the channels of circulation of blood, are also affected—cf. *Cikitsa* 4 : 10.

Definitios of Raktapitta :

संसर्गलोहितप्रदूषणालोहितगन्धवर्णानुविधानाच्च पित्तं लोहितपित्तमित्याचक्षते ॥

Pitta is called *raktapitta* because it come into contact with and vitiates *rakta* and also because it acquires the smell and colour of the latter. [5]

From out of the description furnished above, the term “*raktapitta*” can have the following derivations.

1. “रक्तयुक्तं पित्तम्” meaning *rakta* (blood) added to *pitta*.
2. “रक्ते दृश्ये पित्तम्” meaning *rakta* (blood) vitiated by *pitta*.
3. “रक्तवत् पित्तम्” meaning *rakta* (blood) like *pitta* or *pitta* having the appearance of *rakta* (blood).

The above has been further elucidated in *Cikitsa* 4 : 11-13.

The general symptoms of *raktapitta* as given in the above paragraph are the similarity of the smell and colour of *pitta* with those of *rakta*. Specific symptoms of this disease will be described in paragraph 8 of this chapter and also in *Cikitsa* 4 : 11-13.

⇒*Premonitory symptoms of Raktapitta :*

तस्येमानि पूर्वरूपाणि भवन्ति; तद्यथा—अनश्चाभिलाषः, भुक्तस्य विदाहः, शुक्राम्लगन्धरस उद्वारः, छर्देरभीक्षणमागमनं, छर्दितस्य बीभत्सता, स्वरभेदो, गात्राणां सदनं, परिदाहः, मुखाद्वामागम इव, लोहलोहितमस्यामगन्धित्वमिव चास्यस्य, रक्तहरितहारिद्रत्वमङ्गावयवशकृन्मूषस्वेदलालासिङ्गाणकास्यकर्णमल-पिङ्कोलिकापिङ्डकानाम्, अङ्गवेदना, लोहितनीलपीतश्यावानामर्चिप्मतां च रूपाणां स्वप्ने दर्शनमभीक्षणमिति (लोहितपित्तपूर्वरूपाणि भवन्ति) ॥ ६ ॥

Premonitory symptoms of this disease are loss of appetite, improper digestion of food resulting in the burning sensation in chest, eructation having sour taste and smell like vinegar, frequent urge for vomiting, discolouration and foul smell of vomited material, hoarseness of voice, prostration of the body, burning sensation all over the body, a sensation as if smoke is coming out of the mouth; smell of metal, blood, fish and raw flesh in the mouth; red, green and yellow colouration of different organs of the body, stool, urine, sweat, saliva, excreta from nose, mouth, ear and eyes and appearance of pimples; bodyache.

and frequent dreams of such objects as are red, blue, yellow and brown in colour and dazzling. These are the premonitory symptoms of *rakta-pitta*. [6]

✓ *Complication of Rakta-pitta :*

उपद्रवास्तु खलु दौर्बल्यारोचकाधिपाकश्वासकासज्जरातीसारशोङ्गशोषपाण्ड-
रोगाः स्वरभेदश्च ॥ ७ ॥

Complications of *rakta-pitta* are weakness, anorexia, indigestion, dyspnoea, coughing, fever, diarrhoea, oedema, consumption, anemia and hoarseness of voice. [7]

Occurrence of these complications is indicative of bad prognosis. They mostly appear in a patient suffering from *rakta-pitta* as also in *gulma*; hence they are enumerated here even though their enumeration is not included under the five diagnostic factors. In fever, however, there is no such invariable complication; hence there is no mention of such complications in the first chapter of this section. Of all the above mentioned complications, hoarseness of voice (*svarabhedā*) occurs most frequently.

Pathways of disease and its prognosis :

मार्गै पुनरस्य द्वौ ऊर्ध्वं, चाधश्च । तद्वृश्लेष्मणि शरीरे इलेष्मसंसर्गादूर्ध्वं
प्रतिपद्यमानं कर्णनासिकानेश्वर्येभ्यः प्रच्यवते, बहुवाते तु शरीरे वातसंसर्गादधः
प्रतिपद्यमानं मूत्रपुरीषमार्गाभ्यां प्रच्यवते, बहुश्लेष्मवाते तु शरीरे इलेष्मवात-
संसर्गद्वावपि मार्गै प्रतिपद्यते, तौ मार्गै प्रतिपद्यमानं सर्वेभ्य एव यथोक्तेभ्यः
खेभ्यः प्रच्यवते शरीरस्य ॥ ८ ॥

तत्र यद्दूर्ध्वभागं तत् साध्यं, विरेचनोपक्रमणीयत्वाद्वृष्टिपूष्टत्वात्; यद्धोभागं
तद्याप्यं, वमनोपक्रमणीयत्वादल्पौष्टधत्वात्; यदुभयभागं तदसाध्यं, वमनविरेचना-
योगित्वादनौषधत्वाच्चेति ॥ ९ ॥

This disease manifests itself in two ways-either through upper tracks or through the lower tracks. In a patient having the dominance of *kapha* in his body, the disease manifests itself in (blood come out through) the upper tracks, viz. ear, nose, eyes and mouth due to the contact with *kapha*. In a patient whose body is dominated by *vata*, the disease mansfests itself in (blood comes out through) the lower tracks, viz. the urethra and anus due to the contact with *vata*. In a patient whose body is dominated with both by *kapha* and *vata*, the disease manifests itself through both the tracks enumerated above due to the contact with both *kapha* and *vata*.

The first type of *rakta-pitta* where the upper tracks are afflict-ed is curable because of its amenability to purgation therapy

and also because varieties of drugs are available for the treatment of this condition. The second type of *rakta-pitta*, where the lower tracks are afflicted is palliable because of its amenability to emetic therapy and also because of the limited varieties of drugs available for its treatment. The third type where both the upper and lower tracks are afflicted is incurable because it is neither amenable to purgation nor to emetic therapy and no medicine is suitable for the treatment of this condition. [8-9]

Kapha is not necessarily vitiated by the etiological factors of *rakta-pitta*. That is why in *Cikitsā* 4 : 23, the term "prāyaśah" meaning 'mostly' has been used while describing unctuous and hot substances as the etiological factors of the type of *rakta-pitta* afflicting upper tracks. In this type of *rakta-pitta*, *kapha* gets vitiated even by factors other than those mentioned above. The statement made in the above paragraph will be further explained in verses 12-20 of this chapter.

Episode regarding the manifestation of disease :

रक्तपित्तप्रकोपस्तु खलु पुरा दक्षयज्ञोदृध्वंसे रुद्रकोपामर्षाग्निना प्राणिनां परिगतशरीरप्राणानामभवज्ज्वरमनु ॥ १० ॥

In times of yore, there arose the fire of wrath of Lord Rudra during the destruction of Dakṣas' sacrifice. The body and *elan vital* of living beings got heated by this fire. This resulted in the manifestation of *jvara* followed by *rakta-pitta*. [10]

There is a difference between *amarṣa* (intolerance) and *kopa* (wrath). It is not only the intolerance but the wrathful disposition of Lord Rudra which caused fever followed by *rakta-pitta*. So *kopa* (wrath) and *amarṣa* (intolerance)—both these terms are used here in relation to Lord Rudra's anger. Even otherwise, these two terms have two different connotations—cf. *Cikitsā* 9 : 12.

Line of treatment as per chronicity :

तस्याग्नुकारिणो दावाग्नेरिवापतितस्यात्ययिकस्याग्नु प्रशान्त्यै प्रयतितव्यं मात्रां देशं कालं चाभिसमीक्ष्य संतर्पणेनापतर्पणेन वा मृदुमधुरशिरतिक्कषण-यैरभ्यवहार्यैः प्रदेहपरिषेकावगाहसंस्पर्शनैर्बमनादैर्वा तत्रावहितेनेति ॥ ११ ॥

This acute disease which spreads like forest fire should be treated immediately and carefully, keeping in view the locality and time, with such diets as are nourishing or depleting; soft, sweet, cold, bitter and astringent and also with such therapies like anointment, affusion, bath, touch (of pearls etc.) or emesis etc- [11]

Nourishing diets are indicated for the type of *rakta-pitta* afflicting the downward tracks of the body whereas the one afflicting the upward tracks is alleviated by depleting diet.

Therapywise prognosis :

भवन्ति चात्र—

साध्यं लोहितपित्तं तद्यदूर्ध्वं प्रतिपद्यते ।
विरेचनस्य योगित्वाद्वहुत्वाद्वेषजस्य च ॥ १२ ॥
विरेचनं तु पित्तस्य जयार्थं परमौषधम् ।
यश्च तत्रान्वयः श्लेष्मा तस्य चानधमं स्मृतम् ॥ १३ ॥
भवेद्योगावहं तत्र मधुरं चैव भेषजम् ।
तस्मात् साध्यं मतं रक्तं यदूर्ध्वं प्रतिपद्यते ॥ १४ ॥

Thus it is said :—

Rakta-pitta afflicting the upper tracks is curable because it is amenable to purgation therapy and also because there are varieties of drugs available for its treatment. Purgation is the best therapy for alleviating *pitta* and it also alleviates *kapha*. Purgation further is an appropriate therapy for the cure of this disease. Drugs having sweet taste are also useful for this condition; hence this type of *rakta-pitta* is curable. [12-14]

In the pathogenesis of *rakta-pitta*; *pitta* is the dominant *dosa* involved and *kapha* is the subsidiary one. Along with these two *dosas* the specific manifestations of the disease has also to be corrected. Purgation is the best therapy for *pitta*-cf. *Sutra* 25 : 40, *kapha* is also alleviated by this therapy—vide *Cikitsā* 3 : 171-172. In *rakta-pitta* affecting the upward tracks there is upward flow of vitiated blood. Purgation counteracts this and creates a downward trend in this flow resulting in the stoppage of bleeding. Thus apart from alleviating the vitiated *pitta* and *kapha*, purgation therapy also counteracts the disease itself. For the preparation of purgation therapy varieties of medicines are also available. Because of these three factors, purgation is the best therapy for *rakta-pitta* affecting upward tracks.

Alongwith drugs of sweet taste, those having bitter and astringent tastes are also useful in this condition inasmuch as they alleviate *kapha* as well as *pitta*. Sweet taste alleviates only *pitta* and not *kapha* but it is specifically mentioned here because of its utility in certain stage of this disease when the *kapha dosa* is already alleviated by fasting etc.

Nature of prognosis :

रक्तं तु यदधोभागं तद्याप्यमिति निभितम् ।
वमनस्याद्वयोगित्वादल्पत्वाद्वेषजस्य च ॥ १५ ॥
वमनं हि न पित्तस्य हरणे श्रेष्ठमुच्यते ।
यश्च तत्रान्वयो वायुस्तच्छान्तौ चावरं स्मृतम् ॥ १६ ॥

तस्यायोगावहं तत्र कषायं तिक्तकानि च ।
तस्माद्यप्यं समाख्यातं यदुक्तमनुलोमगम् ॥ १७ ॥

Raktapitta affecting the lower tracks is certainly palliable because emetic therapy (which is otherwise useful for alleviating this type of disease) is not very useful (because of certain reasons) and there are only limited types of drugs which are useful for the treatment of this condition. Emesis is not a very effective therapy for a alleviation of the vitiated *pitta*. For the vitiated *vāta* which is also associated with *pitta* in the pathogenesis of this disease, emetic therapy is least useful. Alongwith emesis, drugs having astringent and bitter tastes are also not useful inasmuch as they also vitiate *vāta*. Therefore, *raktapitta* affecting the lower tracks of the body is considered to be palliable. [15-17]

Emesis no doubt alleviates *pitta* but it does so only when the *pitta* is associated with *kapha*. In the present case *pitta* dominates and *kapha* is inactive in the pathogenesis of this disease. Further, emetic therapy is not at all useful in alleviating *vāta*. Thus, even though emesis counteracts the direction of the flow of bleeding still it is not useful in curing this disease because it does not alleviate *pitta* and *vāta* which are vitiated.

Drugs having sour, saline and pungent tastes are not useful inasmuch as they vitiate rather than alleviate *vāta* and *pitta*. Drugs having astringent and bitter tastes no doubt alleviate *pitta* but they aggravate *vāta*. Thus, drugs having only one type of taste, that is sweet, are useful for curing this type of *raktapitta*, limiting thereby the scope of selection.

Prognosis of Raktapitta depending upon affected channels :

रक्तपित्तं तु यन्माग्ने द्वावपि प्रतिपद्यते ।
असाध्यमिति तज्ज्ञेयं पूर्वोक्तादेव कारणात् ॥ १८ ॥
नहि संशोधनं किञ्चिदस्त्यस्य प्रतिमार्गगम् ।
प्रतिमार्गं च हरणं रक्तपित्ते विधीयते ॥ १९ ॥
एवमेवोपशमनं सर्वशो नास्य विद्यते ।
संस्थेषु च दोषेषु सर्वजिच्छमनं मतम् ॥ २० ॥
इत्युक्तं श्रिविधोदर्कं रक्तं मार्गविशेषतः ।

Because of the reasons mentioned before, *raktapitta* affecting both the upward and downward tracks is incurable. The principle of treatment of *raktapitta* is to administer such therapies as would counteract the direction of bleeding. There is no such elimination therapy as would produce such action in this type of *raktapitta*. Further, in this type, all the three *dosas* are vitiated and there are few medicines which will alleviate all the three *dosas*.

Thus the prognosis of *rakta-pitta* depending upon the channels affected is described. [18-20]

Purgation therapy which moves downwards aggravates *rakta-pitta* afflicting downward tracks. Similarly emesis aggravates the type of *rakta-pitta* afflicting the upward tracks. Thus, in the *rakta-pitta* afflicting both the upward and downward tracks, both emesis and purgation are useless-rather harmful. Other elimination therapies like *basti* (enema) and *śirovirecana* (elimination of *dosas* from the head) are also not of much avail in this condition.

In this type of *rakta-pitta* afflicting the upward as well as downward tracks, both *kapha* and *vāta* alongwith *pitta* (which latter is invariably aggravated in this condition) are vitiated. Drugs having sweet taste aggravate *kapha*, those having bitter and astringent tastes aggravate *vāta* and those having sour, saline and pungent tastes aggravate *pitta*. Thus no medicine can alleviate all the three *dosas*.

Causes of incurability of diseases :

प्रभ्यस्तु खलु हेतुभ्यः किंचित्साध्यं न सिध्यति ॥ २१ ॥

प्रेष्योपकरणाभावाहौरात्म्यादैद्यदोषतः ।

अकर्मतश्च साध्यत्वं कथिद्गोडितिवर्तते ॥ २२ ॥

तत्रासाध्यत्वमेकं स्यात् साध्ययाप्यपरिकमात् ।

Even some of the curable diseases become incurable due to the following :—

1. lack of proper attendance and equipment;
2. lack of self-control in the patient;
3. incompetence of the physician; and
4. lack of proper treatment or existence of past sinful acts of the patient which lead to the incurability of diseases.

Besides, change in the course of the disease is the symptom *par excellence* indicative of the incurability of *rakta-pitta*, [21-22]

There are diseases like *tilakālaka* (black mole) and *maśaka* (another type of mole) which are not rendered incurable inspite of the lack of proper treatment etc. Thus the above statement refers to such diseases as would require constant attention and proper treatment.

Incurable Rakta-pitta :

रक्तपित्तस्य विज्ञानमिदं तस्योपदिश्यते ॥ २३ ॥

यत् कृष्णमथवा नीलं यद्वा शक्तिनुष्ट्रभम् ।

रक्तपित्तमसाध्यं तद्वाससो रञ्जनं च यत् ॥ २४ ॥

भृशं पूर्यतिमात्रं च सर्वोपद्रववश्च यत् ।

बलमांसक्षये यज्ञं तज्ज्ञं रक्तमसिद्धिमत् ॥ २५ ॥

येन चोपहृतो रक्तं रक्तपित्तेन मानवः ।
पश्येद् दृश्यं वियथापि तथासाध्यं न संशयः ॥ २६ ॥

The following signs and symptoms indicate the incurability of *rakta-pitta*.

1. discharge of blood having black, blue or rainbow colour whose stain on cloth does not get cleaned even after washing;
2. discharge of purified blood in excess;
3. excessive manifestation of all the complications;
4. diminution of strength and muscle tissue; and
5. red vision in relation to sights in general and sky in particular. [23-26]

Principles of treatment :

तथासाध्यं परित्याज्यं, याप्य यत्केन यापयेत् ।
साध्यं वावहितः सिद्धैर्भेषजैः साधयेद्विषक् ॥ २७ ॥

The enlightened physician should not take the incurable patient in hand. The palliable patient should be maintained with appropriate therapy. The curable one should be treated carefully with proper medicine leading to cure. [27]

Conclusion :

तत्र श्लोकौ—

कारणं नामनिर्वृत्तिं पूर्वरूपाण्युपद्रवान् ।
मार्गौ दोषानुबन्धं च साध्यत्वं न च हेतुमत् ॥ २८ ॥
निदाने रक्तपित्तस्य व्याजहारं पुनर्वसुः ।
वीतमोहरजोदोषलोभमानमदस्पृहः ॥ २९ ॥

To sum up :—

Etiology, derivation of the name of the disease, *pūrvarūpa* (pre-monitory symptoms), complications, course, association of *dosas*, curability and otherwise with reasoning—all these are described in this chapter on the “Diagnosis of *Rakta-pitta*” by Lord Puravarasu who is devoid of passion, *rajoguna*, greed, vanity, pride and attachment. [28-29]

इत्याग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने
रक्तपित्तनिदानं नाम द्वितीयोऽध्यायः ॥ २ ॥

Thus ends the second chapter on the “Diagnosis of *Rakta-pitta*” of the Section on Diagnosis of Diseases of Agnivesa’s work as redacted by Caraka.



तृतीयोऽध्यायः

CHAPTER III

अथातो गुल्मनिदानं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानाश्रेयः ॥ २ ॥

We shall now expound the chapter on the Diagnosis of *Gulma*.

Thus said Lord Ātreya. [1-2]

Types of Gulma :

इह खलु पञ्च गुल्मा भवन्ति; तदथा—वातगुल्मः, पित्तगुल्मः, श्लेष्मगुल्मो,
निचयगुल्मः, शोणितगुल्म इति ॥ ३ ॥

There are five types of *gulma*, viz.,

1. *vātagulma*;
2. *pittagulma*;
3. *ślesmagulma*;
4. *gulma* due to the simultaneous vitiation of all the three *dosas* and;
5. *gulma* due to the affliction of blood. [3]

At the time of the destruction of Daśkas' sacrifice, *gulma* manifested itself after *raktagutta*; hence the description of the diagnosis of *gulma* follows that of *raktagutta* here. Only five types of *gulma* will be described in this chapter. In the section on the "Treatment of Diseases" (*Cikitsāsthāna*) more of its varieties will be described—cf. *Cikitsā* 5 : 16. *Gulmas*, caused by the simultaneous vitiation of two *dosas*, are not enumerated here inasmuch as they do not have any specific manifestation other than those relating to the individual *dosas*. The type of *gulma* caused by the vitiation of all the three *dosas* (*nicayagulma*) is mentioned here separately, because, besides sharing the combined features of all the three *dosas* it is also incurable in nature. That is why, the usual term '*samnipāta*' which is used in connection with *jvara* etc. (the type caused by the simultaneous vitiation of all the three *dosas*) is not considered suitable in the present context. While *samnipāta jvara* might be curable, *nicayagulma* is incurable. So the term '*ntcaya*' is preferred to *samnipāta* in the present context.

Means to understand specific feature of Gulma :

एवंवादिनं भगवन्तमात्रेयमग्निवेश उवाच—कथमिह भगवन् पञ्चानां गुल्मानां
विशेषमभिजानीमहे; नहविशेषविद्रोगाणामौषधविदपि भिषक् प्रशमनसमर्थो
भवतीति ॥ ४ ॥

तमुवाच भगवानात्रेयः—समुत्थानपूर्वरूपलिङ्गवेदनोपशयविशेषेभ्यो विशेष-
विज्ञानं गुल्मानां भवत्यन्येषां च रोगाणामानवेश ! तत्तु सल्लु गुल्मेषुच्यमानं
निषेध ॥ ५ ॥

Agniveśa asked Lord Ātreyā, "How to understand the specific features of these five types of *gulma*? Without this knowledge such patients cannot be successfully treated by a physician even though he is well versed in the selection of drugs."

Lord Atreya replied, "The specific features of *gulma* as of other diseases can be ascertained from *nidāna* (etiology), *pūrvarūpa* (premonitory symptoms), *linga* (symptomatology), *vedanā* (various types of pain) and *upaśaya* (exploratory therapy). The following are the characteristic features of different types of *gulma*. [4-5]

In such of the internal diseases like *gulma* which are characterised by different types of pain, specific nature of the pain serves as the main diagnostic factor. So besides the four diagnostic factors applicable to diseases in general, pain is separately mentioned here as a diagnostic factor even though it is only a form of symptomatology (*linga*) in the strict sense of the term. *Samprāpti* (pathogenesis) is not stated here inasmuch as it does not help in ascertaining the specific features of *gulma*.

Pathogenesis of diseases in general is already described in *Nidāna* 1 : 11. The temporal aspect of the pathogenesis of this disease no doubt help in determining the dominance of one or the other of the *dosas* but then such aspects are already included under *linga* (symptomatology) and they are not very important from the point of view of the diagnosis of this disease.

The *pūrvarūpa* (premonitory symptoms) of each type of *gulma* is not separately mentioned. *Pūrvarūpa* in general is of course given in para 15 of this chapter.

Factors aggravating Vāta in Gulma :

यदा पुरुषो वातलो विशेषेण ज्वरवमनविरेचनातीसाराणामन्यतमेन कर्शनेन
कर्शितो वातलमादारमाहरति, शीतं वा विशेषेणातिमात्रम्, अस्नेहपूर्वे वा वमन-
विरेचने पिबति, अनुदीर्णा वा छर्दिमुदीरयति, उदीर्णान् वातमूत्रपुरीषवेगान्धि-
रुणस्ति, अत्यशितो वा पिबति नवोदकमतिमात्रम्, अतिसंक्षेपिणा वा यानेन याति,
अतिव्यवायव्यायामदशोकरुचिर्वा, अभिघातमृच्छति वा, विषमासनशयनस्था-
नचड्कमणसेवी वा भवति, अन्यद्वा किञ्चिदेवंविधं विषममतिमात्रं व्यायामजात-
मारभते, तस्यापचाराद्वातः प्रकोपमापद्यते ॥ ६ ॥

The following factors aggravate *vāta* in the body of an individual who is of *vātika* type of constitution and who is

exceedingly emaciated due to *jvara* (fever), emesis, purgation or diarrhoea.

1. intake of *vāta* aggravating food;
2. adoption of regimens which are exceedingly cold;
3. administration of emetic or purgation therapy without oleation;
4. vomiting without manifested urge;
5. suppression of the manifested urge for passing flatus, urine and stool;
6. intake of fresh water in excess specially after heavy food;
7. travel in exceedingly jolting vehicles;
8. excessive indulgence in sexual act, physical exercise, drink and anxiety;
9. assault;
10. sitting, sleeping, standing or moving in irregular posture; and
11. indulgence in physical exercises of this sort in irregular posture. [6]

The above mentioned regimens produce *vātika gulma* even in people having non-*vātika* type of physical constitution but those having *vātika* type of constitution are more prone to this disease.

Pathogenesis, symptoms and exploratory theray of vātic gulma :

(स प्रकृपितो वायुर्महास्रोतोऽनुग्रविश्य रौक्ष्यात् कठिनीभूतमाप्लुत्य पिण्ड-
तोऽघस्थानं करोति हृदि बस्तौ पार्श्वयोर्नाभ्यां वा; स शूलमुपजनयति ग्रन्थी-
श्वानेकविधान्, पिण्डतत्वाद् 'गुल्म' इत्यभिधीयते। स
मुहुराधमति, मुहुरल्पत्वमापद्यते; अनियतविपुलाणुवेदनश्च भवति चलत्वाद्वायोः;
मुहुः पिणीलिकासंप्रचार इवाङ्गेषु, तोदभेदस्फुरणायामसङ्कोचसुप्तिहर्षप्रलयोदय-
बहुलः; तदातुरः सूचयेव शङ्खनेव चाभिसंविद्धमात्मानं मन्यते, अपि च दिवसाल्ते
ज्वर्यते, शुष्यति चास्यास्यम्, उच्छ्वासश्चोपराध्यते, हृष्यन्ति चास्य रोमाणि
वेदनायाः प्रादुर्भवेत्; पूँडीटोपान्त्रकूजनाविपाकोदाधर्ताङ्गमर्दमन्याशिरःशङ्खशूल-
ब्रह्नरोगश्चैनमुपद्रवन्ति; कृष्णारुणपरुषत्वं नखनयनवदनमूत्रपुरीपश्च भवति,
निदानोक्तानि चास्य नोपशेरते, विपरीतानि चोपशेरत इति वातगुल्मः ॥ ७ ॥

Vāta, thus aggravated, enters the alimentary tract (*mahā-srotas*) which latter has become hard and round due to ununctuousness, then spreads and gets localised in heart, bladder, sides of the chest or umbilical region. It produces colic pain and various types of nodules and remains in a round form. It is because of this round shape that the disease is known as '*gulma*',

This round mass at times gets inflated and at times gets decreased. Because of the instability (*calatva*) of *vāta* there is irregularly acute and mild pain. Often there is a feeling as if ants are crawling on the limbs. There is frequent disappearance and appearance of piercing, breaking and throbbing types of pain, extension, contraction, numbness and horripilation. The patient feels as if he is pierced with a needle or a nail. There is fever during the afternoon. There is dryness of mouth, obstruction to respiration and horripilation during the onset of pain. Complications of this type of *gulma* are affliction of spleen, meteorism, intestinal gurgling, loss of the power of digestion, misperistalsis, malaise, pain in head, sternomastoids and temporal region, and swelling in the inguinal lymph glands. There is blackness, redishness and roughness in the skin, nails, eyes, faces, urine and stool. Etiological factors enumerated above aggravate the condition where as things having opposite qualities give relief to the patient. This is about the *vātika* type of *gulma*. [7]

The alimentary tract becomes hard due to the unctuousness caused by depletive factors like *jvara* etc. Even the *vāta* (which is formless) when aggravated in excess gets condensed and becomes hard. The aggravated *vāta* takes the shape of a round mass. In addition, the muscle etc., which are afflicted by this *vāta* also take a round form.

The term *gulma* literally means a bush which is round in shape and a compact mass. On the analogy of this, the disease under description is also known as *gulma*.

Horripilation may or may not appear alongwith other types of pain but it is an invariable sign during the onset of the pain.

Factors aggravating Pitta in Gulma-pathogenesis and symptoms :

तैरेव तु कर्शनैः कर्शितस्याम्ललवणकटुकक्षारोषणतीक्ष्णशुक्तव्यापन्नमद्यहरित-
फफलाम्लानां विदाहिनां च शाकधात्यमांसादीनामुपयोगादजीर्णाध्यशनाद्रौक्ष्या-
तुगते चामाशये व्यमनमतिवेलं संभारणं वातातपौ चातिसेवमानस्य पित्तं सह मारु-
तेन प्रकोपमापद्यते ॥ ८ ॥

तत् प्रकुपितं मारुतं आमाशयैकदेशो संवर्त्य तानेष वेदनाप्रकारानुपजनयति,
य उक्ता वातगुरुमे; पित्तं त्वेन विद्युति कुक्षी हृद्युरसि कण्ठे च; स विद्युमानः
सधूममिवोद्भारमुद्ग्रिरत्यम्लान्वितं, गुल्मावकाशाभास्य दृश्यते दूयते धूप्यते ऊर्मा-
यते स्विद्यति छिद्यति शिथिल इव स्पर्शासहोऽव्यपरोमाङ्गश्च भवति; ज्वरभ्रमदव-
युपिपासागलतालुमुखशोषप्रमोहविड्भेदाश्वैनमुपद्रवन्ति; हरितहारिद्रित्वरुलनखन-
यनवदनमूत्रपुरीषश्च भवति; निदानोक्तानि चास्य नोपशेरते, विपरीतान्युपशेरत
इति पित्तगुरुमः ॥ ९ ॥

The following factors aggravate *pitta* alongwith *vāta* in an individual emaciated (due either to fever, emesis, purgation and diarrhoea).

1. intake of food articles which cause burning sensation like sour, saline, pungent, alkaline, hot, sharp and fermented diet, deteriorated wine, salads, sour fruits, vegetables, corns and flesh;
2. frequent meals even before the previous food is digested;
3. administration of emesis therapy when the stomach is dry;
4. suppression of manifested urges for a long time; and
5. excessive exposure to wind and the sun.

This aggravated *vāta* gets localized in a part of *āmāśaya* (stomach including small intestine) and produces such pains as are described to manifest in *vātagulma* (in para 7 above). There is burning sensation in the pelvic region, heart region, chest and throat due to vitiated *pitta*. Due to this burning sensation there is eructations of sour taste and there is a feeling as if smoke is coming out through it. In the region of *gulma* there is burning sensation, pain, feeling of fumigation, heat, sweating, softening, looseness, tenderness and slight horripilation.

Complications of this type of *gulma* are fever, giddiness, throbbing pain, thirst, dryness of throat, palate and mouth, unconsciousness and diarrhoea. There is greenishness and yellowness of the skin, nails, eyes, face, urine and stool. Etiological factors enumerated above aggravate the condition where as things having opposite qualities give relief to the patient. This is about *paittika* type of *gulma*. [8-9]

The site of manifestation of *pittagulma* as also of *kaphagulma* is only *āmāśaya* (stomach including small intestine) and not other organs like bladder in which only *vātagulma* is manifested. Because of this, in the pathogenesis of *vātika* type of *gulma*, the entire alimentary tract is described to be afflicted where as in *paittika gulma* only a small portion of it, that *āmāśaya* (stomach and small intestine) is involved.

Factors aggravating Kapha-pathogenesis and symptoms of Kapha :

तैरेव तु कर्शनैः कर्शितस्यात्यशनादतिस्निग्धगुरुमधुरशीताशनात् पिष्टेभु-
क्षीरतिलमाषगुडविकृतिसेवनान्मन्दकमध्यातिपानाद्विरितकातिप्रणनयादानुरौदक-
प्राम्यमांसातिभक्षणात् संधारणादबुभुक्षस्य चातिप्रगाढमुदपानात् संक्षोभणादा-
शरीरस्य ऋष्मा सह माश्तेन प्रकोपमापद्यते ॥ १० ॥

तं प्रकुपितं मारुत आमाशयैकदेशे संवर्त्य तानेव वेदनाप्रकारानुपजनयति य उक्ता वातगुल्मे; श्लेष्मा त्वस्य शीतज्वरारोचकाविपाकाङ्गमर्दहर्षहृद्रोगच्छिर्दिनि-द्रालस्यस्तैमित्यगौरवशिरोभितापानुपजनयति, अपि च गुल्मस्य स्थैर्यगौरवकाञ्चन्याधगाढसुस्ताः, तथा कासश्वासप्रतिश्यायान् राजयक्षमाणं चातिग्रवृद्धः, श्वैत्यं स्वरूपनयनवदनमूत्रपुरीषेषूपजनयति, निदानोक्तानि चास्य नोपशेरते, विप-रीतानि घोपशेरत इति श्लेष्मगुल्मः ॥ ११ ॥

The following factors aggravate *kapha* alongwith *vata* in an individual emaciated (due to the fever, emesis, purgation and diarrhoea).

1. intake of food in large quantity;
2. intake of excessively unctuous, heavy, sweet and cold food;
3. intake of pastry, preparations of sugar cane juice, milk, tila (*Sesamum indicum* Linn.) *māsa* (*Phaseolus radiatus* Linn.) and sugar candy;
4. intake of immature curd and wine in excess;
5. intake of haritaka (salads), the flesh of marshy, aquatic and domestic animals in excess;
6. suppression of the manifested natural urges;
7. intake of large quantity of water in the absence of appetite; and
8. physical assault.

This aggravated *vata* gets localized in a part of *āmāśaya* (stomach including small intestine) and produces such pains as are described to appear in *vātikagulma* (in para 7 above). The vitiated *kapha* produces fever beginning with cold, anorexia, indigestion, malaise, horripilation, heart disease, emesis, excessive sleep, laziness, timidity, heaviness and pain in the head. The *gulma* remains stable (fixed), heavy, hard, deep seated and there is a feeling of numbness, when aggravated in excess, there is cough dyspnoea, coryza, and even tuberculosis. Skin, nails, eyes, face urine and stool—all become white. Etiological factors enumerated above aggravate the condition where as things having opposite qualities give relief to the patient. This is about the *ślaiṣmika* type of *gulma*. [10-11]

Rājayakṣma or tuberculosis is generally caused by the simultaneous vitiation of all the three *dosas*. In the present context however, tuberculosis occurs as a complication of *kapha gulma* due to the latter's specific nature even though all the three *dosas* are not vitiated.

✓ *Incurable gulma :*

श्रिदोषहेतुलिङ्गसन्धिपाते तु साम्निपातिकं गुलमसुपदिशन्ति कुशलाः । स विप्रतिविद्वोपक्रमत्वादसाध्यो निचयगुलमः ॥ १२ ॥

Sāmnipātika type of *gulma* is caused by the etiological factors responsible for the vitiation of all the three *dosas* and it shares the symptoms of all the three types of *gulma*, viz. *vātika*, *paittika* and *ślaismika*. This type of *gulma* is incurable because of the mutual contradiction involved in its treatment. [12]

The *sāmnipātika* type of *gulma* is incurable inasmuch as there is a sort of mutual contradiction involved in its treatment. The contradiction in treatment is because of the abnormal heterogenous combination of the three *dosas* (*vikṛtivिषामासाम्निपाता*). In cases, where there is no abnormal heterogenous combination of *dosas* as in a type of *sāmnipātikavāra* the disease may not be taken as incurable.

✓ *Raktagulma :*

शोणितगुल्मस्तु खलु लिया एव भवति न पुरुषस्य, गर्भकोषार्तवागमनवैशेष्यात् । पारतन्त्र्यादवैशारद्यात् सततमुपचारानुरोधाद्वा वेगानुदीर्णानुपरब्धत्या आमगर्भं वाऽप्यचिरपतितेऽथवाऽप्यचिरप्रजाताया क्रतौ वा वातप्रकोपणान्यासेवमानायाः क्षिप्रं वातः प्रकोपमापयते ॥ १३ ॥

स प्रकुपितो योनिमुखमनुप्रविश्यार्तवमुपरुणद्धि, मासि मासि तदार्तवमुपरुक्ष्यमानं कुक्षिमभिवर्धयति । तस्याः शूलकासातीसारच्छ्वर्योचकाविपाकाक्षमर्कनिद्रालस्यस्तैमित्यकफप्रसेकाः समुपजायन्ते, स्तनयोश्च स्तन्यम्, ओष्ठयोः स्तनमण्डलयोश्च काण्डर्यम्, अत्यर्थं ग्लानिश्वशुषोः, मूर्छा, हृलासः, दोहदः, श्वयशुश्र पादयोः, ईश्चोद्दमो रोमराज्याः, योन्याश्वाटाल्त्वम्, अपि च योन्या दीर्घन्यमासावश्चोपजामते, केवलश्वास्या गुलमः पिण्डित एव स्पन्दते, तामगर्भं गर्भिणीमित्याहुमूढाः ॥ १४ ॥

The *gulma* due to the vitiation of blood occurs not in males but in females because of their characteristic feature to pass menstrual blood through the uterus. *Vāta* in them gets immediately aggravated because of the following :—

1. suppression of natural urges due to their sub-ordinate position in the family, ignorance and disposition to the service of others;
2. instant abortion; or
3. intake of *vāta* aggravating things immediately after delivery or during menstrual period.

The aggravated *vāta* enters into the cervix of the uterus and obstructs the menstrual blood. Such obstruction of the mens-

trual-blood-flow goes on every month and as a result of this there is distension of the lower abdomen. There is colic pain, cough, diarrhoea, vomiting, anorexia, indigestion, malaise, excessive sleep, laziness, timidity and excessive salivation. There is the appearance of milk in breasts, dark colour of lips and breasts, excessive strain on eyes, fainting, nausea, longings for specific objects, swelling in feet, appearance of small hairs in small quantity, dilatation of the vaginal orifice and foul smelling discharge from the uterus. There is pulsation in the entire mass of *gulma* which is round in shape. The Ignorant considers such a patient as a case of pregnancy even though there is actually no pregnancy. [13-14]

The type of *gulma* described above exclusively occurs in females due to the obstruction to their menstrual flow. In males, where there is no question of menstrual-blood-flow being obstructed, *gulma* of this type also occurs due to the vitiation of blood—cf. *Cikitsā* 5 : 27. It is with this view that *gulma* is included under the diseases due to the vitiation of blood—cf. *Sūtra* 24 : 12.

Milk appears in the breasts of such patients because of the obstruction to the menstrual flow which is a specific characteristic feature of this disease. It should not be construed that the appearance of milk in the breasts is a sign of pregnancy. Similarly, the longings for specific objects of the woman are not in any way connected with such sign appearing during pregnancy. In a pregnant woman the heart of the foetus is linked up with the mother's heart through the channels carrying *rasa* and the longings of the foetus, when it becomes conscious, manifest themselves in the form of the longings of the mother (*dauhṛda*)—Cf. *Śarira* 4 : 15. In *raktagulma* which is a morbid growth in the uterus, there is no consciousness, hence the question of the manifestation of the symptoms of *dauhṛda* does not arise. As some people, even without a bite by snake get the symptoms of poisoning due to snake venom purely because of the apprehension of such a bite (*śaṅkāviṣa*), so also a patient of *raktagulma* develops longings for specific objects like a pregnant woman.

In *raktagulma*, there is pulsation in the entire mass of growth where as in pregnancy only a part of it pulsates. This is the characteristic feature for differential diagnosis between a pregnant woman and a lady suffering from *raktagulma*.

Many signs and symptoms of normal pregnancy are also manifested in a patient suffering from *raktagulma*—cf. *Cikitsā* 5 : 19 but there is no symptom of abnormal pregnancy like those of *nāgodara*, *supta* etc. *Raktagulma* is described to be treated after ten months. This is due to the specific nature of the disease and not with a view to exclude the possibility of pregnancy. Pregnancy itself can be excluded from *rakta-*

gulma by the characteristic features of the pulsation in the mass of growth. In pregnancy, only a part of the growth pulsates where as in *rektagulma* there is pulsation in the entire mass. Further, pregnancy due to some abnormality may continue even after the tenth month cf. *Sārira* 4 : 25. Such specific periodicity is seen in other diseases also, for example, in fever thin gruel, decoction, medicated ghee, milk and purgation are prescribed to be given six days after each in their progressive order.

Premonitory symptoms of Gulma :

एषां तु खलु पञ्चानां गुल्मानां प्रागभिनिर्वृत्तेरिमानि पूर्वरूपाणि भवन्ति; तद्यथा—अनन्ताभिलषणम्, अरोचकाविपाकौ, अग्निवैषम्यं, विदाहो भुक्तस्य, पाककाले चायुक्त्या छर्युदारौ, वातसूत्रपुरीषवेगानां चाप्रादुर्भावः, प्रादुर्भूतानां चाप्रवृत्तिरीषदागमनं वा, वातशूलाटोपान्त्रकूजनापरिहर्षणातिवृत्तपुरीषतः, अनुभुक्ता, दौर्बल्यं, सौहित्यस्य चासहत्यमिति ॥ १५ ॥

The pre-monitory symptoms of all the five types of *gulma* are loss of desire to take food, anorexia, indigestion, irregularity in the power of digestion, incomplete digestion of food, vomiting, eructation during the process of digestion without any specific cause, non-manifestation of the urges for flatus, urination and defecation, even if such urges are manifested there is no excretion or excretion only in small quantity, colic pain due to *vāta*, meteorism, intestinal gurgling, horripilation, misperistalsis, loss of appetite, weakness and intolerance to heavy food. [15]

Principles of treatment :

सर्वेष्वपि खल्वेतेषु गुल्मेषु न कथिद्वाताद्वते संभवति गुल्मः। तेषां सान्निपातिकमसाध्यं ज्ञात्वा नैयोपक्रमेत, एकदोषजे तु यथास्वमारम्भं प्रणयेत्, संस्थांस्तु साधारणेन कर्मणोपचरेत्। यच्चान्यदप्यविरुद्धं मन्येत तदप्यवचारयेद्विभज्य गुरुलाघवसुप्रवाणां, गुरुनुपद्रवांस्त्वरमाणश्चिकित्सेज्जघन्यमितरान्। त्वरमाणस्तु विशेषमनुपलभमानो गुल्मेष्वात्ययिके कर्मणि वातचिकित्सितं प्रणयेत्, स्नेहस्वेदौ वातहरौ स्नेहोपसंहितं च मृदु विरेचनं वस्तीश्च; अग्निलवणमधुरांश्च रसान् युक्त्याऽवचारयेत्। मारुते ह्यपशान्ते स्वल्पेनापि प्रयत्नेन शक्योऽन्योऽपि दोषो नियन्तुं गुल्मेष्विति ॥ १६ ॥

भवति चात्र—

गुल्मिनामनिलशान्तिरूपायैः सर्वशो विधिवदाचरितव्या ।

मारुते ह्यवज्जितेऽन्यमुदीर्णं दोषमल्पमपि कर्म निहन्यात् ॥ १७ ॥

Vitiated *vāta* is an invariable causative factor for all the types of *gulma*. Of them, the *sānnipātika* type caused by the vitiation of all *dosas* should not be treated as it is incurable. *Gulma* caused by only one of these three *dosas* should be treated

according to the *dosa* vitiated. The types of *gulma* caused by the simultaneous vitiation of two of these *dosas* should be treated by adopting the general line of treatment. Therapies which are not mutually contradictory are to be adopted for the treatment of complications, of course, according to their seriousness or lightness. The serious complications should be attempted immediately where as the other ones can be treated even after sometime.

Should it be considered necessary to treat the patient suffering from *gulma* immediately, the therapy may begin with the treatment of *vata* even if no specific symptom indicative of the type of *gulma* is discernible. For this purpose, the physician should carefully administer oleation and fomentation therapies, mild purgation mixed with unctuous substance, enema, and the diet including drugs having sour, saline and sweet tastes. If *vata* is alleviated, other *dosas* pertaining to *gulma* can be brought to their normal state with slight effort.

Thus it is said :—

For a patient suffering from *gulma*, such of the therapies as would alleviate *vata* should be administered carefully. Once the *vata* is alleviated, other aggravated *dosas* would get subsided even with slight effort. [16-17]

Conclusion :

तथ श्लोकः—

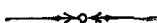
संख्या निमित्तं रूपाणि पूर्वरूपमथापि च ।
दिष्टं निदाने गुल्मानामेकदेशश्च कर्मणाम् ॥ १८ ॥

To sum up :—

The number, etiology, symptomatology, premonitory symptoms and the line of treatment in brief are described in this chapter on the “Diagnosis of *Gulma*”. [18]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने
गुल्मनिदानं नाम तृतीयोऽध्यायः ॥ ३ ॥

Thus ends the third chapter on the “Diagnosis of *Gulma*” of the section on the “Diagnosis of Diseases” of Agniveśa’s work as redacted by Caraka.



चतुर्थोऽध्यायः

CHAPTER IV

अथातः प्रमेहनिदानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानब्रेयः ॥ २ ॥

We shall now expound the chapter on the Diagnosis of *Prameha* (obstinate urinary disorder including Diabetes mellitus).

Thus said Lord Ātreya. [1-2]

During the destruction of Dakṣas' sacrifice, *prameha* originally manifested itself after *gulma*-cf. *Nidāna* 8 : 11. Hence, the description of the diagnosis of *prameha* follows that of *gulma*.

Types of Prameha :

त्रिदोषकोपनिभिन्ना विशतिः प्रमेहा भवन्ति विकाराश्चापरेऽपरिसंख्येयाः ।
तत्र यथा त्रिदोषप्रकोपः प्रमेहानभिनिर्वर्तयति तथाऽनुव्याख्यास्यामः ॥ ३ ॥

Due to the simultaneous vitiation of all the three *dosas* twenty types of *prameha* as also innumerable other diseases are manifested. We shall now explain the way in which the vitiation of the three *dosas* leads to the manifestation of the various types of *prameha*. [3]

Vitiation of all the three *dosas* is the *raison d'être* for the manifestation of all types of *prameha*-cf. *Suśruta Nidāna* 6 : 7. However, this disease is classified as *vātika*, *paittika*, *ślaiṣmika* etc., depending upon the dominance of one or the other of the three vitiated *dosas*.

Specific features of etiological factors :

इह स्तु निदानदोषदूष्यविशेषेभ्यो विकारविघातभावाभावप्रतिविशेषा भवन्ति ।
यदा ह्येते त्रयो निदानादिविशेषाः परस्परं नानुव्यधन्त्यथवा कालप्रकर्षादष्टलीयां-
सोऽथवाऽनुव्यधनन्ति न तदा विकाराभिनिर्वृत्तिः, चिराद्वाऽप्यभिनिर्वर्तन्ते, तनवो-
वा भवन्त्ययथोक्तसर्वलिङ्गा वा; विपर्यये विपरीताः; इति सर्वविकारविघातभावा-
भावप्रतिविशेषाभिनिर्वृत्तिहेतुभवत्युक्तः ॥ ४ ॥

Specific features of etiological factors, *dosas* and *dhātus* determine the bodily immunity or susceptibility to the manifestation of a disease. When the equilibrium of these three factors is disturbed or when they do not support each other or when they are weak due to temporal factors, then either the disease does not manifest itself or there is delay in manifestation or the disease is very mild or all its symptoms are not properly mani-

fested. If the situations are contrary to what is mentioned above, the corresponding results will also be otherwise.

Thus the specific factors which determine the ability or otherwise of the body to resist all types of diseases is described. [4]

The specific features of etiological factors etc., which determine the ability or otherwise of the body to resist the disease *prameha* will be described later in this chapter. Prevention of the manifestation of a disease is effected by the power of resistance to such diseases in the body.

When the etiological factors have properties homologous with *dosas* and or *dhatus*, or when *dosas* have properties homologous with *dhatus*, this leads to the manifestation or aggravation of the disease. Etiological factors, always possess properties homologous to *dosas*; otherwise they will cease to be called etiological factors because in that case no disease will be caused at all. Therefore, their identity with *dosas* may either be in lesser or greater degrees. If it is in a lesser degree and the combination is further subdued due to passage of time or due to repeated combination in still smaller degrees, then this may lose strength and may result in the non-manifestation of the disease; If at all a disease is so manifested then it will develop slowly or in a subdued form or all its symptoms may not be so manifested as they should.

When the etiological factors, *dosas* and *dhatus* are favorable-moderately or strongly-wity each other then the result may be opposite, that is, the disease may be simply manifested, immediately manifested or all the symptoms may be well manifested.

The above mentioned statement applies to all diseases. Still it is specifically mentioned here just in order to show that the ability or otherwise for the manifestation of *prameha* in the body is also determined by such factors.

Etiology of Kaphaja Prameha :

तत्रेमे त्रयो निदानादिविशेषाः श्लेष्मनिमित्तानां प्रमेहाणामाश्वभिन्वृत्तिकरा
भवन्ति; तदथा—हायनकयवकचीनकोहालकनैषधेत्कटमुकुन्दकमहावीहिप्रमोदक-
सुगन्धकानां नवानामतिवेलमतिप्रमाणेन चोपयोगः, तथा सर्पिष्मतां नवहरेणुमाष-
सूष्यानां, ग्राम्यानूपौदकानां च मांसानां, शाकतिलपललपिष्टान्नपायसकृशराविले-
पीश्वुविकाराणां, क्षीरनवमयमन्दकदविद्रवमधुरतरुणग्रायाणां चोपयोगः, मृजा-
व्यायामवर्जनं, स्वप्नशयनासनप्रसङ्गः, यश्च कथिद्विधिरन्योऽपि श्लेष्ममेदोमूत्र-
संजननः, स सर्वो निदानविशेषः ॥ ५ ॥

Pathogenic factors of Prameha :

बहुद्रवः श्लेष्मा दोषविशेषः ॥ ६ ॥

बहुवद्धं मेदो मांसं शरीरजक्षेदः शुक्रं शोणितं वसा मज्जा लसीका रसश्वौजः
संख्यात इति दूष्यविशेषाः ॥ ७ ॥

The following three factors (etiology etc.,) help in the immediate manifestation of *prameha* due to *kapha*. Of these factors, the etiological ones are as follows :—

1. frequent and excessive intake of fresh corns like *hāyanaka*, *yavaka* (a variety of *Hordeum vulgare* Linn.), *cinaka*, *uddālaka*, *naiṣadha*, *itkata*, *mukundaka*, *mahāvīhi*, *pramodaka* and *sugandhaka*;
2. intake of pulses like fresh hareṇu (*Pisum sativum* Linn.) and *māṣa* (*Phaseolus radiatus* Linn.) with ghee;
3. intake of the meat of domesticated, marshy and aquatic animals;
4. intake of vegetables, *tila* (*Sesamum indicum* Linn.), oil cake of *tila*, pastry, *pāyasa* (a type of milk preparation), *kṛśarā* (gruel prepared of *tila*, rice and blackgram), *vilepi* (a type of gruel prepared with four times of water) and preparations of sugarcane;
5. intake of milk, freshwine, immature curd and curd which are mostly liquid, sweet and immature in nature;
6. avoidance of unction and physical exercise;
7. indulgence in sleep, bed rest and sedentary habits; and
8. resorting to even such other regimens which produce more of *kapha*, fat and urine.

Kapha having liquidity in excess is the *doṣa* involved. *Dhātus* specially involved in this *prameha* are *medas* (fat), *māṁsa* (muscle tissue), *vasā* (muscle fat), *majjā* (marrow), *kleda* (body fluids) *śukra* (semen), *rakta* (blood), *lasikā* (lymph) and *rasa* (plasma) which latter is also known as *ojas*. Of them, the first four *dhātus* are of increased quantity and decreased viscosity; remaining *dhātus* are of increased quantity only. [5-7]

Homologous nature of the etiological factors, *doṣas* and *dhātus* concerned with the production of *ślaiṣmika* type of *prameha* is described here. The varieties of *prameha* caused by *kapha* are maximum in number; hence they are described in the beginning. *Kapha doṣa* causes *prameha* only when the former is excessively liquid. *Rasadhātu* in the body is also known as *ojas*—cf. *Cikitsā* 6 : 8.

Pathogenesis of Kaphaja prameha :

अयाणमेषां निदानादिवेशेषाणां सन्निपाते क्षिप्रं द्लेष्मा प्रकोपमापद्यते, प्रागति-
भूयस्त्वात्; स प्रकुपितः क्षिप्रमेव शरीरे विसृष्टि लभते, शरीरशैथिल्यात्; स

विसर्पज् शरीरे मेदसैवादितो मिश्रीभावं गच्छति, मेदसश्चैव बह्वद्धत्वान्मेदसश्च
गुणैः समानगुणभूयिष्टत्वात् ; स मेदसा मिश्रीभवन् दूषयत्येनत् , विकृतत्वात् ;
स विकृतो दुष्टेन मेदसोपहितः शरीरक्लेदमांसाभ्यां संसर्गं गच्छति, क्लेदमांस-
योरतिप्रमाणाभिवृद्धत्वात् ; स मांसे मांसप्रदोषात् पूतिमांसपिङ्गकाः शराविका-
कल्पिकाद्याः संजनयति, अप्रकृतिभूतत्वात् ; शरीरक्लेदं पुनर्दूषयन् मूत्रत्वेन
परिणमयति, मूत्रवहानां च स्रोतसां वङ्घण्यस्तिप्रभवाणां मेदक्लेदोपहितानि
गुरुणि मुखान्यासाद्य प्रतिरुद्धयते; ततः प्रमेहांस्तेषां स्थैर्यमसाध्यतां वा जनयति,
प्रकृतिविकृतिभूतत्वात् ॥ ८ ॥

By the favourable combination of all the three specific factors, viz. etiology, *dosas* and *dhātus*, *kapha* gets immediately aggravated because of the excessiveness in quantity already attained by it, and it initiates the process of manifestation of *prameha*. The aggravated *kapha* spreads all over the body because of the looseness developed in the latter. While spreading in the body, it first of all gets mixed with *medas* (fat) because there is an increase in the quantity and decrease in the viscosity of *medas* and also because *kapha* and *medas* share identical qualities. As *kapha* itself is vitiated, it vitiates *medas* while getting mixed with the latter. The vitiated *kapha* alongwith the vitiated *medas* gets mixed with the muscle tissues and liquid *dhātus* of the body, inasmuch as these two are supposed to have already exceeded their quantity. Vitiation of the muscle tissues provides a congenial atmosphere for the manifestation of putrified carbuncles like *śarāvikā* and *kacchapikā* in the muscle. The liquid *dhātus* of the body are further vitiated and transformed into urine. Kidneys and bladder are the root (controlling organs) of the channels carrying urine and the openings of these channels get affected by fat and liquid *dhātus* of the body. The vitiated *kapha* while coming in contact with the openings of these channels obstructs them. This results in the manifestation of *prameha* which becomes chronic or incurable due to the affectation of all the qualities of *kapha* and also due to the simultaneous vitiation of homogenous and heterogenous *dhātus*. [8]

The *kapha* vitiated by the etiological factors exceeds its quantity and develops specific power to manifest the process of the disease, viz., *prameha*. The specific properties of *medas* are sweetness, unctuousness, heaviness etc., and those of *kapha* are heaviness, coldness etc. Thus both these elements have properties mostly identical. In its normal state,

kapha does not vitiate *medas* even though they have identical properties. It is only the vitiated *kapha* which does so. The vitiated *kapha* alongwith the vitiated *medas* gets mixed with the muscle tissue and liquid *dhātus* of the body because of the increase in the quantity of these two *dhātus*. It is not their attributes but the quantity that gets increased in this situation. The term “अप्रकृतभूतवात्” used in the above para is not a repetition but it carries a specific meaning here inasmuch as it is only the vitiation of muscle tissue which is capable of producing carbuncles like *śarāvikā*.

When all the qualities of *kapha* are vitiated then the disease becomes stabilised or chronic. When this vitiation is very acute then the disease becomes incurable. When the vitiated *kapha* affects homogenous *dhātus*, viz. *medas* (fat) and *vasā* (muscle fat), then the disease becomes chronic. If heterogenous *dhātus* like blood are vitiated then the disease becomes incurable in view of the mutual contradiction involved in the treatment of this condition.

Signs of Kaphaja Prameha, varieties and prognosis :

शरीरकलेदस्तु इलेघमेदोमिश्रः प्रविशन् मूत्राशयं मूत्रत्वमापद्यमानः इलैषिम-
कैरेभिर्दशभिर्गुणैरुपसृज्यते वैषम्ययुक्तैः; तद्यथा—श्वेतशीतमूर्तिपच्छिलाच्छ-
स्तिनग्धगुरुमधुरसान्द्रप्रसादमन्दैः, तत्र येन गुणेनकेनानेकेन वा भूयस्तरमुप-
सृज्यते तत्समाख्यं गौणं नामविशेषं प्राप्नोति ॥ ९ ॥

ते तु स्त्रियमेदश प्रमेहा नामविशेषेण भवन्ति; तद्यथा—उदकमेहश्च, इक्षुवा-
लिकारसमेहश्च, सान्द्रमेहश्च, सान्द्रप्रसादमेहश्च, शुक्रमेहश्च, शीत-
मेहश्च, सिकतामेहश्च, शनैर्मेहश्च, आलालमेहश्चेति ॥ १० ॥

ते दश प्रमेहाः साध्याः; समानगुणमेदस्थानकत्वात्, कफस्य प्राधान्यात्,
समक्रियत्वात् ॥ ११ ॥

Fluid *dhātus* of the body alongwith *kapha* and *medas* (fat) enter into the kidneys and bladder and get transformed into urine. During this process they acquire the then morbid qualities of *kapha*, viz. whiteness, coldness, viscosity, slimeness, transparency, unctuousness, heaviness, sweetness, density combined with clarity and slowness. The (varieties of this) morbid condition is named after these qualities—one or many of which may dominate the process of pathogenesis.

The following are the names of the varieties of *prameha* due to *kapha*.

1. *Udakameha* (Hydruria)
2. *Ikṣuvālikārasameha* (Glycosuria)
3. *Sāndrameha* (Chyluria)
4. *Sāndraprasādameha* (Belluria)

5. Šuklameha (passing of white urine)
6. Šukrumeha (Spermaturia)
7. Šitameha (Phosphaturia)
8. Sikatāmeha (Graveluria)
9. Šannairmeha (Slow micturition)
10. Ālālameha (Pyuria)

These ten types of *prameha* are curable because (1) the *medas* (fat) having homogenous properties is affected, (2) the *kapha* is dominant and (3) both these two factors are amenable to the same type of treatment. [9-11]

Imbalance of *dosas* includes both aggravation and diminution but in the present context, only the aggravated qualities of *dosas* take part in the pathogenesis because diminished *dosas* are incapable of producing any disease. This aggravation may be of a greater or lesser degree and in each type of *prameha*, besides the dominant aggravated qualities, other qualities in aggravated or diminished form also play an important role. Simultaneously, there may be aggravation of two, three or four of the qualities of *kapha* and this increase or decrease in qualities which participate in the pathogenesis of the disease may constitute the aggravation or diminution of the *dosa*.

It is not that the ten qualities of *kapha*, viz. whiteness etc., (vide para 9) produce ten types of *prameha* (as enumerated in para 10) respectively. The above qualities in fact are capable of producing any of these types jointly or severally.

The various types of *prameha* are named either after the names of one of the ten qualities or after the overall latent properties involved. *Šitameha*, *Šuklameha*, *Sāndrameha* etc., belong to the first category. *Udakameha*, on the other hand, belongs to the second category inasmuch as *udaka* symbolises the various latent properties of *kapha* like *accha*, *śīta* and *sita*.

Specific characteristic of Kaphaja prameha :

तत्र श्लोकाः श्लेष्मप्रमेहविशेषविज्ञानार्था भवन्ति—॥ १२ ॥
 अच्छं बहु सितं शीतं निर्गन्धमुदकोपमम् ।
 श्लेष्मकोपान्नरो मूत्रमुदमेही प्रमेहति ॥ १३ ॥
 अत्यर्थमधुरं शीतमीषतिपिच्छिलमाविलम् ।
 काण्डेश्वरससङ्काशं श्लेष्मकोपात् प्रमेहति ॥ १४ ॥
 यस्य पर्युषितं मूत्रं सान्द्रीभवति भाजने ।
 पुरुषं कफकोपेन तमाहुः सान्द्रमेहिनम् ॥ १५ ॥
 यस्य संदृश्यते मूत्रं किञ्चित् किञ्चित् प्रसीदति ।
 सान्द्रप्रसादमेहीति तमाहुः श्लेष्मकोपतः ॥ १६ ॥

शुक्लं पिष्टनिर्भं मूत्रमभीक्षणं यः प्रमेहति ।
 पुरुषं कफकोपेन तमाहुः शुक्लमेहिनम् ॥ १७ ॥
 शुक्राभं शुक्रमिश्रं वा मुहुर्मेहति यो नरः ।
 शुक्रमेहिनमाहुस्तं पुरुषं इलेघ्मकोपतः ॥ १८ ॥
 अत्यर्थमधुरं शीतं मूत्रं मेहति यो भृशम् ।
 शीतमेहिनमाहुस्तं पुरुषं इलेघ्मकोपतः ॥ १९ ॥
 मूर्तान्मूत्रगतान् दोषानण्णमेहति यो नरः ।
 सिकतामेहिनं विद्यात्तं नरं इलेघ्मकोपतः ॥ २० ॥
 मन्दं मन्दमवेगं तु कृच्छ्रं यो मूत्रयेच्छनैः ।
 शनैर्मेहिनमाहुस्तं पुरुषं इलेघ्मकोपतः ॥ २१ ॥
 तन्तुबद्धमिवालालं पिच्छिलं यः प्रमेहति ।
 आलालमेहिनं विद्यात्तं नरं इलेघ्मकोपतः ॥ २२ ॥
 इत्येते दश प्रमेहाः इलेघ्मप्रकोपनिमित्ता व्याख्याता भवन्ति ॥ २३ ॥

The specific features of different types of *prameha* caused by *kapha* are given below (in verses).

1. In *udakameha* (hydruria) the individual passes large quantity of water-like urine which is transparent, white, cold and without any smell.
2. In *ikṣuvālikārasameha* (glycosuria) the patient passes urine like the sugar cane juice which is exceedingly sweet, cold, slightly saline and turbid.
3. In *sāndrameha* (chyluria), the viscosity of the urine of the individual increases when kept over-night.
4. In *sāndraprasādameha* (belluria) the urine of the patient becomes partly viscous and partly clear when kept overnight.
5. In *śuklameha* the patient passes urine having white colour like that of pasted flour.
6. In *śukrāmeha* (spermaturia) the patient passes semen-like urine or urine mixed with semen.
7. In *śitameha* (phoshaturia), the patient gets frequent micturition which is exceedingly sweet and cold.
8. In *sikatāmeha* (graveluria), the vitiated *dosas* come through the urine in the form of small and hard things.
9. In *śanairmeha*, the patient passes small quantity of urine with difficulty and very slowly.
10. In *ālālameha* (pyuria), the patient passes urine which is slime like phlegm and as if full of threads.

Thus the ten types of *prameha* due to the vitiation of *kapha* are explained. [12-23]

Ikṣuvālikā (a type of sugar cane) and *Kaṇḍekṣu* (*Saccharum officinarum* Linn.) are two different types of plants. In *ikṣuvālikāmeha* the patient is said to pass urine like the juice of *kāṇḍekṣu* (sugar cane). This shows that the patient passes urine like the juices of both the types of plants. It also indicates that the juice of both these plants are identical in nature.

It is only in the case of *ślaiṣmika prameha* that the ten qualities of *kapha* produce the ten types of *prameha* by permutation and combination. It does not happen so with other *dosas*. This is an empirical truth and no argument in this connection can be of any use. Only the facts that can be seen with naked eyes are debatable. The ones which are not seen can never be debated. The same empirical principle applies also to *rasas* (tastes). Even though *rasas* (tastes) in matter, are manifested by the combination of *mahābhūtas*, still the dominance of a particular *mahābhūta* need not necessarily produce a specific type of *rasa* (taste) in the matter.

Etiology and varieties of Pittaja prameha :

उष्णाम्ललवणशारकटुकाजीर्णभोजनोपसेविनस्तथाऽतिरीक्षणातपाग्निसंतापं
श्रमकोधविषमाहारोपसेविनश्च तथाविधशरीरस्यैव क्षिप्रं पित्तं प्रकोपमापद्यते,
तत्तु प्रकुपितं तथैवानुपूर्व्या प्रमेहानिमान् षट् क्षिप्रतरमभिनिवृत्तयति ॥ २४ ॥

तेषामपि तु खलु पित्तगुणविशेषेणैव नामविशेषा भवन्ति; तद्यथा—क्षारमेहश्च,
कालमेहश्च, नीलमेहश्च, लोहितमेहश्च, मञ्जिष्ठमेहश्च हारिद्रमेहश्चेति ॥ २५ ॥

ते षड्भिरेव क्षाराम्ललवणकटुकविस्तोषैः पित्तगुणैः पूर्ववद्युक्ता भवन्ति ॥ २६ ॥

Pitta gets immediately aggravated in an individual whose body is affected by conditions mentioned above (in para 7) due to the following :—

1. intake of hot, sour, saline, alkaline and pungent food;
2. intake of food before the digestion of the previous meal;
3. exposure to excessively hot sun, heat of the fire, physical exertion and anger; and
4. intake of mutually contradictory food articles.

The aggravated *pitta* following the same pathogenic process (as mentioned in para 8) manifest six types of *prameha*. The process of manifestation here is quicker than that of the *kapha-meha*. According to the qualities of *pitta*, they are named as follows :—

1. *Kṣārameha* (Alkalinuria)
2. *Kālameha* (Melanuria)
3. *Nilameha* (Indigouria)

4. *Raktameha* (Hematuria)
5. *Mañjiśṭhāmeha* (Hemoglobinuria)
6. *Haridrāmeha* (Urobilinuria)

As described before, these varieties of *prameha* are also manifested due to the permutation and combination of the six qualities of *pitta* which are alkaline, sour, saline, pungent, hot and having smell like that of raw flesh. [24-26]

Diseases caused by *pitta* manifest themselves more quickly than those by *kapha*. So the various types of *prameha* caused by *pitta* manifest themselves quicker.

Palliability characteristics and of pittaja prameha :

सर्व एव ते याप्याः संसृष्टदोषमेदः स्थानत्वाद्विरुद्धोपक्रमत्वाच्चेति ॥ २७ ॥

तत्र श्लोकाः पित्तप्रमेहविशेषविज्ञानार्था भवन्ति— ॥ २८ ॥

गन्धवर्णरसस्पर्शैर्यथा क्षारस्तथाविधम् ।

पित्तकोपान्नरो मूत्रं क्षारमेही प्रमेहति ॥ २९ ॥

मसीवर्णमजर्सं यो मूत्रमुष्णं प्रमेहति ।

पित्तस्य परिकोपेण तं विद्यात् कालमेहिनम् ॥ ३० ॥

चाषपक्षनिमं मूत्रमर्म्लं मेहति यो नरः ।

पित्तस्य परिकोपेण तं विद्यान्नीलमेहिनम् ॥ ३१ ॥

विस्तं लवणमुष्णं च रक्तं मेहति यो नरः ।

पित्तस्य परिकोपेण तं विद्याद्रक्तमेहिनम् ॥ ३२ ॥

मञ्जिष्ठोदकसंकाशं भुशं विस्तं प्रमेहति ।

पित्तस्य परिकोपात्तं विद्यान्मञ्जिष्ठमेहिनम् ॥ ३३ ॥

हरिद्रोदकसङ्काशं कटुकं यः प्रमेहति ।

पित्तस्य परिकोपात्तं विद्याद्वारिद्रमेहिनम् ॥ ३४ ॥

इत्येते षट् प्रमेहाः पित्तप्रकोपनिमित्ता व्याख्याता भवन्ति ॥ ३५ ॥

All these types of *prameha* are palliable because the site *medas* which is vitiated in the pathogenesis of this disease is closer to that of the affected *dosa*, that is *pitta*, and also because the treatment of *pitta* and *medas* is involved in mutual contradiction. The specific features of different types of *prameha* caused by *pitta* are given below (in verses) :

1. In *kṣārāmeha* (alkalinuria) the patient passes urine having the smell, colour, taste and touch like those of alkalies.
2. In *kālameha* (melanuria) the patient passes large quantity of black urine.
3. In *nilameha* (indigouria) the patient passes urine having sour taste and colour like that of the feather of the *cāsa* bird (blue jay).

4. In *raktameha* (hematuria) the patient passes urine having red colour, saline taste and smell like that of raw flesh.
5. In *mañjisthameha* (hemoglobinuria) the patient frequently passes urine having the smell like that of raw flesh and colour like that of the juice of *mañjisthā* (*Rubia cordifolia* Linn.)
6. In *hāridramaha* (urobilinuria) the patient passes urine having pungent tastes and colour like that of the juice of *haridrā* (*Curcuma longa* Linn.)

Thus, six varieties of *prameha* due to the vitiation of *pitta* are explained. [27-35]

The site of *pitta* is *āmāśaya* (stomach including small intestine) and the important site of *medas* (fat) is *vapāvahana* (omentum). *Āmāśaya* and *vapāvahana*-the sites of *doṣas* and *dhātus* involved in this case-are close to each other. Because of this, the *paittika* type of *prameha* is only palliable. Further, the treatment of vitiated *pitta* and *medas* involves mutual contradiction. Substances which are sweet and cold are wholesome for *pitta* but they are unwholesome for the affected *medas* (fat). Substances of pungent taste are wholesome for vitiated *medas* but they are unwholesome for *pitta*. Above all, it is also due to the specific nature of the disease that it is palliable.

Etiology and pathogenesis of Vataja prameha :

कषायकटुतिक्रूक्षलघुशीतव्यवायव्यायामवमनविरेचनास्थापनशिरोविरेचना-
तियोगसंधारणानशनाभिधातातपोद्वेगशोकशोणितातिषेकजागरणविषमशरीरन्या-
सातुपसेवमानस्य तथाविधशरीरस्यैव क्षितं वातः प्रकोपमापद्यते ॥ ३६ ॥

स प्रकुपितस्तथाविधे शरीरे विसर्पन् यदा वसामादाय मूत्रबहानि स्रोतांसि प्रतिपद्यते तदा वसामेहमभिनिर्वर्तयति; यदा पुनर्मज्जानं मूत्रबस्तावाकर्षति तदा मज्जमेहमभिनिर्वर्तयति; यदा तु लसीकां मूत्राशयेऽभिवहन्मूत्रमनुबन्धं च्योतयति लसीकातिव्याहुत्वाद्विक्षेपणात् वायोः खलवस्यातिमूत्रप्रवृत्तिसङ्गं करोति, तदा स मत्त इव गजः क्षरत्यजस्त्रं मूत्रमवेगं, तं हस्तिमेहिनमाचक्षते; ओजः पुनर्मधुर-स्वभावं, तद् यदा रौक्ष्याद्वायुः कषायत्वेनाभिसंसृज्य मूत्राशयेऽभिवहति तदा मधुमेहं करोति ॥ ३७ ॥

Vāta gets immediately aggravated in an individual whose body is affected with the conditions mentioned above (in para 7) due to the following :—

1. excessive intake of astringent, pungent, bitter, rough, light and cold things;
2. excessive indulgence in sex and physical exercise.

3. excessive administration of emesis, purgations, *āsthāpana* type of enema and *sirovirecana* (elimination of *dosas* from the head) and
4. resorting to suppression of the manifested urges, fasting, assault, exposure to sun, anxiety, grief, excessive blood letting, keeping awake at night and irregular posture of the body.

The aggravated *vāta* in that type of body spreads, and along-with *vasā* (muscle fat), enters into channels carrying urine leading to the manifestation of *vasāmeha* (lipuria). When it carries marrow to the urinary bladder then it results in *majjāmeha* (myelouria).

Due to the excess in quantity of *lasikā* (lymph) and also due to the property of *vāta* to dissipate things, when the lymph entering into the urinary bladder produces large quantity of urine, the patient feels continuous urge for micturition and passes large quantity of urine continuously (even) without any pressure like an elephant gone amuck. This is known as *haśtimeha*. (Diabetes insipidus).

Ojas, by nature is of sweet taste. When due to the roughness, *vāta* converts it into that of astringent taste and takes it into the urinary bladder, due to its roughness, this causes *madhumeha* (Diabetes mellitus). [36-37]

The water-like liquid residing between the muscle tissue and the skin in the body is called *lasikā* (lymph)—cf. *Sārīra* 7 : 15. It is the specific nature of *vāta* by which the sweet taste of *ojas* is converted into astringent taste. *Vāta* in its aggravated state is known to make things astringent.

Incurability and characteristics of Vātaja prameha :

इमांश्चतुरः प्रमेहान् वातजानसाध्यानाचक्षते भिषजः, महात्ययिकत्वाद्विरुद्धो-
पक्षमत्वाच्चेति ॥ ३८ ॥

तेषामपि पूर्ववृणविशेषविज्ञानार्थी भवन्ति; तदथा—वसामेहश्च, मज्ज-
मेहश्च, हस्तमेहश्च, मधुमेहश्चेति ॥ ३९ ॥

तत्र श्लोका वातप्रमेहविशेषविज्ञानार्थी भवन्ति—॥ ४० ॥

वसामिश्रं वसाभं वा मुहुर्मेहति यो नरः।

वसामेहिनमाहुस्तमसाध्यं वातकोपतः ॥ ४१ ॥

मज्जानं सह मूत्रेण मुहुर्मेहति यो नरः।

मज्जमेहिनमाहुस्तमसाध्यं वातकोपतः ॥ ४२ ॥

द्वस्ती मत्त इवाजस्थं मूत्रं क्षरति यो भृशम् ।
 द्वस्तिमेहिनमाहुस्तमसाध्यं वातकोपतः ॥ ४३ ॥
 कषायमधुरं पाण्डु रुक्षं मेहति यो नरः ।
 वातकोपादसाध्यं तं प्रतीयान्मधुमेहिनम् ॥ ४४ ॥
 इत्येते चत्वारः प्रमेहा वातप्रकोपनिमित्ता व्याख्याता भवन्ति ॥ ४५ ॥
 एवं त्रिदोषप्रकोपनिमित्ता विशतिः प्रमेहा व्याख्याता भवन्ति ॥ ४६ ॥

These four varieties of *prameha* due to the vitiation of *vāta* are known to be incurable because of their seriousness and also because of the contradiction involved in their treatment.

As in the case of other *pramehas*, these varieties of *prameha* are also named after the attributes involved in the pathogenesis. Names of these *pramehas* are (i) *vasāmeha* (lipuria) *majjāmeha* (myelo-uria), *hastimeha* (Diabetes insipidus) and *madhumeha* (Diabetes mellitus).

The specific features of different varieties of *prameha* caused by *vāta* are given below (in verses) :

1. In *vasāmeha* (lipuria) which is incurable and caused by the aggravation of *vāta*, the patient frequently passes urine mixed with *vasā* (muscle fat) or having the appearance of *vasā*;
2. In *majjāmeha* (myelo-uria), which is incurable and caused by the aggravation of *vāta*, the patient frequently passes urine mixed with *majjā* (marrow);
3. In *hastimeha* (Diabetes insipidus), which is incurable and caused by the aggravation of *vāta*, the patient passes large quantity of urine frequently like an elephant gone amuck,
4. In *madhumeha* (Diabetes mellitus) which is incurable and caused by the aggravation of *vāta*, the patient passes urine, sweet and astringent in taste, pale in colour and ununctuous. The four varieties of *prameha* due to the aggravation of *vāta* are thus explained..

Thus the twenty types of *prameha* due to the aggravation of the three *dosas* are explained. [38-46]

These four varieties of *prameha* due to the aggravated *vāta* are known to be serious because they cause diminution of vital tissue elements of the body. Things which are unctuous etc., are useful for the cure of aggravated *vāta* but they all the more aggravate the *medas* (fat) which also takes part in the pathogenesis of this conditions. Thus the treatment of this condition involves mutual contradiction which makes the disease incurable.

Premonitory symptoms of prameha :

त्रयस्तु खलु दोषाः प्रकृपिताः प्रमेहानभिनिर्वर्तयिष्यन्त इमानि पूर्वरूपाणि
दर्शयन्ति; तयथा-जटिलीभावं केशेषु, मायुर्यमास्यस्य, करपादयोः सुस्पतादाहौ,
मुखतालुकण्ठशोषं, पिपासाम्, आलस्यं, मलं काये, कायचिङ्गद्रूपदेहं, परिदाहं
सुस्पतां चाङ्गेषु, पट्टपदपिषीलिकाभिश्च शरीरमूत्राभिसरणं, मूत्रे च मूत्रदोपानं,
विष्णं शरीरगन्धं, निद्रां, तन्द्रां च सर्वकालमिति ॥४७॥

The three vitiated *dosas* while initiating the process of manifestation of various types of *prameha* produce the following pre-monitory symptoms :

1. matting of the hair.
2. sweet taste in the mouth;
3. numbness and burning sensation in hands and feet;
4. dryness in mouth, palate and throat;
5. thirst and laziness.
6. increased amount of excreta from the body;
7. adherance of excreta in the orifices of the body.
8. burning sensation and numbness in various organs of the body.
9. attraction of insects and ants by the body and urine;
10. appearance of abnormalities in the urine;
11. smell of raw flesh in the urine; and
12. excessive sleep and continuous drowsiness. [47]

The pre-monitory symptoms described above are common to all varieties of *prameha*.

Complications and line of treatment :

उपद्रवास्तु खलु प्रमेहिणां तृष्णातीसारज्वरदाहदैर्घ्यल्यारोचकाविपाकाः
पूतिमांसपिडकालजीविद्रध्यादयश्च तत्प्रसङ्गाद्वन्ति ॥ ४८ ॥

तत्र साध्यान् प्रमेहान् संशोधनोपशमनैर्यथार्हमुपपादयंश्चिकित्सेदिति ॥४९॥

Complications of *prameha* are thirst, diarrhoea, fever, burning sensation, weakness, anorexia and indigestion. Carbuncles which putrify the muscle tissues like *alajī* and *vidradhi* appear during the chronic stage of the disease.

Of them the curable types of *prameha* should be treated with the appropriate elimination and alleviation therapies.

[48-49]

Brief etiology :

भवन्ति चात्रः—

गृध्रमभ्यवहायेषु स्नानचक्षुक्मणद्विषम् ।

प्रमेहः क्षिप्रमभ्येति नीबुद्धुममिवाष्टुः ॥ ५० ॥

मन्दोत्साहमतिस्थूलमतिक्षिण्यं महाशनम् ।
 मृत्युः प्रमेहरूपेण क्षिप्रमादाय गच्छति ॥ ५१ ॥
 यस्त्वाहारं शरीरस्य धातुसाम्यकरं नरः ।
 सेवते विविधाश्चान्याश्चेष्टाः स सुखमभुते ॥ ५२ ॥

Thus it is said :

As the birds are attracted towards the trees where lies their nests, similarly, *prameha* affects people who are varacious eaters and have aversion to bath and physical exercises.

Death immediately comes in the form of *prameha* to those who are less enthusiastic, overcorpulent, over unctuous and gluttons.

The individual who takes such diets and resorts to such regimens which bring about normal state of the *dhatus* in the body leads a happy life. [50-52]

Conclusion :

तत्र श्लोकाः—

हेतुवर्याधिविशेषाणां प्रमेहाणां च कारणम् ।
 दोषधातुसमायोगे रूपं विविधमेव च ॥ ५३ ॥
 दश श्लेष्मकृता यस्मात् प्रमेहाः षट् च पित्तजाः ।
 यथा च वायुश्चतुरः प्रमेहान् कुरुते बली ॥ ५४ ॥
 साध्यासाध्यविशेषाश्च पूर्वरूपाण्युपद्रवाः ।
 प्रमेहाणां निदानेऽस्मिन् क्रियासूत्रं च भाषितम् ॥ ५५ ॥

To sum up :

In this chapter on the diagnosis of *prameha* the following topics have been discussed :—

1. causative factors of diseases and those (specially) pertaining to various types of *prameha*;
2. combination of *dosas* and *dhatus*;
3. signs and symptoms (of different types of *prameha*);
4. process of manifestation of ten, six and four varieties of *prameha* caused by *kapha*, *pitta* and *vata* respectively.
5. their prognosis, premonitory symptoms and complications;
- and
6. their line of treatment. [53-54]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने प्रमेहनिदानं नाम
 चतुर्थोऽध्यायः ॥ ४ ॥

Thus ends the fourth chapter on the Diagnosis of *Prameha* of the section on Diagnosis of Diseases (*Nidānasthāna*) of Agniveśas' work as redacted by Caraka.

पञ्चमोऽध्यायः

CHAPTER V

अथातः कुष्ठनिदानं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the Diagnosis of *Kuṣṭha* (Obstinate skin diseases including leprosy).

Thus said Lord Atreya. [1-2]

In terms of mythological description *kuṣṭha*, originated after *prameha* cf. *Nidāna* 8 ;11. Hence, after the description of the diagnosis of *prameha*, *kuṣṭha* is being described in this chapter.

Morbid factors in causation of Kuṣṭha :

सप्त द्रव्याणि कुष्टानां प्रकृतिविकृतिमापन्नानि भवन्ति । तद्यथा—त्रयो
दोषा वातपित्तश्लेष्माणः प्रकोपणविकृताः, दूष्याश्च शरीरधातवस्त्वङ्गांसशोणि-
तलसीकाश्चतुर्धा दोषोपघातविकृता इति । एतत् सप्तानां सप्तधातुकमेवङ्गतमा-
जननं कुष्टानाम्, अतःप्रभवाण्यभिनिर्वर्तमानानि केवलं शरीरमुपतपन्ति ॥ ३ ॥

Kuṣṭha is caused by the morbidity of seven factors. They are the three *doṣas*, viz. *vata*, *pitta* and *kapha* which get vitiated by the causative factors and four *dhātus* of the body, viz. *tvak* (skin or *rasa*), *māṃsa* (muscle), *śonita* (blood) and *lasikā* (lymph) which get vitiated by the morbid *doṣas*. Thus the seven types of *kuṣṭhas* are produced by the seven morbid *dhātus* (which include three *doṣas*). The *kuṣṭha* so caused spreads to the entire body after its manifestation. [3]

The seven causative factors responsible for the manifestation of *kuṣṭhas* are the three *doṣas* and four *dhātus* which have undergone morbid changes. The term “प्रकृतिविकृति (मापन्नानि)” used in the above para is composed of two words, viz. प्रकृतिः meaning causative factors and विकृतिम् meaning (the factors) that have undergone morbid changes. Another reading of this term is “प्रकृतिविकृतिमापन्नानि” which means that the seven factors are responsible for the manifestation of *kuṣṭha* only when they are vitiated by the specific causative factors of this disease. Otherwise these seven factors may not necessarily produce *kuṣṭha*. These very *doṣas* and *dhātus*—seven in number—are also responsible for the manifestation of *visarpa*—cf. *Cikitsā* 21 : 15. Even though the *doṣas* and *dhātus* involved in these two diseases, viz, *visarpa* and *kuṣṭha* are the same, still the specific characteristic for the former are (1) the dominance of the vitiated blood and (2) the spreading nature—cf. *Cikitsā* 21 : 11. Because of the specific vitiation of blood the disease *visarpa* is associated with severe pain ; bloodletting therapy plays an

important role in its treatment. As it is said, "The importance of blood-letting therapy is equal to all the therapies taken together for this disease—vide *Cikitsā* 21 : 141. These two diseases may be distinguished even in a different way. According to some scholars, in *visarpa* one or more of these seven *dhātus* (including three *doṣas*) are susceptible to vitiation but in all types of *kuṣṭha*, all these seven *dhātus* are invariably vitiated. For the manifestation of *kuṣṭha*, the abnormalcy of *dhātus* is not in the form of increase or decrease in quantity but is the change in their actual composition due to the vitiation by the *doṣas*. Use of the term "दोषोपघातविकृतः" further indicates that *dhātus* can be vitiated only by *doṣas* and not by any extraneous factors.

In the primary stage of *kuṣṭha* only four *dhātus* are vitiated but subsequently all other *dhātus* in the entire body are affected. According to the *Suśruta*, *kuṣṭha* affects the skin in the beginning and subsequently spreads in other *dhātus*-vide *Suśruta* : *Nidāna* 5:21. The statement of Caraka that all the four *dhātus* are affected in *kuṣṭha* does not in any way go against the *Suśruta*. According to Caraka also these four *dhātus* are only generally affected and the specific vitiation of *dhātus* follows seriatim one after the other. Thus, as stated in the above paragraph, *kuṣṭha* affects the entire body. In the *Suśruta*, symptoms produced by the specific vitiation of individual *dhātus* are also described—cf *Suśruta* : *Nidāna* 5:22-27. Symptoms that manifest themselves due to the general vitiation of all the four *dhātus* (as described in this chapter) only indicate the general symptoms of *kuṣṭha*; they are different from the symptoms due to the specific vitiation of individual *dhātus* as mentioned in the *Suśruta*. Thus there is no contradiction.

Innumerable classification of kuṣṭha :

न च किञ्चिदस्ति कुष्टमेकदोषप्रकोपनिमित्तम्, अस्ति तु खलु समानप्रकृतीनामपि कुष्टानां दोषांशांश्विकल्पानुबन्धस्थानविभागेन वेदनावर्णसंस्थानप्रभावनामचिकित्सतविशेषः । स सप्तविधोऽष्टादशविधोऽपरिसंख्येयविधो वा भवति । दोषा हि विकल्पनैर्विकल्पयमाना विकल्पयन्ति विकारान्, अन्यत्रासाध्यभावात् । तेषां विकल्पविकारसंख्यानेऽतिप्रसङ्गमभिसमीक्ष्य सप्तविधेव कुष्टविशेषमुपदेश्यामः ॥ ४ ॥

No *kuṣṭha* manifests itself due to the aggravation of only one *doṣa*. Depending upon the permutation and combination of the various fractions of *doṣa* and their location in the body, there is variation in the pain, colour, shape, specific manifestations, name and treatment of the various types of *kuṣṭha* even though they are produced by the same types of (causative) factors. They may be of seven types and (according to another classification), eighteen types. They are in fact of innumerable types. *Doṣas* due to various forms of permutation and combi-

nation bring about variations in these diseases excepting those which are incurable. As all the variations of the disease are too exhaustive to be narrated here, only the seven fold classification of *kuṣṭha* will be explained here. [4]

Kuṣṭhas are caused by the simultaneous vitiation of all the three *doṣas*. Even then they are known as *vātika*, *paitika* etc., depending upon the dominance of one or the other *doṣas*. All types of *kuṣṭhas* are produced invariably by the vitiation of the same seven factors, viz., three *doṣas* and four *dhātus*. When there is no variation in the cause, naturally the effect should be the same. But depending upon the permutation and combination of the various factors of the vitiated *doṣas* and also their location in the body, there are different types of pain etc. in *kuṣṭha*. At times, the unctuousness of *vāta* and at times its coldness may be aggravated. Variations in the manifestation of the disease due to its location in different *dhātus* are already described in *Sūtra* 28:8-22. All types of *kuṣṭha* are located in the four *dhtus*. The variations in the manifestation of the disease, however, depend upon the extent of the aggravation, vitiation of the *doṣas*.

Kapāla type of *kuṣṭha* is associated with many types of pain Cf. *Cikitsā* 7:14; this illustrates the variation in pain. *Kākāṇa* type of *kuṣṭha* is of the colour or *kākāṇantikā* (*Abrus precatorius Linn*)—Cf. *Cikitsā* 7 : 20 ; this illustrates the variation in colour. *Rsyajihva* type of *kuṣṭha* is of the shape of the tongue of the deer--cf. *Cikitsā* 7:17, this illustrates the variation in shape. Variations in *prabhāva* or specific manifestations are illustrated by the prognosis of the condition. Variations in name are *Kapāla* etc.

In this chapter only seven types of *kuṣṭhas* are described. In the section on the “Treatment of Diseases” (*Cikitsāsthāna*) eighteen types of *kuṣṭhas* are described. Of course, depending upon the permutation and combination of *doṣas*, *kuṣṭhas* may be of innumerable varieties.

The incurable type of *kuṣṭha* does not have varieties. Even though there is variation in this type of disease due to the dominance of one or the other of the *doṣas*, still from the point of view of treatment, all of them have one common characteristic i. e. absolute incurability. The palliable ones are not included under the incurable types of the disease. It is only the curable types that are classified, for the purpose of treatment.

Depending upon some characteristic features, *jvara* (fever) is described to be only of one type ; it may also be of two or three types. Similarly *kuṣṭha* also might be of seven or eighteen types. As in the case of *jvara*, eleven types of minor (*ksudra*) *kuṣṭhas* are included in the seven types of major (*mahā*) *kuṣṭhas*. Otherwise the description of only seven types of *kuṣṭhas* would not be justifiable. As *mahākuṣṭhas* like *kapāla* etc., are produced by the dominance of one or the other of the three *doṣas*, such is the case with *ksudrakuṣṭhas* as well. Of course, in *ksudrakuṣṭhas*, the symptoms of *wahākuṣṭhas* are manifested in a milder form. The classification of *ksudrakuṣṭhas* according to the dominance of *doṣas* is described in *Cikitsā* 7:29-30.

Specific nature of kuṣṭha :

इह वातादिषु त्रिषु प्रकृपितेषु त्वगादीश्चतुरः प्रदूषयत्सु वातेऽधिकतरे कपालकुष्टमभिनिर्वर्तते, पित्ते त्वौदुम्बरं, श्लेष्मणि मण्डलकुष्टं, वातपित्तयोर्क्रम्यजिह्वं; पित्तश्लेष्मणोः पुण्डरीकं, श्लेष्ममारुतयोः सिध्मकुष्टं, सर्वदोषाभिवृद्धौ काकणकमभिनिर्वर्तते; एवमेष सप्तविधः कुष्टविशेषो भवति । स चैष भूयस्तरतमतः प्रकृतौ विकल्प्यमानायां भूयसर्वां विकारविकल्पसंख्यामापद्यते ॥ ५ ॥

The specific nature of the seven types of *kuṣṭhas* manifested due to the vitiation of four *dhatus*, viz. *toak* (skin on *rasadhātu*) etc., by the three *doṣas*, viz. *vāta* etc. is as follows : *Kapāla* type of *kuṣṭha* is manifested due to the dominance of *vāta*, *audumbara* due to *pitta*, *maṇḍala* due to *kapha*, *r̥syajihva* due to *vāta* and *pitta*, *pūṇḍarīka* due to *kapha* and *pitta*, *siddhma* due to *kapha* and *vāta* and *kākāra* due to the dominance of all the three *doṣas*. Depending upon the degree of affliction of these etiological factors and their permutation and combinations, this disease is of innumerable type. [5]

The very names of some types of *kuṣṭhas* are indicative of the characteristic features of the disease ; e. g. in *kapālakuṣṭha* the colour or the afflicted skin is like that of *kapāla* (broken piece of earthen pot). There are however, some other names like *siddhma* etc., which do not carry any such meaning and have their technical use in the classics to indicate certain type of skin disease. Under the circumstances explained in the commentary on para 4- above, the *ksudrakuṣṭhas* are included under *mahākuṣṭhas* hence they are not separately enumerated here.

Brief etiology of kuṣṭha :

तत्रेदं सर्वकुष्टनिदानं समासेनोपदेश्यामः—शीतोष्णव्यत्यासमनानुपूर्व्यो-
पसेवमानस्य तथा संतर्पणापतर्पणाभ्यवहार्यव्यत्यासं, मधुफाणितमत्स्यलकुच-
मूलककाकमाचीः सततमतिमात्रमजीर्णे च समश्नतः, चिलिचिमं च पयसा,
हायनकयवकचीनकोहालककोरदूषप्रायाणि चान्नानि क्षीरदधितकोलकुलत्थमा-
पातसीकुसुमस्नेहवन्ति, एतैरेवातिमात्रं सुहितस्य च व्यवायव्यायामसंतापान-
त्युपसेवमानस्य, भयश्रमसंतापोपहतस्य च सहसा शीतोदकमवतरतः, विदग्धं
चाहारजातमनुकृत्य विदाहीन्यभ्यवहरतः, छर्दि च प्रतिश्वतः, स्नेहांश्वातिचरतः,
त्रयो दोषाः युगपत् प्रकोपमापद्यन्ते; त्वगादयश्चत्वारः शैथिल्यमापद्यन्ते; तेषु
शिथिलेषु दोषाः प्रकृपिताः स्थानमधिगम्य संतिष्ठमानास्तानेव त्वगादीन् दूष-
यन्तः कुष्टान्यभिनिर्वर्तयन्ति ॥ ६ ॥

Now we shall describe the etiology of all types of *kuṣṭhas* in brief. All the three *doṣas* get simultaneously vitiated by the following :—

1. non-compliance of the prescribed rules with regard to the order of resorting to hot and cold regimens and intake of nourishing and depleting diets;
2. continuous intake of honey, pendium, fish, *lakuca* (*Artocarpus lakoocha* Roxb.), radish and *kukamaci* (*Solanum nigrum* Linn.) in large quantity while suffering from indigestion.
3. intake of cilicima (?) fish with milk;
4. intake of food mostly containing *hayanaka*, *yavaka* (a type of *Hordeum vulgare* Linn.) *cinaka*, *uddalaka* and *koradusa* (*Paspalum scorbiculatum* Linn.) along with milk, curd, butter milk, *kola* (*Zizyphus jujuba* Lam.) *kulatha* (*Dulichos biflorus* Linn.), *masa* (*Phaseolus radiatus* Linn.), *atasi* (*Linum usitatissimum* Linn.), *Kusumba* (*Carthamus tinctorius* Linn.), and unctuous substances;
5. excessive indulgence in cohabitation, physical exercise and exposure to heat after taking the above mentioned food to one's satisfaction;
6. entering into cold water immediately after one is afflicted with fear, exhaustion and grief;
7. intake of such food as would cause burning sensation without vomiting out the undigested food (in the stomach);
8. suppression of the urge for emesis; and
9. excessive oleation;

The above factors also loosen the four *dhatus*, viz. *twak* (skin or *rasadhātu*) etc., The aggravated *dosas* localised in these *dhatus* vitiate the latter due to their looseness and so produce *kuṣṭhas*. [6]

Hot and cold regimens should be adopted in a particular order. Adoption of cold regimens immediately after hot regimens and *vice versa* and also adoption of cold and hot regimens in inappropriate time leads to the causation of *kuṣṭha*.

Premonitory symptoms of kuṣṭha :

तेषामिमानि पूर्वरूपाणि भवन्ति; तद्यथा—अस्वेदनमतिस्वेदनं पारुष्यमति-
श्यक्षणता वैवर्ण्यं कण्डूर्निस्तोदः सुस्राता परिदाहः परिहर्षो लोमहर्षः खरत्वमूष्मा-
यणं गौरखं श्वयथूर्वीसपर्गमनमभीक्षणं च काये कायच्छिद्देषुपदेहः पक्षदग्धदष्ट-
भग्नक्षतोपस्थलितेष्वतिमात्रं वेदना स्वल्पानामपि च ब्रणानां दुष्टिरसंरोहणं
चेति ॥ ७ ॥

Premonitory symptoms of *kuṣṭhas* are lack of perspiration or excessive perspiration, roughness of excessive smoothness, discoloration, itching, pricking pain, numbness, burning sensation, tingling sensation, horripilation, coarseness, production of heat, heaviness, frequent occurrence of oedema and acute spreading, sticking of excreta in the body specially in the orifices, excessive pain in case of suppuration, burn, bite, fracture and dislocation, putrifaction and non-healing of even small wounds. [7]

Signs and symptoms of kuṣṭha :

ततोऽनन्तरं कुष्टान्यभिनिर्वर्तन्ते, तेषामिदं वेदनावर्णसंस्थानप्रभावनामविशेषविक्षानं भवति; तद्यथा—रूक्षारूणपूरुषाणि विषमविसृतानि खरपर्यन्तानि तनून्युद्वृत्तवाहस्तनूनि सुस्पवत्सुस्पानि हृषितलोमाचितानि निस्तोदधहुलान्यल्पकण्डाहपूर्यलसीकान्याशुगतिसमुत्थानान्याशुभेदीनि जन्तुमन्ति कृष्णारूणकपालवर्णानि च कपालकुष्टानीति विद्यात् (१);

ताप्राणि ताप्रखररोमराजीभिरवनद्वानि वहलानि वहुवहलपूरक्तलसीकानि कण्डक्लेदकोथदाहपाकवन्त्याशुगतिसमुत्थानभेदीनि ससंतापक्षिमीणि पकोदुम्बरफलवर्णान्यौदुम्बरकुष्टानीति विद्यात् (२);

स्निग्धानि गुरुण्युत्सेधवन्ति श्लक्षणस्थिरपीतपर्यन्तानि शुक्ररक्तावभासानि शुक्रोमराजीसन्तानानि वहुवहलशुक्रापिच्छिलसावीणि वहुक्लेदकण्डक्लिमीणि सक्तगतिसमुत्थानभेदीनि परिमण्डलानि मण्डलकुष्टानि विद्यात् (३);

परुपाण्यरुणवर्णानि वहिरन्तःश्यावानि नीलपीतताप्रावभासान्याशुगतिसमुत्थानान्यल्पकण्डक्लेदक्लिमीणि दाहभेदनिस्तोद(पाक)वहुलानि शूक्रोपहतोपमवेदनान्युत्सक्षमध्यानि तनुपर्यन्तानि कर्कशपिडकाचितानि दीर्घपरिमण्डलान्यृज्जिह्वाहृतीनि ऋष्यजिह्वानीति विद्यात् (४);

शुक्ररक्तावभासानि रक्तपर्यन्तानि रक्तराजीसिरासन्ततान्युत्सेधवन्ति वहुवहलरक्तपूर्यलसीकानि कण्डक्लिमिदाहपाकवन्त्याशुगतिसमुत्थानभेदीनि पुण्डरीकपलाशसंकाशानि पुण्डरीकाणीति विद्यात् (५);

परुपारुणानि विशीर्णवहिस्तनून्यन्तःस्निग्धानि शुक्ररक्तावभासानि वहून्यरुपवेदनान्यल्पकण्डाहपूर्यलसीकानि लघुसमुत्थानान्यल्पभेदक्लिमीण्डलावुपुप्सङ्काशानि सिध्मकुष्टानीनि विद्यात् (६);

काकणन्तिकावर्णान्यादो पश्चात् सर्वकुष्टलिङ्गसमन्वयानि पापीयसा सर्वकुष्टलिङ्गसंभवेनानेकवर्णानि काकणानीति विद्यात्। तान्यसाध्यानि, साध्यानि पुनरितराणि ॥ ८ ॥

Thereafter various types of *kuṣṭhas* are manifested. The following are their characteristic pain, colour, shape, specific manifestations and names :

1. *Kapala* type of *kuṣṭhas* are dry, reddish in colour, rough, uneven in shape, having rough edges, thin and slightly elevated in the perifery. There is excessive numbness. They are covered with horrent hairs and associated with excessive pain. There is less of itching, burning sensation, discharge of pus and serus exudation. Their causation, manifestation and ulceration are instantaneous. They are infested with germs and appear like pieces of earthern pot having black or reddish colour.

2. *Audumbara* type of *kuṣṭhas* are of coppery colour and they are covered with hair of coppery colour. They are very thick and associated with thick pus, blood and serus exudation in large quantity. They are associated with itching, sticky exudation, sloughing, burning sensation and suppuration. Their causation, manifestation and ulceration are instantaneous. There is rise in temperature and they are infested with germs. They are like the ripe fruit of *udumbara* (*Ficus racemosa* Linn.) in colour.

3. *Mandala* type of *kuṣṭhas* are unctuous, heavy, swollen, having smooth fixed and yellow border. They are white and red in colour and are covered with white hairs in large quantity. There is excessively thick and slime exudation of white colour. They are associated with excessive sticky exudation and itching, and infested with numerous germs. Their causation, manifestation and ulceration are sluggish and they are round in shape.

4. *Rṣyajihva* type of *kuṣṭhas* are rough, reddish in colour and dark brown in the centre as well as in the perifery. They are of blue, yellow and coppery shade. Their causation and manifestation are instantaneous. There is less of itching, sticky exudation and germs. They are associated with excessive burning sensation, cutting and piercing pain and suppuration. There is pain as if inflicted with bristles. In the centre, they are elevated and their peripheries are thin. They are associated with rough pimples and are elongated and round in shape like the tongue of a deer.

5. *Puṇḍarīka* type of *kuṣṭhas* are of white and red shade. Their borders are red, and they are covered with red lines

and blood vessels. There is swelling and discharge of thick blood, pus and serum in excessive quantity. There is itching, germ infestation, burning sensation and suppuration. Their causation, manifestation and ulceration are instantaneous. They appear like the petals of lotus flower.

6. *Sidhma* type of *kuṣṭhas* are rough and reddish in colour. In the periphery they are fissured and thin and in the centre, they are smooth. They are of white and red shade. They appear in large number and there is less of pain, itching, burning sensation, pus and serum discharge. Their causation and ulceration are sluggish and there is less of germ infestation. They appear like the flower of *alābu* (*Lagenaria siceraria* standl.)

7. *Kākana* type of *kuṣṭhas* are of the colour of *kakaṇantikā* (*Abrus precatorius* Linn.) in the beginning and subsequently symptoms of all types of *kuṣṭhas* are manifested there. Because of the combination of these painful characteristics of all other types of *kuṣṭhas*, those belonging to *kakaṇantikā* category are of many colours, *kuṣṭhas* belonging to this category are incurable; others curable. [8]

Sidhmakuṣṭha is different from *sidhmapuspikākuṣṭha* and if with a view to describe this latter type of *kuṣṭha* that in the *Sūruta*, *sidhmakuṣṭha* has been enumerated in the class of minor (*ksudra*) *kuṣṭhas*. In the *Sūruta*, *dadru* type of *kuṣṭha* is enumerated under the class of major (*mahā*) *kuṣṭhas* because of their excessively chronic nature. In this work, however, *dadrukuṣṭha* is enumerated under the class of minor *kuṣṭhas* because it does not afflict *dhātus* one after the other and also because it is not associated with much pain. Excessive pain is verily the characteristic feature of this type of *kuṣṭha*. This is emphasised by the use of the term '*pāpiyasā*' and repetition of the term '*sarvakuṣṭhalīṅga*'.

Prognosis-wise nature of kuṣṭha :

तत्र यदसाध्यं तदसाध्यतां नातिवर्तने, साध्यं पुनः किञ्चित् साध्यतामति-
वर्तते कदाचिदपचारात्। साध्यानि हि षट् काकणकवर्ज्यान्यचिकित्स्यमाना-
न्यपचारतो वा दौषीरभिष्यन्दमानान्यसाध्यतामुपयान्ति ॥ ९ ॥

Incurable types of *kuṣṭhas* do not overcome their incurability. But the curable ones overcome their curability if the patient resorts to unwholesome regimens even after the manifestation of the disease. Excluding *kakaṇantikā*, six other

types of these *kuṣṭhas* which are normally curable may become incurable in the event of the saturation of the vitiated *dōṣas* due to the lack of proper treatment or resort to unwholesome regimen. [9]

Complications caused by negligence :

साध्यानामपि हुपेक्ष्यमाणानां त्वचांसशोणितलसीकाकोथङ्गेदसंस्वेदजाः
क्रिमयोऽभिमूर्छन्ति; ते भक्षयन्तस्त्वगदीन् दोषाः पुनर्दूषयन्त इमानुपद्रवान्
पृथक् पृथगुत्पादयन्ति—तत्र वातः श्यावारुणवर्णं परुषतामपि च रौक्ष्यशूलशोष-
तोदवेपथुहर्षसङ्गोचायासस्तम्भसुरिभेदभङ्गान्, पित्तं दाहस्वेदङ्गेदकोथस्वाव-
पाकरागान्, श्लेष्मा त्वस्य श्वैत्यशैत्यकण्ठस्थैर्यगौरवोत्सेधोपस्नेहोपलेपान्, क्रिम-
यस्तु त्वगार्दीश्वतुरः सिराः स्नायूश्वास्थीन्यपि च तरुणान्याददते ॥ १० ॥

अस्यां चैवावस्थायामुपद्रवाः कुष्ठिनं स्पृशन्ति; तदथा—प्रस्त्रवणमङ्गभेदः
पतनान्यज्ञावयवानां तृष्णाज्वरातीसागदाहदौर्दत्यारोचकाविपाकाश्च, तथा-
विधमसाध्यं विद्यादिति ॥ ११ ॥

Germs born on the slough of the skin, muscle tissue, blood and serus exudation, other softened tissues and sweat, appear even in the curable types of *kuṣṭhas* when their treatment is neglected. While infesting the skin etc., these germs further vitiate the *dōṣas* leading to complications which are described below separately (for each *dōṣa* and germs).

1. Complication due to *vata* are blackish brown or reddish colour, roughness, dryness, piercing pain, emaciation, pricking pain, trembling, horripilation, contraction, exhaustion, stiffness, numbness, ulceration and fissures.

2. Complications due to *pitta* are burning sensation, sweating, softening of tissues, putrifaction, serus exudation, suppuration and redness.

3. Complications due to *kapha* are whiteness, coldness, itching, steadiness, heaviness, swelling, unctuousness and adhesion.

4. Germs afflict (eat away) the four *dhātus* viz., skin etc., vessels, ligaments, bones and cartilages.

During this stage, the patient shares the following complications :—

excessive exudation, ulceration of organs, sequestration of the organs of the body, thirst, fever, diarrhoea, burning

sensation, weakness, anorexia and indigestion. A patient having such complications is incurable. [10-11]

Warning regarding treatment :

भवन्ति चात्र—

साध्योऽयमिति यः पूर्वं नरो रोगमुपेक्षते ।
स किञ्चित्कालमासाद्य मृत एवावबुध्यते ॥ १२ ॥
यस्तु प्राणेव रोगेभ्यो रोगेषु तरुणेषु वा ।
भेषजं कुरुते सम्यक् स चिरं सुखमशुते ॥ १३ ॥
यथा ह्यल्पेन यत्नेन छिद्यते तरुणस्तरुः ।
स एवातिप्रवृद्धस्तु छिद्यते अतिप्रयत्नतः ॥ १४ ॥
एवमेव विकारोऽपि तरुणः साध्यते सुखम् ।
विवृद्धः साध्यते कृच्छ्रादसाध्यो वाऽपि जायते ॥ १५ ॥

Thus it is said :

The individual who neglects the disease in the beginning thinking it as curable, comes to know of the reality while approaching death after some time. The individual who resorts to proper treatment of the disease before it is manifested or in its early stage, enjoys happiness for long.

As a young tree can be cut very easily and its cutting involves excessive effort when the tree is well grown, so also, the disease is easily curable in its primary stage; it becomes incurable or difficult for cure as and when it reaches the advanced stage. [12-15]

Subject matter :

तत्र श्लोकः—

संख्या द्रव्याणि दोषाश्च हेतवः पूर्वलक्षणम् ।
रूपाण्युपद्रवाश्चोक्ताः कुष्ठानां कौष्ठिके पृथक् ॥ १६ ॥

To sum up :

Number, materials, *dosas* causative factors, premonitory symptoms, (actual) symptoms, complications of various types of *kuṣṭhas*—all these are described in this chapter. [16]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने कुष्ठनिदानं
नाम पञ्चमोऽध्यायः ॥ ५ ॥

Thus ends the fifth chapter on the Diagnosis of *Kuṣṭha* (obstinate skin disease including leprosy) of the section on the “Diagnosis of Diseases” (*Nidānasthāna*) of Agniveśas’ work as redacted by Caraka.

षष्ठोऽध्यायः

CHAPTER VI

अथातः शोषनिदानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the “Diagnosis of Consumption.”

Thus said Lord Atreya. [1-2]

Etiology of consumption :

इह खलु चत्वारि शोषस्याथतनानि भवन्ति; तद्यथा—साहसं संधारणं क्षयो विषमाशनमिति ॥ ३ ॥

There are four (categories of) etiological factors of consumption viz., (1) rash behaviour, (2) suppression of the natural urges, (3) wasting and (4) irregular dieting. [3]

The emphasis laid here on the four fold classification of etiological factors is intended to convey the sense that all the causative factors of this disease are included under these four categories.

Details of rash behaviour as etiological factor :

तत्र साहसं शोषस्याथतनमिति यदुक्तं तदनुव्याख्यास्यामः—यदा पुरुषो दुर्बलो हि सन् बलवता सह विगृह्णति, अतिमहता वा धनुषा व्यायच्छति, जल्यति वाऽप्यतिमात्रम्, अतिमात्रं वा भारमुद्ध्रहति, अप्सु वा स्वते चातिदूरम्, उत्सादनपदाधातने वाऽतिप्रगाढमासेवते, अतिप्रकृष्टं वाऽध्वानं द्रुतमभिपतति, अभिहन्तते वा, अन्यद्वा किञ्चिदेवंविधं विषममितमात्रं वा व्यायामजातमारभते, तस्यातिमात्रेण कर्मणोः क्षण्यते । तस्योरःक्षतमुपस्थिते वायुः । स तत्रावस्थितः श्लेष्माणमुरःस्थमुपसंगृहा पित्तं च दूषयन् विहरत्यूर्ध्वमधस्तिर्यक् च । तस्य योऽशः शरीरसन्धीनाविशिति तेनास्य जूम्भाऽङ्गमर्दो ज्वरश्चोपजायते, यस्त्वामाशयमभ्युपैति तेन रोगा भवन्ति उरस्या अरोचकश्च, यः कण्ठमभिप्रदत्ते कण्ठस्तेनोद्धवंस्यते स्वरश्चावसीदति, यः प्राणवहानि श्लोतांस्यन्वेति तेन श्वासः प्रतिश्यायश्च जायते, यः शिरस्यवतिष्ठते शिरस्तेनोपहन्यते; ततः क्षणनाचैवोरसो विषमगतित्वाच वायोः कण्ठस्य चोद्धवंसनात कासः सततमस्य संजायते, स कासप्रसङ्गादुरुसिः क्षते शोणितं श्लीवति, शोणितागमनाच्चास्य दौर्बल्यमुपजायते, एवमेते साहसप्रभवाः साहसिकमुपद्रवाः स्पृशन्ति । ततः स उपशोषणरैतैरुपद्रवैरुपद्रुतः शनैः शनैरुपशुभ्यति । तस्मात् पुरुषो मतिमान् बलमात्मनः समीक्ष्य तदनुरूपाणि कर्मण्यारभेत कर्तुं; बलसमाधानं हि शरीरं, शरीरमूलश्च पुरुष इति ॥ ४ ॥

भवति चात्र—

**साहसं वर्जयेत् कर्म रक्षजीवितमात्मनः ।
जीवन् हि पुरुषस्त्वश्च कर्मणः फलमश्चुते ॥ ५ ॥**

We shall now discuss "rash behaviour" as an etiological factor of consumption. When a weak person fights with a stronger one or exerts with too big a bow or speaks too much, or carries too big a load or swims in water for a long distance or resorts to forceful massage and application of pressure by feet or runs fast to cover a long distance or subjects himself to assault or indulges in such other irregular regimens and physical exercises in excess, his chest gets injured due to such excesses. The injured chest gets saturated with (vitiated) *vata*. The local *vata* affects the *kapha* normally residing in the chest, vitiates *pitta* and moves upwards, downwards and sideways. The portion which affects the joints of the body causes yawning, malaise and fever. The portion which affects the *āmaśaya* (stomach including small intestine), leads to anorexia and the disease of the chest (like palpitation and cardiac pain). The portion which affects throat causes *kanthodhvavatsa* (irritation of the throat) and *svarabheda* (hoarseness of voice). The portion which affects the channels carrying the vital air (*prāṇa*) leads to dyspnoea and cold. The portion which affects the head causes damage to that part. Thereafter, due to injury to the chest, irregular movement of the *vata* and irritation of the throat, the patient suffers from constant coughing. Due to continued coughing there is (further injury to the chest and the patient spits blood. Due to blood spitting, he becomes weak. These are the complications arising out of rash behaviour of an individual. These emaciating complications lead to cachexia by and by. So a wise person should perform various activities with due regard to his own strength. The body is sustained by strength and the individual (Empirical self) by the body.

Thus it is said :—

The individual enjoys the desired fruit of his action only when he is alive. Therefore, one desirous of long life should avoid rash behaviour. [4-5]

When a portion of the vitiated *vata* affects the *āmaśaya* (stomach including the small intestine), it produces diseases of the chest because the latter is adjacent to the former.

Details of suppression of natural urges as etiological factor.

संधारणं शोषस्यायतनमिति यदुक्तं तदनुव्याख्यास्यामः—यदा पुरुषो राज-
समीपे भर्तुः समीपे वा गुरोर्वा पादमूले द्युतसभमन्यं वा सतां समाजं खीमध्यं
वा समनुप्रविश्य यानैर्वाऽप्युच्चावचैरभयान् भयात् प्रसङ्गाद्वैमत्त्वान्निष्ठित्वाद्वा
निरुहद्यागतान् वातेमूत्रपुरीप्रवेगान् तदा तस्य संधारणाद्वायुः प्रकोपमापद्यते,
स प्रकृष्टिः पित्तश्लेष्माणौ समुदीर्योर्ध्वमध्यस्तिर्यक् च विहरति; ततश्चांशविशेषेण
पूर्ववच्छीरीरावयवविशेषं प्रविश्य शूलमुपजनयति, भिनन्ति पुरीषमुच्छोषयति
वा, पार्वेण चातिरुजति, असाववमृदनाति, कण्ठसुरश्चावधमति, शिरश्चोपहन्ति,
कासं इवासं ज्वरं स्वरभेदं प्रतिश्यायं चोपजनयति; ततः स उपशोषणैरतैरुपद्रवै-
रुपद्रुतः शनैः शनैरुपशुष्यति । तस्मात् पुरुषो मतिमानात्मनः शारीरेष्वेव योग-
क्षेमकरेषु प्रयत्नेत विशेषेण; शरीरं ह्यस्य मूलं, शरीरमूलश्च पुरुषो भवति ॥ ६ ॥

भवति चात्र—

सर्वमन्यत् परित्यज्य शरीरमनुपालयेत् ।
तदभावे हि भावानां सर्वाभावः शरीरिणाम् ॥ ७ ॥

We shall now explain “suppression of natural urges” as the etiological factor of consumption. When an individual suppresses the manifested urges for passing flatus, urine and stool because of apprehension, pre-occupation, bashfulness or hatred in front of the king or master or (while sitting) at the feet of the preceptor or while gambling or attending meetings of gentlemen or in the midst of women, or while travelling in high or low vehicles, then *vata* in his body gets aggravated. This aggravated *vata* carrying along with it the provoked *pitta* and *kapha* moves upwards, downwards and sideways. Different portions of *vata* enter into different parts of the body as described before (in para 4) and cause colic pain, diarrhoea, drying up of stool, excessive pain in the sides of the chest, grinding pain in the shoulder region, increased respiratory movement in the chest and throat, damage to the head, coughing, dyspnoea, fever, hoarseness of voice and coryza. These emaciating complications lead to cachexia by and by. Therefore a wise person should make special efforts not to suppress the manifested urges with a view to sustaining his body. The body constitutes the root cause of the well being of the individual and the very production of the body is dependant upon the individual self.

Thus it is said :—

Leaving everything else, one should maintain the body. For if there is no body, there is nothing that can be made available to the individual. [6-7]

The term 'yogaksemakara' means factors, the observance of which sustains the body. Non-suppression of manifested urges of urine, stool etc., help sustain the body. These somatic factors also regulate the psychic factors in their proper functioning. One should, first of all, try for the welfare of his own body in preference to others. It is with a view to emphasising the paramount position of the self that the term 'ātmanah' is used here. As body is the substratum of all phenomena in living beings, so the individual should make efforts for the sustenance of his own body even in preference to his own mind and also the body of other individuals—the latter two can be attempted subsequently. One cannot have proper functioning of his own mind nor can he help in the wellbeing of other individuals if his own body is handicapped.

The term 'yogaksemakara' can be explained in a different way also. 'yoga' means the attainment of excellent strength as well as complexion and 'kṣema' indicates the prevention of disease. Thus the non-suppression of natural urges, according to this explanation, helps in the promotion of strength and complexion as well as prevention of diseases in the individual.

The question arises whether in view of the predominance of the body in the sustenance of the *elan vital*, the individual self can be subjected to a sub-ordinate position. The intention of the clause "शरीरमूलश्च पुरुषो भवति" is to refute this argument. The idea is that if the body plays a predominant role in the sustenance of the *elan vital*, the individual self is the very root cause of the production of the body inasmuch as, but for his past action and the resultant enjoyability of happiness or misery, the body would not have been produced.

Details of wasting as etiological factor :

क्षयः शोषस्यायतनमिति यदुक्तं तदनुव्याख्यास्यामः—यदा पुरुषोऽतिमात्रं शोकचिन्तापरिगत हृदयो भवति, ईर्ष्योत्कण्ठाभयक्रोधादिभिर्वा सगाविश्यते, कृशो वा सन् रुक्षाभ्यपानसेवी भवति, दुर्बलप्रकृतिरनाहारोऽल्पाहारो वा भवति, तदा तस्य हृदयस्थायी रसः क्षयमुपैति; स तस्योपक्षयाच्छोषं प्राप्नोति, अप्रतीकाराञ्चानुबध्यते यक्षमणा यथोपदेक्ष्यमाणरूपेण (१);

We shall explain 'wasting' as an etiological factor for consumption. *Rasa* residing in the heart of an individual gets diminished due to the following :—

1. affliction of the heart of the individual with excessive grief and worries;
2. affliction with jealousy, anxiety, fear, anger etc.;

3. intake of ununctuous diets and drinks by emaciated individuals; and

4. intake of food in lesser quantity or fasting by persons who are weak by nature.

Due to this diminution of *rasa*, the individual is afflicted with consumption and if this condition is not neutralized, it leads to the manifestation of tuberculosis in a manner to be described later. (1)

Rasa which resides in the heart is of the *posya* (which is nourished, as distinct from *posaka* which provides nourishment) type. Some others interpret this as *ojas*. The procedure through which this disease is manifested is being explained in the next paragraph.

Loss of semen due to over-indulgence and its consequences :

यदा वा पुरुषोऽतिहाष द्वितिप्रसङ्गमारभते, तस्याति-
मात्रप्रसङ्गाद्रेतः क्षयमेति । क्षयमपि चोपगच्छति रेतसि यदि मनः खीभ्यो नैवास्य
निवर्तते, तस्य चातिप्रणीतसङ्कल्पस्य मैथुनमाप्यमानस्य न शुक्रं प्रवर्तते ऽति-
मात्रोपक्षीणरेतस्त्वात्, तथा इस्य वायुर्वायच्छमानशारीरस्यैव धमनीरनुग्रविश्य
शोणितवाहिनीस्ताभ्यः शोणितं प्रच्यावयति, तच्छुक्रक्षयादस्य पुनः शुक्रमार्गेण
शोणितं प्रवर्तते वातानुसृतलिङ्गम् । अथास्य शुक्रक्षयाच्छोणितप्रवर्तनाच्च सन्ध्ययः
शिथिलीभवन्ति, रौक्ष्यमुपजायते, भूयः शारीरं दौर्बल्यमाविशति, वायुः प्रकोपमा-
पद्यते; स प्रकुपितो वशिकं शारीमनुसर्पन्तुदीर्यं श्लेष्मपित्ते परिशोषयति मांस-
शोणिते, प्रच्यावयति श्लेष्मपित्ते, संरुजति पार्श्वं, अवमृद्नात्यसौ, कण्ठमुद्धवं-
सति, शिरः श्लेष्माणं मुपत्क्लेश्य प्रतिपूरयति श्लेष्मणा, सन्धींश्च प्रपीडयन् करो-
त्यङ्गमर्दमरोघकाविपाकौ च, पित्तश्लेष्मोत्क्लेशात् प्रतिलोमगत्वाच्च वायुज्वरं कासं
श्वासं स्वरभेदं प्रतिश्यायं चोपजनयति, स कासप्रसङ्गादुरासिक्षते शोणितं ष्टीवति,
शोणितगमनाचास्य दौर्बल्यमुपजायते, ततः स उपशोषणैरतैरुपद्रवैरुपद्रुतः शानैः
शानैरुपशुष्यति । तस्मात् पुरुषो मतिमानात्मनः शारीरमनुरक्षञ्चुक्रमनुरक्षेत् ।
परा होषा फलनिर्वृत्तिराहारस्येति ॥ ८ ॥

भवति चात्र—

आहारस्य परं धाम शुक्रं तद्रक्ष्यमात्मनः ।

क्षयो हस्य बहून् रोगान्धरणं वा नियच्छति ॥ ९ ॥

When an individual due to excessive attachment borne out of excessive passion indulges in sexual act in excess, his semen is diminished due to over indulgence. If his mind is not detached from woman even after the diminution of semen, and he is still determined to indulge in sexual act, he will have no ejaculation of semen during cohabitation because of his semen having been already exhausted. During the process

of coitus, *vata* would enter the blood vessels of this individual leading to the ejaculation of blood; the blood being vitiated by *vata*, would then enter the seminal channels because of the diminution of semen. Due to the diminution of semen, and discharge of blood, the joints would become loose, there would be dryness and further weakness in the body and aggravation of *vata*. The vitiated *vata* while spreading all over the body from where semen is exhausted and aggravating *kapha* and *pitta*, would dry up (reduces) muscle tissues and blood, eliminate *kapha* (phlegm) and *pitta* (bile), produce pain in the sides of the chest and grinding pain in the shoulders, irritate the throat, till up the head with *kapha* after vitiating the latter. It would also produce malaise, anorexia and indigestion after afflicting the joints. Due to the vitiation of *pitta* and *kapha* and adoption of opposite course, *vata* would then produce fever, cough, dyspnoea, hoarseness of voice and coryza. Due to the injury in the chest because of continued coughing the patient would spit blood. Due to the loss of blood he would become weak. These emaciating complications would thus lead to cachexia by and by. Therefore a wise man should preserve semen with a view to protecting his own body because it (semen) is the outcome par excellence of the food taken.

Thus it is said :—

Semen is the outcome par excellence of food. One should preserve his own semen because its diminution leads to many diseases and even death. [8-9]

Semen is treated as the outcome par excellence because it is the most purified form. Diminution of other *dhatus* (tissue elements) may also cause consumption but the process of manifestation of the disease due to the diminution of semen is specially mentioned here because of its importance. Diminution of blood due to be the causative factor for tuberculosis.

Details of irregular dieting as etiological factor :

विषमाशनं शोषस्यायतनमिति यदुक्तं, तदुब्द्यास्यास्यामः—यदा पुरुषः पानाशनभक्ष्यलेहोपयोगान् प्रहृतिकरणसंयोगराशिदेशकालोपयोगसंस्थोपशय-विषमानासेवते तदा तस्य तेभ्यो वातपिचक्षेष्याणो वैषम्यपापद्यन्ते; ते विषमाः शरीरमनुसृत्य यदा शोतसामयनमुज्जानि प्रतिवार्यचित्पृष्ठते तदा जन्तुर्यदाहार-आतमाहरति तत्तदस्य मूत्रपुरोषमेघोपजायते भूयिष्टं नान्यस्तथा शरीधातुः; स पुरीषोपषम्भादर्तयति, तस्माच्छुच्यते विशेषेण पुरीषमनुरक्ष्यं तथा अन्येषामिति-

कृशदुर्बलानां; तस्यानाप्यायमानस्य विषमाशनोपचिता दोषाः पृथक् पृथगुपद्रवैर्युज्ञान्तो भ्यः शरीरमुपशोषयन्ति । तत्र वातः शलमङ्गमदं कण्ठोदध्वसनं पार्श्वं संरुजनमंसावमदं स्वरभेदं प्रतिश्यायं चोपजनयति; पित्तं ज्वरमतीसारमन्तर्दाहं च; श्लेष्मा तु प्रतिश्यायं शिरसो गुह्तवर्मरोचकं कासं च, स कासप्रसङ्गादुरसि क्षते शोणितं निष्ठीवति, शोणितगमनाच्चास्य दोर्बल्यमुपजायते । एवमेते विषमाशनोपचितात्क्रयो दोषा राजयक्षमाणमभिनिर्वर्तयन्ति । स तैरुपशोषणैरुपद्रवैरुपद्रुतः शनैः शनैः शुष्यति । तस्मात् पुरुषो मतिमान् प्रकृतिकरणसंयोगराशिदेशकालोपयोगसंस्थोपशयादविषममाहारमाहरेत् ॥ १० ॥

भवति चात्र—

हिताशी स्यान्मिताशी स्यात्कालभोजी जितेन्द्रियः ।
पश्यन् रोगान् बहून् कषान् बुद्धिमान् विषमाशनात् ॥ ११ ॥

We shall explain the “irregular dieting” as an etiological factor for consumption. When an individual takes different types of drinks and diets, viz. drinkables, eatables, chewables and lickables without paying proper heed towards their nature, mode of preparation, combination, quantity, locality, time, diatetic rules and wholesomeness for the individual, then *vata*, *pitta* and *kapha* in his body get imbalanced due to this irregularity. These imbalanced *dosas* spreads all over the body and when they get localized in view of the obstruction to the entrances of the channels of circulation, then whatever food is taken by the individual is mostly converted into stool and urine rather than *dhatus* (tissue elements) of the body. The afflicted individual is sustained by the retention of the stool. Therefore, the fecal matter of individuals suffering from consumption or others who are extremely emaciated or weak should be retained. *Dosas* accumulated due to irregular dieting, separately produce the following complications in the body, already depleted, resulting in further emaciation. *Vata* produces colic pain, malaise, irritation in throat, pain in the sides of the chest, grinding pain in the shoulders, hoarseness of voice and coryza. *Pitta* causes fever, diarrhoea and burning sensation inside the body; and *kapha* causes coryza, heaviness of head, anorexia and coughing. Due to excessive coughing there is injury to the chest (lungs) and the patient spits blood. Because of the discharge of blood he becomes weak. Thus the three *dosas* accumulated due to irregular dieting manifest the disease *Rajayakṣma* (tuberculosis). The emaciating complications lead to cachexia by and by.

Therefore, a wise person should take such diets as are not unwholesome from the point of view of nature, mode of preparation, combination, quantity, locality, time, dietetic rules and the wholesomeness for the individual who takes them.

Thus it is said :—

In view of the association of painful diseases with irregular dieting, a wise person who has control over his senses should take wholesome food in proper quantity and in proper time. [10-11]

Nature, combination etc., of food articles will be described in greater detail in *Vimāna* 1:21-22. The utility of retaining fecal matter in the body of a patient suffering from tuberculosis is further explained in *Cikitsā* 8:88.

Nomenclature of disease :

एतैश्चतुर्भिः शोषस्यायतनैरूपसेवितैर्वार्तपित्तश्लेष्माणः प्रकोपमापद्यन्ते ।
ते प्रकुपिता नानाविधैरूपद्रवैः शरीरमुपशोषयन्ति । तं सर्वरोगाणां कष्टतमत्वा-
द्राजयक्षमाणमाचक्षते भिषजः; यस्माद्गा पूर्वमासीद्वगवतः सोमस्योद्गुराजस्य
तस्माद्राजयक्षमेति ॥ १२ ॥

The four causative factors of consumption, when resorted to, lead to the aggravation of *vata*, *pitta* and *kapha*. These aggravated *dosas* deplete the body due to varieties of complications. This condition is known as *Rājayakṣmā* (lit. king of diseases or disease of the king) because of its most formidable nature among all the diseases and also because according to the mythological story, it afflicted the moon who is the king of stars. [12]

The term '*Rājayakṣmā*' is composed of two words, viz. *rājan* meaning the king and *yakṣman* meaning the disease. This term grammatically can be interpreted in two ways, viz. the king among diseases and the king's (of the moon who is the king of stars) disease. Both these interpretations are illustrated in the above paragraph.

Premonitory symptoms :

तस्येमानि पूर्वरूपाणि भवन्ति; तद्यथा-प्रतिश्यायः; क्षवथुरभीक्षणं, श्लेष्म-
प्रसेकः, मुखमाधुर्यम्, अनन्त्राभिलाषः, अन्नकाले चायासः, दोषदर्शनमदोषेष्वल्प-
दोषेषु पा भावेषु पात्रोदकान्नसूपापूर्पदंशपरिवेशेषु, भुक्तवतश्चास्य हृङ्खासः;
तयोळेखनमप्याहारस्यान्तरान्तरा, मुखस्य पादयोश्च शोफः, पाण्योश्चावेक्षण-
मत्यर्थम्, अक्षणोः श्वेतावभासता चातिमात्रं, बाहोश्च प्रमाणजिङ्घासा, रुक्कामता,
निर्घृणित्वं, धीभत्सदर्शनता चास्य कार्ये, स्वप्ने चाभीक्षणं दर्शनमनुदकानामुद-
कस्थानानां शून्यानां च ग्रामनगरनिगमजनपदानां शुष्कदग्धभग्नानां च वनानां

कृकलासमयूरवानरशुकसर्पकाकोल्दुकादिभिः संस्पर्शनमधिरोहणं यानं वा श्वोष्ट-
खरवरा हैः केशास्थिभस्मतुषाङ्गाराशीनां चाधिरोहणमिति (शोषपूर्वरूपाणि
भवन्ति) ॥ १३ ॥

Its premonitory symptoms are (1) coryza, (2) frequent sneezing, (3) excessive salivation, (4) sweet taste in the mouth, (5) disinclination for food, (6) feeling of tiredness during the meal time, (7) finding fault with such things as are without any fault or with negligible fault specially that of utensils, water, food soup, cake, *upadāmṣa* (things which are chewed before taking food), and caterers, (8) nausea after taking food, (9) vomiting even during the course of taking meals, (10) swelling of the face and feet, (11) frequent inspection of hands, (12) excessive whiteness of eyes, (13) enquiry about the measurement of arms, (14) passionate attachment with women, (15) cruel disposition, (16) freightful appearance (discolouration and foul smell) in his body, and (17) appearance of the following in dreams :

- (a) empty water reservoirs;
- (b) deserted villages, towns, cities and countries;
- (c) dried, burnt and denuded forests;
- (d) coming into physical contact with chameleon, peacocks, monkeys, parrots, serpents, crows, owls etc;
- (e) riding over dogs, camels, donkeys and pigs or vehicles drawn by them;
- (f) climbing over heaps of hair, bones, ash, chaff and fire brands.

(These are the pre-monitory symptoms of consumption). [13]

Praliśyāya (coryza) etc., mentioned here as the premonitory symptoms of consumption are mostly produced due to the association of the *kapha* in the disease. When *vāta* plays the dominant role in the manifestation of this disease, then its association with the *kapha* residing in the chest produces such symptoms. It is due to the specific characteristics of the locality (chest) that *kapha* gets vitiated here. Because of the dominance of *kapha* in the pathogenesis of this disease (consumption or *sōṣaroga*) some scholars name it as “*Sleṣmaroga*”.

The dream of the individual going to south while riding a camel or a donkey, is a bad prognostic sign but in the dream which occurs as a pre-monitory symptom of consumption there is no restriction of the direction

towards which the individual goes by riding a camel or donkey. It is only in some diseases like tuberculosis or consumption and Insanity that characteristic dreams form the premonitory symptoms. In other diseases like *jvara* (fever) etc., where no such description is given in the classics, dreams do not occur as premonition. The dream of the patient taking wine with ghosts is indicative of impending death preceded by fever—cf. Indriya 5:9. But this is only a bad prognostic sign and does not constitute the premonitory symptoms of fever.

Eleven symptoms of consumption :

अत ऊर्चमेकादशरूपाणि तस्य भवन्ति, तथा—शिरसः परिपूर्णत्वं, कासः, श्वासः, स्वरभेदः, इलेघ्नश्छदनं, शोणितष्टीचनं, पार्श्वसंरोजनम्, अंसाव-मर्दः, ज्वरः, अतीसारः, अरोचकश्चेति ॥ १४ ॥

Thereafter eleven symptoms of this disease are manifested. They are (1) heaviness of head, (2) coughing, (3) dyspnoea, (4) hoarseness of voice, (5) vomiting of phlegm, (6) spitting of blood, (7) pain in the sides of the chest, (8) grinding pain in the shoulder, (9) fever, (10) diarrhoea and (11) anorexia. [14]

These eleven symptoms are manifested only when the disease *rājayakṣma* (tuberculosis) is fully manifested. In the section on 'Treatment' (*Cikitsā* 8:16-32) four groups of symptoms each group consisting of eleven symptoms are enumerated and some of them are different from what are described in this chapter. But this does not involve any contradiction because the eleven symptoms enumerated in the above paragraph are by way of illustration only and all symptoms of this condition are not restricted to these eleven only.

Prognosis :

तत्रापरिक्षीणबलमांसशोणितो बलवानजातारिष्टः सर्वैरपि शोषलिङ्गैरुप-
द्रुतः साध्यो हेयः । बलवानुपचितो हि सहत्वाद्याध्यौषधबलस्य कामं सुबहु-
लिङ्गोऽप्यल्पलिङ्गं एव मन्तव्यः ॥ १५ ॥

A patient whose strength, muscle tissues and blood have not undergone diminution, who is strong and in whose body bad prognostic symptoms have not appeared, is curable even if all symptoms of the disease—consumption—are manifested in his body. A strong and well nourished patient can resist both the disease and medicines well; hence even if all symptoms of the disease are manifested in his body, still he may be considered as having a few symptoms only i. e. easily curable.

In the above paragraph, after the description of the non-diminution of strength (अपरिक्षीणबल), the patient is described to be strong (बलवान्). This appears to be a repetition. But the latter term (बलवान्) stands for congenital strength whereas the former term (अपरिक्षीणबल) indicates acquired strength.

Signs of incurable :

दुर्बलं त्वतिक्षीणबलमां सशोणितमल्पलिङ्गमजातारिष्टमपि बहुलिङ्गं जाता-
रिष्टमपि बहुलिङ्गं जातारिष्टं च विद्यात्, असहत्वाद्ब्याध्यौषधबलस्य; तं परि-
वर्जयेत्, क्षणेनैव हि प्रादुर्भवन्त्यरिष्टानि, अनिमित्तश्चारिष्टग्रादुर्भाव इति ॥१६॥

A patient even having a few symptoms of the disease and without bad prognostic signs is incurable (like the one having all symptoms and manifested bad prognostic signs), if he is weak and there is diminution of strength, muscle tissue and blood, because he will be unable to resist the effect of the disease as well as the medicines. He should not be treated. Bad prognostic signs may appear in such patients in no time and even without any causative factor. [16]

The weak patient having diminished strength, muscle tissue and blood is considered to be incurable (i. e. he will positively succumb to death) even without any bad prognostic symptoms. But in *Indriya* 2:5, it is mentioned that death is always preceded by bad prognostic symptoms. Because of this, it is mentioned subsequently in this paragraph that bad prognostic symptoms may appear in the patient at any moment, that too without any causative factor. Further the incurability due to the diminution of strength and muscle tissue itself is indicative of bad prognosis.

Merits of royal physician :

तत्र श्लोकः—

समुत्थानं च लिङ्गं च यः शोषस्यावबुध्यते ।
पूर्वरूपं च तत्त्वेन स राहः कर्तुर्मर्हति ॥ १७ ॥

To sum up :—

The physician who is well versed in the etiology, symptomatology and premonitory symptoms of consumption is verily competent to be a 'Royal Physician'. [17]

इत्यभिवेशक्ते तम्भे चरकप्रतिसंस्कृते निदानस्थाने शोषनिदानं
नाम षष्ठोऽच्यायः ॥ ६ ॥

Thus ends the sixth chapter on "Diagnosis of Consumption" of the Section on the Diagnosis of Diseases (*Nidānasthāna*) of Agnives'as' work as redacted by Caraka.

सप्तमोऽध्यायः

CHAPTER VII

अथात् उन्मादनिश्चानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the "Diagnosis of Insanity."

Thus said Lord Ātreya. [1-2]

In terms of mythological description, Insanity followed *kuṣṭha* in the course of the destruction of Dakṣas, sacrifice—cf. *Nidāna* 8:11. Because of endogenous nature and importance of tuberculosis (Consumption), its diagnosis is described in the sixth chapter, after that of *kuṣṭha* and now the remaining two diseases of exogenous nature caused by psychic disorders as fear etc. are being described in this as well as in the subsequent chapter.

Types of insanity :

इह खलु पञ्चोन्मादा भवन्ति, तद्यथा—वातपित्तकफसम्प्रापातागन्तु-
निमित्ताः ॥ ३ ॥

तत्र दोषनिमित्ताश्वत्वारः पुरुषाणामेवंविधानां क्षिप्रमभिनिर्वर्तन्ते; तद्यथा-
भीरुणामुपङ्क्लिष्टसत्त्वानामुत्सङ्घोषाणां समलविकृतोपहितान्यनुचितान्याहार-
जातानि वैशस्ययुक्तेनोपयोगविधिनोपयुज्जानानां तन्त्रप्रयोगमपि विषमाचरता-
मन्याश्च शरीरचेष्टा विषमाः समाचरतामत्युपक्षीणदेहानां व्याधिवेगसमुद्भविता-
नामुपहतमनसां वा कामक्रोधलोभहर्षभयमोहायासशोकचिन्तोद्रेगादिभिर्भूयोऽभि-
धाताभ्याहतानां वा मनस्युपहते बुद्धौ च प्रचलितायामभ्युदीर्णा दोषाः प्रकुपिता
हृदयमुपसृत्य मनोवहानि स्तोतांस्यावृत्य जनयन्त्युन्मादम् ॥ ४ ॥

Unmāda (Insanity) is of five types. They are due to *vata*, *pitta*, *kapha* and *samnipāta* (combined vitiation of all the three *dosas*) and exogenous.

The four types of *unmāda* (Insanity) caused by the vitiation of *dosas* manifest themselves quickly in the following circumstances :

1. when an individual is timid;
2. when his mind is afflicted by the predominance of *rajas* and *tamas*;
3. when *dosas* in his body are aggravated and vitiated.
4. when he takes food consisting of unwholesome and unclean ingredients possessing mutually contradictory pro-

perties or touched by the unclean hands of persons suffering from contagious diseases like leprosy, neglecting the prescribed dietic rules, (viz. confirmity with nature etc., of the ingredients);

5. when he resorts to such regimens and actions as are not conducive to good health;

6. when his body is exceedingly depleted;

7. if he is not in proper state of health due to other diseases;

8. when his mind is afflicted over and over again by passion, anger, greed, excitement, fear, attachment, exertion, anxiety and grief; and

9. when he is subjected to excessive physical assault.

In the circumstances enumerated above the mind gets seriously affected and the intellect loses its balance. So the *dosas* aggravated and vitiated enter the cardiac region and obstruct the channels of the mind resulting in Insanity. [3-4]

The term 'tantra' used here stands for the body—cf. *Indriya* 12:44.

Definition of insanity :

उन्मादं पुनर्मनोबुद्धिसंश्लाहानस्मृतिभक्तिशीलचेष्टाचारविभ्रमं विद्यात् ॥५॥

Insanity is characterised by the perversion of mind, intellect, consciousness, knowledge, memory, desire, manners, behaviour and conduct. [5]

The invariable symptoms of insanity are described here. Thinking is the object of mind—cf. *Sūtra* 8:16. Due to the perversion of mind, the patient does not think of such things which are worth thinking; on the other-hand, he thinks of such things as ought not to be thought of. Due to perversion of intellect, he understands eternal things as ephemeral and useful things as harmful—cf. *Sārira* 1:99. Due to the perversion (loss) of consciousness, the patient is unable to have perception of burns caused by fire etc. Due to the perversion of memory, the patient either does not remember anything or remembers things incorrectly. Due to perversion of desire, disinclination develops for things desired previously. Due to perversion of manners, the patient, who is otherwise normal, gets enraged. Due to perversion of behaviour, the patient indulges in undesirable activities. Due to perversion of conduct, the patient resorts to such activities as are against the rules prescribed in religious works.

Premonitory symptoms of insanity :

तस्येमानि पूर्वरूपाणि, तद्यथा—शिरसः शून्यता, चक्षुषोराकुलता, स्वनः कर्णयोः, उच्छ्वासस्थानिक्यम्, आस्यसंस्खणम्, अनन्नाभिलाषारोचकाविपाकः,

हृदग्रहः, ध्यानायाससंमोहोद्देगाश्चास्थाने, सततं लोमहर्षः, ज्वरश्चाभीक्षणम्, उन्मत्तचित्तत्वम्, उद्दित्वम्, अर्दिताकृतिकरणं च व्याधेः, स्वप्ने चाभीक्षणं दर्शनं भान्तचलितानवस्थितानां रूपाणामप्रशस्तानां च तिलपीडकचक्राधिरोहणं वात-कुण्डलिकाभिश्चोन्मथनं निमज्जनं च कलुषाणामम्भसामावर्ते चक्षुषोश्चापसर्पण-मिति (दोषनिमित्तानामुन्मादानां पूर्वरूपाणि भवन्ति) ॥ ६ ॥

Following are the premonitory symptoms of insanity : (1) emptiness in head, (2) congestion in eyes, (3) noises in ears, (4) hard breathing in excess, (5) excessive salivation in the mouth, (6) absence of inclination for food, anorexia and indigestion, (7) spasm in cardiac region, (8) meditation, fatigue, unconsciousness and anxiety in improper situations, (9) continuous horripilation, (10) frequent pyrexia, (11) fickleness, (12) pain in the upper part of the body, (13) manifestation of symptoms of facial paralysis resulting in movement in one half of the face, (14) frequent appearance of the following in dreams.

1. inauspicious objects that are wandering, moving and unstable;
2. riding over the wheel of an oil press;
3. being churned by whirl-winds;
4. sinking in fierceful whirl-pools; and
5. retraction of eyes.

The above are the pre-monitory symptoms of insanity caused by the vitiation of *doṣas*. [6]

Distinctive features of insanity :

ततोऽनन्तरमेवमुन्मादभिनिर्वृत्तिरेव । तत्रेदमुन्मादविशेषविज्ञानं भवति, तदथा—परिसरणमजस्यम्, अश्विभूवौष्ठैर्सहन्वग्रहस्तपादङ्गविक्षेपणमकस्मात्, सततमनियतानां च गिरामुत्सर्गः, फेनागमनमास्यात्, अभीक्षणं स्मितहसित-नृत्यगीतवादित्रसंप्रयोगाश्चास्थाने, वीणावंशशङ्खशम्यातालशब्दानुकरणमसाम्ना, यानमयानैः, अलङ्करणमनलङ्कारैकैद्रव्यैः, लोभश्चाभ्यवहार्येवलब्धेषु, लब्धेषु चावमानस्तीवमात्सर्यं च, काश्य, पारुष्यम्, उत्पिण्डितारुणाक्षता, वातोपशय-विपर्यासादनुपशयता च, इति वातोन्मादलिङ्गानि भवन्ति (१),

अर्पणः, क्रोधः, संरम्भश्चास्थाने, शख्लोष्ट्रकशाकाष्ठमुष्टिभिरभिहननं स्वेषां परेषां वा. अभिद्रवणं, प्रच्छायशीतोदकान्नाभिलाषः, संतापश्चातिवेलं, ताम्रहरित-हारिद्रसंब्धाक्षता, पित्तोपशयविपर्यासादनुपशयता च, इति पित्तोन्मादलिङ्गानि भवन्ति (२),

स्थानमेकदेशे, तूष्णीभावः, अल्पशश्चल्कमणं, लालाशङ्खाणकस्त्रवणम्, अनन्नाभिलाषः, रहस्कामता, शीभत्सत्वं, शौचद्वेषः, स्वप्ननित्यता, श्वयथुराननै,

शुक्लस्तमितमलोपदिग्धाक्षत्वं, श्लेष्मोपशयविपर्यासादनुपशयता च, इति श्लेष्मो-
न्मादलिङ्गानि भवन्ति (२),

ब्रिदोषलिङ्गसम्प्रिपाते तु साक्षिपातिकं विद्यात्, तमसाध्यमाचक्षते
कुशलाः ॥ ७ ॥

Insanity manifests itself immediately after the appearance of the above mentioned premonitory symptoms. The distinctive features of various types of insanity are as follows :-

(A) *Vatika type :*

1. constant wandering ;
2. sudden spasm of eyes, eyebrows, lips, shoulder, jaws, fore-arms and legs ;
3. constant and incoherent speech ;
4. coming out of froth from the mouth ;
5. always smiling, laughing, dancing, singing and playing with musical instruments in inappropriate situations ;
6. loudly immitating the sounds of lute, flute, conch, *samyā* (cymbal played by right hand) and *tala* (cymbal played by left hand.);
7. riding undesirable vehicles ;
8. adoration by such things as are not needed for ornaments ;
9. longing for eatables not available ;
10. disgust for food articles and also a strong desire not to part with the eatables available.
11. emaciation and roughness ;
12. projected and reddish eyes ; and
13. aggravation of the condition by such of the regimens as are not wholesome for *vata*.

(B) *Paittika type :*

1. irritation and anger ;
2. excitement on inappropriate occasions ;
3. inflicting injury on own people or on others by weapons, brick bats, whips, sticks and fist.
4. fleeing, and desire for shade, cold water and food having cooling effect ;

5. continuous state of anguish ;
6. having ferocious eyes of coppery, green or yellow colour ; and
7. aggravation of the condition by such regimens as are not wholesome for *pitta*.

* (C) *Ślaiśmika type :*

1. staying in one place and observance of silence ;
2. occasional movement ;
3. discharge of saliva and nasal excretions ;
4. disinclination for food and love for solitude ;
5. frightening appearance ;
6. aversion for cleanliness ;
7. remaining always sleepy ;
8. oedema in the face ;
9. white and timid eyes with excreta adhered to them ;
10. aggravation of the condition by such regimens as are not wholesome for *kapha*.

* (D) *Sāmnipatika type :*

In the Insanity caused by the combined vitiation of all the three *doṣas*, all the symptoms mentioned above are simultaneously manifested. This type of Insanity is considered to be incurable. [7]

Insanity occurs immediately after the manifestation of its pre-monitory symptoms. In the case of other diseases, however, there is a time lag between the manifestation of their premonitory symptoms and the manifestation of the actual diseases.

Therapies as treatment : ॥१००॥

साध्याणं तु त्रयाणं साधनानि—स्नेहस्वेदवमनविरेचनास्थापनानुवास-
नोपशमननस्तःकर्मधूमधूपनाजनावपीडप्रधमनाभ्यङ्गप्रदेहपरिषेकानुलेपनवधवन्ध-
नावरोधनविश्रासनविस्मापनविस्मारणापत्पर्णसिराव्यथनानि, भोजनविधानं च
यथास्वं युक्त्या, यथान्यदपि किञ्चिन्निदानविषयरीतमौषधं कार्यं तदपि स्यादिति ॥८॥

भवति चात्र—

उन्मादान् दोषजान् साध्यान् साधयेद्विषगुत्तमः ।

अनेन विधियुक्तेन कर्मणा यत् प्रकीर्तिम् ॥ ९ ॥

Therapies for treatment of the three types of insanity which are curable are oleation, fomentation, emesis, purgation, *asthapana* type of enema, *anuvāsana* type of enema, alleviation therapies, errhines, smoking, fumigation, collyrium, *avapida* and *pradhamana* types of snuff, massage, ointment, affusion, unction, assault, tying, confinement, frightening, inducing astonishment and forgetfulness, depletion and venesection. Suitable diets should be given according to the requirements of the patient. Such other therapies as would work against the causative factors of the disease should also be given.

Thus it is sad :-

Following the principles of treatment (to be detailed in *Cikitsa 9*) a competent physician should employ the above mentioned therapies to treat the curable types of insanity caused by the vitiation of *doṣas*. [8-9]

Exogenous insanity :

यस्तु दोषनिमित्तभ्य उन्मादेभ्यः समुत्थानपूर्वरूपलिङ्गवेदनोपशयविशेष-समन्वितो भवत्युन्मादस्तमागन्तुकमाचक्षते । केचित् पुनः पूर्वकृतं कर्माप्रशस्त-मिळ्ड्जिति तस्य निमित्तम् । तस्य च हेतुः प्रशापराध एवेति भगवान् पुनर्बसुरात्रेयः । प्रशापराधाद्वयं देवर्थिपितृगन्धर्ववर्यक्षराक्षसपिशाचगुरुबृहसिद्धाचार्यपूज्यानवमत्याहितान्याचरति, अन्यद्वा किञ्चिदेवंविधं कर्माप्रशस्तमारभते, तमात्मना हतमुपभन्ते देवाद्यः कुर्वन्त्युन्मत्तम् ॥ १० ॥

The type of insanity having etiology, premonitory symptoms, actual symptoms, pain and homologation (*upāśaya*) different from those of the types of insanity caused by the vitiation of *doṣas* is known as 'Exogenous'. Some scholars hold the view that this type of insanity is caused by the effect of the sinful activities of the past life. Lord Punarvasu Ātreyā considers intellectual blasphemy as the causative factor of this condition. Due to intellectual blasphemy the patient disregards the gods, ascetics, ancestors, *gandharvas*, *yakṣas* *rākṣasas*, *pisācas*, preceptors, elders, adepts, teachers and the other respectable ones. He also resorts to undesirable and such other inauspicious activities. The gods etc., cause insanity in him because of his own inauspicious activities.

Intellectual blasphemy is considered to be the sole causative factor or the exogenous type of insanity. This does not however mean that the sinful acts performed in the past life do not come under the purview of such causative factors. As a matter of fact, the past sinful acts are nothing

but the outcome of intellectual blasphemy. Or in other words, intellectual blasphemy is in itself a causative factor of the past sinful acts as well. Thus insanity caused by the sinful acts of the past life also comes under the category of intellectual blasphemy.

Premonitory symptoms of exogenous type of insanity :

तत्र देवादिप्रकोपनिमित्तेनागन्तुकोन्मादेन पुरस्कृतस्येमानि पूर्वरूपाणि
भवन्ति, तथा—देवगोब्राह्मणतपस्विनां हिंसारुचित्वं, कोपनत्वं, नृशंसाभिग्रा-
यता, अरतिः, ओजोवर्णच्छायाबलवपुषामुपतसिः, स्वप्ने च देवादिभिरभिभृत्सनं
प्रवर्तनं चेति, ततोऽनन्तरमुन्मादाभिनिर्वृत्तिः ॥ ११ ॥

The premonitory symptoms of the exogenous type of insanity caused by the ill effects of anger of the gods etc. are as follows :-

1. desire for inflicting injury upon the gods, cows, brahmins and ascetics ;
2. anger and liking for mischievous work ;
3. disliking attitude and impairment of *ojas*, colour complexion and physical strength ; and
4. abuse and incitement by the gods etc.

Insanity manifests itself immediately after the occurrence of these premonitory symptoms. [11]

Causative agents :

तत्रायमुन्मादकरणां भूतानामुन्मादयिष्यतामारम्भविशेषो भवति; तथा-
अवलोकयन्तो देवा जनयन्त्युन्मादं, गुरुवृद्धसि द्रमहर्षयोऽभिशपन्तः, पितरो
दर्शयन्तः, स्पृशन्तो गन्धर्वाः, समाविशन्तो यक्षाः, राक्षसास्त्वात्मगन्धमाद्राप-
न्तः, पिशाचाः पुनरारुद्ध वाहयन्तः ॥ १२ ॥

The causative agents of the axogenous type of insanity initiate their action as follows :-

1. the gods produce insanity by their vision ;
2. preceptors, elders, adepts and ascetics by their curse ;
3. ancestors by exhibiting themselves ;
4. *gandharvas* by their touch ;
5. *yaksas* by seizure ;
6. *rakshasas* by making the patient to smell the odour of their body ; and
7. *pisacis* by riding and driving their victims.

Symptoms of manifestations of disease :

तस्येमानि रूपाणि भवन्ति, तथा—अत्यात्मबलघीर्यपौरुषपराक्रमग्रहण-
धारणस्मरणशानघवनविहानानि, अनियतश्चोन्मादकालः ॥ १३ ॥

Symptoms of this condition are the manifestations of super-human strength, energy, manliness, enthusiasm, power of understanding and retention, memory, spiritual as well as artistic knowledge and power of speech in the patient himself. There is no fixed time for the manifestation of this insanity.[13]

Circumstances of victimisation of the subject : *निदान योग्यता विवरणः*

उन्मादयिष्यतामपि खलु देवर्पितृगन्धर्वयक्षराशसपिशाचानां गुरुवृद्ध-
सिद्वानां वा एष्वन्तरेष्वभिगमनीयाः पुरुषा भवन्ति, तद्यथा—पापस्य कर्मणः
समारम्भे, पूर्वकृतस्य वा कर्मणः परिणामकाले, एकस्य वा शून्यगृहवासे चतुष्प-
थाधिष्ठाने वा, सन्ध्यावेलायामप्रयत् भावे वा पर्वसन्धिषु वा मिथुनीभावे, रजस्व-
लाभिगमने वा, विगुणे वाऽध्ययनबलिमङ्गलहोमप्रयोगे, नियमवत्ब्रह्मचर्यभङ्गे वा,
महाहवे वा, देशकुलपुराविनाशे वा, महाग्रहोपगमने वा, खिया वा प्रजननकाले,
विविधभूताशुभाशुचिस्पर्शने वा, वमनविरेचनरुधिरस्वावे, अशुचेरप्रयत्स्य वा
चैत्यदेवायतनाभिगमने वा, मांसमधुतिलगुडमयोच्छिष्टे वा, दिग्वाससि वा,
निशि नगरनिगमत्वं चतुष्पथोपवनश्मशानाद्यातनाभिगमने वा, दिजगुरुसुरयति-
पूज्याभिर्धर्षणे वा, धर्मार्थ्यानव्यतिक्रमे वा, अन्यस्य वा कर्मणोऽप्रशास्तस्यारम्भे,
इत्यभिघातकाला व्याख्याता भवन्ति ॥ १४ ॥

Humanbeings fall victims to the attack of insanity caused by the gods, ascetics, ancestors, *gandharvas*, *yakṣas*, *rākṣasas*, *pīśacas*, preceptors, elders and adepts in the following circumstances :

1. in the beginning of sinful acts ;
2. when the (sinful) acts of the past life are matured enough to produce their effects ;
3. residing in a deserted house or going to cross roads alone ;
4. Sexual intercourse during the junctures of day and night or during the newmoon and full moon days ;
5. sexual intercourse with a lady during her menses ;
6. recitation of scriptures, religious offerings, auspicious rites and sacrifices in improper manner.
7. dishonouring a vow and discontinuing a religious duty or observance of celibacy ;
8. fierceful battles ;

- or Observances*
- and towns,*
- and luminous planets in the sky;*
9. coming in contact with different types of inauspicious
 10. coming in contact with unclean creatures ;
 11. emesis, purgation and bleeding ;

Symptoms of this condition are the manifestations of super-human strength, energy, manliness, enthusiasm, power of understanding and retention, memory, spiritual as well as artistic knowledge and power of speech in the patient himself. There is no fixed time for the manifestation of this insanity.[13]

Circumstances of victimisation of the subject : विषयानुभवात् अन्यत्र

उन्मादयिष्यतामपि खलु देवर्पिपितृगन्धर्वयक्षराक्षसपिशाचानां गुरुवृद्ध-
सिद्धानां वा एष्वन्तरेष्वभिगमनीयाः पुरुषा भवन्ति, तदथा—पापस्य कर्मणः
समारम्भे, पूर्वकृतस्य वा कर्मणः परिणामकाले, एकस्य वा शून्यगृहवासे चतुष्प-
थाधिष्ठाने वा, सन्ध्यावेलायामप्रयत् भावे वा पर्वसंधिषु वा मिथुनीभावे, रजस्व-
लाभिगमने वा, विगुणे वाऽध्ययनबलिमङ्गलहोमप्रयोगे, नियमब्रतब्रह्मचर्यभङ्गे वा,
महाहवे वा, देशकुलपुरविनाशे वा, महाग्रहोपगमने वा, छिया वा प्रजननकाले,
विविधभूताशुभाशुचिस्पर्शने वा, वमनविरेचनसंधिरसावे, अशुचेरप्रयतस्य वा
चैत्यदेवायतनाभिगमने वा, मांसमधुतिलगुडमयोच्छिष्टे वा, दिग्वाससि वा,
निशि नगरनिगमतुष्योपवनश्मशानाद्यातनाभिगमने वा, द्विजगुरुसुरयति-
पूज्याभिर्धर्षणे वा, धर्मार्ख्यानव्यतिक्रमे वा, अन्यस्य वा कर्मणोऽप्रशस्तस्यारम्भे,
इत्यभिघातकाला व्याख्याता भवन्ति ॥ १४ ॥

Humanbeings fall victims to the attack of insanity caused by the gods, ascetics, ancestors, *gandharvas*, *yakṣas*, *rakṣasas*, *pisācas*, preceptors, elders and adepts in the following circumstances :

1. in the beginning of sinful acts ;
2. when the (sinful) acts of the past life are matured enough to produce their effects ;
3. residing in a deserted house or going to cross roads alone ;
4. Sexual intercourse during the junctures of day and night or during the newmoon and full moon days ;
5. sexual intercourse with a lady during her menses ;
6. recitation of scriptures, religious offerings, auspicious rites and sacrifices in improper manner.
7. dishonouring a vow and discontinuing a religious duty or observance of celibacy ;
8. fierceful battles ;
9. destruction of countries, communities and towns ;
10. onset of inauspicious planets in the sky ;
11. during the time of child-delivery of ladies ;
12. coming in contact with different types of inauspicious and unclean creatures ;
13. emesis, purgation and bleeding ;

14. visiting a *caitya* (sacred tree) or temple when unclean and not following the prescribed rules ;
15. resorting to the remnants of meat, honey, til, sugar candy and alcohol ;
16. while naked ;
17. visiting cities, towns, cross roads; gardens, cremetion grounds, slaughter houses at night;
18. insulting *dvija* (twice born), preceptors, the gods, ascetics and others who should be respected;
19. misinterpretation of religious scriptures; and
20. initiating such other inauspicious activities.

Thus the circumstances in which a person is attached by exogenous type of insanity is explained. [14]

During day time, going to cross roads alone may result in an attack of insanity. During night time going to cross roads even accompanied with others may render a person susceptible to an attack of insanity. With this end in view the term '*Catuspathābhigamaṇa*' has been repeated in the above paragraph.

Objectives in causation of insanity :

त्रिविधं तु खलून्मादकराणां भूतानामुन्मादने प्रयोजनं भवति, तद्यथा—हिंसा, रति, अभ्यर्थनं चेति । तेषां तं प्रयोजनविशेषमुन्मत्ताचारविशेषलक्षणैर्विद्यात् । तत्र हिंसार्थिनोन्मादयमानोऽस्मि प्रविशति, अप्सु निमज्जति, स्थलाच्छुभ्वेवा पतति, शख्कशाकाष्ठलोष्टमुष्टिभिर्हत्यात्मानम्, अन्यथा प्राणवधार्थमारभते किञ्चित्, तमसाच्यं विद्यात्, साध्यौ पुनर्द्वितीयौ ॥ १५ ॥

Insanity is caused by these agents with three objectives, viz. (1) to inflict injury (2) -to play and (3) to offer prayer. Their intentions can be judged from the characteristic features of the patient. When the intention of the afflicted agents is to inflict injury, then the patient enters into fire sinks into water, falls into a pit, strikes himself with weapons, whips, sticks, brick bats, his own fist etc. He may also adopt such other means for killing himself. This type of insanity is incurable. If the intention of the causative agents is the remaining two i.e. to play or to offer prayer, then this is curable. [15]

The gods etc., by themselves, do not enter into the body of the patients. Only their subordinates having identical nature affect the patient in order to cause insanity—cf. *Susruta, Uttaratantra* 60:21.

Therapies :

तथोः साधनानि—मन्त्रौषधिमणिमङ्गलबल्युपहरहोमनियमवत्प्रसम्बिसो-पवासस्वस्त्ययनप्रणिपातगमनादीनि ॥ १६ ॥

एवमेते पञ्चोन्मादा व्याख्याता भवन्ति ॥ १७ ॥

Therapies for this type of insanity are incantation of *mantras*, wearing of talisman and jewels, performance of auspicious rites, religious sacrifices, oblations and religious rites, taking a vow, performing religious duty atonements fasting, blessings, obeisance and pilgrimage.

Thus the five types of insanity are explained. [16-17]
Classification and prognosis :

ते तु खलु निजागन्तुविशेषण साध्यासाध्यविशेषण च प्रविभज्यमानाः पञ्च
 सन्तो द्वावेव भवतः । तौ च परस्परमनुवधीतः कदाचिद्यथोक्तहेतुसंसर्गात् । तयोः
 संसृष्टमेव पूर्वरूपं भवति, संसृष्टमेव च लिङ्गम् । तत्रासाध्यसंयोगं साध्यासाध्य-
 संयोगं चासाध्यं विद्यात्, साध्यं तु साध्यसंयोगम् । तस्य साधनं साधनसंयोग-
 मेव विद्यादिति ॥ १८ ॥

Insanity alongwith its five types, classified as endogenous or curable and incurable, are again grouped into two. At times, due to the combination of etiological factors (of endogenous and exogenous types), they are manifested in a combined form. There is combination in their premonitory as well as actual symptoms. Combination of the incurable varieties or the curable and incurable varieties results in the incurability of the condition. Combination of the curable varieties, however, results in the curability of the condition. For the treatment of this (last mentioned) condition, there should be the combination of therapies. [18]

Combination of the endogenous type of insanity caused by the simultaneous vitiation of all the three *dosas* with the exogenous type caused by the agents having intention to inflict injury illustrates the combination of incurable types. Combination of the endogenous type of insanity caused by the vitiation of only one of the three *dosas* with the exogenous type caused by agents having intention to inflict injury illustrates the combination of curable and incurable types. When two curable types of insanity are combined, it results in curability and not incurability.

Misdeeds as causes of insanity :

भवन्ति चात्र—

नैव देवा न गन्धर्वा न पिशाचा न राक्षसाः ।
 न चान्ये स्वयमक्लिष्टमुपक्लिशन्ति मानवम् ॥ १९ ॥
 ये त्वेनमनुवर्तन्ते क्लिश्यमानं स्वर्कर्मणा ।
 न स तद्देतुकः क्लेशो न हास्ति कृतकृत्यता ॥ २० ॥

Thus it is said :

Neither the gods, nor *gandarvas*, nor *pisacás* nor *rakshasas* afflict a person who himself is free from misdeeds. The primary causes of insanity in an individual are his own misdeeds

and other agents like the gods etc. act only as the consequence of these misdeeds. There can not be the manifestation of anything which is already manifested. Thus, verily the gods etc., are not causative factors of insanity in human beings. [19-20]

It is only when incited by the misdeeds of the individual that the gods etc. produce insanity. If they could produce insanity irrespective of the deeds of the individuals everybody should suffer from this disease. So the sufferings one undergoes due to insanity are the results of his own actions and not those of the gods etc. The gods etc., no doubt help in the production of insanity. But they are subordinate to the actions of human beings. Things already manifested cannot again be manifested. So insanity having been caused by the misdeeds of the individual cannot again be caused by subordinate factors, viz. the gods etc. Thus, the gods etc., are not to blame.

Causes and observance of wholesome regimens :

प्रज्ञापराधात् संभूते व्याघौ कर्मज आत्मनः ।
 नाभिशंसेद्वधो देवाभ्य पितृनापि राक्षसान् ॥ २१ ॥
 आत्मानमेव मन्येत कर्तारं सुखदुःखयोः ।
 तस्माच्छ्रेयस्करं मार्गं प्रतिपदेत तो त्रसेत् ॥ २२ ॥
 देवादीनामपचितिर्हितानां चोपसेवनम् ।
 ते च तेभ्यो विरोधश्च सर्वमायत्तमात्मनि ॥ २३ ॥

The wise man should not blame the gods, ancestors or *rakṣasas* for diseases caused by his own misdeeds due to intellectual blasphemy. One should hold himself responsible for his happiness and miseries. Therefore, without apprehension one should follow the path of propitiousness.

Prayer to the gods etc., and resorting to wholesome regimens act as antidotes to the misdeeds of the individual. Thus the power either to avert or invite the attack of insanity rests with the individual himself. [21-23]

Contents :

तत्र श्लोकः—
 संख्या निमित्तं प्राप्नृपं लक्षणं साध्यता न च ।
 उन्मादानां निदाने अस्मिन् क्रियास्त्रं च भाषितम् ॥ २४ ॥

Number, etiology, premonitory symptoms, symptoms, curability or otherwise and the principles of treatment of various types of insanity are described in this chapter. [24]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने उन्मादनिदानं नाम
 स्त्रस्मोऽध्यायः ॥ ७ ॥

Thus ends the seventh chapter on the "Diagnosis of Insanity" of the section of "Diagnosis of Diseases" (*Nidānasthāna*) of Agniveśas' work as redacted by Caraka.

४ (16 - 41)
१८८१

अष्टमोऽध्यायः

CHAPTER VIII

अथातोऽप्स्मारनिदानं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानाश्रेयः ॥ २ ॥

We shall now expound the chapter on the "Diagnosis of Epilepsy".

Thus said Lord Atreya. [1-2]

In terms of the mythological origin of diseases, epilepsy followed insanity. So the present description of the diagnosis of epilepsy follows the chapter on the "Diagnosis of Insanity."

Types of epilepsy :

इह खलु चत्वारोऽप्स्मारा भवन्ति वातपित्तकफसन्निपातनिमित्ताः ॥ ३ ॥

There are four types of epilepsy, viz. *vatiika*, *paittika*, *ślaismika* and *samnipatika*. [3]

The emphasis on the four-fold classification of epilepsy is intended to convey the idea that inspite of the occasional exogenous affectations, epilepsy is only of four types. Unlike insanity, epilepsy is not (separately) caused by independent exogenous factors.

Subjects of epilepsy :

त पर्वंविधानां प्राणभृतां क्षिप्रमभिनिर्वर्तन्ते, तदथा—रजस्तमोभ्यामुप-इतचेतसामुद्भान्तविषमबहुदोषाणां समलविकृतोपहितान्यशुचीन्यभ्यवहारजातानि वैषम्ययुक्तेनोपयोगविधिनोपयुक्तानानां तन्त्रप्रयोगमपि च विषममाचरता-मन्याश्च शरीरचेष्टा विषमाः समाचरतामत्युपक्षयाद्वा दोषाः प्रकुपिता रजस्तमोभ्यामुपहतचेतसामन्तरात्मनः श्रेष्ठतममायतनं हृदयमुपसृत्योपरि तिष्ठन्ते, तथेन्द्रियायतनानि च । तत्र चावस्थिताः सन्तो यदा हृदयमिन्द्रियायतनानि चेरिताः कामक्रोधभयलोभमोहर्पशोकचिन्तोद्वेगादिभिः सहसाऽभिपूरयन्ति, तदा जन्मुरपस्मरति ॥ ४ ॥

Epilepsy manifests itself quickly in the following types of individuals :

1. when the mind of an individual is overshadowed by *rajas* and *tamas*;
2. when the *dosas* get exceedingly aggravated and their equilibrium is disturbed;
3. when an individual takes food consisting of unclean and unwholesome ingredients possessing mutually contradictory properties (or touched by the unclean

- hands of persons suffering from contagious diseases like leprosy), neglecting the prescribed dietetic rules;
4. when he resorts to unhealthy regimens and behaviour and
 5. when he suffers from excessive debility.

In the situations mentioned above, the *dosas* get aggravated and attach the persons whose minds are overshadowed by *rajas* and *tamas*. The *dosas* (so aggravated) permeate the heart, i. e. the abode par excellence of the soul as well as the sense organs. While staying there, the *dosas* aggravated by force of passion, anger, fear, greed, attachment, excitement, grief, anxiety, perturbation etc., all of a sudden, spread throughout the heart and the sense organs. Then an individual falls a victim to epilepsy. [4]

The Empirical soul has several abodes in the body. But the heart being the source of consciousness is considered to be the abode par excellence of the Empirical soul.

The *dosas* stay in a latent state in the heart and sense organs. They are further aggravated by the forces of passion etc., and spread throughout the body, specially the heart and sense organs resulting in the manifestation of epilepsy or epileptic attack.

Definition of epilepsy :

अपस्मारं पुनः स्मृतिबुद्धिसत्त्वसंप्लवाद्वाद्वीभत्सचेष्टमाचस्थिकं तमः-
प्रवेशमाचक्षते ॥ ५ ॥

Epilepsy is characterized by occasional unconsciousness associated with loathsome activities (like vomiting of froth and abnormal postures of the body), due to the perversion of memory, intellect and other psychic faculties. [5]

The above are the invariable symptoms of epilepsy. As one cannot see anything in darkness (*tamah praveśa*), so also a patient suffering from epilepsy cannot understand anything, i. e. he becomes unconscious.

Premonitory symptoms :

तस्येमानि पूर्वरूपाणि भवन्ति; तदथा—भ्रूव्युदासः सततमध्यणोवैकृतम-
शब्दश्ववणं लालासिङ्गाणप्रस्त्रवणमनन्नाभिलषणमरोचकविपाकौ हृदयग्रहः कुक्षे-
राटोपो दौर्बल्यमस्थिमेदोऽङ्गमर्दो मोहस्तमसो दर्शनं मूर्च्छा भ्रमश्चाभीक्षणं स्वप्ने
च मदनर्तनव्यधनव्यथनवेपनपतनादीनीति ॥ ६ ॥

ततोऽनन्तरमप्स्माराभिनिर्वृत्तिरेव ॥ ७ ॥

The following are its premonitory symptoms :—

1. contraction of eye-brows;

2. irregular movement of eyes constantly;
3. hearing of such sounds as are non-existent;
4. excessive discharge of saliva and nasal-excreta;
5. disinclination for food, anorexia and indigestion;
6. cardiac spasm.
7. distension of the lower abdomen with gurgling sound;
8. weakness, cracking pain in bones and malaise;
9. unconsciousness, entering into darkness, fainting and giddiness; and
10. frequent appearance of scenes of intoxication, dancing, murdering, aching, shivering and falling in the dreams. Thereafter the epilepsy is manifested. [6-7]

Characteristic features of epilepsy :

तत्रेदमपस्मारविशेषविज्ञानं भवति; तद्यथा—अभीक्षणमपस्मरन्तं, क्षणेन संज्ञां प्रतिलभमानम्, उत्पिण्डिताक्षम्, असाम्भा विलप्त्तम्, उद्धमन्तं फेनम्, अतीवाघ्यातग्रोवम्, आविद्धशिरस्कं, विषमविनताङ्गुलिम्, अनवस्थितपाणिपादम्, अरुणपरुषश्यावनखनयनवदनत्वचम्, अनवस्थितचपलपरुषरुक्षरुपदर्शिनं, वातलानुपशयं, विपरीतोपशयं च वातेनापस्मरन्तं विद्यात् ॥ (१) ॥

अभीक्षणमपस्मरन्तं, क्षणेन संज्ञां प्रतिलभमानम्, अवकृजन्तम्, आस्कालयन्तं भूमि, हरितहारिद्रितास्त्रनखनयनवदनत्वचं, रुधिरोक्षितोग्रभैरवादीसरुषितरुपदर्शिनं, पित्तलानुपशयं, विपरीतोपशयं च पित्तेनापस्मरन्तं विद्यात् ॥ (२) ॥

चिरादपस्मरन्तं, चिराच्च संज्ञां प्रतिलभमानं, पतन्तम्, अन्तिविकृतचेष्ट, लालामुद्धमन्तं, शुक्रनखनयनवदनत्वचं, शुक्रगुरुस्तिर्ग्रहरुपदर्शिनं, श्लेष्मलानुपशयं विपरीतोपशयं च श्लेष्मणाऽपस्मरन्तं विद्यात् ॥ (३) ॥

समवेतसर्वलङ्घमपस्मारं सान्निपातिकं विद्यात्, तमसाध्यमाचक्षते॥(४)॥

इति चत्वारोऽपस्मारा व्याख्याताः ॥ ८ ॥

The following are the characteristic features of different types of epilepsy :

Vatika Epilepsy :

1. Losing and regaining consciousness instantaneously;
2. projection of eye balls;
3. incoherent speech;
4. vomiting of frothy matter;
5. excessive heaviness and rigidity of neck;
6. bending of the head to one side;
7. irregularly contracted figures;
8. instability of upper and lower limbs;

9. reddishness, dryness and brownishness of nails, eyes, face and skin;
10. vision (aura) of unstable, fickle, coarse and dry objects;
11. aggravation of the condition by such regimens as are aggravators of *vāta*; and
12. alleviation of the condition by such regimens as are alleviators of *vāta*.

Paittika Epilepsy :

1. Losing and regaining consciousness instantaneously;
2. stertorous breathing;
3. rubbing the earth.
4. green, yellow or coppery colour of nails, eyes, face and skin;
5. vision (aura) of bleeding, terrifying (which is also injurious), frightful, burning and angry looking objects;
6. aggravation of the condition by such regimens as are aggravators of *pitta*; and
7. alleviation of the condition by such regimens as are aggravators of *kapha*; and

Slaiṣmika Epilepsy :

1. Delay in losing and regaining consciousness;
2. falling down;
3. absence of much distortion of activities;
4. dribbling of saliva;
5. white colour of nails, eyes, face and skin;
6. vision (aura) of white, heavy and unctuous objects;
7. aggravation of the condition by such regimens as are aggravators of *kapha*; and
8. alleviation of the condition by such regimens as are alleviators of *kapha*.

Sannipatika Epilepsy :

Epilepsy of *sannipatika* type (caused by the simultaneous vitiation of all the three *dosas*) shares the symptoms of all the three *dosas* (described above). This condition is incurable.

Thus the four types of epilepsy are explained. [8]

The patient has a vision (aura) of different types of objects before he falls down; thereafter he becomes unconscious. This has been clearly stated in *Sūrata; Uttaratantra*, 61:8-10. There is instantaneous losing and regaining of consciousness in both the *vātika* and *paitika* types of epilepsy but this is of a shorter duration in the case of *vātika* epilepsy because *vāta* manifests its activities earlier than *pitta*.

Extrinsic causative factors :

तेषामागन्तुरनुबन्धो भवत्येव कदाचित्, तमुच्चरकालमुपदेश्यामः । तस्य
विशेषविज्ञानं यथोक्तलिङ्गादिक्यमदोषलिङ्गानुरूपं च किञ्चित् ॥ ९ ॥

At times these conditions are associated with extrinsic causative factors which will be described later (in *Cikitsa* 10: 53). Their specific characteristics are the association of additional symptoms which are not manifested due to the various *dosas* already described. [9]

In the tenth chapter of *Cikitsāsthāna* there is only a brief description of the association of extrinsic causative factors with epilepsy. In the type of epilepsy due to extrinsic causative factor, symptoms due to the vitiation of *dosas* manifest themselves in addition to those caused by extrinsic factors. Unlike insanity there is no special category of epilepsy exclusively caused by extrinsic factors. Only additional symptoms are manifested in the four types of epilepsy already described, when they are associated with these extrinsic factors.

Types of treatment :

हितान्यपस्मारिभ्यस्तीक्ष्णानि संशोधनान्युपशमनानि च यथास्वं, मन्त्रा-
दीनि चागन्तुसंयोगे ॥ १० ॥

Strong elimination and alleviation therapies depending upon the specific requirements are useful for patients suffering from epilepsy. When this is associated with extrinsic causative factors, then *mantras* etc., will be useful.

Mythological origin of diseases, line of treatment and

prognosis of epilepsy:

तस्मिन् हि दक्षाध्वरस्वंसे देहिनां नानाविक्षु विद्रवतामभिद्रवणतरणधा-
वनप्लवनलङ्घनादैर्देहविक्षोभणैः पुरा गुल्मोत्पत्तिरभूत, हविषाशात् प्रमेहकुष्ठानां,
भयत्रासशोकैरूम्यादानां, विविधभूताशुचिसंरूपशार्दिपस्माराणां, ज्वरस्तु खलु
महेश्वरललाटप्रभवः, तत्संतापाद्रक्तपित्तम्, अतिव्यवायात् पुनर्नक्षत्राजन्म्य
राजयक्षमेति ॥ ११ ॥

भवन्ति चात्र—

अपस्मारो हि वासेन पित्तेन च कफेन च ।

चतुर्थः सञ्जिपातेन प्रत्याख्येयस्तथाविदः ॥ १२ ॥

साध्यांस्तु पिषजः प्राक्षाः साधयन्ति समाहिताः ।
 तीक्ष्णैः संशोधनैश्चैव यथास्वं शमनैरपि ॥ १३ ॥
 यदा दोषनिमित्तस्य भवत्यागन्तुरन्वयः ।
 तदा साधारणं कर्म प्रवदन्ति भिषग्विदः ॥ १४ ॥

During the destruction of Dakṣas' sacrifice, *gulma* first manifested itself in human beings, who fled in all directions, due to the agitation in their body because of fleeing, swimming, running, flying, jumping etc. *Pramehas* (obstinate urinary disorders including diabetes) and *kūshhas* (obstinate skin diseases including leprosy) manifested themselves due to the intake of ghee, various types of *unmāda* (insanity) due to fear, apprehension and grief, and *apasmāra* (epilepsy) due to coming into contact with various types of unclean objects. Fever came out of the forehead of Lord Śiva; *raktapitta* (a condition characterised by bleeding from different parts of the body) due to its heat and *rājayakṣma* (tuberculosis) occurred in the Moon, the King of stars, due to excessive sexual indulgence.

Thus it is said :-

Epilepsy manifests itself due to the vitiation of *vata*, *pitta* and *kapha* as well as due to *sannipata* (combined vitiation of all the three *doṣas*). The last one is incurable. The curable varieties of epilepsy should be carefully treated by the physician with strong elimination and alleviation therapies according to the *doṣas* vitiated.

When the epilepsy caused by the vitiation of *doṣas* gets associated with extrinsic causative factors then therapies as would bring the *doṣas* into normalcy and also correct the affectation of extrinsic causative factors—say the wise physicians. [11-14]

According to the mythological description, *jvara* (fever) first originated due to the anger of Lord Śiva during the destruction of Dakṣas' sacrifice before that of *gulma* etc. But with a view to showing the distinctness of the causative factor of *jvara* (i.e. anger), in para 11 of this chapter it is described after the description of the first origin of *gulma* etc. This is described in detail in the chapter on the "Diagnosis of Fever" cf. Commentary on *Nidāna* 1:15.

When the epilepsy is associated with extrinsic causative factors, then it should be treated with such therapies as would bring the vitiated *doṣas*

into their normal state, viz. emesis etc., and also simultaneously with such other therapies as would correct the extrinsic causative factors like religious scriptures, auspicious rites etc.

Physician's merits :

सर्वरोगविशेषज्ञः सर्वैषधविशारदः ।
भिषक् सर्वमयान् हन्ति न च मोहं निगच्छति ॥ १५ ॥

The physician, well versed in the specific characteristics of all diseases and the properties of all medicines cures all diseases and do not get confused. [15]

The physician who is well versed in the specific characteristics of diseases will not get confused even if he comes across a disease which is not described in this section on the "Diagnosis of Diseases" (*Nidānasthāna*) and can verify the subtle conditions by virtue of his wide experience.

इत्येतदखिलेनोक्तं निदानस्थानमुत्तमम् ।

Thus the section par excellence on the "Diagnosis of Diseases" is described in its entirety.

In *Nidānasthāna*, only eight diseases were proposed to be described with regard to their diagnosis and the line of treatment in brief—cf. *Nidāna* 1:15. They are described here in their entirety. Diagnosis of these diseases will be further detailed in the section on the "Treatment of Diseases". Some more diseases will also be described in that section.

Diseases as causative factors for other diseases :

✓

निदानार्थकरो रोगो रोगस्याप्युपलभ्यते ॥ १६ ॥
तद्यथा-ज्वरसंतापाद्रक्तपित्तमुदीर्यते ।
रक्तपित्ताज्वरस्ताभ्यां शोषश्वाप्युपजायते ॥ १७ ॥
प्लीहाभिवृद्धया जठरं जठराच्छोथ एव च ।
अशोष्यो जठरं दुःखं गुल्मश्वाप्युपजायते ॥ १८ ॥
प्रतिश्यायद्वेत् कासः कासात् संजायते क्षयः ।
क्षयो रोगस्य हेतुत्वे शोषस्याप्युपलभ्यते ॥ १९ ॥

Diseases act as causative factors for other diseases as well ; for example, *raktapitta* (the disease characterised by bleeding from different parts of the body) is produced by the heat of the *jvara* (fever); *jvara* is also produced by *raktapitta*; *sōsa* (consumption) is caused by both *jvara* (fever) and *raktapitta*. Ascitis is caused by the enlargement of spleen; general oedema due to ascitis ; (painful) ascitis and *gulma* due to piles ; *kāsa* (coughing) due to *coryza* ; wasting of tissue elements due to *kāsa* and consumption due to wasting of tissue elements. [16-19]

The term 'nidānārthakara' used in verse 16 in place of 'nidāna' shows that even though a disease is caused by another disease, the causative factors of the primary disease should be considered as the etiological factors for the secondary disease as well. Etiological factors of all the primary diseases are categorised into three, viz. intellectual blasphemy etc., and the use of this term 'nidānārthakara' implies that there is no further category of causative factors. For example, fever is caused by substances having heating property and if such substances are excessively used or other substances having properties conducive to the production of raktapitta are simultaneously used then it results in the production of raktapitta.

Causative factors as diseases in stages :

† ते पूर्व केवला रोगाः पश्चाद्वेत्वर्थकारिणः ।
✓ उभयार्थकरा दृष्टस्तथैवैकार्थकारिणः ॥ २० ॥

These conditions in the primary stage manifest themselves as diseases and subsequently they act as causative factors of other diseases. They are found acting both as the disease and causative factor ; some of them act in one way also-either as a disease or as a causative factor. [20]

Primary diseases which act as causative factors of other diseases do not lose their importance inasmuch as in the initial stage, they manifest their own symptoms. In the latter stage, however, they may either retain or lose their identity after causing another disease.

Nature of disease :

✗ कश्चिद्विरोगो रोगस्य हेतुर्भूत्वा प्रशाम्यति ।
न प्रशाम्यति चाप्यन्यो हेत्वर्थं कुरुतेऽपि च ॥ २१ ॥

Some diseases get subsided after causing another disease and some others even after causing another disease do not subside. For example, coryza may continue to exist alongwith kasa (coughing) after causing the latter; and at times after causing kasa, coryza itself may get subsided. In the former case, coryza is considered both as a disease as well as a causative factor ; in the latter case it acts only as a causative factor. [21]

Difficulty in cure :

✗ एवं कृच्छ्रुतमा नृणां दृश्यन्ते व्याधिसङ्कराः ।
प्रयोगापरिशुद्धत्वात्तथा चान्योन्यसंभवात् ॥ २२ ॥

Such combination of diseases due to the incorrect administration of therapies or production of one disease out of the other, makes the condition difficult of cure. [22]

If a patient suffering from 'āmātisāra' is given bowel-binding drugs, the drugs react in the form of colicky pain and tympanitis. Similarly if kāsa (coughing) is caused by coryza this results in the incurability of the condition due to the combination of the two diseases.

correctness of therapy :

प्रयोगः शमयेद्व्याधिं योऽन्यमन्यमुदीरयेत् ।

नासौ विशुद्धः, शुद्धस्तु शमयेद्यो न कोपयेत् ॥ २३ ॥

The therapy which while curing one disease provokes another is not the correct one ; the correct therapy, is the one which while curing a disease does not provoke the manifestation of another disease. [23]

Productivity of causative factors :

✓ एको हेतुनेकस्य तथैकस्यैक एव हि ।
व्याधेरेकस्य चानेको बहूनां बहवोऽपि च ॥ २४ ॥

ज्वरभ्रमप्रलापादा दृश्यन्ते रुक्षहेतुजाः ।
रुक्षेणैकेन चाप्येको ज्वर एवोपजायते ॥ २५ ॥

✗ हेतुभिर्वद्दुभिश्चैको ज्वरो रुक्षादिभिर्भवेत् ।
रुक्षादिभिर्ज्वराद्याश्च व्याधयः संभवन्ति हि ॥ २६ ॥

One causative factor may produce many diseases, e. g. due to ununctuous causative factor many diseases like fever, giddiness and delirium are manifested. One causative factor may produce only one disease, e. g. ununctuous causative factor may produce fever alone. Many causative factors may produce only one disease, e. g. fever alone may be caused by many causative factors, viz. ununctuous substances. Many causative factors may produce many diseases, e. g. many diseases, viz. fever etc., may be manifested by many causative factors, viz. ununctuous hot and saline substances. [24-26]

Even though ununctuous causative factors are responsible for the manifestation of many diseases, still depending upon the time and habitat, sometimes, they may produce only fever.

Relation of symptoms with disease :

लिङ्गं चैकमनेकस्य तथैवैकस्य लक्ष्यते ।

बहूनेकस्य च व्याधेर्बहूनां स्युर्बहूनि च ॥ २७ ॥

विषमारम्भमूलानां लिङ्गमेकं ज्वरो मतः ।

ज्वरस्यैकस्य चाप्येकः संतापो लिङ्गमुच्यते ॥ २८ ॥

विषमारम्भमूलैश्च ज्वर एको निरुच्यते ।

लिङ्गरैतैर्ज्वरश्वासहिकाद्याः सन्ति चामयाः ॥ २९ ॥

One symptom may be common to many diseases, e. g. fever may be the common symptom of many diseases having irregularity as their onset. One symptom may be related to only one disease, e. g. hyperpyrexia is the symptom of fever alone. Many symptoms may be related to only one disease, e. g. many symptoms like irregularity in onset may be related to fever alone. Many symptoms may be common to many diseases, e. g. many symptoms like irregularity in onset may be common to many diseases, like fever, asthma and hiccup. [27-29]

Fever may be treated as a symptom of diseases with irregularity in their onset, release, pyrexia etc. That is to say the one symptom i. e. fever is enough to guide the physician to predict that the patient had, will have or is having irregularity in the onset, release, pyrexia etc.

Effect of therapy on disease :

एका शान्तिरनेकस्य तथैवैकस्य लक्ष्यते ।
 व्याधेरेकस्य चानेका बहुनां बहुय एव च ॥ ३० ॥
 शान्तिरामाशयोत्थानां व्याधीनां लङ्घनक्रिया ।
 ज्वरस्यैकस्य चाप्येका शान्तिरङ्गनमुच्यते ॥ ३१ ॥
 तथा लक्ष्यशानाद्याश्च ज्वरस्यैकस्य शान्तयः ।
 पताश्चैव ज्वरश्वासद्विकादीनां प्रशान्तयः ॥ ३२ ॥

One single therapy may cure many diseases, e. g. diseases having their origin from *amāsaya* (stomach including small intestine) are cured by fasting. There may be one single therapy only for one disease, e. g. fasting is a therapy for the cure of fever alone. There may be many therapies for one disease, e. g. intake of light diet etc., cures only one disease, viz. fever. There may be many therapies for many diseases, e. g. intake of light diet etc., may cure many diseases viz., fever, asthma, hiccup etc. [30-32]

Definition of curable, palliable and incurable diseases :

✓ सुखसाध्यः सुखोपायः कालेनात्पेन साध्यते ।
 साध्यते कृच्छ्रसाध्यस्तु यत्नेन महता चिरात् ॥ ३३ ॥
 याति नाशेषतां व्याधिरसाध्यो याप्यसंब्रितः ।
 परोऽसाध्यः क्रियाः सर्वाः प्रत्याख्येयोऽतिवर्तते ॥ ३४ ॥
 नासाध्यः साध्यतां याति साध्यो याति त्वसाध्यताम् ।
 पादापचाराहैवाद्वा यान्ति भावान्तरं गदाः ॥ ३५ ॥

Easily curable diseases are cured by simple measures in a short time. Diseases which are difficult of cure involve much of effort and they take a long time for cure. The palliable variety of incurable diseases can never be eradicated from the root. The irremediable variety of an incurable disease is not amenable to any type of treatment.

The incurable variety never becomes curable; the curable variety may on the other hand become incurable. Due to the defects in the four agents of therapeutics or due to misfortune, the easily curable variety may become difficult of cure; diseases which are difficult of cure may become palliable and palliable variety may become irremediable. [33-35]

Observation on the states of disease :

वृद्धिस्थानक्षयावस्थां रोगाणामुपलक्षयेत् ।
 सुस्क्रमामपि च प्राङ्गो देहाग्निबलचेतसाम् ॥ ३६ ॥
 व्याघ्रवस्थाविशेषान् हि ज्ञात्वा ज्ञात्वा विचक्षणः ।
 तस्यां तस्यामवस्थायां चतुःश्रेयः प्रपद्यते ॥ ३७ ॥

A wise physician should closely observe the subtilities of aggravated, normal and diminished states of diseases, body, power of digestion, strength and mental faculties. Having close acquaintance with the various states of the disease, an intelligent physician should prescribe for these difficult states such therapies as would help attainment of the four-fold blessings. [36-37]

Principles of treatment :

प्रायस्तिर्यगता दोषाः क्लेशयन्त्यातुरांश्चिरम् ।
 तेषु न त्वरया कुर्यादेहाग्निबलवित् क्रियाम् ॥ ३८ ॥
 प्रयोगैः क्षपयेद्वा तान् सुखं वा कोष्ठमानयेत् ।
 ज्ञात्वा कोष्ठप्रपञ्चांस्तान् यथासन्धं हरेद्वृधः ॥ ३९ ॥

If the aggravated *dosas* spread sideways then the patient continues to be afflicted with the disease for a long-time. One acquainted with the nature of the body, power of digestion and strength of the individual should not administer strong therapies for the treatment of this condition. By administering slow acting therapies in small dosas, such diseases should either be suppressed or brought to the *kosha* (alimentary tract) with ease. Having known of their arrival in the *kosha*, the wise physician should eliminate these *dosas*.

from their respective abodes by the administration of appropriate therapies. [38-39]

After the description of the classification of diseases, *dosas* as are amenable to treatment are described in the present verses. If the aggravated *dosas* spread sideways, it is very difficult to correct them immediately. So they afflict the patient with pain for a long time. If in such a condition, efforts are made to correct the condition immediately by administering medicines in a large quantity, then there is impairment of the body, digestive power and strength of the patient.

Difference between symptoms and disease :

शानार्थं यानि चोक्तानि व्याधिलिङ्गानि संग्रहे ।

व्याधयस्ते तदात्वे तु लिङ्गानीष्टानि नामयाः ॥ ४० ॥

In this section on the "Diagnosis of Diseases", *jvara* (fever) etc., are described to have some symptoms, viz. *aruci* (anorexia) etc. These symptoms in themselves also constitute diseases. But here, because of their subordinate nature, they are only symptoms and not diseases. [40]

Symptoms of diseases described here, viz. *avipdka* (indigestion), *aruci* (anorexia) etc., also individually constitute diseases but in the present context they are subordinate to the primary disease, viz. *jvara* (fever); hence they are regarded as symptoms only. A disease according to the dictums of *ayurveda* should be independent and curable by the specific therapy prescribed for it. *Aruci* (anorexia) etc., in the present context are not only dependant on *jvara* (fever) but they also get cured by the same therapies meant for the cure of *jvara* (fever), hence they are symptoms.

Dependence of causes :

चिकारः प्रकृतिशैव द्वयं सर्वं समासतः ।

तद्दतुवशां हेतोरभावान्नानुवर्तते ॥ ४१ ॥

All manifestations relating to the body and soul can briefly be categorized into two, viz. normal and abnormal, and both of them are dependent upon causative agents—none of these manifestations can continue in the absence of these causative agents. [41]

All the normal and abnormal events in the body and the soul are dependent upon causative factors. For the maintenance of their normal state, i. e. positive health, one should resort to such regimens as would be conducive to their normalcy. Similarly, for the cure of diseases which constitute an abnormal state of the body, regimens as are conducive to this abnormalcy should be avoided. It may be argued that the disease *sottha* (oedema) persists even after the withdrawal of its causative factors, viz, curd etc., hence the statement that none of the manifestations continues in the absence of the causative factors does not hold good. But in

this case also, even if the causative factors like curd are withdrawn still the *dosas* already vitiated by these causative agents are active and they act as causative factors of oedema. Thus the statement is correct in all circumstances.

Conclusion :

तत्र श्लोकाः—

हेतवः पूर्वरूपाणि रूपाण्युपशयस्तथा ।
 संप्राप्तिः पूर्वमुत्पत्तिः सूत्रमात्रं चिकित्सितात् ॥ ४२ ॥
 ज्वरादीनां विकाराणामष्टानां साध्यता न च ।
 पृथगेकैकशश्चोक्ता हेतुलिङ्गोपशान्तयः ॥ ४३ ॥
 हेतुपर्यायनामानि व्याधीनां लक्षणस्य च ।
 निदानस्थानमेतावत् संग्रहेणोपदिश्यते ॥ ४४ ॥

To sum up :

Etiology, premonitory symptoms, actual symptoms, homologation, pathogenesis, first origin (mythological) and the brief line of treatment of epilepsy are described in this chapter.

Curability or otherwise of the eight diseases, viz. fever etc., description of etiology, symptomatology including premonitory symptoms and treatment including homologation of all diseases in common and individually, synonyms of etiology, disease and symptoms—these are described in brief in this section on the Diagnosis of Diseases. [42–44]

The description of incurability as a matter of fact, is available in this section in respect of all diseases except fever. But as incurability pertaining to the majority of diseases mentioned here is described, it was not advisable to exclude fever, while enumerating diseases in this context.

The etiology, symptomatology and treatment of all diseases in general are described in the first chapter of this section : for individual diseases, they are described in respective chapters.

The factor that binds the various diagnostic agents of diseases is known as '*nidāna*'. The term '*nidāna*' is primarily used to denote the piece of rope which is used to tie the hind legs of the cow during milking. Cf. Commentary on *Nidāna* 1:1-2.

इत्यग्निवेशाहुते तन्त्रे चरकप्रतिसंस्कृते निदानस्थाने अपस्मारनिदानं
 नामाष्टमोऽध्यायः । निदानस्थानं समाप्तम् ।

Thus ends the eighth chapter on the "Diagnosis of Epilepsy" of the section on "Diagnosis of Diseases" (*Nidānasthāna*) of Agnivesas' work as redacted by Caraka.

Thus ends the "Section on Diagnosis of Diseases."

विमान स्थानम्

Vimāna Section

CHAPTER I SPECIFIC ATTRIBUTES OF RASA

प्रथमोऽध्यायः

अथातो रसविमानं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the “Knowledge of Specific Attributes of *Rasa* (taste)”

Thus said Lord Ātreya. [1-2]

In *Nidānasthāna*, various factors which help in the diagnosis of diseases have been described. Now, with a view to initiating treatment, it is necessary to be acquainted with the details of the *dosas*, drugs etc. This section is intended to fulfil this purpose. Knowledge of the specific attributes of *rasa* (taste) is the most important topic among *dosas* and drugs. This is being described in the first chapter of this section. The author himself will describe the relation between the previous and the present sections in the next paragraph.

Measurement of dosas etc. :

इह खलु व्याधीनां निमित्तपूर्वरूपरूपोपशयसंख्याप्राधान्यविधिचिक-
ल्पबलकालविशेषाननुप्रविश्यानन्तरं दोषभेषजदेशकालबलशरीरसाराहारसात्म्य-
सत्त्वप्रकृतिवयसां मानमवहितमनसा यथावज्ज्ञेयं भवति भिषजा, दोषादिमानज्ञा-
नायत्तत्वात् क्रियायाः । न हमानज्ञो दोषादीनां भिषग् व्याधिनिग्रहसमर्थो भवति ।
तस्माद्बोधादिमानज्ञानार्थं विमानस्थानमुपदेश्यामोऽग्निवेश ! ॥ ३ ॥

After ascertaining the characteristic features etiology, premonitory symptoms, symptomatology, homologation, number, dominance, permutation and combination, and temporal strength, the physician should devote himself to a correct appraisal of the measurement and specific characteristics of *dosas*, drugs, locality, season, strength, physique, excellence of *dhatus*, diet, homologation, mind, constitution and age. For, the treatment of a disease depends upon the knowledge of the specific features of these factors, viz. *dosas* etc., in the patient. A physician, not acquainted with the specific features

of *dosas* etc., will not be able to cure the disease properly. Therefore, O ! Agniveśa, we shall describe the section on the "Knowledge of Specific Attributes of *Dosas*, Druge etc. [3]

Pathogenesis in all its aspects, viz., number etc. is described in this section. Various aspects of the etiology etc., involve elaborate description; they are described here but too generally.'

Attributes of rasas etc. :

तत्रादौ रसद्रव्यदोषविकारप्रभावान् वक्ष्यामः । रसास्तावत् षट्—मधु-
राम्लवर्णकटुतिक्कषयायाः । ते सम्यगुपयुज्यमानाः शरीरं यापयन्ति, मिथ्योप-
युज्यमानास्तु खलु दोषप्रकोपायोपकल्पने ॥ ४ ॥

In the beginning, we shall describe the specific attributes of *rasa* (taste), *dravya* (substance), *dosas* and *vikara* (disease). There are six *rasas* (tastes), viz. sweet, sour, saline, pungent, bitter and astringent. When employed properly, they maintain the body and their incorrect utilisation results in the vitiation of *dosas* [4]

Rasas (tastes) and *dravyas* (substances) in the form of drugs, alleviate diseases, and they are also responsible for the vitiation of *dosas*. Because of this importance, *rasas* and *dravyas* are given priority in the order of description in preference to *dosas*. In para—3, however, the description of *dosas* precedes that of the drugs because selection of drugs is dependant upon the nature of the vitiation of *dosas*.

Specific attributes of *rasas* etc., may be rational or empirical. Rationality of these attributes will be described in para—9 of this chapter. Incorrect employment of *rasas*, mentioned above includes their non-utilisation, excessive utilisation and wrong utilisation.

Dosas :

दोषाः पुनर्खयो वातपित्तक्षेप्याणः । ते प्रहृतिभूताः शरीरोपकारका
भवन्ति, विष्ट्रितमापन्नास्तु खलु नानाविधैविकारैः शरीरमुपताप्यन्ति ॥ ५ ॥

Dosas are three, viz., *vata*, *pitta* and *kapha*. During their normal state, they sustain the body. When vitiated, they afflict the body with the various types of diseases. [5]

The term '*dosa*' here indicates those relating to the body; *dosas* of the mind are excluded from the purview of this description.

Rasas and dosas their relationship :

तत्र दोषमेकैकं त्रयखयो रसा जनयन्ति, त्रयखयश्चोपशमयन्ति । तद्यथा-
कटुतिक्कषयावातं जनयन्ति, मधुराम्लवर्णास्त्वेन शमयन्ति, कट्वम्ल-
वर्णाः पित्तं जनयन्ति, मधुरतिक्कषयायास्त्वेनच्छमयन्ति, मधुराम्लवर्णाः
स्त्रेप्याणं जनयन्ति, कटुतिक्कषयायास्त्वेन शमयन्ति ॥ ६ ॥

One of these *dosas* is vitiated by the three of the *rasas* (tastes),—the remaining three *rasas* alleviate that particular *dosa* as follows :—

	<i>Vata</i>	<i>Pitta</i>	<i>Kapha</i>
Aggravating tastes.	pungent, bitter and astringent.	pungent, sour and saline.	sweet, sour and saline.
alleviating tastes.	sweet, sour and saline.	sweet, bitter and astringent.	pungent, bitter and astringent.

[6]

Substances having pungent, bitter and astringent tastes alleviate *vata* only in the absence of any inhibiting factor. Drugs like *arka* (*Calotropis gigantea* R. Br. ex. Ait.) *aguru* (*Aquilaria agallocha* Roxb.) and *guḍuci* (*Tinospora cordifolia* (Miers)) do not provoke *vata* inspite of their bitter taste, the reason being that their hot potency serves as an inhibiting factor for the manifestation of some of the normal actions of tastes.

Use of the term ‘enam’ in the paragraph above indicates that by virtue of their contradistinctive properties, tastes like sweet, sour and saline alleviate *vata* which is aggravated by pungent, bitter and astringent tastes; for, *vata* aggravated otherwise, e. g. due to vigil etc., sleep is specifically useful. This applies to the aggravation and alleviation of *pitta* and *kapha* also.

रसदोषसन्धिपाते तु ये रसा यैर्दोषैः समानगुणाः समानगुणभूयिष्ठा वा भवन्ति ते तानभिवर्धयन्ति, विपरीतगुणा विपरीतगुणभूयिष्ठा वा शमयन्त्यभ्यस्यमाना इति । एतद्वावस्थाहेतोः षट्त्वमुपदिश्यते रसानां परस्परेणां संसृष्टानां, त्रित्वं च दोषाणाम् ॥ ७ ॥

In the course of interaction between the *rasas* (tastes) and *dosas* inside the body, *dosas* are aggravated by such of the *rasas* which are entirely or considerably homologous with them. On the other hand, *dosas* get alleviated by the habitual utilisation of the *rasas* having contradistinctive properties entirely or considerably. It is with a view to indicating this mode of action that the six *rasas* (tastes) and the three *dosas* are described individually-unmixed with each other. [7]

Rasas may be entirely or considerably homologous with *dosas*. In the former case, there will be more aggravation of *dosas* than in the latter case. This is indicated by the use of the preposition “tu” in this paragraph. *Rasas* themselves are attributes and there cannot be any other attribute of these attributes. Still, the attributes of *rasas* mentioned here are for the sake of contextual use only. Virtually, these attributes belong to the substances having these specific *rasas*. This has already been elaborated in *Sūtra* 26 : 36.

By permutation and combination, *rasas* and *doṣas* become innumerable. Even so, for the sake of convenience in describing their action, they are stated to be limited in number. So there are six *rasas* (tastes) and three *doṣas*.

Innumerability of permutations and combinations of rasas and doṣas :

संसर्गचिकल्पविस्तरो हेषामपरिसंख्येयो भवति, विकल्पभेदापरिसंख्येत्वात् ॥ ८ ॥

Innumerable are the permutations and combinations of *rasas* and *doṣas*, as the degrees of their combination are innumerable. [8]

The reason for not furnishing the details of the permutation and combination of *rasas* (tastes) and *doṣas* is given in this paragraph. Such permutations and combinations being innumerable, only six types of *rasas* and three types of *doṣas* are described here. In *Sūtra* 26 : 22, sixty-three varieties of permutations and combinations are no doubt described but, all these permutations and combinations are limited to this number, i. e. six only c.f. *Sūtra* 26 : 22.

तत्र खल्वनेकरसेषु द्रव्येष्वनेकदोषात्मकेषु च विकारेषु रसदोषप्रभावमेकैकश्येनाभिसमीक्ष्य ततो द्रव्यविकारयोः प्रभावतत्त्वं व्यवस्थेत् ॥ ९ ॥

Substances (drugs) are composed of many tastes. Similarly diseases are caused by many *doṣas*. Therefore, the specific manifestations of drugs and diseases can be determined by taking into account the specific attributes of the *rasas* (tastes) and *doṣas* (jointly and severally). [9]

In the above paragraph, the method of determination of the specific attributes of drugs having many tastes and the manifestations of diseases caused by many (vitiated) *doṣas* and the specific action of the former on the latter are described.

Perverted combination of rasas and doṣas :

न त्वेवं खलु सर्वत्र । न हि विकृतिविषमसमवेतानां नानात्मकानां परस्परेण चोपहतानामन्यैश्च विकल्पनैविकल्पितानामवयवप्रभावानुमानेनैव समुदायप्रभावतत्त्वमध्यवसातुं शक्यम् ॥ १० ॥

The above statement (in para-9) does not hold good in all circumstances. Because of the variations in the curative effects of drugs, affection of one property of the drug by another and method of their preparation which leads to perversion or irregularity in combination, it is not possible to determine the attributes of a substance having many tastes or the manifestation of a disease caused by many *doṣas*, simply by taking into account, the attributes of individual tastes and *doṣas*. [10]

Sweet taste in *tanduliyaka* (*Amaranthes tricolor* Linn.) illustrates the perversion in combination. Normally sweet taste is *inter-alia* unctuous and aphrodisiac, but this taste in *tanduliyaka* (*Amaranthes tricolor* Linn.) does not produce any such effect in the body. Astringent, pungent, bitter and sweet tastes of *tila* (*Sesamum indicum* Linn.) also illustrate the irregular combination. When these *rasas* are combined in equal proportion, then *tila* (*Sesamum indicum* Linn.) should normally alleviate *pitta* and *kapha*—rather all the three *dosas*—but actually it aggravates *pitta* and *kapha*. This indicates that there is some irregularity in the combination inasmuch as some of these *rasas* (tasted) are manifested while others are not.

If there is any variation in the causative factors of *rasas* or *dosas* (which constitute the drugs and diseases respectively) this results in the corresponding variation of the attributes of drug and the manifestations of diseases. Such variations may also be effected by the quantity in which *rasas* (tastes) and *dosas* are combined. If there is a combination of either *rasas* or *dosas*, one of their attributes may as well suppress the other. Of course, such affectations or suppressions of the one by the other is almost absent in the case of *dosas* though it may occur occasionally due to some unforeseen factors. This is of course a common occurrence in the case of *rasas*.

There may be variation in the property of the same drug, depending upon the pharmaceutical process involved in its preparation. Similarly, the same *dosha* may have different manifestations depending upon the *dhatus* which are vitiated by them—cf. *Sutra* 18 : 45.

In the explanation furnished above, proportionate increase or decrease of *rasas* (tastes) and *dosas* is described as a factor for the irregular combination in a drug or disease. This does not appear to be appropriate. The dominant as well as recessive *rasas* (tastes) or *dosas* manifest their actions but the former always dominate if the total manifestations are taken into account. Thus the total manifestations of a drug or disease can be well inferred from the attributes of the individual *rasas* and *dosas*. If it is argued that attributes other than those of the individual *rasas* and *dosas* are manifested in the drugs and diseases composed of them, this amounts to perversion in combination (*vikrtasamaveta*) and not irregularity in combination (*visamasamaveta*) because there is dissimilar manifestation.

Because of the above mentioned fallacies, the paragraph-10 is differently explained. There are two types of the combination of *rasas* and *dosas*, viz. (a) similar to the nature of the constituent factors (*prakrtyanuguna*) and (b) dissimilar to the nature of the constituent factors (*prakrtyananuguna*). When there is combination without inhibition of the attributes of the constituent factors in the resultant manifestation, then, this is known as *prakrtisamasamavaya*. When however there is inhibition of the attributes of any of the factors constituting the drug or the disease, then this is known as *vikrtivisamasamavaya*.

The term "vikṛitiśamasamavāya" can be explained as the combination (*samavāya*) involving the manifestation of attributes which are contradictory to those normally present in the constituent factors (*vिषमा=प्रकृत्याननुगुणा*) due to the perversion of the latter (विकृत्या हेतुमूलया).

Some scholars, however, bifurcate the term विकृतिविषमसमवाय into विकृतिसमवाय and विषमसमवाय. In view of the lengthy details involved in the explanation of विषमसमवाय (irregular combination) which renders the inference of the attributes of its constituent factors difficult, they explain this aspect of the combination as the specific action manifestation of drugs and diseases.

Need for ascertaining the total effect :

तथायुके हि समुदये समुदायप्रभावतत्त्वमेवमेवोपलभ्य ततो द्रव्यतिकार-
प्रभावतत्त्वं व्यवस्थेत् ॥ ११ ॥

From that type of combination involving the manifestation of attributes which are contradictory to those normally present in the constituent factors, one should determine the specific attributes of compounds and thereafter proceed to ascertain the specific attributes/manifestations of drugs and diseases. [11]

It is due to the specificity of the combination that the intake of honey and ghee mixed in equal quantity lead to death. So are the *doṣas*, (*vāta* etc.) vitiated so as to manifest the disease *suryāvara* which condition gets more and more aggravated according as the sun moves up and up in the sky. For the manifestation of *saninipātajvara*, the three *doṣas* like *vāta*, *pitta* and *kapha* may also combine in two different ways viz.,

- (a) the combination may have manifestations similar to those of the individual *doṣas*;
- (b) the combination may have manifestations dissimilar to those of the individual *doṣas*.

The former type of *saninipāta* is described in *Nidāna* 1 : 29 and the latter in *Cikitsā* 3 : 103-109. Manifestations of the latter type of *saninipāta*, like the appearance of urticaria having brown or red colour, has nothing to do with those of the individual *doṣas*.

In the drugs where the resultant manifestation is similar to those of the constituent *rasas* the author does not consider it necessary to describe the *rasas* (tastes) individually. E. G. in *āmrāta* (*Mangifera indica* Linn.) the sweet taste manifests its action by alleviating *vāta* and *pitta*. Because of this manifestation quite in consonance with the constituent *rasas* (tastes), the author will not describe these properties of *āmrāta*. The pungent and the bitter tastes of *vārtāka* (*Solanum melongena* Linn.) on the other hand should normally aggravate *vāta*, but due to the manifestation of attributes dissimilar to those of the constituent *rasas* (tastes), *vārtāka* actually allevi-

ates *vata*—cf. *Sūtra* 27 : 162. Such dissimilar manifestations are described by the author in respective places.

In some places, however, the author describes the attributes manifestations of drugs and diets which are in consonance with the constituent *rasas* (tastes) and *dosas* of the drugs and diseases respectively. He does so for the sake of emphasis and easy understanding.

तस्माद्रसप्रभावतश्च द्रव्यप्रभावतश्च दोषप्रभावतश्च विकारप्रभावतश्च तत्त्वमुपरदेश्यामः ॥ १२ ॥

Therefore, we shall explain their specific attributes and manifestations on the basis of the specific attributes of tastes, specific attributes of drugs, specific manifestations of *dosas* and specific manifestations of diseases. [12]

Thus the attributes and manifestations of drugs and diseases may be either similar or dissimilar to those of the tastes and *dosas* respectively. The earlier statement in para 4, viz. “तत्रादौ रसद्रव्यदोषविकारप्रभावान् वक्ष्यामः” is indicative of the former (प्रकृतिसमसमवाय) type whereas the one in para-12 is indicative of the latter (विकृतिविषमसमवाय) type. Specific attributes of *virya* and *vipāka* are included in the specific attributes of taste or drug. When these attributes of *virya* and *vipāka* are similar to those of the taste, they are included in specific attributes of taste; otherwise (i. e. when they are dissimilar) they are included in the specific attributes of drugs. These specific attributes of taste etc., will be explained in the entire text in appropriate places.

Specific attributes of rasas :

तत्रैष रसप्रभाव उपदिष्टो भवति । द्रव्यप्रभावं पुनरुपदेश्यामः । तैलसर्पिं-
मधूनि वातपित्तश्लेष्मप्रशमनार्थानि द्रव्याणि भवन्ति ॥ १३ ॥

तत्र तैलं स्नेहोर्ण्यगौर वोपपञ्चत्वाद्वातं जयति सततमभ्यस्यमानं; वातो हि रौक्ष्यशैत्यलाघवोपपन्नो विरुद्धगुणो भवति, विरुद्धगुणसञ्चिपाते हि भूयसा-
उल्पमवजीयते, तस्मात्तैलं वातं जयति सततमभ्यस्यमानम् । सर्पिः खल्वेवमेव
पित्तं जयति, माधुर्याच्छैत्यान्मन्दत्वाच्च; पित्तं हामधुरमुण्ठं तीक्ष्णं च । मधुं च
श्लेष्माणं जयति, रौक्ष्यात्तैश्चयात् कथायत्वाच्च; श्लेष्मा हि स्निग्धो मन्दो मधु-
रश्च । यच्चान्यदपि किञ्चिद्द्रव्यमेवं वातपित्तकफेभ्यो गुणतो विपरीतं स्यत्तच्चै-
ताज्जयत्यभ्यस्यमानम् ॥ १४ ॥

Specific attributes of taste are described above (in paras 4-12) in brief. Specific attributes of drugs (already described in brief) will be further elaborated.

Oil, ghee and honey are alleviators of vata, pitta and kapha respectively.

Continuous use of oil alleviates *vata*, as oil is unctuous, hot and heavy ; *vata* being ununctuous, cold and light is of the

opposite nature. When there is the interaction between substances having mutually opposite qualities, the stronger dominates over the weaker; therefore continuous use of oil alleviates *vāta*. Similarly due to sweet taste, coldness and dullness, ghee ^{P. 11.5} alleviates *pitta*; *pitta* is pungent (other than sweet) in taste, hot and sharp. Honey alleviates *kapha* as it is ununctuous, sharp and pungent in taste ; *kapha* is unctuous, dull and sweet.

Other substances having attributes opposite to those of the respective *dosa* (i. e. *vāta*, *pitta* and *kapha*) also alleviate them when continuously used. [13-14]

Another reading of the first sentence in para-13 in “तत्रैष रसप्रभाव उद्दिष्टो भवति”. This reading, if accepted indicates that the specific attributes of other factors, viz. drug, *dosas* and diseases are mentioned in brief, whereas those of *rasa* (taste) are elaborated above; hence it is the taste and not other factors which find mention in this statement.

When two substances having opposite qualities interact, the stronger dominates over the weaker. That is why emphasis is laid here on the “continuous use” of oil which by all means would be stronger than *vāta*.

The term ‘*prabhāva*’ used in para-13 does not mean empirical action but the rational action of the drug. The rationality of this action of the drugs has been explained in accordance with their attributes. Sweet taste of ghee, no doubt, is an alleviator of *pitta* but it is not the taste alone but other attributes associated with ghee, viz. coldness, dullness etc., which combined together alleviate *pitta* in all its aspects. So this action of ghee is not determined by taste alone but by the congregation of all attributes present. Thus, *rasa* is but one of the factors responsible for the manifestation of the therapeutic action of a drug. Similar is the explanation of the action of the astringent taste on *kapha*.

Some scholars are of the view that *vāta* etc., are alleviated by the empirical action of oil etc., and it is because of this that the effect of oil is not overcome by *vāta*. Some other scholars, while not agreeing with this, hold the view that mention of the term ‘*satataṁbhayasyamāna*’ meaning ‘continuous use’ for oil etc., indicates that, left to their normal and occasional use, oil etc., would not be able to alleviate *vāta* and it is only their continuous use which is effective in such cases. So they feel that it is with this end in view, that in the last sentence of para-14, the author himself has described attributes to be responsible for the manifestation of such actions.

Three substances not to be used in excess :

अथ खलु त्रीणि द्रव्याणि नात्युपयुज्ञीताधिकमन्येभ्यो द्रव्येभ्यः; तद्यथा—
पिण्डली, क्षारः, लवणमिति ॥ १३ ॥

Of all the substances, one should not resort too much to the three, viz. *pippali* (*Piper longum* Linn.), alkali and salt. [15]

In para-14, drugs which are to be used continuously are described. In para-15 those which should not be used continuously are described. There are many drugs, viz. *citraka* (*Plumbago zeylanica* Linn.), *bhallātaka* (*Semecarpus anacardium* Linn. f.) etc., which are not to be used in excess. Of all these, continuous use of *pippali* (*Piper longum* Linn.), alkali and salt in excess is strictly prohibited.

Justification for not using Pippali in excess :

पिप्पल्यो हि कटुकाः सत्यो मधुरविपाका गुच्छो नात्यर्थं लिङ्घोष्णाः प्रक्लेदिन्यो भेषजाभिमताश्च ताः सद्यः; शुभाशुभकारिण्यो भवन्ति; आपातभद्राः; प्रयोगसमसादगुण्यात्; दोषसञ्चायानुबन्धाः;—सततमुपयुज्यमाना हि गुरुव्यक्तेऽदत्याच्छ्लेष्माणमुत्क्लेशयन्ति, औष्यात् पित्तं, न च वातप्रशमनायोपकल्पन्ते इत्येहोष्णभावात्; योगवाहिन्यस्तु खलु भवन्ति; तस्मात् पिप्पलीर्नात्युपयुजीत्॥१६॥

Pippalis (*Piper longum* Linn.) inspite of their pungent taste are sweet in *vipaka*, heavy, neither too unctuous nor too hot, deliquescent and useful as medicine when administered afresh. (Depending upon the frequency of use), they are both useful and harmful. When properly used (in small dose for a short period) they produce good results instantaneously, otherwise, they are responsible for the accumulation of *dosas*. When continuously used in large dose, they aggravate *kapha* owing to their heaviness and deliquescent property; they aggravate *pitta* owing to their hot property. They do not alleviate *vata* because they are not adequately unctuous or hot. They intensify the action of drugs to which they are added. Therefore, *pippali* (*Piper longum* Linn.) should not be used in excess. [16]

Pippali (*Piper longum* Linn.) when used properly alleviates *dosas*. However, their excessive and continuous use for a long time, leads to the aggravation of *dosas*.

Inspite of its harmful effects, *pippali*, when added to a drug, intensifies the latter's actions. It is because of this that *pippali* is used in aphrodisiacs and also in therapies for the treatment of fever, *gulma* and *kuṣṭha* (obstinate skin diseases including leprosy). These are the exceptions to the rule that "*pippali* should not be used continuously for a long time." Therefore the prescriptions of *Pippalirasayana* (an elixir prepared of *pippali*) and *Pippalivardhamānayoga* (a therapy involving the administration of *pippali* in graded dose) do not involve any contradiction. From the statements of *Rsis* (Seers), it can very well be inferred that in these diseases use of *pippali* is without any injurious effect.

Some other scholars hold the view that excessive use of *pippalī* in food preparations only is prohibited; This prohibition according to them, does not apply to the separate use of *pippalī*.

Justification for not using alkalies in excess :

क्षारः पुनरौष्ण्यतैक्षण्यलाघवोपपन्नः क्लेयत्यादौ पश्चाद्विशोषयति, स पचनदहनमेदनार्थमुपयुज्यते; सोऽतिप्रयुज्यमानः केशाक्षिहृदयपुंस्त्वोपघातकः संपद्यते। ये ह्येन ग्रामनगरनिगमजनपदाः सततमुपयुज्जते त आन्ध्यधाराद्व्यखालित्यपालित्यभाजो हृदयापकर्तिनश्च भवन्ति, तदथा—प्राच्याश्वीनाश्च; तस्मात् क्षारं नात्युपयुज्जीत ॥ १७ ॥

Alkali is associated with hot, sharp and light properties. In the beginning it works as a deliquescent and afterwards as a dessicant. It is used for suppuration, cauterisation and penitration. Its excessive use produces injurious effects on hair, eyes, heart and virility. People of villages, towns, cities and countries, where this is continuously used in excess, suffer from blindness, impotency, baldness, grey hair and heart diseases characterized by sawing pain. They are the people of the Eastern Side and Chineese. Therefore, alkali should not be used in excess. [17]

Justification for not using salt in excess :

लवणं पुनरौष्ण्यतैक्षण्योपपन्नम्, अनतिगुरु, अनतिक्लिञ्चम्, उपक्लेदि, विस्त्रिंसनसमर्थम्, अन्नद्रव्यरुचिकरम्, आपातभ्रद्रं प्रयोगसमसाद्गुण्यात्, दोषसंचयानुबन्धं, तद्रोचनपाचनोपक्लेदनविस्त्रिंसनार्थमुपयुज्यते। तदत्यर्थमुपयुज्यमानं ग्लानिरौथियदौर्बल्याभिन्वृत्तिकरं शारीरस्य भवति। ये ह्येनद्यामनगरनिगमजनपदाः सततमुपयुज्जते, ते भूयिष्ठं ग्लान्नवः शिथिलमांसशोणिता अपरिक्लेशसहाश्च भवन्ति। तदथा—बाह्यकसौराश्चिकसैन्धवसौवीरकाः; ते हि पयसाऽपि सह लवणमश्वन्ति। येऽपीह भूमेरत्यूषरा देशास्तेष्वेषधिवीरुद्धनस्पतिवानस्पत्या न जायन्ते उल्पतेजसो वा भवन्ति, लवणोपहतत्वात्। तस्माल्लवणं नात्युपयुज्जीत। ये ह्यतिलवणसात्म्याः पुरुषास्तेषामपि खालित्यपालित्यनिवलयश्चाकाले भवन्ति ॥ १८ ॥

Salt is associated with hot and sharp properties. It is neither very heavy nor very unctuous. It is deliquescent and is capable of producing laxative effect. It makes food delicious. When properly used, it produces good results. It is however responsible for the accumulation of *dosas* if not used properly. It is used as an appetiser, digestive, deliquescent and laxative. When excessively used, it produces fatigueness, lassitude and weakness in the body. People of villages, towns,

cities and countries, where it is continuously used in large quantity, are mostly languid and of loose flesh and blood, and they are unable to stand hardships. People of Bāhlīka (Balkh), Saurāṣṭra, Sind and Sauvīra (people inhabiting a district in the neighbourhood of Indus MW.), belong to this category. They take salt even with milk. Even in the localities having saline soil, herbs, creepers, *vanaspatis* (trees having fruits without flowers) and *vānspatyas* (trees having fruits from flowers) do not grow at all or grow sluggishly because of the inhibiting effect of the salt in the soil. Therefore, salt should not be used in excess. People who are accustomed to the excessive use of salt, suffer from premature baldness, grey hair and wrinkles in the skin. [18]

In a small dose, salt can even be used continuously in the preparations of food articles but such continuous use in large dose is harmful. In countries other than Bāhlīka (Balkh) etc., excessive use of salt is harmful even for those who are used to such excessess, inasmuch as they suffer from looseness of muscles etc., even though such conditions should not normally occur because of the specificity of that locality.

Withdrawing from these habits gradually :

तस्मात्तेषां तत्सात्म्यतः क्रमेणापगमनं श्रेयः । सात्म्यमपि हि क्रमेणोप-
निवर्त्यमानमदोषमल्पदोषं वा भवति ॥ १९ ॥

Therefore, people habituated with the intake of alkali and salt continuously in large quantity should give up this habit slowly (following the principle laid down in *Sūtra* 7 : 36-37. Even if the body be accustomed to these habits, the slow discontinuance of this habit does not have any harmful effect or even if it has, the harm caused is too insignificant. [19]

The term '*Sātmya*' normally means a thing or habit useful for the body. But, here, this term carries a slightly different meaning, i. e., acclimatisation of the body to these habits (*okasātmya*) which does not necessarily mean that they are useful for the body. When the habit is of a longer duration, its discontinuance results in harms in lesser quantity to the body. When it is of a shorter duration, its discontinuance does not produce any harmful effect on the body.

Sātmya :

सात्म्यं नाम तद् यदात्मन्युपशेते; सात्म्यार्थो हृषशयार्थः । तत्रिविधं
प्रवरावरमध्यविभागेन; सप्तविधं तु रसैकैकत्वेन सर्वरसोपयोगाच्च । तत्र सर्वरसं
प्रवरम्, अवरमेकरसं, मध्यं तु प्रवरावरमध्यस्थम् । तत्रावरमध्याभ्यां सात्म्या-

भ्यां क्रमेणैव प्रवरमुपपादयेत् सात्म्यम् । सर्वरसमपि च सात्म्यमुपपन्नः प्रकृ-
त्याद्युपयोक्त्रष्टुमानि सर्वाण्यहारविधिविशेषायतनान्यभिसमीक्ष्य हितमंदानु-
स्थेत् ॥ २० ॥

A substance conducive to an individual is called ‘*sātmya*’ and the use of such substances results in the well-being of that individual. This is of three types, viz. superior, inferior and mediocre. According to another mode of classification, it is of seven types, depending upon the administration of individual *rasas* or tastes (six types) and the use of *rasas* or tastes jointly (seventh type). Use of all the *rasas* is of the superior type of *sātmya*; use of only one *rasa* is of an inferior type and in between the superior and the inferior types is the mediocre type of *sātmya*. The inferior and mediocre types should be slowly changed over to the superior type of *sātmya*. If he is used to the superior type of *sātmya*, i. e. the habitual intake of substances having all the six tastes, the individual should adopt only the wholesome diet, taking into account the eight factors beginning with *prakṛti* (the nature of the food) and ending with *upayoktṛ* (the wholesomeness to the individual who takes it) which determine the utility or otherwise of a particular type of food. [20]

Here the term ‘*sātmya*’ is used to convey the idea of ‘*okasātmya*’ (i. e. to make a substance conducive to the body by its habitual intake). Seven-fold classification of *sātmya* includes the six individual *rasas* and either two to five or all the six *rasas* taken together. In the three-fold classification of *sātmya*, viz., superior, inferior and mediocre types, the last one stands for the habitual intake of two to five *rasas* jointly.

Eight factors determining the utility of food :

तत्र खल्विमान्यष्टवाहारविधिविशेषायतनानि भवन्ति; तद्यथा—प्रकृति-
करणसंयोगराशिदेशकालोपयोगसंस्थेपयोक्त्रष्टुमानि (भवन्ति) ॥ २१ ॥

The eight factors which determine the utility or otherwise of various types of food are : (i) *prakṛti* (nature of the food articles), (ii) *karaya* (method of their processing), (iii) *samiyoga* (combination), (iv) *rāsi* (quantity); (v) *desa* (habitat), (vi) *kala* (time, i.e. stage of the disease or the state of the individual), (vii) *upayogasainstha* (rules governing the intake of food) and (viii) *upayoktṛ* (wholesomeness to the individual who takes it. [21]

Nature of the substance :

तत्र प्रकृतिरुच्यते स्वभावो यः, स पुनराहारौषधद्रव्याणां स्वाभाविको
गुर्वादिगुणयोगः; तदथा—माषमुद्रयोः, शूकरैणयोश्च ॥ १ ॥

Prakṛti indicates the nature of the substance, i. e. inherent attributes (heaviness etc.) of diets and drugs. E. G. *māṣa* (*Phaseolus radiatus* Linn.) is heavy and *mudga* (*Phaseolus mungo* Linn.) is light and meat of *sūkara* (Boar) is heavy and that of *ēṇa* (Deer) is light. [22-I]

Processing of the substances :

करणं पुनः स्वाभाविकानां द्रव्याणामभिसंस्कारः । संस्कारो हि गुणान्तराधानमुच्यते । ते गुणास्तोयाग्निसंश्लिष्टकर्षशौचमन्थनदेशकालवासनभावनादिभिः कालप्रकर्षभाजनादिभिश्चाधीयन्ते ॥ २ ॥

Karana meas the processing of the (inherent attributes of) substances. Processing results in the transformation of the inherent attributes of substances. Transformation of the attributes is effected by dilution, application of heat, cleansing, churning, storing, maturing, flavouring, impregnation, preservation, container etc. [22-II]

During the creation of a substance, due to the particular mode of combination of *bhūtas* (basic elements), some attributes are manifested. These inherent attributes of the substance undergo transformation during processing with various agents. An example of the transformation of attributes by dilution, application of heat and cleansing is the lightness of hot rice prepared by boiling after cleansing well and filtering the water out of it—cf. *Sūtra* 27 : 257. Red variety of *sāli* rice which is by nature light becomes lighter when prepared according to the above mentioned process. Curd by nature aggravates oedema; when churned, even with the fat content of it remaining intact, it alleviates oedema. This illustrates the transformation of attributes by churning.

The processed *āmalaki* (*Emblica officinalis* Gaertn.) alongwith other drugs is required to be kept inside the heap of ash—c. f. (*Cikitsā* 1 : 1 : 53). This illustrates the transformation of attributes by storing. (*Cakrapāṇi* is silent about the illustration for *kāla*, meaning maturity, as a factor responsible for bringing about transformation of the attributes.)

Addition of sweet smelling drugs like *utpalā* (*Nymphaea alba* Linn.) in water illustrates the transformation of attributes by flavouring. By impregnation with the juices of various druge, viz., *āmalaki* (*Emblica officinalis* Gaertn.) etc., the drugs is dominated by the attributes of the impregnating material.

Ingredients of *Durālabhāsava* are required to be kept in a jar smeared with ghee for 15 days before use—cf. *Cikitsā* 15 : 154. This illustratest he

transformation of attributes by preservation. Similarly a container also helps in the transformation of attributes, e. g. *Triphalārasāyana* is described to be prepared in a new iron container smeared with the paste of *āmalaki* (*Emblica officinalis* Gaertn.)—cf. *Cikitsā* 1 : 3 : 43. In addition to the above, there are other methods of processing like making a paste and impregnating it with incantations which also bring about transformation of attributes of a substance.

If nature is immutable, how is it that the nature of substances undergoes changes by processing? Unchangeability of nature relates to the original substances, e. g. heaviness in the entire class of *māṣa* (*Phaseolus radiatus* Linn.). In its original form it is undoubtedly unchangeable. But by processing, the attributes do undergo changes. There are, however, substances where the attributes are invariably present till the substance exists and they do not undergo any change even by processing, e.g. the heat of the fire, mobility of air and unctuousness of oil. Heaviness of rice does not belong to such category, inasmuch as it undergoes a change even when the rice becomes old, i. e. preserved for sometime. Thus it is said that attributes of a substance undergo change either when the substance ceases to exist or when it shares the attributes of others (during processing). Rice, when fried, undergoes a material change; hence there is change in its attributes as well.

Combination of substances :

संयोगः पुनर्द्योर्बहूनां वा द्रव्याणां संहतीभावः, स विशेषमारभते, यं पुनर्नैकरूपे द्रव्याण्यारभन्ते; तद्यथा—मधुसर्पिषोः, मधुमत्स्यपयसां च संयोगः ॥ ३ ॥

Sanyoga is the combination of two or more substances. This results in the manifestation of specific attributes which cannot be manifested by individual substances e. g. combination of honey and ghee or honey, fish and milk. [22-III]

Neither honey nor ghee causes death. But when these two are combined in equal quantity and taken, this results in death. Similarly neither fish nor milk causes *kusṭha* individually. But their combination undoubtedly causes *kusṭha* (obstinate skin diseases including leprosy).

Combination (*sanyoga*) here means the union of two or more dominant substances. Impregnation, no doubt, involves the union of one substance with another but the substance with which the drug is impregnated is not dominantly observed; hence this union, in the present context cannot be treated as combination (*sanyoga*).

Quantum of substance :

राशिस्तु सर्वग्रहपरिग्रहौ मात्रामात्रफलविनिश्चयार्थः । तत्र सर्वस्याहारस्य प्रमाणग्रहणमेकपिण्डेन सर्वग्रहाः, परिग्रहः पुनः प्रमाणग्रहणमेकश्येनाहार-द्रव्याणाम् । सर्वस्य हि ग्रहः सर्वग्रहः, सर्वतत्त्वं ग्रहः परिग्रह उच्यते ॥ ४ ॥

Rāsi is the quantum of total (*sarvagraha*) or individual (*parigraha*) substances which determines the results of their administration in proper and improper dosage. The quantity food taken in its entirety is '*sarvagraha*' and the quantity of each of its ingredients is '*parigraha*.' Quantity of all things involved is *sarvagraha* and that of each and everything individually is *parigraha*. [22-IV]

Habitat of substance :

देशः पुनः स्थानं; स द्रव्याणामुत्पत्तिप्रचारौ देशसात्म्यं चाचष्टे ॥५॥

Desa relates to the habitat. It determines attributes due to procreation (growth) or movement of substances in a particular locality or their acclimatisation to that region. [22-V]

Drugs growing in the Himalayas are very efficacious and those in deserts are light. Animals which graze light food or those inhabiting deserts or those who are very active are light ; otherwise, they are heavy. One can get acclimatised to different types of localities by using substances having opposite qualities, e. g. use of hot and ununctuous substances in marshy land or cold and unctuous substances in deserts. Creating wholesomeness by habitual intake of things does not come under the purview of *desa*; it is described under *upayokta*.

Time :

कालो हि नित्यगश्चावस्थिकश्च; तत्रात्वस्थिको विकारमपेक्षते, नित्यगस्तु
क्रतुसात्म्यापेक्षः: ॥ ६ ॥

Kala stands for both the time in the form of day and night and the states of the individual, (viz. condition of health and age). The latter is relevant to the disease (e. g. manifestation of diseases due to *kapha* during childhood and fever etc., due to ditetic errors) whereas the former for the determination of the wholesomeness to different types of seasons. [22-VI]

Dietetic rules :

उपयोगसंस्था तृपयोगनियमः; स जीर्णलक्षणापेक्षः: ॥ ७ ॥

Upayogasamsthā stands for the dietetic rules. They are for the most part dependent on the symptoms of digestion. [22-VII]

In addition to the symptoms of proper digestion of the food previously taken there are many other factors (viz. one should not speak or laugh while taking food; one should not take food very hurriedly or very slowly etc.) which are to be taken into account under dietetics. "Symptoms of

proper digestion" found a specific mention here under the dietetics because intake of food before the previous food is digested, may provoke all the three *dosas* leading to serious consequences.

Habit of the individual :

उपयोक्ता पुनर्यस्तमाहारमुपयुड्के, यदायत्तमोकसात्म्यम् । इत्यप्राचाहा-रविधिविशेषायतनानि व्याख्यातानि भवन्ति ॥ २२ ॥

Upayok्त्र is he who takes food. He is, in the main, responsible for the wholesomeness by the habitual intake of things (*okasātmya*).

Thus the eight factors which determine the utility or otherwise of various types of food are explained. [22]

एषां विशेषाः शुभाग्नुभफलाः परस्परोपकारका भवन्ति; तात् बुभुत्सेत्, बुद्धा च हितेष्वरेव स्यात्; तत्र मोहात् प्रमादाद्वा प्रियमहितमसुखोदर्कमुपर्य-व्यमाहारजातमन्यद्वा किञ्चित् ॥ २३ ॥

These eight factors are associated specifically with useful and harmful effects and they are conditioned by one another. One should try to understand them and after understanding, he should resort to useful things alone. Neither due to ignorance nor intentionally, one should resort to such food articles or other things (drugs, regimens etc.) as are instantaneously pleasing but harmful in the long run leading to unhappy consequences. [23]

By nature, light things are useful and heavy things, harmful. Processing according to the prescriptions in scriptures is useful, otherwise, it is harmful. Substances grown in despisable lands and intake of food before the digestion of the previous meal are harmful. Habitual intake of harmful things in improper way is harmful and when adopted properly it is useful. These are some of the illustrations of specific usefulness and otherwise of the eight factors described in para-22.

Rules for taking food :

तत्रेदमाहारविधिविधानमरोगाणामातुराणां चापि केवाञ्चित् काले प्रकृत्यैव हिततमं भुज्ञानां भवति-उष्णं, स्निग्धं, मात्रावत्, जीर्णं वीर्यविरुद्धम्, इष्टे देशे, इप्सर्वोपकरणं, नातिद्रुतं, नातिविलम्बितम्, अजरपन्, अहसन्, तन्मना भुज्ञीत, आत्मानमभिसमीक्षय सम्यक् ॥ २४ ॥

Healthy individuals as well as (some of the) patients should observe the following, even while using such of the food articles as are most wholesome by nature: One should eat only that food in proper quantity which is hot, unctuous and not contradictory in potency and that too, after the digestion of the previous meal. Food should be taken in proper

place equipped with all the accessories, without talking and laughing, with concentration of mind and paying due regard to oneself. [24]

Taking hot food etc., may not be useful for all types of patients. E. G. to an individual suffering from *raklapitta* (a disease characterised by bleeding from different parts of the body), cold food will be useful. A food article which is by nature wholesome may not be useful for some individuals. But such exceptions are rare; they are not taken into account here.

(i) *Food should be warm :*

तस्य सादुण्यमुपदेश्यामः—उष्णमश्रीयात् ; उष्णं हि भुज्यमानं स्वदते, भुक्तं चाग्निमौदर्यमुदीरयति, क्षिप्रं जरां गच्छति, वातमनुलोमयाते, श्लेष्माणं च परिहासयति; तस्मादुष्णमश्रीयात् ॥ (१) ॥

Now we shall explain the utility of food articles. One should take warm food. When taken warm, it is delicious; after intake, it provokes the factors (enzymes) in the abdomen responsible for digestion; it gets digested quickly and helps in the downward passage of *vata* (wind) and detachment of *kapha*. Therefore, one should take warm food. [25-I]

(ii) *Food should be unctuous :*

स्निग्धमश्रीयात् ; स्निग्धं हि भुज्यमानं स्वदते, भुक्तं चानुदीर्णमग्निमुदीरयति, क्षिप्रं जरां गच्छति, वातमनुलोमयति, शरीरमुपचिनोति, हृदीकरोतीन्द्रियाणि, बलाभिन्वृद्धिमुपजनयति, वर्णप्रसादं चाभिनिर्वतयति; तस्मात् स्निग्धमश्रीयात् ॥ (२) ॥

One should take unctuous food; unctuous food is delicious, after intake, it provokes the subdued power of digestion; it gets digested quickly; it helps in the downward movement of *vata* (wind) it increases the plumpness of the body, strengthens the sense faculties, promotes strength and brings out the brightness of complexion. Hence one should take unctuous food. [25-II]

(iii) *Food in proper quantity :*

मात्रावदश्रीयात् ; मात्रावद्विभुक्तं वातपित्तकफानपीडयदायुरेव विवर्धयति केवलं, सुखं गुदमनुपर्येति, न चौष्माणमुपहन्ति, अव्यथं च परिपाकमेति; तस्मात्मात्रावदश्रीयात् ॥ ३ ॥

One should take food in proper quantity. When taken in proper quantity, it promotes longevity in its entirety without afflicting *vata*, *pitta* and *kapha*; it easily passes down to the rectum; it does not impair the power of digestion and it gets digested without any difficulty. [25-III]

(iv) *Intake after digestion of previous meal :*

जीर्णेऽश्रीयात् ; अजीर्णे हि भुज्ञानस्याभ्यवहृतमाहारजातं पूर्वस्याहारस्य रसमपरिणतमुत्तरेणाहाररसेनोपसूजत् सर्वान् दोषान् प्रकोपयत्याग्य, जीर्णे तु भुज्ञानस्य स्वस्थानस्थेषु दोषेष्वद्वाच्चोदीर्णे जातायां च बुझायां विवृतेषु च स्रोतसां मुखेषु विशुद्धे चोद्वारे हृदये विशुद्धे वातानुलोभ्ये विस्तृष्टेषु च वात-मूत्रपुरीषवेगेष्वभ्यवहृतमाहारजातं सर्वशरीरधातूनप्रदूषयदायुरेवाभिवर्धयति केवलं ; तस्माज्जीर्णेऽश्रीयात् ॥ (४) ॥

One should take food only when previous meal is digested. If one takes food before the digestion of the previous meal, the digestive product of the previous food, i. e. immature *rasa* gets mixed up with the product of food taken afterwards, resulting in the provocation of all the *dosas* instantaneously. If food is taken after the digestion of the previous food while the *dosas* are in their proper places and *agni* (digestive enzymes) is provoked, there is appetite, the entrances of the channels of circulation are open, eructation is purified, there is unimpaired cardiac function, downward passage of the wind and proper manifestation of the urges for voiding flatus urine and stool, then the product of food does not vitiate the *dhatus* of the body, but on the other hand it promotes longevity in its entirety. So one should take food only after digestion of the previous meal. [25-IV]

(v) *Intake of food having no contradictory potencies :*

वीर्याविरुद्धमश्रीयात् ; अविरुद्धवीर्यमश्वन् हि विरुद्धवीर्याहारजैर्विकारै-नोपसूज्यते; तस्माद्वीर्याविरुद्धमश्रीयात् ॥ (५) ॥

One should take food having no contradictory potencies. By taking such food one does not get afflicted with such diseases as may arise from the intake of food having mutually contradictory potencies. Therefore, one should take food having no contradictory potencies. [25-v]

Diseases caused by the intake of food having mutually contradictory potencies are *kuṣṭha* (obstinate skin diseases including leprosy), blindness and *visarpa* (a skin disease characterised by an acute spread). They are already described in *Sūtra*, 26:93.

(vi) *Intake in proper place and with all accessories :*

इष्टे देशे इष्टसर्वोपकरणं चाश्रीयात् ; इष्टे हि देशे भुज्ञानो नानिष्टदेशजैर्मनोविघातकरैर्भावैर्मनोविघातं प्राप्नोति, तथैवेष्टः सर्वोपकरणैः; तस्मादिष्टे देशे तथेष्टसर्वोपकरणं चाश्रीयात् ॥ (६) ॥

One should take food in proper place equipped with all the accessories. By doing so he does not get afflicted with such of the factors as would result in emotional strain which (normally) occurs when one takes his food in improper places without the required accessories. Therefore one should take food in proper place equipped with all accessories. [25-VI]

Factors which inflict strain on the mind, like passion etc., will be described in *Vimāna* 2:8.

(vii) *Intake, not in hurry :*

नातिद्रुतमश्रीयात् ; अतिद्रुतं हि भुज्ञानस्योत्स्वेहनमवसादनं भोजनस्या-प्रतिष्ठानं च , भोजयदोषसादगृण्योपलब्धिश्च न नियता; तस्मान्नातिद्रुतमश्रीयात् ॥ (7) ॥

One should not take food too hurriedly. If food is taken too hurriedly it enters into a wrong passage; it gets depressed and it does not enter into the stomach propely. In this situation one can never determine the taste of food articles and deetect foreign bodies like hair etc., mixed with them. Thus, one should not take food too hurriedly. [25-VII]

In the absence of the knowledge of the presence of foreign bodies like hair etc., the individual will take them all together with food which might lead to bad consequences.

(viii) *Intake, not too slow :*

नातिविलम्बितमश्रीयात् ; अतिविलम्बितं हि भुज्ञानो न शुसिमधिगच्छति, बहु भुडक्के, शीतीभवत्याहरजातं, विषमं च पच्यते; तस्मान्नातिविलम्बितम-श्रीयात् ॥ (C) ॥

One should not take food very slowly because this will not give satisfaction to the individual. In this situation he would take more than what is required; the food would become cold and there will be irregularity in digestion. Therefore, one should not take food very slowly. [25-VIII]

By taking food very slowly, enzymes responsible for digestion will come in contact with food in an irregular manner and this will result in irregular digestion.

(ix) *Intake with concentration :*

अजल्पश्चहसन् तन्मना भुजीत; जल्पतो हस्तोऽन्यमनसो वा भुज्ञानस्य त एव हि दोषा भवन्ति, य एवातिद्रुतमश्रतः; तस्मादजल्पश्चहसन्स्तन्मना भुजीत ॥ (9) ॥

One should not talk or laugh or be unmindful while taking food. One, taking food while talking, laughing or

with detracted mind subjects himself to the same trouble as the one eating too hurriedly. So one should not talk, laugh or be unmindful while taking food. [25-IX]

(x) *Intake with self-confidence :*

आत्मानमभिसमीक्ष्य भुजीत सम्यक्; इदं ममोपशेते इदं नोपशेत इत्येवं
विदितं ह्यस्यात्मन आत्मसात्म्यं भवति; तस्मादात्मानमभिसमीक्ष्य भुजीत
सम्यगिति ॥ २५ ॥

One should take food in a prescribed manner, with due regard to his own self. The knowledge of the usefulness or otherwise of food articles is the *sine qua non* for self-preservation. So one should take food in a prescribed manner with due regard to his ownself. [25]

भवति चात्र—

रसान् द्रव्याणि दोषांश्च विकारांश्च प्रभावतः ।
वेद यो देशकालौ च शरीरं च स नो भिषक् ॥ २६ ॥

Thus it is said :—

He alone is a good physician who knows specific nature of *rasas* (tastes), drugs, *dosas* and diseases as well as habitat time and physical constitution. [26]

तत्र श्लोकौ—

विमानार्थो रसद्रव्यदोषरोगाः प्रभावतः ।
द्रव्याणि नातिसेव्यानि त्रिविधं सात्म्यमेव च ॥ २७ ॥
आहारायतनान्यष्टौ भोज्यसादगुण्यमेव च ।
विमाने रससंख्याते सर्वमेतत् प्रकाशितम् ॥ २८ ॥

To sum up :—

The following topics are discussed in this chapter on the “Knowledge of Specific Attributes of *Rasas* (*Rasavimāna*) : Scope of *vimāna*, specific nature of *rasas* (tastes), drugs, *dosas* and diseases, substances which are not to be used continuously in excess, three types of wholesomeness, eight factors which determine the utility or otherwise of various types of food and conditions in which food articles are useful. [27-28]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते विमानस्थाने रसविमानं नाम
प्रथमोऽध्यायः ॥ १ ॥

Thus ends the first chapter on the “Knowledge of Specific Attributes of *Rasa* (taste)” of the *Vimāna*section of Agnivesas’ work as redacted by Caraka.

CHAPTER II

SPECIFIC CHARACTERISTICS OF STOMACH CAPACITY

द्वितीयोऽध्यायः

अथातविविधकुक्षीयं विमानं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the “Determination of the Specific Characteristics of the Stomach Capacity together with its three parts.”

Thus said Lord Ātreya. [1-2]

In the previous chapter, the quantum of food, *inter alia*, is described in order to determine the utility or otherwise of food. In the present chapter, the usefulness and harmfulness of the food taken in proper and improper quantities respectively will be described in greater details.

Division of stomach capacity into three parts :

श्रिविधं कुक्षो स्थापयेद्वकाशांशमाहारस्याहारमुपयुज्जानः; तदथा—
एकमवकाशांशं मूर्तनामाहारविकाराणाम्, एकं द्रवाणाम्, एकं पुनर्वातपित्त-
श्लेष्मणाम्, एतावर्ती ह्याहारमात्रामुपयुज्जानो नामात्राहारजं किञ्चिदशुभं
प्राप्नोति ॥ ३ ॥

For the purpose of taking food, the stomach capacity should be divided into three parts; One part of it should be filled up with solid food, the second part with liquids and the third part should be left for *vata*, *pitta* and *kapha*. One who takes food with due regard to this principle, does not fall a victim to any of the harmful effects which arise out of food taken in improper quantity. [3]

Of the three parts of the stomach capacity, two parts should be filled up with both solid and liquid food, including drinks and lickables and the third portion should be left for *dosas*. Unless a portion of the stomach is left empty for *dosas*, the food itself will get vitiated by them.

Here the apportionment of the stomach capacity into three does not mean that they should all be equal. In fact, this apportionment should be based on the actual requirement of each of the three factors, viz. solid food, liquid food and *dosas*. Obviously solid food should occupy the biggest portion of the stomach. *Vata*, *pitta* and *kapha* have different abodes in the body, but in comparison to the solid food, their space requirement is very small inasmuch as they are all clubbed up in one portion of the stomach.

If an individual takes food keeping in view the three parts of the stomach capacity, he may not fall a victim to any disease due to the intake of food in improper quantity. Of course, even then he may be subjected to other ailments due to other factors, viz. *prakṛti* (nature) of food etc.

न च केवलं मात्रावत्त्वादेवाहारस्य कृत्स्नमाहारफलसौष्ठवमवाप्तुं शक्यं,
प्रकृत्यादीनामष्टानामाहारविधिविशेषायतनानां प्रविभक्तफलत्वात् ॥ ४ ॥

It is not possible to derive the entire benefit out of food, simply on the basis of the quantity of intake. For, all the eight factors like *prakṛti* (nature) etc., which determine the utility of food are jointly responsible for bringing about the requisite benefits. [4]

Signs of intake of food in proper quantity :

तत्रायं तावदाहारराशिमधिकृत्य मात्रामात्राफलविनिश्चयार्थः प्रकृतः ।
पतावानेव ह्याहारराशिमधिविकल्पे यावन्मात्रावत्त्वमात्रावत्त्वं च ॥ ५ ॥

तत्र मात्रावत्त्वं पूर्वमुहिष्टं कुक्षयंशविभागेन, तदभूयो विस्तरेणानुव्याख्यास्यामः । तद्यथा—कुक्षेरप्रपीडनमाहारेण, हृदयस्यानवरोधः, पार्वयोरविपाटनम्, अनतिगौरवमुदरस्य, प्रीणनमिन्द्रियाणां, भूत्प्रियपासोपरमः, स्थानासनशयनगमनोच्छासप्रश्वासहास्यसंकथासु सुखानुवृत्तिः, सायं प्रातश्च सुखेन परिणनं, बलवैर्णोपचयकरत्वं च, इति मात्रावतो लक्षणमाहारस्य भवति ॥ ६ ॥

In this chapter, *rāśi* (quantity of food) will be described with a view to determining the effect of the intake of food in proper and improper quantities. The only possible variation of the quantum of food are : intake in proper quantity and intake in improper quantity.

The proper quantity of food to be taken depending upon the three parts of the stomach capacity has already been described in brief. The same is being explained in detail, here. The following are the signs and symptoms of the intake of food in proper quantity.

1. There should be no undue pressure on the stomach due to the food taken;
2. there should be no obstruction to the proper functioning of the heart;
3. there should not be any pressure in the sides of the chest;
4. there should not be excessive heaviness in the abdomen;
5. there should be proper nourishment of the senses;
6. there should be relief from hunger and thirst;

7. there should be the feeling of comfort in standing, sitting, sleeping, walking, exhaling, inhaling, laughing and talking;
8. food taken in the morning should get digested by the evening and the food taken during the evening should get digested by the next morning; and
9. there should be promotion of strength, complexion and plumpness. [5-6]

Signs of intake of food in improper quantity :

अमात्रावत्त्वं युनर्द्धिविधमाचक्षते—हीनम्, अधिकं च । तत्र हीनमात्रमाहारराशि बलवर्णोपचयश्यकरमतुसिकरमुदावर्तकरमनायुष्यवृद्ध्यमनौजस्यं शरीरमनोबुद्धिन्द्रियोपधातकरं सारविधमनमलक्ष्म्यावहमशीतेश्च वातविकाराणामायतनमाचक्षते, अतिमात्रं पुनः सर्वदोषप्रकोपणमिच्छन्ति कुशलाः । यो हि मूर्तानामाहारजात नां सौहित्यं गत्वा द्रवैस्तुसिमापद्यते भूयस्तस्यामाशयगता वात-पित्तश्लेष्माणोऽभ्यवहारेणातिमात्रेणातिप्रपीड्यमानाः सर्वे युगपत् प्रकोपमापद्यन्ते, ते प्रकुपितास्तमेवाहाराशिमपरिणतमाविश्य कुक्ष्येकदेशमन्नाश्रिता विष्टम्यन्तः सहसा वा अयुत्तराधराभ्यां मार्गाभ्यां प्रच्यावयन्तः पृथक् पृथगिमान् विकारानभिनिर्वर्तयन्त्यातिमात्रमोक्तुः । तत्र वातः शूलानाहङ्कर्मदमुखशोषमूर्छाभ्रमाग्निवैषम्यपार्श्वपृष्ठकटिग्रहसिराकुञ्चनस्तम्भनानि करोति, पित्तं पुनर्जरातीसारान्तदर्दहतुष्णामद्भ्रमप्रलपनानि, श्लेष्मा तु छर्द्यरोचकाविपाकशीतज्वरालस्यगात्रगौरवाणि ॥ ७ ॥

Improper quantity of food is again of two types—deficient in quantity and excessive in quantity. Food deficient in quantity will produce the following symptoms :

1. impairment of the strength, complexion and plumpness;
2. distension and misperistalsis in the abdomen;
3. impairment of longevity, virility and *ojas*;
4. affliction of body, mind, intellect and senses;
5. impairment of the excellence of *dhatus*;
6. manifestation of the inauspicious conditions and
7. causation of eighty varieties of *vātika* diseases.

Food taken in excessive quantity aggravates all the three *dosas*. One who fills up his stomach with solid food and then takes liquid food in excessive quantity, all the three *dosas*, viz. *vāta* (*samāna vāyu*), *pitta* and *kapha* residing in the stomach get too much compressed and simultaneously aggravated. These aggravated *dosas* affect the undigested food and

get mixed up with it. Then they obstruct a part of the stomach and instantaneously move through upward and downward tracts separately to produce the following diseases in the individual, taking food in excess :

Vata produces colic pain, constipation, malaise, dryness of mouth, fainting, giddiness, irregularity in the power of digestion, rigidity of sides, back and waist, and contraction and hardening of vessels.

Pitta causes fever, diarrhoea, internal burning sensation, thirst, intoxication, giddiness and delirium.

Kapha causes vomiting, anorexia, indigestion, cold fever, laziness and heaviness in the body. [7]

Factors responsible for vitiation of ama :

न च खलु केवलमात्रमेवाहाराशिमामप्रदोषकरमिच्छन्ति, अपि तु खलु
गुरुरूक्षशीतशुष्कद्विष्टविष्टमिविदाहशुचिविरुद्धानामकाले चान्नपानानामुपसेवनं,
कामक्रोधलोभमोहेष्याहीशोकमानोद्वेगभयोपतसमनसा वा यदन्नपानमुपयुज्यते,
तदप्याममेव प्रदूषयति ॥ ८ ॥

भवति चात्र—

मात्रयाऽप्यभ्यवहृतं पश्य चान्नं न जीर्यति ।
चिन्ताशोकभयक्रोधदुःखशत्याप्रगागरैः ॥ ९ ॥

In addition to the intake of food in excess, the following factors also affect the body by vitiating the undigested food product :

1. untimely intake of food and drinks which are heavy, ununctuous, cold, dry, despisable, constipative, irritant, unclean and mutually contradictory;
2. intake of food and drinks when the individual is afflicted with passion, anger, greed, confusion, envy, bashfulness, grief, indigestion, anxiety and fear.

Thus it is said :—

Wholesome food taken even in proper quantity do not get properly digested when the individual is afflicted with grief, fear, anger, sorrow, excessive sleep and excessive vigil. [8-9]

Two types of amapradosa :

तं द्विविधमामप्रदोषमाचक्षते भिषजः—विसूचिकाम्, अलसकं च ॥१०॥
तत्र विसूचिकामूर्ध्वं चाधश्च प्रवृत्तामदोषां यथोक्तरूपां विद्यात् ॥ ११ ॥

Amadoṣa (vitiation of undigested food) is known to physicians as of two types, viz. *visūcikā* (choleric diarrhoea) and *alasaka* (intestinal torpor). In *visūcikā*, undigested food gets expelled through the upper and lower tracks and it is accompanied with the symptoms already described (in para-7 of this chapter). [10-11]

In addition to *visūcikā* (choleric diarrhoea) and *alasaka* (intestinal torpor), there are two other conditions, viz., *dāyālāsaka* (intestinal torpor which brings about excessive rigidity of the body) and *āmaviṣa* (which produces toxicity in the body) caused by the vitiation of the undigested food. The latter two conditions, viz. *dāyālāsaka* and *āmaviṣa* are included under *alasaka* (intestinal torpor), because in these two conditions also, vitiated *doṣas* do not come out but get retained inside the body as it happens in the case of *alasaka*.

Alasaka : अलसकमुपदेश्यामः—दुर्वलस्याल्पाग्नेर्वहुश्लेष्मणो वातमूत्रपुरीषवेगविधारिणः स्थिरगुरुबहुरूक्षशीतशुष्कान्नसेविनस्तदन्नपानमलिनप्रपीडितं श्लेष्मणा च विवद्मार्गमतिमात्रप्रलीनमलसत्वान्न बहिर्मुखीभवति, ततश्छर्यूतीसारवज्यान्यामप्रदोषलिङ्गान्यभिदर्शयत्यतिमात्राणि । अतिमात्रप्रदुषाश्च दोषा प्रदुषामवद्मार्गस्तिर्यगच्छन्तः कदाचिदेव केवलमस्य शरीरं दण्डवत् स्तम्भर्यान्त, ततस्तं दण्डालसकमसाध्यं ब्रुवते । चिरुद्धाध्यशानाजीर्णशानशीलिनः पुनरामदोषमामविषमित्याचक्षते भिषजः, विषसद्वालिङ्गत्वात्; तत् परमसाध्यम्, आशुकारित्वाद्विरुद्धोपक्रमत्वाच्चेति ॥ १२ ॥

Now we shall explain *alasaka* (intestinal torpor). If a weak individual, having low power of digestion and excessive *kapha* in his body, suppresses the urge for voiding flatus, urine and stool, and takes compact, heavy, ununctuous, cold and dried food in excessive quantity, food and drinks get affected with *vata*. Simultaneously the passage gets obstructed by *kapha* due to excessive adhesiveness of the food product. Because of the sluggishness caused by these factors it is not possible for the undigested food product to come out of the stomach. Therefore, all the symptoms of *āmadoṣa* (described in para-7) except vomiting and diarrhoea are manifested in *alasaka*.

The extremely vitiated *doṣas* move sideways due to the obstruction of the passage by undigested food or immature food product, and at times, make the body of the patient rigid like a staff. This condition is known as *dāyālāsaka* and it is incurable.

Amadoṣa of an individual given to habitual intake of incompatible food, or food before the digestion of the previous meal or uncooked food is known as *āmaviṣṭa* (a condition characterised by the manifestation of toxic symptoms due to indigestion), because the manifestations of this condition resemble those of the poisoning. This is absolutely incurable because of the acuteness and also because of the contradiction involved in the line of treatment of this condition. [12]

For the manifestation of *alasaka*, both *vāta* and *kapha* play a dominant role so much so that *vāta* vitiates the undigested food, and *kapha* obstructs the passage ; *pitta* is however, generally vitiated to produce thirst, intoxication, giddiness etc.

Treatment of the *āmaviṣṭa* condition involves contradiction. When hot therapies which correct *āma* are employed, they aggravate the poisoning aspect of the condition ; when cooling therapies are employed in order to alleviate the poisonous aspect to the condition, they aggravate *āma*. Because of the specific nature of the causative factors, toxic symptoms are manifested in this condition as it happens in the case of honey and ghee when they are combined in equal quantity.

Management of āmaprādoṣa :

तत्र साध्यमामं प्रदुष्टमलसीभूतमुक्तेष्येदादौ पाययित्वा सलवणमुष्णं वारि,
ततः स्वेदनवर्तिप्रणिधानाभ्यामुपाचरेदुपवासयेचैनम् । विसूचिकायां तु लङ्घनमे-
वाग्रे विरिक्तवच्चानुपूर्वी । आमप्रदोषेषु त्वचकाले जीर्णहारं पुनर्दोषावलिसामा-
शयं स्ति मितगुरुकोष्ठमनधाभिलापिणमभिसमीक्ष्य पाययेदोषशोषपाचनार्थमौषध-
मग्रिसंधुक्षणार्थं च, नत्वेवाजीर्णाशनम् ; आमप्रदोषदुर्वलो हार्मिनं युगपदोषमौष-
धमाहारजातं च शक्तः पक्तुम् । अपि चामप्रदोषाहारौषधविभ्रमोऽतिवलत्वादुप-
रतकायांश्च सहसैवातुरमबलमतिपातयेत् । आमप्रदोषजानां पुनर्विकाराणामपत-
र्पणेनैवोपरमो भवति, सति त्वनुमन्धे कृतपत्पर्पणानां व्याधीनां निग्रहे निमित्त-
विपरीतमपास्योषधमातङ्गविपरीतमेवावचारयेद्यथास्वम् । सर्वविकाराणामपि
च निग्रहे हेतुव्याधिविपरीतमौषधमिच्छन्ति कुशलाः, तदर्थकारि वा । विमक्ता-
मप्रदोषस्य पुनः परिपक्वदोषस्य दीप्ते चाग्रावभ्यङ्गास्थापनानुवासनं विधिवत्
स्थेहपानं च युक्त्या प्रयोज्यं प्रसमीक्ष्य दोषमेषजदेशकालबलशरीराहारसात्म्य-
सत्त्वप्रकृतिवयसान्तराणि विकारांश्च सम्यगिति ॥ १३ ॥

The curative type of this disease having vitiated *āma* (undigested food product) which has become stagnant, should be treated with emesis in the beginning, by administering hot saline water. Thereafter, fomentation and suppositories should be employed and the patient should be made to fast.

In the case of *visucika* (choleric diarrhoea), the patient should be kept on fasting in the beginning, and thereafter, he

should be given thin gruel etc., as is done after the administration of purgation therapy etc. Even after the digestion of the food which was responsible for the causation of *amadoṣa* (*visučika* and *alasaka*), *doṣas* remain adhered to the atomach and during the meal-time also, the patient feels timidity heaviness of the abdomen and disinclination for food. At this stage, the patient should be advised to take medicines in order to bring about the maturity of the remaining *doṣas* and also to stimulate the power of digestion. Food should never be given when there is indigestion because the *agni* (digestive fire) which is already weak due to the vitiation by *ama* will not be able to digest the *doṣas*, drugs and food simultaneously. The patient who is weak and whose *kāyagni* (enzymes responsible for the digestive and metabolic events in the body) is also weak will be seriously affected by the dominance of the untoward effects produced by *amapradopaṣa*, food and drugs simultaneously. If the disease continues even after fasting, then the physician need not administer therapies opposite to the causative factors. On the other hand, therapies as would be contrary (directly or indirectly) to the respective diseases should be administered. An expert physician should always administer such of the therapies as would act directly or indirectly as an antidote to the diseases and/or their causative factors so as to help cure all types of diseases.

When the patient is free from *amadoṣa*, when *doṣas* are fully matured (digested) and when the power of digestion is stimulated, the physician should employ massage, *asthāpana* and *anuvāsana* types of enema and oleation therapy appropriately by following the prescribed procedure, after examining properly the different stages of *doṣas*, therapies, habitat, season, strength, physique, food, homologation, mind, nature and age. [13]

Prescriptions of massage etc., even after the patient is free from *ama-doṣa* are meant to help the patient to regain his lost strength.

भवति चात्र—

आहारविधायतनानि चाष्टौ सम्यक् परीक्ष्यात्महितं विदध्यात् ।
अन्यश्च यः कथ्यदिहास्ति मार्गो हितोपयोगेषु भजेत् तं च ॥ १४ ॥

Thus it is said :—

After properly examining the eight factors which determine the utility or otherwise of various types of food, one

should take food which is wholesome for himself. Other useful therapies which though not described here (but described in the chapter on the treatment of *grahaṇī* or sprue, and *atisāra* of diarrhoea etc., for the cure of *āmadoṣa*) should also be adopted. [14]

Āmaśaya and its functions :

अशितं खादितं पीतं लीढं च क विपच्यते ।
 एतस्वां धीर ! पृच्छामस्तन्न आचक्ष्व बुद्धिमन् ॥ १५ ॥
 इत्यग्निवेशग्रमुखैः शिष्यैः पृष्ठैः पुनर्वसुः ।
 आचक्ष्वे ततस्तेभ्यो यत्राहारो विपच्यते ॥ १६ ॥
 नाभिस्तनान्तरं जन्तोरामाशय इति स्मृतः ।
 अशितं खादितं पीतं लीढं चात्र विपच्यते ॥ १७ ॥
 आमाशयगतः पाकमाहारः प्राप्य केवलम् ।
 पक्षः सर्वाशयं पश्चाद्गमनोभिः प्रपद्यते ॥ १८ ॥

O ! enlightened one; please tell us where different types of food, viz. eatables, chewables, drinkables and lickables get digested. Having heard this question of the disciples, viz. Agnivesa etc., Lord Punarvasu replied, "It is in *āmaśaya* (stomach) existing between umbilicus and nipples, that the eatables, chewables, drinkables and lickables get digested. After entering into the stomach and getting digested there, the entire digested food product reaches all the organs of the body through vessels. [15-18]

तत्र श्लोकः—

तस्य मात्रावतो लिङ्गं फलं चोकं यथायथम् ।
 अमात्रस्य तथा लिङ्गं फलं चोकं विभागशः ॥ १९ ॥

To sum up :—

Symptoms and the final outcome of the food taken in proper as well as improper quantities are appropriately described here separately. [19]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते
 विमानस्थाने त्रिविधकुक्षीयविमानं
 नाम द्वितीयोऽध्यायः ॥ २ ॥

Thus ends the second chapter on "The Determination of the Specific Characteristics of the Stomach Capacity alongwith Its Three Parts" of the *Vimāna* section of Agnivesa's work as redacted by Caraka. [2]

CHAPTER III

EPIDEMICS

तृतीयोऽध्यायः

अथातो जनपदोद्धृचं सनीयं विभानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवान्त्रयः ॥ २ ॥

We shall now expound the chapter on the “Determination of the Specific Characteristics of Epidemics”.

Thus said Lord Ātreya. [1-2]

Causative factors of diseases of living beings can be classified into two groups, viz. (1) those common to living beings in general and (2) those specific to individuals. The latter type of causative factors like the vitiation of *Vāta* etc., which specifically affect certain individuals, resorting to diets and regimens which are aggravators of *vāta* are already described. Now the former type of causative factors which commonly affect several living beings of a locality by vitiating the air, water, land and season are being described here.

जनपदमण्डले पञ्चालक्षेत्रे द्विजातिवराऽयुचिते काञ्चित्प्यराजधान्यं भगवान्
पुनर्वसुरात्रेयोऽन्तेवासिगणपत्रिवृतः पश्चिमे धर्ममासे गङ्गातीरे वनविचारमनु-
विचरजिछप्यमप्निवेशमब्रवीत् ॥ ३ ॥

In Kāmpilya (modern Kampil of Farokhabad District in Uttar Pradeśa), the capital city of the country called Pañcāla, which was inhabited by the elites of the twice born, Lord Punarvasu, surrounded by his disciples was taking a stroll in the woods near the bank of the Gaṅgā during the month of *jyeṣṭha* (approximately May-June). He then; observed addressing the disciple Agniveśa. [3]

The Capital city of Kāmpilya is described here as inhabited by the elites of the twice-born. Lord Punarvasu is subsequently going to observe that this area would be afflicted with epidemics. This shows that the epidemic diseases affect even such sacred places due to the sinful disposition of the residents.

Collection of drugs before the onset of epidemics :

१५१

हृश्यन्ते हि खलु सौम्य ! नक्षत्रग्रहणचन्द्रसूर्यनिलानलानां दिशां
चाप्रकृतिभूतानामृतुवैकारिका भावाः, अचिरादितो भूरपि च न यथावद्रसवीर्य-
विपाकप्रभावमोषधीनां प्रतिविधास्यति, तद्वियोगात्तद्विप्रायता नियता । तस्मात्
प्रागुद्धृचं सात् प्राक् च भूमेर्विरसीभावादुद्धरध्वं सौम्य ! भैषज्यानि यावज्ञोपहतर-
सवीर्यविपाकप्रभावाणि भवन्ति । वयं चैषां रसवीर्यविपाकप्रभावानुपयोक्ष्यामहे

ये चास्माननुकाडक्षन्ति, यांश्च वयमनुकाङ्क्षामः । न ह सम्यगुदृतेषु सौम्य !
भैषज्येषु सम्यग्विवैहतेषु सम्यक् चावचारितेषु जनपदोद्धर्वंसकराणां विकाराणां
किञ्चित् प्रतीकारणोरवं भवति ॥ ४ ॥

"O ! Agniveśa, some abnormalities are now appearing in the stars, planets, moon, sun, air, fire and *diks* (directions). This fore-casts abnormality in the coming seasons. Very soon, the earth will cease to manifest proper tastes, potency, *vipaka* and specific actions in drugs. This is bound to result in the widespread manifestation of diseases". "Therefore, O ! Agniveśa, all of you should collect drugs before the time of destruction and before the earth loses its fertility leading to the impairment of the taste, potency, *vipaka* and specific action of drugs grown over it. We shall administer these drugs having correct taste, potency, *vipaka* and specific action to such of our patients as are dependant upon us and whom we desire to treat (because of the curability of their ailments). It is not difficult to treat epidemic diseases, provided the drugs are collected, preserved and administered properly." [4]

The stars, planets, sun and moon appear differently in different seasons. Any change in the features of these planetary bodies characterize the impairment of seasons. For example, in summer, stars normally appear clear. But if they appear as if covered with a layer of dews, then this should be taken as a mark of abnormality leading to the spread of epidemics.

The earth is an important factor for the manifestation of tastes etc., in drugs. Besides, there are other factors like water, air, etc., but they get automatically vitiated when there is impairment of the earth. Hence the impairment of earth is emphasised in the above paragraph.

The patient who desires to be treated by Lord Punarvasu and whom he desires to treat are described here as deserving for treatment by the above mentioned drugs. This should not be misconstrued to mean that Lord Punarvasu is obliged to treat only a few patients thereby showing his partiality towards them. As an *āpta*, he is impartial and has paternal affection for everybody—c. f. *Cikitsā* 5:3. He can, however, treat only such patients as are curable and not otherwise. That is why, it is described above that the drugs so collected are intended to be given only to such of the patients as are (considered curable and so) desired by Lord Punarvasu.

Query about epidemics :

एषंवादिनं भगवन्तमात्रेयमग्निवेश उवाच—उद्धतानि खलु भगवन् !
भैषज्यानि, सम्यग्विहितानि, सम्यग्वचारितानि च; अपि तु खलु जनपदोद्धर्वं-

सनमेकेनैव व्याधिना युगपदसमानप्रकृत्याहारदेहबलसात्म्यसत्त्ववयसां मनु-
ज्याणां कस्माद्भवतीति ॥ ५ ॥

Agniveśa submitted to lord Ātreya, “O ! Lord, drugs will soon be collected, preserved and administered properly. How is it that people having dissimilar nature, diet, physical strength, homologation, mental faculties and age, simultaneously get afflicted by the same epidemic disease ?” [5]

Individuals get afflicted with a disease only when the causative factors are not conducive to the physical constitution etc., of the patient. Physical constitution etc., of individuals vary from person to person. Obviously there should be variations in the causative factors, if the same disease manifest itself in all individuals. How do all individuals having different physical constitution etc., suffer from the same disease, due to the same set of causative factors ? This is the theme of Agniveśa’s qery.

Factors responsible for epidemics :

तसुवाच्च भगवानात्रेयः—एवमसामान्यवतामप्येभिरश्चिवेश ! प्रकृत्यादि-
भिर्भवैर्मनुज्याणां येऽन्ये भावाः सामान्यास्तद्वैरुण्यात् समानकालाः समान-
लिङ्गाश्च व्याधयोऽभिनिर्वर्तमाना जनपदमुद्घवंसयन्ति । ते तु खलिवमे भावाः
सामान्या जनपदेषु भवन्ति; तद्यथा-वायुः, उदकं, देशः, काल इति ॥ ६ ॥

Lord Ātreya replied, “Agniveśa ! even though there is dissimilarity in the physical constitution of human beings still there are such factors as are common to all individuals and vitiation of these factors leads to the simultaneous manifestation of diseases having the same set of symptoms leading to the destruction of countries. Factors which are common for all the inhabitants of a country are air, water, location and seasons. [6]

Characteristics of pollution of air, water, land and time :

तत्र वातमेवंविष्यमनारोग्यकरं विद्यात्; तद्यथा—यथर्तुविषममतिस्तिमित-
मतिच्छलमतिपरुषमतिशीतमत्युष्णमतिरुक्तमत्यभिष्यन्दिनमतिभैरवारावमतिप्रति-
हतपरस्परगतिमतिकुण्डलिनमसात्म्यगन्धवाष्पसिकतापांशुधूमोपहतमिति (१);

उदकं तु खलवत्यर्थिविकृतगन्धवर्णरसस्पर्शं क्लेदबहुलमपकान्तजलचर-
विहङ्गमुपक्षीणजलेशयमशीतिकरमपगतगुणं विद्यात् (२);

देशं पुनः प्रकृतिविकृतवर्णगन्धरसस्पर्शं क्लेदबहुलमुपसृष्टं सरीसृप-
व्यालमशकशलभमशिकामूषकोलूकशमाशानिकशकुनिजम्बूकादिभिस्तृणोलूपोपव-
नवन्तं प्रतानादिबहुलमपूर्ववदवपतितशुष्कनष्टशस्यं धूप्रपवनं प्रधमातपतन्त्रिगण-
मुकुष्टश्वर्गणमुद्भान्तव्यथितविष्यविधमृगपक्षिसङ्घमुत्सृष्टनष्टथर्मसत्यलज्जाचारशील-
गुणजनपदं शश्वत्मुभितोदीर्णसलिलाशयं प्रततोल्कापातनिर्घातभूमिकस्पमति-

भयारावरुपं लक्षताम्बारुणसिताभ्रजालसंबृतार्कचन्द्रतारकमभीक्षणं ससंभ्रमोद्गेग-
मिव सत्रासहस्रितमिव सतमस्कमिव गुह्यकाचरितमिवाक्रन्दितशब्दबहुलं चाहितं
विद्यात् (३);

कालं तु खलु यथर्तुलिङ्गाद्विपरीतलिङ्गमतिलिङ्गं हीनलिङ्गं चाहितं
व्यवस्थेत् (४);

इमानेवंदोषयुक्तांश्चतुरो भावाज्ञनपदोद्धवंसकरान् वदन्ति कुशलाः; अतोऽ-
न्यथाभूतांस्तु हितानाचक्षते ॥ ७ ॥

विगुणेष्वपि खल्वेतेषु जनपदोद्धवंसकरेषु भावेषु भेषजेनोपपाद्यमानानाम-
भयं भवति रोगेभ्य इति ॥ ८ ॥

Air having the following characteristics is injurious to health :

1. absence of characteristic features in conformity with the season ;
2. excessive calmness or violent blow;
3. excessive dryness, cold, heat, roughness or humidity;
4. excessive clashes among each other (wind blowing from one direction clashing with the one coming from the other);
5. excessively cyclonic in nature; and
6. association with unwholesome smell, gases, sand, ashes and smoke;

Water having the following characteristics is considered to be devoid of its normal attributes:

1. excessive abnormality in smell, colour, taste and touch;
2. excessive stickiness;
3. absence of birds that move in water;
4. reduction in the number of aquatic animals; and
5. manifestation of unpleasantness,

Land having the following characteristics is considered to be harmful :

1. abnormality in the natural colour, smell, taste and touch;
2. excessive stickiness;
3. abundance of serpents, wild animals, mosquitoes, locusts, flies, rats, owls, vultures and jackals;
4. having jungles of grass and weeds;

5. abundance of excessively branched creepers;
6. having a novel look;
7. with withered, dried or destroyed crops;
8. abundance of smoke in the wind;
9. presence of wild cries of birds and dogs;
10. bewilderment and painful disposition of various types of animals and birds;
11. perversion or absence of religion, truth, modesty, manners, conducts and other qualities of the inhabitants of the land;
12. constant agitation and over-flow of water reservoirs;
13. frequent occurrence of meteorites, thunderbolts and earth quakes;
14. fierce look and cries in the nature;
15. appearance of roughness and coppery, redish and white colour in the sun, moon and stars frequently; their appearance as if they are covered with a net of clouds;
16. appearance of the atmosphere as if there is confusion, excitement; apprehension, lamentation and darkness; and
17. presence of excessive crying noise as if the country is seized by demons;

Manifestation of the characteristic features contrary to the normal conditions of the various seasons is considered to be harmful.

The above mentioned four factors alongwith their respective characteristic features of vitiation are considered by the wise to be responsible for the destruction of countries by epidemic diseases. When these factors are associated with features contrary to what is mentioned in respect of each of them in the above paragraphs, they are useful for human beings.

Even during the impairment of these factors responsible for the destruction of countries by epidemics, one need not be afraid of diseases, if he is assured of proper medicaments for administration. [7-8]

भवन्ति चात्र—

वैगुण्यमुपपश्चानां देशकालानिलामभसाम् ।
 गरीयस्त्वं विशेषेण हेतुपत् संप्रवक्ष्यते ॥ ९ ॥
 वाताज्जलं जलाहेशं देशात् कालं स्वभावतः ।
 विद्याददुष्परिहार्यत्वादगरीयस्तरमर्थवित् ॥ १० ॥
 वाय्वादिषु यथोक्तानां दोषाणां तु विशेषवित् ।
 प्रतीकारस्य सौकर्ये विद्याङ्गाधवलक्षणम् ॥ ११ ॥

Thus it is said :—

We shall now explain the vitiation of land, season, air and water in the order of their importance.

Vitiations of water, land and seasons are more harmful than those of air, water and land respectively. For by nature air, water and land and seasons are indispensable for life in progressive order.

A specialist should know that from out of the above mentioned factors, it is easier to correct the vitiations of air, water and land, than those of water, land and seasons respectively. [9-11]

By nature air, water, land and seasons are indispensable in their progressive order. One can guard himself against polluted air by keeping himself inside a closed (air tight) chamber but he cannot so easily avoid polluted water. Even polluted water can be avoided with a certain amount of care. But one cannot keep himself away from the land while living there because the very existence of human beings depends upon the land. One could somehow get away from that particular area to another part of the country in order to avoid the polluted land. But then one cannot guard himself of against the ill-effects of polluted seasons. Thus seasons are the most indispensable ones of the four factors, vitiation of which leads to the manifestation of epidemic diseases.

Line of treatment of epidemic diseases :

चतुर्ष्वपि तु दुष्टेषु कालान्तेषु यदा नराः ॥
 मेषजेनोपपाद्यन्ते न भवन्त्यातुरास्तदा ॥ १२ ॥
 येषां न मृत्युसामान्यं सामान्यं न च कर्मणाम् ।
 कर्म पञ्चविधं तेषां भेषजं परमुच्यते ॥ १३ ॥
 रसायनानां विधिवचोपयोगः प्रशस्यते ।
 रास्यते देहवृत्तिश्च भेषजैः पूर्वमुदृतैः ॥ १४ ॥
 सत्यं भूते दया दानं बलयो देवतार्चनम् ।
 सद्वृत्तस्यानुवृत्तिश्च प्रशमो गुस्तिरात्मनः ॥ १५ ॥
 हितं जनपदानां च शिवानामुपसेवनम् ।
 सेवनं ब्रह्मधर्यस्य तथैव ब्रह्मचारिणाम् ॥ १६ ॥

संकथा धर्मशास्त्राणां महर्षीणां जितात्मनाम् ।
 धार्मिकैः सात्त्विकैर्नित्यं सहास्या वृद्धसंमतैः ॥ १७ ॥
 इत्येतद्दोषजं प्रोक्तमायुषः परिपालनम् ।
 येषामनियतो मृत्युस्तस्मिन् काले सुदारुणे ॥ १८ ॥

One does not suffer from the disease even while all these four vitiated factors ending with seasons are at work if he is administered medicaments, properly. Those who are not having identical actions during the previous life and those who are not destined to die during the epidemics, for their cure, five elimination therapies (viz. emesis, purgation, *nirutha anuvāsana* types of enema and errhines) are the best. They should be properly administered rejuvenation therapy and physical health should be maintained with such drugs as are collected before the onset of epidemics.

Truthfulness, compassion for living beings, charity, sacrifices, prayer to the gods, adoption of preventive measures, tranquility, protection of the self by *mantra* etc., search for things as are good for the self, residence in auspicious localities, observance of *brahmacarya*, service to those observing-*brahmacarya*, discussion of religious scriptures, great sages and those who have self-control, and constant association with religious, *sattvika* and learned persons—these are the therapies which if adopted during the epidemics can easily save the lives of individuals provided the death of a particular individual during the period is not predestined. [12-18]

If the death of an individual during epidemics is predestined, then no medicine will be of any help in order to guard him against an attack of the disease. Persons of a locality might have performed identical actions in the previous life which may result in the death of all of them during the period. For example, if some people together engage themselves in burning villages and such other sinful acts, then in the next life all of them are likely to die together. It may also so happen that even though individuals might not have committed sinful acts together but separately in the previous life, the time of maturity of these sinful acts may accidentally coincide leading to the death of all of them during the same period.

Reasons for pollution of water etc., leading to epidemics :

इति श्रुत्वा जनपदोद्ध्वंसने कारणानि पुनरपि भगवन्तमात्रेयमग्निवेश
 उवाच—अथ खलु भगवन् ! कुतो मूलमेषां वाय्वादीनां वैगुण्यमुत्पद्यते ? येनो-
 पपन्ना जनपदमुद्ध्वंसयन्तीति ॥ १९ ॥

तमुवाच भगवानात्रेयः—सर्वेषामप्यग्निवेश ! वाय्वादीनां यद्वैगुण्यमु-
त्पद्यते तस्य मूलमधर्मः; तन्मूलं वाऽसत्कर्म पूर्वकृतं; तयोर्योनिः प्रज्ञापराध
एव । तद्यथा—यदा वै देशनगरनिगमजनपदप्रधाना धर्ममुक्तम्याधर्मेण प्रजां
वर्तयन्ति, तदाश्रितोपाश्रिताः पौरजनपदा व्यवहारोपजीवितश्च तस्मधर्मभिवर्ध-
यन्ति, ततः सोऽधर्मः प्रसभं धर्ममन्तर्धर्मत्त्वे, ततस्तेऽन्तर्हितधर्माणो देवताभिरपि
त्यउग्नन्ते; तेषां तथाऽन्तर्हितधर्मणामधर्मप्रधानानामपक्रान्तदेवतानामृतबो व्या-
प्यन्ते; तेन नापो यथाकालं देवो वर्षति न वा वर्षति विकृतं वा वर्षति, वाता
न सम्यग्भिवान्ति, क्षितिव्यापद्यते, सलिलान्युपशुष्यन्ति, ओषधयः स्वभावं परि-
हाथापद्यन्ते विकृतिं; तत उद्धवंसन्ते जनपदाः स्पृश्याभ्यवहार्यदोषात् ॥ २० ॥

Having heard the causes of epidemics leading to the destruction of countries, Agniveśa again enquired from Lord Ātreya, "Sir ! what is the factor underlying the vitiation of air etc., which destroy the entire country ?

Lord Ātreya replied "Sins of the present life or the misdeeds of the past life are at the root of the vitiation of all these factors, viz., air etc. Intellectual blasphemy constitutes the origin of both the types of sins. For example, when the rulers of states, towns, cities and countries transgress the righteous path and rule their subjects by sinful means then their sub-ordinates and subjects inhabiting villages and cities, and merchants add to this sinful situation. Their sinful acts per- force make the righteous acts to disappear. Because of the disappearance of righteous acts, even the gods desert the people living in these places. Such are the places where seasons get impaired. Consequently either there is no rainfull in time or there is no rainfull at all or there is abnormality in the rainfall; air(s) does not blow properly; there is abnormality in the earth, water (reservoirs) get dried up, drugs lose their normal attributes and get impaired. Then there is impairment of the country because of the impairment of food and drinks. [19-20]

Sinful acts committed during the present life and the previous life—both are responsible for the vitiation of air etc. The illustrations of this vitiation given in the above paragraph relate to the sinful acts of the present life and not to those of the previous life. They are cited here because of their conspicuousness. Manifestations of seasonal abnormalities mentioned above are in the way of illustration only, Besides, there are many other manifestations like polluted smell of the air.

Sinful act leading to war :

तथा शख्यप्रभवस्यापि जनपदोद्धृतं स्याधर्म एव हेतुर्भवति । येऽति-
प्रवृद्धलोभकोथमोहमानास्ते दुर्बलानवमत्यात्मस्वजनपरोपघाताय शख्येण परस्पर-
मभिक्रामन्ति, परान् वाऽभिक्रामन्ति, परैर्वाऽभिक्रामन्ते ॥ २१ ॥

Similarly a sinful act is at the root of the destruction of a country by armaments. Because of increased greed, anger, attachment and ego, some people may start fighting among themselves with a view to killing their own people or the enemy looking down-upon them as weak persons. They may attack the enemy or may get attacked by them. [21]

The description in the above mentioned paragraph relates to a fighting which results in the death of many people. In such a fighting, people of their own as well as those of the enemy side—both succumb to death.

Sinful act leading to affliction by Rākṣasas :

रक्षोगणादिभिर्वा विविधैर्भूतसङ्घैस्तमधर्ममन्यद्वाऽप्यपचारान्तरमुपलभ्या-
भिहन्यन्ते ॥ २२ ॥

People also get destroyed by *rākṣasas* (demons or germs ?) and varieties of other creatures due to sinful and such other acts. [22]

Sinful acts apart, impurity etc., are also responsible for people getting afflicted with the attacks of *rākṣasas* and such other creatures.

Sinful act leading to curse :

तथाऽभिशापप्रभवस्याप्यधर्म एव हेतुर्भवति । ये लुप्तधर्माणो धर्मादि-
पेतास्ते गुरुवृद्धसिद्धिर्षिष्ठसानवमत्याहितान्याचरन्ति; ततस्ताः प्रजा गुर्वादि-
भिरभिशता भस्मतामुपयानित प्रागेवानेकपुरुषकुलविनाशाय, नियतप्रत्ययो-
पलम्भादनियताश्चापरे ॥ २३ ॥

Similarly a sinful act is the root cause of the destruction of population by curse. Those who get on without religious duties or who are away from such religious duties, they wrongly behave by showing disrespect to preceptors, elders, those who have attained perfection, sages and respectable ones. Many such families get immediately destroyed by curses. Even if they do not stay together, they get simultaneously destroyed because of the predetermined effect of the curse on them. [23]

The curse has effect only on those people who have actually committed sins by showing disrespect to preceptors etc. Even in the same locality some people may escape the disastrous effect of the curse.

Attributes in different yugas :

प्रागपि चाधर्माद्वते नाशुभोत्पत्तिरन्यतोऽभूत् । आदिकाले ह्यादितिसुत-समौजसोऽतिविमलविपुलप्रभावाः प्रत्यक्षदेवदेवर्णिधर्मयज्ञविधिविधानाः शैल-सारसंहतस्थिरशारीराः प्रसन्नवर्णेन्द्रियाः पवनसमवलजवपराक्रमाश्चास्फिक्षोऽभिरूपप्रमाणाकृतिप्रसादोपचयवन्तः सत्यार्जवानुशंस्यदानदमनियमतपउपवास-व्रह्मचर्यवतपरा व्यपगतभयरागद्वेषमोहलोभक्रोधशोकमानरोगनिद्रातन्द्राश्रमङ्ग-मालस्यपरिग्रहाश्च पुरुषा बभूवुर्मितायुषः । तेषामुदारसत्त्वगुणकर्मणामचिन्त्य-रसवीर्यविषाकप्रभावगुणसमुदितानि प्रादुर्बेभूतुः शस्यानि सर्वगुणसमुदितत्वात् पृथिव्यादीनां कृतयुगस्यादौ । भ्रश्यति तु कृतयुगे केषांचिदत्यादानात् सांपन्नि-कानां सत्त्वानां शारीरगौरवमासीत्, शारीरगौरवाच्छ्रूमः, श्रमादालस्यम्, आल-स्यात् संचयः, संचयात् परिग्रहः, परिग्रहाल्लोभः प्रादुरासीत् कृते । ततखेतायां लोभादभिद्रोहः, अभिद्रोहादनृतवचनम्, अनृतवचनात् कामक्रोधमानद्वेषपारुष्या-भिघातभयतापशोकचिन्तोद्वेगादयः प्रवृत्ताः । ततखेतायां धर्मपादोऽनृथार्थानिमग-मत् । तस्यान्तर्धानात् युगवर्षप्रमाणस्य पादहासः, पृथिव्यादेश्च गुणपादप्रणाशोऽभूत् । तत्प्रणाशकृतश्च शस्यानां स्नेहवैमल्यरसवीर्यविषाकप्रभावगुणपादधृंशः । ततस्तानि प्रजाशारीरणि हीयमानगुणपादैराहारविहारैत्यथापूर्वमुपष्टम्यमानान्य-ग्निमास्तपरीतानि प्राग्व्याधिभिर्ज्वरादिभिराक्रान्तानि । अतः प्राणिनो ह्यासमवा-पुरायुषः क्रमश इति ॥ २४ ॥

From the beginning of creation, manifestation of inauspiciousness has been preceded by sinful acts. During the first age (*satyuga*) people were energetic like the sun; they were exceedingly pure and powerful; they had the direct vision of the gods, divine saints, duties, the gods of *yajña*, the *vedas* and the procedure to be followed in the performance of *yajña*; their bodies were firm like mountains; compact and stable; they had clear complexion and senses; they had strength, motion and valour like those of the wind; they were endowed with the excellence of buttocks, features, measurement of the bodily organs, shape, happiness and nourishment; they were endowed with truthfulness, simplicity, non-violence, charity, self-control, observance of rules, meditation, fasting, *brahmacharya* and religious rites, and they were devoid of fear, attachment, envy, delusion, greed, anger, grief, mental diseases, abnormal sleep, drowsiness, fatigue, exhaustion, laxiness and tendency to collect things. Because of these factors they were endowed with an unlimited span of life. In the beginning of the *satyuga*, because of the noble mind, qualities and actions of the people, the earth etc., got endowed with all the

good qualities as a result of which excellent tastes, potencies, *vipaka* and specific actions were manifested in food grains.

At the end of the *satyayuga*, some rich people got heaviness in their bodies due to over-indulgence. They suffered from fatigue because of the heaviness of the body. Fatigue gave rise to laziness; laziness made them to accumulate things; accumulation led to the attachment for these things and attachment resulted in greed.

During *tretayuga* greed gave rise to malice; malice gave rise to false statements and from false-statements arose passion, anger, vanity, dislikes, cruelty, infliction of injury, fear, sorrow, grief, worry, anxiety etc. Therefore, during *tretayuga*, a quarter of *dharma* (religious duties) disappeared. Because of this, the life-span of human beings was reduced by a quarter. Similarly, there was reduction in the attributes of earth etc., by one quarter. Because of the reduction of these attributes there was diminution by one quarter of the unctuousness, purity, tastes, potency, *vipakas*, specific actions and qualities of grains.

Because of the reduction by a quarter of the attributes of diets and regimens there was an unusual change in the maintenance of equilibrium of tissue elements and there was vitiation of *agni* (*pitta*) and *māruta* (*vāta*) by which, first of all, bodies of living beings got afflicted with diseases, viz. *jvara* (fever) etc. Therefore the life-span of living beings underwent gradual diminution. [24]

As it is described by Lord Vyāsa, people in the *satyuga*, were capable of getting all their desires fulfilled and the span of their life was four hundred years.

भवतश्चात्र--

युगे युगे धर्मपादः क्रमेणानेन हीयते ।
गुणपादश्च भूतानामेवं लोकः प्रलीयते ॥ २५ ॥
संवत्सरशते पूर्णे याति संवत्सरः क्षयम् ।
देहिनामायुषः काले यत्र यन्मानमिष्यते ॥ २६ ॥
इति विकाराणां प्रागुत्पत्तिहेतुरुक्तो भवति ॥२७॥

Thus it is said :—

Religious duties and qualities of living beings got reduced in quarters gradually by the passage of each *yuga*. This is how the entire universe has to face dissolution. After the

passage of 1/100th of the *yuga*, the life span of living beings get reduced by one year from the actual span of life specific to that age.

Thus the origin of diseases in ancient times is described.
[25-27]

During the *kaliyuga*, the span of life is one hundred years. After the passage of 1/100th time of the age, the life span of human beings is reduced by one year i. e. it becomes 99 years only.

Query about span of life.

एवंवादिनं भगवन्तमग्निवेश उवाच-किञ्चु खलु भगवन् । नियतकाल-
प्रमाणमायुः सर्वं न वेति ॥२८॥

Agniveśa enquired from Lord Ātreya, “O ! Lord, Is the span of life of all individuals predetermined or not ? [28]

Daiva and puruṣakāra :

तं भगवानुवाच—

इहाग्निवेश ! भूतानामायुर्क्षिमपेक्षते ।
दैवे पुरुषकारे च स्थितं हास्य बलावलम् ॥ २९ ॥
दैवमात्मकृतं विद्यात् कर्म यत् पौर्वदैहिकम् ।
स्मृतः पुरुषकारस्तु क्रियते यदिहापरम् ॥ ३० ॥
बलावलविशेषोऽस्ति तयोरपि च कर्मणोः ।
दृष्टं हि त्रितिधं कर्म हीनं मध्यमसुत्तमम् ॥ ३१ ॥
तयोरुदारयोर्युक्तिर्दीर्घस्य च सुखस्य च ।
नियतस्यायुषो हेतुर्विपरीतस्य चेतरा ॥ ३२ ॥
मध्यमा मध्यमस्येषा कारणं शृणु चापरम् ।

Lord Ātreya replied, “O ! Agniveśa, the rationality of life-span of individuals depends upon the strength or otherwise of both the *daiva* (pre-determined) and *puruṣakāra* (human effort). What is done during the past life is known as *daiva* where the effect is pre-determined and what is done during the existing life is known as *puruṣakāra*—where the effect is based upon the human effort. Depending upon the strength or otherwise, both the types of actions described above are classified into three categories, viz. mild, moderate and strong. Association with the effects of both these types of actions belonging to the strong category results in the long and happy life with a pre-determined span. In the case of their mildness, the result is opposite and in the case of their mediocrity,

the result is moderate. Hear now the other cause of the pre-determination or otherwise of the life-span. [29-32]

Predetermined span of life represents the strength of the actions of the past as well as the present life ; otherwise, it indicates the weakness of these actions. Even though the actions of the previous life are no more present in the existing life, still their effects manifest themselves in this life and the nature of these effects determines the actual span. Actions of the existing life may be classified into two categories. Righteous offerings and auspicious acts constitute the first category and their effects cannot be rationally explained. Administration of medicaments belongs to the second category and they produce their effects by promoting the excellence of *rasa* (plasma), *rakta* (blood) etc.

If there is excellence of the actions of the previous and existing lives then the span of life will be equivalent to the prescribed span for the respective *yuga*. Because of the use of rejuvenating drug; the span of life may exceed one hundred years and the individual may enjoy happiness and freedom from diseases.

Rejuvenation therapy would be helpful only to persons whose span of life is not determined. For an individual having a determined span of life, such therapies are of no avail. Rajevolution therapy may also constitute *puruṣakāra* which may help in the determination of the span of life.

Daiva and purusakara dominance of one over the other :

दैवं पुरुषकारेण दुर्बलं ह्यपहन्यते ॥ ३३ ॥
 दैवेन चेतरत् कर्म विशिष्टेनोपहन्यते ।
 दृष्टा यदेके मन्यन्ते नियतं मानमायुषः ॥ ३४ ॥
 कर्म किञ्चित् किञ्चित् काले विपाके नियतं महत् ।
 किञ्चित्त्वकालनियतं प्रस्थयैः प्रतिबोध्यते ॥ ३५ ॥

A weak *daiva* (actions during the previous life) get subdued by a strong *puruṣakāra* (action during the present life). Similarly a strong *daiva* subdues *puruṣakāra* and because of this, some scholars hold the view that the span of life is invariably predetermined.

Effects of a strong *daiva* (actions of the previous life) are invariably manifested. The time of this manifestation is conditioned by the availability of a congenial atmosphere.

[33-35]

The *daiva* (actions of the previous life) may be conducive to long life. But if it is weak and the individual resorts to unwholesome diets etc. strong enough to cause his death, the latter dominates the result and the individual dies. When inspite of suitable treatment one dies, then

the conclusion drawn is that his death was predetermined by *daiva*. With this in view it is said "Good or bad effects of an action have got to be tasted; otherwise they do not get diminished or destroyed even after thousands of years. Time of manifestation of the effects of such action is however, conditioned by the availability of congenial atmosphere. It is only when the effects of such actions are supported by the utilisation of unwholesome diets etc., they lead to death and not otherwise.

Daiva and puruṣakāra their role in the determination of span of life :

तस्मादुभयदृष्टवादेकान्तग्रहणमसाधु । निर्दर्शनमपि चात्रोदाहरिष्यामः—
यदि हि नियतकालप्रमाणमायुः सर्वं स्यात्, तदाऽयुष्कामाणां न मन्त्रौषधि-
मणिमङ्गलबलयुपहारहोमनियमप्रायश्चित्तोपवास - स्वस्त्ययन-प्रणिपातगमनाद्याः
क्रिया इष्टयश्च प्रयोज्येरन् ; नोऽन्तचण्डचपलगोगजोष्टखरतुरगमहिषाद्यः पवना-
दयश्च दुष्टाः परिहार्याः स्युः, न प्रपातगिरिविषमदुर्गम्भुवेगाः, तथा न प्रमत्तो-
न्मत्तोऽन्तचण्डचपलमोहलोभाकुलमतयः, नारयः, न प्रवृद्धोऽग्निः, च विविध-
क्षिपाश्रयाः सरीसृपोरगाद्यः, न साहसं, नादेशकालचर्याः, न नरेन्द्रप्रकोप इति;
एवमादयो हि भावा नाभावकराः स्युः, आयुषः सर्वस्य नियतकालप्रमाणत्वात् ।
न चानभ्यस्ताकालमरणभयनिवारकाणामकालमरणभयमागच्छेत् प्राणिनां, व्य-
र्थाश्चारम्भकथाप्रयोगवृद्धयः स्युर्महर्षीणां रसायनाधिकारे, नापीन्द्रो नियतायुषं
शत्रुं वज्रेणाभिहन्यात्, नाश्विनावार्तं भेषजेनोपपादयेतां, न महर्षयो यथेष्टमायु-
स्तपसा प्राप्नुयुः, न च विदितवेदितव्या महर्षयः ससुरेशाः सम्यक् पश्येयुरुप-
दिशेयुराचरेयुर्वा । अपि च सर्वचक्षुषामेतत् परं यदैन्द्रं चक्षुः, इदं चाप्यस्माकं
तेन प्रत्यक्षं, यथा—पुरुषसहस्राणामुत्थायोत्थायाहवं कुर्वतामकुर्वतां चातुल्या-
युष्ट्वं, तथा जातमात्राणामप्रतीकारात् प्रतीकाराच्च, अविषविषग्राशिनां चाप्य-
तुल्यायुष्ट्वमेव, न च तुल्यो योगक्षेम उद्पानघटानां चित्रघटानां चोत्सीदतां;
तस्माद्वितोपचारमूलं जीवितम्, अतो विपर्ययान्मृत्युः । अपि च देशकालात्म-
गुणविपरीतानां कर्मणामाहारविकाराणां च क्रमोपयोगः सम्यक्, त्यागः सर्वस्य
चातियोगायोगमिथ्यायोगानां, सर्वातियोगसंधारणम्, असंधारणमुदीर्णनां च
गतिमतां, साहसानां च वर्जनम्, आरोग्यानुवृत्तौ हेतुमुपलभामहे सम्यगुपदि-
शामः सम्यक् पश्यामश्वेति ॥ ३६ ॥

Since the *daiva* (actions during the previous life) and *puruṣakāra* (actions of the present life) both play their roles in the determination of the span of life, it is not desirable to hold one sided view that one or the other is responsible for this. We shall illustrate our statement by examples. If the life span of all individuals is predetermined, that is to say if all individuals are destined to die in a fixed time, then with a view to obtaining longevity, one need not resort to mantras (incantations) wearing of talismans and jewels, auspicious rites, sacrifices, offerings, oblations, obser-

vance of religious rules, atonement, fasting, benedictory rites, paying obeisance, pilgrimage and such other auspicious acts; one should not beware of rogue, fierce and excited bulls, elephants, camels, donkeys, horses, buffalos, harmful winds, water falls, rivers passing through mountains and having dangerous currents which are difficult to cross; people who are rough, fierce and excited and whose minds are afflicted with confusion and greed, enemies, highly inflamed fire, various poisonous animals like reptiles, overstraining, regimens which are not conducive to the locality and seasons and such deeds as would enrage the king of the land. If the life span is predetermined, then nobody should be afraid of death liable to be caused by the above factors. Then those who have not taken steps to prevent untimely death, should not be afraid of it; the instructions for initiation and discussions about the administration of rejuvenation therapies in the appropriate chapter would all be meaningless; even Lord Indra cannot kill by his *vajra* (thunderbolt) an enemy whose life-span is predetermined; the Aśvins cannot administer drugs to cure patients; even great sages cannot live as long as they like by means of meditation; the great omniscient including Lord Indra should not have observed, advised and practised medicine.

The futility of the theory of predetermined life span can be observed even with the naked eyes which are the best means to perception. For example, thousands of people who go in for a battle and those who do not, have dissimilar spans of life. Similarly, people whose diseases are treated immediately after their manifestation and those whose diseases are not treated in time or those who take poison and those who do not, have dissimilar spans of life. Earthen jars used for taking water (thereby more exposed to injuries) and those used as ornamental vases differ in respect of their durability. Therefore, wholesome regimens lead to longevity, unwholesome ones to death. One should gradually resort to such actions and food preparations as are having qualities opposite to those of the locality, seasons and one's own body. He should avoid the over utilisation, non-utilisation and wrong-utilisation of all regimens. One should give up all types of over-

indulgences; he should not suppress the manifested urges and he should avoid over-straining. We know, we properly advise and we properly observe the above mentioned factors for the maintenance of health. [36]

Since both the *daiva* (actions of the previous life) and *puruṣakāra* actions during the present life) are responsible for the determination of the span of life, it will not be correct to hold partial view in favour of either of them alone.

People, who go in for a battle are more likely to be killed with deadly weapons but those who do not fight usually escape such deaths. An earthen jar used for collecting water is exposed to damaging forces and is likely to get destroyed sooner than an ornamental vase which is not exposed to such damaging forces. These illustrations establish the fact the span of life of living beings is not predetermined. The span of life depends by and large to favour and unfavourable conditions.

Agniveśa's query about time of death :

अतः परमग्निवेश उवाच—एवं सत्यनियतकालप्रमाणायुषां भगवन् !
कथं कालमृत्युरकालमृत्युर्वा भवतीति ॥ ३७ ॥

Thereafter Agniveśa enquired, “O ! Lord, if the span of living beings is not predetermined then how is it said that some people die in the predetermined time and the rest otherwise ?” [37]

If the span of life is predetermined then nobody will be dying a premature death and thus the question of premature death does not arise. Similarly, if the span of life is not predetermined, then the question of mature or premature death does not arise.

Ātrey'a's reply :

तसुवाच भगवानत्रेयः—श्रूयतामग्निवेश ! यथा यानसमायुक्तोऽक्षः
प्रकृत्यैवाक्षगुणैरुपेतः स च सर्वगुणोपपन्नो वाहामानो यथाकालं स्वप्रमाणक्षया-
देवावसानं गच्छेत्, तथाऽयुः शरीरोपगतं बलवत्प्रकृत्या यथावदुपचर्यमाणं
स्वप्रमाणक्षयादेवावसानं गच्छति; स मृत्युः काले । यथा च स एवाक्षोऽति-
भाराधिष्ठितत्वाद्विषमपथादपथादक्षक्रमज्ञाद्वाह्यवाहकदोषादिणिमोक्षादनुपाङ्गात्
पर्यसनाच्चान्तराऽवसानमापद्यते, तथाऽयुरप्ययथाबलमारम्भादयथाग्न्यव्यव-
हरणाद्विषमाभ्यवहरणाद्विषमशरीरन्यासादतिमैथुनादसत्संश्रयादुदीर्णवेगविनि-
ग्रहाद्विधार्यवेगाविधारणाद्वितविषवाय्वग्न्युपतापादविधातादाहाप्रतीकारविव-
र्जनाच्चान्तराऽवसानमापद्यते, स मृत्युरकाले; तथा ज्वरादीनप्यातङ्कान्मिथ्योप-
चरितानकालमृत्यून् पश्याम इति ॥ ३८ ॥

Lord Ātrey'a replied, “O ! Agniveśa, as a vehicle with an axle endowed with all good qualities and driven on a good

road gets destroyed only after the expiry of its normal life, similarly the life inside the body of an individual endowed with strong physique and wholesome regimen will come to an end only at the end of its normal span (according to the *yuga*). This is called "timely death". The same vehicle alongwith its axle may subject itself to premature destruction in the event of a heavy load, uneven road, driving in places where there is no road, breakage of the wheel, defects in the vehicle or the driver, separation of the locking hook, lack of grease or an accident. Similarly, in the event of overstrain, eating in excess of ones own digestive power, irregular meals, irregular posture of the body, excessive indulgence in sex, association with wicked persons, suppression of manifested urges, non-suppression of urges which should be suppressed, affliction with evil spirits (germs), poison, wind and fire, exposure to injury and the avoidance of food and medicines, the life of an individual may soon come to an end. This is called "premature death": When diseases like fever, are not properly treated, they also lead to premature death. [38]

Query about prescription of hot water to patients suffering from fever:

अथग्निवेशः पप्रच्छ—किञ्चु खलु भगवन् ! ज्वरितेभ्यः पानीयमुष्णं प्रयच्छन्ति भिषजो भूमिष्टं न तथा शीतम्, अस्ति च शीतसाध्योऽपि धातुर्जर-रकर इति ॥ ३९ ॥

Agniveśa enquired, O ! Lord, why do physicians advise patients suffering from fever to take hot water in preference to cold water when the *dosa* involved in the pathogenesis of this disease is amenable to cooling therapies ? [39]

The *dosa* involved in the pāthogenesis of the disease *jvara* (fever) is *pitta* and by nature, it is hot. Only cooling things according to the principles of ayurvedic therapeutics should subside the vitiated *pitta*. But in the place of cold water, patients suffering from fever are advised to take hot water. This apparent contradiction in the theory and practice of the treatment of fever is the theme of Agniveśa's query.

Rationale behind administering hot water :

तमुवाच भगवानात्रेयः—ज्वरितस्य कायसमुत्थानदेशकालानभिसमीक्ष्य पाचनार्थं पानीयमुष्णं प्रयच्छन्ति भिषजः । ज्वरो ह्यामाशयसमुत्थः, प्रायो भेष-जानि चामाशयसमुत्थानां विकाराणां पाचनवमनापतर्पणसमर्थानि भवन्ति, पाचनार्थं च पानीयमुष्णं, तस्मादेतज्ज्वरितेभ्यः प्रयच्छन्ति भिषजो भूयिष्टम् ।

तद्वितेषां पीतं वातमनुलोभयति, अर्गिन चोदर्यमुदीरयति, क्षिप्रं जरां गच्छति,
श्लेष्माणं परिशोषयति, स्वल्पमपि च पीतं दृष्ट्याप्रशमनायोपकल्पते; तथायुक्त-
मपि चैतन्नात्यर्थोत्सन्धपित्ते उवरे सदाहभ्रमप्रलापातिसारे वा प्रदेयम्, उष्णेन
हि दाहभ्रमप्रलापातिसारा भूयोऽभिवर्धन्ते, शीतेन चोपशास्यन्तीति ॥ ४० ॥

Lord Ātreya replied, "Keeping in view the physical constitution, etiology, location and time, physicians advise the patient suffering from fever to take hot water so that the immaturely formed *dosas* which are responsible for the disease may get matured. The site of origin of fever is *āmaśaya* (stomach). For the treatment of diseases originating from the stomach, usually *pācaka* (drugs which bring about maturity in the immature products), as well as emetic and depleting drugs are administered. It is because of this that the physician advises the patient suffering from fever to take hot water. If hot water is taken, this results in a downward movement of *vata* (flatus), stimulation of *agni* (digestive enzymes), easy digestion (the hot water itself gets easily digested) and drying up of *kapha*. Even then, hot water should not be given to such of the patients as are having excessive vitiation of *pitta* or if there is burning sensation, giddiness, delirium and diarrhoea. Hot things, lead to the burning sensation, giddiness, delirium and diarrhoea. Only cold food and drinks are helpful in this situation. [40]

भवति चात्र—

शीतेनोष्णकृतान् रोगाङ्गमयन्ति भिषग्विदः ।
ये तु शीतकृता रोगस्तेषामुण्णं भिषग्जितम् ॥ ४१ ॥

Thus it is said :

Enlightened physicians administer cold things to cure diseases caused by hot things. For diseases caused by cold things, hot drugs are useful. [41]

The principle enunciated here for the treatment of *jvara* or fever is applicable to other diseases also.

Nourishing and depletion therapies :

एवमितरेषामपि व्याधीनां निदानविपरीतं भेषजं भवति; यथा—अपतर्पण-
निमित्तानां व्याधीनां नात्तरेण पूरणमस्ति शान्तिः, तथा पूरणनिमित्तानां
व्याधीनां नात्तरेणापतर्पणम् ॥ ४२ ॥

अपतर्पणमपि च त्रिविधं—लङ्घनं, लङ्घनपाचनं, दोषाद्यसेचनं चेति ॥ ४३ ॥

तत्र लङ्घनमल्पवलदोषाणां, लङ्घनेन हामिनमास्तवृद्धया वातातपपरोतमि-
वाल्पमुदकमल्पो दोषः प्रशोषमापद्यते; लङ्घनपाचने तु मध्यवलदोषाणां, लङ्घन-
पाचनाभ्यां हि सूर्यसंतापमास्ताभ्यां पांशुभस्मावकिरणैरिव चानतिव्युदकं मध्य-
बलो दोषः प्रशोषमापद्यते, बहुदोषाणां पुनर्दोषावसेचनमेव कार्यं, न हामिने
केदारसेतो पल्वलाप्रसेकोऽति, तद्विषयसेवनम् ॥ ४४ ॥

Similarly, the treatment of other diseases involve the administration of therapies as are antagonistic to their causes. For example, diseases caused by the depletion of *dhatu*s cannot get cured without nourishing therapy. Similarly diseases caused by over-nourishment cannot be cured without depletion Therapy.

Depletion therapy is of three types, viz. *laṅghana* (fasting), *laṅghanapācana* (fasting and administration of such medicaments as would help in bringing out the maturity of *doṣas*) and *doṣāvasecana* (elimination of *doṣas*).

Laṅghana (fasting) is suitable when the vitiation of *doṣas* is mild. By fasting, there is aggravation of *agni* (power of digestion) and *vāta*. As a small quantity of water gets absorbed by heat and wind similarly *doṣas* get subsided by the aggravation of *agni* and *vāta* due to fasting.

Laṅghanapācana (fasting and administration of such medicaments as would help in bringing out the maturity of *doṣas*) is suitable when the vitiation of *doṣas* is moderate. As exposure to sun ray, wind and sprinkling of ashes and dust dry up water in moderate quantity, similarly *laṅghana* and *pācana* cure the *doṣas* moderately vitiated. If the aggravation of *doṣas* is very strong, then it is necessary to eliminate them. Without breaking the boundary wall, it will not be possible to dry up a pond. Similar is the case when the *doṣas* are exceedingly vitiated. [42-44]

Like the ones caused by hot and cold things, diseases caused by over-nourishment and depletion are amenable to therapies having opposite properties. All these therapies can be classified under two categories, viz. (1) depletion and (2) nourishment. The depletion therapy is further subdivided into three classes, viz. (I) *laṅghana*, (II) *langhanapācana* and *doṣāvasecana*. *Laṅghana* and *pācana*—both are clubbed up together in the second category because *pācana* therapy invariably produces the effect of *laṅghana*. Otherwise, the *apatarpaṇa* (nourishing) therapy which suppresses power of digestion does not help in *pācana* (bringing out maturity of *doṣas*.)

Patients unsuitable for Elimination therapy etc :

दोषावसेचनमन्यद्वा भेषजं प्राप्तकालमप्यातुरस्य नैवंविधस्य कुर्यात् ।
तद्यथा—अनपवादप्रतीकारस्याधनस्यापरिचारकस्य वैद्यमानिनश्चएडस्यासूक्यकस्य
तीव्राधर्मरूचेरतिशीणबलमांसशोणितस्यासाध्यरोगोपहतस्य मुमर्षुलिङ्गान्वितस्य
चेति । एवंविधं ह्यातुरमुपचरन् भिषक् पापीयसाऽथशसा योगमृच्छतीति ॥४६॥

Even though required in view of the state of the disease, elimination therapies, other forms of depletion therapies and nourishing therapy should not be administered to such of the patients as have not been absolved of the allegations against them, those who are incapable of meeting their expenditure, those who pose themselves as physicians, those who are given to violent behaviour and envy, those who draw pleasure from vicious acts, those whose strength, flesh and blood have undergone excessive diminution, these who are suffering from incurable diseases and those who are having symptoms of imminent death. If the physician takes such patients under his treatment, then he is defamed because of his sinful acts. [45]

A poor man should not be treated because he will not able to meet the expenditure on his treatment. Treatment of diseases of a person given to vicious acts, itself, is a sinful act and this sin comes as an obstruction in the way of the cure of the patient.

भवति चात्र—

तदात्वे चानुवन्धे वा यस्य स्यादशुभं फलम् ।
कर्मणस्तन्न कर्तव्यमेतद्बुद्धिमतां मतम् ॥ ४६ ॥
(अल्पोदकदुमो यस्तु प्रवातः प्रचुरातपः ।
श्वेयः स जाङ्गलो देशः स्वलपरोगतमोऽपि च ॥ ४७ ॥
प्रचुरोदकवृक्षो यो निवातो दुर्लभातपः ।
अनूपो बहुदोषश्च, समः साधारणो मतः ॥ ४८ ॥)

Thus it is said :—

If an action produces inauspicious results immediately or in the long run, then according to wise persons, one should not resort to such type of work. *Jāngala* or arid type of country is characterised by scarcity of water and trees, and plentifullness of air and sunshine. It causes minimum number of diseases. *Anūpa* or marshy land is characterised by the abundance of water and trees and scarcity of air and sunshine. It causes many diseases. *Sama* or moderate type of country

is characterised by moderation in the above mentioned factors. [46-48]

तत्र श्लोकाः—

पूर्वरूपाणि सामान्या हेतवः सस्वलक्षणाः ।
देशोद्धृतंसस्य भैषज्यं हेतूनां मूलमेव च ॥ ४९ ॥
प्राग्विकारसमुत्पत्तिरायुषश्च क्षयक्रमः ।
मरणं प्रति भूतानां कालाकालविनिश्चयः ॥ ५० ॥
यथा चाकालमरणं यथायुक्तं च भैषजम् ।
सिद्धि यात्यौषधं येषां न कुर्यादेन हेतुना ॥ ५१ ॥
तदात्रेयोऽग्निवेशाय निखिलं सर्वमुक्तवान् ।
देशोद्धृतंसनिमित्तीये विमाने मुनिसत्तमः ॥ ५२ ॥

To sum up :

Premonitory signs, causative factors in general, characteristic features and management of epidemics which destroy countries, source of the causative factors, origin of diseases in ancient times, process of the reduction in the span on life, determination of the timely and premature death of living beings, cause of premature death, appropriate medicine, selection of therapy for success, reasons for which a particular patient should not be treated—all these topics are described by Lord Ātreya to Agniveśa in this chapter on “the Determination of the Specific characteristics of Epidemics.” [49-52]

इत्यग्निवेशकृते तत्त्वे चरकप्रतिसंस्कृते विमानस्थाने जनपदोद्धृतंसनीय-
विमानं नाम तृतीयोऽध्यायः ॥ ३ ॥

Thus ends the third chapter on the Determination of the Specific Characteristics of Epidemics of the *Vimāna* section of Agniveśa's work as redacted by Caraka. [3]

CHAPTER IV

DETERMINATION OF FACTORS FOR UNDERSTANDING DISEASES

चतुर्थोऽध्यायः

अथातशिविधरोगविशेषविज्ञानीयं विमानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on “the Determination of the Three Factors for understanding the Specific Characteristics of Diseases”

Thus said Lord Atreya. [1-2]

In the previous chapter, diseases are described only in general. Their specific characteristics are being described in this chapter.

Three sources of knowledge :

त्रिविधं खलु रोगविशेषविज्ञानं भवति; तद्यथा—आसौपदेशः, प्रत्यक्षम्,
अनुमानं चेति ॥ ३ ॥

Specific features of diseases can be determined by three ways, viz. authoritative instruction, direct observation and inference. [3]

The three *pramāṇas* (sources of knowledge) for the determination of the specific characteristics of diseases are authoritative instruction, direct observation and inference. *Yukti* or reasoning being included under inference, there is no need for accepting it as a separate source of knowledge in this context. All the *pramāṇas* (sources of knowledge) are applicable for the determination of some diseases, two for some others and only one for the remaining. Therefore, ‘direct observation’ need not necessarily be applicable for the diagnosis of *agnimāndya* (loss of the power of digestion) etc.

तत्रासौपदेशो नामास्तवचनम् । आसा ह्यवितर्कस्मृतिविभागविदो निष्पी-
त्युपतापदशिनश्च । तेषामेवंगुणयोगाद्यद्वचनं तत् प्रमाणम् । अप्रमाणं पुनर्मन्तो-
न्मत्तमूर्खरक्तदुष्टादुष्टवचनमिति; प्रत्यक्षं तु खलु तद्यत् स्वयमिन्द्रियैर्मनसा
चोपलभ्यते । अनुमानं खलु तक्तो युक्त्यपेक्षः ॥ ४ ॥

Authoritative instructions are the teachings of *āptas* (persons who are reliable par excellence). *Āptas* are free from doubts and their memory is unimpaired, i. e. they know things in their entirety by determinate experience. They see things without any attachment or affliction. Because of these

qualities, what they say is authentic. On the other hand, the statements—true or false—made by intoxicated, mad, illiterate and attached persons are not to be considered as authoritative.

Pratyakṣa or direct observation is that which is comprehensible by an individual through his own senses and mind. *Anumāna* or inference is the indirect knowledge based on reasoning. [4]

In *Sūtra* 11 : 70-71, terms like *anumāna* (inference) etc., have already been defined. Such definitions are again described here in view of the contextual propriety. Omission of repetitions in such contexts would have rendered the text incomplete.

Only such persons are considered to be authoritative as know things in their entirety, without any doubts, and by virtue of their own realisation. One cannot be authoritative if he knows things only piece meal by memory without any clear conception. Even though memory is considered to be an accessory of the source of knowledge, still in the matter of scientific statement relating to things present, memory may not always serve to be an infallible source of knowledge. There are certain branches of knowledge e. g. scriptures, mathematics where memory plays an important role, but in a branch of knowledge like the "science of medicine" where direct and easy access to the various aspects of medicine is required memory would not serve the purpose inasmuch as it often gives rise to wrong perception or often represents impossible images devoid of scientific aptness. Persons can further be considered to be authoritative only when they are free from prejudices of all kinds and who can see things objectively and in an infallible manner. This absolute authoritativeness can no doubt be found only in the gods like Brahman. Limited authoritativeness is, however, possible even in human beings. Those who possess the above qualifications in relation to a particular aspect of any scientific subject can undoubtedly be considered to be authoritative with reference to the given subject. Statements—true or false—made by intoxicated, mad, illiterate and attached persons are not considered to be authoritative. But even if a father is cruel, his statements regarding his ailing child will undoubtedly be authoritative if he possesses a sound mind, he is not a fool nor attached otherwise.

Perception here includes both the psychic and somatic experience uninterrupted by any other means.

त्रिविधेन खल्वनेन ज्ञानसमुदायेन पूर्वं परीक्ष्य रोगं सर्वथा सर्वमयोज्जर-
कालमध्यवसानमदोषं भवति, न हि ज्ञानावयवेन कृत्वे ह्येने ज्ञानमुत्पद्यते। त्रिविधे
त्वस्मिन् ज्ञानसमुदये पूर्वमासोपदेशाज्ञानं, ततः प्रत्यक्षानुमानाभ्यां परीक्षोप-
पद्यते। किं ह्यनुपरिदृष्टं पूर्वं यत्तत् प्रत्यक्षानुमानाभ्यां परीक्षमाणो विद्यत्।
तस्माद्विविधा परीक्षा ज्ञानवतः प्रत्यक्षम्, अनुमानं च; त्रिविधा वा
सहोपदेशेन ॥ ५ ॥

First of all one should examine the various aspects of diseases by employing all the three *pramāṇas* (sources of knowledge). Observations made on the nature of the disease thereafter are infallible. One cannot acquire authoritative knowledge of a thing in all its aspects simply by examining it through a part of these "sources of knowledge". Of all the "sources of knowledge" one should acquire knowledge in the beginning through authoritative instructions and, thereafter, proceed to examine a thing through *pratyakṣa* (direct observations) and *anumāna* (inference). What is to be examined by "direct observation", and inference unless something is *prima facie* stated? Therefore, a thing can be examined in two ways, viz. "direct observation" and inference or in three ways which include "authoritative instruction" in addition. [5]

One can know of a disease from "authoritative instructions" and thereafter, ascertain its various characteristics by examining the symptoms of these diseases (already described) through "direct observation" and inference. Like an individual ignorant of the science (*āyurveda*), the physician will not be able to ascertain the nature of the disease without having prior knowledge about it through authoritative testimony.

Specific characteristics of diseases are difficult to understand. They cannot be ascertained without authoritative testimony. Those who have undertaken the study of medical work can only describe the specific characteristics of diseases. Therefore, a disease can be correctly diagnosed by examining its specific characteristics like etiology etc., as mentioned in scriptures, through direct observation and inference. An individual can observe the specific characteristics of a jewel if shown to him but he will not be able to correctly identify it if he is not acquainted with the specific characteristics of the various types of jewels. Similarly a man ignorant of the scientific characteristics of various types of diseases from authoritative testimony, will not be able to correctly diagnose them.

Authoritative testimony is useful for examining the disease also, inasmuch as it provides information regarding laxity of the bowel, effects of various types of dreams etc. Authoritative testimony also makes one to know the location etc. of diseases which are otherwise very difficult to make out. Statements of the patient also constitute authoritative testimony inasmuch as they provide information regarding the caustiveness, laxity or mediocre nature of the bowel etc.,

Different aspects of the examination of diseases :

तत्रेदमुपदिशन्ति बुद्धिमन्तः—रोगमेकैकमेवं प्रकोपणमेवं योनिमेव मुत्थानमेव मात्मानमेव मधिष्ठानमेवं वेदनमेवं संस्थानमेवं शब्दस्पर्शरूपरसगन्धमेव मुपद्धवमे-

वंचृद्धिस्थानक्षयसमन्वितमेवमुदर्कमेवंनामानमेवंयोगं विद्यात्; तस्मिन्नियं प्रतीकारार्था प्रवृत्तिरथवा निवृत्तिरित्युपदेशाज्ञायते ॥ ६ ॥

Learned physicians describe the following aspects (characteristic features) of each and every disease :

1. Provoking factors, viz. ununctuous substance etc.;
2. source or *doṣas* involved;
3. mode of manifestation;
4. nature like the seriousness of *rohiṇī* (diphtheria) or the acuteness of *samnyāsa* (syncope);
5. location, viz. the organs of the body and the mind;
6. pain;
7. symptoms;
8. association with specific sounds, touch, colours, tastes and smell;
9. complications;
10. association with symptoms of aggravation, maintenance and abatement;
11. prognosis;
12. names;
13. concomitants and
14. prescriptions and prohibitions in the treatment, e. g. prescription of fasting and use of digestive drugs, and prohibition of daysleep and bath in fever.

One can understand the above mentioned characteristic features of diseases from authoritative testimony. [6]

Factors to be examined by direct observation etc. :

प्रत्यक्षतस्तु खलु रोगतत्त्वं बुभुत्सुः सर्वैरिन्द्रियार्थानातुर-
शरीरगतान् परीक्षेत, अन्यत्र रसाज्ञानात्, तद्यथा-अब्रकूजनं, सन्धिस्फुटनमङ्गु-
लीपर्वणं च, स्वरविशेषांश्च, ये चान्येऽपि केविच्छिरीरोपगताः शब्दाः स्युस्ता-
ञ्ज्ञोत्रेण परीक्षेत; वर्णसंस्थानप्रमाणच्छायाः, शरीरप्रकृतिविकारौ, चक्षुवैषयि-
काणि यानि चान्यान्यनुक्तानि तानि चक्षुषा परीक्षेत; रसं तु खल्वातुरशरीरणत-
मिन्द्रियवैषयिकमप्यनुमानादवगच्छेत्, न हास्य प्रत्यक्षेण ग्रहणमुपपद्यते, तस्मा-
दातुरपरिप्रश्नेनैवातुरमुखरसं विद्या, यूकापसर्पणेन त्वस्य शरीरवैरस्यं,
मक्षिकोपसर्पणेन शरीरमाधुर्यं, लोहितपित्तसंदेहे तु किं धारिलोहितं लोहितपित्तं
वेति श्वकाकमक्षणाद्वारिलोहितममक्षणाज्ञोहितपित्तमित्यनुमातव्यम्, एवमन्या-
नप्यातुरशरीरगतान् रसाननुमित्त; गन्धांस्तु खलु सर्वशरीरगतानातुरस्य
प्रकृतिवैकारिकान् द्वाणेन परीक्षेत; स्पर्शं च पाणिना प्रकृतिविकृतियुक्तम्। इति
प्रत्यक्षतोऽनुमानादुपदेशतश्च परीक्षणमुक्तम् ॥ ७ ॥

One desirous of examining the specific characteristics of the disease by "direct observation" should examine by his own senses the objects of senses in the body of the patient except the one relating to the gustatory organ (i. e. taste). The following should be examined by auscultation :

1. gurgling sound in the intestine;
2. cracking sound in the joints including those in the fingers;
3. voice of the patient; and
4. such other sounds in the body of the patient like the sounds of coughing and hiccup.

The following should be examined visually :—

1. colour, shape, measurement and complexion;
2. natural and unnatural states of the body; and
3. others which can be examined visually like signs of the disease and lustre.

Tastes of the various factors in the body of the patient are no doubt the objects of the gustatory sense organ. They can however be ascertained by inference and not by direct observation. Therefore, the taste in the mouth of the patient should be ascertained by interrogation. Impairment of the taste of the body should be inferred when lice etc.; go away from the body. Sweet taste of the body can be inferred when flies are attracted towards the body. In the case of bleeding from the body, if there is a doubt about the nature of the blood, it should be resolved by giving the blood to dogs and crows to eat. Intake of the blood by dogs and crows is indicative of its purity and rejection by these animals indicates that the blood is vitiated by *pitta*, i. e. the patient is suffering from *raktapitta*. Similarly, other tastes in the patient's body can be inferred.

Normal and abnormal smells of the entire body of the patient should be examined by the olfactory sense organ. Similarly the normal and abnormal touches of the patient should be examined by hand. Thus the examination of a patient by direct observation, inference and authoritative testimony is described. [7]

Lice etc., remain in the body only when the taste of the body is normal and conducive to their existence. When there is any abnormalcy in the taste of the body, they leave it. The disease *raktapitta* is characterised by bleeding from various parts of the body. Bleeding may take place due to other reasons also. where the blood is not necessarily vitiated by any of the *dosas*. For the differential diagnosis of these two conditions, dogs and crows who are normally attracted towards blood should be offered specimen blood. By nature they take only such blood as is not vitiated by *pitta*. Thus, if they take this blood, it should be concluded that the blood was normal and unaffected by *pitta*. On the otherhand, if they do not take it, the conclusion would be that the blood is vitiated by *pitta*, i. e. the patient is suffering from *raktapitta*.

In para-6 objects of senses are described in the order of sound, touch, vision, taste and smell. But while actually illustrating them in para-7, they are described in the order of sound, vision, taste, smell and touch. This change in the order indicates that one need not adhere to a particular order for the examination of the objects of senses by direct observation.

Factors to be observed by Inference :

इमे तु खल्वन्येऽप्येवमेव भूयोऽनुमानश्चेया भवन्ति भावाः । तदथा—
अग्निं जरणशक्त्या परीक्षेत्, वलं व्यायामशक्त्या, श्रोत्रादीनि शब्दाद्यर्थग्रहणेन,
मनोऽर्थाद्यभिचरणेन, विज्ञानं व्यवसायेत्, रजः सङ्केन, मोहमविज्ञानेन, क्रोध-
मभिद्रोहेण, शोकं दैन्येन, हृषीमापोदेन, प्रीतिं तोषेण, भयं विषादेन, धैर्यम-
विषादेन, वीर्यमुत्थानेन, अवस्थानमविभ्रमेण, श्रद्धामभिप्रायेण, मेधां ग्रहणेन,
संब्रां नामग्रहणेन, स्मृतं स्मरणेन, ह्लियमपत्रपणेन, शीलमनुशीलनेन, द्वेषं प्रति-
षेधेन, उपधिमनुबन्धेन, धृतिमलौख्येन, वश्यतां विधेयतया, वयोभक्तिसात्म्य-
व्याधिसमुत्थानानि कालदेशोपशयवेदनाविशेषेण, गूढलिङ्गं व्याधिमुपशयानुप-
शयाभ्यां, दोषप्रमाणविशेषमपचारविशेषेण, आयुषः क्षयमरिष्टैः, उपस्थित-
श्रेयस्त्वं कल्याणाभिनिवेशेन, अमलं सत्त्वमविकारेण, ग्रहण्यास्तु मृदुदारणत्वं
स्वप्रदर्शनमभिप्रायं द्विष्ठेष्टुखदुःखानि चातुरपरिप्रज्ञेनैव विद्यादिति ॥ ८ ॥

The following among others are the factors to be observed by inference :—

1. *agni* (digestive fire) from the power of digestion;
2. strength from the capacity for exercise;
3. condition of the senses, viz. auditory faculty etc., from their capacity to perceive the respective objects, viz. sound etc.;
4. existence of the mind from the perception of specific objects even in the presence of all other senses along their respective objects. When senses and their respective objects are present together, all the sense

perceptions should have occurred. Absence of such perceptions indicates that there is a third factor which determines the perception and this is mind.

5. Knowledge of a thing from proper reaction to it, e. g. when one approaches drinking water, he feels like taking water (provided, of course, he is thirsty) which indicates that he is in full knowledge of the thing alongwith its uses;
6. *rajoguṇa* from attachment to woman etc.,—such attachments are caused by *rajoguṇa* alone;
7. *moha* (unconsciousness) from lack of understanding;
8. anger from the revengeful disposition;
9. grief from the sorrowful disposition;
10. joy from happiness, viz. indulgence in dancing, singing, playing musical instruments and remaining in festive mood;
11. *priti* (pleasure) from satisfaction which is reflected by joyus appearance of the face, eyes etc.;
12. fear from apprehension; *pratiṣṭubha*,
13. courage from strength of the mind even when one is in dangerous situation;
14. energy of an individual from his initiative in such actions as are normally difficult to perform.
15. stability of the mind from the avoidance of any mistake;
16. desire from request; *apādī*;
17. intelligence from the power of comprehension of scriptures etc.;
18. recognition from the recollection of the name; *apādī*;
19. memory from the power of remembrance; *prameya*;
20. modesty from bashfulness; *shyāma*;
21. liking (natural liking for things) from habitual intake of things;
22. dislike from disinclination for taking someting;
23. deception from subsequent manifestations—An individual pretending to be a well wisher but actually

- having evil intentions can be judged from his subsequent activities like the murder of the brother etc.;
24. courage from firmness;
 25. obedience from compliance with orders;
 26. age, liking, homologation and cause of the disease from the stage of the life, habitat, conduciveness and characteristic features of pain respectively. Age of the patient can be determined by the stage of his life, viz childhood etc. Habitat of an individual determines his liking e. g. if an individual has liking for wheat and *māṣa* (*Phaseolus radiatus* Linn.) then he should be inferred to be an inhabitant of *madhyadeśa* (central region of the country). When something is conducive to the individual, it should be treated as wholesome. If somebody is suffering from hyperpyrexia, it can be safely inferred that the etiological factors of fever are responsible for this condition.
 27. diseases having latent symptoms from the administration of such therapies as would alleviate or aggravate the condition. Diseases having well manifested symptoms can however be diagnosed by symptoms only and for their diagnosis exploratory therapies are not required;
 28. degree of the vitiation of *dosas* from the measurement of provocative factors. When these provocative factors are in abundance, there is excessive vitiation of *dosas* on the other hand, if there is less of provocative factors then the vitiation of *dosas* is mild;
 29. approaching death from had prognostic signs;
 30. approaching prosperity from the initiation of useful work; and
 31. promotion of *sattvika* qualities of the mind from the absence of its impairments, viz. attachment, envy etc.,

Similarly the costiveness or laxity of *grahani* (lit. duodenum and small intestine but contextually meaning bowels), dreams, desires for food etc., likes and dislikes, happiness and

unhappiness etc., are to be known by interrogating the patient. [8]

In the above para, factors which can be determined by inference are described. Some of them can be determined by interrogating the patient also; hence the prefix '*bhūyās*' (meaning specifically) has been used with *anumānaganya* (meaning which can be known by inference).

'*Harsa*' and '*pṛiti*'—these two terms have almost identical meanings. But there is a subtle difference in the implications of these two terms inasmuch as '*pṛiti*' means only the pleasure which results in satisfaction whereas *harsa* means joy associated with excitement of the mind.

Costiveness or laxity of the bowel, among others, can be known by inference also. But such inferences involve much exercise of intelligence. It is only by applying the tool of interrogation that a physician can more conveniently ascertain such factors.

भवन्ति चात्र—

आप्सतश्चोपदेशेन प्रत्यक्षकरणेन च ।
 अनुमानेन च व्याधीन् सम्यग्बिद्याद्विचक्षणः ॥ ९ ॥
 सर्वथा सर्वमालोच्य यथासंभवमर्थधित् ।
 अथाध्यवस्थेतत्त्वे च कार्ये च तदनन्तरम् ॥ १० ॥
 कार्यतत्त्वविशेषज्ञः प्रतिपत्तौ न मुहूर्ति ।
 अमूढः फलमाप्नोति यद्मोहनिमित्तजम् ॥ ११ ॥
 शानबुद्धिप्रदीपेन यो नाविशति तत्रवित् ।
 आतुरस्यान्तरात्मानं न स रोगांश्चिकित्सति ॥ १२ ॥

Thus it is said :—

The wise should properly understand a disease by the scriptural testimony, direct observation and inference. As far as possible all factors should be discussed in their entirety. After examining the disease by scriptural testimony etc.; the physician should obtain knowledge regarding the nature of disease and the therapies required therefor. One who is well versed in the specific nature of the disease as well as the therapies required therefor seldom fails to act properly. It is only he who acts properly reaps the results of proper action (i. e. achieves success).

When a physician who even if well versed in the knowledge of the disease and its treatment does not try to enter into the heart of the patient by virtue the light of his knowledge, he will not be able to treat the disease. [9-12]

तत्र स्तोकौ—

सर्वरोगविशेषाणां त्रिविधं ज्ञानसंग्रहम् ।
यथा चोपदिशन्त्यासाः प्रत्यक्षं गृह्णते यथा ॥ १३ ॥
ये यथा चातुर्मानेन ज्ञेयास्तांश्चाप्युदारधीः ।
भावांस्त्रिरोगविज्ञाने विमाने मुनिस्तुक्वान् ॥ १४ ॥

To sum up :—

Three methods for the determination of all types of diseases, factors to be understood by the instructions of *āptas* (sages), by direct observation and inference as well as methods prescribed therefor—all these topics have been described by the sage in this chapter on “the Determination of the three Factors for understanding the Specific characteristics of Diseases”. [13-14]

इत्यग्निवेशाद्यते तन्त्रे चरकप्रतिसंस्कृते विमानस्थाने त्रिविधरोगविशेष-
विज्ञानीयं विमानं नाम चतुर्थोऽच्यापः ॥ ४ ॥

Thus ends the fourth chapter on “the Determination of Three factors for understanding the Specific Characteristics of Diseases” of the *Vimāna* Section of Agniveśa’s work as redacted by Caraka. [4]

CHAPTER V CHANNELS OF CIRCULATION

पञ्चमोऽध्यायः

अथातः स्रोतसां विमानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on “the Determination of the Specific Characteristics of the Channels of Circulation”.

Thus said Lord Ātreya. [1-2]

In the previous chapter, methods for examining diseases have been described. The body alongwith the various channels of circulation in it are required to be examined. Determination of the specific characteristics of these channels of circulation forms the subject matter of this chapter.

Channels of circulation and their varieties :

यावन्तः पुरुषे मूर्तिमन्तो भावविशेषास्तावन्त एवास्मिन् स्रोतसां प्रकारविशेषाः । सर्वे हि भावा पुरुषे नान्तरेण स्रोतांस्यमिनिर्वतन्ते, क्षयं वाऽप्यभिगच्छन्ति । स्रोतांसि खलु परिणाममापद्यमानानां धातूनामभिवाहीनि भवन्त्ययनार्थेन ॥ ३ ॥

The specific varieties of the channels of circulation in the human body are the same in number as the structural entities in it. All the (structural) entities in the human body cease either to maintain the continuity of their manifestations or to undergo diminution in the absence of the respective channels of circulation. The channels of circulation carry the *dhātus* (tissue elements or their constituents) undergoing transformation to their destination. [3]

The term ‘*mūrtimanta*’ meaning structural entities is used here to denote such of the structural entities as are not omnipresent and having limitations to their quantities.

The use of the term “*parināmamāpadyamānām*” (meaning undergoing transformation) indicates that the channels carry such of the tissue elements as are undergoing transformation from their previous states, viz. *rasa* (plasma) to their subsequent states, viz. *rakta* (blood) etc.

Use of the term “*ayandrthena*” (meaning ‘to their destination’) indicates that the channels of circulation do not carry the *sthira* (stable) *dhātus*, but, only such of the mobile *dhātus*, as are destined to be transformed to another *dhātu* situated elsewhere, are carried by them. In other words :

rakta is increased in quantity, when *rasa* after the process of transformation, gets mixed with it. Locations or abodes of these two tissue elements, viz. *rasa* and *rakta* are different and these two *dhātus* cannot come together in the absence of a channel for circulation. Thus the intention of the author here is to state that each *dhātu* or tissue element has two fractions, one of which is stable (*posya*) and which gets nutrition from the preceding *dhātus* and the other which is unstable provides nutrition to the succeeding *dhātus* (*poṣaka*). This second fraction of the preceding *dhātu* (e. g. *rasa*) cannot move to the succeeding *dhātu* (e. g. *rakta*) for providing nutrition in the absence of a channel of circulation. The principle, involved in the transformation of *rasa* to *rakta*, is applicable to all the other structural elements of the body as well. Tissue elements are situated in different parts of the body and each of them has channels to carry their particular nourishment. So *dhātus* are nourished through their respective channels and one channel cannot provide nourishment to another *dhātu* as one canal cannot irrigate trees situated in different places (directions).

Manas (mind) is eternal and there is no question of providing any nourishment to it. Still it has its specific channels through which it keeps contact with the senses situated at different places. For such factors like mind etc., which are beyond sensory perception (trans-sensory), the entire body works as the channel. Similarly *doṣas* move through the entire body. Even though no gross channel is described for them still it will be stated in para-7 that they move through all the channels of the body. For those who desire to know things in their subtleties, vessels dominantly carrying each of these *doṣas* are also described e. g. in the *Suśruta*, (ten vessels are described to carry *vāta*)—cf. *Suśruta* : *Śārīra* 7 : 6. Unlike the *Suśruta*, description of differences among *dhamanī*, *sire* and *srotas* are not given in *Caraka*.

Another view :

अपि चैके स्रोतसामेव समुदयं पुरुषमिच्छन्ति, सर्वगतत्वात् सर्वसर-
त्वाच्च दोषप्रकोपणप्रशमनानाम् । न त्वेतदेवं, यस्य हि स्रोतांसि, यच्च वहन्ति,
यच्चावहन्ति, यत्र चावस्थितानि, सर्वं तदन्यत्वेभ्यः । अतिवद्गुत्वात् खलु केचिद-
परिसङ्घर्षेयान्याचक्षते स्रोतांसि, परिसङ्घर्षेयानि पुनरन्ये ॥ ४५ ॥

Because of their pervasion all over the body, and also, because the aggravators of *doṣas*, viz. unwholesome regimens and alleviators of *doṣas*, viz. wholesome regimens move through the entire body (through these channels), some scholars hold the view that the human body is nothing but the conglomeration of channels only. This is not correct, the elements which compose them, the elements they carry, the elements to which they provide nourishment and their abodes (muscles etc.)—they are different from these cannels.

Because of their multitudinousness, some scholars hold them to be innumerable while some others take them all as numberable. [4-5]

Important varieties of channels of circulation :

तेषां तु खलु स्रोतसां यथास्थूलं कर्तिचित्प्रकारान्मूलतश्च प्रकोपविज्ञान-
तश्चानुव्याख्यास्यामः; ये भविष्यन्त्यलमनुकार्यज्ञानाय ज्ञानदत्तां, विज्ञानाय
चाक्षणवताम् । तद्यथा-प्राणोदकान्नरसहृधिरमांसमेदोस्थिमज्जग्नक्रमपुरीष-
स्वेदवहानीति; वातपित्तस्तेष्मणां पुनः सर्वशरीरचराणां सर्वाणि स्रोतांस्यन-
भूतानि, तद्वदतीन्द्रियाणां पुनः सत्त्वादीनां केवलं चेतनावच्छिररमयनभूतम-
धिष्ठानभूतं च । तदेतत् स्रोतसां प्रकृतिभूतत्वात् विकारै रूपसूज्यते शरीरम् ॥६॥

Of all these, some varieties of gross (important) channels will be described here with reference to their controlling organs and also the symptoms manifested by their vitiation. This description will be sufficient for an ignorant man to understand the characteristic features of these channels, while for a wiseman, this description will provide enough material enabling him to understand the characteristic features of other channels which are not described here. These channels are those carrying (1) *prāṇa* (vital breath), (2) *udaka* (water), (3) *anna* (food), (4) *rasa* (plasma), (5) *rudhira* (blood specifically the hemoglobin fraction of it), (6) *māmā* (muscle tissue), (7) *medas* (fat or adipose tissue), (8) *asthi* (bone or osseous tissue), (9) *majjā* (marrow) (10) *śukra* (semen specifically the sperm) (11) *mūtra* (urine), (12) *puriṣa* (feces) and (13) *sveda* (sweat). *Vata*, *pitta* and *kapha* move all over the body; hence all the channels of the body cater to their needs for movement. Similarly factors which are beyond sensory perception (trans-sensory) like mind etc. move and are located only in the sentient portion of the body. As long as these channels of circulation perform their normal functions, the body is free from diseases. [6]

There are two types of people-unwise and wise. The description of various aspects of channels furnished in this paragraph will be sufficient to make the unwise understand them properly; whereas for those who are wise, the material furnished here will be sufficient to enable them to understand the specific characteristics of such other channels which are not directly described here.

The human body has two parts, viz. the sentient and the insentient. Hair, nails etc., are insentient and the remaining portion of the body is

sentient. While the *dosas* move all over the—body both the sentient and insentient parts—the mind moves and is located only in the sentient part of the body i. e. in the body exclusive of hair, nails etc.

Sites of origin and signs of vitiation of various channels of circulation:

तत्र प्राणवहानां स्रोतसां हृदयं मूलं महास्रोतश्च, प्रदुष्टानां तु खल्वेषामिदं विशेषविज्ञानं भवति; तद्यथा—अतिसृष्टमतिवदं कुपितमल्पाल्पमभीक्षणं वा सशब्दशूलमुच्छ्वसन्तं दृष्ट्वा प्राणवहान्यस्य स्रोतांसि प्रदुष्टानीति विद्यात्। उदकवहानां स्रोतसां तालुमूलं क्लोमं च, प्रदुष्टानां तु खल्वेषामिदं विशेषविज्ञानं भवति; तद्यथा—जिह्वाताल्वोष्टुकगठकोमशोषं पिपासां चातिप्रवृद्धां दृष्ट्वोदकवहान्यस्य स्रोतांसि प्रदुष्टानीति विद्यात्। अन्नवहानां स्रोतसामामाशयो मूलं वामं च पार्श्वं, प्रदुष्टानां तु खल्वेषामिदं विशेषविज्ञानं भवति; तद्यथा—अन्नाभिलषणमरोचकविपाकौ छर्दिं च दृष्ट्वाऽन्नवहान्यस्य स्रोतांसि प्रदुष्टानीति विद्यात्। रसवहानां स्रोतसां हृदयं मूलं दशं च धमन्यः। शोणितवहानां स्रोतसां यकृन्मूलं स्नीहा च। मांसवहानां च स्रोतसां स्नायुमूलं त्वक् च। मेदोवहानां स्रोतसां वृक्कौ मूलं वपावहनं च। अस्थिवहानां स्रोतसां मेदो मूलं जघनं च! मज्जवहानां स्रोतसामस्थीनि मूलं सन्धयश्च। शुक्रवहानां स्रोतसां वृषणौ मूलं शेफश्च। प्रदुष्टानां तु खल्वेषां रसादिवहस्रोतसां विज्ञानान्युक्तानि विविधाशितपीतीये; यान्येव हि धातूनां प्रदोषविज्ञानानि तान्येव यथास्वं प्रदुष्टानां धातुस्रोतसाम्। मूत्रवहानां स्रोतसां चस्तिर्मूलं वक्ष्णणौ च, प्रदुष्टानां तु खल्वेषामिदं विशेषविज्ञानं भवति; तद्यथा—अतिसृष्टमतिवदं प्रकुपितमल्पाल्पमभीक्षणं वा वहलं सशूलं मूत्रयन्तं दृष्ट्वा मूत्रवहान्यस्य स्रोतांसि प्रदुष्टानीति विद्यात्। पुरीषवहानां स्रोतसां पकाशयो मूलं स्थूलगुदं च, प्रदुष्टानां तु खल्वेषामिदं विशेषविज्ञानं भवति; तद्यथा—कृच्छ्रेणाल्पाल्पं सशब्दशूलमतिद्रवमतिग्रयितमतिवदुच्चोपविशन्तं दृष्ट्वा पुरीषवहान्यस्य स्रोतांसि प्रदुष्टानीति विद्यात्। स्वेदवहानां स्रोतसां मेदो मूलं लोमकृपाश्च, प्रदुष्टानां तु खल्वेषामिदं विशेषविज्ञानं भवति; तद्यथा—अस्त्रेदनमतिस्वेदनं पारुष्यमतिश्लक्षणतामङ्गस्य परिदाहं लोमहर्षं च दृष्ट्वा स्वेदवहान्यस्य स्रोतांसि प्रदुष्टानीति विद्यात्॥ ७-८ ॥

Heart and the *mahasrotas* (central cavity or alimentary tract) are the sites of origin (controlling organs) of the channels carrying *prāṇavāyā* (vital breath). The characteristic manifestations of the vitiation of these channels are too long or too restricted, aggravated, shallow or frequent respirations associated with sound and pain.

Talu (palate) and *kloman* (pancreas?) are the sites of origin (controlling organs) of the channels carrying watery elements. The characteristic manifestations of the vitiation of these channels are the dryness of the tongue, palate, lips, throat and *kloman*; and excessive thirst.

Stomach and *vāmapārśva* (leftside ?) are the sites of origin of the channels carrying food and its products. The characteristic manifestations of the vitiation of these channels are disinclination for food, anorexia, indigestion and vomiting.

The sites of the origin of channels carrying *dhatus*, viz. rasa etc., are given in the table below :

<i>Dhatus</i> (Tissue elemets)	Sites of origin of the channels carrying them.
1. <i>rasa</i> (plasma)	heart and ten vessels.
2. <i>rakta</i> (blood specifically the hemoglobin fraction of it)	liver and spleen.
3. <i>māṃsa</i> (muscle tissue)	ligaments and skin.
4. <i>medas</i> (fat or adipose tissue)	kidneys and omentum.
5. <i>asthi</i> (bone or adipose tissue)	adipose tissue and buttock.
6. <i>majjā</i> (marrow)	bones and joints.
7. <i>śukra</i> (semen specially the sperms)	testicles and pudendum.

Symptoms manifested due to the vitiation of the channels of circulation of these *dhatus* were already described in *Sutra* 28 : 9-19. Symptoms manifested by the vitiation of these *dhatus* and their specific channels are the same.

The sites of origin of the channels of circulation of urine are the bladder and *vāṅgas* (kidneys). The characteristic manifestations of the vitiation of these channels are the voiding of too much of urine or the complete suppression of urine, impairment of the composition of urine and occasionally or frequently passing of thick urine associated with pain.

The sites of origin of the channels carrying feces are the colon and the rectum. The characteristic manifestations of their vitiation are the voiding of small quantity of feces with difficulty, voiding of large quantity of very watery and very scybalous stool associated with sound and pain.

The sites of origin of the channels carrying sweat are adipose tissue and the hair follicles. The characteristic manifestations of their vitiation are the absence of perspiration, excessive perspiration, roughness and excessive smoothness of the body, general burning sensation and horripilation. [7-3]

Vāta moves through the entire body. It is of five types and *prāṇavāyu* is one of them. *Prāṇavaha srotas*, described above, carries this type of *vāta*.

Kloman is the site of thirst and is situated in (near ?) the heart.

(Note :—Identification of this organ, viz. *Kloman* is shrouded under controversy and Cakrapāṇi's commentary in this regard does not throw enough light on this problem.) The *Vapavahana* (omentum) is a fatty structure in the abdomen and it is popularly known as *tailavartikā*.

Suśruta has described kidneys and *kaṭī* (lumber region) as the sites of the channels carrying adipose tissue (fat) cf. *Suśruta* : *Śāśira* 9 : 12.

(Note :—Cakrapāṇi has expressed his inability to resolve this controversy stating that their reality can be judged only by people (sages) who can observe things beyond sensory perception).

Bone tissues (their components) also take a liquid form and to carry them channels exist in the body. In *Sūtra* 28 : 9–19, symptoms due to the vitiation of various *dhātus* (tissue elements) are described. Since the symptoms of the vitiation of *dhātus* and the channels carrying them are identical, they (these symptoms) also hold good in the present context. Some scholars hold the view that the symptoms of vitiation of *dhātus* and their respective channels are the same. This is not correct. Had this been so, there was no need for describing the symptoms due to the vitiation of the channels and the statement in para-9 that “local *dhātu*s get vitiated by the vitiation of channels” becomes redundant. When the channels of circulation get vitiated, then the vitiation of the *dhātu* carried by them is obvious. In addition to the symptoms manifested by the vitiation of these *dhātus*, some other symptoms like excessive flow of the contents due to the vitiation of channels will be described in verse—24.

Suppression of sweating is considered to be a premonitory symptom of *kuṣṭha* (obstinate skin diseases including leprosy); this is also described here to be one of the symptoms of the vitiation of channels carrying sweat. Differential diagnosis of these two conditions depends upon the associated symptoms. When the suppression of sweating is associated with other pre-monitory symptoms of *kuṣṭha*, then the former should be treated as a pre-monitory symptom of the latter; otherwise, manifestation of this symptom alone, should lead to the diagnosis of the vitiation of the channels carrying sweat.

Utility of the knowledge of *mūlasthāna* (sites of origin) of channels is not directly described here. As a tree is seriously affected by injury to its root, similarly, the channels of circulation in the human body are seriously affected when their *mūlasthāna* (sites of origin) is injured. With this end in view, Suśruta has described symptoms due to the injury at the sites of origin of these channels of circulation.

स्रोतांसि, सिराः, धमन्यः, रसायन्यः, रसवाहिन्यः, नाड्यः, पन्थानः, मार्गाः, शरीरच्छिद्राणि, संवृतासंवृतानि, स्थानानि, आशयाः, निकेताश्चेति-शरीरधात्वकाशानां लक्ष्यालक्ष्याणां नामानि भद्रन्ति । तेषां प्रकोपात् स्था-नस्थाश्चैव मार्गगाश्च शरीरधात्वः प्रकोपमापद्यन्ते, इतरेषां प्रकोपादितराणि च । स्रोतांसि स्रोतांस्येव, धातवश्च धातूनेव प्रदूषयन्ति प्रदुष्टाः । तेषां सर्वेषां-मेव वातपित्तसेष्माणः प्रदुष्टा दूषयितारो भवन्ति, दोषस्वभावादिति ॥ ९ ॥

Srotas (channel), *sirā* (vein), *dhamani* (artery), *rasayani* (lymphatic channel), *rasavāhīni* (capillary), *nādi* (duct), *pantha* (passage), *marga* (track), *śariracchidra* (spaces inside the body), *saṁvṛtasaṁvṛta* (duct closed at one end and open at the other), *sthāna* (residence), *āśaya* (container) and *niketa* (abode)—these are the names attributed to various visible and invisible spaces inside the tissue elements of the body. Affliction of these channels leads to the vitiation of the tissue elements residing there or passing through them—vitiation of one leads to the vitiation of the other. The vitiated channels and *dhātus* (tissue elements) on their part vitiate other channels and *dhātus* respectively. Because of their vitiating nature, *doṣas*, viz. *vāta*, and *kapha* are responsible for the vitiation of all of them (channels and tissue elements). [9]

In the above paragraph, synonyms of *srotas* (channel) are furnished. The last three synonyms viz. *sthāna* (residence) *āśaya* (container) and *niketa* (abode) are held by some scholars to be the synonyms of *mūlas* (sites of origin) of these channels. Some other scholars, however, hold the view that channels themselves work as residence, container and abodes of the tissue elements like *rasa* etc.; hence these last mentioned three synonyms also pertain to the channels.

Doṣas by nature have the power of vitiating tissue elements. Tissue elements, on the other hand, do not possess this power of vitiation. Whenever, anything is said to get vitiated by *dhātus*, this by implication means that the *doṣas* located in the vitiating *dhātus* play that role.

Causes of vitiation of different channels of circulation :

भवन्ति चात्र—

क्षयात् संधारणाद्रौक्षग्राह्यायामात् शुधितस्य च ।
प्राणवाहीनि दुष्यन्ति स्रोतांस्यन्यैश्च दारुणैः ॥१०॥
औष्ण्यादामाद्यात् पानादिशुष्कान्तसेवनात् ।
अम्बुद्याहीनि दुष्यन्ति तुण्णायाश्चातिपीडनात् ॥११॥
अतिमात्रस्य चाकाले चाहितस्य च भोजनात् ।
अम्बुद्याहीनि दुष्यन्ति वैगुण्यात् पावकस्य च ॥१२॥

गुरुदीतमतिस्थिर्घमतिमात्रं समश्वताम् ।
 रसवाहीनि दुष्यन्ति चिन्त्यानां चातिचिन्तनात् ॥१३॥
 विदाहीन्यन्नपानानि स्थिर्घोषानि द्रधाणि च ।
 रक्तवाहीनि दुष्यन्ति भजतां चातपानलौ ॥१४॥
 अभिष्यन्दीनि भोज्यानि स्थूलानि च गुरुणि च ।
 मांसवाहीनि दुष्यन्ति भुक्त्वा च स्वपतां दिवा ॥१५॥
 अव्यायामाद्विवास्वप्नान्मेद्यानां चातिभक्षणात् ।
 मेदोवाहीनि दुष्यन्ति वारुण्याश्वातिसेवनात् ॥१६॥
 व्यायामादतिसंक्षोभादस्थामतिविघट्टनात् ।
 अस्थिवाहीनि दुष्यन्ति वातलानां च सेवनात् ॥१७॥
 उत्पेषादत्यभिष्यन्दादभिघातात् प्रपीडनात् ।
 मज्जवाहीनि दुष्यन्ति चिरुद्धनां च सेवनात् ॥१८॥
 अकालयोनिगमनान्निग्रहादतिमैथुनात् ।
 शुक्रवाहीनि दुष्यन्ति शखश्चाराम्निभिस्तथा ॥१९॥
 मन्त्रितोदकभक्ष्यख्लीसेवनान्मूत्रनिग्रहात् ।
 मूत्रवाहीनि दुष्यन्ति क्षीणस्याभिक्षतस्य च ॥२०॥
 संधारणादत्यशनादजीर्णाध्यशनात्तथा ।
 वर्चोवाहीनि दुष्यन्ति दुर्बलाग्नेः कृशस्य च ॥२१॥
 व्यायामादतिसंतापाच्छीतोष्णाकमसेवनात् ।
 स्वेदवाहीनि दुष्यन्ति क्रोधशोकभयैस्तथा ॥२२॥

Thus it is said :—

Prāṇavahasrotāṁsi (channels carrying vital breath) get vitiated by wasting, suppression of natural urges, indulgence in ununctuous things, performance of exercise while hungry, and such other harmful regimens.

Udakavahasrotāṁsi (channels carrying water) get vitiated by exposure to heat, indigestion, alcoholic drinks, intake of excessively dry food and excessive thirst.

Annavahasrotāṁsi (channels carrying food) get vitiated due to untimely intake of large quantity of unwholesome food and the impairment of the power of digestion.

Rasavahasrotāṁsi (channels carrying *rash* or plasma) get vitiated due to the excessive intake of heavy, cold and excessively unctuous food, and over-worry.

Raktavahasrotāṁsi (channels carrying blood specifically hemoglobin fraction of it) get vitiated due to the intake of food

and drinks which are irritant, unctuous, hot and liquid, and exposure to sun and fire.

Māṁsavahasrotāṁsi (channels carrying components of muscle tissue) get vitiated by the intake of deliquescent, gross and heavy food, and by sleeping immediately after meals.

Medovahasrotāṁsi (channels carrying adipose tissue) get vitiated due to the lack of exercise, daysleep, excessive intake of fatty things and intake of *vārunī* type of wine.

Asthivahasrotāṁsi (channels carrying osseous tissue) get vitiated due to exercise involving excessive irritation and rubbing of bones, and intake of *vāta* provoking food.

Majjāvahasrotāṁsi (channels carrying components of bone-marrow) get vitiated due to crushing, excessive liquification, injury and compression of bone-marrow, and intake of mutually contradictory food.

Sukravahasrotāṁsi (channels carrying semen specifically the component of sperms) get vitiated due to the sexual intercourse in improper time (in the absence of sufficient excitement) and in improper genital track and suppression of sexual urge or excessive sexual indulgence, and also as a result of surgery, application of alkalies and cauterisation.

Mūtravahasrotāṁsi (channels carrying urine) get vitiated by the intake of drinks and food, and sexual intercourse while having the urge for micturition, and suppression of the urge for micturition specially by those suffering from wasting and consumption.

Varcovahasrotāṁsi (channels carrying feces) get vitiated by the suppression of the urge for defecation, intake of food in large quantity, intake of food before the digestion of the previous meal specially in those who are emaciated and having weak power of digestion.

Svedevahasrotāṁsi (channels carrying sweat) get vitiated due to excess of exercise, exposure to excess of heat, indulgence, in cold and hot things without following the prescribed order, anger, grief and fear. [10-22]

Factors responsible for vitiation of channels of circulation :

आहारश्च विहारश्च यः स्याद्दोषगुणैः समः ।
धातुभिर्विगुणश्चापि स्रोतसां स प्रदूषकः ॥२३॥

Food and regimens that promote the morbidity of (aggravate) *dosas* and go contrary to the well-being of *dhatus* (tissue elements) vitiate the channels. [23]

Causative factors in general for the vitiation of all the channels in the body are described here. *Dosas* only when increased in quantity can vitiate others. When reduced in quantity, they are unable to vitiate others; they only manifest such symptoms as are caused by the reduction in their quantity.

Day-sleep and fatty food have attributes identical with those of the fat; still then, the former ones vitiate the latter. Thus the term “*dhātu-bhirvigna*” does not mean that food and regimens should have attributes opposite to those of the *dhātus*, they only should be unwholesome for these *dhātus*.

Signs of the vitiation of channels of circulation :

अतिप्रवृत्तिः सङ्को वा सिराणां ग्रन्थयोऽपि वा ।
विमार्गगमनं चापि स्रोतसां दुष्टिलक्षणम् ॥२४॥

Increase or obstruction of the flow of the contents of the channels, appearance of nodules in the channels and diversion of the flow of the contents to improper channels—these are, in general, the signs (results) of the vitiation of the channels. [24]

One of the symptoms of the vitiation of channels is the diversion of the flow of the contents of one channel to another channel e. g. flow the elements normally composing feces, through urinary track.

Characteristic features of channels of circulation :

रवधातुसमवर्णानि दृत्तस्थूलान्यणूनि च ।
स्रोतांसि दीर्घाख्याकृत्या प्रतानसदशानि च ॥२५॥

These channels have the colour similar to that of the *dhātu* they carry; they are tubular, either large or small in size and either straight or reticulated in shape. [25]

Line of treatment :

शाणोदकाल्यवाहनां दुष्टामां श्वासिकी क्रिया ।
कार्या द्वच्छोपशमनी तथैवामप्रदोषिकी ॥२६॥

चिविधाशितपीतीये रसादीनां यदौषधम् ।
रसादिस्रोतसां कुर्यात्तथास्वसुपक्षमम् ॥२७॥
मूत्रविट्स्वेदवाहानां चिकित्सा मौत्रकृच्छ्रकी ।
तथाऽतिसारिकी कार्या तथा ज्वरचिकित्सकी ॥२८॥

Therapies for the treatment of the vitiation of *prāna*, *udaka* and *annavaha srotāmsi* (channels carrying vital breath, water and food) are the same as those described for the treatment of respiratory disorders (viz. bronchial asthma), morbid thirst and *amadoṣa* (vitiation of the undigested food product) respectively. Therapies prescribed in *Sūtra* 28 : 25-30 for the treatment of conditions caused by the vitiation of tissue elements, viz. *rasa* etc. should be adopted here for the treatment of the condition caused by the vitiation of the respective channels. Therapies prescribed for the treatment *mūtrakṛcchra* (conditions characterized by difficulty in passing urine), diarrhoea and fever should be adopted for the treatment of the diseases caused by the vitiation of *mātra*, *puriṣa* and *sveda vahasrotāmsi* (channels carrying urine, feces and sweat) respectively. [26-28]

तत्र श्लोकाः—

श्रयोदशानां मूलानि स्रोतसां दुष्प्रिलक्षणम् ।
सामान्यं नामपर्यायाः कोपनानि परस्परम् ॥२९॥
दोषहेतुः पृथक्क्वेन भेषजोदेश एव च ।
स्रोतोविमाने निर्दिष्टस्तथा चादौ विनिश्चयः ॥३०॥
केवलं विदितं यस्य शरीरं सर्वभावतः ।
शरीराः सर्वरोगाश्च स कर्मसु न मुह्यति ॥३१॥

To sum up :

Determination of the characteristic features of channels, sites of origin and the general symptoms manifested by the vitiation of the thirteen channels of circulation in the body, names and synonyms of these channels, vitiation of one by the other, causes of vitiation of each channel separately and the treatment in brief all these topics are described in this chapter on the “Determination of the Specific Characteristics of the channels of circulation”.

A physician who is well acquainted with all aspects of the entire body and all the diseases manifested there in will seldom commit mistake in treatment. [29-31]

Only symptoms in general of the vitiation of various types of channels are described in para—8. Specific symptoms due to the vitiation of these channels by *vāta*, *pitta* and *kapha* are not described here as it will be too exhaustive. They are, however, required to be determined by the physician on the basis of the specific attributes of *vāta* etc.

इत्यनिवेशकृते तन्ने चरकप्रतिसंस्कृते
चिमानस्थाने स्रोतोविमानं नाम
पञ्चमोऽध्यायः ॥ ५ ॥

Thus ends the fifth chapter on "Determination of the Specific Characteristics of the Channels of Circulation," of *Vimāna* section of Agniveśa's work as redacted by Caraka. [5]

CHAPTER VI

SPECIFIC CHARACTERISTICS OF DISEASES

षष्ठोऽध्यायः

अथातो रोगानीकं चिमानं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the “Determination of the Specific Characteristics of Diseases” Thus said Lord Atreya [1-2]

In the previous chapter, the internal bodily channels which constitute the sites for the manifestation of diseases have been described. In this chapter, specific characteristics of diseases are being described.

Various types of classification of diseases :

द्वे रोगानीके भवतः प्रभावभेदेन—साध्यम्, असाध्यं च; द्वे रोगानीके बलभेदेन—सूदु, दारुणं च; द्वे रोगानीके अधिष्ठानभेदेन—मनोऽधिष्ठानं, शरीराधिष्ठानं च, द्वे रोगानीके निमित्तभेदेन—स्वधातुवैषम्यनिमित्तम्, आगन्तुनिमित्तं च; द्वे रोगानीके आशयभेदेन—आमाशयसमुत्थ, पकाशयसमुत्थं चेति । एवमेतत् प्रभावबलाधिष्ठाननिमित्ताशयभेदादद्वैधं सद्ग्रहेदप्रकृत्यन्तरेण भिद्यमानमथवाऽपि सन्धीयमानं स्यादेकत्वं बहुत्वं वा । एकत्वं तावदेकमेव रोगानीकं, दुःखसामान्यात्, बहुत्वं तु दश रोगानीकानि प्रभावभेदादिना भवन्ति; बहुत्वमपि संख्येयं स्यादसंख्येयं वा । तत्र संख्येयं तावद्यथोक्तमष्टोदरीये, अपरिसंख्येयं पुनर्यथा—महारोगाध्याये रुग्वर्णसमुत्थानादीनामसंख्येयत्वात् ॥ ३ ॥

Diseases are classified into two groups each on the basis of the five different criteria, as follows :—

<i>Criteria of classification</i>	<i>groupings of diseases</i>
1. Prognosis	1. Curable 2. Incurable
2. Intensity	1. mild 2. severe
3. location	1. mental 2. physical
4. nature of the causative factors	1. endogenous 2. exogenous
5. site of origin	1. having origin from <i>amasyaya</i> (stomach) 2. having origin from <i>pakvāśaya</i> (colon)

Even though diseases are of two groups each according to prognosis, intensity, location, nature of the causative factors and site of origin, still by different permutations and combinations they may be only of one group or of many groups. All diseases may be of one group because manifestation of pain is common for all. They may be of many groups on the basis of their ten-fold classifications according to prognosis etc., described above. Multiplicity of the classification of diseases may be numerable or innumerable. Their numerosity has been described in the 19th chapter of *Sūtrasthāna* and their innumberability on the basis of variations in pain, colour symptoms etc., has been described in the 18th and 20th chapters of that section—cf. *Sūtra* 18 : 42 and *Sūtra* 20 : ३. [3]

All the diseases caused by the aggravation of *kapha* and *pitta* are included under diseases having origin from *āmāsaya* (stomach). Similarly, all diseases caused by the aggravation of *vāta* are included under the groups of diseases having origin from *pakuāsaya* (colon).

Justification for different types of classification :

न च संख्येयाग्रेषु भेदप्रकृत्यन्तरीयेषु विभीतिरित्यतो दोषवती स्यादन्न
कांचित् प्रतिज्ञा, न चाविगीतिरित्यतः स्याददोषवती । भेत्ता हि भेदमन्यथा
भिनन्ति, अन्यथा पुरस्ताद्विन्नं भेदप्रकृत्यन्तरेण भिन्नन् भेदसंख्याविशेषमापाद-
यत्यनेकधा, न च पूर्वं भेदाग्रमुपहन्ति । समानायामपि खलु भेदप्रकृतो प्रकृतानु-
प्रयोगान्तरमपेक्ष्यम् । सन्ति ह्यर्थान्तराणि समानशब्दाभिहितानि, सन्ति चान-
र्थान्तराणि पर्यायशब्दाभिहितानि । समानो हि रोगशब्दो दोषेषु च व्याधिषु
च; दोषा ह्यपि रोगशब्दमातङ्कशब्दं यक्षमशब्दं दोषप्रकृतिशब्दं विकारशब्दं च
लभन्ते, व्याधयश्च रोगशब्दमातङ्कशब्दं यक्षमशब्दं दोषप्रकृतिशब्दं विकारशब्दं
च लभन्ते । तत्र दोषेषु चैव व्याधिषु च रोगशब्दः समानः, शेषेषु तु विशेष-
वान् ॥ ४ ॥

If something, already classified in a particular manner, is reclassified in another way following different criteria, there may be a change in the number of groups, and such a change (as is suggested in the previous paragraph) should not render the statement suggesting such a classification incorrect. On the other hand, if there is no change in the number of groups, this does not necessarily justify the mode of classification. E. G. it is true that diseases are of one group in view of the pain as common factor to all, but if they are considered to be of one group according to prognosis (*prabhava*) also, this will

not be a correct statement inasmuch as diseases are actually of two groups (viz. curable and incurable) on the basis of their prognosis.

An individual has the liberty to classify things as he likes. If something is already classified into some groups in a particular manner, he may reclassify it on the basis of different criteria which may result in changes in the number of groups in different ways. This does not invalidate the number of groups according to some other mode of classification. In some cases the criterion of classification may appear to be the same as the previous one but the specific features of each of these criteria should be observed in deciding about the validity of this classification. The same term may carry different meanings, e. g. the word '*roga*' denotes both the *dosas* as well as diseases. Similarly various terms which are synonymous may denote only one thing, e. g. *roga*, *ataṅka*, *yakṣman*, *doṣaprakṛti* (having polluting nature) and *vikāra* (morbidity)—these terms carry the meaning of or are synonymous with both *doṣa* and *vyādhi* (disease). Thus the term *roga* is synonymous with both the *doṣa* and *vyādhi* (disease). For the rest like *hetu* (etiology) etc., this term, viz. *roga* carries a different meaning. [4]

In para-3 grouping of diseases is explained both as numerable and innumerable. These two terms, viz. numberable and innumerable stand contrary to each other. A reply to the query as to how these two terms having mutually contradictory meanings can be applied to the same thing, i.e. disease, is furnished in this paragraph. If the same criteria are followed for classification, any change in the number of groupings will be incorrect. On the other hand, if the criteria of classification are different, the change in the number of groupings is quite justifiable and this does not involve any contradiction.

Applying each of the criteria of prognosis, intensity, location, nature of the causative factors and the site of origin, *dosas* are of two categories. All these criteria taken together, diseases are of ten categories.

Physical and psychic dosas and their vitiators :

तत्र व्याधयोऽपरिसख्येया भवन्ति, अतिवहुत्वात्; दोषास्तु खलु परिसख्येया भवन्ति, अनतिवहुत्वात्। तस्माद्यथाचित्र विकारानुदाहरणार्थम्, अनवशेषेण च दोषान् व्याख्यास्यामः। रजस्तमश्च मानसौ दोषौ। तयोर्विकाराः कामक्रोधमोहलोभमोहेष्यामानमदशोकचित्तो(न्तो)द्वेगभयहर्षादियः। वातपिल-

श्लेष्माणस्तु खलु शारीरा दोषाः । तेषामपि च विकारा इवरातीसारशोकशोष-
श्वासमेहकुष्ठादयः । इति दोषाः केवला व्याख्याता विकारैकदोषश्च ॥ ५ ॥

तत्र खल्वेषां द्रव्यानामपि दोषाणां त्रिविधं प्रकोपणं, तदथा—असात्म्ये-
न्द्रियार्थसंयोगः, प्रक्षापराधः, परिणामश्चेति ॥ ६ ॥

Because of their highly multitudinous nature, diseases are innumerable. On the other hand, *dosas* are numerable because of their limitation in number. So only some of the diseases will be explained by way of illustrations whereas *dosas* will be explained in their entirety.

Rajas and *tamas* are the *dosas* pertaining to the mind and the types of morbidity caused by them are *kama* (passion), anger, greed, attachment, envy, ego, pride, grief, worry, anxiety, fear, excitement etc. *Vata*, *pitta* and *kapha*-these three are the *dosas* pertaining to the body. Diseases caused by them are fever, diarrhoea, oedema, consumption, dyspnoea, *meha* (obstinate urinary disorder including diabetes), *kuṣṭha* (obstinate skin diseases including leprosy) etc. Thus *dosas* in their entirety and diseases in parts are explained.

Both these types of *dosas* have three types of etiological factors, viz. (1) unwholesome contact with the object of senses, (2) intellectual blasphemy and (3) seasonal vagaries. [5-6]

The term 'roga' may be applicable to both the *dosas* and diseases but there is difference between the latter two, inasmuch as *dosas* are numerable and diseases innumerable. One *doṣa* may be responsible for the causation of many diseases; hence in comparison with diseases, *dosas* are a few in number. As it is impossible to describe all the diseases in view of their innumerability, only such of them will be explained here as are discovered by ancient sages.

Dosas pertaining to mind are given priority in the order of their description because they are comparatively smaller in number.

Factors responsible for manifestation of innumerable diseases :

प्रकुपितास्तु खलु ते प्रकोपणविशेषाद्दूध्यविशेषाच्च विकारविशेषानभि-
निर्वर्तयन्त्यपरिसंख्येयान् ॥ ७ ॥

Depending upon the specific nature of the causative factors and also the specificity of the tissue elements afflicted, *dosas* when aggravated manifest innumerable types of diseases. [7]

Doṣas having limitation to their numer manifest unlimited (innumerable) diseases because of the variations in the causative factors and the tissue elements afflicted by them—cf. *Sūtra* 18-45.

Psycho-somatic diseases :

ते च विकाराः परस्परमनुवर्तमानाः कदाचिदनुबन्धन्ति कामादयोऽच्चरादयश्च ॥८॥

When allowed to persist for long, these psychic diseases, viz. *kāma* (passion) etc., and somatic diseases viz. fever etc., at times get combined with each other. [8]

When psychic or somatic diseases become chronic due to their intensity, they may get combined with each other. Such combinations rarely occur when the disease is manifested only for a short period. A somatic disease may get combined with another psychic disease. Such combination of diseases belonging to one group may also result in the combination with diseases of another group when they allowed to persist for a long time.

Psychic doṣas—their eternal union :

नियतस्त्वनुबन्धो रजस्त्वमसोः परस्पर, न ह्यरजस्कं तमः प्रवर्तते ॥९॥

There is an eternal union between the two *doṣas* pertaining to mind, viz. *rajas* and *tamas*. *Tamas* cannot manifest its actions without *rajas*. [9]

Combination of physical doṣas :

(प्रायः) शारीरदोषाणमेकाधिष्ठानीयानां सञ्ज्ञिपातः संसर्गो वा समानगुणत्वात्; दोषा हि दूषणैः समानाः ॥१०॥

(The three) somatic *doṣas* located in the same place and having identical attributes mostly combine with one another (*samsarga*) or with all taken together (*saṁnipāta*). Attributes of *doṣas* resemble those of the factors which vitiate them (*doṣas*). [10]

When *doṣas* are located in one place, because of their intimate relation, one gets combined with the other. One substance may vitiate many *doṣas*, e. g. substances having sour, saline and pungent tastes vitiate *pitta*; but those of sour taste vitiate *pitta* as well as *kapha*, those of saline taste *Kapha* as well as *pitta* and those of pungent taste vitiate *pitta* as well as *vāta*. Similarly, spring season which normally aggravates *kapha* also aggravates *pitta* and *vāta*, because of its *ādāna* nature (property of absorbing water from the earth). *Pitta* accumulated in the rainy season gets aggravated during the autumn but there is simultaneous aggravation of *kapha* also. Similarly in the summer, due to unctuousness, *vāta* gets aggravated in view of the unctuousness of the season and simultaneously there is slight accumulation of *pitta* due to seasonal heat.

Primary & secondary diseases :

तत्रानुबन्ध्यानुबन्धकृतो विशेषः—स्वतत्रो व्यक्तलिङ्गो यथोक्तसमुत्थान-
प्रशामो भवत्यनुबन्धः, तद्विपरीतलक्षणस्त्वनुबन्धः। अनुबन्धलक्षणसमन्वितास्तत्र यदि दोषा भवन्ति तत्त्रिकं सन्निपातमाचक्षते, द्रव्यं वा संसर्गम्। अनुबन्ध्यानुबन्धविशेषकृतस्तु बहुविधो दोषभेदः। एवमेष संज्ञाप्रकृतो भिषजां दोषेषु व्याधिषु च नानाप्रकृतिविशेषव्ययः॥ ११ ॥

Characteristic features of primary and secondary (sub-ordinate) diseases are as follows :

The primary disease manifests its own symptoms independently; this morbid condition is caused by factors specific to the manifestation of the disease. This can be cured by the therapies prescribed for that particular disease. The subordinate disease is characterized by opposite features. If all the three *dosas* are primarily vitiated at a time, the condition is known as *samnipata*. If only two of the *dosas* are vitiated, it is called *samsarga*. Depending upon the primary and sub-ordinate nature of *dosas*, they are of many types. Considering such characteristic features, physicians attribute various names (like *jvara* or fever) and *alisara* or diarrhoea) to different conditions caused by *dosas* and diseases. [11]

Dosas vitiated during the process of manifestation of a disease may be of primary or sub-ordinate nature. The various factors which vitiate different *dosas* are described in the text. If such factors are responsible for the vitiation of a *dosa*, that particular *dosa* should be treated as of primary nature. This type of *dosa* also gets alleviated by the administration of therapies specifically prescribed for it. Such primary *dosas* manifest their respective diseases when they get aggravated. On the other hand, subordinate *dosas* manifest their respective symptoms only when they are stimulated by the *dosa* of primary nature to do so. In other words, in view of their unmanifested (not well manifested) symptoms, sub-ordinate *dosa*, do not get aggravated by the factors responsible for their aggravation as mentioned in the texts nor do they get alleviated by the therapy prescribed specially for them. They get alleviated only when the therapy prescribed for the other *dosa* of primary nature is administered. That is to say the aggravation and alleviation of subordinate *dosas* are effected by the causative factors and therapies, other than their own. This is because they share the attributes of the *dosa*, of primary nature to some extent. For example, in the autumn season *pitta* is vitiated primarily and *kapha* secondarily due to sour *vipaka*, of water etc. This is because sour taste is responsible for the vitiation of both. For the treatment of primary *dosas*, viz. *pitta*, ghee boiled with bitter drugs is employed; bitter taste, by nature, alleviates the sub-ordinate *dosa*, viz. *kapha*.

also. *Anubandhya* and, *anubandha* are the technical terms for primary and secondary diseases respectively known to scholars adept in the medical science.

Four types of agni :

अग्निषु तु शारीरेणु चतुर्विधो विशेषो बलभेदेन भवति । तद्यथा—
तीक्ष्णो, मन्दः, समो, विषमश्चेति । तत्र तीक्ष्णोऽग्निः सर्वांपचारसहः, तद्विपरी-
तलक्षणस्तु मन्दः, समस्तु खल्वपचारतो विकृतिमापद्यते इनपचारतस्तु प्रकृताव-
वतिष्ठते, समलक्षणविपरीतलक्षणस्तु विषम इति । एते चतुर्विधा भवन्त्यग्नय-
श्चतुर्विधानामेव पुरुषाणाम् । तत्र समवातपित्तश्लेष्माणां प्रकृतिस्थानां समा-
भवन्त्यग्नयः, वातलानां तु वाताभिभूतेऽग्न्यविष्टाने विषमा भवन्त्यग्नयः, पित्त-
लानां तु पित्ताभिभूते ह्यग्न्यविष्टाने तीक्ष्णा भवन्त्यग्नयः, श्लेष्मलानां तु श्लेष्मा-
भिभूतेऽग्न्यविष्टाने मन्दा भवन्त्यग्नयः ॥ १२ ॥

Depending upon their intensity, *agnis* (factors responsible for digestion and metabolism) located in the body of human beings can be classified under four categories, viz. sharp, mild, regular and irregular. The sharp type is capable of tolerating all types of irregularities where-as the mild type is of opposite nature, i.e. even a small irregularity will impair its functioning. The regular or balanced type of *agni* gets impaired even by minor irregularities; it maintains its normalcy so long as there is no irregularity. The irregular type of *agni* is opposed to that of the regular or balanced type, in nature; sometimes it gets impaired and sometimes it does not get impaired by irregularities.

These four types of *agni* occur in the four types of individuals. In individuals having *vata*, *pitta* and *kapha* in their balanced and normal state, the *agnis* are regular or balanced. In the case of individuals having the dominance of *vata* in their constitution, due to the affliction of the site of *agni* by *vata*, their *agnis* are irregular. In the case of individuals having the dominance of *pitta* in their constitution; due to the affliction of the site of *agni* by *pitta*, the *agnis* are sharp. Similarly, in the case of individuals having the dominance of *kapha* in the constitution, the *agnis* are mild due to the affliction of the site of *agni* by *pitta*. [12]

After the description of the classification of *dosas*, *agnis*, which are the *sine qua non* for the maintenance of the body are being described in this paragraph. Use of the term '*Sārīregu*' indicates that *agnis* (factors or enzymes responsible for digestion and metabolism) residing all over

the body are being described here. However, in subsequent elaboration, *agnis* residing in the gastro-intestinal track are described because these *agnis* regulate the aggravation or abatement of all the other *agnis*—cf. *Cikitsā* 15; 39

Agnis belonging to regular or balanced category are the most beneficial for a healthy living; still, *agnis* belonging to the sharp category are given priority in the order of description because of their importance inasmuch as they are capable of tolerating all types of irregularities.

Balanced (*sama*) condition of *vāta*, *pitta* and *kapha* during their natural states and when they are aggravated, accompanies regular or balanced *agnis*.

The term '*prakṛti*' (meaning natural state) has different other meanings as well. Because of these two factors and with a view to specifying the intention, the author has used the term प्रकृतिस्थानं alongwith वातपित्तश्लेष्मराणां।

In the case of an individual having the dominance of *vāta* in his constitution, *agnis* become irregular only when the sites of *agnis* in his body are afflicted by *vāta* and not otherwise. Similar is the explanation for the other changes in the *agnis* in individuals having the dominance of *pitta* and *kapha* in their constitution.

Physical constitution :

तत्र केचिदाहुः—न समवातपित्तश्लेष्माणो जन्तवः सन्ति, विषमाहारो-
पयोगित्वान्मनुष्याणां; तस्माच्च वातप्रकृतयः केचित्, केचित् पित्तप्रकृतयः, केचित्
पुनः श्लेष्मप्रकृतयो भवन्तीति । तच्चानुपपन्नं, कस्मात् कारणात्? समवातपित्त-
श्लेष्माण ह्यरोगमिच्छन्ति भिषजः, यतः प्रकृतिश्चारोग्यम्, आरोग्यार्था च भेषज-
प्रवृत्तिः, सा चेष्टूरपा, तस्मात् सन्ति समवातपित्तश्लेष्माणः, न खलु सन्ति
वातप्रकृतयः पित्तप्रकृतयः श्लेष्मप्रकृतयो वा । तस्य तस्य किल दोषस्याधिकात्
सा सा दोषप्रकृतिरूच्यते मनुष्याणां, न च विकृतेषु दोषेषु प्रकृतिस्थित्वमुपद्यते,
तस्मान्नैताः प्रकृतयः सन्ति; सन्ति तु खलु वातलाः पित्तलाः श्लेष्मलाश्च, अप्रकृ-
तिस्थास्तु ते श्वेयाः ॥ १३ ॥

Some scholars hold the view that living beings cannot have a balanced state of *vāta*, *pitta* and *kapha* in their body because they are accustomed to the intake of diets which are seldom balanced. Therefore, according to them some individuals have *vāta prakṛti* (*vātika* constitution), some have *pitta prakṛti* (*paitika* constitution) and the rest have *kapha prakṛti* (*ślaiṣmika* constitution). This is not correct because physicians take an individual to be healthy only when *vāta*, *pitta* and *kapha* in his body are in a state of equilibrium and health represents the natural state of the body. It is with a view to maintaining good health that all types of treatments are

prescribed. That state of the body is the most cherished one. Therefore, there are individuals having the balanced state of *vāta*, *pitta* and *kapha* in their body.

The use of terms like *vātaprakṛti*, *pittaprakṛti* and *kaphaprakṛti* is not correct because in these types of constitution, there is always a dominance of *doṣas* in the bodies of individuals. *Prakṛti* means a normal or natural state and there should not be any dominance of *doṣas* in the bodies of such individuals. So such individuals as are having the dominance of one or the other of the *doṣas* cannot be described to have the normal states of their body. Thus to use the correct term, they are *vātalā* (having the dominance of *vāta*), *pittalā* (having the dominance of *pitta*) and *ślesmala* (having the dominance of *kapha*), and these do not indicate the normal states of their body. [13]

People do not take their food by measuring each component by a weighing machine. This, according to a section of scholars, leads to the aggravation of *doṣas* invariably in each and every individual, i.e. one cannot have a perfect equilibrium of *doṣas* in his body. This view has been refuted by the author in the above paragraph.

According to the established theory of the science of medicine (*ayurveda*) the state of health represents the equilibrium of *doṣas*, viz. *vāta*, *pitta* and *kapha* in the body of the living beings and even a slight variation in this state of equilibrium does not produce any disease. Hence, for all practical purposes this state of health (absence of disease) should be taken as a state of equilibrium of *doṣas*, inspite of their minor imbalance. Some other scholars hold the view that even this minor imbalance does not exist in the body with the *doṣas* balanced as there is no manifestation of disease in this condition.

Management of persons having different types of physical constitution :

तेषां तु खलु चतुर्विधानां पुरुषाणां चत्वार्यनुप्रणिधानानि श्रेयस्कराणि
भवन्ति । तत्र समसर्वधातूनां सर्वाकारसमयम्, अधिकदोषाणां तु त्रयाणां यथासर्वं
दोषाधिक्यमभिसमीक्ष्य दोषप्रतिकूलयोगीनि त्रीण्यनु(न)प्रणिधानानि श्रेयस्क-
राणि भवन्ति यावदग्नेः समीभावात्, समे तु सममेव कार्यम्; एवं चेष्टा भेषज-
प्रयोगाश्चापरे । तान् विस्तरेणानुव्याख्यास्यामः ॥ १४ ॥

Four types of regimens are prescribed for the benefit of these four categories of individuals. For an individual having the balanced state of all *doṣas*, all the regimens to be adopted by him should be of balanced type. When there is predominance of *doṣas*, depending upon the nature of the

dosas involved, it is useful to adopt such regimens as would be in contradiction with these three predominating *dosas* till there is normalcy of *agni*. It is only after the normalcy of the *agni* is attained, balanced regimens should be adopted. Similarly, various therapies and other regimens should be administered to these four categories of individuals. We shall now explain them in detail. [14]

Characteristics of vātala constitution and its management :

त्रयस्तु पुरुषा भवन्त्यातुराः, ते त्वनातुरास्तचान्तरीयाणां भिषजाम् ।
तद्यथा—वातलः, पित्तलः, श्लेष्मलश्चेति । तेषामिदं विशेषविज्ञानं—वातलस्य
वातनिमित्तः, पित्तलस्य पित्तनिमित्ताः, श्लेष्मलस्य श्लेष्मनिमित्ता व्याधयः प्रायेण
बलवन्तश्च भवन्ति ॥ १५ ॥

तत्र वातलस्य वातप्रकोपणान्यासेवमानस्य क्षिप्रं वातः प्रकोपमापद्यते,
न तथेतरौ दोषौ; स तस्य ब्रह्मकोपमापन्नो यथोक्तैर्विकारैः शरीरमुपतपति बलव-
र्णसुखायुषामुपग्राहाय । तस्यावज्यनं—स्नेहस्वेदौ विधियुक्तौ, मृदुनि च संशो-
धनानि स्नेहोष्णमधुराम्ललवणयुक्तानि, तद्वदभ्यवहार्याणि, अभ्यङ्गोपनाहनोद्वे-
ष्टुनोन्मर्दनपरिषेकावगाहनसंवाहनावपीडनवित्रासनविस्मापनविस्मारणानि, सु-
रासवविधानं, स्नेहाश्वानेकयोनयो दीपनीयपात्रनीयवातहरविरेचनीयोपहिता-
स्तथा शतपाकाः सहस्रपाकाः सर्वशङ्खं प्रयोगार्थाः, वस्तयः, बस्तिनियमः
सुखशीलता चेति ॥ १६ ॥

Vatala (dominance of *vata*), *pittala* (dominance of *pitta*) and *ślēṣmala* (dominance of *kapha*)—these three are the morbid states in individuals, even though, according to another school of thought they represent the natural states of the body. Their characteristic features are as given below :—*Vatala*, *pittala*, and *ślēṣmala* types of individuals are more susceptible to *vataika*, *paittika* and *ślaiṣmika* diseases respectively and such diseases in the respective types of individuals become very severe.

If a *vatala* type of individual resorts to such thing as are aggravators of *vata*, *vata* in his body gets aggravated immediately. This does not happen in the case of the remaining two *dosas*. The aggravated *vata* afflicts individuals by the manifestation of diseases already described, resulting in the impairment of strength, complexion, happiness and longevity. The following therapies alleviate this *dosa* :

1. Proper administration of oleation and fomentation;

2. mild purgative prepared by the addition of fat, hot things and substances having sweet, sour and saline tastes;
3. food having the ingredients of the above mentioned properties.
4. massage, poultices, bandage, kneading, affusion, bath, *samvāhana* (pressing and massaging by hand), pressing, terrorising, surprising and dememorising.
5. use of wine and *asavas* (fermented drinks)
6. fats from different sources mixed with drugs having digestive, stimulant, carminative, *vāta*-alleviating and purgative properties—they may be boiled hundred and thousand times and be used for being administered in different ways, viz. internal use, massage, enemata etc., and
7. enemata and regimens to be adopted alongwith it, the number of enemata may be according to the description available in *Siddhi* section for *karmabasti*, *kālabasti*, *yogabasti* etc., – cf. *Siddhi* 1 : 47. [15-16]

In a *vātala* individual, *vāta* gets immediately aggravated when *vāta*-aggravating things are used. If such an individual takes things which aggravate *pitta* or *kapha*, then *pitta* and *kapha* do not get so vitiated as it happens in the case of *vāta*.

Terrorisation etc., aggravate *vāta* but such therapies are also prescribed for the treatment of insanity caused by *vāta*. These therapies bring about normalcy in the disturbed mind of the individual; cf. *Cikitsa* 9 : 84.

Characteristics of pittala constitution and its management :

पित्तलस्यापि पित्तप्रकोपणान्यासेवमानस्य क्षिप्रं पित्तं प्रकोपमापद्यते, त तथेतरौ दोषौ; तदस्य प्रकोपमापद्यं यथोक्तैर्विकारैः शरीरमुपतपति बलवर्ण-सुखावृषामुपधाताय। तस्यावजयनं—सर्पिष्णानं, सर्पिषा च स्नेहनम्, अथश्च दोषहरणं, मधुरतिक्कपायशीतानां चोपधाय्यव्यार्थाणामुपयोगः, मृदुमधुरसुरभिशीतहृद्यानां गन्धानां चोपसेवा, मुक्तामणिहारावलीनां च परमशिशिरवारिसंस्थितानां धारणमुरसा, क्षणे क्षणे उग्न्यचन्दनप्रियङ्गुकालीयमृणालशीतवातवारिभिरुपलकुमुदकोकनदसौगन्धिकपद्मानुगतैश्च वारिभिरभिप्रोक्षणं, श्रुतिसुख-मृदुमधुरमनोऽनुगानां च गीतवादित्राणां श्रवणं, श्रवणं चाभ्युदयानां, सुहङ्गिः संयोगः, संयोगश्चेष्टाभिः खीभिः शीतोपहितांशुकस्त्रघारिणीभिः, निशाकरांशुशीतलप्रवातहर्म्यवासः, शैलान्तरपुलिनशिशिरसदनवसनव्यजनपवनसेवनं, रस्याणां चोपदानानां सुखशिशिरसुरभिमारुतोपष्ठितानामुपसेवनं, सेवनं च पश्चोत्पल-

नलिनकुमुदसौगन्धिकपुण्डरीकशतपत्रहस्तानां, सौम्यानां च सर्वभावानामिति ॥ १७ ॥

If a *pittala* individual resorts to such things as are aggravators of *pitta*, *pitta* in his body gets aggravated immediately. This does not happen in the case of the remaining two *dosas*. The aggravated *pitta* afflicts the individual by the manifestation of diseases already described resulting in the impairment of strength, complexion, happiness and longevity. The following therapies alleviate this *dosa* :

1. intake of ghee;
2. oleation by ghee;
3. purgation;
4. use of drugs and diets having sweet, bitter and astringent tastes; and cooling property;
5. use of scents which are mild, sweet, fragrant, cooling and cordial;
6. use in the chest of pearls, jewels and garlands which are kept in excessively cold water;
7. frequent sprinkling of cold water and cold air of *agryacandana* (*Santalum album* Linn.), *priyanu* (*Callicarpa macrophylla* Vahl.), *kaliya* (yellow variety of *candana*) and *mṛgata* (lotus stalk) mixed with *utpala* (*Nymphaea alba* Linn.), *kumuda* (a variety of *utpala*) *kokanada* (?), *sugandhika* (a variety of *utpala*) and *padma* (*Nelumbo nucifera* Gaertn.);
8. hearing of songs and music which are pleasing to ears, mild, sweet and agreeable;
9. hearing the information regarding prosperity;
10. keeping company of friends;
11. company of agreeable ladies wearing cooling garments and garlands;
12. residence in buildings which is cooled by the moon-rays and exposed to the breezes from all sides;
13. residence in cold places in mountains and river banks, use of cold apparel and exposure to the cold winds of fans;
14. visiting beautiful gardens having pleasing, cold and fragrant wind;

15. use of the flower of *padma* (*Nelumbo nucifera* Gaertn.), *utpalā* (*Nymphaea alba* Linn.), *nalina* (a type of lotus), *Kumuda* (a variety of *utpalā*), *saugandhika* (a variety of *utpalā*), *puṇḍarīka* (*Nymphaea lotus* Linn.) and *śatapatra* (a variety of lotus); and
16. adoption of such other regimens as are of soothing nature. [17]

Characteristics of ślesmala constitution and its management :

श्लेष्मलस्यापि श्लेष्मप्रकोपणान्यासेवमानस्य क्षिप्रं श्लेष्मा प्रकोपमापद्धते, न तथेतरौ दोषौ; स तस्य प्रकोपमापन्नो यथोक्तविकारैः शरीरमुपतपति बलवर्णं-सुखायुषामुग्धाताय। तस्यावजयनं-विधियुक्तानि तीक्ष्णोष्णानि संशोधनानि, रूक्षप्रायाणि चाभ्यवहार्याणि कटुकतिक्कषायोपहितानि, तथैव धावनलङ्घन-म्लवनपरिसरणजागरणनियुद्धव्यवायव्यायामोन्मदनस्त्रानोत्सादनानि, विशेषतस्तीक्ष्णानां दीर्घकालस्थितानां च मद्यानामुपयोगः, सधूमपानः सर्वशश्वीपवासः, तथोष्णं वासः, सुखप्रतिषेधश्च सुखार्थमेवेति ॥ १८ ॥

If a *ślesmala* type of individual resorts to such things as are aggravators of *kapha*, then *kapha* in his body gets aggravated immediately; this does not so happen in the case of the remaining two *dosas*. The aggravated *kapha* afflicts the individual by the manifestation of diseases already described, resulting in the impairment of strength, complexion, happiness and longevity. The following therapies alleviate this *dosha* :

1. proper administration of strong and hot elimination therapies;
2. intake of diet which is mostly ununctuous and is composed of ingredients having pungent, bitter and astringent tastes;
3. running, jumping, swimming, whirling, keeping awake during night, fighting, sexual intercourse, exercise, unction, bath and oil massage;
4. intake of strong wines preserved for a long time;
5. all lightening therapies alongwith smoking;
6. use of warm apparel; and
7. giving up comforts of life with a view to enjoying happiness ultimately. [18]

For alleviation of *kapha*, diets mostly ununctuous in nature are prescribed in the above paragraph. Such diets should not however be

completely ununctuous. Because in that case there will be aggravation of *vāta* and the supply of nourishment to *dhātus* will be impaired.—cf. *Vimāna* 1 : 25. Different types of lightening therapies are described in *Sūtra* 22 : 18.

When the individual gives up comforts of his life, there will be the alleviation of the vitiated *kapha* in his body which in its turn brings happiness.

भवति चात्र—

सर्वरोगविशेषज्ञः सर्वकर्यविशेषवित् ।
सर्वभेषजतत्त्वज्ञो राज्ञः प्राणपतिर्भवेदिति ॥ १९ ॥

Thus it is said :—

A man well versed with the specific features of all diseases, principles of their treatment and properties of all medicaments, is entitled to be a royal physician. [19]

तत्र श्लोकाः—

प्रकृत्यन्तरभेदेन रोगानीकविकल्पनम् ।
परस्पराविरोधश्च सामान्यं रोगदोषयोः ॥ २० ॥
दोषसंख्या विकाराणामेकदेशः प्रकोपणम् ।
जरणं प्रति चिन्ता च कायाग्नेर्धुक्षणानि च ॥ २१ ॥
नरणां वातलादीनां प्रकृतिस्थापनानि च ।
रोगानीके विमानेऽस्मिन् व्याहृतानि महर्षिणा ॥ २२ ॥

To sum up :—

Various categories of diseases classified on the basis of different criteria, absence of any contradiction in these statements, identical nature of *roga* (diseases) and *dosa*, number of *dosas*, partial description of diseases, factors responsible for the aggravation of *dosas*, digestive powers of different types, maintenance of the normalcy of the power of digestion, therapies for the maintenance of the health of various types of individuals, viz. *vātala* etc.—all these topics have been described in this Chapter on “the Determination of Specific Characteristics of Diseases”. [20]

इत्यग्निवेशाङ्कुते तन्त्रे चरकप्रतिसंस्कृते विमानस्थाने
रोगानीकविमानं नाम षष्ठोऽच्यायः ॥ ६ ॥

Thus ends the sixth chapter on “the Determination of Specific Characteristics of Diseases” of the *Vimāna* section of Agniveśa’s work as redacted by Caraka. [6]

CHAPTER VII SPECIFIC CHARACTERISTICS OF PATIENTS

सप्तमोऽध्यायः

अथातो व्याधितरूपीयं विमानं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानत्रेयः ॥ २ ॥

We shall now expound the Chapter on the “Determination of the Specific Characteristics of Different Types of Patients.”

Thus said Lord Atreya. [1-2]

In the previous chapter, the various processes for the determination of specific characteristics of diseases have been described. The present chapter deals with the determination of the specific characteristics of different types of patients so as to facilitate their treatment. In this context, the specific characteristics of different types of parasites are also described.

Patients of two types of diseases :

इह खलु द्वौ पुरुषो व्याधितरूपौ भवतः-गुरुव्याधितः, लघुव्याधितश्च ।
तत्र-गुरुव्याधित एकः सत्त्ववलशरीरसंपुर्णेतत्वात्प्रभुव्याधित इव दृश्यते, लघु-
व्याधितोऽपरः सत्त्वादीनामधमत्वाद् गुरुव्याधित इव दृश्यते । तयोरकुशलाः
केवलं चक्षुषैव रूपं दृष्ट्वा व्यवस्थन्ते व्याधिगुरुलाघवे विप्रतिपद्यन्ते ॥ ३ ॥

Individuals suffering from diseases can be classified into two groups, viz. (i) those suffering from serious diseases and (ii) those suffering from mild diseases. The patient suffering from a serious disease may appear to be suffering from a mild one because of the excellence of his mental strength and physical constitution. The other group of patients having mild diseases may appear to be suffering from serious ones because of the impaired mental strength and physical constitution.

Unskilled physicians, who make efforts to diagnose a disease only by the visual examination of the patient commit mistakes in determining the seriousness or mildness of the condition. [3]

Unskilled physicians are unable to examine the exact nature of a disease. They examine a patient simply by the employment of their sensory organs, viz. sight, touch etc., which provides only a superficial knowledge of the disease inasmuch as the exact nature, i.e. the seriousness or mildness of a complicated case cannot be detected by such method.

Need for careful examination :

नहि ज्ञानावयवेन कुत्से ज्ञेये विज्ञानमुत्पद्यते । विप्रतिपद्मास्तु खलु रोग-ज्ञाने उपक्रमयुक्तिज्ञाने चापि विप्रतिपद्यन्ते । ते यदा गुरुव्याधितं लघुव्याधितरूपमासाद्यन्ति, तदा तमल्पदोषं मत्वा संशोधनकालेऽस्मै मृदु संशोधनं प्रयच्छन्तो भूय पवास्य दोषानुदीरयन्ति । यदा तु लघुव्याधितं गुरुव्याधितरूपमासाद्यन्ति, तदा तं महादोषं मत्वा संशोधनकालेऽस्मै तीक्ष्णं संशोधनं प्रयच्छन्तो दोषानतिनिर्व्वन्य शरीरमस्य क्षिण्यन्ति । एवमवयवेन ज्ञानस्य कुत्से ज्ञेये ज्ञानमभिमन्यमानाः परिस्खलन्ति । विदितवेदितव्यास्तु भिषजः सर्वं सर्वथा यथासंभवं परीक्ष्य परीक्ष्याध्यवस्थ्यन्तो न क्वचिदपि विप्रतिपद्यन्ते, यथेष्टुर्धमभिनिर्वर्तयन्ति चेति ॥ ४ ॥

One cannot perceive a thing in its entirety by the knowledge only of a part of it. In the absence of the correct knowledge of the disease, one commits mistakes in deciding upon the rationale of the line of treatment to be adopted for its cure. When they mistake a patient suffering from a serious disease for the one suffering from a mild disease and under the impression that the quantum of vitiation of *dosa*(s) in his body is low, administer elimination therapies which are of mild nature this results in further aggravation of *dosas* in his body. On the other hand, when a patient suffering from a disease of mild nature is by mistake diagnosed as suffering from a serious disease and under the impression that the quantum of vitiation of *dosas* in his body is high, if strong elimination therapies are administered, then this results in the elimination of *dosas* in excessive quantity and emaciation of the body of the patient. Such mistakes are committed by those who want to perceive a thing in its entirety by having only a partial knowledge of it.

Physicians who know the thing (disease) in its entirety and diagnose it by examining all its aspects as far as possible, seldom err in deciding about the seriousness or mildness of the disease and achieve the desired result, (i. e. cure of the disease). [4]

भविन्त चात्र—

सत्त्वादीनां विकल्पेन व्याधिरूपमथातुरे ।
द्वृष्टा विप्रतिपद्यन्ते बाला व्याधिबलावले ॥ ५ ॥
ते भेषजमयोगेन कुर्वन्त्यज्ञानमोहिताः ।
व्याधितानां विनाशाय क्लेशाय महतेऽपि वा ॥ ६ ॥

प्राज्ञास्तु सर्वमाज्ञाय परीक्ष्यमिह सर्वथा ।
न स्वलन्ति प्रयोगेषु भेषजानां कदाचन ॥ ७ ॥

Thus it is said :—

Because of the variation in the nature of mental faculties etc., while examining a patient only from the symptoms of his disease, ignorant physicians commit mistakes in deciding upon the seriousness or mildness of the disease. Under such misconceptions, they administer wrong therapies to patients which result in the aggravation of the disease or the death of the patient.

Physicians well versed in the science, ascertain all aspects of the disease and examine it by employing all the methods; they seldom err in administering correct therapies. [5-7]

Agniveśa's query about parasites :

इति व्याधितरुपाधिकारे व्याधितरुपसंस्थाग्रसंभवं व्याधितरुपहेतुविप्रतिपत्तौ कारणं सापवादं संप्रतिपत्तिकारणं चानपवादं निशम्य, भगवन्तमात्रेयमश्चिवेशोऽतः परं सर्वक्रिमीणां पुरुषसंश्रयाणां समुत्थानस्थानसंस्थानवर्णनामप्रभावचिकित्सितविशेषान् प्रच्छोपसंगृह्य पादौ ॥ ८ ॥

Thus, the classification of patients, cause of incorrect diagnosis alongwith its evil consequences, factors responsible for correct diagnosis and good results born out of it—these topics are described in the context of the description of the specific characteristics of different types of patients. Having listened to all this, Agniveśa fell at the feet of Lord Atreya and enquired about the specific cause, habitat, form, colour, name, effect and treatment of all parasites inhabiting human body. [8]

Seriousness or mildness of a disease in a patient is difficult to determine. Similarly determination of various aspects of parasites is also difficult. In view of this similarity in these two types of problems, various aspects of parasites are also being described in this chapter after the description of the specific characteristics of different types of patients.

Four groups of parasites :

अथास्मै प्रोवाच भगवानात्रेयः—इह खल्वश्चिवेश ! विशतिविधाः क्रिमयः पूर्वमुद्दिष्टा नानाविधेन प्रविभागेनान्यत्र सहजेभ्यः; ते पुनः प्रकृतिभिर्विभज्यमानाभतुविधा भवन्ति; तदथा—पुरीषजाः, स्लेष्मजाः, शोणितजाः, मलजाश्वेति ॥ ९ ॥

Lord Ātreya replied to Agniveśa, "There are twenty types of pathogenic parasites excluding the normal ones (saprophytes) which are earlier described alongwith their various classifications only in brief. On the basis of their source, they are again classified into four groups, viz. *pniṣaja* (born of feces), *śleṣmaja* (born of phlegm) *śoṇitaja* (born of blood) and *malaja* (born of external excreta). [9]

In *Sūtra* 19 : 4, only the names of parasites have been described. In addition to these twenty types of parasites, some other organisms also normally inhabit the body and unlike parasites they do not cause any morbidity.

(i) *Parasites of external excreta* :

तत्र मलो बाह्यश्वाभ्यन्तरश्च । तत्र बाह्यमलजातान् मलजान् संचक्षमहे ।
तेषां समुत्थानं-मृजावर्जनं; स्थानं—केशश्मथ्रुलोमपश्मवासांसि; संस्थानम्—अण-
वस्तिलाकृतयो बहुपादाश्च; वर्णः—कृष्णः, शुक्लश्च; नामानि—यूकाः, पिपीलिकाश्च;
ग्रभावः—कण्डूजननं, कोठपिडकामिनिर्वर्तनं च; चिकित्सितं तु खल्वेषामपकर्षणं,
मलोपयातः, मलकरणां च भावानामनुपसेवनमिति ॥ १० ॥

Excreta are of two types—external and internal. Under the group *malaja*, only the parasites, born of external excreta are being described here. Their specific characteristics are as below :—

Cause : Lack of cleanliness of the body;

Habitat : hair on the head, face and other parts of the body, eye lashes and apparel;

form : minute, multipede and having the shape of that of a grain of *tila* (*Sesamum indicum* Linn.)

Colour : black and white;

Names : *Yūkā* and *Pippilikā*

Effects : itching, production of urticaria and pimples;

Treatment: removal of these parasites, keeping the body clean and avoidance of such regimens which produce the excreta. [10]

Pippilikā type of parasite is known as 'Liksā' in some places. Names of parasites are described here according as they are used in this science and also in different regions.

(ii) *Parasites of blood* :

शोणितजानां तु खलु कुष्ठैः समानं समुत्थानं; स्थानं—रक्तवाहिन्यो धमन्यः;
संस्थानम्—अणवो वृत्ताश्वापादाश्च, सूक्ष्मत्वाच्चैके भवन्त्यदृश्याः; वर्णः—ताम्रः;

नामानि-केशादा, लोमादा, लोमद्वीपाः, सौरसा, औडुम्बरा, जन्तुमातरश्चेति, प्रभावः केशस्मथ्रुनखलोमपक्षमापच्चंसः; व्रगगतानां च हृष्टकण्ठौदसंसर्पणानि, अतिवृद्धानां च त्वक्किसरास्त्रायुमांसतस्त्रणस्थिभक्षणमिति; चिकित्सितमप्येषां कुष्टैः समानं, तदुत्तरकालमुपदेश्यामः ॥ ११ ॥

Specific characteristics of blood-born parasites are as below :—

- ✓ Cause : the same as for *kustha* (obstinate skin diseases including leprosy);
- ✓ Habitat : blood-vessels;
- Form : minute, round and having no pedicle. Because of minuteness some of them are not visible (to the naked eye);
- Colour : coppery :
- Names : Keśāda (lit. which eat away hair of the head), Lomāda (Lit. which eat-away the small hair of the body), Lomadvīpā, Saurasā, Audumbarā and Jantumātṛṇ.
- Effects : destruction of the hair from the head, face, other parts of the body, eye-lashes and nails.

When a wound is infested with these parasites; then hyperesthesia, itching, pain and creeping sensation in the ulcerated area are caused; when excessively grown they eat away the skin, vessels, ligaments, muscles tissue and cartilages; Treatment : Same as that of *kustha* (obstinate skin diseases including leprosy) which will be described later in the 7th chapter of *Cikitsāsthana*, [11]

(iii) Parasites of Ślesman :

श्लेष्मजाः क्षीरगुडतिलमत्स्यानूपमांसपिण्डान्नपरमान्नकुसुमस्त्रेहाजीर्णपूति-
क्लिन्नसंकीर्णविरुद्धासात्मयभोजनसमुत्थानाः; तेषामामाशयः स्थानं, ते प्रवर्धमाना स्तूर्चर्मधो वा विसर्पन्त्यभयतो वा; संस्थानवर्णपिण्डेषास्तु—श्वेताः पृथुब्रह्मसं-
स्थानाः केचित्, केचिद्वृत्तपरिणाहा गण्डूपदाकृतयः श्वेतास्ताप्रावभासाश्च,
केचिदण्वो दीर्घस्तन्त्वाकृतयः श्वेताः; तेषां त्रिविधानां श्लेष्मनिमित्तानां क्रिमीणां नामानि-अन्नादाः, उदरादाः, हृदयचराः, चुरवः, दर्भपुष्पाः, सौगन्धिकाः, महागुदाश्चेति; प्रभावो-हृज्ञासः, आस्यसस्त्रवणम्, अरोचकाविपाकौ, ज्वरः, मूळ्डा, जू़म्भा, क्षवथुः, आनाहः, अङ्गमर्दः, छर्दिः, काश्यं, पारुष्यं, चेति ॥ १२ ॥

Specific characteristics of phlegm-born parasites are as below :—

- Cause : intake of milk, sugar-candy, *tila* (*Sesamum indicum* Linn.), fish, meat of animals inhabiting marshy land, pastries, milk preparations and oil of *kusumbha* (*Carthamus tinctorius* Linn.) uncooked, putrified and softened food, food mixed with despisable articles like feces, food having mutually contradictory properties and unwholesome food.
- Habitat : *āmāśaya* or stomach; when excessively grown, they move upwards, or to both the sides.
- Form and colour : some are big and flat (tape like) in shape and white in colour; some are round, in shape like earth worm and white in colour with a coppery tinge; some are minute and long in shape like a thread and white in colour.
- Names : *Antrādā* (lit. which eats-away the intestine), *Udarādā* (lit. which eat-away the abdomen), *Hṛdayacarā* (lit. which move in the heart), *Gurū*, *Darbhapuspā* (lit. which is like the flower of *darbha* grass or *Desmostachya bipinnata* Stapf.), *Saugandhika*, *Mahāguda* (lit. having a big anus).
- Effects : Nausea, salivation, anorexia, indigestion, fever, fainting, yawning, sneezing, constipation, malaise, vomiting, emaciation and dryness of the body. [12]

(iv) *Parasites of feces :*

पुरीषजास्तुल्यसमुत्थानाः श्लेष्मजैः; तेषां स्थानं पक्षाशयः; ते प्रवर्धमाना-स्वघो विसर्पन्ति, यस्य पुनरामाशयाभिमुखाः स्युर्यदन्तरं तदन्तरं तस्योद्धार-निश्वासाः पुरीषगन्धिनः स्युः; संस्थानवर्णविशेषास्तु-सूक्ष्मवृत्तपरीणाहाः श्वेता दीर्घा ऊर्णीशुसकाशाः केचित्, केचित् पुनः स्थूलवृत्तपरीणाहाः श्यावनीलहरित-पीताः; तेषां नामानि ककेरुकाः, मकेरुकाः, लैलिहाः, सशूलकाः, सौसुरादा-श्वेति; प्रभावः—पुरीषमेदः, कार्यं, पारुष्यं, लोमहर्षीभिन्निर्वर्तनं च, त एव चास्य गुदमुखं परितुदन्तः कण्डुं चोपजनयन्ते गुदमुखं पर्यासते, त एव जातहर्षी गुदनिष्कमणमतिवेलं कुर्वन्ति; इत्येष श्लेष्मजानां पुरीषजानां च क्रिमीणां समु-थानादिविशेषः ॥ १३ ॥

Specific characteristics of feces-born parasites are as below :—

- Cause : the same as for phlegm-born parasites;
- Habitat : *pakvāśaya* or colon; when excessively grown they move downwards; when they move towards *āmāśaya* or stomach, then the eructation and breath of the patient produce fecal odour;

Form and colour : some of them are minute, cylindrical and long, they appear like the fibres of wool and they are white in colour; some others are thick, cylindrical, and their colours are gray, blue, green or yellow.

Names : Kakeruka, Makeruka, Lelihā, Saśūlakā (lit. which cause colic pain) and Sausurādā.

Effects : diarrhoea, emaciation, dryness and horripilation; they inhabit the oral region and cause irritation and itching there; when excited they frequently come out of the anus.

Thus the cause etc., of parasites born of phlegm and feces as described. [13]

Line of treatment :

चिकित्सितं तु खल्वेषां समासेनोपदिश्य पश्चाद्विस्तरेणोपदेश्यामः । तत्र सर्वक्रीमीणामपकर्षणमेवादितः कार्यं, ततः प्रकृतिविधातः, अनन्तरं निदानोक्तानां भावानामनुपसेवनमिति ॥ १४ ॥

We shall now describe their treatment in brief and later on in greater details. All parasites should first of all be extracted; there after, factors responsible for the production of these parasites, viz. phlegm etc., should be counteracted and as the third principle of their treatment, factors which cause such parasites should be avoided. [14]

तत्रापकर्षणं—हस्तेनाभिगृह्य विमृश्योपकरणवताऽपनयनमनुपकरणेन वा; स्थानगतानां तु क्रीमीणां भेषजेनापकर्षणं न्यायतः, तच्चतुर्विधं, तद्यथा—शिरो-विरेचनं, घमनं, विरेचनम्, आस्थापनं च; इत्यपकर्षणविधिः । प्रकृतिविधात-स्वेषां कदुतिक्तकषायक्षारोणानां द्रव्याणामुपयोगः, यच्चान्यदपि किञ्चिच्छलेष्म-पुरीषप्रत्यनीकभूतं त । स्यात्; इति प्रकृतिविधातः । अनन्तरं निदानोक्तानां भावानामनुपसेवनं—यदुक्तं निदानविधौ तस्य विवर्जनं तथाप्रायाणां चापरेषां द्रव्याणाम् । इति लक्षणतश्चिकित्सितमनुव्याख्यातम् । एतदेव पुनर्विस्तरेणोपदेश्यते ॥ १५ ॥

Procedure to be followed for their extraction is as below :—

Paying due consideration to all aspects, parasites may be extracted by hand with or without the help of instruments (forceps etc.). Parasites residing inside the body can be extracted by the administration of appropriate therapies which are of four types, viz. *śirovirecana* (errhines), vomiting,

purgation and *asthāpana* (corrective) type of enema. This in brief, is about the extraction of parasites.

For counter-acting the factors responsible for the production of parasites, drugs and diets which are pungent, bitter and astringent in taste and hot in nature are to be used along with other drugs having properties contrary to phlegm and feces. This in brief is about the method for counter-acting the factors responsible for the production of parasites.

Thereafter, factors which produce these parasites and similar other substances are to be avoided. This, in brief, is the treatment of different types of parasites. The same will be described in detail. [15]

Preparatory treatment :

अथेनं क्रिमिकोष्टमातुरमग्रे पद्मात्रं सप्तरात्रं वा स्नेहस्वेदाभ्यासुपणादै श्वो-
भूते एवं संशोधनं पाययिताऽस्मीति क्षीरगुडदधितिलमत्स्यानूपमांसपिष्ठान्नपर-
मात्रकुसुमस्नेहसंप्रयुक्तैर्मार्ज्यैः सायं प्रातश्चोपपादयेत् समुदोरणार्थं क्रिमीणां
कोष्टाभिसरणार्थं च भिषक् । अथ व्युष्टायां रात्र्या सुखोवितं सुप्रजीर्णभक्तं च
विश्वायास्थापनवमनविरेचनैस्तदहरेवोपपादयेदुपपादनीयश्चेत् स्यात् सर्वान् परी-
क्ष्यविशेषान् परीक्ष्य सम्यक् ॥ १६ ॥

The patient afflicted with parasites in his body should be given oleation and fomentation therapies for six to seven nights (days). Next day (one day before the administration of elimination therapy) during morning and evening meals he should be given food consisting of milk, sugar candy, curd, *tila* (*Sesamum indicum Linn.*), fish, meat of animals inhabiting marshy land, pastry, milk preparation and oil of *kusumbha* (*Carthamus tinctorius Linn.*) with a view to arousing the parasites and impelling them to migrate to the alimentary tract. If the patient passes the night comfortably and the food taken by him in the previous day is fully digested, he should be given *asthāpana* (corrective) type of enema, emesis and purgation therapies—all on the same day, provided the patient, after proper examination, is found fit for all these therapies.

[16]

When the patient is given food consisting of milk, sugarcandy etc., then parasites from all over the body will migrate to the alimentary tract in order to eat this type of food which is relished by them. In view of the specific nature of the disease the patient is to be given *asthāpana* (corrective) type of enema, emesis and purgation—all on the same day.

All these therapies are to be administered only when the patient has excellent physical strength etc.

Elimination therapy asthāpana :

अथाहरेति ब्रूयात्—मूलकसर्षपलगुनकरञ्जियुमधुशिग्रुखरपुष्पाभूस्तृण-
सुमुखसुरसकुठेरकगण्डं रकालमालकपणीसक्षवकफणिज्ज्वकानि सर्वाण्यथवा
यथालाभं; तान्याहृतान्यभिसमीक्ष्य खण्डशश्छेदयित्वा प्रक्षाल्य पानीयेन सुप्र-
क्षालितायां स्याल्यां समावाय गोमूत्रेणाधोंदकेनाभिविच्य साधयेत् सततमव-
घट्यन् दव्या, तमुपयुक्तमूर्यिष्टम्भसि गतरसेष्वोषधेषु स्थालीमवतार्य सुपरिपूतं
कषायं सुखोष्णं मदनफलपिप्पलीचिङ्गकल्कतैलोपहितं स्वर्जिकालवर्णितमभ्या-
सिच्य बस्तौ विधिवदास्थापयेदेनं; तथाऽर्कालकर्कुटजादकीकुष्ठकैडर्यकपायेण
वा, तथा शिग्रुपीलुकुस्तुम्बुरुकदुकासर्षपकषायेण, तथाऽऽमलकशृङ्गवेरदारुहरि-
द्रापिचुमर्दकषायेण मदनफलादिसंयोगसंपादितेन त्रिरात्रं सप्तरात्रं वाऽस्था-
पयेत् ॥ १७ ॥

The patient should be asked to collect *mūlaka* (*Raphanus sativus* Linn.), *sarṣapa* (*Brassica nigra* Koch), *laśuna* (*Allium sativum* Linn.) *Karaṇja* (*Pongamia pinnata* Merr.), *śigru* (*Moringa oleifera* Lam.), *madhuśigru* (a type of *śigru*), *kharapuspa* (*Achyranthes aspera* Linn.), *bhūstīṇa* (*Cymbopogon citratus* Stapf) and various types of bacils, viz. *sumukha*, *surasa*, *kutheraka*, *gandira*, *kalamalaka*, *parṇasa*, *kṣavaka* and *phāṇijhaka*—preferably all these or at least some of them which are available. They should be examined carefully, cut into pieces, washed well with water and kept in a vessel containing cow-urine diluted with water of half of its quantity. This should be boiled and during the process of boiling, constantly stirred with the help of a ladle. When the aqueous part of it comes to its proper level and the active principles from medicinal plants are taken out, then the vessel should be taken out of the fire and the decoction filtered properly. When the decoction is slightly warm, then the paste of the fruit of *madana* (*Randia dumetorum* Lam.), *pippali* (*Piper longum* Linn.) and *vīḍhaṅga* (*Embelia ribes* Burm f.), and oil should be added to it; *svarjikṣāra* (salsoda) and salt should be sprinkled over it. This decoction should be administered to the patient in the form of enema following the prescribed procedure.

Similarly, decoctions prepared of *arka* (*Calotropis gigantea* R. Br. ex. Ait.), *alarka* (a variety of *Calotropis gigantea* R. Br. ex. Ait.), *kutaja* (*Holarrhena antidysenterica* Wall.), *ādhaki* (*Cajanus cajan* Millsp.), *kuṣṭha* (*Saussurea lappa* C. B. Clarke) and

kaidarya (*Murraya kosnigii* Spreng.), or *śigru* (*Moringa oleifera* Lam.), *pilu* (*Salvalora persica* Linn.), *kustumburu* (*Coriandrum sativum* Linn.), *kaṭukā* (*Picrorhiza kurroa* Royale ex Benth.) and *sarsapa* (*Brassica nigra* Capoch), or *āmalaka* (*Embllica officinalis* Gaertn.), *śringavera* (*Zingiber officinale* Rosc.), *daruharidra* (*Berebris aristata* D. C.), and *picumarda* (*Azadirachta indica* A. Juss.) mixed with *madanaphala* (*Randia dumetorum* Lam.) etc., may be used as enema for three to seven days. [17]

For the preparation of the decoction, the quantity of water etc., to be used should be according to the prescribed formula. This formula, however, need not be adhered to in all cases. Only that much of water should be added and the decoction should be boiled only for that much of time by which the active principles from the medicinal plants are taken out by water. The quantity of decoction etc.; to be used in enema will be described in *Siddhi* section.

Emesis, purgation & anuvāsana

प्रत्यागते च पश्चिमे वस्तौ प्रत्याश्वस्तं तदहरेवोभयतोभागाहरं संशोधनं पायथेद्युक्त्या; तस्य विधिरुपदेश्यते—मदनफलपिण्पलीकषायस्यार्धाङ्गलिमाद्वेण त्रिवृत्कलकाक्षमात्रालोड्य पातुमस्मै प्रयच्छेत्, तदस्य दोषमुभयतो निर्हरति साधु; एवमेव कलपोक्तानि वमनविरेचनानि प्रतिसंसूज्य पायथेदेन बुद्ध्या सर्वादिशेषानवेक्षमाणो भिषक् ॥ १८ ॥

अथनं सम्यग्विरिक्तं विज्ञायापराह्न शैखरिककषायेण सुखोष्णेन परिषेच्येत्। तेनैव च कषायेण वाह्याभ्यन्तरान् सर्वोदकाथीन् कारयेच्छवतः; तदभावं कटुतिककषायाणामौषधानः कायैर्मूत्रक्षारैर्वा परिषेचयेत्। परिषिक्तं चैनं निवात् मागारमनुप्रवेश्य पिण्पलीपिण्पली मूलचव्यचित्रकश्यज्ज्वरसिद्धेन यवाग्वादिना क्रमणोपाचरेत्, विलेपीकमागतं चैनमनुवासयेद्विडङ्गतैलैकान्तरं द्विखिर्वा ॥ १९ ॥

When the ingredients of the last enema are eliminated, the patient should be consoled and on the same day he should be given the elimination therapy which cause both emesis and purgation. The procedure to be followed in this connection is as below :—

Decoction of seeds of *madana* (*Randia dumetorum* Lam.) in half-*añjali* (48 c.c.) dose mixed with one *akṣa* (12 g) of the paste of *trivṛt* (*Operculina turpethum* R. B.) should be given to the patient to drink. This potion properly eliminates impurities in two ways, i.e. through vomiting and purgation. Similarly, the potions described in *Kalpa* section for emesis and purgation should be combined and administered to the patient after examining all the aspects carefully.

After the patient is well-purged, in the after-noon, he should be sponged with the luke-warm decoction of *vidāṅga* (*Embelia ribes* Burm f.). Always, this decoction should be used both externally and internally in the place of water. If this decoction is not available then the decoction of drugs having pungent, bitter and astringent tastes or alkalies prepared of urine may be used for sponging over the patient. After getting sprinkled with the decoction etc.) the patient should enter into a closed room (a room which is not windy) and be gradually given *Yavāgu* (gruel) etc., prepared by boiling with *pippali*, (*Pipper longum* Linn.) root of *pippali cavya* (*Piper chaba* Hunter), *citraka* (*Plumbago zeylanica* Linn.) and *śṛṅgavera* (*Zingiber officinale* Rosc.). When the patient comes to the stage of being given *vilepi* (thin gruel) then he should be administered two to three *anuvasana* (oleating) type of enemata with the oil of *vidāṅga* (*Embelia ribes* Burm. f.) on alternate days. [18-19]

The decoction of *vidāṅga* (*Embelia ribes* Burm f.) is known to physicians as “*Saikharika kaṣāya*”.

Administration of errhines :

यदि पुनरस्यातिप्रवृद्धीर्षादान् क्रिमीन् मन्येत शिरस्यैवाभिसर्पतः
कदाचित्, ततः छोहस्वेदाभ्यामस्य शिर उपपाद विरेचयेदपामार्गतण्डुलादिना
शिरोविरेचनेन ॥ २० ॥

If it is observed that these parasites have invaded the head because of their excessive growth, thereby causing injury to the head, then the head of the patient should be oleated and fomented and dosas from the head should be purged by the administration of errhiness prepared with the dehusked seeds of *apāmārga* (*Achyranthes aspera* Linn.) etc., as described in the second chapter of *Sutra* section. [20]

Antidotes for production of parasites :

यस्त्वभ्यवहार्यविधिः: प्रकृतिविधातायोक्तः क्रिमीणामथ तमनुव्याख्या-
स्यामः—मूलकपर्णी समूलाग्रप्रतानामाहृत्य खण्डशश्छेदयित्वोलू (दू) खले क्षोद-
यित्वा पाणिभ्यां पीडयित्वा रसं गृहीयत, तेन रसेन लोहितशालितण्डुलपिण्डं
समालोड्य पूपलिकां कृत्वा विधूमेष्वज्ञारेषुपकुड्य विडङ्गतैललवणोपहितां क्रि-
मिकोष्टाय भक्षयितुं प्रयच्छेत्, अनन्तरं चाम्लकाज्ञिकमुदशिवदा पिप्पल्यादिपञ्च-
वर्गसंसृष्टं सलवणमनुपाययेत् । अनेन कल्पेन मार्कवार्कसहचरनीपनिर्गुण्डी-
सुमुखसूरसकुटेरकगण्डीरकालमालकपर्णासक्षवकफणिजमकबकुलकुटजसुवर्णक्षी-
रीस्वरसानामन्यतमस्मिन् कारयेत् पूपलिकाः; तथा किणिहीकिराततिक्कसुव-

हामलकहरीतकीविभीतकस्वरसेषु कारयेत् पूपलिकाः; स्वरसांश्वैतेषामेकैकशो
द्वन्द्वशः सर्वशो वा मधुविलुलितान् प्रातरनन्नाय पातुं प्रयच्छेत् ॥ २१ ॥

We shall now expound the measures to be adopted for counter-acting the factors responsible for the production of parasites. *Mūlakaparṇī* (*Moringa oleifera* Lam.) along with its roots and branches should be collected, cut into pieces, crushed in a mortar and its juice should be extracted by manual pressure. Paste of the red variety of śāli-rice should be boiled with this juice and made to *pūpalikās* (a type of cake) which are again to be fried with smokeless fire-brands. The patient suffering from parasitic infection should be given this cake to take along with the salt and the oil of *viḍāṅga* (*Embelia ribes* Burm f.) Thereafter, he should be made to drink sour-conjee (sour gruel) or *udaśvit* (a mixture of water and butter-milk in equal quantity) along with salt and the powder of *pippali* (*Piper longum* Linn.), root of *pippali*, *cavya* (*piper chaba* hunter), *citraka* (*Plumbago zeylanica* Linn.) and *śṛṅgavera* (*Zingiber officinale* Rosc.). On the same way, *pūpalika* type of cake may be prepared by the juice of any of the following plants: *Mārkava* (*Eclipta alba* Hassk.), *arka* (*Calotropis gigantea* R. Br. ex. Ait.), *sahacara* (*Barleria cristata* Linn.), *nipa* (*Anthocephalus indicus* A. Rich., (*nirgunḍī* (*Vitex nigundo* Linn.)), various types of basils, viz. *sumukka*, *surasa*, *kuṭhsraka*, *gandira*, *kalamalaka*, *parṇasa*, *kṣavaka* and *phaṇijjhaka*, *bakula* (*Mimusops elengi* Linn.), *kuṭaja* (*Hollarrh-na antidyserterica* Wall.), *suvarṇakṣīri* (?), *linīlī* (*Achranthes aspera* Linn.), *kirātakī* (*Swertia chirata* Buch-Ham), *suvaḥā* (*Operculina turpethem* R.B.), *āmalaka* (*Embllica officinalis* Gaertn.), *haritaki* (*Terminalia chebula* Linn.), and *bibhitaka* (*Terminalia belerica* Roxb.). The patient may be given the juice of all these plants or one or two of them mixed with honey in the morning in empty stomach. [21]

Another recipe for Counter-action :

अथाखशक्तदाहत्य महति किलिङ्के प्रस्तीर्यातिपे शोषयित्वोद्युखले क्षोद-
यित्वा हृषदि पुनः सूक्ष्मचूर्णानि कारयित्वा विडङ्गकपायेण त्रिफलाकपायेण वा-
इष्टकृत्वो दशकृत्वो वाऽऽतपे सुपरिभावितानि भावयित्वा हृषदि पुनः सूक्ष्माणि/
चूर्णानि कारयित्वा नवे कलशे समावात्यानुगुप्तं निधापयेत् । तेषां तु खलु चूर्णा-
ना पाणितलं यावद्वा साधु मन्येत तत् धौद्रेण संसूज्य क्रिमिकोष्ठिने लेतुं
प्रयच्छेत् ॥ २२ ॥

Another recipe for counter-acting the factors responsible for the production of parasites is as follows : Horse-dung should be collected, spread over a tray and kept exposed to sun till it gets dried up. This should thereafter be crushed in a mortar and again pounded in a stone slab so as to make it a fine powder. The powder should be well impregnated in the sun, with the decoction of *vidāṅga* *Embelia ribes* Burn f.) or *triphalā* (*Emblica officinalis* Gaertn., *Terminalia chebula* Linn. and *Terminalia belerica* Roxb.) eight or ten times. This again should be made to a fine powder over a stone slab and stored in an air tight new earthen jar carefully so as to avoid any infection.

This powder, in the dose of one *pāṇītala* (12 g) or in another suitable dose mixed with honey and in the form of a linctus should be given to the patient suffering from the parasitic infection. [22]

Third recipe for Counter-action :

तथा भज्ञातकास्थीन्याहृत्य कलशप्रमाणेन चापोथ्य स्नेहभाविते ददे कलशे
सूक्ष्मानेकच्छिद्ब्राह्मे शरीरमुपवेष्टय मृदावलिसे समावाप्योद्देषेन पिघाय भूमाया-
कण्ठं निखातस्य स्नेहभावितस्यैवान्यस्य ददस्य कुम्भस्योपरि समारोप्य समस्तां-
द्वामयैरुपचित्य दाहयेत्, स यदा जानीयात् साधु दग्धानि गोमयानि विमतस्ते-
हानि च भज्ञातकास्थीनीति ततस्तं कुम्भमुद्धरेत् । अथ तस्माद्द्वितीयात् कुम्भात्
स्नेहमादाय विडङ्गतण्डुलचूर्णः स्नेहार्धमात्रैः प्रतिसंसृज्यातपे सर्वमहः स्थापयि-
त्वा ततोऽस्मै मात्रां प्रयच्छेत् पानाय; तेन साधु विरिक्ष्यते, विरक्तस्य चानु-
पूर्वी यथोक्ता । एवमेव भद्रदाससरलकाष्ठस्नेहानुपकल्प्य पातुं प्रयच्छेत् ॥ २३ ॥
अनुवासयेचैनमनुवासनकाले ॥ २४ ॥

Another recipe for counteracting the factors responsible for the production of parasites is as below :

One *Kalasa* (12. 288 Kg) of the stones of *bhallataka* (*Semicarpus anacardium* Linn. f.) should be collected, crushed and kept in an earthen jar having many fine holes at the bottom. This jar should then be covered with a lid and wrapped well (except over the bottom portion of it) with clay. This jar should be placed over another jar which is strong, smeared inside with oil and burried under ground upto its neck. Cow-dung cakes should be piled all around the jar and ignited. When the cow-dung cakes are well burnt and the stones of *bhallataka* (*Semicarpus anacardium* Linn. f.)

have been drained of their oil contents, then the upper jar should be removed and the oil from the lower jar should be collected. This oil mixed with half of its quantity of the dehusked seeds of *vidanga* (*Embelia ribes* Burm. f.) should be kept in the sun for the whole day. This potion, given to the patient in a proper dose will cause purgation. Follow-up measures to be adopted after purgation have already been described. Similarly the oil extracted from the wood of *bhadradaru* (*Cedrus deodara* Loud.) and *sarala* (*Pinnus roxburghii* Sargent) may be administered.

Thereafter, in appropriate time, the patient should be given *anuvāsana* (oleation) type of enema. [23-24]

Fourth recipe for counter-action :

अथाहरेति ब्रूयात्—शारदान्नवांसितलान् संपदुपेतान् ; तानाहृत्य सुनिष्ठूतान्निष्ठूय, सुशुद्धान् शोधयित्वा, विडङ्ककषाये सुखोणो प्रक्षिप्य तिर्वापयेदादोषगमनात्, गतदोषानभिसमीक्ष्य; सुप्रलूनान् प्रलुच्य, पुनरेव सुनिष्ठूतान् निष्ठूय, सुशुद्धान् शोधयित्वा, विडङ्ककषायेण त्रिःसप्तकृत्यः सुपरिभावितान् भावयित्वा, आतपे शोषयित्वा, उलू(दू)खले संक्षय, दृष्टि पुनः शुक्षणपिण्डान् कारयित्वा, द्रोण्यामभ्यवधाय, विडङ्ककषायेण मुहुर्मुहुरवसिञ्चन् पाणिर्मद्मेव मर्दयेऽ ; तस्मिस्तु खलु प्रपीड्यमाने यत्तैलमुदियात्तत् पाणिभ्यां पर्यादाय, शुचौ हृदे कलशे न्यस्यानुग्रन्थं निश्चापयेत् ॥ २५ ॥

Another recipe for counter acting the factors responsible for the production of parasites is as follows :—

Fresh *tila* (*Sesamum indicum* Linn.) of good quality; harvested in the autumn should be collected, separated from dirt particles, washed well and kept in the luke-warm decoction of *vidanga* (*Embelia ribes* Burm f.) till all the dirt particles are removed. Then the decoction should be drained out. When the *tila* is free from impurities, it should be dehusked, cleaned well again, washed well, impregnated well for twenty one times in the decoction of *vidanga*, dried in sun, crushed in a morter and made to a fine powder over a stone slab. Keeping this fine powder in a container, it should be rubbed well with hands again and again, sprinkling frequently the decoction of *vidanga*. The oil which comes out of it by the application of pressure should be collected by hand and kept in a safe place in a clean and strong earthen jar. [25]

Fifth recipe for counter-action :

अथाहरोति व्रयात्—तिल्वकोद्दालकयोद्वौ विल्वमात्रौ पिण्डौ शुक्षणपिण्डौ विडङ्गकषायेण, तदर्धमात्रौ इयामात्रिवृतयोः, अतोऽर्धमात्रौ दन्तीद्रवन्त्योः, अतोऽर्धमात्रौ च चव्यचित्रकयोरिति । एतं संभारं विडङ्गकषायस्यावर्धाकमात्रेण प्रतिसंसृज्य, तत्त्वलप्रस्थं समावाप्य, सर्वमालोड्य, महति पर्याप्ते समासित्या-ग्रावधिश्चित्यासने सुखोपविष्टः सर्वतः स्नेहमवलोकयन्नजस्यं मृद्घग्निना साधयेद्वर्या सततमवघट्यन् । स यदा जानीयाद्विरमति शब्दः, प्रशास्यति च फेनः, प्रसादमापद्यते स्नेहः, यथास्वं च गन्धवर्णरसोत्पत्तिः, संवर्तते च भैषज्यमङ्गुलिभ्यां मृद्घमानमनतिमृद्घनतिदारुणमनङ्गुलिग्राहि थेति, स कालस्तस्यावतारणाय । ततस्तमवतार्य शीतीभूतमहतेन धाससा परिपूर्य, शुचौ दृढे कलशे समासित्य, पिधानेन पिधाय, शुक्रेन धख्यपद्मेनावच्छाद्य, सूत्रेण सुबद्धं सुनिगुसं निधापयेत् । ततोऽस्मै मात्रां प्रयच्छेत् पानाय, तेन साधु विरच्यते; सम्यगप्रहृत-दोषस्य चानुशूर्वीं यथोक्ता । ततश्चैनमनुवासयेदनुवासनकाले । एतेनैव च पाक-विधिना सर्षपातसीकरञ्जकोषातकीच्छेदानुपकल्प्य पाययेत् सर्वविशेषानवेक्षमाणः । तेनागदो भवति ॥ २६ ॥

Another therapy for counter acting the factors responsible for the production of parasites is as follows :—

Tilvaka (*Symplocos racemosa* Roxb.) and *Uddalaka* (?)—one *bilva* (48 g) of each should be collected, made to a fine paste by the addition of the decoction of *vidanga* (*Embelia ribes* Burm. f.) and kept in bolus form. Similarly half *bilva* (24 g) each of *śyāma* (black variety of *Operculina turpethum* R. B.), and *trivṛt* (white variety of *Operculina turpethum* R. B.), one fourth *bilva* (12 g) each of *danti* (*Baliospermum montanum* Muell-Arg.) and *dravanti* (*Gatrophla glandulifera* Roxb.) and one eighth *bilva* (6 g) each of *cavya* (*Piper chaba* Hunter) and *citraka* (*Plumbago zeylanica* Linn.) should be collected. The above mentioned ingredients should be mixed with half *adhaka* (1.53 litre) of the decoction of *vidanga* and one *prastha* (0.768 litre) of oil. All of them should be mixed well in a sufficiently big vessel and kept over fire. This oil should be constantly stirred through a ladle over very mild fire by a person comfortably sitting near the hearth and carefully watching the oil from all sides. The time of removing the oil-pan out of fire is determined by the following criteria :—

1. stoppage of the bubbling sound;
2. subsidence of the foam;
3. appearance of clarity in the oil;

4. manifestation of the desired smell; colour and taste;
5. when a portion of the pasted drugs mixed with the oil, is rubbed with the fingers then it takes the shape of a wick, it does not adhere to the finger and it is neither very hard nor very soft to touch.

When it cools down after having been taken out of fire, it should be filtered with a new cloth and kept in a clean and strong earthen jar. This jar should be closed with a lid and covered with a piece of white cloth, tied well with a rope and kept in a safe place. This oil, given to the patient in proper dose to drink will cause purgation. When all the impurities are removed from the body, follow-up measures as already described (in para-19 of this chapter) should be adopted. In proper time he should be given *anuvasana* (oleation) type of enema also.

Following the same method, oil should be prepared with drugs like *sarsapa* (*Brassica nigra* Koch), *atasi* (*Linum usitatissimum* Linn.), *karañja* (*Pongamia pinnata* Merr.) and *koṣataki* (*Luffa acutangula*) and after having examined all aspects, the patient should be administered this therapy. This cures the patient of his disease. [26]

एवं द्वयानां श्लेष्मपुरीषसंभवानां क्रिमीणां समुत्थानसंस्थानवर्णनामप्रभाव-
चिकित्सितविशेषा द्व्याख्याताः सामान्यतः । विशेषतस्तु स्वल्पमात्रमास्थापना-
नुवासनानुलोमहरणभूयिष्ठं तेष्वैत्रौषधेषु पुरीषज्ञानां क्रिमीणां चिकित्सितं कर्तव्यं,
मात्राधिकं पुनः शिरोविरेचनवमनोपशमनभूयिष्ठं तेष्वैत्रौषधेषु श्लेष्मज्ञानां क्रिमीणां
चिकित्सितं कार्यम् ; इत्येष क्रिमिघो भेषजविधिरनुव्याख्यातो भवति । तमनुति-
ष्टता यथास्वं हेतुवर्जने प्रयतितव्यम् । यथोद्देशमेवमिदं क्रिमिकोष्ठचिकित्सितं
यथावदनुव्याख्यातं भवति ॥ २७ ॥

Thus the specific cause, shape, colour, names, effects and treatment of parasites having origin both from phlegm and feces are generally explained. Difference in the treatment of these two types of parasites is as follows :—For the feces-born parasites, the treatment involves the administration of the above mentioned drugs in small quantity, mostly in the form of *asthapana* (corrective) and *anuvasana* (oleation) types of enema and purgative. For phlegm-born parasites, however, the drug should be in large quantity and mostly having the property of eliminating *dosas* from the head (err-

hines), emesis and sedation. Thus the antiparasitic therapies are explained. While administering these therapies, efforts should be made to avoid such of the causative factors which are responsible for the production of these parasites. Thus the treatment of parasites of the alimentary tract as was suggested in para-14 is explained. [27]

मवन्ति चात्र—

अपर्कर्षणमेवादौ किमीणां भेषजं स्मृतम् ।
 ततो विधातः प्रकृतेर्निदानस्य च वर्जनम् ॥ २८ ॥
 अयमेव विकारणां सर्वेषामपि निग्रहे ।
 विधिर्दृष्टिधा योऽयं किमीनुद्दिश्य कीर्तिः ॥ २९ ॥
 संशोधनं संशमनं निदानस्य च वर्जनम् ।
 एतावद्विषजा कार्यं रोगे रोगे यथाविधि ॥ ३० ॥

Thus it is said :—

The treatment of parasites involves their removal in the beginning. Then the factors responsible for the production of parasites should be counter-acted. Their causative factors should also be avoided. These three principles of treatment described for curing the parasitic infestation are also applicable for the cure of all diseases in general.

Elimination therapy, alleviation therapy and avoidance of causative factors—these three principles alongwith their proper procedure should be adopted for the treatment of each and every disease by the physician. [28-30]

The principles described in connection with the treatment of parasitic infection are also applicable for the treatment of diseases in general. The first principle i.e. *samsodhana* or elimination therapy for the cure of diseases in general stands for the removal of parasites. Similarly the second principle i.e. *samsamana* or alleviation therapy stands for the measures for counter acting the factors responsible for the treatment of parasites. The third principle i.e. avoidance of causative factors is identical in both the cases i.e. for the treatment of parasites as well as diseases in general.

तत्र श्लोकौ—

व्याधितो पुरुषौ ज्ञानौ भिषजौ सप्रयोजनौ ।
 विशातिः क्रिमयस्तेषां हेत्वादिः सप्तको गणः ॥ ३१ ॥
 उक्तो व्याधितरुपीये विमाने परमर्षिणा ।
 शिष्यसंबोधनार्थाय व्याधिप्रशमनाय च ॥ ३२ ॥

To sum up :—

Two types of patients, ignorant and wise physicians, need for correct determination, twenty types of parasites, seven aspects, viz. etiology etc., of these parasites—all these topics are described by Lord Ātreya in this chapter on the “Determination of the Specific Characteristics of Different Types of Patients” with a view to proper understanding of the disciples and curing the diseases. [31-32]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते विमानस्थाने व्याधितरुपीयविमानं
नाम सप्तमोऽध्यायः ॥ ७ ॥

Thus ends the seventh chapter on the “Determination of the Specific characteristics of Different Types of Patients” of the *Vimāna* section of Agniveśa’s work as redacted by Caraka. [7]

CHAPTER VIII

SPECIFIC REQUIREMENTS FOR TREATMENT

अष्टमोऽध्यायः

अथातो रोगभिषण्जतीयं विमानं व्याक्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the "Determination of the Specific Requirements for the Treatment of Diseases."

Thus said Lord Ātreyā. [1-2]

In the previous chapter certain misgivings relating to the diagnosis of diseases have been brought to light. Misgivings as a matter of fact, arise out of intellectual deficiency. It is, therefore, necessary to describe ways and means (study, teaching etc.) so as to bring about intellectual excellence in physicians. It is with this end in view that the present chapter on the "Determination of the Specific Requirements for the Treatment of Diseases" is initiated.

Selection of a suitable medical-text :

बुद्धिमानात्मनः कार्यगुरुलाभवं कर्मफलमनुबन्धं देशकालौ च विदित्वा
युकिर्दर्शनाद्विषयभूषुः शास्त्रमेवादितः परीक्षेत । विविधानि हि शास्त्राणि भि-
षजां प्रचरन्ति लोके; तत्र यन्मन्येत सुमहद्यशस्त्रियपुरुषासेवितर्मर्थबहुलमा-
सजनपूजित त्रिविधशिष्यवृद्धितमपगतपुनरुक्तदोषमार्बं सुप्रणीतसूत्रभाष्यसंग्रह-
क्रमं स्वाधारमनवपतितशब्दमकष्टशब्दं पुष्कलाभिधानं क्रमागतार्थर्मर्थतत्त्ववि-
निश्चयप्रधानं संगतार्थमसंकुलप्रकरणमाशुप्रवोधकं लक्षणवचोदाहरणवच, तद-
भिप्रपद्येत शास्त्रम् । शास्त्रं ह्येवंविधममल इवादित्यस्तमो विधूय प्रकाशयति
सर्वम् ॥ ३ ॥

A wise man, desirous of adopting medical profession should, first of all, carefully select a suitable text on medicine, depending upon his competence to undertake light or serious type of work, his willingness for short term or long term results, his habitat and age. There are several such texts available for physicians. Only the texts having the following characteristic features are to be followed :—

1. which are followed by great, illustrious and wise physicians (for those texts which are great and popular and are followed by wise persons.)
2. which are pregnant with ideas and respected by reputed experts;

3. which are conducive to the intellectual growth of disciples of all the three categories (viz. highly intelligent, moderately intelligent and less intelligent);
4. which are free from defects of repetition, transmitted by seers and have well knit aphorisms together with commentaries thereon in proper order;
5. which have elegant ideas to convey;
6. which are free from vulgar and difficult expressions and have clear and unambiguous expressions;
7. which convey ideas in an orderly manner;
8. which primarily deal with the determination of real objects;
9. which are free from contradictions;
10. where there is no confusion relating to contexts;
11. which convey ideas quickly; and
12. which are equipped with definitions (of etiology, symptomatology and therapeutics) and illustrations. A text of this type may be compared to the sun which removes darkness and illuminates all. [3]

The following categories of persons do not deserve to be physicians :

1. one who considers medical practice as something to difficult;
2. one who does not have any liking for the results of medical practice;
3. whose habitat is not conducive to the knowledge of medicine; and
4. who is old and as such incapable of completing the study of medical science.

It is only the persons free from these defects who should aspire for medical profession and select a suitable text on the science.

Repetition conducive to contextual propriety or clarity is always acceptable. So it need not to be regarded as a defect in absolute terms.

Selection of a suitable preceptor :

ततोऽनन्तरमाचार्यं परीक्षेत् तद्यथा—पर्यवदातश्रुतं परिवृष्टकर्माणं दक्षं दक्षिणं शूचि जितहस्तमुपकरणवन्तं सर्वेन्द्रियोपपन्नं प्रश्नतिङ्गं प्रतिपत्तिशमनुप-स्फुतविद्यमनहङ्कृतमनसूयकमकोपनं क्लेशक्षमं शिष्यवत्सलमध्यापकं ज्ञापनसमर्थं चेति । एवंगुणो ह्याचार्यः सुखेत्रमार्तवो मेघ इव शस्यगुणैः सुशिष्यमाशु वैद्य-गुणैः संपादयति ॥ ४ ॥

Thereafter one should assess the qualities of the preceptor. An ideal preceptor is he who is well grounded in scrip-

tures; equipped with practical knowledge, wise, skilful, whose prescriptions are infallible, who is pious, who has all the necessary equipments for treatment, who is not deficient in respect of any of the sense organs, who is acquainted with human nature, and the rationale of treatment, whose knowledge is not overshadowed (by the knowledge of other scriptures), who is free from vanity, envy and anger, who is hard working, who is affectionately disposed towards his disciples and is capable of expressing his views with clarity. A preceptor possessed of such qualities infuses medical knowledge to a good disciple as the seasonal cloud helps bring about good crop in a fertile land. [4]

One cannot gain any practical experience from a preceptor who does not have any equipment necessary for treatment. Too much of knowledge of other scriptures may sometimes result in overshadowing of medical perspective. An ideal preceptor is therefore, required to be free from such confusing concepts as are foreign to medical science. Of course, if such concepts serve as an aid to medical perspective they are most welcome and an ideal physician should certainly derive help from them.

तमुपस्त्वारिराधिषुरुपचरेदग्निवच्च देववच्च राजवच्च पितृवच्च भर्तुवच्चाप्रमत्तः । ततस्तप्रसादात् कृत्वं शास्त्रमधिगम्य शास्त्रस्य दृढतायामभिधानस्य सौष्ठुवेऽर्थस्य विज्ञाने वचनशक्तौ च भूयो भूयः प्रयतेत सम्यक् ॥ ५ ॥

One should approach such a preceptor and respect him like fire, god, king, father and master with all cares. After having obtained the knowledge of the entire scripture, through his blessings one should strive again and again for achieving depth in scriptures, clarity of expressions, comprehension of of the various concepts and power of oration. [5]

Three methods of obtaining knowledge :

तत्रोपायाननुव्याख्यास्यामः—अध्ययनम्, अध्यापनं, तद्विद्यसंभाषा चेत्युपायाः ॥ ६ ॥

तत्रायमध्ययनविधिः—कल्यः कृतक्षणः प्रातरुथायोपव्यूषं वा कृत्वाऽऽवश्यकमुपस्थुयोदकं देवर्षिगोव्राक्षणगुरुवृद्धसिद्धाचार्येभ्यो नमस्कृत्य समे शुचौ देशे सुखोपविष्टो मनःपुरःसराभिर्वाग्भिः सूत्रमनुक्रामन् पुनः पुनरावर्तयेद् बुद्धा सम्यग्नुप्रविश्यार्थतत्त्वं स्वदोषपरिहारार्थं परदोषप्रमाणार्थं च; एवं मध्यंदिनेऽपराह्ने रात्रौ च शश्वदपरिहापयन्नध्ययनमभ्यस्येत् । इत्यध्ययनविधिः ॥ ७ ॥

We shall now explain the ways and means for attaining this objective. They are (1) study, (2) teaching and (3) participation in debates.

Procedure for study :

The disciple should be healthy and solely devoted to study. He should get up early in the morning or in the last quarter of the night. He should then perform ablution and offer prayers to the gods, sages, cows, *brahmanas*, teachers, elderly and enlightened persons and preceptors and should then sit comfortable on an even and clean place. Thereafter, he should recite the *sutras* orally with due concentration. After proper understanding, he should repeat his recitation with a view to removing his own deficiencies and testifying to the deficiencies of others. He should continue with his practice in the noon, in the after-noon and at night without any break. This is the procedure for study. [6-7]

Even though a disciple is required to pursue his study without any break, he would certainly refrain from such pursuits on such occasions when the study of the *vedas* is also prohibited.

Procedure for Teaching :

अथाध्यापनविधिः—अध्यापने द्रुतबुद्धिराचार्यः शिष्यमेवादितः परीक्षेत्; तद्यथा—प्रशान्तमार्यप्रकृतिकमशुद्रकर्मणमृजुचक्षुखवनासावंशं तनुरक्तविशाद-जिह्मविकृतदन्तोष्टमिन्मिनं धृतिमन्तमनहङ्कतं मेधाविनं वितर्कस्मृतिसंपन्नमुदारसत्त्वं तद्विद्यकुलजमथवा तद्विद्यवृत्तं तत्त्वाभिनिवेशिनमव्यङ्गमव्यापन्नेन्द्रियं निभृतमनुद्रुतमर्थतत्त्वभावकमकोपनमव्यसनिनं शीलशौचाचारानुरागदाश्यप्रादक्षिण्योपपन्नमध्ययनाभिकामर्थविज्ञाने कर्मदर्शने चानन्यकार्यमलुब्धमनलसं सर्वभूतहितैषिणमाचार्यसर्वानुशिष्टप्रतिकरमनुरक्तं च, एवंगुणसमुदितमध्याप्यमाहुः ॥ ८ ॥

The preceptor planning to undertake teaching should, first of all, examine the disciple himself. Qualities of a good disciple are as follows :

1. tranquility;
2. generosity;
3. aversion to mean acts;
4. normal condition of eyes, face and nasal ridge;
5. thin, red and clear tongue;

6. absence of any morbidity in teeth, lips and voice;
7. perseverance;
8. freedom from vanity;
9. presence of intellect, power of reasoning and memory;
10. liberal mindedness;
11. birth in the family of a physician or the one having the disposition of a physician;
12. inquisitiveness for truth.
13. physical perfection;
14. unimpaired senses;
15. modesty and absence of ego;
16. ability to understand the real meaning of things;
17. absence of irritability;
18. absence of addictions;
19. good character, purity, conduct, love for study, enthusiasm and sympathetic disposition;
20. devotion to study;
21. uninterrupted taste for the theory and practice of the science;
22. absence of greed and laziness;
23. good-will for living beings;
24. obedience to all the instructions of the preceptor; and
25. devotion to the preceptor. [8]

The disciple to be selected for study should have normal condition of sense organs including eyes, face and the nasal ridge. One having abnormal condition of sense organs is considered to be unsuitable for the study.

Presence of enthusiasm and absence of laziness are considered to be qualities of a good disciple. A disciple may take interest in the work in the beginning because of his enthusiasm but subsequently he may not pursue it because of laziness; hence both the qualities viz., the presence of enthusiasm and absence of laziness are separately described here even though this is apparently a repetition.

एवं विधमध्ययना र्थिनमुपस्थितमारिराधयिपुमाचार्योऽनुभाषेत— उदगायने शुक्लपक्षे प्रशस्ते ऽहनि तिष्यहस्तथवणाश्वयुजामन्यतमेन नक्षत्रेण योगमुपगते भगवति शशिनि कल्याणे कल्याणे च करणे मैत्रे मुहूर्ते मुण्डः कृतोपवासः स्नातः काषायवल्खसंबीतः सगन्धहस्तः समिधोऽग्निमाज्यमुपलेपनमुदकुम्भान् मालयदा-मदीपहिरण्यहेमरजतमणिमुक्तादित्रिमक्षोमपरिधीन् कुशलाजसर्पपाक्षतांश्च शु-

क्रानि सुमनोसि प्रथिताग्रथितानि मेष्यान् भक्ष्यान् गन्धांश्च धृष्टानादायोपतिष्ठ-
स्वेति ॥ ९ ॥

स तथा कुर्यात् ॥ १० ॥

When the disciple having the above mentioned (in para-8) qualities approaches the preceptor with reverence for study, he should be advised as follows :

During a favourable *muhūrta* (a unit of time consisting of 48 minutes and named as *Siva*, *Bhujaga* etc.,) and an auspicious *kṣaya* (a division of the day used in astrological science), when the moon is auspicious by virtue of its conjunction with either of *Puṣya*, *Hasta*, *Śravaṇa* or *Aśvayuk* constellations, in an auspicious day of the light fort-night of *uttarāyana* (summer solstice) the disciple should come with his hair saved, observing fast, after bath, wearing a saffron coloured cloth and with fragrant material in hand. He should also bring with him *samidhā* (dry twigs used for offering oblation), fire, ghee, sandal wood paste, earthen jar filled with water, garlands, lamp, gold, ornaments of gold, silver, jewels, pearl, coral, silken garments, *paridhi* (sticks of *palāśa* or *Butea monosperma* kuntze of one cubit in length for being placed in the four sides of *homakunḍa* i.e. a rectangularly dug fire place for offering oblations), *kuśa* (*Desmostachya bipinnata* Staph.), fried paddy, *sarṣapa* (*Brassica nigra* Koch), *akṣata* (unbroken dehusked rice), white loose flowers and garlands, prepared out of them, food articles which promote intellect and sweet scented pastes. The disciple should do accordingly. [9-10]

It is only the offerings out of personal efforts or earnings of a disciple which can have auspicious and fruitful effects.

तमुपस्थितमाक्षाय समे शुचो देशे प्राक्प्रवणे उदकप्रवणे वा चतुष्क्रु-
मात्रं चतुरस्सं स्थण्डिलं गोमयोदकेनोपलिप्तं कुशास्तीर्णं सुपरिहितं परिधिभि-
श्चतुर्दिशं यथोक्तचन्दनोदकुम्भक्षौमहेमहिरण्यरजतमणिमुक्ताविद्रुमालङ्कृतं मेष्य-
भक्ष्यगन्धशुक्लपुष्पलाजसर्सर्पाक्षतोपशोभितं कृत्वा, तत्र पालाशोभिरैङ्गुदीभिरौडु-
स्वरीभिर्मधुकीभिर्वा समिद्धिरग्निमुपसमाधाय प्राङ्मुखः शुचिरध्ययनविधिमनु-
विधाय मधुसर्पिभ्यां त्रिख्यिजुहुयादग्निमाशीःसं प्रयुक्तैर्मन्त्रैर्ब्रह्माणमग्निं धन्वन्तरं
प्रजापतिमश्विनाविन्द्रमृषीश्च सूत्रकारानभिमन्त्रयमाणः पूर्वं स्वाहेति ॥ ११ ॥

शिष्यश्चैनमन्वालमेत । हुत्वा च प्रदक्षिणमग्निमनुपरिकामेत् । परिकम्य
ग्राहणान् स्वस्ति वाचयेत्; भिषजश्चाभिपूजयेत् ॥ १२ ॥

When the disciple comes with the preparations mentioned above, the physician should get constructed a *sṭhāndila* (an elevated place of the shape of a square and of four cubits in size) in an even and pure place having slope towards the east or the north. The place should be smeared with cow-dung, spread with *kuṣa* grass and provided with good border in all the four sides. This place should then be decorated with sandal paste, earthen jar, water, silken garments, gold, ornaments of gold, silver, jewels, pearls, corals, food articles which promote intellect, fragrant things, white flowers, fried paddy, mustard seeds, and unbroken dehusked rice which have already been described above (in para 9). Then fire should be ignited in that place with the help of dried twigs of *palūśa* (*Butea monosperma* Kuntze), *īngudi* (*Balanites aegyptica* Deliete), *udumbara* (*Ficus racemosa* Linn.) or *madhuka* (*Glyeyrrhiza labra* Linn.). The physician facing towards the east with purity of mind and following the procedure of study, should offer oblations of honey and ghee in fire reciting benedictory *mantras* ending with *svāhā* for Brahmā, agni, Dhanvantari, Prajāpati, the Aśvins, Indra, R̥sis and authors of hymns—three times each.

The disciple should follow the preceptor. After offering oblations he should take a round of the fire keeping it to the right side. After taking the round, *Brahmaṇas* may be made to recite propitiatory hymns. He should then offer prayers to the physicians. [11-12]

Instructions about general behaviour of the student :

अथैनप्रग्निसकारो ब्राह्मणसकारो भिषक्सकारो चानुशिष्यात्—ब्रह्मचा-
रिणा इमश्रुधारिणा सत्यवादिनाऽमांसादेन मेध्यसेविना निर्मत्सरेणाशशधा-
रिणा च भवितव्यं, न च ते मद्वचनात् किञ्चिदकार्यं स्थादन्यत्र राजद्विष्टात् प्राण-
हराद्विपुलादधर्म्यादनर्थसंप्रयुक्ताद्यर्थात्; मर्दप्णेण मत्प्रधानेन मदधीनेन
मवियहितानुवर्तिना च शश्वद्वितव्यं, पुत्रवद्वासवदर्थिवद्वोपचरता ऽनुवस्तव्यो-
ऽहम्, अनुसेकेनावहितेनानन्यमनसा विनीतेनावेक्ष्यावेक्ष्यकारिणा ऽनुसूयकेन
चाभ्यनुज्ञातेन प्रविचरितव्यम्, अनुज्ञातेन (चाननुज्ञातेन च) प्रविचरता पूर्व-
गुर्वर्थोपाहरणे यथाशक्ति प्रयतितव्यं, कर्मसिद्धिमर्थसिद्धिं यशोलाभं प्रेत्य च
स्वर्गमिच्छता भिषजा त्वया गोब्राह्मणमादौ कृत्वा सर्वप्राणभृतां शर्माशासितव्य-
महरहरुतिष्ठता ओपविशता च, सर्वात्मना चातुराणामारोग्याय प्रयतितव्यं,
जीवितहेतोरपि चातुरेभ्यो नाभिद्रोग्यश्च, मनसाऽपि च परस्पर्यो नाभिगमनो-

यास्तथा सर्वमेव परस्पं, निभृतवेशपरिच्छदेन भवितव्यम्, अशौण्डेनापापेनापापसहायेन च, स्त्रुक्षणशुक्रधर्म्यशम्यधन्यसत्यहितमितवचसा देशकालविचारिणा स्मृतिमता ज्ञानोत्थानोपकरणसंपत्सु नित्यं यत्क्वता च; न च कदाचिद्वाजद्विष्टानां राजद्वेषिणां वा महाजनद्विष्टानां महाजनद्वेषिणां वाऽप्यौषधमनुविधातव्यं, तथा सर्वेषामत्यर्थचिकृतदुष्टुःखशीलाचारोपचाराणामनपवादप्रतिकाराणां मुमूर्षुणां च, तथैवासन्निहितेश्वराणां स्त्रीणामनध्यक्षाणां वा; न च कदाचित् स्त्रीदत्तमाविषमादातव्यमनुक्षातं भर्त्राऽथवाऽध्यक्षेण, आतुरकुलं चानुप्रविशता विदितेनानुभतप्रवेशिना सार्धं पुरुषेण सुसंबीतेनावाक्षिरसा स्मृतिमता स्तिमितेनावेक्ष्यावेक्ष्य मनसा सर्वमाचरता सम्यग्नुपवेष्टव्यम्, अनुप्रविश्य च वाङ्गानो-मुड्डीन्द्रियाणि न क्षचित् प्रणिधातव्यान्यन्यत्रातुरादातुरोपकारार्थादातुरगतेष्वन्वेषु वा भावेषु, न चातुरकुलप्रवृत्तयो वहिर्निंश्चारयितव्याः, हसितं चायुषः प्रमाणमातुरस्य जानताऽपि त्वया न वर्णयितव्यं तत्र यत्रोच्यमानमातुरस्यान्यस्य वाऽप्युपघाताय संपद्यते; ज्ञानवताऽपि च नात्यर्थमात्मनो ज्ञाने विकस्थितव्यम्, आसादपि हि विकल्पमानादत्यर्थमुद्दिजन्त्यनेके ॥ १३ ॥

In front of the fire, *brahmāṇas* and physicians, the preceptor should instruct his disciples as below :

1. "You should observe *brahmacarya*, maintain your beard, speak the truth, take vegetarian food, resort to such food and regimens as are conducive to the promotion of intellect, refrain from envy and carry no weapon with you.
2. You should always obey my instructions except when they go against the ruler of the land, or they are directed towards your death or they involve sinful commitments considerably or bring about calamity.
3. You should always be devoted to me, surrender yourself to my superiority, be subordinate to me and behave in a manner which will be pleasant and useful to me.
4. You should pay due regards to me as if you are my son, servant or supplicant.
5. You should act without ego, with cares and affection, with undisturbed mind, with modesty, with proper vigilance, without jealousy and with obedience for my instructions.
6. Acting either at my instance or otherwise, you should first of all try to collect to the best of your ability the things desired by your preceptor.

7. If you want to achieve success in your medical profession, earn wealth as well as fame and attain heaven after death, you should in all circumstances pay for the well-being of cows, *brahmanas* and all other living beings.
8. You should make efforts to cure the patient.
9. You must never give may to any ill will towards your patients even at the cost of your life.
10. You should not even think of committing adultery and should not aspire for any property belonging to others.
11. Your appearance and apparel should make you look modest.
12. You should not take wine, commit sins or have association with those committing sinful acts.
13. Your speech should be pleasant, pure, righteous, blissful, excellent, truthful, useful and moderate.
14. Your behaviour should be in conformity with the time and place, based on the reecollections of the past experience.
15. You should always make efforts for the upliftment of your knowledge and adoption of such methods as would give you good health.
16. You should not prescribe medicines for those who are despised by the king or noble persons and those who despise the King or noble persons.
17. You should not treat all those who are excessively artificial in their behaviour, are wicked or are of miserable conduct and behaviour or who have not been absolved of the allegations against them or who are going to succumb to death.
18. Women in the absence of their husbands and guardians should not be treated by you.
19. You should not accept any joyable thing given by a woman without the permission of her husband or guardian.
20. You should enter the residence of the patient accompanied by a person who knows the place and who on his part, has obtained permission to enter there. While

doing so you should be well clad, with your head bowed down, having a good memory, having concentration of mind and acting with proper thinking. After having entered there your speech, mind, intellect and and senses should be entirely devoted to nothing except the welfare of the patient and allied matters.

21. Family customs (secrets) should not be disclosed by you to outsiders.
32. Even having known that the patient's span of life has come to a close, you should not disclose this to the patient himself or to the son or father etc. of the patient because it may cause shock to the patient or to his relatives.
23. Even though actually possessed of wisdom, you should not exhibit it to others. Many people get very much irritated to hear such self-praise even from a saint. [13]

A person who always speaks truth is known as *āpta*, or saint. Something said in self-praise even by such persons irritates many others. They should make such true statements only in proper time.

न चैव ह्यस्ति सुतरमायुर्वेदस्य पारं, तस्मादप्रमत्तः शश्वदभियोगमस्मिन् गच्छेत्, एतच्च कार्यम्, एवंभूयश्च वृत्तसौष्ठवमनसूयता परेभ्योऽन्यागमयितव्यं, कृत्स्नो हि लोको बुद्धिमतामाचार्यः शत्रुशाबुद्धिमताम्, अतश्चाभिसमीक्ष्य बुद्धिमताऽभिन्नस्यापि धन्यं यशस्यमायुष्यं पौष्टिकं लौक्यमभ्युपदिशतो वचः श्रोतव्यमनुविधातव्यं चेति । अतः परमिदं ब्रूयात—देवताग्निद्विजगुरुवृद्धसिङ्गाचार्येषु ते नित्यं सम्यग्वर्तितव्यं, तेषु ते सम्यग्वर्तमानस्यायमन्तिः सर्वगन्धरसरत्त्वबीजानि यथेरिताश्च देवताः शिवाय स्युः, अतोऽन्यथा वर्तमानस्याशिवायेति । एवं ब्रुवति चाचार्ये शिष्यः ‘तथा’ इति ब्रूयात । यथोपदेशं च कुर्वन्नाचार्याण्यः, अतोऽन्यथा त्वनध्याप्यः । अध्याप्यमध्यापयन् हाचार्यो यथोक्तेश्वान्यापनफलैर्योगमाप्नोत्यन्वेश्वानुकैः श्रेयस्करौर्गेणौ शिष्यमात्मानं च युनक्ति । इत्यन्यापनविधिरुक्तः ॥ १४ ॥

It is not easy to acquire comprehensive knowledge of the “Science of life”. Therefore one should make honest efforts to be in constant touch with this science. One should strive to acquire qualities (described in para-13), one should learn similar noble qualities even from his enemies without having any sense of jealousy. The wise consider the entire universe as their preceptor; it is only the unwise who consider it to be their enemy. One should, therefore, have the proper advice which brings fame, which promotes longevity and

nourishment and which is acceptable to the people. Such advice can be had even from an enemy and be adopted in practice.

Thereafter, the preceptor should say, "Always behave well with the gods, fire, *brāhmaṇas*, preceptors, elders, persons who have attained perfection and teachers. If you do so, fire, all types of smells, tastes, jewels, seeds and the gods will bless you. Otherwise, they will be unfavourably disposed towards you."

To the preceptor advising as above, the disciple should say, "tatha", i.e. I shall act accordingly. It is only when the disciple acts accordingly, he can be considered eligible for studies. A teacher gets all the auspicious fruits of teaching those described in scriptures and even those that are not described—and gets himself and the disciple endowed with the virtuous qualities only when the disciple is worthy of teaching.

Thus the procedure of teaching has been described. [14]

Procedure for debates :

संभाषाविधिमत ऊर्चे व्याख्यास्यामः—भिषक् भिषजा सह संभाषेत ।
तद्विद्यसंभाषा हि ज्ञानाभियोगसंहर्षकरी भवति, वैशारद्यमपि चाभिनिर्वर्तयति,
वचनशक्तिमपि चाधत्ते, यशस्वाभिदीपयति, पूर्वधुते च संदेहवतः पुनः अव-
णाच्छ्रुतसंशयमपकर्षति, श्रुते चासंदेहवतो भूयोऽध्यवसायमभिनिर्वर्तयति,
अश्रुतमपि च कञ्चिदर्थे श्रोत्रविषयमापादयति, यज्ञाचार्यः शिष्याय शुश्रूषे
प्रसन्नः क्रमेणोपदिशति गुह्याभिमतमर्थजातं तत् परस्परेण सह जल्यन् पिण्डेन
विजिगीषुराह संहर्षात्, तस्मात्तद्विद्यसंभाषामभिप्रशंसन्ति कुशलाः ॥ १५ ॥

द्विविधा तु खलु तद्विद्यसंभाषा भवति—सन्धायसंभाषा, विगृहसंभाषा
च ॥ १६ ॥

Hereafter we shall expound the procedure for debates. A physician should participate in a discussion with another physician. Professional discussion indeed promotes the power of application of knowledge and competition leading to enlightenment. It manifests the clarity of knowledge, promotes the power of speech, spreads fame, eliminates doubts reminiscent of the previous study by repeated hearing and brings about confirmation of what is undoubtedly understood before.

During the course of discussions one comes to know of many new things which were not heard by him previously. Being pleased over the devoted disciple, the preceptor during the course of teaching elaborates some secret meanings. The participants during the course of mutual discussion enthusiastically disclose these secret meanings in brief with a view to achieving a victory over the competitor. Therefore, participation in professional debates is always applauded by the wise.

Professional discussions are of two types, viz. (i) friendly discussions and (ii) hostile discussions. [15-16]

Procedure for friendly discussion :

तत्र ज्ञानविज्ञानवचनप्रतिवचनशक्तिसंपन्नेनाकोपनेनानुपस्थुतविधेनान्-
सूयकेनानुनयेनानुनयकोविदेन क्लेशक्षमेण प्रियसंभाषणेन च सह सन्धायसंभाषा
विधीयते । तथाविधेन सह कथयन् विम्बब्धः कथयेत्, पृच्छेदपि च विम्बब्धः,
एच्छते चास्मै विम्बब्धाय विशदमर्थं ब्रूयात्, न च निग्रहभयादुद्भिजेत, निग्रह
चैनं न हृष्येत्, न च परेषु विकल्प्येत्, न च मोहादेकान्तग्राही स्यात्, न चाविदि-
तमर्थमनुवर्णयेत्, सस्यक् चानुनयेनानुनयेत्, तत्र चावहितः स्यात् । इत्यनुलोम-
संभाषाविधिः ॥ १७ ॥

One should have friendly discussions with persons of learning possessed of scientific knowledge, power of argument and counter argument, who do not get irritated, who are endowed with correct knowledge, who are not jealous, who can be made to understand, who are competent in convincing others, who are capable of facing difficult situations and who can address in a sweet tone.

One should confidently discuss with such persons and put questions to them. When he asks anything, it should be elaborately described with confidence. One should not get worried under the apprehension of getting defeated. One should not rejoice by defeating his opponents. One should not boast of having defeated such opponents. One should not hold extreme views under delusion. One should not try to describe a thing which the other party does not know. One should try to bring round the other party with politeness and not by deception. One should be very careful to behave politely with his opponents.

This is the procedure for "Friendly discussions." [17]

Procedure to be adopted in a hostile discussion :

अत ऊर्ध्वमितरेण सह विगृह्य संभाषायां जलपेच्छेयसा योगमात्मनः पश्यन् । प्रागेव च जलपाञ्जल्पान्तरं परावरान्तरं परिषद्विशेषांश्च सम्यक् परीक्षेत । सम्यकपरीक्षा हि बुद्धिमतां कार्यप्रवृत्तिनिवृत्तिकालौ शंसति, तस्माद् परीक्षामभिप्रशंसन्ति कुशलाः । परीक्षमाणस्तु खलु परावरान्तरमिमान् जलपक्गुणाभ्युयस्करान् दोषवतश्च परीक्षेत सयम्कृत्यथा—श्रुतं विज्ञानं धारणं प्रतिभान् वचनशक्तिरिति, एतान् गुणान् श्रेयस्करानाहुः; इमान् पुनर्दोषवतः, तद्यथा—कोपनत्वमवैशारद्यं भीरुत्वमधारणत्वमनवहितत्वमिति । एतान् गुणान् गुरुलाघवतः परस्य चैवात्मनश्च तुलयेत् ॥ १८ ॥

With persons other than preceptor and *brahmachārins* (class-mates), one should go in for a “hostile discussions”, provided he is confident of his superiority. Before entering into the discussion, the procedure proposed to be adopted by the opponent, difference between the abilities of himself and the opponent and the disposition of the members of the assembly should be carefully examined. A wise person determines the time of entering into or giving up the discussion only by proper examination. Hence proper examination is always advisable.

There are some good and bad qualities of the participants in a discussion. With a view to determining the superiority or inferiority of himself in respect of his opponent, one should carefully examine these good and bad qualities. Good qualities of participants are the knowledge of the text, practical experience, power of retention, presence of mind and eloquence. Bad qualities of the participants are irritation, lack of skill, cowardice, lack of the power of retention and carelessness. One should compare the strength or weakness of himself and of his opponent in respect of these qualities. [18]

Three types of opponent :

तत्र त्रिविधः परः संपद्यते—प्रवरः, प्रत्यवरः, समो वा, गुणविनिक्षेपतः; नत्वेव कात्कर्येन ॥ १९ ॥

Depending upon the presence of the above mentioned qualities, the opponent may belong to either of the three categories, viz. (i) superior, (ii) inferior or (iii) equal. However, other factors like the family status, conduct, religions etc., should not be taken into account in this connection. [19]

When the opponent is possessed of many of the good qualities and less of the bad qualities, in comparision with the individual, the former should be termed as superior, otherwise he is inferior. If however, these good and bad qualities are equally present or absent, then he is to be treated as equal.

Two types of assembly :

परिषत्तु खलु द्विविधा—ज्ञानवती, मूढपरिषद्ध । सैव द्विविधा सती
त्रिविधा पुनरनेन कारणविभागेन—सुहृत्यरिषत्, उदासीनपरिषत्, प्रतिनिविष्ट-
परिषच्चेति । तत्र प्रतिनिविष्टायां परिषदि ज्ञानविज्ञानवचनप्रतिवचनशक्तिसंप-
न्नायां मूढायां वा न कथंचित् केनचित् सह जल्पो विधीयते; मूढायां तु सुहृत्यरि-
षद्युदासीनायां वा ज्ञानविज्ञानवचनप्रतिवचनशक्तीरन्तरेणाभ्यदीप्यशसा महा-
जनविद्विष्टेनापि सह जल्पो विधीयते । तद्विधेन च सह कथयता आविद्वीर्घ-
सूत्रसंकुलैर्वाक्यदण्डकैः कथयितव्यम् अतिहृष्टं मुहुर्मुहुरूपहसता परं निरूपयता
च पर्षदमाकारैर्वृततश्चास्य वाक्यावकाशो न देयः; कष्ठशब्दं च ब्रुवता वक्तव्यो
नोच्यते, अथवा पुनर्हीना ते प्रतिज्ञा, इति । पुनश्चाहू(ह)यमानः प्रतिवक्तव्यः—
परिसंवत्सरो भवान् शिक्षस्थ तावत्; न त्वया गुरुरूपासितो नूनम्, अथवा पर्या-
स्मेतावत्; सकृदपि हि परिक्षेपिकं निहतं निहतमाहुरिति नास्य योगः कर्त्तव्यः
कथञ्चित् । अप्येयं श्रेयसा सह विगृह्य वक्तव्यमित्याहुरेके; नत्वेवं ज्यायसा सह
विग्रहं प्रशंसन्ति कुशलाः ॥ २० ॥

An assembly is of two types, viz. (i) enlightened and (ii) dull. On the basis of different criteria, both these types of an assembly may be classified into three types viz. (i) friendly, (ii) neutral and (iii) prejudicial. Members of an assembly may be enlightened (endowed with knowledge, experience, power of speech and contradiction) or dull but if they are prejudicial, then one should never enter into a discussion with anybody, not even with the most wretched one in such an assembly. If the members of the assembly are dull but friendly or neutral, then the individual should enter into discussion with an opponent who is not very famous and who is even despised by great people even without theoretical and practical knowledge or power. While discussing with such an opponent, one should use such long sentences as are difficult to understand or are composed of long and complicated aphorisms. An overexcited opponent should be ridiculed and the individual should continue his speech acting as if addressing the assembly, without giving an opportunity for the opponent to speak. One should speak using such terms as are difficult to understand and the opponent should be told

that he was incapable of advancing any argument in the matter and his proposition had failed. If the opponent challenges again, he should be told, "You should study for at least one year more to have some more experience in debates. Probably you have not observed the guidance of your preceptor well." Or else, he should be told, "This is sufficient for you." Once the opponent is defeated he remains defeated for ever; hence his further challenge for discussion should not be accepted.

Some people advise that the same procedure should be followed even while discussing with a superior opponent. But the wise do not approve of such a proposition to enter into hostile discussion with a superior opponent. While discussing with the opponent in a debate, members of which are not enlightened, one should use complicated sentences so that members of the assembly will find it very difficult to understand. By implication, the user of such words and sentences will be credited with success. [20]

Procedure for debate with an opponent of inferior or equal type :

प्रत्यवरेण तु सह समानाभिमतेन वा विगृह्य जल्पता सुहृत्यरिषदि कथ-
यितव्यम्, अथवा उग्नुदासीनपरिषद्यवधानश्रवणज्ञानविज्ञानोपधारणवचनप्रति-
वचनशक्तिसंपन्नायां कथयता चावहितेन परस्य सादृगुण्यदोषबलमवेक्षितव्यं;
समवेक्ष्य च यत्रैनं श्रेष्ठं मन्येत नास्य तत्र जल्पं योजयेदनाविष्टतमयोगं कुर्वन्;
यत्र त्वेनमवरं मन्येत तत्रैवैनमाशु निगृहीयात्। तत्र खलिवमे प्रत्यवराणामाशु
निग्रहे भवन्त्युपायाः; तद्यथा—श्रुतहीनं महता सूत्रपाठेनाभिमतेत्, विज्ञानहीनं
पुनः कष्टशब्देन वाक्येन, वाक्यधारणाहीनमाविद्वदीर्घसूत्रसंकुलैर्वाक्यदण्डकैः,
प्रतिभाहीनं पुनर्वचनेनैकविधेनानेकार्थवाचिना, वचनशक्तिहीनमधौक्तस्य वाक्य-
स्याक्षेपणं, अविशारदमपत्रपणेन, कोपनमायासनेन, भीरुं वित्रासनेन, अनव-
हितं नियमनेनेति। एवमेतैरुपायैः परमवरमभिभवेच्छीघ्रम् ॥ २१ ॥

With an opponent of inferior or equal type, one should enter into hostile discussion if the members of the assembly are favourably disposed towards him. In an assembly where members are neutral and are attentive, inclined to hear, learned, experienced, having the power of retention, speech and contradiction; one should carefully observe the good and bad qualities of the opponent as a participant in the discussion. On the basis of these observation, if the opponent is found to belong to superior category, then one should not

enter into discussion on the same topic. Without letting the assembly know, he should change the topic of discussion to a favourable one. If the opponent is found to be of inferior category then efforts should be made to defeat him immediately in a hostile discussion.

The following procedure should be adopted for immediately defeating an opponent of inferior category. If the opponent is not a learned person, then he should be defeated by citing long aphorisms; if he is not experienced then by such words and sentences as are difficult to understand; if he is unable to retain sentences by memory then by sentences composed of complicated and long aphorisms; if he is dull then by statements of the same type (composed of the same words) but carrying different meanings; if he is devoid of the power of oration then by challenging with half of a sentence (the opponent in that case is required to fill up the other half); if he has no experience of participating in seminars then by putting him to a disgraceful situation; if he is irritable, then by creating difficult situations for him; if he is a cowardice then by creating fearful situations and if he is not careful then by adhering to the discipline of discussion.

These are the procedures to be followed for immediately defeating the opponent of inferior category. [21]

If an opponent of inferior category is asked questions with such words as carry several meanings then he will get confused to understand the real intentions behind the question and thus gets defeated. If an individual incapable of expressing himself well is challenged with half of a sentence, then he would not be able to speak. If an individual who has not previously participated in seminars is put in a disgraceful position then because of shame he would not be able to speak anything and would thus get defeated.

तत्र श्लोकौ—

विगृह्य कथयेदुक्त्या युक्तं च च निवारयेत् ।
विगृह्यभाषा तीव्रं हि केषांचिद्वोहमावहेत् ॥ २२ ॥
नाकार्यमस्ति क्रुद्धस्य नावाच्यमपि विद्यते ।
कुशला नाभिनन्दन्ति कलहं समितौ सताम् ॥ २३ ॥
एवं प्रवृत्ते वादे कुर्यात् ॥ २४ ॥

Thus it is said :

In fighting discussions one should make careful statements and should not over-rule the statements (of opponents)

which are well authenticated. Some people get excessively irritated during hostile discussions and there is nothing which cannot be done or said by the enraged one. Therefore, in an assembly of learned people, the wise never appreciate a quarrel.

This is how one should participate in a debate. [22-24]

If during the course of a discussion in a debate one comes across an opponent of superior type, he should not continue the discussion on the same topic and change it to his advantage in such a way that nobody in the assembly could mark it and point out his inability to discuss with his opponent on the original topic.

प्रागेव तावदिदं कर्तुं यत्तेत—सन्धाय पर्षदाऽयनभूतमात्मनः प्रकरणमादेशयितव्यं, यद्वा परस्य भृशदुर्गं स्यात्, पक्षमथवा परस्य भृशं विमुखमानयेत्; परिषदि चोपसंहितायामशक्यमस्माभिर्वकुम्, एवैव ते परिषद्यथेष्टं यथायोगं यथाभिप्रायं वादं वादमर्यादां च स्थापयिष्यतीत्युक्त्वा तृष्णीमासीत् ॥ २५ ॥

In the beginning one should proceed like this :

One should prevail upon the assembly to select such a topic as is favourable to himself and is exceedingly difficult for the opponent to discuss. Or the opponent should be made to take such a side in the discussion which will be disliked by the members of the assembly. When the assembly supports the stand taken by him, he should say, "I have nothing more to say. The assembly according to choice may sufficiently and appropriately decide upon the validity of the debate and its limitations," he should observe silence, thereafter. [25]

For discussions in a debate, one should prevail upon the assembly to select such a topic in which the individual is already well versed with and which might be too difficult for the opponent. The opponent should be led to state such an aspect of the argument which will generally find disfavour with the members of the assembly e.g. nobody would, like argument against the established religious theories like the existence of *paraloka* (life after death) and *karmaphala* (fruits of action) and if the opponent is led to state, this view in a debate, he can easily be defeated.

तत्रेदं वादमर्यादालक्षणं भवति—इदं वाच्यम्, इदमवाच्यम्, एवं पराजितो भवतीति ॥ २६ ॥

The following factors bear importance in determining the limits of a fighting debate :

1. things which should be said;
2. things which should not be said; and
3. the point of defeat. [26]

The above mentioned three factors are to be kept in view only in the case of a hostile debate. The friendly debate is always associated with a desire to determine the truth.

Logical terms to be acquainted with by debaters :

इमानि तु खलु पदानि भिषग्वादमार्गज्ञानार्थमधिगम्यानि भवन्ति; तद्यथा-
वादः, द्रव्यं, गुणाः, कर्म, सामान्यं, विशेषः, समवायः, प्रतिज्ञा, स्थापना, प्रति-
ष्ठापना, हेतुः, दृष्टान्तः, उपनयः, निगमनम्, उत्तरं, सिद्धान्तः, शब्दः, प्रत्यक्षम्,
अनुमानन्, ऐतिहास्यम्, औपस्यं, संशयः, प्रयोजनं, सञ्चयभिचारं, जिज्ञासा, व्यवसायः,
अर्थप्राप्तिः, संभवः, अनुयोज्यम्, अननुयोज्यम्, अनुयोगः, प्रत्यनुयोगः, वाक्य-
दोषः, वाक्यप्रशासा, छलम्, अहेतुः, अतीतकालम्, उपालम्भः, परिहारः, प्रति-
ज्ञाहानिः, अभ्यनुज्ञा, हेत्वन्तरम्, अर्थान्तरं, निग्रहस्थानमिति ॥ २७ ॥

Acquaintance with the following terms help in the determination of the course of debate among physicians :

(1) *vāda* (debate), (2) *dravya* (substance), (3) *guna* (attributes), (4) *karman* (action), (5) *sāmanya* (generic concomitance), (6) *vīśeṣa* (variant factor), (7) *saṃavāya* (inseparable concomitance), (8) *pratijñā* (proposition), (9) *sīhāpana* (justification), (10) *pratiśṭhāpana* (counter argument), (11) *hetu* (cause), (12) *dṛṣṭānta* (example), (13) *upanaya* (subsumptive correlation), (14) *nigamana* (final conclusion), (15) *uttara* (rejoinder), (16) *siddhānta* (concluded truth), (17) *śabda* (words), (18) *pratyakṣa* (direct observation), (19) *anumāna* (inference) (20) *aitihiya* (words of divine origin), (21) *aupamya* (analogy), (22) *saṃśaya* (doubt), (23) *prayojana* (object), (24) *savyabhicāra* (statements with exceptions), (25) *jijñāsa* (enquiry), (26) *vyavasāya* (determination) (27) *arthaprāpti* (implied meaning), (28) *saṃbhava* (source), (29) *ananuyojya* (defective statement), (30) *anuyojya* (infallible statement), (31) *anuyoga* (scriptural enquiry), (32) *pratyānuyoga* (scriptural counter enquiry), (33) *vākyadoṣa* (syntactical defects), (34) *vākyapraśāmsa* (syntactical excellence), (35) *chala* (casuistry), (36) *ahetu* (casual falacy), (37) *atitakala* (defiance of temporal order), (38) *upalambha* (pointing out defects in casuistry), (39) *parihāra* (correction), (40) *pratijñāhāni* (shift from the original proposition), (41) *abhyānūjñā* (confessional retort), (42) *hetvāntara* (fallacy of reason), (43) *arthāntara* (irrelevant statement), and (44) *nigrahasthāne* (clinchers). [27]

तत्र वादो नाम स यत् परेण सह शास्त्रपूर्वकं विगृह्य कथयति । स च
द्विविधः संग्रहेण—जल्पः, वितण्डा च । तत्र पक्षाश्चित्योर्वचनं जल्पः, जल्पवि-

पर्ययो वितण्डा । यथा—एकस्य पक्षः पुनर्भवोऽस्तीति, नास्तीत्यपरस्य; तौ च स्वस्वपक्षहेतुभिः स्वस्वपक्षं स्थापयतः, परपक्षमुद्धावयतः, एष जल्पः । जल्पविपर्ययो वितण्डा । वितण्डा नाम परपक्षे दोषवचनमात्रमेव ॥ २८ ॥

Vāda (debate) :

A debate may be defined as a hostile discussion with an opponent based on scriptures. This is of two types, viz. (1) *jalpa* (disputation) and *vitanda* (wrangling). Advancement of one's own view while contradicting the opponent is *jalpa* (disputation); otherwise the discussion is *vitanda* (wrangling). For example, if one of the participants debates in favour of the existence of *punarjanma* (rebirth) and the other against it, and both of them advance arguments in support of their own views contradicting the other's view point, this is known as *jalpa* (disputation). In *vitanda* (wrangling) type of debate, only the opponents' views are contradicted without advancing arguments in support of the individuals own views. [28]

Here the debate implies fighting discussion on the basis of scriptural data and not any financial dispute. As there is an element of fighting discussions in a debate, the tools like *chala* (deceitful disputation), *jāti* (futile rejoinder) and *nigrahasthāna* (clinchers) are utilised there as a means to victory.

द्रव्य - गुण - कर्म - सामान्य - विशेष - समवायाः स्वलक्षणैः श्लोकस्थाने पूर्वमुक्ताः ॥ २९ ॥

Dravya (matter), *guna* (attributes), *karman* (action), *sāmānya* (generic concomittance), *viseṣa* (varient factor) and *samavāya* (inseparable concomittance) all these along-with their definitions are already described in the first chapter of *Sūtra* section. [29]

अथ प्रतिक्षा—प्रतिक्षा नाम साम्यवचनं; यथा—नित्यः पुरुष इति ॥ ३० ॥

Partijñā (proposition) :

Pratijñā may be defined as an assertion about the object to be proved (major term); e.g., the *puruṣa* (soul) is eternal. [30]

अथ स्थापना—स्थापना नाम तस्या एव प्रतिक्षायाः हेतुदृष्टान्तोपनयनिगमनैः स्थापन पूर्वे हि प्रतिक्षा, पश्चात् स्थापना, किं ह्यप्रतिक्षात् स्थापयिष्यति; यथा—नित्यः पुरुष इति प्रतिक्षा; हेतुः—अकृतकत्वादिति; दृष्टान्तः—यथाऽकाशमिति; उपनयः—यथा चाकृतकमाकाशं, तच्च नित्यं, तथा पुरुष इति; निगमनं—तस्मान्नित्य इति ॥ ३१ ॥

30.

Sthāpana (*justification*) :

Sthāpana may be defined as the justification of the proposition by dint of the *hetu* (statement of probans), *dṛṣṭānta* (corroborative instance), *upanaya* (subsumptive correlation), and *nigamana* (final conclusion). The proposition comes first and then its justification. How can one justify anything, unless it is proposed ? For example, one can propose that the "soul is eternal" Therefore, he would make a statement that it is so because it is not produced by anyone. Then he would cite *ākāśa* as the corroborative instance elucidating (subsumptive correlation) further that as *ākāśa* is not produced by anybody and is, therefore, eternal so is the soul. He would finally conclude (final conclusion) that the soul is eternal. [31]

Justification of the proposition is based on four factors, viz. probans, corroborative instance, subsumptive correlation and final conclusion. As a matter of fact inference consists of all five factors including proposition. But in the present context proposition is distinguished from the other four factors—the former being something to be justified and latter as factors for its justification.

अथ प्रतिष्ठापना—प्रतिष्ठापना नाम या तस्या एव परप्रतिज्ञाया विपरीतार्थस्थापना । यथा—अनित्यः पुरुष इति प्रतिज्ञा; हेतुः—ऐन्द्रियकत्वादिति; वृषान्तः—यथा घट इति, उपनयो—यथा घट ऐन्द्रियकः स च नित्यः; तथा चायमिति; निगमनं—तस्मादनित्य इति ॥ ३२ ॥

Pratisthāpana (*counter-argument*) :

Pratisthāpana stands for a counter-argument against the proposition set forth by an opponent. E. G. if the opponent argues in favour of the eternity of the soul, the corresponding counter argument would be "the soul is ephemeral" because it is perceived by a sense organ like a pitcher; that is to say, as a pitcher is perceived by sense organs and it is ephemeral, so also the soul is perceivable by sense organs and it is ephemeral; the conclusion is that the soul is ephemeral. [32]

अथ हेतुः—हेतुर्नामोपलब्धिकारणं; तत् प्रत्यक्षम्, अनुमानम्, ऐतिह्यम्, औपम्यमिति; एभिहेतुभिर्युपलभ्यते तत् तत्त्वम् ॥ ३३ ॥

Hetu-(cause) :

Means for obtaining the knowledge (observing the object) constitute the *hetu* or cause. They are of four types,

viz. (1) direct observation, (2) inference, (3) tradition and (4) analogy. The knowledge obtained through these factors is valid. [33]

Pratyakṣa (direct obse. vation) etc., are the sources of valid knowledge. They are treated as the causes (in place of sources) of valid knowledge here because they themselves are dependent upon certain causative factors. Had they not been treated here as causative factors, the subsequent description of *pratyakṣa* (direct observation) etc., in verse nos. 39–42 would amount to a repetition.

अथ दृष्टान्तः—दृष्टान्तो नाम यत्र मूर्खविदुषां बुद्धिसाम्यं, यो वर्ण्य वर्ण्यति । यथा—अग्निरुद्धः, द्रवमुदकं, स्थिरा पृथिवी, आदित्यः प्रकाशक इति; यथा आदित्यः प्रकाशकस्तथा सांख्यज्ञानं प्रकाशकमिति ॥ ३४ ॥

Dṛṣṭānta (example) :

Description of universal truths comprehensible by the wise and ignorant alike is known as *dṛṣṭānta* or example; it illustrates the object. For example, fire is hot, water is liquid, earth is stable and the sun is illuminating. As the sun is illuminating so also the knowledge obtained from the *Sāṃkhya* system of philosophy is illuminating. [34]

The example should be very clear so that it is understood both by the wise and ignorant alike. If it is understood only by the wise, then it cannot be called as an example. When the example is not understood by a common man for whom it is meant, it will cease to be called as an example. The most common illustration depicting the relation between the object and the means is called “example.”

उपनयो निगमनं चोक्तं स्थापनप्रतिष्ठापनव्याख्यायाम् ॥ ३५ ॥

While explaining *sthāpanā* (proposition) and *pratisthāpanā* (counter proposition) in verses 31–32 above, *upanaya* (subsumptive correlation) and *nigamana* final conclusion have already been explained. [35]

अथोत्तरम्—उत्तरं नाम साधस्योपदिष्टे हेतौ वैधर्म्यवचनं, वैधस्योपदिष्टे वा हेतौ साधस्यवचनम् । यथा—‘हेतुसधर्माणो विकाराः, शीतकस्य हि व्याधेहेतुभिः साधस्य हिमशिरवातसंस्पर्शाः, इति ब्रुवतः परो ब्रूयात्—हेतुविधर्माणो विकाराः, यथा शरीरावयवानां दाहौष्ण्यकोथप्रचने हेतुवैधर्म्यं हिमशिरवातसंस्पर्शा इति । एतत् सविपर्ययमुत्तरम् ॥ ३६ ॥

Uttara (Rejoinder) :

Uttara (rejoinder) stands for refutation of the argument showing correlation of homologous and heterologous substa-

nces by citing examples of homologous and heterologous causal relationships respectively. E. G., if somebody says, "Diseases are similar to their causative factors because cold fever is caused by factors having identical properties, viz exposure to snow and cold wind" the *uttara* (rejoinder) would be, "Diseases are dissimilar to their causative factors because burning and heating sensations, suppuration and inflammation of organs of the body are caused by the exposure to snow and cold wind."

Thus the Rejoinder alongwith the Counter-rejoinder is described.

अथ सिद्धान्तः-सिद्धान्तो नाम स यः परीक्षकैवद्विधं परीक्ष्य हेतुभिश्च साधयित्वा स्थाप्यते निर्णयः । स चतुर्विधः—सर्वतन्त्रसिद्धान्तः, प्रतितन्त्रसिद्धान्तः, अधिकरणसिद्धान्तः, अभ्युपगमसिद्धान्तश्चेति । तत्र सर्वतन्त्रसिद्धान्तो नाम तस्मिस्तस्मिन् सर्वस्मिस्तन्त्रे तत्तत् प्रसिद्धं, यथा सन्ति निदानानि, सन्ति व्याधयः; सन्ति सिद्धयुपायाः साध्यानामिति । प्रतितन्त्रसिद्धान्तो नाम तस्मिस्तस्मिन्बैकर्तस्मिस्तन्त्रे तत्तत् प्रसिद्धं; यथा—अन्यत्राष्टौ रसाः षडत्र, पञ्चेन्द्रियाण्यत्र षडिन्द्रियाण्यत्र तन्त्रे, वातादिकृताः सर्वे विकारा यथाऽन्यत्र, अत्र वातादिकृता भूतकृताश्च प्रसिद्धाः । अधिकरणसिद्धान्तो नाम स यस्मिन्नधिकरणे प्रस्तूयमाने सिद्धान्यन्यान्यप्यधिकरणानि भवन्ति, यथा—'न मुक्तः कर्मानुबन्धिकं कुरुते, निस्पृहत्वात्' इति प्रस्तुते सिद्धाः कर्मफल-मोक्ष-पुरुष-प्रेत्यभावा भवन्ति । अभ्युपगमसिद्धान्तो नाम स यमर्थमसिद्धमपरीक्षितमनुपदिष्टमहेतुकं वा वाद-कालेऽभ्युपगच्छन्ति भिषजः; तद्यथा—द्रव्य प्रधानमिति कृत्वा वक्ष्यामः, गुणः प्रधानमिति कृत्वा वक्ष्यामः, वीर्य प्रधानमिति कृत्वा वक्ष्यामः, इत्येवमादिः । इति चतुर्विधः सिद्धान्तः ॥ ३७ ॥

Siddhānta (Demonstrated Truth) :

A demonstrated truth established after several examinations and reasonings is known as *Siddhānta*. It is of four types as follows :

1. *Sarvatantra siddhānta* or Truth common to all scriptures. E. G. existence of causative factors of diseases and existence of curatives for curable diseases.

2. *Pratitantra siddhānta* or Truth specific to a given scripture. E. G. in other scriptures *rasas* (tastes) are described to be of eight types but in this text they are of six types only; here *indriyas* (senses) are described to be five in number but in other scriptures they are six; in other scriptures all diseases

are described to be caused by *dosas* viz. *vata* etc., but here diseases are caused by *dosas*, viz. *vata* etc. as well as evil spirits (germs).

3. *Adhikarāṇa siddhānta* or Truth implied from a given context. E. G. no liberated soul indulges in action leading to bondage for he is free from all desires; this proposition implies truths like fruit of action, liberation of the soul and existence of life after death.

4. *Abhyupagmā siddhānta* or Truth taken for granted i. e. a hypothesis (postulation). E. G. things are explained sometimes on the basis of the pre-dominance of matter, sometimes that of the qualities and sometimes that of the potentiality.

So the four-fold "Demonstrated Truth" is described. [37]

While explaining *adhikarāṇa siddhānta* (Truth implied from a given context), the example of a liberated soul (*mukta*) not indulging in actions leading to bondage has been cited above. Here the term ' *mukta*' in fact stands for the one about to attain salvation and not the one who has already attained salvation. Once the salvation is attained, there is no question of a soul indulging in any action whatsoever.

One can easily draw conclusion from the above proposition that (1) actions bear fruits (otherwise, why should a liberated soul safeguard himself against the fruits of action ?) (2) there is something like salvation (how else could a person be liberated ?) (3) there is a soul (who else would be liberated or bound ?) (4) there is rebirth (how else could the fruits of action follow after death ?).

अथ शब्दः—शब्दो नाम वर्णसमाप्तायः; स चतुर्विधः—दृष्टार्थश्च, अदृष्टार्थश्च,
सत्यश्च, अनृतश्चेति। तत्र हप्तार्थो नाम—त्रिभिर्हेतुभिर्दोषाः प्रकुप्यन्ति, पद्मिष्य-
क्रमैश्च प्रशास्यन्ति, सति श्रोत्रादिसङ्घावे शब्दादिग्रहणमिति। अदृष्टार्थः पुनः—
अस्ति प्रेत्यभावः, अस्ति मोक्ष इति। सत्यो नाम—यथार्थभूतः; सन्त्यायुवेदोप-
देशाः, सन्ति सद्युपायाः साध्यानां व्याधीनां, सन्त्यारम्भफलानीति। सत्य-
विपर्ययश्चानृतः॥ ३८॥

Sabda (Words) :

Words are made of sound. They are of four types viz.

(i) *Dṛṣṭārtha* or those based on observations. E. G. *dosas* get aggravated by three groups of factors, viz. intellectual blasphemy etc; they are alleviated by the six groups of therapeutic measures, viz. fasting etc., sounds etc., can be perceived only in the presence of auditory or other sense organs,

(ii) *Adṛśtartha* or those based on unobservable phenomena. E. G. there is life after death and there is salvation.

(iii) *Satya* or factual. E. G. there are the prescriptions of the science of medicine, there are the therapeutic measures meant for the alleviation of curable diseases and therapeutic measures produce their effects.

(iv) *Anṛta* or false :—Words contrary to facts are false. E. G. there are no prescriptions of the science of medicine. [38]

Scriptural testimony is of two types—(i) transmitted by *Brahmā* etc., who are enlightened par excellence and (ii) words uttered by the enlightened worldly persons. Words of the divine origin like the *Vedas* come under the category of *aitihya* which is already accepted as a separate source of knowledge in para 41. In the present context “words” stand for those uttered by worldly persons including enlightened sages.

Words consist of sounds. Even though sounds are isolated and there is no binding factor so as to convert them into words, still they are joined together by virtue of the semblance of memory or by mental association of the previous sounds with the subsequent ones.

अथ प्रत्यक्षं—प्रत्यक्षं नाम तद्यात्मना चेन्द्रियैश्च स्वयमुपलभ्यते; तत्रात्म-
प्रत्यक्षाः सुखदुःखेच्छाद्वेषादयः, शब्दाद्यस्त्वन्दियप्रत्यक्षाः ॥ ३९ ॥

Pratyakṣa (Direct observation) :

Things perceived by oneself or with the help of sense organs come under the category of direct observation. E. G. happiness, misery, desire, hatred etc., are perceived by the “Self” himself; sound etc., are perceived with the help of sense organs. [39]

अथानुमानम्—अनुमानं नाम तकों युक्त्यपेक्षः; यथा—अग्नि जरण-
शक्त्या, बलं व्यायामशक्त्या, श्रोत्रादीनि शब्दादिग्रहणेनत्येवमादि ॥ ४० ॥

Anumāna (Inference) :

Inference is based on argument accompanied with reasoning :—E. G. One can infer *agni* (digestive fire) from the power of digestion, strength from the capacity to perform exercise and auditory sense organs etc., from the perception of sound etc., [40]

अथैतिहम्—ऐतिह्यं नामासोपदेशो वेदादिः ॥ ४१ ॥

Aitihya (Words of the divine origin) :

Words of the divine origin are those uttered by the gods who are enlightened par excellence e.g. the *Vedas* transmitted by Lord *Brahmā*. [41]

अथौपम्यम्—औपम्यं नाम यदन्येनान्यस्य सावृश्यमधिकृत्य प्रकाशनं; यथा—दण्डेन दण्डकस्य, धनुषा धनुःस्तम्भस्य, इष्वासेनाऽरोग्यदस्येति ॥ ४२ ॥

Aupamya (Analogy) :

Exposition based on the similarity of the one with the other is *aupamya* or analogy. E. G. the disease *dandaka* (a disease characterized by the rigidity of the muscles of the body) is explained as similar to *danda* (staff), the disease *dhanustambha* (tetanus) to *dhanus* (bow) and a good physician to a successful archer. (42)

Of the two objects which are mutually similar, the one which is better known is taken as an object of comparision as a means to explaining the less known object of comparison—vide *Nyāyadarśana* 1 : 1 : 6. E.G. a staff is better known to people, so if some body explains that the disease *dandaka* is similar to a staff in symptoms, even a layman would be able to identify the disease as and when one suffers from it. Or according to the *Bhāṭṭa* school of *mimāṃsakas* one would remember the qualitative resemblance of the staff as related to the symptoms of the less known disease *dandaka* on the basis of the aforesaid analogy.

अथ संशयः—संशयो नाम सन्देहलक्षणानुसन्दिग्धेष्वर्णविश्वनिश्चयः; यथा—दृष्टा ह्यायुष्मल्लक्षणैरूपेताश्चानुपेताश्च तथा सक्रियाश्चाक्रियाश्च पुरुषाः शीघ्रभ-
ङ्गाश्चिरजीविनश्च, एतदुभयदृष्टत्वात् संशयः—किमस्ति खल्वकालमृत्युरुत
नास्तीति ॥ ४३ ॥

Saṃśaya (doubt) :

Want of decision in relation to the various doubtful objects of similar implications is *saṃśaya* or doubt. E. G. there are persons who are endowed with the signs of long life, some are not; there are persons who resort to therapeutics, some do not. Of all these people some are seen to die early and some live long. This creates a doubt whether there is a possibility of premature death or not ? [43]

अथ प्रयोजनं—प्रयोजनं नाम यदर्थमारभ्यन्त आरम्भाः; यथा—यद्यकाल-
मृत्युरस्ति ततोऽहमात्मानमायुष्यैरूपचरिष्याम्यनायुष्याणि च परिहरिष्यामि,
कथं मामकालमृत्युः प्रसहेतेति ॥ ४४ ॥

Prayojana (object) :

The object is the one to accomplish which various measures are adopted. E. G. “Granting that there is a possibility of premature death, I would get myself treated with drugs which promote longevity and avoid taking recourse to un-

wholesome regimens. How would then premature death can attack me ?" [44]

अथ सव्यभिचारं—सव्यभिचारं नाम यद्यभिचरणं; यथा—भवेदिदमौपध-
मस्मिन् व्याधौ यौगिकमथवा नेति ॥ ४५ ॥

Savyabhisara (Statements with exception) :

A statement with exception is known as *savyabhisara*. E. G. such statements might create doubts as to whether a given medicine would be appropriate for a particular disease or not ? [45]

This type of statement leads to doubt. This does not constitute a doubt in itself.

अथ जिज्ञासा—जिज्ञासा नाम परीक्षा; यथा मेषजपरीक्षोत्तरकालमुपदे-
क्ष्यते ॥ ४६ ॥

Jijñasa (Enquiry) :

An enquiry with a view to examining a thing is known as *jijñasa*. E. G. the examination relating to drugs which will be subsequently explained. [46]

अथ व्यवसायः—व्यवसायो नाम निश्चयः; यथा—वातिक पदायं ड्यधिः,
इदमेवास्य भेषजं चेति ॥ ४७ ॥

Vyavasaya (Determination) :

Determination of a given object is *vyavasaya* E. G. there is verily a *vātika* type of disease and a given medicine is the best suited for its cure. [47]

अथार्थप्राप्तिः—अर्थप्राप्तिर्नाम यत्रैकेनार्थेनोक्तेनापरस्यार्थस्यानुकस्यापि
सिद्धिः; यथा—नायं संतर्पणसाध्यो व्याधिरित्युक्ते भवत्यर्थप्राप्तिः—अपतर्प-
णसाध्योऽयमिति, नानेन दिवा भोक्तव्यमित्युक्ते भवत्यर्थप्राप्तिः—निशि भोक्तव्य
मिति ॥ ४८ ॥

Arthaaprapti (Implied meaning) :

When from something explicitly stated some other thing which is not stated is understood it is known as *arthaprapti* (understanding by implication). E. G, if it is said that a given disease cannot be cured by nourishing therapy, it evidently follows that the disease is curable by emaciating therapy. Again, if it is said that a patient should not eat during day time it implies that he should be given food at night. [48]

Reasoning by implication is accepted as a separate source of knowledge by some scholars. It is however not accepted as a source of knowledge in this text inasmuch as it was not considered advisable to do so. When free from fallacious reasoning, it can be safely included under inference itself.

For a patient who cannot be cured even by the emaciating therapy the statement "not curable by nourishing therapy" will not hold good. If he is not curable either by nourishing or by emaciating therapy, the only statement that could be made in such a case would be that he is incurable.

**अथ संभवः—यो यतः संभवति स तस्य संभवः; यथा—षड्धात्वो
गर्भस्य, व्याघेरहितं, हितमारोग्यस्येति ॥ ४९ ॥**

Sambhava (Source) :

Something from which another thing originates is regarded as *sambhava* or source. E. G. the six *dhātus* are the source of embryo, unwholesome regimens of a disease and wholesome regimens of good health. [49]

As a matter of fact, a thing originated is already present in the source. The source is nothing but the effect in its unmanifested stage. So the embryo is already present in the six *dhātus* and disease in the unwholesome regimen—all in their unmanifested forms. They are manifested as effects subsequently.

**अथानुयोज्यम्—अनुयोज्यं नाम यद्वाक्यं वाक्यदोषयुक्तं तत् । सामान्यतो
व्याहृतेष्वर्थेषु वा विशेषग्रहणार्थं यद्वाक्यं तदप्यनुयोज्यं; यथा—‘संशोधनसा-
ध्योऽयं व्याधिः’ इत्युक्ते ‘किं वर्मनसाध्योऽयं, किंवा विरचनसाध्यः’ इत्यनुयु-
ज्यते ॥ ५० ॥**

Anuyojya (Defective statement) :

A statement which is not too lucid is *anuyojya* or a defective statement. In the event of general statements having been made, making statements to specify the object is also called *anuyojya*. E. G. if somebody says that a given disease is curable by elimination therapy, it is enquired, "Whether it is curable by emetic or purgation therapy?" [50]

यथानुयोज्यम्—अनुयोज्यं नामातो विपर्ययेण; यथा—अयमसाध्यः ॥ ५१ ॥

Ananuyojya (Infallible statement) :

Where there is no room for any query, the statement so made is known as *ananyojya* or infallible statement. E. G. a given disease is incurable. [51]

31. V

अथानुयोगः—अनुयोगो नाम स यत् तद्विद्यैरेव सार्थं तत्रे
तत्रैकदेशो वा प्रश्नः प्रश्नैकदेशो वा ज्ञानविज्ञानवचनप्रतिवचनपरीक्षार्थमादि-
श्यते । यथा—‘नित्यः पुरुषः’ इति प्रतिज्ञाते यत् परः ‘को हेतुः’ इत्याह, सो-
अनुयोगः ॥ ५२ ॥

Anuyoga (Scriptural Enquiry) :

When scholars proficient in scriptures enquire from similar scholars something relating to a scripture or a part of the scripture or a question or a part of the question with a view to testing the knowledge, power of comprehension and expression and capacity to reply to the latter, this is known as scriptural enquiry. E. G. if a rival asserts that the soul is eternal, it may be enquired “Why is it so ?” This is *anuyoga* or scriptural enquiry. [52]

अथ प्रत्यनुयोगः—प्रत्यनुयोगो नामानुयोगस्यानुयोगः, यथा—अस्यानु-
योगस्य पुनः को हेतुरिति ॥ ५३ ॥

Pratyanyuyoga (Scriptural Counter Enquiry) :

To put another enquiry in respect of an enquiry is known as *pratyanyuyoga* or scriptural counter-enquiry. E. G. in respect of the enquiry presented above, it might further be asked, “What is the justification for this enquiry relating to the eternity of the soul ?” [53]

अथ वाक्यदोषः—वाक्यदोषो नाम यथा खल्वस्मिन्दर्थे न्यूनम्, अधिकम्,
अनर्थकम्, अपार्थकं, विरुद्धं चेति; एतानि ह्यन्तरेण न प्रकृतोऽर्थः प्रणश्येत् ।
तत्र न्यूनं—प्रतिज्ञाहेतुदाहरणोपनयनिगमनानामन्यतमेनापि न्यूनं न्यूनं भवति;
यद्वा वद्युपदिष्टहेतुकमेकेन हेतुना साध्यते तत्र न्यूनम् । अथाधिकम्—अधिकं
नाम यन्यूनविपरीतं, यद्वाऽऽयुर्वेदे भाष्यमाणे वार्हस्पत्यमौशनसमन्यद्वा यात्क-
चिदप्रतिसंबद्धार्थमुच्यते, यद्वा संबद्धार्थमपि द्विरभिधीयते तत् पुनरुक्तदोषत्वा-
दधिकं; तत्र पुनरुक्तं द्विविधम्—अर्थपुनरुक्तं, शब्दपुनरुक्तं च; तत्रार्थपुनरुक्तं
यथा—भेषजमौषधं साधनमिति, शब्दपुनरुक्तं पुनर्भेषजं भेषजमिति । अथानर्थ-
कम्—अनर्थकं नाम यद्वचनमन्तरग्राममात्रमेव स्यात् पञ्चवर्गवज्र चार्थतो गृह्णते ।
अथापार्थकम्—अपार्थकं नाम यदर्थवच्च परस्परेणासंयुज्यमानार्थकं, यथा—च-
क्रन(त)क्र-वंश-वज्र-निशाकरा इति । अथ विरुद्धं—विरुद्धं नाम यद्वप्तान्त-
सिद्वान्तसमयैर्विरुद्धं; तत्र पूर्वे द्वष्टान्तसिद्वान्ताखुक्तौ; समयः पुनर्खिधा भाति;
यथा—आयुर्वेदिकसमयः, याङ्गिकसमयः, मोक्षशास्त्रिकसमयश्चेति; तत्रायुर्वै-

दिक्समयः-चतुर्षादं भेषजमिति, याक्षिकसमयः-आलभ्या यजमानैः पशव इति, मोक्षशास्त्रिकसमयः-सर्वभूतेष्वहिंसेति; तत्र स्वसमयविपरीतमुच्यमानं विरुद्धं भवति । इति वाक्यदोषाः ॥ ५४ ॥

Vakyadōṣa (Syntactical defects) :

Syntactical defects are : semantic deficiency, superfluity, nonsensical statement, semantic incogruity and contradictory statement. It is only when a sentence is free from these defects, its semantic potentiality remains intact.

When a statement is deficient in any one of the five constituents of a statement, viz. proposition, statement of probans, corroborating instance, subsumptive correlation and final conclusion then it suffers from semantic deficiency. Or, where, from out of several statements of probans only one is presented, the sentence is again considered to be deficient semantically. (E. G. the statements of probans in respect of the eternity of the soul are the state of having no beginning, state of not having been created and the state of freedom from any transformation; if instead of presenting all these statements of probans, one presents only one of them the statement would suffer from the defect of semantic deficiency.)

Superfluity is just opposite to semantic deficiency. Or if in the course of a discussion relating to the science of medicine, somebody starts talking about *Bārhaspatya* or *Sukranti* and such other irrelevant things, this is also considered to be superfluous. Or even if relevant, when things are unnecessarily repeated that is again superfluous. Repetitions are of two kinds :—

(1) Semantic repetition i.e. to give more than one synonym for expressing one and the same concept e.g. *bheṣaja*, *auḍadha*, *sādhana* etc.

(2) Verbal repetition i.e. repeating the same words again and again e.g. *bheṣaja*, *bheṣaja* etc.

Nonsensical statements are those which are made of unmeaningful letters e.g. unrelated five groups of stops like *Ka*, *kha*, *ga*, *gha* and *ṭha*.

If a sentence consists of unconnected words—those meaningful in isolation but with no meanings whatsoever in the

combination form e. g. *vakra*, *nakra*, *vamśa*, *vajra* and *niśākara* etc. this is known as अनर्थक (meaningless).

When a statement is not in keeping with illustrations, basic doctrines and traditions, it is known as *viruddha* or contradictory statement. The illustrations of statements contradictory to *dṛṣṭanta* (illustration) and *siddhānta* (fundamental doctrines) have already been cited above.

[(1) Contradictory to illustration; e. g. a statement that fever produces heat as cold water produces heat, (2) contradictory to the fundamental principles; e. g. the statement of a physician to the effect that a medicine does nor cure a disease.]

Tradition is of three types as follows :

1. tradition relating to the science of medicine e. g. a therapy has four constituents.

2. ritualistic tradition e. g. animals are to be sacrificed by the worshippers.

3. spiritual tradition e. g. non-violent attitude towards all creatures.

Thus a statement contradicting the traditions of a given scripture is known as contradictory statement.

These are the defects in statements. [54]

अथ वाक्यप्रशंसा—वाक्यप्रशंसा नाम यथा खल्वस्मिन्नर्थे त्वन्यूनम्, अनश्चिकम्, अर्थवत्, अनपार्थकम्; अविरुद्धम्, अधिगतपदार्थं चेति यत्तद्वाक्य-मननुयोजयमिति प्रशस्यते ॥ ५५ ॥

Vākyaprasāmā (Syntactical excellence) :

Syntactical excellence is attained when the statement is free from syntactical deficiency, superfluity, incongruity, contradiction and breach of tradition. That is to say where there is no room for further enquiry, the statement is considered to be of excellent type. [55]

अथ छ्छलं-छलं नाम परिशठमर्थाभासमनर्थकं वाग्वस्तुमात्रमेव । तद्-द्विधं—वाक्-छलं, सामान्यच्छलं च । तत्र वाक्-छलं नाम यथा—कश्चिद्द्वयात्-नवतन्त्रोऽयं भिषगिति, अथ भिषग् ब्रूयात्—नाहं नवतन्त्र एकतन्त्रोऽहमिति; परो ब्रूयात्—नाहं ब्रीमि नव तन्त्राणि तवेति, अपि तु नवाभ्यस्तं ते तन्त्रमिति; भिषक् ब्रूयात्—न मया नवाभ्यस्तं तन्त्रम्, अनेकधाऽभ्यस्तं मया तन्त्रमिति; एतद्वाक्छलम् । सामान्यच्छलं नाम यथा—व्याधिप्रशमनायौषधमित्युक्ते, परो

ब्रूया ॥—सत् सत्प्रशमनायेति किं तु भवानाह; सन् हि रोगः, सदौषधं, यदि च सत् सत्प्रशमनाय भवति, तत्र सत् कासः, सत् क्षयः, सत्सामान्यात् कासस्ते क्षयप्रशमनाय भविष्यतीति । एतत् सामान्यच्छलम् ॥ ५६ ॥

Chala (Casuistry) :

Chala (casuistry) stands for confusion created by play on words not relevant to the question, nonsensical in nature, and only apparently having some meanings. This is of two kinds, viz. *Vākchala* (verbal casuistry) and *Sāmānyacchala* (casuistry in general).

Verbal casuistry :—If somebody says that the physician is “*navatantra*” meaning thereby that he has learnt the science of medicine but too recently, the opponent replies, “I am not “*navatantra*” (meaning thereby that he has not studied nine scripture) but has studied only one scripture. Then again the questioner replies, “I did not mean that the physician has studied nine scriptures but I meant that your experience in the field of medicine is quite new (*navābhyaṣṭa*). Then again the opponent replies, “I have not studied the scriptures nine times (*navābhyaṣṭa*) but have studied it several times.” This illustrates verbal casuistry.

Casuistry in General :—If somebody makes a statement that the medicine is meant for alleviating a disease, the opponent asks, Did you mean to say that something existent alleviates some other existent thing? A disease is existent and so is the medicine existent. If something existent could alleviate another thing in existence, then *kasa* (cough) is also existent and so is *kṣaya* (consumption). Therefore, according to this general principle cough in existence could also cure consumption.

This illustrates “Casuistry in general.” [56]

Chala (casuistry) is nothing but attaching a different fictitious connotation to a meaningful utterance of the opponent—vide *Nyāyadarśana* 1 : 2 : 10.

Verbal casuistry would also include metaphorical expressions like मञ्चाः क्रोशन्ति meaning thereby that persons sitting on a dias rather than the dias itself are making noise.

General casuistry as defined in *Nyāyadarśana* 1 : 2 : 13 is an intentional shift from the relevant meaning by the process of over-generalisation.

The illustrations cited above represent this sort of distortion of meaning by the process of deceitful over-generalisation.

अथाहेतुः—अहेतुर्नाम प्रकरणसमः, संशयसमः, वर्ण्यसमश्चेति । तत्र प्रकरणसमो नामाहेतुर्यथा—अन्यः शरीरादात्मा नित्य इति; परो ब्रूयात्—यस्मादन्यः शरीरादात्मा, तस्मान्नित्यः; शरीरं ह्यनित्यमतो विधर्मिणा चात्मना भवितव्यमित्येष चाहेतुः; नहि य एव पक्षः स एव हेतुरिति । संशयसमो नामाहेतुर्य एव संशयहेतुः स एव संशयच्छेदहेतुः; यथा—अयमायुर्वैकदेशमाह, किन्वयं चिकित्सकः स्थान्व वेति संशये परो ब्रूयात्—यस्मादयमायुर्वैकदेशमाह तस्माच्चिकित्सकोऽयमिति, न च संशयच्छेदहेतुं विशेषयति, एष चाहेतुः; न हि य एव संशयहेतुः, स एव संशयच्छेदहेतुर्भवति । वर्ण्यसमो नामाहेतुः—यो हेतुवर्ण्याविशिष्टः; यथा—कश्चिद्ब्रूयात्—अस्पर्शत्वाद्बुद्धिरनित्या शब्दवदिति; अत्र वर्ण्यः शब्दो बुद्धिरपि वर्ण्यो, तदुभयवर्ण्याविशिष्टत्वाद्वर्ण्यसमोऽयहेतुः॥५॥

Ahetu (causal fallacy) :

Causal fallacy is of three kinds as given below :—

1. *Prakarana-sama* or stultified fallacy :

If somebody says, “The soul is eternal because it is different from the body,” then the opponent will point out the fallacy underlying the statement, “If the soul is eternal simply because it is different from the body then the statement does not add to any reasoning for the proposition relating to the eternity of the soul because the body being ephemeral and soul being different from the body, it (the soul) would naturally have opposite qualities and so the minor and major terms of the proposition would almost be the same.” This illustrates the fallacy of stultified reasoning.

2. *Samśaya-sama* or Doubtful fallacy :

Fallacy of doubtful reasoning is the one where a doubt reasoning in itself is intended to remove doubts. If somebody puts a query about a physician, “Can a person who knows only a part of the science of medicine be considered as physician ?” The opponent replies, “Because he knows only a part of āyurveda so he is a physician.” Thus the very point of doubt is taken to remove the doubt. This is the fallacy of doubtful reasoning.

3. *Varnya-sama* or fallacy of insignificant causality :

Somebody says, “Intellect is ephemeral because of its intactibility, ‘sound.’” Here intactibility does not help

in establishing the ephemerality of intellect as of the sound as both these items are equally unproven, and sound whose ephemerality is yet to be proven cannot be cited as an illustration. This is the fallacy of insignificant reasoning. [57]

अथातीतकालम्—अतीतकालं नाम यत् पूर्वं वाच्यं तत् पश्चादुच्यते, तत् कालातीत्वादग्राहं भवतीति; पूर्वं वा निग्रहप्राप्तमनिग्रहं परिग्रहं पश्चान्तरितं पश्चान्निग्रहीते, तत्स्यातीतकालत्वाद्विग्रहवचनमसमर्थं भवतीति ॥ ५८ ॥

Atitakāla (*Defiance of Temporal order*) :

If something which is to be stated first in the order of priority is stated later, this constitutes *atitakāla* or defiance of temporal order. Being devoid of temporal propriety this is also not acceptable in the debate. E. G. the proposition is to come first and then the final conclusion. But if somebody gives the final conclusion first and then he states the proposition, this should constitute the defiance of temporal order. Or where there is an occasion for clinchers, if one keeps quiet at that time and after sometime he applies clinchers on some other point, this also constitutes the defiance of temporal order and it is equally unacceptable and irrelevant in the debate. [58]

अथोपालम्भः—उपालम्भो नाम हेतोदौषषवचनं; यथा—पूर्वमहेतवो हेत्वाभासा व्याख्याताः ॥ ५९ ॥

Upalambha (*defective causality*) :

Upalambha stands for pointing out defects in causality as explained in para-57 above. [59]

अथ परिहारः—परिहारो नाम तस्यैव दोषवचनस्य परिहरणं; यथा—नित्यमात्मनि शरीरस्थे जीवलिङ्गान्युपलभ्यन्ते, तस्य चापगमान्त्रोपलभ्यन्ते, तस्मादन्यः शरीरादात्मा नित्यश्वेति ॥ ६० ॥

Parihara (*Correction*) :

Parihara stands for correcting the defects pointed out in respect of the proposition. E. G., in para-57 above, it is shown that being different from the body does not constitute a valid reasoning for the eternity of the soul. The opponents' view point may however, be refuted by saying that so long as the soul is in the body, the marks of life are visible in the body and not otherwise. So the soul is different from the body and is also eternal. [60]

अथ प्रतिज्ञाहानिः—प्रतिज्ञाहानिर्नाम सा पूर्वपरिगृहीतां प्रतिज्ञां पर्यनुयुक्तो यत परित्यजति, यथा प्राक् प्रतिज्ञां कृत्वा नित्यः पुरुष इति, पर्यनुयुक्तस्त्वाह—अनित्य इति ॥ ६१ ॥

Pratijñāhāni (*Shift from the original stand*) :

If one makes a statement and then being attacked by his opponents contradicts his own statement, this is known as *pratijñāhāni* or shift from the original stand.

If somebody makes a statement that the soul is eternal and then attacked by his opponent subsequently changes his view and says, “The soul is ephemeral”, this would amount to shift in the stand. [61]

अथाभ्यनुज्ञा—अभ्यनुज्ञा नाम सा य इष्टानिष्ठाभ्युपगमः ॥ ६२ ॥

Abhyanujñā (*Confessional retort*) :

Where the allegations made by the opponent are accepted and the opponent is also charged with the same allegation, this is known as *abhyanujñā* or confessional retort. E. G. if an opponent says, “You are also a thief.” [62]

Abhyanujñā is known as *matānujñā* in the *Nyāyadarśana*.

अथ हेत्वन्तरं—हेत्वन्तरं नाम प्रकृतहेतौ वाच्ये यद्विकृतहेतुमाह ॥ ६३ ॥

Hetvāntara (*fallacy of reason*) :

When instead of relevant reasoning an irrelevant reasoning is given, it is known as *hetvāntara* or fallacy of reason. [63]

अथार्थान्तरम्—अर्थान्तरं नामैकस्मिन् वक्तव्येऽपरं यदाह । यथा—ज्वरलक्षणे वाच्ये प्रमेहलक्षणमाह ॥ ६४ ॥

Arthāntara (*Irrelevant statement*) :

If somebody starts defining *prameha* (obstinate urinary disorders including Diabetes mellitus), when he ought to define fever, this would constitute irrelevant statement. [64]

अथ निग्रहस्थानं—निग्रहस्थानं नाम पराजयप्राप्तिः; तच्च त्रिरभिहितस्य वाक्यस्यापरिज्ञानं परिषदि विज्ञानवत्यां, यद्वा अननुयोज्यस्यानुयोगोऽनुयोज्यस्य चाननुयोगः । प्रतिज्ञाहानिः, अभ्यनुज्ञा, कालातीतवचनम्, अहेतुः, न्यूनम्, अधिकं, व्यर्थम्, अनर्थकं, पुनरुत्तम्, विरुद्धं, हेत्वन्तरम्, अर्थान्तरं च निग्रहस्थानम् ॥ ६५ ॥

इति वादमार्गपदानि यथोदेशमभिनिर्दिष्टानि भवन्ति ॥ ६६ ॥

Nigrahasthāna (Clincher) :

Clinchers stand for defeat. When in an enlightened scholarly assemblage, a statement is repeated three times but the opponent is unable to understand it or if he enquires about something which ought not to be enquired or he does not enquire about something which ought to be enquired, such situations constitute clinchers. Besides *purtijñāhāni* (shift from the original stand), *abhyanujñā* (confessional retort), *kalati-tavancana* (defiance of the temporal order), *ahetu* (causal fallacy), *nyūna* (semantic deficiency), *adhika* (superfluity), *vyaṛtha* (Semantic incoherence), *anarīlaka* (nonsensical statement), *punarukta* (repetition), *viruddha* (contradictory statement), *letrantara* (fallacy of reason) and *arthāntara* (irrelevant statement) also constitute clinchers.

Thus the various aspects of debate have been duly explained. [65-66]

Guide lines for a debate :

वादस्तु खलु भिषजां प्रवर्तमानो प्रवर्तेतायुर्वेद एव, नान्यत्र । अत्र हि वाक्यग्रतिवाक्यविस्तराः केवलाश्चोपपत्तयः सर्वाधिकरणेषु । ताः सर्वाः समवेक्षयावेक्ष्य सर्वं वाक्यं ब्रूयात्, नाप्रकृतकमशास्त्रमपरीक्षितमसाधकमाकुलमन्यापकं वा । सर्वं च हेतुमद्वयात् । हेतुमन्तो ह्यकलुषाः सर्वं एव वादविग्रहाद्विकित्सने कारणमूताः, प्रशस्तवुद्विवर्धकत्वात्; सर्वारम्भसिद्धिं ह्यावहत्यनुपहता वुद्धिः ॥ ६७ ॥

The debate among physicians relates to nothing else but the science of medicine. The various details about statements and rejoinders as well as fundamental principles (of the debates) mentioned above ofcourse relate to all the scriptures. A physician should make statements with due regard to the principles of debates. He should not make statements out of the context or contrary to scriptural prescriptions or without due examination or irrelevant, confused or too sketchy statements. Whatever he states should be based on arguments. All debates equipped with arguments and flawlessness go a long way towards proper treatment because they enhance the enlightening powers of mental faculty. The mental faculty undisturbed well accomplishes all the objects in view. [67]

Important topics to be known by physicians :

इमानि खलु तावदिह कानिचित् प्रकरणानि भिषजां ज्ञानार्थसुपदे-
क्ष्यामः । ज्ञानपूर्वकं हि कर्मणां समारम्भं प्रशंसन्ति कुशलाः । ज्ञात्वा हि
कारण-करण-कार्ययोनि-कार्य-कार्यफलानुबन्ध-देश-कालप्रवृत्त्युपायान् सम्य-
गभिनिर्वर्तमानः कार्याभिनिर्वृत्ताविष्टफलानुबन्धं कार्यमभिनिर्वर्त्यत्यनति-
महता यत्नेन कर्ता ॥ ६८ ॥

There are some of the important topics which we shall explain for the sake of knowledge of the physicians. The wise admire action initiated with due knowledge. A physician can accomplish the desired object without any special effort, provided he duly initiates action after having full knowledge of *karaṇa* (cause), *karāṇa* (instrument), *kāryayoni* (source of action), *karya* (action itself), *kāryaphala* (fruits of action), *anubandha* (subsequent manifestation), *dēśa* (habitat), *kāla* (season), *pravṛtti* (initiation) and *upāya* (means of action). [68]

(i) *Karaṇa* :

तत्र कारणं नाम तद् यत् करोति, स एव हेतुः, स कर्ता ॥ ६९ ॥

The cause here is the one who initiates action independently, that is to say, the doer or the agent constitutes the cause of action. [69]

(ii) *Karāṇa* :

करणं पुनस्तद् यदुपकरणायोपकल्पते कर्तुः कार्याभिनिर्वृत्तौ प्रयत-
मानस्य ॥ ७० ॥

Karāṇa stands for an instrument which helps an agent in the performance of his action. [70]

Kartṛ is an agent who initiates action independently. *Kartṛ* is considered to be the cause of an action. The *karāṇa* is the instrument which constitutes the means par excellence to the accomplishment of an action.

(iii) *Kāryayoni* :

कार्ययोनिस्तु सा या विक्रियमाणा कार्यत्वमापद्यते ॥ ७१ ॥

The *kāryayoni* (source of an action) is the one which becomes an action by the process of transformation. [71]

The earth constitutes the concomitant cause of a pitcher. The pitcher is nothing but the earth transformed. So a cause transforms itself into an effect. This is considered to be the origin of action.

(iv) *Kārya* :

कार्यं तु तद्यस्याभिनिर्वृत्तिमभिसन्धाय कर्ता प्रवर्तते ॥ ७२ ॥

Action is the one whose accomplishment is kept in view before an agent proceeds to act. [72]

(v) *Kāryaphala* :

कार्यफलं पुनस्तद् यत्प्रयोजना कार्याभिनिर्वृत्तिरिष्यते ॥ ७३ ॥

The object of action stands for the object for which the action is initiated. [73]

(vi) *Anubandha* :

अनुबन्धः खलु स यः कर्तारमवश्यमनुबभाति कार्यादुत्तरकालं कार्यनिमित्तः शुभो वाऽन्यशुभो भावः ॥ ७४ ॥

An after-effect—good or bad—is the one which is bound to leave its impact on the agent after he has performed his action. [74]

(vii) *Desa* :

देशस्त्वधिष्ठानम् ॥ ७५ ॥

Desa (location) represents the site favourable or unfavourable to an action. [75]

(viii) *Kala* :

कालः पुनः परिणामः ॥ ७६ ॥

Time is nothing but a process of transformation into seasons, solstices etc. [76]

(ix) *Pravṛtti* :

प्रवृत्तिस्तु खलु चेष्टा कार्यार्थाः सैव क्रिया, कर्म, यज्ञः, कार्यसमारम्भश्च ॥ ७७ ॥

Pravṛtti (endeavour) represents the initiation of action as a means to the accomplishment of an object. This is action; this is object and this is an effort as well as beginning of action. [77]

(x) *Upāya* :

उपायः पुनख्याणां कारणादीनां सौष्ठुदमभिविधानं च सम्यक् कार्यकार्यफलानुबन्धवर्ज्यानां, कार्याणामभिनिर्वर्तक इत्यतस्तूपायः; कृते नोपायार्थोऽस्ति, न च विद्यते तदात्मे, कृताद्योत्तरकालं फलं, फलाद्यानुबन्ध इति ॥ ७८ ॥

Upāya (device) stands for bringing about excellence in the agent, the instrument and the origin of action and their proper setting. That is to say, a device is the one which

accomplishes the object. Device has no meaning after an action has been performed. The action itself does not exist before it is performed. (So the action cannot in itself be a device.) After an action has been performed, the object is revealed and it (the object) leads to an after effect. So the stage of a proper device comes long before an action is initiated. [78]

As defined in the above passage a device represents an attempt to bring about excellence in the agent, the instrument and the origin of action, so that they are made conducive to an action e.g. if a physician plans to administer errhines, he would be required to arrange for cotton swabs or if a weaver intends to manufacture clothes he would be required to set in proper order threads etc; which constitute the cause of cloths.

The stage of a device comes much prior to the stage of the production of an action. After an action is performed, a device is meaningless. It is not required even in the initiation of an action nor after the accomplishment of an object or its aftereffects. It is required in relation to an agent, an instrument and the origin of action prior to the stage of the actual initiation of an action.

Thorough examination prior to initiating action :

यतद्विधमये परीक्ष्यं, ततोऽनन्तरं कार्यार्था प्रवृत्तिरिष्टा । तस्माद्द्विध-
षक कार्यं चिकीर्षुः प्राक् कार्यसमारम्भात् परीक्षया केवलं परीक्ष्यं परीक्ष्य
कर्म समारभेत कर्तुम् ॥ ७९ ॥

These ten factors should be examined first. One should try to initiate action only thereafter. So a physician desirous of initiating an action should examine all that are required to be examined before initiating his action. [79]

Queries about Pañcakarma :

तत्र चेद्विषग्भिषग्वा भिषजं कश्चिदेवं खलु पृच्छेद्-वमनविरेचनास्थाप-
नानुवासनविशिरोविरेचनानि प्रयोक्तुकामेन भिषजा कतिविधया परीक्षया कति-
विधमेव परीक्ष्यं, कश्चात्र परीक्षयविशेषः, कथं च परीक्षितव्यः, किंप्रयोजना च
परीक्षा, क च वमनादीनां प्रवृत्तिः, क च निवृत्तिः, प्रवृत्तिनिवृत्तिलक्षणसंयोगे
च किं नैषिकं, कानि च वमनादीनां भेषजद्रव्याण्युपयोगं गच्छन्तीति ॥ ८० ॥

So if another physician or a layman asks the physician, "What are the types of examinations and what are the types of objects to be examined by a physician desirous of administering *vamana* (emesis), *virecana* (purgation) *asthāpana* type of enema, *anuvasana* type of enema and *śirovirecana* (errhines) ?

What is it that is to be specifically examined ? How is it to be examined ? What is the object of examination ? When should emesis etc; be administered ? What should be done to determine the administrability or otherwise of these therapies ? What are the drugs which are used for *vamana* (emesis) etc ?" The physician may reply as follows [80]

A bewildering reply :

स एवं पृष्ठे यदि मोहयितुमिच्छेत्, ब्रूयादेन-वहुविधा हि परीक्षा तथा परीक्ष्याविधिभेदः, कतमेन विधिभेदप्रकृत्यन्तरेण भिन्नया परीक्षया केन वा विधिभेदप्रकृत्यन्तरेण परीक्ष्यस्य भिन्नस्य भेदात्र भवान् पृच्छत्यास्यायमानं; नेदार्नी भवतोऽन्येन विधिभेदप्रकृत्यन्तरेण भिन्नया परीक्षयाऽन्येन वा विधिभेदप्रकृत्यन्तरेण परीक्ष्यस्य भिन्नस्याभिलिपितमर्थं श्रोतुमहमन्येन परीक्षाविधिभेदेनान्येन वा विधिभेदप्रकृत्यन्तरेण परीक्ष्यं भिन्नाऽन्यथाऽचक्षणं इच्छां पूरयेयमिति ॥ ८१ ॥

If he wants to bewilder his opponent, he should say, "Diverse are the types of examinations and methods of examining the various objects of examinations. What particular method of examination or what particular type of the object of examination do you want to know ? I will not be able to satisfy your query by describing the method of examination or the type of the object of examination different from what you wish to know." [81]

Situations for giving correct answer :

स यदुत्तरं ब्रूयात्तत् समीक्षयोत्तरं वाच्यं स्यादयथोक्तं च प्रतिवचनविधिमवेक्ष्य; सम्यक् यदि तु ब्रूयात् चैनं मोहयितुमिच्छेत्, प्राप्तं तु वचनकालमन्येत, काममस्मै ब्रूयादाप्तमेव निखिलेन ॥ ८२ ॥

In case the opponent answers these queries, he should duly explain the required method and other aspects of the examination.

If, on the other hand, somebody asks a question in good faith and at the appropriate time and the physician does not want to bewilder the questioner, he should explain everything in detail according as it has been explained in the scriptures. [82]

Three methods of examination :

द्विविधा तु खलु परीक्षा ज्ञानवतां—प्रत्यशम्, अनुमानं च । एतद्वि-
द्यमुपदेशश्च परीक्षा स्यात् । एवमेषा द्विविधा परीक्षा, त्रिविधा वा सहो-
पदेशेन ॥ ८३ ॥

The wise take recourse to two types of examinations—perceptual and inferential. These two combined with instructions constitute the methods of examination.

So the examination is of two types or of three types if “instruction” is also included in it. [83]

Ten important topics for examination :

दशविधिं तु परीक्ष्यं कारणादि यदुक्तमग्रे, तदिह भिषगादिषु संसार्य
संदर्शयिष्यामः—इह कार्यप्राप्तौ कारणं भिषक्, करणं पुनर्भेषजं, कार्ययोनि-
र्धातुवैषम्यं, कार्यं धातुसाम्यं, कार्यफलं सुखावासिः, अनुबन्धः खल्वायुः, देशो
भूमिरातुरक्ष, कालः पुनः संबत्सरश्चातुरावस्था च, प्रवृत्तिः प्रतिकर्मसमारम्भः,
उपायस्तु भिषगादीनां सौष्ठवमभिविधानं च सम्यक् । इहाप्यस्योपायस्य विषयः
पूर्वैवोपायविशेषेण व्याख्यातः । इति कारणादीनि दश दशसु भिषगादिषु
संसार्य संदर्शितानि, तथैवानुपूर्व्यैतद्विधिं परीक्ष्यमुक्तं च ॥ ८४ ॥

In para 68 cause etc., are mentioned as the ten factors that are to be examined. Each of them is described below with relevant illustrations :

1. *Karana* (Cause) : The physician serves as the causative factor for the achievement of the object i.e. the maintenance of the equilibrium of *dhatus*.

2. *Karana* (Instrument) :—
Medicaments.

3. *Karyayoni* (Source of action) :—
Disturbance of the equilibrium of *dhatus*.

4. *Karya* (Action itself) :—
Maintenance of the equilibrium of *dhatus*.

5. *Karyaphala* (Fruits of action) :—
Attainment of happiness, i.e. the state of freedom from a disease.

6. *Anubandha* (Subsequent manifestation) :—
Longevity.

7. *Desa* (Habitat) :—Both the land as well as the patient constitute *desa* or habitat.

8. *Kala* (Time) :—The year consisting of seasons and the state of the disease constitute *kala* or time.
9. *Pravṛti* (Initiation) :—Therapeutic action.
10. *Upāya* (Means of action) :—Excellence of the physician and the correctness of the therapy constitute *upāya* or means of action. Factors which are described as the objects of *upāya* in para 78 are also implied here.

Thus the ten factors, viz. cause etc., are described along-with ten illustrations, viz. physician etc.; these are the ten factors to be examined in succession. [84]

Dhātus or tissue elements in their imbalanced state cause diseases. For the cure of diseases, they are required to be brought to their balanced state. Disturbance of the equilibrium of *dhātus* constitutes the inseparable concomitant cause for the manifestation of the disease; hence it is described as *kāryayoni* or the source of action. Happiness is nothing but the state of an individual when he is free from any disease.—Cf. Sūtra 9 : 4.

Examination of physician :

तस्य यो यो विशेषो यथा तथा च परीक्षितव्यः, स तथा यथा व्याख्या-स्यते ॥ ८५ ॥

कारणं भिषगित्युक्तमग्रे, तस्य परीक्षा—भिषद्वाम यो भिषज्यति, यः सूत्रार्थप्रयोगकुशलः, यस्य चायुः सर्वथा विदितं यथावत् । स च सर्वधातुसाम्यं चिकीर्षन्नात्मानमेवादितः परीक्षेत गुणिषु गुणतः कार्याभिनिर्वृत्तिं पश्यन्, कच्छिद्दह्मस्य कार्यस्याभिनिर्वर्तने समर्थो न वेति, तत्रेमे भिषग्नुणा यैरुपपन्नो भिषग्धातुसाम्याभिनिर्वर्तने समर्थो भवति; तद्यथा—पर्यवदातश्रुतता, परिदृष्टकर्मता, दात्यं, शौचं, जितहस्तता, उपकरणवत्ता, सर्वेन्द्रियोपपन्नता, प्रकृतिश्वसनाता, प्रतिपत्तिश्वसनाता चेति ॥ ८६ ॥

Specificity of each of these ten items and the manner in which they are required to be examined are now being explained.

It is stated in the beginning that the physician is the *sine qua non* for the successful administration of therapies.

A physician is he who treats patients, who is well versed in the applied aspects of the meanings contained in tense aphorisms and who is well acquainted with all aspects of life. Four factors, viz. the physician, the drug, the attendant and the patient should possess some specific qualities in order to

be effective for the cure of a disease. Of them, the physician desirous of bringing about the state of equilibrium of *dhatus* should, first of all, examine himself with a view to ascertaining if he is competent or otherwise to handle the case.

A physician possessed of the following qualities is capable of bringing about the equilibrium of *dhatus*:

1. Knowledge of medical texts in their entirety;
2. practical experience;
3. skill;
4. purity;
5. infallibility of prescriptions;
6. possession of normal sense faculties and all the requisite equipments.
7. knowledge of the various natural manifestations; and
8. presence of mind. [85-86]

Answers to the two queries, viz. (i) what are the specific factors to be examined ? and (ii) how are they to be examined ? are furnished in the above and the following paragraphs.

Examination of drug :

करणं पुनर्भेषजम् । भेषजं नाम तदुपकरणायोपकल्पते भिषजो धातु-साम्याभिनिर्वृत्तौ प्रयत्नमानस्य विशेषतश्चोपायान्तेभ्यः । तद्द्विविधं व्यपाश्रय-भेदात्—दैवव्यपाश्रयं, युक्तिव्यपाश्रयं चेति । तत्र दंवव्यपाश्रयं-मन्त्रौषधि-मणिमङ्गलवल्युपहारहोमनियमप्रायश्चित्तोपासस्वस्त्ययनप्रणिपातगमनादि, यु-क्तिव्यपाश्रयं—संशोधनोपशमने चेष्टाश्च दृष्टफलाः । एतच्चैव भेषजमङ्गभेदादपि द्विविधं-द्रव्यभूतम्, अद्रव्यभूतं च । तत्र यद्द्रव्यभूतं तदुपायाभिसुतम् । उपायो नाम भयदर्शनविस्मापनविस्मारणक्षोभणहर्षणभर्त्सनवधवन्धस्वप्रसंवा-हनादिरमूर्तौ भावविशेषो यथोक्ताः सिद्धयुपायाश्चोपायाभिसुता इति । यत्तु द्रव्यभूतं तद्रमनादिषु योगसुपैति । तस्यापीयं परीक्षा-इदमेवंप्रकृत्यैवंगुणमेवं-प्रभावमस्मिन् देशे जातमस्मिन्नृतावेवं गृहीतमेवं निहितमेवमुपस्कृतमनया च मात्रया युक्तमस्मिन् व्याधावेवविधस्य पुरुषस्यैवतावन्तं दोषमपकर्षत्युपश-मयति वा, यदन्यदपि चैवंविधं भेषजं भवेत्तद्यानेन विशेषेण युक्तिमिति ॥ ८७ ॥

Medicaments constitute the instruments for achieving the object i.e. the cure of the disease. Medicaments are those which are employed by physicians with a view to bringing about the equilibrium of *dhatus*. They are used by

the subject as instruments and include factors other than *kāryayoni* (source of action), *pravṛtti* (initiation), *desa* (habitat), *kala* (time) and *upāya* (means of action).

Depending upon their nature, they are of two types, viz. 1. spiritual and 2. rational. Spiritual therapy comprises incantation, talisman, jewels, auspicious rites, religious sacrifices, oblations, religious rites, vow, atonement, fasting, chanting of auspicious hymns, paying obeisance, pilgrimage etc. Elimination as well as alleviation therapies and such other regimens effects of which can be directly perceived belong to the category of Rational Therapy. Depending upon the nature of their composition, they are also of two types, viz. those having material substrata and those without having any material substrata. The latter category of therapy has indirect action on the disease. It is not an inseparable con-committant cause for the cure of diseases. Terrorising, surprising, dememorising, shocking, exciting, chiding, threatening for murder, binding, inducing sleep, massage etc. are the means employed in the *adravyabhūta* therapy (therapy without involving any material substrata). Therapies having material base are used for emesis etc. They should be examined with reference to their characteristics as follows :

1. nature;
2. qualities;
3. specific actions;
4. place of growth;
5. season of collection;
6. mode of collection;
7. method of preservation;
8. method of processing;
9. dosage in which employed;
10. quantum of dosas eliminated or alleviated from various types of patients suffering from particular types of diseases.

Other drugs having similar characteristics may also be used.

Factors used by the subject as instruments are known as *karana*. This however, does not include *kāryayoni* (source of action), *pravṛtti* (initiation), *desa* (habitat) *kala* (time) and *upāya* (means of action).

Therapies are divided into two categories depending upon their nature viz. spiritual and rational. Psychic therapy is also included here. When the effect of the psychiatric therapy is clearly described, it comes under the category of Rational Therapy. Otherwise it comes under the category of 'Spiritual Therapy.' It is with this end in view that while explaining the rational therapies it is said, "चेष्टाश्च दृष्टफलः;" i.e. regimens effects of which can be directly perceived come under the category of Rational Therapy. *Cetād* (lit. actions) includes the actions on mind in the form of psycho-therapy.

Depending upon the nature of their composition, therapies are again classified into two groups, viz. those having material substrata and those without any material substrata. The latter type of therapy cannot directly act upon the patient and cure the disease. On the other hand, a therapy having material substrata can only constitute an inseparable concomitant cause for the cure of a disease. Therapies without any material substrata, however, act on the patient only indirectly inasmuch as they help in the production of *vāta* etc. only in such quantity which results in the maintenance of equilibrium of all *doṣas*. Thus therapies having material substrata are more useful in the treatment of a condition than those without the material substrata. When duly applied, the therapies without any material substrata, e.g. terrorisation etc. also serve as means to the alleviation of a disease and so they are also considered to be on a par with therapies having material substrata, even though they are not as effective as the latter ones.

In addition to the therapies without any material substrata, other factors like attendants etc., are also taken as 'means' to success in treatment. Such factors are, however, not directly mentioned under the ten-fold examination described above.

Examination of disease :

कार्ययोनिर्धातुवैषम्यं, तस्य लक्षणं विकारागमः । परीक्षा त्वस्य
विकारप्रकृतेश्चैवोनातिरिक्तलिङ्गविशेषावेक्षणं विकारस्य च साम्यासाम्यमृदु-
दारुणलिङ्गविशेषावेक्षणमिति ॥ ८८ ॥

The disturbance of the equilibrium of *dhātus* is the source of action. The disturbance of the equilibrium of *dhātus* is invariably indicated by the onset of the disease. This state of health can be ascertained from the appearance of specific symptoms in smaller or greater degrees due to the *doṣas* responsible for the causation of the disease and also from the specific characteristics of the disease e. g. curability, incurability, mildness, seriousness etc. [88]

Examination to ascertain if the disease is cured :

कार्यं धातुसाम्यं, तस्य लक्षणं विकारोपशमः । परीक्षा त्वस्य-स्थूप-
षशमनं, स्वरवर्णयोगः, शरीरोपचयः, बलबृद्धिः, अभ्यवहार्याभिलापः, रुचि-
राहारकाले; अभ्यवहृतस्य चाहारस्य काले सम्यग्जरणं, निद्रालाभो यथाकालं,
वैकारिणं च स्वमानामदर्शनं, सुखेन च प्रतिवोधनं, वातमूत्रपुरीषरेतसां मुक्तिः,
सर्वाकारैर्मनोबुद्धीन्द्रियाणां चाव्यापत्तिरिति ॥ ८९ ॥

Equilibrium of *dhatus* represents the “action itself.” It is invariably associated with the alleviation or absence of the disease. This state of health can be ascertained from the following :

1. alleviation of pain;
2. appearance of normal voice and complexion;
3. nourishment of the body ;
4. increase in strength;
5. desire for taking food;
6. appetite for food during meal-time;
7. proper digestion of the food taken during meal-time;
8. getting sleep at the appropriate time;
9. absence of dreams indicating morbidity;
10. happy awakening;
11. proper elimination of wind, urine, stool and semen
and
12. unimpairment of mind, intellect and senses and
association of all healthy symptoms therewith. [89]

Signs of normalcy :

कार्यफलं सुखावासिः, तस्य लक्षणं—मनोबुद्धीन्द्रियशरीरतुष्टिः ॥ ९० ॥

Attainment of spiritual happiness is the result of therapeutic action. It is characterised by the pleasure or satisfaction of the mind, intellect, senses and the body. [90]

Signs of ayus :

अनुबन्धस्तु खल्वायुः, तस्य लक्षणं—प्राणैः सह संयोगः ॥ ९१ ॥

Anubandha or subsequent manifestation is the maintenance of life (longevity). It is characterized by its union with *prāṇa* type of *vāyu*. [91]

Examination of the land to ascertain particulars about the patient :

देशस्तु भूमिरातुरश्च ॥ ९२ ॥

तत्र भूमिपरीक्षा आतुरपरिक्षानहेतोर्वा स्यादौषधपरिक्षानहेतोर्वा । तत्र तावदियमातुरपरिक्षानहेतोः । तद्यथा-अयं कस्मिन् भूमिदेशे जातः संबृद्धो व्याधितो वा; तर्स्मश्च भूमिदेशे मनुष्याणामिदमाहारजातम्, इदं विहारजातम्, इदमाचारजातम्, एतावच्च बलम्, एवंविधं सत्त्वम्, एवंविधं सात्म्यम्, एवंविधो दोषः, भक्तिरिथम्, इमे व्याधयः, हितमिदम्, अहितमिदमिति प्रायो-ग्रहणेन । औषधपरिक्षानहेतोस्तु कल्पेषु भूमिपरीक्षा वक्ष्यते ॥ ९३ ॥

Both the land as well as the patient constitute *désa* or habitat. Nature of the land is examined with a view to ascertaining the specific features of individual patients as well as the medicinal plants in different localities. The following points are to be examined with reference to the patient :

1. place of birth, growth and affliction with the disease;
2. specific features concerning food, exercise, customs, strength, mental condition, homologation by habit, dominance of one or the other of the *dosas*, liking, manifestation of diseases and things which are useful and harmful.

The above information is generally obtained by the examination of the land.

The characteristic features of different types of land leading to the determination of specific features of medicinal plants will be described in *Kalpa* 1 : 8 [92-93]

The term *désa* meaning habitat includes both the patients as well as healthy individuals. Individuals of the latter category are included here because they are also susceptible to the attacks of diseases. They are required to be examined with a view to administering such regimens as would keep them healthy.

Examination of various types of land is described only in the first chapter of *kalpasthāna* and the same holds good for the plants described in the remaining eleven chapters of *kalpasthāna*.

Examination of Patient :

आतुरस्तु खलु कार्यदेशः । तस्य परीक्षा आयुषः प्रमाणक्षानहेतोर्वा स्याद्, बलदोषप्रमाणक्षानहेतोर्वा । तत्र तावदियं बलदोषप्रमाणक्षानहेतोः; दोषप्रमाणानुरूपो हि भेषजप्रमाणविकल्पो बलप्रमाणविशेषापेक्षो भवति । सहसा ह्यतिबलमौषधमपरीक्षकप्रयुक्तमल्पबलमातुरमतिपातयेत्; न ह्यतिबलान्यानेयवायवीयान्यौषधान्यग्रिक्षारशास्त्रकर्माणि वा शक्यन्तेऽल्पबलैः सोदुम्, असहातितीक्ष्णवेगत्वाद्विं तानि सद्यःप्राणहराणि स्युः । एतच्चैव कारणमपेक्षमाणा

हीनबलमातुरमविषादकरैमृदुसुकुमारप्रायैरुत्तरोत्तरगुरुमिरविभ्रमैरनात्ययिकैश्चो-
पचरन्त्यौषधैः; विशेषतश्च नारीः, ता ह्यनवस्थितमृदुविवृतविकृतवृद्धयाः
प्रायः सुकुमार्योऽवलाः परसंस्तम्भ्याश्च । तथा बलवति बलवद्याधिपरिगते
स्वल्पबलमौषधमपरीक्षकप्रयुक्तमसाधकमेव भवति । तस्मादातुरं परीक्षेत प्रकृ-
तितश्च, विकृतितश्च, सारतश्च, संहननतश्च, प्रमाणतश्च, सात्म्यतश्च, सत्त्वतश्च,
आहारशक्तितश्च, इयायामशक्तितश्च, वयस्तश्चेति, बलप्रमाणविशेषग्रहण-
द्वेतोः ॥ ९४ ॥

A patient constitutes the *karyadeśa* or the site for the administration of therapies with a view to bringing about equilibrium of *dhātus*. He should be examined so as to obtain knowledge regarding the span of life, strength and the intensity of morbidity. Here, the purpose of examination is to obtain the knowledge relating to the strength of the individual and the intensity of morbidity, because, it is on the basis of the intensity of morbidity that the dosage of the therapy is determined and the latter is dependant upon the strength or the power of resistance of the individual. If strong things are immediately administered without proper examination, to a weak patient, this might result in his death. Weak patients are incapable of resisting strong therapies like medicaments dominating in *agni* and *vāyu mahābhūtas*, application of alkalies and heat (cauterisation) and surgical operations. These therapies cause immediate death of the patient because of their very sharp action which are too strong for the individual. Thus a weak patient should be given such mild and tender therapies as are not injurious to the body and the mind. Stronger therapies which are neither distressing during their digestion nor associated with serious complications may be administered slowly and gradually. Such therapies are specifically needed for ladies because they are by nature unsteady, light (not deep) and of sensitive or weak temperament and also because they are mostly tender and subordinate to others. Similarly, if weak therapies are administered to a strong individual having a serious disease without proper examination, the disease does not get cured. Therefore, the patient should be examined with reference to his *prakṛti* (physical constitution), *vikṛti* (morbidity), *sāra* (excellence of *dhātus*, or tissue elements), *samphanana* (compactness of organs), *pramāṇa* (mea-

surement of the organs of the body), *sātmya* (homologation), *satiya* (psychic conditions), *dhārasakti* (power of intake and digestion of food), *vyaayama-sakti* (power of performing exercise) and *vayas* (age) in order to ascertain his strength and the intensity of the malady. [94]

The dosage in which a therapy is to be administered depends upon the intensity of morbidity as well as the strength of the patient. A strong patient with a serious disease needs the therapy in a stronger dose. Mistakes like giving strong therapies to weak patients and *vice versa* can be avoided if patients are duly examined beforehand. Even if a weak person is suffering from a serious disease which requires a strong therapy for cure, he should not be given a strong therapy all of a sudden. Such a patient should be given strong therapy slowly and gradually, depending upon his strength and power of resistance gained.

Prakṛti :

तत्र प्रकृत्यादीन् भावाननुव्याख्यास्यामः । तद्यथा—शुक्रशोणितप्रकृतिं, कालगर्भाशयप्रकृतिं, मातुराहारविहारप्रकृतिं, महाभूतविकारप्रकृतिं च गर्भशरीरमपेक्षते । एतानि हि येन येन दोषेणाधिकेनैकेनानेकेन वा समनुवध्यन्ते, तेन तेन दोषेण गर्भोऽनुवध्यते; ततः सा सा दोषप्रकृतिरुच्यते मनुष्याणां गर्भादिप्रवृत्ता । तस्माच्छ्लेष्मलाः प्रकृत्या केचित्, पित्तलाः केचित्, वातलाः केचित्, संसृष्टाः केचित्, समधातवः केचिद्द्वचन्ति । तेषां हि लक्षणानि व्याख्यास्यामः ॥ ९५ ॥

Now we shall explain the characteristic features of *prakṛti* (physical constitution etc.,). *Prakṛti* or physical constitution of the foetus is determined by the following factors:—

1. sperms and ovum;
2. season and condition of the uterus;
3. food and regimens of the mother; and
4. nature of the *mahabhūtas* comprising the foetus.

The foetus gets afflicted with one or more of the *dosas* which are dominantly associated with the above mentioned factors. The physical constitution of an individual is determined on the basis of these dominant *dosas* in the above mentioned factors when they initially unite in the form of foetus. Therefore, the physical constitution of some is dominated by *kapha* (*ślesmala*), of some others by *pitta* (*pittala*) of others by *vata* (*vātala*) and of some others by the combination of two *dosas* (*samsṛṣṭa*). In some other cases, however, the

equilibrium of *doṣas* (*samaprakṛti*) is well maintained. We shall now expound their characteristic features one after the other. [95]

Doṣas dominating the sperms and the ovum during the time of conception and also those inhabiting the uterus at that time determine the *prakṛti* (physical constitution) of the individual. Food and regimens of the mother which aggravate *doṣas* at that time also determine the physical constitution. The *doṣa(s)* which ultimately emerge as dominant factors actually determine the *prakṛti* or the physical constitution. Season etc., also indirectly serve as important factors for the determination of *prakṛti* inasmuch as they also aggravate *doṣas* in the sperms and ovum. So according to some other texts on medicine *prakṛti* of an individual is determined on the basis of the condition of the sperms and ovum.

When all the three *doṣas* are aggravated then there will be no conception at all and therefore, *prakṛti* arising out of the aggregation (combination) of all the three *doṣas* (*sāmnipātika*) is not enumerated in the text.

Characteristics of Śleṣmala individual :

श्लेष्मा हि स्त्रियधर्मशुलक्षणमृदुमधुसारसान्द्रमन्दस्तिमितगुरुशीतविज्ञलाच्छः । तस्य श्वेहाच्छ्लेष्मलाः स्त्रियाङ्गाः, शुलक्षणत्वाच्छ्लेष्माङ्गाः, मृदुत्वाद्वृष्टिसुखसुकुमारावदातगात्राः, माधुर्यात् प्रभूतशुकव्यवायापत्याः, सारत्वात् सारसंहृतस्थिरशरीराः, सान्द्रत्वादुपचितपरिपूर्णसर्वाङ्गाः, मन्दत्वान्मन्दवेष्टाहारव्याहाराः, स्तैमित्यादशीघ्रारभक्षोभविकाराः, गुरुत्वात् साराधिष्ठितावस्थतगतयः, शैत्यादल्पशुक्तृष्णासंतापस्वेददोषाः, विज्ञलत्वात् सुश्लिष्टसारसन्धिवन्धनाः तथाऽच्छ्लेष्मलात् प्रसन्नदर्शनाननाः प्रसन्नस्त्रियधर्मवर्णस्वराश्च भवन्ति । तएवंगुणयोगाच्छ्लेष्मला बलवन्तो वसुमन्तो विद्यावन्त ओजस्विनः शान्ता आयुमन्तश्च भवन्ति ॥ ९६ ॥

Kapha is unctuous, smooth, soft, sweet, firm, dense, slow, stable, heavy, cold, viscous and clear.

The various manifestations in the human body having *śleṣmala* type of constitution are given below :

Attributes of Śleṣma Specific manifestations in the body of the individual having Śleṣmala type of constitution.

- | | |
|-------------|--|
| 1. Unctuous | unctuousness of organs. |
| 2. smooth | smoothness of organs. |
| 3. soft | pleasing appearance, tenderness and clarity of complexion. |

4. Sweet	increase in the quantity of semen, desire for sex-act and number of procreation.
5. firm	firmness, compactness and stability of the body.
6. dense	plumpness and roundedness of all organs.
7. slow	slow in action, intake of food and movement.
8. stable	slowness in initiating actions, getting irritated and morbid manifestations.
9. heavy	non-slippery and stable gait with the entire sole of the feet pressing against the earth.
10. cold	lack of intensity in hunger, thirst, heat and perspiration.
11. viscous	firmness and compactness in joints.
12. clear	happiness in the look and face; happiness and softness of complexion and voice.

By virtue of the above mentioned qualities, a man having *slesmala* type of constitution is endowed with the excellence of strength, wealth, knowledge, energy, peace and longevity. [96]

Characteristics of pittala individual :

पित्तमुष्णं तीक्ष्णं द्रवं विस्तमस्तु कदुकं च । तस्यौष्ण्यात् पित्तला भवन्त्युष्णासहा, उष्णमुखाः, सुकुमारावदातगात्राः, प्रभूतपिष्ठव्यङ्गतिलपिडकाः, क्षुत्पिपासावन्तः, क्षिप्रबलीपलितखालित्यदोषाः, प्रायो मृद्गलपकपिलश्मश्रुलोमकेशाश्च तैक्षण्यात्तीक्षणपराक्रमाः, तीक्ष्णाग्नयः, प्रभूताशनपानाः, क्लेशासहिष्णवो, दन्दशूकाः, द्रवत्वाच्छिथिलमृदुसन्धिमांसाः, प्रभूतसृष्टस्वेदमूच्चपुरीषाश्च; विस्त्वात् प्रभूतपूतिकक्षास्यशिरःशारीरगन्धाः; कटुमलत्वादल्पशुक्रव्यायापत्याः; त पवंगुणयोगात् पित्तला मध्यबला मध्यायुषो मध्यज्ञानविज्ञानविज्ञानवित्तोपकरणवन्तश्च भवन्ति ॥ ९७ ॥

Pitta is hot, sharp, liquid, of fleshy smell, sour and pungent. Various manifestations due to these attributes in the human body having *pittala* type of constitution are as in the table given below :

Attributes of pitta

1. hot

Specific manifestations in the body of the individual having pittala type of constitution.

intolerance for hot things, having hot face tender and clear body of port-wine mark, freckles, blackmoles excessive hunger and thirst; quick advent of wrinkles, graying of hair and baldness; presence of some soft and brown hair in the face, head and other parts of the body.

2. sharp

sharp (demonstration of) physical strength, strong digestive power, intake of food and drink in large quantity, inability to face difficult situations and glutton habits;

3. liquor

looseness and softness of joints and muscles; voiding of sweat, urine and feces in large quantity.

4. fleshy smell

putrid smell of axilla, mouth, head and body in excess;

5. pungent and sour tastes

insufficiency of semen, sexual desire and procreation.

By virtue of the above mentioned qualities, a man having *pittala* type of constitution is endowed with moderate strength, moderate span of life, moderate spiritual and materialistic knowledge, wealth and the accessories of life. [97]

Characteristics of vātala individual :

वातस्तु रूक्षलघुचलवहुशीघ्रशीतपरुपविशदः । तस्य रौक्ष्याद्वातला रूक्षापचितालपशरीराः प्रततरुक्षकामसन्नसक्तजर्जरस्वरा जागरुकाश्च भवन्ति, लघुत्वाल्पघुचलगतिचेष्टाहारव्याहाराः, चलत्वादनवस्थितसन्ध्यक्षिभ्रह्म्योष्टजिह्वाशिरःस्कन्धपाणिपादाः, वहुत्वाद्वहुप्रलापकण्डरासिराप्रतानाः, शीघ्रत्वाच्छ्रीघ्रसमारम्भोभविकाराः, शीघ्रत्रासरागविरागाः श्रुतग्राहिणोऽल्पस्मृत्यश्च, शैत्याच्छ्रीतासहिष्णवः प्रतशीतकोद्वेपकस्तम्भाः, पारुष्यात् परुषकेराशमश्रुरोमनखदशनवदनपाणिपादाः, वैशद्यात् स्फुटिताङ्गावयवाः सततसन्धिशब्दगामिनश्च भवन्ति; त एवं गुणयोगाद्वातलाः प्रायेणाल्पबलाश्चालपायुषश्चालपात्याश्चालपसाधनाश्चालपधनाश्च भवन्ति ॥ ९८ ॥

संसर्गात् संस्थृष्टलक्षणाः ॥ ९९ ॥

Vata is ununctuous, light, mobile, abundant in quantity, swift, cold, rough and non-slime. Various manifestations due to these attributes of *vata* in human body having *vatala* type of constitution are given in the table below :

<i>Attributes of vata</i>	<i>Specific manifestations in the body of the individual having vatala type of constitution :</i>
1. Ununctous—	Ununctuousness, emaciation and dwarfness of the body; longdrawn, dry low, broken, obstructed and hoarse voice; always keeping awake;
2. light--	light and inconsistant gait, action, food and movement;
3. mobile—	unstable joints—eyes, eye brows, jaws, lips, tongue, head, shoulder, hands and legs;
4. abundance—	talkativeness, abundance in tendons and veins;
5. swift—	quick in initiating actions, getting irritated and the onset of morbid manifestation; quick in affliction with fear, quick in likes and dislikes; quick in understanding and forgetting things;
6. cold—	intolerance for cold things; often getting afflicted with cold, shivering and stiffness;
7. rough—	roughness in the hair of the head, face and other parts of the body, nails, teeth, face, hands and feet.
8. non-slime—	cracking of the limbs and organs, production of cracking sound in joints when they move;

Because of the above mentioned qualities, individuals having *vatala* type of constitution are mostly possessed of strength, span of life, procreation, accessories of life and wealth in lesser quantity.

Individuals having constitution dominated by the combination of two *dosas* are characterized by the combination of the manifestations of respective *dosas*. [98-99]

सर्वगुणसमुदितास्तु समधातवः । इत्येवं प्रकृतितः परीक्षेत ॥ १०० ॥

A *samadhatu* type of individual who has all the *dosas* in the state of equilibrium is endowed with the good qualities of all the three types of individuals described in para 96-98. Thus an individual should be examined for his constitution. [100]

In a *samadhatu* type of individual, good qualities of all the three types of individuals are manifested. Vāgbhaṭa therefore, has described this to be the best of all types of constitution—cf. *Aṣṭāṅgahīdaya : Sūtra* 1 : 10. It is only when all the three *dosas* are in a state of equilibrium that their good qualities are manifested and not otherwise.

Factors required to be examined to ascertain the nature of disease :

विकृतितश्चेति विकृतिरुच्यते विकारः । तत्र विकारं हेतु-दोष-दूष्य-प्रकृति-देश-काल-बलविशेषैर्लिङ्गतश्च परीक्षेत, न ह्यन्तरेण हेत्वादीनां बलविशेषं व्याधिबलविशेषोपलब्धिः । यस्य हि व्याधेदोष-दूष्य-प्रकृति-देश-काल-बलसाम्यं भवति, महत्त्वं हेतुलिङ्गबलं, स व्याधिर्बलवान् भवति; तदिपर्ययाच्चालपबलं; मध्यबलस्तु दोषदूष्यादीनामन्यतमसामान्यादेतुलिङ्गमध्यबलत्वाचोपलभ्यते । १०१ ।

According to para 94, a patient is to be examined for the *vikṛti* or morbid manifestations. These morbid manifestations are to be examined with reference to the specific causative factors, *dosas* and *dhātus* involved in the pathogenesis, constitution of the individual, habitat, season and strength and also the symptoms of the diseases. Without determining the strength of the causative factors etc.; it is not possible to obtain the knowledge regarding the intensity of the disease.

If the afflicted *dosas* and *dhātus*, physical constitution of the patient, habitat, season and strength of the individual resemble that of the disease in quality and the causative factors and symptoms are too strong and numerous, the disease so manifested is acute; otherwise, it is mild. If either of the *dosas*, *dhātus* etc., resemble that of the disease in quality and the causative factors and symptoms of the disease are of moderate nature, the disease so manifested is also moderate. [101]

Examination of sāra :

सारतश्चेति साराण्यष्टौ पुरुषाणां बलमानविशेषज्ञानार्थं मुपदिश्यन्ते;
तथा—त्वग्रक्तमांसमेदोऽस्मित्यमज्जशुक्रसत्त्वानीति ॥ १०२ ॥

According to para 94, patients are to be examined with reference to *sāra* or the excellence of their *dhātus*. With a view to determining the specific measure of strength they are classified into eight categories, depending upon the *sāra* or excellence of their *dhātus*, viz. *tvak* (lit. meaning skin but contextually meaning *rasadhātu*), *rakta* (blood), *māmsa* (muscle tissue), *medas* (adipose tissue), *asthi* (bone tissue), *majja* (marrow) *śukra* (semen) and *sattva* (mental faculties). [102]

(i) *Tvak-sāra* :

तत्र स्त्रिघरश्लक्षणमुदुप्रसन्नसूक्ष्माल्पगम्भीरसुकुमारलोमा सप्रभेव च
त्वक् त्वक्साराणाम् । सा सारता सुखसौभाग्यैश्वर्योपमोगवृद्धिविद्यारोग्यप्रदृष्ट-
णान्यायुष्यत्वं चाचष्टे ॥ १०३ ॥

Individuals having the excellence of *tvak* or skin are characterized by unctuous, smooth, soft, clear, fine, less numerous, deep rooted and tender hair and lustrous skin. Such individuals are endowed with happiness, good fortunes, power, enjoyment, intellect, knowledge, health, excitement and longevity. [103]

(ii) *Rakta-sāra* :

कर्णाक्षिमुखजिह्वानासौष्ठुपाणिपादतलनखलाटमेहनं स्त्रिघररक्तवर्णं श्री-
मञ्जाजिष्णु रक्तसाराणाम् । सा सारता सुखमुद्रां मेधां मनस्त्वत्वं सोकुमार्य-
मनतिवलमङ्गेशसहिष्णुत्वमुण्णासहिष्णुत्वं चाचष्टे ॥ १०४ ॥

Individuals having the excellence of *rakta* or blood are characterized by unctuousness, red colour, beautiful dazzling appearance of the ears, eyes, face, tongue, nose, lips, sole of the hands and feet, nails, forehead and genital organs. Such individuals are endowed with happiness, great genius, enthusiasm, tenderness, moderate strength and inability to face difficulties. Their body remains hot. [104]

(iii) *Māmsa-sāra* :

शङ्खललाटकाटिकाक्षिगण्डहनुग्रीचास्कन्थोदरकक्षवक्षःपाणिपादसन्ध-
यः स्थिरगुरुभमांसोपचिता मांससाराणाम् । सा सारता क्षमां धृतिमलौल्यं
वित्तं विद्यां सुखमार्जवमारोग्यं बलमायुश्च दीर्घमाचष्टे ॥ १०५ ॥

Individuals having the excellence of the *māmsa* or muscle tissue are characterised by stability, heaviness, beautiful appearance and plumpness of temples, forehead, nape, eyes,

cheeks, jaws, neck, shoulder, abdomen, axilae, chest and joints of upper and lower limbs being covered with flesh. Such individuals are endowed with forgiveness, patience, non-greediness, wealth, knowledge, happiness, simplicity, health, strength and longevity. [105]

(iv) *Medah sāra* :

वर्णस्वरनेत्रकेशलोमनखदन्तौष्ठमूत्रपुरीषेषु विशेषतः खेहो मेदःसारा-
णाम् । सा सारता वित्तश्वर्यसुखोपभोगप्रदानान्यार्जं च सुकुमारोपचारतां
चाचष्टे ॥ १०६ ॥

Individuals having the excellence of *medas* or adipose tissue are characterized by the abundance of unctuousness in complexion, voice, eyes, hair of the head and other parts of the body, nail, teeth, lips, urine and feces. Such individuals are endowed with wealth, power, happiness, enjoyment, charity, simplicity and delicate habits. [106]

(v) *Asthi-sāra* :

पाञ्चिंगुलज्ञान्वरत्तिजनुचिद्वुकशिरःपर्वस्थूलाः स्थूलास्थिनखदन्ताश्चा-
स्थिसाराः । ते महोत्साहाः कियावन्तः द्वेशसाहाः सारस्थिरशरीरा भवन्त्यायु-
मन्तश्च ॥ १०७ ॥

Individuals having the excellence of *asthi* or bone tissue are characterized by robust heels, ankles, knees, fore-arms, collar-bones, chin, head, joints, bones, nails and teeth. Such individuals are very enthusiastic and active, and are endowed with strong and firm bodies as well as longevity. [107]

(vi) *Majja-sāra* :

मृद्गङ्गा बलवन्तः स्त्रिघर्णस्वराः स्थूलदीर्घवृत्तसन्धयश्च मज्जसाराः ।
ते दीर्घायुषो बलवन्तः श्रुतवित्तविज्ञानापत्यसंमानभाजश्च भवन्ति ॥ १०८ ॥

Individuals having the excellence of *majja* or marrow are characterized by softness of organs, strength, unctuous complexion and voice and robust long and rounded joints. Such individuals are endowed with longevity, strength, learning, wealth, knowledge, progeny and honour. [108]

(vii) *Śukra-sāra* :

सौम्याः सौम्यग्रेक्षिणः क्षीरपूर्णलोचना इव प्रहर्षवृहुलाः स्त्रिघर्णवृत्तसार-
समसंहृतशिखरदशनाः प्रसन्नस्त्रिघर्णस्वरा भ्राजिष्णवो महास्फुचश्च शुक्र-
साराः । ते खीरियोपभोगा बलवन्तः सुखैश्वर्यरोग्यवित्तसंमानापत्यभाजश्च
भवन्ति ॥ १०९ ॥

Individuals having the excellence of *sukradhātu* or semen are characterized by gentleness, gentle look, having eyes as if filled with milk, cheerfulness, having teeth which are unctuous, round, strong, even and beautiful, clean and unctuous complexion and voice, dazzling appearance and large buttocks. Such individuals are loved by women, they are strong and endowed with happiness, power, health, wealth, honour and children. [109]

(viii) *Sattva-sara* :

स्मृतिमन्तो भक्तिमन्तः कृतशाः प्राश्नाः शुचयो महोत्साहा दक्षा धीराः
समरविक्रान्तयोधिनस्त्वक्विषादाः सुव्यवस्थितगतिगम्भीरवुद्दिचेष्टाः कल्याणा-
भिनिवेशिनश्च सत्त्वसाराः । तेषां स्वलक्षणैरेव गुणा व्याख्याताः ॥ ११० ॥

Individuals having the excellence of mental faculties are characterized by good memory, devotion, gratefulness, wisdom, purity, excessive enthusiasm, skill, courage, valour in fighting, absence of sorrow, proper gait, depth of wisdom and sincerity in actions and virtuous acts. (These characteristic features represent the qualities of such individuals.) [110]

Individuals having all sāras :

तत्र सर्वैः सारैरूपेताः पुरुषा भवन्त्यतिबलाः परमसुखयुक्ताः क्लेशसहाः
सर्वारम्भेष्वात्मनि ज्ञातप्रत्ययाः कल्याणाभिनिवेशिनः स्थिरसमाहितशरीराः सुस-
माहितगतयः सानुनादस्त्रिगंधगम्भीरमहास्वराः सुखैर्वर्यवित्तोपभोगसंमानसाजो
मन्दजरसो मन्दविकाराः प्रायस्तुल्यगुणविस्तीर्णपत्याश्चिरजीविनश्च ॥ १११ ॥

Individuals possessed of the excellence of all the above mentioned *dhatus* including mental faculties (as described in para Nos. 103-110) are endowed with great strength and happiness, resistance to difficulties, self-confidence in all enterprises, virtuous acts, firm and well built body, correct gait; resonant, melodious and high pitched voice, happiness, power, wealth, enjoyments, honour, slowness of aging process, resistance for diseases, large number of children with similar qualities and longevity. [111]

अतो विपरीतास्त्वसाराः ॥ ११२ ॥

मध्यात्मानं मध्यैः सारविशेषैर्गुणविशेषा व्याख्याता भवन्ति ॥ ११३ ॥

Qualities opposite to what are described in paragraphs 103-111 are indicative of the absence of the excellence of respective *dhatus* in the individual.

Individuals having excellence of these *dhatus* of moderate nature are possessed of respective qualities in moderate intensity. [112-113]

इति साराख्यष्टौ पुरुषाणां वलप्रमाणविशेषज्ञानार्थमुपदिष्टानि
भवन्ति ॥ ११४ ॥

Thus the eight categories of individuals, depending upon the *sara* or excellence of *dhatus* are described in brief, with a view to determining the measurement of their strength. [114]

Need for examination of sara :

कथं तु शरीरमात्रदर्शनादेव भिषड्हृदयमुपचितत्वाद्वलबान्, अयमल्प-
बलः कृशत्वात्, महाबलोऽयं महाशरोरत्वात्, अयमल्पशरीरत्वाद्वलपबल इति;
दृश्यन्ते ह्यल्पशरीराः कृशाश्चैके वलवन्तः; तत्र पिपीलिकाभारहरणवत् सिद्धिः।
अतश्च सारतः परीक्षेतेत्युक्तम् ॥ ११५ ॥

It is fallacious to consider an individual to be strong or weak either from his plump or emaciated body or from the large or small size of his body. Some people having a small sized and emaciated body are seen to be strong. They are like ants who have a small body and look emaciated but can carry too heavy a load. Thus one should examine the individual with reference to the excellence of his *dhatus*. [115]

Samhanana :

संहननतश्चेति संहननं, संहतिः, संयोजनमित्येकोऽर्थः। तत्र समसुवि-
भक्तास्थि, सुबद्धसन्धि, सुनिविष्टमांसशोणितं, सुसंहतं शरीरमित्युच्यते। तत्र
सुसंहतशरीराः पुरुषा वलवन्तः, विपर्ययेणाल्पबलाः, मध्यत्वात् संहननस्य
मध्यबला भवन्ति ॥ ११६ ॥

According to para-94, a patient is to be examined with reference to his *samhanana* or compactness of the body. *Samhanana*, *samhati* and *samyojana*-these three terms are synonymous. A compact body is characterized by the symmetrical and well devided bones, well-knit joints and well bound muscles and blood. An individual having a compact body is very strong; otherwise he is weak. When the body is moderately compact, the individual is possessed of moderate strength. [116].

Pramadna :

प्रमाणतश्चेति शरीरप्रमाणं पुनर्यथास्वेनाङ्गुलिप्रमाणेनोपदेश्यते उत्सेध-
विस्तारायामैर्यथाक्रमम्। तत्र पादौ चत्वारि षट् चतुर्दशाङ्गुलानि, जङ्घे त्वष्टा-

दशाङ्कुले षोडशाङ्कुलपरिक्षेपे च, जानुनी चतुरङ्कुले षोडशाङ्कुलपरिक्षेपे, त्रिशद-
ङ्कुलपरिक्षेपावष्टादशाङ्कुलाम्, षडङ्कुलदीघौं वृषणावष्टाङ्कुलपरिणाहौ, शेफः षडङ्कुलदीर्घं पञ्चाङ्कुलपरिणाहं, द्वादशाङ्कुलपरिणाहो भगः, षोडशाङ्कुलविस्तारा
कटी, दशाङ्कुलं वस्तिशिर, दशाङ्कुलविस्तारं द्वादशाङ्कुलमुदरं, दशाङ्कुलविस्तीर्णं
द्वादशाङ्कुलायामे पार्श्वे, द्वादशाङ्कुलं स्तनान्तर, द्वाङ्कुलं स्तनपर्यन्तं, चतुर्विंशत्य-
ङ्कुलविशालं द्वादशाङ्कुलोत्सेधमुरः, द्वाङ्कुलं हृदयम्, अष्टाङ्कुलौ स्कन्धौ, षडङ्कु-
लायंसौ, षोडशाङ्कुलौ प्रवाहू, पञ्चदशाङ्कुलौ प्रपाणी, हस्तौ द्वादशाङ्कुलौ, कक्षा-
वष्टाङ्कुलौ, त्रिकं द्वादशाङ्कुलोत्सेधम्, अष्टादशाङ्कुलोत्सेधं पृष्ठं, चतुरङ्कुलोत्सेधा
द्वार्विंशत्यङ्कुलपरिणाहा शिरोधरा, द्वादशाङ्कुलोत्सेधं चतुर्विंशत्यङ्कुलपरिणाहमा-
ननं, पञ्चाङ्कुलमास्यं, चित्रुकौष्ठकर्णाक्षिमध्यनासिकाललाटं चतुरङ्कुलं, षोडशाङ्कु-
लोत्सेधं द्वार्विंशत्यङ्कुलपरिणाहं शिरः, इति पृथक्त्वेनाङ्गावयवानां मानमुक्तम् ।
केवलं पुनः शरीरमङ्कुलिपर्वार्णं चतुरशीतिः । तदायामविस्तारसमं समुच्चरते ।
तत्रायुर्बलमोजः सुखमैश्वर्यं वित्तमिष्टाश्चापरे भावा भयन्त्यायत्ताः प्रमाणवति
शरीरे; विपर्ययस्त्वतो हीनेऽधिके वा ॥ ११७ ॥

According to para-94, the patient is also to be examined with reference to *pramāṇa* or the measurement of his bodily organs. This is determined by measuring the height, length and breadth of the organs by taking the finger breadth of the individual as the unit of measurement. (One finger breadth of a medium sized adult is approximately 1.95 cm.)

Measurement of organs as are endowed with all good qualities are given in the table below :

Measurement with finger breadth of the individual as a Unit.

Organs	Height	length	breadth	circum- ference	Others (not spe- cified.)
(1)	(2)	(3)	(4)	(5)	(6)
1. feet	4	14	6	-	-
2. <i>jāṅgha</i> (calf region)	-	18	-	16	-
3. knees	-	4	-	16	-
4. thighs	-	18	-	30	-
5. testicles	-	6	-	8	-
6. phallus	-	6	-	5	-
7. vagina	-	-	-	12	-
8. waist	-	-	16	-	-

Organs	Height	length	breadth	circum- ference	Others (not spe- cified.)
(1)	(2)	(3)	(4)	(5)	(6)
9. <i>bastiśiras</i> (top of pelvis)	-	-	-	-	10
10. abdomen	-	12	10	-	-
11. pārśva (sides of chest)	-	12	10	-	-
12. distance between the nipples	-	-	-	-	12
13. nipples	-	-	-	2	-
14. chest	12	-	24	-	-
15. <i>hṛdaya</i> (heart)	-	-	-	-	2
16. shoulders	-	-	-	-	18
17. shoulder blades	-	-	-	-	6
18. <i>pratāhu</i> (arms)	-	-	-	-	16
19. fore-arms	-	-	-	-	15
20. hands	-	-	-	-	20
21. axillae	-	-	-	-	8
22. <i>trika</i> (sac- rum inclu- ding coccyx)	12	-	-	-	-
23. back	18	-	-	-	-
24. neck	4	-	-	22	-
25. face	12	-	-	24	-
26. mouth	-	-	5	-	-
27. chin	-	-	-	-	4
28. lips	-	-	-	-	4
29. ears	-	-	-	-	4

Organs	Height	length	breadth	circum ference	Others (not spe- cified.)
(1)	(2)	(3)	(4)	(5)	(6)
30. distance between the eyes (external angles of the eyes)	-	-	-	-	4
31. nose	-	-	-	-	4
32. fore-head	-	-	-	-	4
33. head	16	-	-	32	-
34. Entire- body	84	-	84	-	-

(when hands are fully out-spread)

Thus the measurement of individual organs of the body are described. A body possessed of organs having proper measurement is endowed with longevity, strength, *ojas* (energy), happiness, power, wealth and virtues. If the measurement is either on the high or low side, the individual possesses qualities contrary to what are mentioned above. [117]

The measurements of organs given in the table above are the most standard ones. The circumference of organs like the calf region, of course, varies from place to place. Therefore, the circumference of the middle part of such organs is furnished here.

The term '*trika*' stands for the region beginning from the tip of the coccyx up to the level of the upper border of hip bones (iliac crest). The height of the head is sixteen *aṅgulas*. It should be measured from the point from where the neck begins in the back-side.

The measurement from the sole of the feet to the top of the head is 84 *aṅgulas* or 3½ *hastas* (cubits) by the individuals' own hand. If the height of all these organs described in para—117 is taken together, this exceeds 84 *aṅgulas* because a portion of the height (length) of one organ at times submerges into the height of another organ. Therefore, the height of each individual organ is not to be taken into account while ascertaining the measurement of the whole body. On the otherhand, the height of the sole of the foot to the top of head is to be accounted for. Thus the height of foot is four *aṅgulas*, knee four *aṅgulas*, thigh 18 *aṅgulas*, back 18 *aṅgulas*, neck four *aṅgulas* and head six *aṅgulas*—this makes in

84 *angulas* (?) which represent the total height of the body. [Note:—The detailed calculation given above accounts for 72 *angulas* only. It seems the measurement of *udara* (12 *angulas*) has been inadvertently missed by the copyist. In Narendranath Sen's edition, measurement of 52 *angulis* is missing. So this appears to be a textual problem which can be resolved by comparing the extant mss. of Cakrapāṇi's Commentary.]

There is difference in the statement of the Suśruta and the Caraka regarding the height of the whole body. According to the former it is 120 *angulas* whereas according to the latter it is only 84 *angulas*. This is due to the difference in the measurement of the basic unit i.e. *anguli* which is smaller according to the Suśruta from what is described here.

Satmya :

सात्स्यतश्चेति सात्स्यं नाम तद्यत् सात्येनोपसेव्यमानमुपशेते । तत्र
ये धृतक्षीरतैलमांसरससात्स्याः सर्वरससात्स्याश्च ते बलदन्तः क्लेशसहाश्चित्त-
रजीविनश्च भवन्ति, रुक्षसात्स्याः पुनरेकरससात्स्याश्च ये ते प्रायेणाल्पबला
अल्पक्लेशसहा अल्पायुषोऽल्पसाधनाश्च भवन्ति, व्यामिश्रसात्स्यास्तु ये ते
मध्यबलाः सात्स्यनिमित्ततो भवन्ति ॥ ११८ ॥

According to para-34 again, a patient is to be examined with reference to his *satmya* or homologation. *Satmya* stands for such factors as are wholesome to the individual even when continuously used. Individuals for whom ghee, milk, oil and meat soup as well as the drugs and diets having all the six tastes are wholesome are endowed with strength, the power of facing difficult situations and longevity. Those who are accustomed to ununctuous things, and drugs and diets having only one particular taste, are mostly possessed of less strength, less power (or resistance) to face difficult situations, are of smaller life-span and of meagre accessories like drugs for the treatment of his diseases. If there is combination of both these types of homologation, individuals are possessed of moderate strength. [118]

Here, the wholesomeness developed by habits are only taken into account whereas other forms of wholesomeness are already mentioned by way of describing the nature of drugs etc. If an individual is accustomed to use only such drugs and diets having one and the same taste the drugs and diets possessed of the remaining tastes will be unwholesome for him.

Sattva :

सत्त्वतश्चेति सत्त्वमुच्यते मनः । तच्छरीरस्य तत्त्वकमात्मसंयोगात् ।
तत्त्विविधं बलभेदेन—प्रवरं, मध्यमम्, अवरं चेति; अतश्च प्रवरमध्यावरसत्त्वाः

पुरुषा भवन्ति । तत्र प्रवरसत्त्वाः सत्त्वसारास्ते सारेषूपदिष्टाः, स्वल्पशरीरा ह्यपि ते निजागन्तुनिमित्तासु महतीष्वपि पीडास्वव्यथा दृश्यन्ते सत्त्वगुणवैशेष्यात्; मध्यसत्त्वास्त्वपरानात्मन्युपनिधाय संस्तम्भयन्त्यात्मनाऽऽत्मानं परैर्बाडपि संस्तम्भन्ते; हीनसत्त्वास्तु नात्मना नापि परैः सत्त्वबलं प्रतिशक्यन्ते उपस्तम्भयितुं, महाशरीरा ह्यपि ते स्वल्पानामपि वेदनानामसहा दृश्यन्ते, सञ्चिहितभयशोकलोभमोहमाना रौद्रभैरवदिप्रवीभत्सविकृतसंकथास्वपि च पशुपुरुषमांसशोणितानि चावेक्ष्य चिपादवैवर्यमूच्छांन्मादभ्रमप्रपतनानामन्यतममाप्नुवन्त्यथवा मरणमिति ॥ ११९ ॥

The patient is again to be examined with reference to his *sattva* or mental faculties. *Sattva* is mind and it regulates the body because of its association with the soul. Depending upon its strength, it is of three types, viz. superior, mediocre and inferior. Thus human beings are classified into three categories depending upon the superiority, mediocrity or inferiority of their mental faculties. Individuals having mental faculties of superior type are possessed of the excellence of these faculties and the characteristic features of such individuals are described in para-110 above. Even if possessed of weak physique, such individuals, because of the specific manifestations of *sattva* qualities in them, tolerate serious exogenous and endogenous diseases without much difficulty. Individuals having mediocrity of mental faculties tolerate the pain themselves when they realise that other can also tolerate it. Then they at times gain strength from others. Those having inferior type of mental faculties, neither by themselves nor through others can sustain their mental strength and even if possessed of plump or big physique, they cannot tolerate even mild pain. They are susceptible to fear, grief, greed, delusion and ego. When they hear even stories describing wrathful, fearful, hateful, terrifying and ugly situation or come across visions of flesh or blood of an animal or man, they fall victims to depression, pallor, fainting, madness, giddiness of falling on the ground, or such events may even lead them to death. [119]

Unlike the individual of superior mental qualities those having mediocrity of mental faculties cannot tolerate painful conditions on their own. However, when they see that other people can tolerate it well, they gain strength and determination to tolerate pain like others,

Capacity for food. :

आहारशक्तिश्चेति आहारशक्तिरभ्यवहरणशक्तया जरणशक्तया च परीक्ष्या; बलायुषी ह्याहारायते ॥ १२० ॥

A patient is further to be examined with reference to his *ahāraśakti* or the capacity for intake of food.

One's capacity for food can be examined from two angles, viz. the power of ingestion as well as the power of digestion. Both the strength and life-span are determined by the diet of the individual. [120]

Digestion of food when taken in large quantity is indicative of one's capacity for food. Digestion of food when taken in small quantity does not do so.

Capacity for exercise :

व्यायामशक्तिश्चेति व्यायामशक्तिरपि कर्मशक्तया परीक्ष्या । कर्मशक्तया हनुमीयते बलत्रैचिध्यम् ॥ १२१ ॥

The patient should be examined with reference to his capacity for exercise which is determined by one's ability to perform work like lifting weight etc. Strength of individuals is classified into three categories, depending upon their ability to perform work. [121]

Span of life :

वयस्तश्चेति कालप्रमाणविशेषापेक्षिणी हि शरीरावस्था वयोऽभिधीयते । तद्वयो यथास्थूलमेदेन त्रिविधं—बालं, मध्यं, जीर्णमिति । तत्र बालमपरिपक्वातुमजातव्यञ्जनं सुकुमारमङ्गेशासहमसंपूर्णबलं श्लेष्यधातुग्रायमाषोडश ग्रन्थं, विवर्धमानधातुगुणं पुनः प्रायेणानवस्थितसत्त्वमात्रिशद्रष्टुपदिष्टुं; मध्यं पुनः समत्वागतबलवीर्यपौरुषपराक्रमग्रहणधारणस्मरणवचनविज्ञानसर्वधातुगुणं बलस्थितमवस्थितसत्त्वमविशेष्यमाणधातुगुणं पित्तधातुप्रायमाषष्ट्रिवर्षमुपदिष्टम्; अतः परं हीयमानधात्विन्द्रियबलवीर्यपौरुषपराक्रमग्रहणधारणस्मरणवचनविज्ञानं भ्रश्यमानधातुगुणं वायुधातुप्रायं क्रमेण जीर्णमुच्यते आवशतम् । वर्षशतं खल्वायुषः प्रमाणमस्मिन् काले; सन्ति च पुनरधिकोनवर्षशतजीविनोऽपि मनुष्याः; तेषां विकृतिवज्यैः प्रकृत्यादिवलविशेषैरायुषो लक्षणतश्च प्रमाणमुपलभ्य वयस्तस्त्रित्वं विभजेत् ॥ १२२ ॥

The patient should be examined with reference to his age which represents the state of his body depending upon the length of the time that has passed since birth. Age is broadly of three types, viz. young age, middle age and old age.

Young age is again of two types, viz. (i) immature stage lasting upto 16th year of age and (ii) maturing stage lasting upto the 30th year of age. During immature stage various organs of the body are not well developed, there is tenderness, the individual cannot tolerate difficulties, there is incomplete strength and the dominance of *kapha dosha* in the body. During the second stage i.e. the stage of maturing lasting upto 30th year of age, the mental faculties are not properly developed.

During the middle age lasting upto the 60th year of age, there is well manifested strength, energy, manliness and valour, power of understanding, retention, memorising, speech and analysing facts and the qualities of all *dhatus*; there is the dominance of *pittadosha*.

Thereafter during old age lasting upto 100th year of age, there is diminution of the *dhatus* (tissue elements), strength of sense organs, energy, manliness, valor, power of understanding, retention, memorising, speech and analysing facts. There is gradual diminution in the qualities of *dhatus* and dominance of *vata* during this age.

During this *kali* age, the span of life is 100 years. Of course, there are people who live for a longer or shorter period than this. Their age should be classified by determining the life-span with the help of factors described in para 94, viz. *prakrti* (physical constitution) etc., excluding morbidity and also with the help of characteristic features of individuals having various categories of life-span. [122]

Life-span of an individual may be classified in many ways. Only a broad classification is given here. Young age has two different stages, viz., immatured stage and maturing stage. During the former stage which is upto 16th year of age, diseases of the individuals should be treated with mild therapies in small doses. During the latter stage lasting upto the 33th year of age, there is no such restriction regarding the selection of the therapy and its dosage.

Life-spans of individuals, viz. long, medium and short can be determined by the superiority, mediocrity and inferiority of *prakrti* (physical constitution) etc. For example, if an individual is possessed of *kapha prakrti* or *sama prakrti* (where all the three *dosas* are in equilibrium) then the individual lives longer, otherwise, there will be short span of life. If an individual is possessed of the superior type of all other factors, viz. *sara* (excellence of *dhatu*) etc. he lives for more than one hundred years. If the life span is 120 years, then the first 36 years of age should

be treated as young age, from 36 to 72 years of age as middle age and the remaining part of the life as old age. If the life span is determined to be 80 years, young age will be upto 25 years, middle age from 25 to 50 years and old age thereafter.

This type of classification of age is needed only for such persons as live for hundred years approximately. If they live only for a small period, say for twenty years, then such classification of age is not necessary inasmuch as the death of such an individual is considered to be a premature one and he does not attend the middle age.

Strength of the body, dosas and drugs :

एवं प्रकृत्यादीनां विकृतिवर्ज्यानां भावानां प्रवरमध्यावरविभागेन बल-
विशेषं विभजेत् । विकृतिबलत्रैविध्येन तु दोषबलं त्रिविधमनुमीयते । ततो
भैषज्यस्य तीक्ष्णमृदुमध्यविभागेन त्रैविध्यं विभज्य यथादोषं भैषज्यमवचार-
येदिति ॥ १२३ ॥

Thus the strength of individuals can be classified, depending upon the superiority, mediocrity and inferiority of the above mentioned factors, viz. *prakṛti* (physical constitution) etc., except *vikṛti* or morbidity.

Three types of the strength of the *dosas* are inferred from the three types of the intensity of morbidity. Thereafter, depending upon the nature of the *dosas* involved, three types of medicaments, viz. strong, mild and moderate should be administered. [123]

आयुषः प्रमाणशानहेतोः पुनरिन्द्रियेषु जातिसूत्रीये च लक्षणान्युपदेश्यन्ते ॥ १२४ ॥

With a view to ascertaining the life-span of an individual, symptoms will be described in the *Indriya* section and also in the 8th chapter of *Sārira* section. [124]

For the determination of the strength of the body and the strength of the *dosas*, the method to be adopted for examining the body has been described. In this para (124) the method to be adopted for examining the body with a view to ascertaining the span of life is being described.

In *Indriya* section, symptoms which characterize the diminished span of life are described whereas in the 8th chapter of *Sārira* section, symptoms manifested during the time of birth indicating long or short life-spans are described.

Divisions of year :

कालः पुनः संबत्सरश्चातुरावस्था च । तत्र संवत्सरो द्विधा त्रिधा षोढा
द्वादशधा भूयश्चाप्यतः प्रविभज्यते तत्तत्कार्यमभिसमीक्ष्य । अत्र खलु तावत्
षोढा प्रविभज्य कार्यमुपदेश्यते-हेमन्तो श्रीष्ठो वर्षाश्चेति शीतोष्णवर्षलक्षणा-

स्थय ऋतवो भवन्ति, तेषामन्तरैषिविरे साधारणलक्षणास्थय क्रतवः—प्रावृट्-
शरद्वसन्ता इति । प्रावृद्धिति प्रथमः प्रवृष्टः कालः, तस्यानुबन्धो हि वर्षाः ।
एवमेते संशोधनमधिकृत्य षट् विभज्यन्ते क्रतवः ॥ १२५ ॥

Kāla or time connotes two meanings, viz. the year and the state of the disease in the patient. Depending upon the necessity, year is variously divided into two, three, six, twelve and even more. In the present context, six divisions of the year are envisaged. *Hemanta* (winter) *grīṣma* (summer) and *varṣā* (rainy) these are the three seasons characterised by cold weather, hot weather and rains. Flanked by them are three other seasons, viz. *prāvṛṭi*, *śarat* (autumn) and *vasanta* (spring) which are of moderate nature. *Prāvṛṭi* season is characterized by the beginning of rains and then follows the rainy season. Having the administration of elimination therapies in view, seasons are thus divided into six. [125]

A year can be classified in different ways depending upon the different purposes in view. On the basis of *ayana* or solstitial movement of the sun to north or south, year is divided into two; on the basis of the intensity of cold, heat or rain, it is divided into three; on the basis of seasons it is divided into six; on the basis of months it is divided into twelve and on the basis of fortnights, it is divided into twenty four. Similarly it can have many divisions on the basis of *prahara* (a unit of three hours) etc.

Āṣāḍha (June-July) and *Śrāvāṇa* (July-August)—these months constitute the *prāvṛṭi* season. In their order, other seasons, viz. *varṣā* (rainy season) etc. are also composed of two months each. Division of the year into six seasons each comprising two months is detailed in the table below :

<i>Seasons</i>	<i>Months according to Hindu calendar.</i>	<i>Months according to Greek calendar (approximately)</i>
1	2	3
1. <i>Prāvṛṭi</i>	I. <i>Āṣāḍha</i> II. <i>Śrāvāṇa</i>	June-July July-August.
2. <i>Varṣā</i>	I. <i>Bhādrapada</i> II. <i>Āśvina</i>	August-September. September-October.
3. <i>Śarat</i>	I. <i>Kōrtika</i> II. <i>Mārgaśīrṣa</i>	October-November. November-December.
4. <i>Hemanta</i>	I. <i>Pauṣa</i> II. <i>Māgha</i>	December-January. January-February.
5. <i>Vasanta</i>	I. <i>Phālguna</i> II. <i>Caitra</i>	February-March. March-April.
6. <i>Grīṣma</i>	I. <i>Vaiśākha</i> II. <i>Jyeṣṭha</i>	April-May. May-June.

Division of the year into six seasons for describing the manifestation of the various *rasas* or tastes is different from what is described above. The present division is in keeping with the administration of elimination therapy. Similar divisions will be described in *Siddhi* 6 . 5. *Śisira* season does not find a place in this classification; instead, there is an addition of *prāvṛti* season before *varṣā* (rainy) season.

Some scholars hold the view that in the region south of the Gaṅgā there is excessive rain which continues over six months. This period is divided into two seasons and they are known as *prāvṛti* (beginning of rainy season) and *varṣā* (rainy season proper). Similarly in the region north of the Gangā there is excessive cold which continues for over four months. This period is divided into two seasons and they are known as *hemanta* (beginning of winter) and *śisira* (winter proper). This is corroborated by the views expressed in the *Kāśyapasamhitā*. This explanation does not appear to be correct because in the present context, it has been clearly stated that seasons are thus classified keeping the administration of elimination therapies in view. Had this difference in the classification of seasons been based on the regional variations, that criterion should have been mentioned here. Therefore, the difference in the classification of seasons based on regional variations as has been stated in the *Kāśyapasamhitā* is not appropriate in the present context.

Suitable season for administration of elimination therapy :

तत्र साधारणलक्षणे ष्वतुषु वमनादीनां प्रवृत्तिर्विधीयते, निवृत्तिरितरेषु ।
साधारणलक्षणा हि मन्दशीतोष्णवर्षत्वात् सुखतमाश्च भवन्त्यविकल्पकाश्च
शरीरौषधानाम्, इतरे पुनरत्यर्थशीतोष्णवर्षत्वादुःखतमाश्च भवन्ति विकल्प-
काश्च शरीरौषधानाम् ॥ १२६ ॥

Elimination therapies, viz. *vamana* (emesis) etc., should be administered only in seasons of moderate nature. In other seasons having extreme cold, heat or rain, such therapies should not be administered.

Moderate seasons are characterized by moderation in cold, heat and rain. They are very enjoyable and they do not adversely affect the conditions of the body and drugs. Remaining seasons are characterized by extreme cold, heat or rain. They are very unpleasant and the body as well as medicines are adversely affected by them. [126]

Unsuitable seasons for elimination therapy :

तत्र हेमन्ते ह्यतिमात्रशीतोपहतत्वाच्छरीरमसुखोपपेक्षं भवन्त्यतिशीतवा-
ताध्मातमतिदार्ढ्यभूतमवबद्धोषं च, भेषजं पुनः संशोधनार्थमुष्णस्वभावमति-
शीतोपहतत्वान्मन्दवीर्यत्वमापद्यते, तस्मात्तयोः संयोगे संशोधनमयोगायोपप-

यते शरीरमपि च वातोपद्वाय । श्रीष्मे पुनर्भूशोष्णोपहतत्वाच्छरीरमसुखो-
पपन्नं भवत्युष्णवातातपाध्मातमतिशिथिलमन्यर्थप्रविलीनदोषं, भेषजं पुनः
संशोधनार्थमुष्णस्वभावमुष्णानुगमनात्तीक्ष्णतरत्वमापद्यते, तस्मात्तयोः संयोगे
संशोधनमतियोगायोपपद्यते शरीरमपि पिपासोपद्वाय । वर्षासु तु भेषजलाव-
तते गूढार्कचन्द्रतारे धाराकुले वियति भूमौ एङ्गजलपटलसंवृतायामत्यर्थोपङ्कि-
ष्टशरीरेषु भूतेषु विहतस्वभावेषु च केवलेष्वौषधग्रामेषु तोयतोयदानुगतमारुत-
संसर्गाद् गुरुप्रवृत्तीनि वग्नादीनि भवन्ति, गुरुसम्मुथानानि च शरीरणि ।
तस्माद्वग्नादीनां निवृत्तिविधीयते वर्षान्तेष्वृतुषु, न चेदात्ययिकं कर्म । आत्य-
यिके पुनः कर्मणि काममृतुं विकल्प्य छत्रिमगुणोपधानेन यथर्तुगुणविपरीतेन
भेषजं संयोगसंस्कारप्रमाणविकल्पेनोपपाद्य प्रमाणवीर्यसमं कृत्वा ततः प्रयो-
जयेदुक्तमेन यत्नेनावहितः ॥ १२७ ॥

During the *hemanta* or winter season, the body is exposed to great discomfort because of affliction by excessive cold. The *dosas* do not get detached and remain adhered to the channels in the body due to their excessive firmness caused by the contact with the terrific cold-wind. Medicaments used for elimination therapy are by nature hot but because of affliction with excessive cold their therapeutic effectiveness is diminished. When these therapeutically less potent drugs are administered to an individual whose body is unsuitable for the therapy it does not produce the desired effect and the body gets afflicted with *vata*.

During the *grīṣma* or summer season there is great discomfort in the body because of the affliction with excessive heat. *Dosas* remain excessively detached due to their excessive looseness caused by the contact with excessively hot wind as well as hot sun. Medicaments used for elimination therapy are by nature hot and because of the affliction with excessive heat, their therapeutic effect becomes all the more sharp. When these drugs having sharp effect are administered to an individual having an impaired body, there is excessive elimination of *dosas* and the body gets afflicted with complications including excessive thirst.

During the *varṣā* or rainy season, bodies of animals become excessively deliquescent because of their exposure to rain water, invisibility of the sun, moon and stars, over-casting of the sky by clouds and the presence of mud and water

all over the earth. There is impairment of all medicaments because of their contact with water and the moist wind associated with clouds. Thus, there is improper manifestation of urges of emesis etc., and it takes a long time for the body to recover from the effects of these elimination therapies.

Therefore, in the above mentioned three seasons ending with rainy season elimination therapy, viz. emesis etc., should not be administered unless there is an emergency. In such emergencies, natural manifestations of seasons, viz. excessive cold, heat and rains should be counter-acted by artificial means (air conditioning). Similarly the qualities of medicines should be rendered opposite to those of the respective seasons by suitable combination, processing and determination of proper dosage. Thus, bringing the dosage and potency of medicaments to the required level, elimination therapies should be administered with utmost care. [127]

Elimination therapies normally should not be administered during seasons having extreme cold, heat and rains. But if emergency arises during these seasons necessitating the immediate administration of these therapies, this should be done in artificially furnished (air conditioned) rooms which remain cold in summer and hot in winter. The physician is advised not to ignore such urgent needs for the administration of elimination therapies—cf. *Susruta* : *Sūtra* 35 : 21. Similarly, suitable changes should be brought about in medicaments by combination etc., so that they will properly cater to the needs of the patient even in these adverse seasons. For example, in the winter season, *trivṛt* (*Operculina turpethum* R. B.) should be mixed with cows urine which latter is hot in potency and this therapy should be given in a larger dose. The dose of the therapy should be so adjusted as would not prove fatal to the patient. Similarly such drugs should be combined as would not be incompatible in potency with each other.

Another connotation of 'kāla' :

आतुरावस्थास्वपि तु कार्यकार्यं प्रति कालाकालसंज्ञा; तद्यथा—अस्यामवस्थायामस्य भेषजस्याकालः, कालः पुनरन्यस्येति; एतदपि हि भवत्यवस्थाविशेषेण; तस्मादातुरावस्थास्वपि हि कालाकालसंज्ञा । तस्य परोक्षा—मुहुर्मुहुरातुरस्य सर्वावस्थाविशेषावेक्षणं यथावद्भेषजप्रयोगार्थम् । न ह्यतिपतितकालमप्राप्तकालं वा भेषजमुपयुज्यमानं यौगिकं भवति; कालो हि भैषज्यप्रयोगपर्याप्तिमभिनिर्वर्तयति ॥ १२८ ॥

Another connotation of the term kāla or time is the state of the patient which determines the initiation of timely

actions and prohibition of untimely ones. For example, in a particular condition or the state of the patient one medicine may not be useful. Administration of this medicine will be termed untimely whereas administration of another medicine may be useful which will be termed as timely. Thus the determination of the utility or otherwise of a particular medicine depends upon the state of the patient and this in other words is known as 'timely' or 'untimely'. To ascertain this with a view to administering the therapy, the specific characteristics of all the states of the patient should be frequently observed. The therapy does not produce its desired effect, if administered after the passage or before the arrival of the correct time. It is the time which determines the manifestation of the desired effects of a drug administered. [128]

Utility or otherwise of a particular drug depends upon the state of the patient or the disease e. g. in *navajvara* (beginning stage of fever) decoctions are not considered to be useful. Therefore, administration of decoction in this state is untimely. After the sixth day of the onset of fever, however, administration of decoctions is useful and hence timely.

Pravrtti :

प्रवृत्तिस्तु प्रतिकर्मसमारम्भः । तस्य लक्षणं भिषगौषधातुरपरिचारकाणां क्रियासमायोगः ॥ १२९ ॥

Pravrtti or endeavour is the initiation of the therapeutic action. It represents the combined action of the physician, medicaments, patient and the attendant. [129]

Upaya :

उपायः पुनर्भिषगादीनां सौष्ठुवमभिविधानं च समश्क । तस्य लक्षणं—भिषगादीनां यथोक्तगुणसंपत् देशकालप्रमाणसात्मयकियादिभिश्च सिद्धिकारणैः समग्रपपादितस्यौषधसगवचारणमिति ॥ १३० ॥

Upaya or means comprises the excellence of the physician etc., and the correct therapy. This is characterized by the existence of the desired qualities in the physician and the administration of the correctly processed drugs, depending upon the locality, time, dosage, and homologation. [130]

एवमेते दश परीक्ष्यविशेषाः पृथक् पृथक् परीक्षितव्या भवन्ति ॥ १३१ ॥

Thus these are the ten factors to be examined separately. [131]

Object of examination :

परीक्षायास्तु खलु प्रयोजनं प्रतिपत्तिशानम् । प्रतिपत्तिर्नाम यो विकारो यथा प्रतिपत्तव्यस्तस्य तथाऽनुष्टानशानम् ॥ १३२ ॥

Purpose of this examination is to obtain knowledge regarding the line of treatment that should be adopted with a view to correcting the morbidity. [132]

यत्र तु खलु वमनादीनां प्रवृत्तिः, यत्र च निवृत्तिः, तद्वासतः सिद्धिपूत्तरमुपदेश्यामः ॥ १३३ ॥

Indications and contra-indications of elimination therapies, viz. emesis etc., will be described later in detail in the *Siddhi* section. [133]

प्रवृत्तिनिवृत्तिलक्षणसंयोगे तु गुरुलाघवं संप्रधार्य सम्यग्ध्यवस्थेदन्त्यतरनिष्टायाम् । सन्ति हि व्याधयः शास्त्रेषूत्सर्गापवादैरुपक्रमं प्रति निर्दिष्टः । तस्माद्गुरुलाघवं संप्रधार्य सम्यग्ध्यवस्थेदित्युक्तम् ॥ १३४ ॥

If there are symptoms which are simultaneously responsive as well as irresponsible to a given therapy, the physician should decide for or against the administration of that therapy, on ascertaining the seriousness or lightness of the (mutually contradictory) symptoms. General rules together with the exceptional ones for the treatment of diseases are described in the text. The physician should accordingly initiate action (treatment) with the care and on ascertaining the seriousness or lightness of the symptoms concerned. [134]

The rules for treatment always take into account the general as well as exceptional situations. In case, general rules are not applicable in a given situation, a physician should take recourse to exceptional rules. If a situation arises where one set of symptoms is responsive to a given therapy and the other one is apparently considered to be irresponsible there to, the first thing to be ascertained is as to which of the symptoms are of a serious nature and which of them are light ones. The right therapy to be administered in this situation would be the one which is responsive to the more serious type of symptoms.

Drugs used in emesis :

यानि तु खलु वमनादिषु भेषजद्रव्याण्युपयोगं गच्छन्ति तात्यनुव्याख्यास्यामः । तद्यथा—फलजीमूतकेश्वाकुधामार्गवकुटजकृतवेधनफलानि, फलजीमूतकेश्वाकुधामार्गवपत्रपुष्पाणि आरघ्वधवृक्षकमदनस्वादुकरटकपाठापाटलाशार्ङ्गेष्टामूर्वासपर्णनक्तमालपिचुमर्दपटोलसुषवीगुह्मनीचित्रकसोमवलकशतावरीद्वीपीशिग्रुमूलकषायैः, मधुकमधूककोविदारकर्बुदारनीपविदुलविम्बीशणपु-

षीसदापुष्पाप्रत्यक्षपुष्पाकषायैश्च, एलाहरेणुप्रियङ्गुपृथ्वीकाकुस्तुम्बुरुतगरनल-
दहीवेरतालीशोशीरकषायैश्च, इक्षुकाण्डेश्विक्षुवालिकादर्भपोटगलकालङ्कु(ङ्क)त-
कषायैश्च, सुमनासौमनस्यायनीहरिद्रादारुहरिद्रावृश्चीरपुनर्नवामहासहाक्षुद्रस-
हाकषायैश्च, शालमलिशालमलिकभद्रपण्येलापण्युपोदिकोद्वालकधन्वनराजादनोप-
चित्रागोपीशृङ्गाटिकाकषायैश्च, पिण्ठलीपिण्ठलीमूलचव्यचित्रकशृङ्गवेरसर्षपफा-
णितक्षीरक्षारलवणोदकैश्च, यथालाभं यथेष्टु वाऽप्युपसंस्कृत्य वर्तिक्रियाचूर्णव-
लेहस्तेहकषायमांसरसयवाग्यूषकाम्बलिकक्षीरोपधेयान्मोदकानन्यांश्च भक्ष्यप्रका-
रान् चिविधाननुचिधाय यथार्हं वमनार्हाय दद्याद्विधिवद्मनम् । इति कल्प-
संग्रहो वमनद्रव्याणाम् । कल्पमेषां चिस्तारेणोत्तरकालमुपदेश्यामः ॥ १३५ ॥

We shall now expound the drugs which enter into the composition of emetic therapies. They are :

(a) the fruits of

1. *phala* (*Randia dumetorum* Lam.);
2. *jimūtaka* (*Luffa echinata* Roxb.);
3. *ikṣvaku* (*Langenaria siceraria* Standl.);
4. *dhāmārgava* (*Luffa cylindrica* M. Roem.);
5. *kuṭaja* (*Holarrhena antidysenterica* Wall.);
6. *kṛtavedhana* (*Luffa acutangula* Roxb.) and

(b) leaves and flowers of

1. *phala* (*Randia dumetorum* Lam.);
2. *jimūtaka* (*Luffa echinata* Roxb.);
3. *ikṣvaku* (*Langenaria siceraria* Standl.) and
4. *dhāmārgava* (*Luffa cylindrica* M. Roem.)

The above mentioned drugs should be mixed with the

(a) decoction of the roots of

1. *āragvadha* (*Cassia fistula* Linn.);
2. *vṛkṣaka* (*Holarrhena antidysenterica* Well.);
3. *madana* (*Randia dumetorum* Lam.);
4. *svādukanṭaka* (*Tribulus terrestris* Linn.);
5. *pāṭha* (*Cissampelos pareira* Linn.);
6. *pāṭala* (*Stereospermum suaveolens* DC.);
7. *śārṅgeśṭha* (*Abrus precatorius* Linn.);
8. *mūrvā* (*Clematis triloba* Heyne ex Roth.);
9. *saptaparna* (*Alstonia scholaris* R. Br.);
10. *naktamāla* (*Pongamia pinnata* Merr.);
11. *picumarda* (*Azadirachta indica* A. Juss.);
12. *pāṭola* (*Trichosanthes cucumerina* Linn.);

13. *susavī* (*Momordica charantia* Linn.)
14. *gudūcī* (*Tinospora cordifolia* (Miers));
15. *citraka* (*Plumbago zeylanica* Linn.);
16. *somavalka* (*Acacia catechu* Willd.);
17. *śatāvāri* (*Asparagus racemosus* Willd.)
18. *dviśī* (*Solanum xanthocarpum* Schrad and Wendl.);
19. *Śigru* (*Moringa oleifera* Lam.);

(b) decoctions of

1. *madhuka* (*Glycyrrhiza glabra* Linn.);
2. *madhūka* (*Madhuca indica* J. F. Gmel.);
3. *kovidāra* (red variety of *Bauhinia variegata* Linn.);
4. *karvudāra* (white variety of *Bauhinia variegata* Linn.);
5. *nipa* (*Anthoclephalus indicus* A: Rich);
6. *vidula* (*Salix capr.a* Linn.);
7. *bimbī* (*Coccinia indica* W & A.);
8. *śaṇapuṣṭī* (*Crotalaria verrucosa* Linn.);
9. *sadāpuṣṭā* (*Calotropis gigantea* R. Br. ex Ait.);
10. *protoyakpuṣṭā* (*Achyranthis aspera* Linn.);

(c) decoctions of

1. *elā* (*Elettaria cardamomum* Maton);
2. *hareṇu* (*Pisum sativum* Linn.);
3. *priyāngu* (*Callicarpa macrophylla* Vahl.);
4. *pr̥thvikā* (*Nigella sativa* Linn.);
5. *kustumburu* (*Coriandrum sativum* Linn.);
6. *tagara* (*Valeriana wallichii* DC.);
7. *nalada* (*Nardostachys jatamansi* DC.);
8. *hr̥ivera* (*Pavonia odorata* Willd.);
9. *taliśa* (*Abies webbiana* Lindl.);
10. *uśira* (*Vetiveria zizanioides* Nash.);

(d) decoctions of

1. *ikṣu* (*Saccharum officinarum* Linn.);
2. *kandekṣu* (*Saccharum spontaneum* Linn.);
3. *ikṣuvālikā* (*Asteracantha longifolia* Nees);
4. *darbha* (*Desmostachya bipinnata* Stapf);
5. *poṭagala* (*Arundo donax* Linn.);
6. *kalāṅkṛta* (*Cassia occidentalis* Linn.);

(e) decoctions of

1. *sumanā* (*Jasminum officinale* Linn. var *glandulifera* Bailey);

2. *saumanasyayani* (*Myristica fragrance* Hovtt.);
3. *haridra* (*Curcuma longa* Linn.);
4. *dāruharidra* (*Berberis aristata* DC.);
5. *vṛścīra* (white variety of *Boerhaavia diffusa* Linn.);
6. *pūnarnava* (red variety of *Boerhaavia diffusa* (Linn.);
7. *mahaśāha* (*Teramnus labialis* Spreng);
8. *kṣudrasahā* (*Phaseolus trilobus* Ait.);

(f) decoctions of

1. *śālmali* (*Salmalia malabarica* Schott and Endl.);
2. *śālmalika* (*Tecomella undulata* Seem.);
3. *bhadraparnī* (*Paederia foetida* Linn.);
4. *elāparṇī* (*Alpinia galanga* Swartz);
5. *upodikā* (*Basell rubra* Linn.);
6. *uddalaka* (*Cordia diphotoma* fort. f.);
7. *dhanvana* (*Grewia tiliaefolia* Vahl.);
8. *rājādana* (*Minshops hexandra* Roxb.);
9. *upacitrā* (*Baliospermum montanum* Muell. Arg.);
10. *gopi* (*Hemidesmus indicus* R. B.);
11. *śṛṅgatikā* (*Trapa bispinosa* Roxb.);

(g) powder of

1. *piṭṭalī* (*Piper longum* Linn.);
2. root of *piṭṭalī*;
3. *cavya* (*Piper chaba* Hunter);
4. *citraka* (*Plumbago zeylanica* Linn.);
5. *śṛṅgavera* (*Zingiber officinale* Rosc.) and

(h) water mixed with

1. penidium,
2. milk,
3. alkali preparations and
4. salt.

The above mentioned drugs in sufficient quantity or as much as available should be processed in the forms of *varṭikriyā* (eatables in an elongated form like a suppository), powder, linctus, medicated oil, decoction, meat-soup, gruel, *yūsa* (soup), *kāmbalika* (a preparation of sour milk mixed with whey and vinegar M. W.), milk preparation, sweet-meats and the like. These preparations should be properly administerrd for emesis to a patient after ascertaining his suitability for this therapy.

This in brief, is the description of various preparations for emetic therapy. A detailed description of these preparations will be furnished in the *Kalpa* section later. [135]

Six groups of decoction as described above are to be mixed with drugs for emesis; drugs belonging to each group have almost identical properties.

Drugs used for purgation :

विरेचनद्रव्याणि तु श्यामात्रिवृच्छतुरङ्गुलतिल्वकमहावृक्षसप्तलाशङ्खिनी-
दन्तीद्रवन्तीनां क्षीरमूलत्वक्पत्रपुष्पफलानि यथायोगं तैस्तैः क्षीरमूलत्वक्पत्र-
पुष्पफलैर्विक्लिताचिक्लिसैः, अजगन्धाश्वगन्धाजशृङ्गीक्षीरिणीनीलिनीङ्गीतककपा-
यैश्च, प्रकीर्णोदकीर्णार्यामसूरविदलाकमिप्लकविडङ्गवाक्षीकपायैश्च, पीतुप्रियाल-
मृद्वीकाकाशमर्यपरूषकवदरदाडिमामलकहरीतकीविभीतकवृश्चीरपुनर्वाचिदा-
रिगन्धादिकपायैश्च, सीधुसुरासौवीरकतुषोदकमैरेयमेदकमदिरामधुमधूलकधा-
न्याम्लकुवलबदरखर्जुरकर्कन्धुभिश्च, दधिदधिमण्डोदधिविद्धिश्च, गोमहिष्यजा-
वीनां च क्षीरमूत्रैर्थालाभं यथेष्टुं वाप्युपसंस्कृत्य वर्तिकियाचूर्णासवलेहस्तेह-
कपायमांसरसयूषकाम्बलिकयवागूक्षोरोपयेयान् मोदकानन्यांश्च भक्ष्यप्र(वि)का-
रान् विविधांश्च योगाननुविधाय यथार्हं विरेचनार्हाय दद्याद्विरेचनम् । इति
कल्पसंग्रहो विरेचनद्रव्याणाम् । कल्पमेषां विस्तरेण यथावदुत्तरकालमुपदे-
श्यामः ॥ १३६ ॥

Durgs which can be included under the compostion of purgation therapy are the latex, roots, barks, leaves; flowers and fruits of

1. *śyāma* (black variety of *operculina turpethum* R. B.)
2. *trivṛt* (white variety of *O. turpethum* R. B.);
3. *caturāṅgula* (*Cassia fistula* Linn.);
4. *tilvaka* (*Symplocos racemosa* Roxb.);
5. *mahāvṛkṣa* (*Euphorbia nerriifolia* Linn.);
6. *saptalā* (*Acacia concinna* DC.);
7. *sankhini* (*Canscora decussata* Roem et. Sch.);
8. *danti* (*Baliospermum montanum* Muell.-Arg.) and
9. *dravanti* (*Jatropha glandulifera* Roxb.)

According to the requirements, the latex, roots, barks, leaves, flowers and fruits may be combined or used individually. These drugs may be mixed with the following group of drugs.

(a) decoctions of

1. *ajagandha* (*Gymンドropsis gynandra* Briquet);
2. *aśvagandha* (*Withania somnifera* Dunal.);
3. *ajaśṛṅgi* (*Rhus succedanea* Linn.);
4. *kṣīriṇī* (*Mimosops hexandra* Roxb.);
5. *nīlinī* (*Indigofera tinctoria* Linn.);
6. *klitaka* (*Glycyrrhiza glabra* Linn.);

(b) decoctions of

1. *prakīryā* (*Caesalpinia crista* Linn.);
2. *udakīryā* (*Pongamia pinnata* Merr.);
3. *masūravidalā* (*Ichnocarpus frutescens* R.Br.);
4. *kampillaka* (*Mellotus philippinensis* Muell.Arg.);
5. *viḍāṅga* (*Embelia ribes* Burm F.);
6. *gavākṣī* (*Citrullus colocynthis* Schrad);

(c) decoctions of

1. *pilu* (*Salvadora persica* Linn.);
2. *priyāla* (*Buchanania lanzan* Spreng.);
3. *mṛdvīkā* (*Vitis vinifera* Linn.);
4. *kāśmarya* (*Gmelina arborea* Linn.);
5. *parūṣaka* (*Grewia asiatica* Lian.);
6. *badara* (*Zizyphus jujuba* Lam.);
7. *dādima* (*Punica granatum* Linn.);
8. *āmalaka* (*Emblica officinalis* Gaertn.);
9. *haritaki* (*Terminalia chebula* Linn.);
10. *bibhitaka* (*Terminalia belerica* Roxb.);
11. *vīścīra* (white variety of *Boerhaavia diffusa* Linn.);
12. *puṇarnava* (red variety of *Boerhaavia diffusa* Linn.);
13. *vidārigandha* (*Desmostachium gangeticum* DC.);

- (d) 1. *sidhu* (fermented liquor from mixture of thickened cane juice and dark brown crude sugar—CSSS);
2. *sura* (fermented liquor from barley etc.—CSSS);
3. *sauvīraka* (a type of wine);
4. *tuṣodaka* (sour gruel prepared by fermenting barley along with its husk);
5. *maireya* (a type of wine);
6. *medaka* (a type of wine);
7. *madira* (distilled wine of high alcoholic content);
8. *madhu* (a type of wine);

9. *madhūlaka* (clear fermented liquor from the flower of *Madhuca indica* J. F. Gmel.);
 10. *dhānyāmla* (sour fermented liquor from rice gruel);
 11. *kuvala* (*Zizyphus sativa* Gaertn.);
 12. *badara* (*Zizyphus jujuba* Lam.);
 13. *kharjūra* (*Phoenix sylvestris* Roxb.);
 14. *karkandhu* (*Zixyphus nummularia* W. & A.);
- (e) 1. Curd,
2. *dadhimāṇḍa* (whey);
 3. *udaśvit* (a mixture of water and butter milk in equal quantity MW.) and
- (f) milk and urine of cow, buffalo, goat and sheep.

The above mentioned drugs in sufficient quantity or as much as available should be processed in the forms of *vartikriyā* (eatables in an elongated form like a suppository), powder, alcoholic preparation, linctus, medicated oil, decoction, meat-soup, *yūṣa* (soup), *kambalika* (a preparation of sour milk mixed with and whey and vinegar MW.), gruel, milk-preparation, sweet-meats the like. These preparations should be properly administered for purgation to a patient on ascertaining his suitability for this therapy. This, in brief, is the description of various preparations for purgation therapy. A detailed description of these preparations will be furnished in the *Kalpa* section later. [136]

आस्थापनेषु तु भूयिष्ठकल्पानि द्रव्यःणि यानि योगमुपयान्ति तेषु तेष्व-
वस्थान्तरेष्वातुराणां, तानि द्रव्याणि नामतो विस्तरेणोपदिश्यमानान्यपरि-
संख्येयानि स्युरितवहुत्वात्; इषुश्चान्तिसंक्षेपविस्तरोपदेशस्तत्रे, इषुं च केवलं
ज्ञान, तस्माद्रसत एव तान्यत्र व्याख्यास्यामः। रससंसर्गविकल्पविस्तरो ह्योषा-
मपरिसङ्घर्षेयः, समवेतानां रसानामंशांशबलविकल्पातिबहुत्वात्। तस्माद्र-
व्याणां चैकदेशमुदाहरणार्थं रसेष्वनुविभज्य रसैकैकश्येन च नामलक्षणार्थं षडा-
स्थापनस्कन्धा रसतोऽनुविभज्य व्याख्यास्यन्ते ॥ १३७ ॥

There are many drugs which are used in *asthāpana* (corrective enema) for patients suffering from different ailments. The details are too exhaustive to be enumerated. It is desirable that the description of the science should neither be too lengthy nor too brief. At the same time the text should contain the entire scientific knowledge. Hence, (some important ones of) these drugs grouped according to their tastes

will be described here. Detailed permutations and combinations of *rasas* (tastes) are innumerable because the *rasas* present in drugs are aggregates of innumerable subtle blends. Therefore, some of the drugs for corrective enema classified into the six groups on the basis of their predominant tastes will be expounded here by way of illustration. This will help the physician to know the attributes of drugs which found a place in this description and to infer those of similar other ones which are not described here. [137]

Drugs which are frequently used in different ways for corrective enema will be described here. The description in a text specifically in the one concerning medicine, should neither be too lengthy nor too brief but at the same time it should clearly explain the entire scientific truth to the disciple.

Rarity of drugs having single taste :

यत्तु षड्विधमास्थापनमेकरसमित्याचक्षते भिषजः, तद्वर्लभतमं संसृष्टरस-
भूयिष्टत्वाद्रव्याणाम्। तस्मान्मधुराणि मधुरप्रत्याणि मधुरविपाकानि मधुर-
प्रभावाणि च मधुरस्कन्धे मधुराणयेव कृत्वोपदेश्यन्ते, तथेतराणि द्रव्या-
ण्यपि ॥ १३८ ॥

Substances are mostly composed of many tastes. Drugs having only one taste so as to be unquestionably included under one of the six groups are very rare. Therefore drugs that are sweet or are predominantly sweet or are sweet in *vipaka* or that produce the effects similar to those of the drugs having sweet taste, are included under the *madhuraskandha* (group of drugs having sweet taste). Drugs belonging to other five groups are also selected on the basis of similar criteria. [138]

Drugs included under one of the six groups of tastes do not exclusively contain that particular taste. In addition to that particular taste, others may also be present in that drug but such other tastes are in a recessive position inasmuch as they do not determine the resultant effect of the drug when administered to a patient. Similarly because of *vipaka* or specific action drugs having effects similar to those of a drug having sweet taste etc. are included under that respective group even though their actual tastes may be different.

Drugs having sweet taste :

तद्यथा—जीवकर्षभक्तौ जीवन्ती वीरा तामलकी काकोली क्षीरकाकोली
मुहूरपर्णी माषपर्णी शालपर्णी पृश्निपर्ण्यसनपर्णी मधुपर्णी मेदा महामेदा कर्कट-

श्रङ्गी श्रङ्गाटिका छिन्नसहा च्छत्राऽतिच्छत्रा श्रावणी महाश्रावणी सहदेवा
विश्वदेवा शुक्रा क्षीरशुक्रा बलाऽतिबला विदारी क्षीरचिदारी धुदसहा
महासहा ऋष्यगन्धाऽश्वगन्धा वृश्चीरः पुनर्नवा वृहती कण्टकारिकोरुवूको
मोरटः श्वदंश्वा सहर्षा शतावरी शतपुष्पा मधूकपुष्पी यष्टीमधु मधूलिका
मृदीका खर्जूरं परुषकमात्मगुप्ता पुष्करबीजं करोस्कं राजकशेष्कं राजादनं
कतकं काशमर्ये शीतपाक्योदयनपाकी तालखर्जूरमस्तकमिक्षुरिक्षुवालिका दर्भः
कुशः काशः शालिर्घुन्देत्कटकः शरमूलं राजश्वकः ऋष्यप्रोक्ता द्वारदा भार-
द्वाजी वनत्रपुष्पमीरुपत्री हंसपादी काकनासिका कुलिङ्गाक्षी क्षीरवज्ञी कपोल-
वज्ञी कपोतवज्ञी सोमवज्ञी गोपवज्ञी मधुवज्ञी चेति; एषामेवं विधानामन्येषां च
मधुरर्वगपरिसंरूप्यातानामौषधद्रव्याणां छेद्यानि खण्डशङ्खेदयित्वा भेद्यानि
चाणुशो भेदयित्वा प्रक्षाल्य पानीयेन सुप्रक्षालितायां स्थाल्यां समाचाप्य पयसा-
ऽर्धोदकेनाभ्यासिच्य साधयेद्वर्या सततमवघट्यन्; तदुपयुक्तभ्रूष्टेऽम्भसि
गतरसेष्वौषधेषु पयसि चानुपदग्धे स्थालीमुपहृत्य सुपरिपूतं पयः सुखोर्णं
घृततैलवसामज्जलवणफाणितोपहितं वर्स्त चातविकारिणे विधिङ्गो विधिवद्यात्;
शीतं तु मधुसर्पिर्यामुपसंसूज्य पित्तविकारिणे विधिवद्यात्। इति
मधुरस्कन्धः ॥ १३९ ॥

The following belong to the group of sweet drugs :—

1. *jivaka* (?);
2. *tsabha* (?);
3. *javanti* (*Leptadenia reticulata* W. and A.);
4. *vīra* (*Asparagus racemosus* Willd.);
5. *tāmalaki* (*Phyllanthus niruri* Linn.);
6. *kākolī* (?);
7. *kṣirakākoli* (?);
8. *mudgaparṇī* (*Phaseolus trilobus* Ait.);
9. *māṣaparṇī* (*Teramnus labialis* Spreng.);
10. *śalaparṇī* (*Desmodium genéticum* DC.);
11. *pṛśniparṇī* (*Uraria picta* Desv.);
12. *asanaparṇī* (*Clitoria ternatea* Linn.);
13. *madhuparṇī* (*Tinspora corifolia* Miers.);
14. *medā* (?);
15. *mahamedā* (?);
16. *karkaṭaśṛṅgi* (*Rhus succedanea* Linn.);
17. *śṛṅgatikā* (*Trapa bispinosa* Roxb.);
18. *chinnaruhā* (*Tinspora cordifolia* Miers.);
19. *chatrā* (*Astercanita longifolia* Nees);

20. *aticchatrā* (red variety of *Astercantha longifolia* Nees);
21. *śrāvaṇī* (*Sphaeranthus indicus* Linn.);
22. *mahā rāvaṇī* (a variety of *śrāvaṇī*);
23. *sahadevā* (*Sida rhombifolia* Linn.);
24. *viśvadevā* (?);
25. *śukla* (Sugar);
26. *kṣīraśukla* (bigger variety of *Trapa bispinosa* Roxb.);
27. *balā* (*Sida cordifolia* Linn.);
28. *atibalā* (yellow variety of *Sida cordifolia* Linn.);
29. *vidāri* (*Ipomoea paniculata* R. Br.);
30. *kṣīravidāri* (*Ipomoea paniculata* R. Br.);
31. *kṣudrasahā* (*Aloe barbadensis* Mill.);
32. *mahasahā* (*Teramnus labialis* Spreng.);
33. *r̥syagandhā* (a variety of *Balā-Sida cordifolia* Lin.);
34. *aśvagandhā* (*Withania somnifera* Dunal);
35. *vṛścīra* (white variety of *Boerhaavia diffusa* Linn.);
36. *punarnavā* (red variety of *Boerhaavia diffusia* Linn.);
37. *bṛhatī* (*Solanum indicum* Linn.);
38. *kaṇṭakārikā* (*Solanum xanthocarpum* Schrad & Wendl.);
39. *urubūka* (a type of *Ricinus communis* Linn.);
40. *moraṭa* (*Clematis triloba* Heyne ex Roth.);
41. *śvadāṁśtrā* (*Tribulus terrestris* Linn.);
42. *sāṁharṣā* (*Dendrophthoe falcata* Ettingshausen);
43. *śatāvarī* (*Asparagus racemosa* Willd.);
44. *śatapuṣpa* (*Foeniculum vulgare* Mill.);
45. *madhūkapuṣpi* (?);
46. *yaṣṭimadhu* (*Glycyrrhiza glabra* Linn.);
47. *madhūlikā* (*Madhuca longifolia* Maebride);
48. *mṛdvikā* (*Vitis vinifera* Linn.);
49. *kharjūra* (*Phoenix sylvestris* Roxb.);
50. *paruṣka* (*Grewia asiatica* Linn.);
51. *ātmaguptā* (*Mucuna pruriens* Hook);
52. seeds *puṣkara* (*Nelumbo nucifera* Gaertn.);
53. *kaśeruka* (*Scirpus grossus* Linn. f.);
54. *rājakaśeruka* (a variety of *Scirpus grossus* Linn. f.);
55. *rājādana* (*Mimusops hexandra* Roxb.);
56. *kataka* (*strychnos potatorum* Linn. f.),
57. *kāśmarya* (*Gmelina arborea* Linn.);
58. *śitapāki* (?);

59. *odanapāki* (blue variety of *Barleria cristata* Linn.);
60. *tala* (*Borassus flabellifer* Linn.);
61. upper portion of *kharjūra* (*Phoenix sylvestris* Roxb.);
62. *ikṣu* (*Saccharum officinarum* Linn.);
63. *ikṣuvalikā* (*Asteracantha longifolia* Nees);
64. *darbha* (a variety of *Desmostachya bipinnata* Stapf.);
65. *kuśa* (*Desmostachya bipinnata* Stapf.);
66. *kāṣa* (*Saccharum spontaneum* Linn.);
67. *śāli* (*Oryza sativa* Linn.);
68. *gundrā* (*Saccharum sara*);
69. *itkaṭaka* (?);
70. root of *sara* (*Saccharum munja* Roxb.);
71. *rājakṣavaka* (*Euphorbia microphylla* Heyne);
72. *r̥ṣyaproktā* (a variety of *Sida cordifolia* Linn.),
73. *dvāradā* (*Tectona grandis* Linn. f.);
74. *bhāradvājī* (wild variety of *Gossypium herbaceum* Linn.);
75. *vanatrapuṣī* (wild variety of *cucumis sativus* Linn.);
76. *abhīrupatṛī* (a variety of *Asparagus racemosus* Willd.);
77. *haṁsapādi* (*Adiantum lunulatum* Burm.);
78. *kakanāsikā* (*Leea aquata* Linn.);
79. *kuliṅgakṣī* (?);
80. *kṣīrvallī* (a variety of *Ipomoea paniculata* R. Br.);
81. *kapolavallī* (?);
82. *kapotavallī* (*Elettaria cardamomum* Moton);
83. *soma vallī* (*Crinum latifolium* Linn.);
84. *gopaballī* (*Hemidesmus indicus* R. B.) and
85. *madhvuvallī* (a variety of *Glycyrrhiza glabra* Linn.);

The above mentioned ones and such others belonging to the group of sweet drugs should be cut or pierced into small pieces, washed well in water, kept in a vessel added with milk diluted with fifty percent water and boiled. During the process of boiling, they should be constantly stirred with a ladle. When the water comes to the desired level, and drugs given up their active principles and before milk gets charred, the vessel should be removed from the hearth and milk should be filtered well. An expert physician should administer this luke-warm milk mixed with ghee, oil, muscle fat, marrow, salt and penidium as enema to a patient suffering from diseases due to the vitiation of *vāta*, following the proper proce-

dure. To a patient suffering from diseases due to the vitiation of *pitta*, this milk should be administered as enema after it is cooled down and mixed with honey and ghee, following the proper procedure.

Thus ends the description of the group of sweet drugs. [139]

Drugs having sour taste :

आप्राप्नातकलकुचकरमर्दवृश्चाम्लाम्लवेतसकुवलबदरदाढिममातुलुङ्गण्डीरामलकनन्दीतकशीतकतिन्तिण्डीकदन्तशठैरावतककोशाप्रधन्वनानां फलानि, पत्राणि चाप्राप्नातकाशमन्तकचाङ्गेरीणां चतुर्विधानां चाम्लिकानां द्वयोश्च कोलयोश्चामशुष्कयोद्योश्चैव शुष्काम्लिकयोग्राम्यारण्ययोः, आसवद्रव्याणि च सुरासौवीरकतुषोदकमैरेयमेदकमदिरामधुशुक्तशीधुदधिमण्डोदशिवद्वान्याम्लादीनि च, एषामेवंविधानामन्येषां चाम्लवर्गपरिसंख्यातानामौषधद्रव्याणां छेदयित्वा भेद्यानि चाणुशो भेदयित्वा द्रवैः स्थाल्यामभ्यासिच्य साधयित्वोपसंस्कृत्ययथावत्तैलवसामज्जलवणफाणितोपहितं सुखोणां बस्ति वातविकारिणे विधिष्ठो विधिवद्यात् । इत्यम्लस्कन्धः ॥ १४० ॥

The following belong to the group of sour drugs :

(a) fruits of

1. *amra* (*Mangifera indica* Linn.);
2. *amrātaka* (*Spondias pinnata* Kurz.);
3. *lakuca* (*Artocarpus lakoocha* Roxb.);
4. *kṣaramarda* (*Carissa carandas* Linn.);
5. *vṛkṣāmla* (*Garcinia indica* Chois.);
6. *amlavetasn* (*Rheum emodi* Wall.);
7. *kuvala* (*Zizyphus sativa* Gaertn.);
8. *badara* (*Zizyphus jujuba* Lam.);
9. *dāḍima* (*Punica granatum* Linn.);
10. *mātuluṅga* (*Citrus decumana* (Linn.));
11. *gandīra* (*Euphorbia antiquorum* Linn.);
12. *āmalaka* (*Emblica officinalis* (Gaertn.));
13. *nandītaka* (*Ficus retusa* Linn.);
14. *śitaka* (?);
15. *tintidika* (*Rhus parviflora* Roxb.);
16. *dantaśat̄ha* (*Citrus medica* Linn.);
17. *airāvata* (*Citrus aurantium* Linn.);
18. *kośāmra* (?);
19. *dhanvana* (*Grewia tiliaefolia* Vahl.);

(b) leaves of

1. *āmrātaka* (*Spondias pinnata* Kurz.);
2. *āśmantaku* (*Bauhinia racemosa* Lam.);
3. *cāngeri* (*Oxalis corniculata* Linn.);
4. four varieties of *amlikā* (*Tamarindus indica* Linn.);
5. dry and wet *kola* (*Zizyphus jujuba* Lam.);
6. wild and cultivated varieties of dried *amlikā* (*Tamarindus indica* (Linn.));

(c) alcoholic preparations viz.

1. *surā* (fermented liquor from barley etc.,);
2. *sauvīraka* (a type of wine);
3. *tuṣodaka* (sour gruel prepared by fermenting barley along with its husk);
4. *maireya* (a type of wine);
5. *medaka* (a type of wine);
6. *madirā* (distilled wine of high alcoholic content);
7. *madhu* (a type of wine);
8. *śukta* (fermented drink);
9. *śidhu* (fermented liquor from mixture of thickened cane juice and dark brown crude sugar);
10. curd;
11. *dadhimanda* (whey);
12. *udaśvit* (a mixtuoe of water and butter-milk in equal quantity) and
13. *dhānyāmla* (sour fermented liquor from rice gruel).

The above mentioned ones and such others belonging to the group of sour drugs should be cut or pierced into small pieces, added with liquids and should be boiled. They should be added with oil, muscle fat, marrow, salt and pendium as per requirements. When they get luke-warm, they should be properly administered as enema by an expert physician to a patient suffering from diseases caused by the vitiation of *vāta*.

Thus ends the description the of sour drugs. [140]

Drugs having saline taste :

सैन्धवसौर्वर्चलकालविडपाक्यानूपकूप्यवालुकैलमौलकसामुद्रोमकौद्धि-
दौषरपाटेयकपांशुजान्येवंप्रकाराणि चान्यानि लवणवर्गपरिसंख्यातानि, एता-
न्यम्लोपहितान्युष्णोदकोपहितानि वा स्नेहवन्ति सुखोष्णं बस्ति वातविकारिणे
विधिश्चो विधिवद्यात् । इति लवणस्कन्धः ॥ १४१ ॥

The following belong to the group of saline drugs :

1. *saindhava* (rock salt);
2. *sauvarcala* (sonchal salt which is obtained by boiling alkalies like soda with Emblic myrobatans);
3. *kāla*, (a kind of black, factitious and purgative salt);
4. *vida* (a kind of factitious salt, procured by boiling earth impregnated with saline particler, kind of fetid salt used medicinally as a tonic aperient);
5. *pākya* (a type of salt prepared artificially);
6. *anūpa* (a type of salt prepared by evaporating earth and water from marshy land);
7. *kūpya* (a type of salt prepared by evaporating well-water);
8. *vālukaila* (a type of salt obtained from saline sand);
9. *maulaka* (a type of black salt prepared artificially);
10. *sāmudra* (sea-salt);
11. *romaka* (salt obtained from saline salt or from sambar lake);
12. *audbhida* (salt obtained from the ashes of marine plants);
13. (a type of salt obtained from saline soil);
14. *pāteyaka* (Poitou salt); and
15. *pāṁśuja* (salt prepared from saline clay).

The above mentioned ones and such other saline substances should be mixed with sour things or hot water and added with fat. When luck-warm this mixture should be carefully administered as enema by an expert physician to a patient suffering from diseases due to the vitiation of *vāta*. Thus ends the description of the group of saline drugs. [141]

Names of salt given in the above paragraph are prevalent in different regions and their identity should be determined with the help of people of those regions.

Drugs having pungent taste :

पिण्ठलीपिण्ठलीमूलहस्तिपिण्ठलीचन्यचित्रकशृङ्गवेरमरिचाजमोदार्दकविडङ्ग-
कुस्तुम्बुरुषपीलुतेजोवत्येलाकुष्ठभज्ञातकास्थिहङ्गुनिर्यासकिलिममूलकसर्षपलशुन-
करज्ञशिश्रुकमधुशिश्रुकवरपुण्डभूस्तणसुमुखसुरसकुठेरकार्जकगणडीरकालमाल-

कपर्णासक्षवकफणिज्ञकक्षारमूत्रपित्तानीति; एषामेवंविधानां चान्येषां कटुक-
वर्गपरिसंख्यातानामौषधद्रव्याणां छेद्यानि खण्डशश्छेदयित्वा भेद्यानि चाणु-
शो भेदयित्वा गोमूत्रेण सह साधयित्वोपसंस्कृत्य यथावन्मधुतैललघणोपहितं
सुखोप्त्यं वर्त्स्त श्लेष्मविकारिणे विधिश्च विधिवहयात्। इति कटुकस्कन्धः॥१४२॥

The following belong to the group of pungent drugs :

1. *pippali* (*Piper longum* Linn.);
2. root of *pippali*;
3. *hastipippali* (*Scindapsus officinalis* Schott.);
4. *cavya* (*Piper chaba* Hunter);
5. *citraka* (*Plumbago zeylanica* Linn.);
6. *śringavera* (dried rhizome of *Zingiber officinale* Rosc.);
7. *marica* (*Piper nigrum* Linn.);
8. *ajamodā* (*Trachyspermum roxburghianum* Sprague);
9. *ādraka* (green rhizome of *Zingiber officinale* Rosc.);
10. *viḍaṅga* (*Embelis ribes* Burm f.);
11. *kustumburu* (*Coriandrum sativum* Linn.);
12. *pīlu* (*Salvadora persica* Linn.);
13. *tejovatī* (*Zanthoxylum alatum* Roxb.);
14. *elā* (*Elettaria cardamomum* Maton);
15. *kuṣṭha* (*Saussurea lappa* C. B. clarke);
16. nuts of *bhallātka* (*Semecarpus anacardium* Linn. f.);
17. resinous exudation of *hiṅgu* (*Ferula narthex* Boiss.);
18. *kilima* (*Cedrus deodara* Loud.);
19. *mūlaka* (*Raphanus sativus* Linn.)
20. *sarṣapa* (*Brassica nigra* Koch);
21. *laśuna* (*Allium sativum* Linn.);
22. *karañja* (*Pongamia pinnata* Merr.);
23. *śigruka* (*Moringa oleifera* Lam.);
24. *madhuśigruka* (a variety of *Moringa oleifera* Lam.);
25. *kharapuṣpā* (*Achyranthes aspera* Linn.);
26. *bhūṣṭrṇa* (*Cymbopogon citratus* Stapf);
27. various types of basils, viz. *sumukha*, *surasa*, *kūtheraka*,
arjaka; *gandiraka*, *ālamīlaka*, *parṇasa*, *ksavaka* and
phaṇijjhaka.
28. alkalies, urines and biles.

The above mentioned ones and such others belonging to the group of pungent drugs should be cut and pierced into small pieces and boiled with cow-urine. After they are

filtered, they should be added with honey, oil and salt as per requirements. An expert physician should properly administer this luke-warm mixture as enema to a patient suffering from diseases caused by the vitiation of *kapha*.

Thus ends the description of the group of pungent drugs. [142]

Drugs having bitter taste :

चन्दननलदकृतमालनक्तमालनिम्बतुम्बुरुकुटजहरिद्रादारुहरिद्रामुस्तमूर्वा-
किराततिक्तककटुकरोहिणीत्रायमाणाकारवेल्लिकाकरीरकरवीरकेवुककिल्लकवृष्ट-
मण्डूकपर्णीकाँटकवार्ताकुकर्कशकाकमाचीकाकोदुम्बरिकासुषव्यतिविषापटो-
लकुलकपाठागुड्हचीवेत्रायवेतसचिकङ्गतवकुलसोमवलकसप्तपर्णसुमनार्कावल्लुजव-
चातगरागुरुवालकोशीराणीति, एषामेवंविधानां चान्येषां तिक्तवर्गपरिसंख्याता-
नामौषधद्रव्याणां छेद्यानि खण्डशश्छेदयित्वा भेद्यानि चाणुशो भेदयित्वा प्रक्षा-
ल्य पानीयेनाभ्यासिच्य साधयित्वोपसंस्कृत्य यथावन्मधुतैललवणोपहितं सुख्नो-
षां चर्स्ति श्लेष्मविकारिणे विधिज्ञो विधिवद्यात्, शीतं तु मधुसर्पिभ्यामिप-
संसूज्य पित्तविकारिणे विधिज्ञो विधिवद्यात् । इति तिक्तस्कन्धः ॥ १४३ ॥

The following belong to the group of bitter drugs :

1. *candana* (*Santalum album* Linn.);
2. *nalada* (*Nardostachys jatamansi* DC.);
3. *kṛtamāla* (*Cassia fistula* Linn.);
4. *naktamāla* (*Pongamia pinnata* Merr.);
5. *nimba* (*Azadirachta indica* A. Juss.);
6. *tumburu* (*Zanthoxylon alatum* Roxb.);
7. *kuṭaja* (*Holarrhena antidysenterica* Wall.);
8. *haridrā* (*Curcuma longa* Linn.);
9. *daruharidrā* (*Berberis aristata* DC.);
10. *mustā* (*Cyperus rotundus* Linn.);
11. *mūrvā* (*Clematis triloba* Heyne ex Roth.);
12. *kirātatiktaka* (*Swertia chirata* Buch-Ham.);
13. *kaṭukarohini* (*Picrorhiza kurroa* Royle ex Benth.);
14. *trāyamāṇa* (*Gentiana kurroa* Royle);
15. *kāravellikā* (*Momordica charantia* Linn.);
16. *karīra* (*Capparis decidua* Edgew.);
17. *karavīra* (*Nerium indicum* Mill.);
18. *kebuka* (?)
19. *kaṭhillaka* (*Boerhaavia diffusa* Linn.);

20. *vṛṣa* (*Adhatoda vasica* Nees.);
21. *maṇḍukaparnī* (*Centella asiatica* Urban.);
22. *karkotaka* (*Momordica dioica* Roxb.);
23. *vārtāku* (*Solanum melongena* Linn.);
24. *karkaśā* (a variety of *Trichosanthes cucumerina* Linn.);
25. *kākamāci* (*Solanum nigrum* Linn.);
26. *kākodumbarikā* (*Ficus hispida* Linn. f.);
27. *sūṣavī* (a variety of *Momordica dioica* Roxb.);
28. *ativiṣā* (*Aconitum heterophyllum* Wall.);
29. *pāṭola* (*Trichosanthes cucumerina* Linn.);
30. *kulaka* (?)
31. *pāṭha* (*Cissampelos pareira* Linn.);
32. *guḍuci* (*Tinospora cordifolia* Miers);
33. tender shoots of *vetra* (*Salix caprea* Linn.);
34. *vetasa* (*Salix Caprea* Linn.);
35. *vikāṅkata* (*Gymnosporia spinosa* Fiori);
36. *bakula* (*Mimusops elengi* Linn.);
37. *somavalka* (*Acacia catechu* Willd.);
38. *saptaparna* (*Alstonia scholaris* R. Br.);
39. *sumana* (*Jasminum officinale* Linn. var_g*grandiflorum* Bailey);
40. *arka* (*Calotropis gigantea* R. Br. ex Ait.);
41. *avalguja* (*Psoralea corylifolia* Linn.);
42. *vaca* (*Acorus calamus* Linn.);
43. *tagara* (*Valeriana wallichii* DC.);
44. *aguru* (*Aquilaria agallocha* Roxb.);
45. *vālaka* (*Pavonia odorata* Willd.) and
46. *uśīra* (*Vetiveria zizanioides* Nash.).

The above mentioned ones and such others belonging to the group of bitter drugs should be cut or pierced into small pieces, washed, added with water and boiled. After it is filtered, this decoction should be added with honey, oil and salt as per requirements. An expert physician should properly administer this luke-warm mixture as enema to a patient suffering from diseases caused by the vitiation of *kapha*. To a patient suffering from diseases due to the vitiation of *pitta*, the expert physician should administer this mixture along with honey and ghee as enema after it is cooled doy'n. [143]

Drugs having astringent taste :

प्रियांगुनन्ताप्रास्थ्यम्बष्टुकीकटुङ्गलोध्रमोचरससमझाधातकीपुष्पपञ्चापञ्चके-
शरजम्बवाम्रपश्चवटकपीतनोदुम्बवराश्वत्थभज्ञातकास्थ्यशमन्तकशिरीषशिशापासो-
मवल्कतिन्दुकप्रियालबदरखदिरसपर्णाश्वकर्णस्यन्दनार्जुनारिमेदैलवालुकपरिपे-
लवकदम्बशज्जकीजिङ्गिनीकाशकशेषुकराजकशेषुकर्णफलवशपञ्चकाशोकशालधव-
सर्जभर्जशणखरपुष्पापुरशमीमाचीकवरकतुङ्गाजकर्णस्फूर्जकविभीतककुम्भीपुष्क-
रवीजविसमृणालतालखर्जूरतरुणानीति, एषामेवंविधानां चान्येषां कषायवर्ग-
परिस्थ्यातानामौषधद्रव्याणां छेद्यानि खण्डशश्छेदयित्वा भेद्यानि चाणुशो
भेदयित्वा प्रक्षालय पानीयेनाभ्यासिच्य साधयित्वोपसंस्कृत्य यथावन्मधुतैलव-
णोपहितं सुखोष्ण वर्स्ति श्लेष्मविकारिणे विधिहो विधिवद्यात्, शीतं तु मधु-
सर्पिंभर्यामुपसंसूज्य पित्तविकारिणे दद्यात् । इति कषायस्कन्धः ॥ १४४ ॥

The following belong to the group of astringent drugs :

1. *priyaṅgu* (*Callicarpa macrophylla* Vahl.);
2. *anantā* (*Hemidesmus indicus* R. B.);
3. stones of *āmra* (*Mangifera indica* Linn.);
4. *ambaṣṭhakī* (*Cissampelos pareira* Linn.);
5. *kaṭvaṅga* (*Oroxylum indicum* Vent.);
6. *lodhra* (*Symplocos racemosa* Roxb.);
7. *mocarasa* (*Salmalia malabarica* Schott and Endl.);
8. *samaṅga* (*Mimosa pudica* Linn.);
9. flowers of *dhātaki* (*Woodfordia fruticosa* Kurz);
10. *padma* (*Nelumbo nucifera* Gaertn.);
11. stamens of *padma*;
12. *jambu* (*Syzygium cumini* Skeels);
13. *āmra* (*Mangifera indica* Linn.);
14. *plakṣa* (*Ficus locor* Buch-Ham.);
15. *vaṭa* (*Ficus bengalensis* Linn.);
16. *kapitana* (a variety of *Albizzia lebbeck* Benth.);
17. *udumbara* (*Ficus racemosa* Linn.);
18. *aśvattha* (*Ficus religiosa* Linn.);
19. nuts of *bhallātaka* (*Semecarpus anacardium* Linn. f.);
20. *aśmantaka* (*Bauhinia racemosa* Lam.);
21. *śiriṣa* (*Albizzia lebbeck* Benth.);
22. *śimṣapa* (*Dalbergia sissoo* Roxb.);
23. *somavalka* (a variety of *Acacia catechu* Willd.);
24. *tinduka* (*Diospyros peregrina* Gurke);
25. *priyala* (*Buchanania lanzan* Spreng.);

26. *badara* (*Zizyphus jujuba* Lam.);
27. *khadira* (*Acacia catechu* Willd.);
28. *saptaparṇa* (*Alstonia scholaris* R. Br.);
29. *aśvakarṇa* (*Dipterocarpus alatus* Roxb.);
30. *syandana* (?)
31. *arjuna* (*Terminalia arjuna* W. and A.);
32. *arimeda* (a variety of *Acacia catechu* Willd.);
33. *elavāluka* (*Brunus cerasus* Linn.);
34. *paripelava* (?)
35. *kadamba* (*Anthocephalus indicus* A. Rich.);
36. *śallakī* (*Boswellia serrata* Roxb.);
37. *jīnginī* (?)
38. *kāśa* (*Saccharum spontaneum* Linn.);
39. *kaśeruka* (*Scirpus grossus* Linn. f.);
40. *rajakaśeru* (a variety of *Scirpus grossus* Linn. f.);
41. *katphala* (*Myrica nagi* Thunb.);
42. *vamśa* (*Bambusa arundinacea* Retz.);
43. *padmaka* (*Prunus cerasoides* D. Don.);
44. *aśoka* (*Saraca indica* Linn.);
45. *sāla* (*Shorea robusta* Gaertn. f.);
46. *dhava* (*Anogeissus latifolia* Wall.);
47. *sarja* (*Vateria indica* Linn.);
48. *bhūrja* (*Betula utilis* D. Don.);
49. *śāṇa* (*Crotalaria juncea* Linn.);
50. *kharapuṣpā* (*Achyranthes aspera* Linn.);
51. *pura* (*Commiphora mukul* Engl.);
52. *śamī* (*Prosopis spicigera* Linn.);
53. *mācīka* (*Cedrus deodara* Loud.);
54. *vardaka* (*Panicum miliaceum* Linn.);
55. *tuṅga* (*Calophyllum inophyllum* Linn.);
56. *ajakarṇa* (a variety of *Vateria indica* Linn.);
57. *sphūrjaka* (a variety of *Diospyros peregrina* Gurke);
58. *bibhitaka* (*Terminalia belerica* Roxb.);
59. *kumbhī* (*Pistia stratoites* Linn.);
60. seed of lotus;
61. rhizome of lotus;
62. stalk of lotus;
63. sprouts of *tala* (*Borassus flabellifer* Linn.) and
64. sprouts of *kharjūra* (*Phoenix sylvestris* Roxb.)

The above mentioned ones and such others belonging to the group of astringent drugs should be cut or pierced into small pieces, washed, added with water and boiled. After it is filtered, this decoction should be added with honey, oil and salt as per requirements. An expert physician should properly administer this luke-warm mixture as enema to a patient suffering from diseases due to the vitiation of *kapha*. To a patient suffering from diseases due to the vitiation of *pitta*, the expert physician should administer this mixture along with honey and ghee, as enema after it is cooled down. [14]

Some drugs are included in more than one group. This indicates that these drugs possess properties of all these groups.

तत्र श्लोकाः—

षड्गुर्गाः परिसंख्याता य एते रसभेदतः ।
आस्थापनमभिप्रेत्य तान्विद्यात्सार्वयौगिकान् ॥ १४५ ॥
सर्वशो हि प्रणिहिताः सर्वरोगेषु जानता ।
सर्वांगोगान्नियच्छन्ति येभ्य आस्थापनं हितम् ॥ १४६ ॥

To sum up :

The six groups of drugs enumerated on the basis of their tastes can be used as corrective enema for patients suffering from diseases which are curable by such types of enema. An expert physician should cure all such diseases as are amenable to corrective enema therapy by administering enema composed of all or some of the useful drugs enumerated under a group. [145-146]

Diseases are caused by different *dosas* and for the alleviation of each *dosā*, specific groups of drugs are prescribed. Therefore, while selecting a group of drugs, the *dosā* involved in the manifestation of disease should be kept in view.

येषां येषां प्रशान्त्यर्थं ये ये न परिकीर्तिताः ।
द्रव्यवर्गा चिकाराणां तेषां ते परिकोपकाः ॥ १४७ ॥
इत्येते षडास्थापनस्कन्धा रसतोऽनुचिभज्य व्याख्याताः ॥ १४८ ॥

Each group of drugs alleviates particular *dosas* as mentioned above; other *dosas* not mentioned against a given of drugs get aggravated by that group of drugs.

Thus the six groups of drugs for corrective enema classified on the basis of their tastes are explained. [147-148]

In the description of the group of sweet drugs in para-139 above, *kapha* is not mentioned as an alleviable *dosa*. This implies that the corrective enema with the group of sweet drugs aggravates a disease caused by *kapha*. Similarly the *dosa* aggravating properties of other groups of drugs can be explained.

Selection of drugs :

तेभ्यो भिषग्बुद्धिमान् परिसंख्यातमपि यद्यद्वयमयौगिकं मन्येत्, तत्तद-
पकर्षयेत्; यद्यच्चानुकमपि यौगिकं मन्येत्, तत्तद्विदध्यात्; वर्गमपि वर्गेणोप-
संसूजेदेकमेकेनानेकेन वा युक्तं प्रमाणीकृत्य । प्रचरणमिव भिशुकस्य वीज-
मिव कर्षकस्य सूत्रं बुद्धिमतामल्पमप्यनल्पज्ञानाय भवति; तस्माद्बुद्धिमतामूहापो-
पोहवितर्काः, मन्दबुद्धेस्तु यथोक्तानुगमनमेव श्रेयः । यथोक्तं हि मार्गमनुग-
च्छन् भिषक् संसाधयति कार्यमनतिमहत्वाद्वा विनिपातयत्यन्तिहस्त्वत्वादुदा-
हरणस्येति ॥ १४९ ॥

A wise physician should discard such of the drugs from a group as are not found useful in the treatment of a particular disease. At the same time even if some other drugs which are not mentioned above, but are found useful in the treatment of a disease, he should add them to the group concerned. If the rationale of the therapy for the treatment of a disease so demands, the drugs of some other groups may also be added to those of another group. Like the hand-ful of rice collected as alms by a mendicant or the seeds of grains to be used by a farmer, these terse aphorisms stand a wiseman in good stead as a source of vast-amount of knowledge. An intelligent physician uses these aphorisms as a guide to understand many other things by reasoning and implications. A physician possessing lesser intelligence would of course follow only what is described here. In view of the fact that things described here are not too brief to allow any ambiguity, a physician would not commit any serious mistakes, even if he follows only what is stated here by way of illustrations. [149]

Because of the nature of the *dosas* involved in the manifestation of the disease and its specific characteristics drugs of a group in their entirety need not necessarily be useful for alleviating the condition. It may, therefore be necessary to add some drugs which are useful and take away those which are harmful in the group concerned with a view to making the therapy efficacious in treating the disease. It is only the intelligent physicians who are capable of effecting such additions and deletions in a group. Physicians of lesser intelligence cannot effect such alterations because of

their inability to decide upon a thing by reasoning. It may be argued that a physician of lesser intelligence might commit great blunders because he lacks in the power of reasoning and all the drugs in the groups in their entirety need not necessarily be useful in the condition for which they are generally prescribed. This apprehension is not correct. Therapies prescribed for different diseases in the text are mostly useful. Depending upon the variations in the physical constitution etc., of the patient, these therapies may not be equally useful for all types of persons even though they are suffering from the same disease. Nonetheless, they are useful to some extent in alleviating the disease of all types of patients. What is prescribed by way of illustrations in the text is not too brief. Had these prescriptions been too brief leaving a lot to be decided by reasoning, a physician of low-intelligence would not have been able to cure a disease by administering a therapy because he would not be acquainted with the objects of the prescriptions furnished by way of illustrations only and also because he himself lacks in the power of reasoning. But actually, the illustrations cited in the text are comprehensive enough to enable any physician to administer the therapy prescribed for curing a disease.

Alteration of the composition of a group of drugs by addition or deletion is generally accepted—cf. *Susruta* : *Cikitsā* 1 : 137. Some groups of drugs viz. those composing *Agastyaharitaki* etc. however, work by virtue of their specific mode of combination and there should not be any alteration in their composition by addition or deletion. Thus, it is stated in the *Susruta* that efficacy of these (formulae) is determined in the scriptures and they are found to produce the results attributed to them and so without taking recourse to reasoning or trying to find out the rationale behind their prescribed therapeutic properties, these formulae are required to be adopted like a *mantra*—cf. *Susruta* : *Cikitsā* 1 ; 75–76.

Drugs for anuvasana type of enema :

अतः परमनुवासनद्रव्याण्यनुव्याख्यास्यामः । अनुवासनं तु स्नेह एव ।
 स्नेहस्तु द्रिविधः—स्थावरात्मकः, जङ्गमात्मकश्च । तत्र स्थावरात्मकः स्नेहस्तैल-
 मतैलं च । तद्यं तैलमेव कृत्योपदेश्यामः, सर्वतस्तैलप्राधान्यात् । जङ्गमात्म-
 कस्तु वसा, मज्जा, सर्पिरिति । तेषां तैलवसामज्जसर्पिणां यथापूर्वं श्रेष्ठं वातश्ले-
 ष्मविकारेष्वनुवासनीयेषु यथोच्चरं तु पित्तविकारेषु, सर्व एव वा सर्वविकारे-
 ष्वपि योगमुपयान्ति संस्कारविधिविशेषादिति ॥ १५० ॥

We shall now expound the drugs used in *anuvasana* type of (unctuous) enema. *Anuvasana* type of enema is composed of fats. Fats are of two types, depending upon their sources, viz. vegetable and animal. Vegetable oils may be obtained from *tila* (*Sesamum indicum* Linn.) or from other such oil-bearing plants. Both these types of oil will be described by

a single term 'taila' (lit. meaning the oil extracted from the seeds of *tila* i.e. *Sesamum indicum* Linn.) because the oil extracted from *tila* is the most important of all oils. Muscle fat, marrow and ghee constitute the fats of animal origin. The preceding ones bear superiority over the succeeding ones as ingredients of unctuous enema for the treatment of diseases caused by *vāta* and *kapha*. On the other hand, the succeeding ones bear superiority over the preceding ones for the treatment of diseases due to *pitta*. When processed in a specific manner, all of them are, however, useful in all types of diseases. [150]

Drugs used for unctuous enema are described in this paragraph in order of utility. In addition to *tila* (*Sesamum indicum* Linn.), oils are extracted from *sarsapa* (*Brassica nigra* Koch) etc. Of them, the oil extracted from *tila* which is known as 'taila' (तिलोद्धवं तैलम्) is the most useful one. So the term 'taila' implies other types of oil as well—cf. *Suśruta*, *Sūtra* 45 : 130.

Drugs for errhines :

शिरोविरेचनद्रव्याणि पुनरपामार्गपिप्पलीमरिचविडङ्गशिश्रुतिष्ठुरु-
पिलवजाज्यजमोदावार्ताकीपृथ्वीकैलाहरेणुकाफलानि च, सुमुखसुरसकुठेरक-
गण्डीरकालमालकपर्णसक्षवकफणिज्ञकहरिद्राघृङ्गवेरमूलकलशुनतकरीसर्षप-
पत्राणि च, अर्कालक्कुष्टनगदन्तीवचापामार्गश्वेताज्योतिष्ठमतीगवाक्षीगण्डीरपु-
ष्यवाक्पुष्पीवृश्चिकालीवयस्थातिवेषामूलानि च, हरिद्राघृङ्गवेरमूलकलशुन-
कन्दाश्च, लोध्रमदनसपर्णनिम्बार्कपुष्पाणि च, देवदार्वगुरुसरलशङ्खकीजिङ्गिन्य-
सनहिङ्गनिर्यासाश्च, तेजोवतीवराङ्गेहुदीशोभाज्ञनकबृहतीकण्टकारिकात्वचश्चेति ।
शिरोविरेचनं सप्तविधं, फल-पत्र-मूल-कन्द-पुष्प-निर्यास-त्वगाश्रयभेदात् । लवण-
कटुतिक्कषयाणि चेन्द्रियोपशयानि तथा उपराण्यनुकान्त्यपि द्रव्याणि यथायोग-
विहितानि शिरोविरेचनार्थमुपदिश्यन्त इति ॥ १५१ ॥

The following drugs help in the elimination of *dosas* from the head (errhines).

(a) *Fruits of*

1. *apāmārga* (*Achyranthes aspera* Linn.)
2. *pippalī* (*Piper longum* Linn.)
3. *marica* (*Piper nigrum* Linn.)
4. *viḍāṅga* (*Embelia ribes* Burm f.)
5. *śigru* (*Moringa oleifera* Lam.)
6. *siriṣa* (*Albizzia lebbeck* Benth.)

7. *tumburu* (*Xanthoxylon alatum* Roxb.)
8. *pīlu* (*Salvadora persica* Linn.)
9. *ajājī* (*Cuminum cyminum* Linn.)
10. *ajamoda* (*Tachyspermum roxburghianum* Sprague)
11. *vārtāki* (*Solanum melongena* Linn.)
12. *pīthuikā* (*Nigella saliva* Linn.)
13. *elā* (*Elettaria cardamomum* Maton)
14. *hareñuka* (*Pisum sativum* Linn.)

(b) leaves of

1. various types of bacils, viz, *sumukha*, *surasa*, *kūtheraka*, *gaṇḍīra*, *kālamālaka*, *parṇāsa*, *kṣavaka* and *phaṇijjhaka*;
2. *haridrā* (*Curcuma longa* Linn.)
3. *śṛṅgavera* (*Zingiber officinale* Rosc.)
4. *mūlaka* (*Raphanus sativus* Linn.)
5. *laśuna* (*Allium sativum* Linn.)
6. *tarkāri* (*Sesbania sesban* Marr.)
7. *sarṣapa* (*Brassica nigra* Koch)

(c) roots of

1. *arka* (*Calotropis gigantea* R.Br.ex Ait.)
2. *alarka* (a type of *arka*)
3. *kuṣṭha* (*Saussurea lappa* C.B. Clarke)
4. *nāgadantī* (a varity of *Baliospermum montanum* muell-Arg)
5. *vacā* (*Acorus calamus* Linn.)
6. *apāmārga* (*Achyranthes aspera* Linn.)
7. *śvetā* (white variety of *clitoria ternatea* Linn.)
8. *jyotiṣmatī* (*Celastrus paniculata* Willd.)
9. *gavākṣī* (*Citrullus colocynthis* Schrad)
10. *gaṇḍirapuṣpi* (*Euphorbia antiquorum* Linn.)
11. *avākpuṣpi* (*Achyranthes aspera* Linn.)
12. *vrścīkālī* (*Tragia involucrata* Linn.)
13. *vayasthā* (*Bacopa monnieri* Pennel.)
14. *ativiṣā* (*Aconitum heterophyllum* Wall.)

(d) rhizoms etc., of

1. *haridrā* (*Curcuma longa* Linn.)
2. *śṛṅgavera* (*Zingiber officinale* Rosc.)
3. *mūlaka* (*Raphanus sativus* Linn.)
4. *laśuna* (*Allium sativum* Linn.)

(e) flowers of

1. *lodhra* (*Symplocos racemosa* Roxb.)
2. *madana* (*Randia dumetorum* Lam.)
3. *saptaparna* (*Alstonia scholaris* R. Br.)
4. *nimba* (*Azadirachta indica* A. Juss.)
5. *arka* (*Calotropis gigantea* R.Br.Ex Ait.)

(f) resinous exudations of

1. *devadāru* (*Cedrus deodara* Loud.)
2. *aguru* (*Aquilaria agallocha* Roxb.)
3. *sarala* (*Pinus roxburghii* Sergent)
4. *sallakī* (*Boswellia serrat serrate* Roxb.)
5. *jingini* (?)
6. *asana* (*Terminalia tomentosa* W.&A.)
7. *hiṅgu* (*Ferula narthex* Boiss.)

(g) barks of

1. *tejovatī* (*Zanthoxylon alatum* Roxb.)
2. *varaṅga* (*Cinnamomum zeylanicum* Blume.)
3. *iṅgudi* (*Balanites aegyptica* Delile)
4. *sobhāñjanaka* (*Moringa oleifera* Lam.)
5. *bṛhatī* (*Solanum indicum* Linn.)
6. *kaṇṭakarikā* (*Solanum xanthocarpum* Schrad & Wendl.)

Thus articles used as errhines are classified into seven types, depending upon their source, viz. fruit, leaf, root, rhizome, flower, resinous exudation and bark.

Such of the saline, pungent and bitter drugs as are soothing to the sense organs and other drugs which are not enumerated here but have similar properties may also be used (as errhines) for the elimination of *doṣas* from the head. [151]

तत्र स्थोकाः—

लक्षणाचार्यशिष्याणां परीक्षा कारणं च यत् ।
 अध्येयाच्यापनविधी संभाषविधिरेव च ॥ १५२ ॥
 षडभिरुनानि पञ्चाशद्वादसार्गपदानि च ।
 पदानि दश चान्यानि कारणादीनि तत्त्वतः ॥ १५३ ॥
 संप्रश्नश्च परीक्षादेर्नवको चमनादिषु ।
 भिर्षजितीये रोगाणां विमाने संप्रकाशितः ॥ १५४ ॥

To sum up :

Examination of the text, the preceptor and the disciple, objects of such examination, procedure for study, teaching and deliberations in a Seminar, forty-four terms concerning the arguments in a seminar, ten other terms, viz. cause etc., nine queries about examination etc. drugs used for emesis etc.—all these topics are discussed in this chapter on the “Determination of the Specific Requirements for the Treatment of Diseases.” [152–154]

बहुविधिमद्गुरुकर्मर्थजातं बहुविधवाक्यविचित्रमर्थकान्तम् ।
 बहुविधशुभशब्दसन्धियुक्तं बहुविधवादनिसूदनं परेषाम् ॥ १५५ ॥
 इमां मृति बहुविधहेतुसंश्रयां विजिक्षिवान् परमतवादसूदनीम् ।
 न सज्जते परवचनावमर्द्द नैर्न शक्यते परवचनैश्च मर्दितुम् ॥ १५६ ॥
 दोषादीनां तु भावानां सर्वेषामेव हेतुमत् ।
 मानात् सम्यग्विमानानि निरुक्तानि विभागशः ॥ १५७ ॥

Thus the various aspects of the Specific Determination have been explained decorated with a variety of sentences elegant with relevant meanings, endowed with the conjunction of the various auspicious terms and with powers to nullify the various arguments put-forth by opponents. One who is well acquainted with the contents of this chapter based on the various principles of causality and with powers to nullify the arguments putforth by opponents would not surrender to the views of opponents nor can he ever be defeated by the arguments putforth by his opponents. So all the Specific Determinations classified according to the measurement of the therapeutic aspects like the *dosas* etc., are described here with apt arguments. [155–157].

इत्यग्निवेशकृते तत्त्वे चरकप्रतिसंस्कृते विमानस्थाने
 रोगभिषणितीयविमानं नामाष्टमोऽध्यायः ॥ ८ ॥

Thus ends the eighth chapter on “the Determination of the Specific Requirements for the Treatment of Diseases” of the *Vimāna section* of Agniveśa’s work as redacted by Caraka. [8]

शारीरस्थानम्

SĀRIRASTHĀNA

(Section on the Constitution of the Body)

CHAPTER I

EMPIRICAL SOUL

प्रथमोऽध्यायः

अथातः कतिधा पुरुषीयं शारीरं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवामात्रेयः ॥ २ ॥

We shall now expound the chapter dealing with the various divisions of the “Empirical Soul” etc., conducive to the understanding of the constitution of the body.

Thus said Lord Ātreya [1-2]

In the *Nidānasthāna* (section on the Diagnosis of Diseases), diseases are described. In the *Vimānasthāna* (section on the determination of the specific characteristic of drugs and diets) the classification of the tastes and *dosas* is described. The main object being the treatment which applies to the body, the various components of the body are being described here. One cannot undertake any treatment unless he is conversant with the entire physical constitution; so this section (is) on the constitution of the body.

In fact it is the “Empirical Soul” who plays a dominant role in the treatment conducive to the eradication of miseries and attainment of salvation, so this chapter on “the Division of Empirical soul” is being dealt with first.

Querries of Agniveśa :

कतिधा पुरुषो धीमन् ! धातुभेदेन भिद्यते ।
पुरुषः कारणं कस्मात्, प्रभवः पुरुषस्य कः ॥ ३ ॥
किमज्ञो ज्ञः, स नित्यः कि किमनित्यो निदर्शितः ।
प्रकृतिः का, विकाराः के, कि लिङ्गं पुरुषस्य च ॥ ४ ॥
निष्क्रियं च स्वतन्त्रं च वशिनं सर्वगं विभुम् ।
वदन्त्यात्मानमात्मज्ञाः क्षेत्रज्ञं साक्षिणं तथा ॥ ५ ॥
निष्क्रियस्य क्रिया तस्य भगवन् ! विद्यते कथम् ।
स्वतन्त्रश्वेदनिष्टासु कथं योनिषु जायते ॥ ६ ॥

वशी यद्यसुखैः कस्माद्गावैराकम्यते बलात् ।
 सर्वाः सर्वगतत्वाच्च वेदनाः किं न वेत्ति सः ॥ ७ ॥
 न पश्यति विभुः कस्माच्छैलकुड्यतिरस्फुतम् ।
 क्षेत्रज्ञः क्षेत्रमयथा किं पूर्वमिति संशयः ॥ ८ ॥
 क्षेयं क्षेत्रं विना पूर्वं क्षेत्रज्ञो हि न युज्यते ।
 क्षेत्रं च यदि पूर्वं स्थानं क्षेत्रज्ञः स्थादशाश्वतः ॥ ९ ॥
 साक्षिभूतश्च कस्यायं कर्ता ह्यन्यो न विद्यते ।
 स्थानं कथं चाविकारस्य विशेषो वेदनाकृतः ॥ १० ॥
 अथ चार्तस्य भगवंस्तिसृणां कां चिकित्सति ।
 अतीतां वेदनां वैयो वर्तमानां भविष्यतीम् ॥ ११ ॥
 भविष्यन्त्या असंप्राप्तिरतीताया अनागमः ।
 सांप्रतिक्वा अपि स्थानं नास्त्यतेऽसंशयो ह्यतः ॥ १२ ॥
 कारणं वेदनानां कि, किमधिष्ठानमुच्यते ।
 क चैता वेदनाः सर्वा निवृत्तिं यान्त्यशेषतः ॥ १३ ॥
 सर्ववित् सर्वसंन्यासी सर्वसंयोगनिःसृतः ।
 एकः प्रशान्तो भूतात्मा कैलिङ्गरूपलभ्यते ॥ १४ ॥
 इत्यश्चिवेशस्य वचः श्रुत्वा मतिमतां वरः ।
 सर्वं यथावत् प्रोवाच प्रशान्तात्मा पुनर्वसुः ॥ १५ ॥

Agniveśa requested Punarvasu to explain the following :

1. What are the divisions of the 'Empirical Soul' according to the division of *dhatus* (elements) ?
2. Why is the 'Empirical Soul' considered to be the cause of the body ?
3. What is the origin of 'Empirical Soul' ?
4. Is 'Empirical Soul' a sentient or insentient object ?
5. Is he eternal or ephemeral ?
6. What is the primordial source of creation and what are its modifications ?
7. What is the proof of the existence of the 'Empirical Soul' ?
8. Those proficient in spiritual science describe the 'Empirical Soul' as devoid of action, independent, absolutely free, all pervasive, knower of the body and a witness. When is the 'Empirical Soul' devoid of action; how does action emanate from him ?

9. If He is independent, how does he take birth among the undesirable species ?
10. If He is absolutely free, how is He overpowered with miserable ideas ?
11. Being omnipotent, is He not aware of all miseries ?
12. If He is ubiquitous, how does He not visualise things interrupted by hills and walls ?
13. Which comes first—the body or the knower of the body (Soul) ?
14. In the absence of the knowable object in the form of the body, emergence of the 'Empirical Soul' as the body, does not appear to be appropriate. But then if the body comes first, the knower of the body i. e. the 'Empirical Soul' would loss its eternity.
15. What is it of which the 'Empirical Soul' is considered to be a witness ?
16. There is none else who could create things (one and the same 'Empirical Soul' cannot be a creator as well as a witness at the same time).

If the 'Empirical Soul' is derived from any modification, how does He subject Himself to specific situations arising out of miseries (diseases) ?

- 17–19. Out of the three types of miseries of a patient, which one is treated by the physician—the past one, the present one or the future one ? The future one is in fact not in existence; the past one has already ceased to exist and even the present one is, in a sense, momentary and so in the absence of continuity, it is not amenable to any treatment. So the above doubt about treatment is justifiable.
20. What are the causative factors of miseries (diseases) ?
21. What are sites of their manifestation ?
22. Where do all these miseries sub-merge after their cure ?
23. What are the signs which help in the recognition of the 'Empirical Soul' which is omnipresent, all-renouncing, devoid of all contacts, only one and tranquil ? [3–15]

The term *puruṣa* implies the 'Empirical Self' as distinct from the twenty-four elements. *Puruṣa* represents the element of consciousness, i. e. the 'Soul' different from the body. The causative factors as well as the grounds for the occurrence of miseries have already been described in the chapter on "The quest for Longevity". The same question has however been repeated here in as much as the present context demands it and also in view of the specific points involved in the query.

Different concepts about Puruṣa :

खाद्यश्वेतनापष्टा धातवः पुरुषः स्मृतः ।
चेतनाधातुरप्येकः स्मृतः पुरुषसंज्ञकः ॥ १६ ॥

Puruṣa comprises six *dhātus* (elements), viz. five *mahābhūtas* (in their subtle form) and consciousness. Even the element of consciousness alone constitutes *Puruṣa*. [16]

The definition of *Puruṣa* as given in the above verse is in keeping with the tradition of the *Vaiśeṣika* system of philosophy. Suśruta also defines *Puruṣa* in the same way – c.f. *Suśruta: Sūtra* 1:22. Here consciousness stands for the Soul, the receptacle of consciousness endowed with the mind. The above definition of *Puruṣa* is in fact a legacy of the ancient preceptors, as the of the term 'smṛta' aptly suggests.

The five elements also include the respective five sense organs. Even the element of consciousness is known as *Puruṣa* as corroborated from the traditional etymology, viz. "One who sleeps in the body" (पुरि शरीरे श्रेते इति). According to this definition, *Puruṣa* is something altogether detached from the body. This is how *Puruṣa* has also been defined in other scriptures. But as a matter of fact it is the *Puruṣa* comprising the six *dhātus* who comes under the purview of the science of medicine and not the *Puruṣa* who is detached from the body.

The term *Puruṣa* can equally apply to cows etc., which also are made of the six *dhātus*. But the term specially refers to human beings who dominate all.

Another concept of Puruṣa comprising twenty-four factors :

पुनश्च धातुभेदेन चतुर्विंशतिकः स्मृतः ।
मनो दशेन्द्रियाण्यर्थः प्रकृतिश्चाप्यधातुकी ॥ १७ ॥

According to another classification, *Puruṣa* comprises twenty four *dhātus*, i. e. mind, ten *indriyas* (sensory & motor organs), five objects of sense organs and *Prakṛti* (consisting of eight *dhātus*, viz. five *mahābhūtas* (in their subtle form), *ahamkrā* (ego), *mahān* (intellect) and *avyakta* (primordial element)) [17]

According to the *Sāṃkhya* system of philosophy, *Puruṣa* constitutes the 25th element. Here *Puruṣa* is included under *Prakṛti* (*Avyakta*) because the quality of unmanifestedness is common to both *Puruṣa* and *Prakṛti*. The group of eight *dhātus* consists of five *mahābhūtas* in their subtle form, *ahamkāra* (ego), intellect and *Avyakta* (primordial element)—cf. Śārīra 1 : 63

Proof of Existence of Mind and its attributes :

लक्षणं मनसो ज्ञानस्याभावो भाव एव च ।
सति ह्यात्मेन्द्रियार्थानां सञ्चिकर्षे न वर्तते ॥ १८ ॥
वैवृत्यान्मनसो ज्ञानं सान्निध्यात्मच्च वर्तते ।
अणुत्वमथ चैकत्वं द्वौ गुणौ मनसः स्मृतौ ॥ १९ ॥

Sometimes, one understands a thing and sometimes one does not. This proves the existence of the mind as a separate sense organ. That is why, when there is no contact of the mind with the sense organs and their objects, no understanding of things can occur. It is only when the required mental contact is there, that one can understand things. Atomicity and oneness are considered to be the two characteristic features of the mind. [18-19]

Mind comes first in the list of twenty four elements described in the preceding verse. So first of all the characteristic features of the mind is being described in this verse.

One can find from his practical experience that even if the sense organs are connected with their objects it does not necessarily follow that the required understanding will always be there. Sometimes there is understanding and some other times it is not. This clearly shows that there is a sixth sense organ which determines the understanding of the object and but for which, there is no understanding at all despite the contacts of the sense organs with their respective objects.

Unlike the Soul who is omnipresent and ubiquitous, the mind is atomic and only one in nature. If it were not so, all kinds of perceptions would have occurred at a time.

Objects of Mind :

चिन्त्यं विचार्यमूहं च ध्येयं संकल्प्यमेव च ।
यत्क्लिच्छनसो ब्रेयं तत् सर्वे हर्थसंशकम् ॥ २० ॥
इन्द्रियभिग्रहः कर्म मनसः स्वस्य निग्रहः ।
ऊहो विचारश्च, ततः परं बुद्धिः प्रवर्तते ॥ २१ ॥

Things requiring thought, consideration, hypothesis, attention, determination or whatever can be known by means

of the mind, are regarded as its objects. Control of sense organs, self restraint, hypothesis and consideration represent the action of the mind. Beyond that flourishes the domain of intellect. [20-21]

Apart from things requiring thought, consideration, hypothesis, attention and determination, there are some other subtleties like happiness, miseries etc., which constitute the objects of the mind. Happiness etc., are the objects which are perceptible by the mind alone without any aid from other sense faculties. Other objects are essentially included under the objects of sense faculties. Thus, there is no addition to the five objects included in the twenty four elements described above. As regards happiness, miseries etc., they constitute parts of intellect which is also an element in the above list.

Control or direction of sense faculties and self-restraint constitute the action of the mind. Even the restraint of the mind is possible only with the help of the mind. As it has been said, "the mind, if combined with other qualities does dissociate itself with the objects of its indulgence". It has further been stated that the mind being always directed towards its objects, cannot be taken away from the undesirable objects without patience. Patience alone is capable of controlling the mind. Here, patience is the instrument by means of which the mind controls itself.

Hypothesis (*ūha*) is nothing but knowledge indistinct. Consideration (*vicāra*) is knowledge distinct enough to direct the mind to accept or reject a thing. According to the *Sāṃkhya* system, there are four causative factors for distinct knowledge, viz. (1) external (comprising sense organs and (2-4) internal (comprising mind, ego and intellect). As regards the external factors, viz. sense organs, they can only have indeterminate or indistinct perception. It is the mind which guides as to what is acceptable or rejectable; the 'ego' brings about attachment in the form of this is mine, I am authorised to do this; and intellect directs action in the form of "I will shun that man due to his defects; I will welcome this man due to his good qualities". As regards hypothesis, it is in fact an action of the external sense organs. But here again mind lies at the very root of such actions. So this is considered to be an action of the mind.—cf. *Sāṃkhya-kārikā* 35.

Ego and intellect always go together. Their domain starts beyond that of hypothesis (*ūha*) and consideration (*vicāra*). The action of ego is in fact included in that of intellect.—cf. *Sāṃkhya-kārikā* 36.

Process of perception :

इन्द्रियेणेन्द्रियाथो हि समनस्केन गृह्णते ।
कल्प्यते मनसा तृप्त्वं गुणतो दोषतोऽथवा ॥ २२ ॥

जायते विषये तत्र या बुद्धिनिश्चयात्मिका ।
व्यवस्थति तथा चक्षुं कर्तुं वा बुद्धिपूर्वकम् ॥ २३ ॥

Objects are perceived with the help of sense organs together with mind. This perception is purely mental in the beginning; the practical advantages or disadvantages are ascertained thereafter. The intellect which determines (the specific properties of the object impels a (same) individual to speak or act intelligently.

Composition of Sense-organs :

एकैकाधिकयुक्तानि खादीनामिन्द्रियाणि तु ।
पञ्च कर्मानुमेयानि येभ्यो बुद्धिः प्रवर्तते ॥ २४ ॥

The five sense faculties, made of all the five *mahābhūtas* with one *mahābhūta* as a predominant factor in each, are inferred from their five respective action which serve as agents for the manifestation of the intellect. [24]

As explained earlier, each of the five sense faculties shares the features of all the five *mahābhūta*s, of course with one of the latter predominating. E. G. the visual sense faculty comprises all the five *mahābhūtas* with *tejas* dominating.

According to *Sāṃkhya* system the sense faculties are evolved out of *ahamkāra* (ego) – cf. *Sāṃkhya-kārikā* 25. But there is a difference of opinion about the source of these sense faculties and the view taken according to the above verse is that the sense faculties are evolved out of the five *mahābhūtas*. An alternative explanation given is that the properties ascribed to the objects are but secondarily ascribed to the respective sense faculties as well, E.G. if the visual sense faculties helps in visual perception where *tejas* is predominant, the property of *tejas* is also secondarily ascribed to this sense faculty.

Motor-organs and their functions :

हस्तौ पादौ गुदोपस्थं वागिन्द्रियमथापि च ।
कर्मनिंद्रियाणि पञ्चैव पादो गमनकर्मणि ॥ २५ ॥
पायूपस्थं विसर्गार्थं हस्तौ ग्रहणधारणे ।
जिह्वा वागिन्द्रियं वाक् च सत्या ज्योतिस्तमोऽनुता ॥ २६ ॥

Motor organs are of five categories, viz. hands, feet, anus, phallus and the organ of speech (tongue). Feet are useful in locomotion, anus and phallus for voiding and hands for collection and holding. The tongue represents the organ of speech which is of two kinds, viz. true and false. The former

can be compared to light which illuminates the wordly life and the life after death, and the latter to darkness which creates confusion. [25-26]

Attributs of five mahābhūtas :

महाभूतानि खं वायुरग्निरापः क्षितिस्तथा ।
शब्दः स्पर्शश्च रूपं च रसो गन्धश्च तदगुणाः ॥ २७ ॥

The five *mahābhūtas* are *ākāśa*, *vāyu*, *agni*, *jala* and *prthvi*. Their attributes are sound, touch, vision, taste and smell respectively. [27]

The attributes mentioned above are natural to there specific *mahābhūtas* in isolation. The major and the subsidiary attributes stated to be present in each of the *mahābhūtas* are due to the presence of the elements of four of the other *mahābhūtas* in each of the *mahābhūtas*. For example, the natural attribute of *prthvi* is smell only, but in view of the presence of the other four *mahābhūtas*, viz. *jala*, *tejas*, *vāyu* and *ākāśa* in it, *prthvi* is stated to have the attributes of all the five *mahābhūtas*.

Mahābhūtas & their attributes :

तेषामेकगुणः पूर्वो गुणवृद्धिः परे परे ।
पूर्वः पूर्वगुणश्चैव क्रमशो गुणिषु स्मृतः ॥ २८ ॥

Of the five *mahābhūtas* mentioned above, the first one (i.e. *ākāśa*) has only one attribute. The number of attributes in the succeeding *mahābhūtas* goes on increasing successively. The attributes of the preceding ones are added to those of the succeeding ones respectively. [28]

Ākāśa, the first *mahābhūta* has only one attribute i.e. *sabda* or sound. *Vāyu* being next in order has one attribute of its own, viz. *sparsa* or touch and also another attribute i.e. *sabda* or sound which is natural to the preceding one. Similarly *tejas* which comes next will have three attributes, viz. *rūpa* (vision), *sparsa* (touch) and *sabda* (sound); *jala* four, viz. *rasa* (taste), vision, touch and sound; and *prthvi* five, viz. *gandha* (smell), taste, vision, touch and sound.

The use of masculine gender for all the five *mahābhūtas* in the above verse is indicative of the fact that the author has *dhātus* in view while describing *mahābhūtas*—cf. *Śārīra*, 1 : 16.

Characteristics of Mahābhūtas :

खरद्रवचलोष्णत्वं भूजलानिलतेजसाम् ।
आकाशस्याप्रतीघातो दृष्टं लिङ्गं यथाक्रमम् ॥ २९ ॥
लक्षणं सर्वमेवैतत् स्पर्शनेन्द्रियगोचरम् ।
स्पर्शनेन्द्रियविशेषः स्पर्शो हि सविपर्ययः ॥ ३० ॥

Pṛthvi, jala, tejas and *vāy*n are characterized by *kharatva* (roughness), *dravatva* (liquidity), *uṣṇatva* (heat), *calatva* (mobility) and *apratiṣṭhatatva* (unobstructibility) respectively. All these attributes are perceptible by the tactile sense organ. Touch together with its absence is perceived by the tactile sense organ. [29–30]

Any substance having the quality of touch obstructs the movement. *Ākāśa* being devoid of tactile perception cannot obstruct any movement. Now the question arises whether the tactual sense organ can perceive the absence of touch in the *ākāśa*? The reply is that the tactile sense organ does not only perceive touch but also the absence of it. Liquidity and movement according to the *Sāṃkhya* system of philosophy are perceivable by the tactile sense organ. Whatever is perceived by the tactile sense organ is due to the *vāyu mahābhūta*.

The five *mahābhūtas* mentioned here in fact relate to the elements in their subtle forms, viz. *tanmātrās*—c.f. : *Sāṃkhya-kārikā* 38.

गुणः शरीरे गुणिनां निर्दिष्टाश्चिह्नमेव च ।

Thus the attributes and characteristics of the five physical elements are described. [31–1]

अर्थाः शब्दादयो व्येया गोचरा विषया गुणः ॥ ३१ ॥

The objects of sense organs are *sabda* etc., which constitute the attributes of gross *mahābhūtas*. [31]

The objects are as a matter of fact the modifications of the respective *mahābhūtas*. For example, *sabda* is nothing but the modification of *ākāśa*; touch is that of *vāyu*. That is to say whatever is perceptible by means of auditory sense organ is nothing but *ākāśa* and its attribute sound. Similarly, things perceptible by tactile sense organ are modifications of *vāyu* and nothing else.

Perceptive Faculty :

या यदिन्द्रियमाश्रित्य जन्तोर्बुद्धिः प्रवर्तते ।

याति सा तेन निर्देशं मनसा च मनोभवा ॥ ३२ ॥

भेदात् कार्येन्द्रियार्थानां वह्नयो वै बुद्धयः स्मृताः ।

आत्मेन्द्रियमनोर्थानामेकैका सन्निकर्षजा ॥ ३३ ॥

अङ्गुल्यङ्गुष्ठतलजस्तच्चीवीणानखोद्भवः ।

दृष्टः शब्दो यथा बुद्धिर्दृष्टा संयोगजा तथा ॥ ३४ ॥

Perceptive faculty of living beings shapes itself depending upon the contact it has with the various sense faculties. Mental perception like anxiety, sorrow is also based on the contact of perceptual faculty with the mental faculty.

Perceptual faculties are of several type depending upon the variations in action and objects of sense organs.

As one and the same sound differs according as it is produced out of friction in the finger and the thumb, and the guitar and nail, so does the perceptual faculty differ according to its production from out of the mutual contacts with the Soul, sense organs and objects of sense organs. [32-34]

The perceptual faculty in its subtle form, known as *mahat* takes different shapes according as it enters into the channels of the different sense faculties. For example, the subtle perceptual faculty entering the channels of visual sense organs takes the shape of visual perceptual faculty. So is the case with the auditory and other specific perceptual faculties. Similarly the same perceptual faculty entering the channel of mental faculty manifest itself in the form of mental perceptual faculty (e.g. anxiety, sorrow etc.).

It is not that the perceptual faculty is confined to the six sense faculties only. As a matter of fact, it has innumerable variations depending on the permutation and combination of action and objects of senses. In the present context, action means the different types of happiness and miseries.

Besides, the perceptual faculty varies according to the variations of the mutual contacts of the Soul, senses, mind and objects of senses. Such variations of the perceptual faculty can be compared to the variations in the sound produced by the friction of the thumb with the middle finger or that of guitar with the nails. As no sound can be produced in the absence of any of the accessories, so perceptual faculty cannot manifest itself in the absence of any one of the elements described above.

Puruṣa as co-ordinator :

बुद्धीन्द्रियमनोर्थानां विद्यायोगधरं परम् ।
चतुर्विंशतिको हेष राशिः पुरुषसंक्षकः ॥ ३५ ॥

The *avyakta* is the co-ordinator par-excellence of perceptual faculty, sense organs, mind and the objects of senses.

The combination of the above mentioned (verses 17-35) twenty four elements is known as *Puruṣa*. [35]

Even though *ahamkara* is not separately mentioned in the above verse, it is implied under cognition resulting from perceptual faculties in the form of "I see", "I hear" a thing etc. . Thus after having enumerated twenty three elements, the 24th one is being described in this verse. The *avyakta* constitutes this 24th element. This sustains the combination of perceptual faculty, sense organs etc. In fact, it is the *avyakta* which creates things for the enjoyment of *Puruṣa*. *Puruṣa* again is nothing but the combination of 24 elements described above.

The first line of the above verse could also be interpreted in a different way. The gross elements like sense organs and five *mahābhūtas* are described in the preceding verses. In the present verse *avyakta* and seven subtle elements known as *prakti-vikṛti*, viz. *mahat*, *ahankāra* and five subtle *mahābhūtas* are being described as co-ordinators of the rest of the elements.

Contact of Puruṣa because of Guṇas :

रजस्तमोभ्यां युक्तस्य संयोगेऽयमनन्तवान् ।
ताभ्यां निराकृताभ्यां तु सत्त्ववृद्धा निवर्तते ॥ ३६ ॥

The contact of *Puruṣa* with 24 elements continues so long as He is influenced by *rajas* and *tamas*. The moment He gets rid of *rajas* and *tamas*, He is freed from contacts by virtue of the dominance of *sattva*. [36]

As soon as *sattva* increases, it gives rise to pure knowledge and so it overcomes *rajas* and *tamas* which are responsible for creation resulting in the realization of *Puruṣa* as something distinct from *Prakṛti*. This realisation leads to salvation.

Knowledge of Puruṣa :

अत्र कर्म फलं चात्र ज्ञानं चात्र प्रतिष्ठितम् ।
अत्र मोहः सुखं दुःखं जीवितं मरणं स्वता ॥ ३७ ॥
एवं यो वेद तत्त्वेन स वेद प्रलयोदयो ।
पारंपर्यं चिकित्सां च ज्ञातव्यं यज्ञं किञ्चन ॥ ३८ ॥

It is in this combination of 24 elements which is known as *Puruṣa*, action, fruit of action, knowledge, ignorance, happiness, misery, life, death and ownership are established. One who duly knows this, knows the life, death, continuity of the body, treatment (physical and spiritual) and all other knowable objects. [37-38]

Puruṣa as a causative factor :

भास्त्वमः सत्यमनुतं वेदाः कर्म शुभाशुभम् ।
न स्युः कर्ता च बोद्धा च पुरुषो न भवेद्यदि ॥ ३९ ॥
नाश्रयो न सुखं नार्तिनं गतिनार्गतिनं वाक् ।
न विज्ञानं न शास्त्राणि न जन्म मरणं न च ॥ ४० ॥
न बन्ध्यो न च मोक्षः स्यात् पुरुषो न भवेद्यदि ।
कारणं पुरुषस्तस्मात् कारणाहैरुदाहृतः ॥ ४१ ॥
न चेत् कारणमात्मा स्याद्भादयः स्युरहेतुकाः ।
न चैषु संभवेज ज्ञानं न च तैः स्यात् प्रयोजनम् ॥ ४२ ॥

If the *Puruṣa* were not there, knowledge, ignorance, truth or falsehood, the *vedas*, good or bad action, the agent of action and the agent of knowledge could not exist. There would be no support, happiness, misery, movement, immobility, speech, knowledge, scriptures, birth, death, bondage or salvation. So *Puruṣa* is recognised as a cause (of creation) by those well versed in the theory of causality. If *Puruṣa* is not recognised as a cause, the above would be left without a cause. There would be no consciousness, non there would be any utility of theirs. [39-42]

Why is *Puruṣa* regarded as a cause of creation ? The explanation is that if *Puruṣa* were not there nothing would happen. Occurrence of intelligence, ignorance, support, movement, immobility etc. can be explained only when the existence of *Puruṣa* is admitted. Unless a conscious element namely *Puruṣa* is admitted, it would not be possible to explain intelligence, or ignorance which are the products of virtuous and sinful acts respectively. Where else could the virtuous and sinful acts find their support ? Similarly, truth or falsehood, good or bad actions, agents of actions etc., cannot be explained unless a conscious element as a support of these factors is recognised. Besides, all the above factors seem to have some utilitarian value. What would be their utility or in other words, what else they are meant for, if there is no conscious element to enjoy them ?

Baseless talks :

कृतं मृद्गण्डचक्रैश्च कुम्भकारादते घटम् ।
 कृतं मृत्तिणकाष्ठैश्च गृहकारादिना गृहम् ॥ ४३ ॥
 यो वदेत् स वदेहेहं संभयू करणैः कृतम् ।
 विना कर्तारमङ्गानाद्युक्त्यागमवहिष्कृतः ॥ ४४ ॥

Can a pitcher be constructed inspite of presence of the earth, rod, wheel etc., if there is no potter ? Can a house be constructed inspite of the earth, straw, beams etc., if there is no mason ? If not, how can the body be created just by virtue of the combination of different sense organs (without a conscious agent) ? It is only an ignorant person devoid of rational outlook and scriptural knowledge who can make such statements. [43-44]

Causality of Puruṣa :

कारणं पुरुषः सर्वैः प्रमाणैरूपलभ्यते ।
 येभ्यः प्रमेयं सर्वैभ्य आगमेभ्यः प्रमीयते ॥ ४५ ॥

All the sources of knowledge including scriptural which serve as instrument for knowledge of various kinds establish the causality of *Puruṣa*. [45].

Nastika-view :

न ते तत्सदृशास्त्वन्ये पारंपर्यसमुत्थितः ।
सारूप्याद्ये त एवेति निर्दिश्यन्ते नवा नवाः ॥ ४६ ॥
भावास्तेषां समुदयो निरीशः सत्यसंज्ञकः ।
कर्ता भोक्ता न स पुमानिति केचिद्वयवस्थिताः ॥ ४७ ॥

There are no permanent entities as such. They appear to be so because they are similar. As a matter of fact, they are produced afresh each time, consequitively. It is merely the combination of these ephemeral elements devoid of any permanent controlling agent us such that are known as living beings. It is they and not the soul as such are doers and enjoyers of action. This view is held by some schools of thought (Buddhists etc.). [46-47]

The above paragraph refers to the theory of momentary existence as propounded by Buddhists. According to them, different living beings are nothing but the combination of the various momentary phases of consciousness etc., bound with the chains (of momentary causality).

Its Defects :

तेषामन्यैः कृतस्यान्ये भावा भावैर्नवाः फलम् ।
भुजते सदृशाः प्राप्तं यैरात्मा नोपदिश्यते ॥ ४८ ॥

According to them (i. e. the propounders of the above theory, viz. Buddhists who do not believe in the existence of a permanent entity as Soul) the results of action performed by one would be enjoyed by some other similiar (momentary entities). [48]

Living beings are prompted to perform action in the hope of enjoying the fruits thereof. In case the above view is accepted, one who performs an act would not be in a position to enjoy the fruits of his action; some others would enjoy them. Thus the only incentive for ones indulgence in action would be at stake and it would be difficult to explain the relationship between a doer and his action if a permanent entity as soul is not accepted. Even when a cook cooks food for his master, the former has something personal (i.e. salary and other amenities) benefits in due.

Causality of Puruṣa emphasised :

करणान्यान्यता दृष्टा कर्तुः कर्ता स एव तु ।
कर्ता हि करणैर्युक्तः कारणं सर्वकर्मणाम् ॥ ४९ ॥

The bodily organs of a living being might be different but the Soul i.e. the agent of action is one and the same. The agent of action like a sculptor is an efficient cause of all actions (viz. sculpture etc.) by virtue of his possession of the various instruments like *vāṁśi* (?) and tongues. [49]

Additional proofs for causality of Puruṣa :

निमेषकालाङ्गावानां कालः शीघ्रतरोऽत्यये ।
भग्नानां न पुनर्भवः कृतं नान्यमुपैति च ॥ ५० ॥
प्रतं तत्त्वविदामेतद्यस्मात्स्मात् स कारणम् ।
क्रियोपभोगे भूतानां नित्यः पुरुषसंज्ञकः ॥ ५१ ॥

Physical elements get destroyed at a rate faster than the twinkling of an eye; those destroyed do not come back to their original form again and the results of the deeds (like *yajña*) of one individual are not enjoyed by another individual. The learned ones are therefore of the view that there is a permanent entity known as *Puruṣa* who is the causative factor for the action as well as for the enjoyment of its fruits. [50-51]

This paragraph represents a concrete proof for the existence of a permanent entity known as *Puruṣa* apart from the ephemeral physical manifestations. Being cooked by the respective *agnis*, *dhātus* (tissue elements) in the bodies of living beings constantly undergo the process of destruction at a rate even faster than the twinkling of an eye. Regeneration of this ever decaying phenomena is impossible. Thus evidently these phenomena cannot ever enjoy the fruits of action. It might be argued that if the action of one body can be enjoyed by another body then this will equally hold good for the fruits of the good action of one individual, say Devadatta to be enjoyed by another individual say *Yajñadatta* which is not a reality. Thus it can safely be concluded that apart from the body which is in the process of constant decay, there is a factor viz. *Puruṣa* (Soul) which is eternal and which is responsible for the manifestation of actions, and it is He who enjoys the fruits of such actions.

Proof of the existence of soul :

अहम्बूतः फलं कर्म वेदान्तरणतिः स्मृतिः ।
विषये सति भूतानां कारणे वेदमन्तरा ॥ ५२ ॥

In living beings, a factor other than the body (i.e. the soul) is responsible for ego, enjoyment of the fruits of action,

engagement in action, transmigration and memory of the individual. [52]

It will not be possible to explain the existence of ego etc., unless the existence of a permanent entity known as *Puruṣa* separate from the body is admitted.

Paramātman and Rāsi Puruṣa :

प्रभवो न ह्यनादित्वाद्विद्यते परमात्मनः ।
पुरुषो राशिसंबस्तु मोहेच्छाद्रेषकर्मजः ॥ ५३ ॥

As the Supreme Soul is beginning less, no birth as such can be ascribed to Him. Of course the Empirical Soul (*Puruṣa*) who represents the combination of 24 elements is born out of action prompted by likes and dislikes originated from ignorance. [53]

The above paragraph represents the answer to the query raised regarding the origin of *Puruṣa* in verse no. 3.

Process of Perception :

आत्मा इः करणैर्योगाज् ज्ञानं त्वस्थ प्रवर्तते ।
करणानामवैमल्यादयोगाद्वा न वर्तते ॥ ५४ ॥
पश्यतोऽपि यथाऽदर्शं संक्षिष्टे नास्ति दर्शनम् ।
तत्त्वं जले वा कलुषे चेतस्युपद्धते तथा ॥ ५५ ॥

The Empirical Soul is endowed with the power of perception. It perceives things when it is associated with the mind, intellect and sense faculties. If these instruments of perception are either absent (not in association with the Empirical Soul) or impeded, then there will be no perception. One cannot get the real reflected picture of an image from a mirror which is covered with dirt or from water which is muddy. Similar is the case when the mind etc. get afflicted. [54-55]

This paragraph furnishes answer to the query, "Is the Empirical Soul a sentient or an insentient object ?"

Co-ordination of various factors for Perception :

करणाति मनो बुद्धिरुद्धिकर्मेन्द्रियाणि च ।
कर्तुः संयोगजं कर्म वेदना बुद्धिरेव च ॥ ५६ ॥
नैकः प्रवर्तते कर्तुं भूतात्मा नास्तुते फलम् ।
संयोगादर्तते सर्वं तस्मृते नास्ति किञ्चन ॥ ५७ ॥

The instruments of knowledge are mind, intellect and cognitive and conative organs. Their association with the Doer (Empirical Soul) results in action, sensation and understanding. The Empirical Soul alone (in the absence of instruments of knowledge) does neither initiate action nor enjoy the fruit of action. Combination of all these factors is responsible for the manifestation of every thing and without that nothing exists. [56-57]

Empirical Soul and manifestations :

न ह्येको वर्तते भावो वर्तते नाप्यहेतुकः ।
शीघ्रगत्वात्स्वभावात्त्वभावो न व्यतिवर्तते ॥ ५८ ॥

The Empirical Soul not alone but accompanied with instruments of knowledge is responsible for the manifestation of things. The process of decay on the other hand being too quick in succession does not need any cause as such. [58]

Nothing can be caused by the Empirical Soul alone. It is only when the Empirical Soul is accompanied with instruments of knowledge that it is responsible for all kinds of manifestations. This principle holds good in respect of matters relating to creative evolution. As regards the process of destruction, this does not need any cause as such. It is automatic. The reason is that the process of destruction is too quick to allow any other causative factor to leave any impact thereon—cf. *Sūtra* 16 : 28

Absolute Soul and Empirical Soul :

अनादिः पुरुषो नित्यो विपरीतस्तु हेतुजः ।
सद्कारणविनित्यं वृष्टं हेतुजमन्यथा ॥ ५९ ॥

The Absolute Soul is beginningless and as such is eternal. The Empirical Soul (i.e. the combination of 24 elements) being caused by something is not so i.e. it has a beginning and is ephemeral.

All that exists without cause is eternal. Anything produced from a cause is ephemeral. [59]

The term ‘sat’ implies something whose positive existence is established for all times—past, present and future. *Prāgabhava* i.e. prior-relative—relation is not considered to be eternal because even though it might relate to all times it does not constitute a positive existence.

तदेव भावाद्याहां नित्यत्वं न कुतश्चन ।
भावाज्ज्ञेयं तदव्यक्तमचिन्त्यं व्यक्तमन्यथा ॥ ६० ॥

अव्यक्तमात्मा क्षेत्रज्ञः शाश्वतो विभुरव्ययः ।
 तस्माद्यदन्यतद्वाक्त, वक्ष्यते चापरं द्वयम् ॥ ६१ ॥
 व्यक्तमैन्द्रियक चैव गृह्णते तद्विन्द्रियैः ।
 अतोऽन्यत पुनरव्यक्तं लिङ्गग्राह्यमतीन्द्रियम् ॥ ६२ ॥

The Absolute Soul cannot be perceived by anything, for eternity is not caused by anything. So the Absolute Soul is unmanifested and imperceptible. The manifested creation is of course otherwise.

The Absolute Soul is unmanifested, knower of creation, eternal, universal and indestructible. The manifested creation (Empirical Soul) is of course otherwise. Another way of distinguishing manifested things from the unmanifested one is that the former can be perceived by sense faculties. The latter is transcendental in nature and is perceptible; it can only be inferred (rather than perceived). [60-62]

Twenty-four Elements :

खादीनि बुद्धिरव्यक्तमहङ्कारस्तथाऽष्टमः ।
 भूतप्रकृतिसुहिष्ठा विकाराश्चैव षोडश ॥ ६३ ॥
 बुद्धीन्द्रियाणि पञ्चैव पञ्च कर्मन्द्रियाणि च ।
 समनस्काश्च पञ्चर्था विकारा इति सर्वशिताः ॥ ६४ ॥

The five subtle elements (viz. *śabdatanmātra*, *sparsatanmātra*, *rūpatanmātra*, *rasatanmātra* and *gandhatanmātra*, *buddhi* (intellect), *avyakta* (*Prakṛti* or nature) and *ahaṅkāra* (ego) are the eight sources of creation. Transformation (*vikāra*) are sixteen in number, viz five sense faculties, five motor faculties, mind and five *mahābhūtas*. [63-64]

These verses provide answer to the query raised in the verse No. 4, regarding *Prakṛti* and Its manifested forms (*vikāra*). As a matter of fact, it is only *Prakṛti* in its unmanifested form which constitutes the source of creation. *Buddhi* (intellect) etc., in fact represent the various stages of evolution of *Prakṛti*. Even so, they are listed as the source of creation inasmuch as they constitute the source of the subsequent source of evolution — c.f. *Sāṃkhya-kārikā* 3.

Kṣetra and Kṣetrajña :

इति क्षेत्रं समुद्दिष्टं सर्वमव्यक्तवर्जितम् ।
 अव्यक्तमस्य क्षेत्रस्य क्षेत्रज्ञमृषयो विदुः ॥ ६५ ॥

All this taken together except the unmanifested one (*avyakta*) is known as *kṣetra* i.e. corpus. The unmanifested one is known as *Kṣetrajña* (knower of the corpus). [65]

The term 'avyaktavarjitam' implies the exclusion of *Prakṛti* and *Puruṣa* from the corpus, that is *kṣetra*. Both *Prakṛti* and *Puruṣa* on the other hand are regarded as the knower of the corpus. Even though, *Prakṛti* is devoid of consciousness, it does derive consciousness from *Puruṣa* and so it can very well be regarded as knower of the corpus.

Process of creation :

जायते बुद्धिरव्यक्ताद्वा इहमिति मन्यते ।
परं खादीन्यहङ्कारादुत्पद्यन्ते यथाक्रमम् ॥ ६६ ॥
ततः संपूर्णसर्वाङ्गो जातोऽभ्युदित उच्यते ।

The intellect (*buddhi*) originates from *avyakta*, ego (*ahamkara*) from intellect (*buddhi*) and five *mahābhūtas*, viz. *ākāsa* etc. from ego. The Empirical Soul thus manifested in its entirety is regarded as born. [66-67]

According to the *Sāṃkhya-kārikā* : 25 the *ahamkāra* (ego), predominated by *sattva* quality gives rise to eleven sensory and motor organs including mind. The *ahamkāra* predominated by *tamas* quality gives rise to five *tanmātrās*. Thus the stage of the five *mahābhūtas* comes after the evolution of five *tanmātrās*. After the stage of five *mahābhūtas*, the conscious element i.e. the Absolute Soul combines himself with five *mahābhūtas*, sensory and motor organs etc., thus manifesting himself in the form of an Empirical Soul. This is how the earlier creation started.

Process of dissolution :

पुरुषः प्रलये चेष्टैः पुनर्भावैर्वियुज्यते ॥ ६७ ॥
अव्यक्ताद्वाक्तां याति व्यक्तादव्यक्तां पुनः ।
रजस्तमोभ्यामाविष्टशक्वत् परिवर्तते ॥ ६८ ॥
येषां छन्दे परा सक्तिरङ्गारपराश्रम्ये ।
उदयप्रलयौ तेषां न तेषां ये त्वतोऽन्यथा ॥ ६९ ॥

During the time of destruction of the age, the *Puruṣa* (Soul) again dissociates himself from all the manifestations meant for his enjoyment, viz. *buddhi* etc. The universe accompanied with *rajas* and *tamas* moves around from the unmanifested stage to the manifested one, and then again from the manifested stage to the unmanifested one.

Those who are attached to *rajas* and *tamas* and those who are egoistic undergo the process of birth and death; others do not. [67-69]

The second part of the verse 67 is interpreted somewhat differently by some scholars. According to them this describes the birth and death

of the individual—dissociation of *bhāvas* (intellect etc.) representing death. This is not correct because intellect etc; continue to exist during both the States, viz. birth and death.

Some scholars are of the view that the *Puruṣa* (Empirical Soul) is deprived of the manifested elements in the course of his death and is joined with them again during birth. But this interpretation is not correct. The manifested elements are always present in *Puruṣa* both during birth and death—c.f. Śārīra 2 : 37 and Sāṃkhyakārikā 40. The difference lies in the fact that these elements manifest themselves in a gross form after birth, and in subtle form after death. It is only at the time of the destruction of the age that all these manifested elements are absorbed in *Prakṛti* and in the beginning of creation, they evolve themselves from it. The process of evolution from *Prakṛti* starts with *mahat* ending with the five *mahābhūtas*. The process of absorption starts from the five *mahābhūtas* ending with the unmanifested *Prakṛti* as follows :

Five *mahābhūtas* are absorbed in the five subtle elements (*tanmātrās*), the five subtle elements and the eleven sensory and motor organs including mind in *ahamkāra*, *ahamkāra* in *buddhi* and *buddhi* in *Prakṛti*. The process of absorption continues even during salvation but then inspite of this process there is no creation in respect of the person who is liberated.

Proofs for the existence of Absolute Soul :

प्राणापानौ निमेषाद्या जीवनं मनसो गतिः ।
 इन्द्रियान्तरसंचारः प्रेरणं धारणं च यत् ॥ ७० ॥
 देशान्तरगतिः स्वप्ने पञ्चत्वग्रहणं तथा ।
 द्वषुस्य दक्षिणेनाक्षणा सव्येनावगमस्तथा ॥ ७१ ॥
 इच्छा द्रेषः सुखं दुःखं प्रयत्नश्चेतना धृतिः ।
 बुद्धिः स्मृतिरहङ्कारो लिङ्गानि परमात्मनः ॥ ७२ ॥
 यस्मात् समुपलभ्यन्ते लिङ्गान्येतानि जीवतः ।
 न मृतस्यात्मलिङ्गानि तस्मादाहुर्मर्हयः ॥ ७३ ॥
 शरीरं हि गते तस्मिन् शून्यागारमचेतनम् ।
 पञ्चभूतावशेषत्वात् पञ्चत्वं गतमुच्यते ॥ ७४ ॥

The following is the proof of the existence of the Absolute Soul :

- (1) inspiration and expiration;
- (2) twinkling of the eye;
- (3) life;
- (4) mental perception (e. g. arriving at a far distant place like Pāṭaliputra in imagination);

- (5) shift from one object of sense organ to another (e. g. shift from visual perception to tactal perception);
- (6) mobility and stability of mind;
- (7) journey to another country in dreams;
- (8) anticipation of death;
- (9) knowledge of something visualised in the right eye by the left eye;
- (10) desire, hatred, happiness, misery, effort, consciousness, stability, intellect, memory and ego.

All these are signs of the living person. These signs are not available in respect of a dead body. So they are considered to be the proof for the existence of the Absolute Soul. When that soul departs, the body becomes vacant and is deprived of consciousness; only the five *mahābhūtas* remain. So a dead body is stated to have attained the state of five *mahābhūtas* (*pañcatva*). [70-74]

The state of five *mahābhūtas* is not to be found in a living being but in a dead body. This proves that the absence of the state of *pañcatva* (five *mahābhūtas*) in a living being is a definite proof for the existence of the Absolute Soul. Signs like inspiration and expiration are not available in bricks, dead bodies etc.; so they are considered to be definite proof for the existence of the Absolute Soul in livings. One cannot again argue that the mind itself which is outside the scope of the five *mahābhūtas* may be considered as Absolute Soul because in that case mind being simply an instrument of perception another agent will have to be accepted but for whose initiation, the mind would not work. Similarly sense organs cannot be accepted as Absolute Soul. If it is accepted that sense organs constitute Absolute Soul then the object perceived by one sense organ would not be perceivable by another sense organ e.g. there will be no such perception as I am touching a piece of fragrant sandal wood. So the existence of an Absolute Soul over and above the mind, sense organs and five *mahābhūtas* is established.

Mind and Soul :

अचेतनं क्रियावच्च मनश्चेतयिता परः ।
 युक्तस्य मनसा तस्य निदिश्यन्ते विभोः क्रियाः ॥७५॥
 चेतनावान् यतश्चात्मा ततः कर्ता निरुच्यते ।
 अचेतनत्वाच्च मनः क्रियावदपि नोच्यते ॥७६॥

Mind is active but devoid of consciousness. Thus the all pervasive Soul while in combination with the mind appears to have actions.

As the Soul has consciousness, it is said to be the agent of action. The mind being devoid of consciousness is said to be devoid of action even though it is possessed of action.[75-76]

The above verses represent an answer to the query regarding the action of the inactive one. As a matter of fact the Soul does have consciousness but is absolutely devoid of any action. What then is the justification for ascribing action to the Soul. The mind, though unconscious, is possessed of action but the mind cannot act until it is joined with the Soul. So the action of the mind, inspired by the consciousness of the Soul is in fact super imposed on the Soul itself. That is to say, the mind cannot act on its own. It acts only when it is inspired by the consciousness of the self. So the action of the mind cannot manifest itself independently. Thus the Soul appears as if it is the agent of action and the mind though active appears to be devoid of any action.

Responsibility for transmigration :

यथा स्वेनात्मनाऽत्मानं सर्वः सर्वासु योनिषु ।
प्राणैस्तत्त्वयते प्राणी नहन्योऽस्त्यस्य तत्त्वकः ॥ ७७ ॥

All living beings join themselves on their own with life (*elan vitae*) in different species in accordance with the results of action performed. None else is responsible for the transmigration of living beings from one species to another. [77]

When the soul is supreme and sub-ordinate to none, how does it transmigrate from one species to another. As a matter of fact it is independent even in respect of its transmigration. All living beings transmigrate to various species in accordance with the fruits of action on their own. None else is responsible for transmigration of the Soul into the desired species or otherwise.

Even if the existence of God apart from the Soul is accepted, God cannot work arbitrarily without reference to the fruits of action of living beings.

Freedom of action of the Soul :

वशी तत् कुरुते कर्म यत् कृत्वा फलमभुते ।
वशी चेतः समाधत्ते वशी सर्वं निरस्यति ॥ ७८ ॥

The Soul is absolutely free to act as he pleases. He is however obliged to enjoy the fruits of his own action. He is also free to control his mind and to get rid of the results of good or bad acts of his own. [78]

The above verse reprents an answer to the query regarding the susceptibility of the Soul to undesirable results of action. The Soul is free to act as he pleases and is obliged to enjoy the fruits of good or bad

actions performed by him. This shows that he is absolutely free in respect of his action but he is not free in so far as the enjoyment of the fruit of action is concerned. Again He is free to control his mind. He is also free to get rid of the results of good or bad acts so paving the way for salvation.

Both the terms 'svatantra' and 'vasin' are apparently synonymous connoting freedom of action. While the term 'svatantra' implies an agent which acts on His own subject through the inspiration of God, the term 'vasin' on the other hand implies action of the agent according to His own free will.

Limitation in the power of perception of Soul :

देही सर्वगतोऽप्यात्मा स्वे स्वे संस्पर्शनेन्द्रिये ।
सर्वाः सर्वाश्रयस्थास्तु नात्माऽतो वेत्ति वेदनाः ॥७९॥

Even though, Soul is all pervasive, He has sensation in respect of His own body depending upon the contacts of the sense organs with their respective objects. (Being limited by contacts of the bodily sense organs with their objects), the Soul cannot have all sensations (i.e. in respect of other bodies or in respect of His own body where there is no such contact). [79]

The above verse provides answer to the query regarding the incapability of the Soul to have all sensations even though He is omnipresent.

There are certain parts of the body e.g. hair, nail etc. which are absolutely devoid of contactual senses.

Omnipresence of Soul :

विभुत्वमत् एवास्य यस्मात् सर्वगतो महान् ।
मनसश्च समाधानात् पश्यत्यात्मा तिरस्कृतम् ॥ ८० ॥
नित्यानुबन्धं मनसा देहकर्मानुपातिना ।
सर्वयोनिगतं विद्यादेकयोनावपि स्थितम् ॥ ८१ ॥

The Soul is omnipresent because He pervades the entire universe and is great with His mind controlled. He can perceive even things inspite of (spatial, temporal or material) obstructions. Even though He is located in one body being permanently associated with the mind following the physical actions, He is still present in all other bodies. Conversely, inspite of His being present in all bodies, His field of action is limited to one body alone because of His contact with the mind. [80-81]

The above verses represent the answer to the query regarding the incapability of the Soul to perceive every thing inspite of his all pervasiveness. It is true that the Soul is omnipresent having the supremacy in size. That's why with the mind controlled, the Soul can perceive things even inspite of spatial, temporal and material obstructions. But then again, His field of activity is limited to his contact with his mind which is located in the body. So he can generally perceive things related to his own body alone.

Beginninglessness of Soul :

आदिनास्त्यात्मनः क्षेत्रपारं पर्यमनादिकम् ।
अतस्तयोरनादित्वात् किं पूर्वमिति नोच्यते ॥ ८२ ॥

The Soul is beginningless and so is the process of evolution of the various elements. Thus it is not possible to determine as to which one precedes the other. [82]

What comes—first the soul or the process of evolution ? This query is answered in the above verse. The soul as well as the process of evolution, both are considered to be beginningless. So it is difficult to determine as to which one precedes the other.

As a matter of fact the process of evolution is beginningless only in a secondary sense. If it were beginningless, it would not even be dissolved and attainment of salvation as presented in the scriptures would therefore be impossible.

Soul as witness :

ज्ञः सात्युग्यते नाज्ञः साक्षी त्वात्मा यतः स्मृतः ।
सर्वे भावा हि सर्वेषां भूतानामात्मसाक्षिकाः ॥ ८३ ॥

It is only he who knows things can stand as a witness. So all attributes, actions etc., of *bhūtas* are witnessed by the Soul (who alone is knower of things). Things cannot be witnessed by unconscious objects like stone. [83]

The above verse provides an answer to the query regarding the objects of which the Soul stands as a witness.

Sensations and Soul :

नैकः कदाचिद्गूतात्मा लक्षणैरुपलभ्यते ।
विशेषोऽनुपलभ्यस्य तस्य नैकस्य विद्यते ॥ ८४ ॥
संयोगपुरुषस्येष्टो विशेषो वेदनाकृतः ।
वेदना यत्र नियता विशेषस्तत्र तत्कृतः ॥ ८५ ॥

The Absolute Soul is one and only one. He is inaccessible by any signs or symptoms. Being inaccessible he has

no sensation. It is only the contactual or the Empirical Soul who has sensations. For, these sensations do not constitute the attributes of the Soul as such. They in fact arise out of the contacts (of the sense organs with their objects). [84-85]

In the above verse, the query regarding the transformation of the unchangeable Soul is answered. As far as the Absolute Soul is concerned, He is one and only one. He is inaccessible because he has no signs or symptoms. Being inaccessible He does not have any sensations. It is only the Empirical Soul who is susceptible to all such sensations because of His contacts with the bodily sense organs. As a matter of fact even the Empirical Soul, on his own does not have sensations. Sensations arise out of the contact of the sense organs with their objects. Thus, unlike the attribute of heaviness ascribed to each grain of *māṣa*, preserved in stock, the attribute of sensation cannot be ascribed to the Soul.

Treatment of diseases of past, present and future :

चिकित्सति भिषक् सर्वास्थिकाला वेदना इति ।
 यथा युक्त्या वदन्त्येके सा युक्तिरूपधार्यताम् ॥ ८६ ॥
 पुनस्तच्छिरसः शूलं ज्वरः स पुनरागतः ।
 पुनः स कासो वलवांश्चर्दिः सा पुनरागता ॥ ८७ ॥
 याभिः प्रसिद्धवच्चनैरतीतागमनं मतम् ।
 कालश्चायमतीतानामर्तीनां पुनरागतः ॥ ८८ ॥
 तमर्तिकालमुद्दिश्य भेषजं यत् प्रयुज्यते ।
 अतीतानां प्रशमनं वेदनानां तदुच्यते ॥ ८९ ॥
 आपस्ताः पुनरागुर्मा याभिः शस्यं पुरा हतम् ।
 यथा प्रक्रियते सेतुः प्रतिकर्म तथाऽश्रये ॥ ९० ॥
 पूर्वरूपं विकाराणां दृष्ट्वा प्रादुर्भविष्यताम् ।
 या क्रिया क्रियते सा च वेदनां हन्त्यनागताम् ॥ ९१ ॥
 पारंपर्यानुवन्धस्तु दुःखानां विनिवर्तते ।
 सुखहेतूपचारेण सुखं चापि प्रवर्तते ॥ ९२ ॥
 न समा यान्ति वैषम्यं विषमाः समतां न च ।
 हेतुभिः सद्वशा नित्यं जायन्ते देहधातवः ॥ ९३ ॥
 युक्तिमेतां पुरस्फूल्यं त्रिकालां वेदनां भिषक् ।
 हन्तीत्युक्,

The principle on which the treatment of diseases pertaining to the past, present and future is based, is as follows :

Recurrence of headache, fever, cough and vomiting establishes the fact that diseases of the past do relapse. That

is to say, the time of occurrence of the various diseases in the past repeats itself. The therapeutic devices meant for alleviating such recurring diseases verily take the past history (of such diseases) into consideration.

In order that flood waters may not damage crops as they did in the past, a dam is constructed as a preventive measure. So are some therapeutic devices prescribed to prevent certain diseases which are likely to attack living beings in future. This treatment relates to prevention of future diseases.

The successive continuity of ailments is checked by treatments conducive to the continuity of happiness.

The state of equilibrium of *dhātus* is not disturbed nor the imbalanced state is brought to normalcy without some causative factors. It is the causative factors which determine the equilibrium or imbalance of the *dhātus*.

So a physician treats the diseases pertaining to the past, present and future. [86-94]

There are certain recurring type of diseases whose symptoms are indicative of recurrence of such diseases in future. Treatment of such diseases is covered under the treatment relating to the past. It is only the symptoms indicative of the occurrence of certain diseases in future which are required to be treated with preventive therapy—c.f. *Nidāna* 1 : 33.

Continuity of ailments is checked by the treatment which is conducive to the continuity of happiness. As and when a treatment is administered, the ailments do not recur for want of the adverse causative factors. Even if such ailments occur, being ephemeral in nature, they automatically fade away and a good treatment brings about happiness and good health. So proper therapeutic devices prevent the occurrence of diseases in future by preventing the adverse causative factors there of and continuity of happiness is thus maintained—c.f. *Sūtra* 16 : 27.

Desires & miseries :

… … चिकित्सा तु नैष्टिकी या विनोपधाम् ॥ १४ ॥

उपधा हि परो हेतुदुःखदुःखाश्रयप्रदः ।

त्यागः सर्वोपधानां च सर्वदुःखव्यपोहकः ॥ १५ ॥

कोषकारो यथा हांशूनुपादत्ते वधप्रदान् ।

उपादत्ते यथाऽर्थेभ्यस्तृणामङ्गः सदाऽनुरः ॥ १६ ॥

यस्त्वग्निकल्पानर्थात् ज्ञो ज्ञात्वा तेभ्यो निवर्तते ।

अनारम्भादसंयोगात् दुःखं नोपतिष्ठते ॥ १७ ॥

Absolute eradication of miseries is obtained by the elimination of desires. Desire is the root cause of all miseries. Elimination of desires leads to the eradication of all miseries. A silk-worm provides for itself suicidal threads. So does an ignorant person, bound with wordly miseries, provides for himself desires arising out of the various objects. A wise person, who abstains from the objects of senses, considering them as dangerous as burning fire, does not subject himself to any wishful acts and contacts with their objects with the result that miseries never overcome him. [94-97]

Absolute eradication of miseries is nothing but salvation. This stage can be attained only by virtue of the elimination of desires. It is only when a person impelled by desires indulges in various activities, he subjects himself to good and bad effects of his action leading to miseries. Once such desires are shunned, one does not have attachment or hatred in respect of his actions and so the possibility of any ground being created for further miseries is checked.

Causes of miseries :

धीधृतिस्मृतिविभ्रंशः संप्राप्तिः कालकर्मणाम् ।
असात्म्यार्थगमश्चेति ज्ञातव्या दुखहेतवः ॥ ९८ ॥

Impairment of intellect, patience and memory advent of the maturity (of the results) of time and action and unwholesome contact with the objects of senses are considered to be the causative factors for miseries. [98]

What is the cause of miseries ? The above verse provides an answer to this question. This question is, no doubt, already answered in *Sūtra* 1 : 54 and *Sūtra* 11 : 37. But here it is being considered again for the sake of contextual convenience. The temporary and causative factors of miseries include not only such factors caused by the natural variation in seasons but also those which though caused by other factors manifest themselves at some given time (c.f. attacks of quotidian fever which occur every third day).

Ailments arising out of the maturity of results of past action are in fact included under intellectual blasphemy. It is separately enumerated here by way of the elaboration of what has been stated before for the sake of convenience of the disciples. c.f. *Nidāna* 7 : 21 and *Vimāna* 3 : 20.

Impairment of intellect :

विषमाभिनिवेशो यो नित्यानित्ये हिताहिते ।
ज्ञेयः स बुद्धिविभ्रंशः समं बुद्धिर्हि पश्यति ॥ ९९ ॥

If something eternal is viewed as ephemeral and something harmful, as useful and *vice versa*, this is indicative of the impairment of intellect. For, the Intellect normally views things as they are. [99]

Impairment of patience :

विषयग्रवणं सत्त्वं धृतिभ्रंशान्न शक्यते ।
नियन्तुमहितादर्थाङ्गुतिर्हि नियमात्मिका ॥ १०० ॥

A mind indulging in wordly enjoyments cannot be restrained from harmful objects due to the impairment of patience. It is patience which can restrain the mind (from its harmful objects). [100]

Impairment of memory :

तत्त्वज्ञाने स्मृतिर्यस्य रजोमोहावृतात्मनः ।
भ्रश्यते स स्मृतिभ्रंशः स्मर्तव्यं हि स्मृतौ स्थितम् ॥ १०१ ॥

If memory is impaired due to a person being overcome by *rajas* and *tamas*, this is known as the impairment of memory. Normally memory contains everything memorable. [101]

Intellectual blasphemy :

धीघृतिस्मृतिविभ्रष्टः कर्म यत् कुरुते ऽशुभम् ।
प्रज्ञापराधं तं विद्यात् सर्वदोषप्रकोपणम् ॥ १०२ ॥
उदोरणं गतिमतामुदीर्जानां च निग्रहः ।
सेवनं साहसानां च नारीणां चातिसेवनम् ॥ १०३ ॥
कर्मकालातिपातश्च मिथ्यारम्भश्च कर्मणम् ।
विनयाचारलोपश्च पूज्यानां चाभिर्यर्षणम् ॥ १०४ ॥
ज्ञातानां स्वयमर्थानामहितानां नियेवणम् ।
परमौन्मादिकानां च प्रत्ययानां नियेवणम् ॥ १०५ ॥
अकालादेशसंचारौ मैत्री संक्लिष्टकर्मभिः ।
इन्द्रियोपकर्मोक्तस्य सद्वृत्तस्य च वर्जनम् ॥ १०६ ॥
ईर्ष्यामानभयक्रोधलोभमोहमदभ्रमाः ।
तज्जं वा कर्म यत् क्लिष्टं क्लिष्टं यद्देहकर्म च ॥ १०७ ॥
यच्चात्यदीदशं कर्म रजोमोहसमुत्थितम् ।
प्रज्ञापराधं तं शिष्ठा ब्रुवते व्याधिकारणम् ॥ १०८ ॥

A person whose intellect, patience and memory are impaired, subjects himself to intellectual blasphemy by

virtue of his bad action. This intellectual blasphemy aggravates all the *doṣas*.

Forcible stimulation of natural urges and suppression of the manifested ones, exhibition of undue strength, over indulgence in sexual act, negligence of the time of treatment, initiation of action in improper time (i.e. non-utilization excessive-utilization and impaired-utilization of therapies), loss of modesty and good conduct, disrespect for respectable ones, enjoyment of harmful objects, resorting to the factors which are responsible for the causation of madness, movements without any regard for temporal or local propriety, friendship with persons of bad actions, avoidance of the healthy activities described in *Sūtra* 10 : 19-28, malice, vanity, fear, anger, greed, ignorance, intoxication and bewilderment or bad actions arising out of any of them or other physical evil acts arising out of *rajas* and *tamas* constitute intellectual blasphemy leading to the causation of various ailments. [102-108]

Intellectual blasphemy & mind :

बुद्ध्या विषमविज्ञानं द्विपमं च प्रवर्तनम् ।
प्रज्ञापराधं जानीयान्मनसो गोचरं हि तत् ॥ १०९ ॥

Intellectual pseudo-conception and improper conduct represent intellectual blasphemy. (This is known as intellectual blasphemy as) all this falls under the purview of the mind. [109]

Intellectual pseudo-conception directly constitutes intellectual blasphemy. Improper conduct arising as it does out of intellectual blasphemy is also included in it. All this again comes under the purview of the mind as the intellect is a direct product of mind and the conduct originates from the former.

Temporal diseases :

निर्दिष्टा कालसंप्राप्तिर्धीनां व्याधिसंग्रहे ।
चयप्रकोपप्रशामाः पित्तादीनां यथा पुरा ॥ ११० ॥
मिथ्यातिहीनलिङ्गाश्च वर्षान्ता रोगहेतवः ।
जीर्णभुक्प्रजीर्णन्निकालाकालस्थितिश्च या ॥ १११ ॥
पूर्वमध्यापराह्नाश्च रात्र्या यामाख्ययश्च ये ।
एषु कालेषु नियता ये रोगास्ते च कालजाः ॥ ११२ ॥

Ailments due to the advent of the maturity of the result of time are already described in *Sūtra* 17 : 114. It has been explained there, how *pitta* and other *dosas* get accumulated, aggravated and alleviated (depending on seasonal variation).

This category includes causative factors of diseases marked by wrong manifestation, over manifestation and under manifestation of their symptoms during seasons ending with the rains; during various stages of digestion, viz. time of final digestion, time of intake of food and time of initial digestion; during different times of the day, viz. fore-noon, mid-day and after-noon; and during different hours in the night, viz. pre-mid-night, mid-night and post-mid-night. Diseases which as a rule manifest themselves during these times are also known as *kālaja* diseases. [110-112]

Diseases caused by *vāta dosa* are as a rule manifested during the final stage of digestion of food, afternoon and postmid-night; those caused by *kapha dosa* are as a rule manifested during the time of intake of food, fore-noon and pre-mid-night; and those caused by *pitta dosa* are as a rule manifested during the initial stage of digestion, noon and mid-night. Indigestion due to untimely intake of food is responsible for the manifestation of diseases due to all the three *dosas*.

The second line of the verse no. 111 is also read slightly in a different way as "कालः कालस्थितिश्च या". According to this reading कालस्थितिश्च या implies the vitiation of three *dosas* during the three different stages of life, viz. *kapha* is vitiated during young age, *pitta* during middle age and *vāta* during old age.

Examples of Temporal diseases :

अन्येद्युष्को द्वयग्राही तृतीयकचतुर्थकौ ।
स्वे स्वे काले प्रवर्तन्ते काले होषां बलागमः ॥ ११३ ॥

Diseases like *anyedyuṣka* (quotidian fever which occurs at a fixed time every day), *dvyahagrāhi* (reverse quotidian fever), *tṛtīyaka* (tertian fever which occurs at an interval of one day) and *caturthaka* (quartan fever which occurs at an interval of two days) manifest themselves at fixed hours inasmuch as they get strength only at such hours. [113]

Apart from the conditions mentioned in the preceding verses various types of *visamajvara* (intermittent fevers) are also to be listed among the *kālaja* (diseases caused by the advent of the maturity of the effect of time) diseases. *Anyedyuṣka* or quotidian fever manifests itself in a fixed hour every day. *Dvyahagrāhi* (reversed quotidian) occurs on two days

continuously with remission on first and fourth days—c.f. *Cikitsā* 3 : 73. *Tṛtīyaka* type of fever manifests itself in the third (alternate days). *Caturthaka* (quartan) occurs on the fourth day at an interval of two days.

These diseases get aggravated at the appointed hours as they gain strength only on such hours.

Time of treatment of Temporal diseases :

एते चान्ये च ये केचित् कालजा विविधा गदाः ।
अनागते चिकित्स्यास्ते बलकालौ विजानता ॥ ११४ ॥

A physician acquainted with the strength of time of occurrence of diseases should treat this and other similar diseases prior to their actual manifestation. [114]

The other diseases that could come under the category of *kālaja* type of diseases are *kuṣṭha* (obstinate skin diseases including leprosy) etc; which also occur at appointed hours.

Natural diseases :

कालस्य परिणामेन जरामृत्युनिमित्तजाः ।
रोगाः स्वभाविका दृष्टाः स्वभावो निष्प्रतिक्रियः ॥११५॥

The diseases arising out of temporal factors that bring about old age and death are to be considered as natural ones, and natural manifestations are irremediable. [115]

Natural diseases are to be included under *kālaja* category as they get manifested at appointed hours. The natural diseases mentioned above may be caused either by old age or as premonitory conditions of death, depending upon the normal span of life in a given *yuga* (age). Another interpretation of the term *jarāmṛtyunimittaja* is that the diseases are caused by the factors responsible for old age and death, viz. normal aging factors and results of past actions.

Natural manifestations are irremediable in the sense that they cannot be treated by any other therapeutic devices except *rasāyana*—c.f. *Cikitsā* 1 : 1 : 72. As a matter of fact even the *rasāyana* devices do not cure these diseases in absolute terms in as much as the diseases relapse after the administration of *rasāyana* therapy.

Actions of past life and diseases :

निर्दिष्टं दैवशब्देन कर्म यत् पौर्वदेहिकम् ।
हेतुस्तदपि कालेन रोगाणामुपलभ्यते ॥ ११६ ॥

The action performed in the previous life which is known as *daiva* (fate) also constitutes in due course causative factors for the manifestation of diseases. [116]

Cure of karmaja diseases :

न हि कर्म महत् किञ्चित् फलं यस्य न भुज्यते ।
क्रियाद्वा: कर्मजा रोगाः प्रशमं यान्ति तत्क्षयात् ॥११७॥

There is no major action (performed in the previous life) which does not lead to the corresponding results. Diseases arising out of such actions are not amenable to any therapeutic measures. They are cured only after the results of past action are exhausted i. e. fully enjoyed [117]

It is only the major actions of the previous life which leave their results to be enjoyed in the current life. Minor acts which can be counteracted by acts like atonement do not have that continuity of effects.

Unwholesome contacts with Senses :

अत्युग्रशब्दश्ववणाच्छ्वचणात् सर्वशो न च ।
शब्दानां चातिहीनानां भवन्ति श्ववणाज्जडाः ॥ ११८ ॥
परुषोद्भौषणाशस्ताप्रियव्यसनसूचकैः ।
शब्दैः श्ववणसंयोगो मिथ्यासंयोग उच्यते ॥ ११९ ॥
असंस्पर्शोऽतिसंस्पर्शो हीनसंस्पर्शं पव च ।
स्पृश्यानां संग्रहेणोक्तः स्पर्शनेन्द्रियवाधकः ॥ १२० ॥
यो भूतविषवातानामकालेनागतश्च यः ।
ज्ञेहशीतोष्णसंस्पर्शो मिथ्यायोगः स उच्यते ॥ १२१ ॥
रूपाणां भास्वतां दृष्टिविनश्यत्यतिदर्शनात् ।
दर्शनाद्वातिसूक्ष्माणां सर्वशश्वाप्यदर्शनात् ॥ १२२ ॥
द्विष्टमैरवबीभत्सदूरातिशिष्टदर्शनात् ।
तामसानां च रूपाणां मिथ्यासंयोग उच्यते ॥ १२३ ॥
अत्यादानमनादानमोक्षात्म्यादिभिश्च यत् ।
रसानां विषमादानमल्पादानं च दूषणम् ॥ १२४ ॥
अतिमृद्धतितीक्ष्णानां गन्धानामुपसेवनम् ।
असेवनं सर्वशश्व ग्राणेन्द्रियविनाशनम् ॥ १२५ ॥
पूतिभूतविषद्विष्ट गन्धा ये चाप्यनार्तवाः ।
तैर्गन्धैर्घ्राणसंयोगो मिथ्यायोगः स उच्यते ॥ १२६ ॥
इत्यसात्म्यार्थसंयोगत्विविधो दोषकोपनः ।

The auditory sense faculty is impaired by the hearing of excessively loud or low sound (even by not hearing excessively loud sound) or by the absolute non-utilization of this sense faculty. Auditory contact with sounds indicating rough-

ness, terror, insuspiciousness, distaste and misery constitute the wrong-utilization of the auditory sense organ.

The tactful sense is impaired, briefly speaking, by the non-utilization, excessive-utilization and inadequate-utilization of the touchable (including massage, unction etc.).

Untimely contact with poisonons germs (?), poisonous wind; unctuous, cold and hot substances constitutes wrong-utilization of tactful sensation.

Vision is impaired by the excessive contact with dazzling objects or by contact with extremely subtle elements or by absolute non-utilization of visual faculty.

Visual contact with undesirable, terrific, despisable objects and objects placed at a distance or in close proximity constitutes the wrong-utilizatian of visual faculty. Vision is also impaired by the contact of the visual faculty with faint objects.

Excessive intake, absence of intake, intake in utter disregard to the wholesomeness of addiction and inadequate intake of *rasas* (tastes) vitiate the gaustatory faculty.

Olfactory faculty is impaired by the enjoyment of smells too mild and too sharp or by absolute non-utilization of this faculty.

Inhalation of the smell of putrified objects, germs and poisonous as well as unseasonal smells constitutes wrong-utilization of olfactory faculty.

These are the three types of unwholesome contact of senses with their respective objects which aggravate the *dosas*. [118-127]

Untimely-contacts of tactful sense faculty may be illustrated as follows :

1. Use of massage before digestion and while *kapha* is aggravated constitutes untimely contact with unctuous substance.
2. Similarly contacts of cold and hot substances during winter and summer respectively constitute untimely contact with cold and heat.

Here contradistinction with wholesomeness by addiction includes the seven factors including *rāsi* (quantity).

Unwholesomeness :

असात्म्यमिति तद्विद्याद्यन्न याति सहात्मताम् ॥ १२७ ॥

A thing which is not conducive to the body is regarded as *asatmya* or unwholesome. [127]

Aindriyaka diseases :

मिथ्यातिहीनयोगेभ्यो यो व्याधिरुपजायते ।

शब्दादीनां स विशेषो व्याधिरैन्द्रियको बुधैः ॥ १२८ ॥

When a disease is caused by wrong-utilization, excessive utilization and inadequate-utilization (non-utilization) of sense faculties, viz. auditory etc., it is known as “*Aindriyaka*” i.e. a disease caused by the impairment of senses. [128]

वेदनानामशान्तानामित्येते हेतवः स्मृताः ।

सुखहेतुः समस्त्वेकः समयोगः सुदुर्लभः ॥ १२९ ॥

These are the factors responsible for miseries. Equitable utilization (of time, intellect and objects of sense faculties) brings about happiness. This equitable utilization is difficult to attain. [129]

Equitable utilization of time, intellect and objects of sense faculties is difficult to attain. Howsoever careful one may be, he is bound to fall victim of non-utilization of one of the above mentioned factors. Thus as a matter of fact people are always suffering from one disease or the other. Of course mild diseases do not count much. Even if one is suffering from such diseases he is considered to be healthy if he is fit otherwise.

Four-fold combination :

नेन्द्रियाणि न चैवार्थाः सुखदुःखस्य हेतवः ।

हेतुस्तु सुखदुःखस्य योगो दृष्टश्चतुर्विधः ॥ १३० ॥

सन्तीन्द्रियाणि सन्त्यर्थाः योगो न च न चास्ति स्तु ।

न सुखं कारणं तस्माद्योग एव चतुर्विधः ॥ १३१ ॥

Neither the sense organs nor their objects alone can bring about happiness or miseries. The latter are in fact caused by the fourfold combination mentioned above (viz. proper-utilization, wrong-utilization, excessive-utilization and non-utilization). Even if there are sense organs and their objects present, there would be no disease, nor any happiness unless the fourfold combination is involved. So this combination itself constitutes a causative factor for happiness and miseries. [130-131]

In the four-fold combination mentioned above only the sense organs and their objects are clearly stated. However, intellect and time are also included in this context.

Factors responsible for happiness & miseries :

नात्मेन्द्रियं मनो बुद्धिं गोचरं कर्म वा विना ।
सुखदुःखं, यथा यच्च बोद्धव्यं तत्त्वोच्यते ॥ १३२ ॥

As a matter of fact no happiness or misery can be caused without the Soul, the sense organs, mind, intellect, objects of sense organs and results of past action. But in the context of the science of medicine, it is only the four-fold combination which is relevant as a causative factor of happiness and miseries (that is to say the wholesome combination is required to be adhered to and the unwholesome one to be given up for the maintenance of good health). [132]

The four-fold combination is not to be regarded as a causative factor of happiness or miseries in absolute terms. As a matter of fact no happiness or miseries can ever be caused by the Soul, the sense organs, mind, intellect, objects of sense organs and results or past action. For example, there cannot be any happiness or miseries in a clod of earth which is devoid of Soul. Similarly the indispensability of sense organs and their objects, good and bad results of past action etc. as causative factors of happiness and miseries can also be explained. Why is then so much emphasis laid upon the four-fold combination ? This is because in the context of the science of medicine, nothing but the four-fold combination is relevant as a causative factor of happiness and miseries. The unwholesome combination is required to be given up and the wholesome one to be adopted for the maintenance of good health.

Two types of contacts :

स्पर्शनेन्द्रियसंस्पर्शः स्पर्शो मानस एव च ।
द्विविधः सुखदुःखानां वेदनानां प्रवर्तकः ॥ १३३ ॥

Tactual contact and mental contact are the two types of contacts which bring about happiness and miseries. [133]

In all contacts where sense organs are involved, it is the tactual contact which plays an important role. Unless there be a tactual contact there can be no contact whatsoever. That is to say, visual, auditory, gustatory or olfactory contact can be effective only when there is tactual contact. It is for this reason that the sense faculties do not perceive things placed beyond their tactual range.

It is only the mental contact which does not need any tactual contact. Whatever is thought of is automatically presented to and perceived by the mind.

Happiness & miseries caused by lust :

इच्छादेषात्मिका दृष्णा सुखदुःखात् प्रवर्तते ।
दृष्णा च सुखदुःखानां कारणं पुनरुच्यते ॥ १३४ ॥

उपादते हि सा भावान् वेदनाश्रयसंज्ञकान् ।
स्पृश्यते नानुपादाने नास्पृष्टो वेत्ति वेदनाः ॥ १३५ ॥

Happiness and miseries bring about lust in the form of likes and dislikes respectively. Then again this lust is responsible for happiness and miseries. It is lust which gathers factors, which serve as substrata for happiness and misery. Unless such factors are gathered, there will be no contact whatsoever and there can be no happiness or miseries without such contacts. [134-135]

Sites of sensations :

वेदनानामधिष्ठानं मनो देहश्च सेन्द्रियः ।
केशलोमनखाग्राश्च मलद्रवगुणैर्विना ॥ १३६ ॥

The mind and the body together with the sense organs exclusive of *keśa* (hair), *loman* (small hair), tip of the nail, ingested food, excreta, excretory fluids and objects of senses are the sites of manifestation of happiness and miseries. [136]

The body together with the sense organs automatically excludes hair etc. For the sake of clarity however the parts of the body which do not have any consciousness are separately enumerated. The sense organs, of course, are most important sites for the manifestation of happiness and miseries. The fact that hair etc. are excluded from the purview of consciousness can be ascertained from direct experience. The feeling of pain in respect of urine, excreta etc; in diseases like sprue and dysuria is in fact caused in the body at the sites of these excreta.

Yoga & mokṣa :

योगे मोक्षे च सर्वासां वेदनानामवर्तनम् ।
मोक्षे निवृत्तिनिःशेषा योगे मोक्षप्रवर्तकः ॥ १३७ ॥

Recurrence of all sensation is checked through *yoga* and *mokṣa*. The absolute eradication of sensation is attained through *mokṣa*. The *yoga* is a means to attain *mokṣa*. [137]

The above passage represents an answer to the query regarding the eradication of all sensations. Here the term *yoga* implies lack of contact between Soul, sense organs, mind and objects of senses during the state of mental concentration as detailed in verse no. 138-139. *Mokṣa* implies absolute detachment of the Soul from all mental as well as physical contacts. The absence of sensation in the state of *yoga* is but too temporary. It recurs immediately after the state of *yoga* is disturbed. The *yoga* of course serves as a means to the attainment of *mokṣa* which lead to absolute eradication of such sensations. Another reading of the

last *pada* of the above passage is “योगमोक्षी निवर्तन्”. Even if this reading is accepted, there is no repetition inasmuch as this only emphasises the agency of the *yoga* and *mokṣa* as means to the eradication of sensation.

What is yoga ?

आत्मेन्द्रियमनोर्थानां सञ्चिकर्षात् प्रवर्तते ।
सुखदुःखमनारम्भादात्मस्थे मनसि स्थिरे ॥ १३८ ॥
निवर्तते तदुभयं वशित्वं चोपजायते ।
सशरीरस्य योगज्ञास्तं योगमृषयो विदुः ॥ १३९ ॥

Happiness and miseries are felt due the contact of the Soul, the sense organs, mind and the objects of senses. Both these types of sensations disappear when the mind is concentrated and contained in the Soul and the super-natural powers in the mind and body are attained. This state is known as *yoga* according to sages well versed in this science. [138-139]

Eight super-natural powers of yogin :

आवेशश्चेतसो ज्ञानमर्थानां छन्दतः क्रिया ।
हृषिः श्रोत्रं स्मृतिः कान्तिरिष्टतश्चाप्यदर्शनम् ॥ १४० ॥
इत्यष्टुविधमाल्यातं योगिनां बलमैश्वरम् ।
शुद्धसत्त्वसमाधानात्तत् सर्वमुपजायते ॥ १४१ ॥

(1) Entering others' body, (2) thought reading, (3) doing things at will, (4) super-natural vision (5) supernatural audition (6) miraculous memory, (7) uncommon brilliance and (8) invisibility when so desired—these are the eight supernatural powers attained by those practising *yoga*. All this is achieved through the purity of the mind (free from *rajas* and *tamas*). [140-141]

The first *pāda* of the verse 140 is also construed as चेतसः आवेशः and ज्ञानान् denoting the power of entering others mind and the knowledge of events of the past, present and future.

Salvation :

मोक्षो रजस्तमोऽभावात् बलवृत्कर्मसंक्षयात् ।
वियोगः सर्वसंयोगैरपुनर्भव उच्यते ॥ १४२ ॥

Mokṣa or salvation is nothing but an absolute detachment of all contacts by virtue of the absence of *rajas* and *tamas* in the mind and annihilation of effects of potent past actions. This is a state after which there is no more physical or mental contacts. [142]

Means for attainment of mokṣa :

सतामुपासनं सम्यगसतां परिवर्जनम् ।
 ब्रतचयोपवासौ च नियमाश्च पृथग्विधाः ॥ १४३ ॥
 धारणं धर्मशास्त्राणां विज्ञानं विज्ञे रतिः ।
 विषयेष्वरतिर्मोक्षे व्यवसायः परा धृतिः ॥ १४४ ॥
 कर्मणामसमारम्भः कृतानां च परिक्षयः ।
 नैष्ठकम्यमनहङ्कारः संयोगे भयदर्शनम् ॥ १४५ ॥
 मनोबुद्धिसमाधानमर्थतत्वपरीक्षणम् ।
 तत्त्वस्मृतेरुपस्थानात् सर्वमेतत् प्रवर्तते ॥ १४६ ॥

The following serve as means to the attainment of *mokṣa*.

1. Due devotion to noble Souls;
2. shunning of the company of the wicked;
3. observing sacred vows and fast;
4. pursuit of the rules of good conduct;
5. compliance with scriptural prescriptions;
6. scriptural knowledge;
7. liking for lonely living;
8. detachment from the objects of senses;
9. striving for *mokṣa* (salvation);
10. absolute mental control;
11. abstinence from the performance of acts leading to good and sinful effects;
12. annihilation of the effects of past-actions;
13. desire to get away from the worldly trap;
14. absence of egoistic disposition;
15. being afraid of contacts of the Soul, the mind and the body;
16. concentration of the mind and intellect in the Soul; and
17. review of spiritual facts.

All this can be attained by virtue of the constant remembering of the fact that the Soul is different from the body and the latter has nothing to do with the former. [143-146]

Aid to Memory :

स्मृतिः सत्सेवनाद्यैश्च धृत्यन्तैरुपजायते ।
स्मृत्वा स्वभावं भावानां स्मरन् दुःखात् प्रमुच्यते ॥१४७॥

The regime prescribed in verses above, beginning with devotion to the noble persons and ending with absolute mental control (items 1-10) serve as an aid to good memory. If one only remembers the real nature of things he gets rid of miseries. [147]

One learns from his preceptors that individuals differ in nature and are not helpful to each other. If this fact is remembered, one will not indulge (in any selfish acts) and abstinence from performance of such acts brings about freedom from all miseries.

Causative factors of Memory :

वक्ष्यन्ते कारणान्यष्टौ स्मृतिर्यैरुपजायते ।
निमित्तरुपग्रहणात् सादृश्यात् सविपर्यात् ॥ १४८ ॥
सत्त्वानुबन्धादभ्यासाज्ञानयोगात् पुनः श्रुतात् ।
दृष्टश्रुतानुभूतानां स्मरणात् स्मृतिरुच्यते ॥ १४९ ॥

The following are the eight factors that bring about a good memory :

1. Knowledge of cause (of a thing and event etc.);
2. knowledge of form (e. g. after seeing *gavaya* in the forest one remembers a cow having a similar form);
3. knowledge of similarity (e. g. on seeing a son one remembers his father having similar form);
4. knowledge of contrast (e. g. having seen an ugly form one remembers a beautiful form);
5. concentration of mind ;
6. repetition;
7. attainment of metaphysical knowledge; and
8. subsequent partial communication of an event.

A memory is nothing but the remembrance of things directly perceived, heard (from scriptures) or experienced earlier. [148-149]

Power of Memory for salvation :

एतत्तदेकमयनं मुक्तैर्मौक्षस्य दर्शितम् ।
तत्त्वस्मृतिबलं, येन गता न पुनरागताः ॥ १५० ॥

अयनं पुनरास्यातमेतद्योगस्य योगिभिः ।
संस्यातधर्मैः सांख्यैश्च मुक्तैर्मोक्षस्य चायनम् ॥ १५१ ॥

The power of metaphysical memory constitutes the best way of liberation, as shown by the liberated ones. Persons following this way do not come back to worldly traps. This is again the best way to the attainment of *yoga* (communion with God) as well as *mokṣa* (salvation). This is what the *yogins*, the virtuous ones, the followers of the *Saṃkhya* system, and the liberated ones say. [150–151]

Real knowledge :

सर्वं कारणवद्वाख्यमस्वं चानित्यमेव च ।
न चात्मकृतकं तद्द्वि तत्र चोत्पद्यते स्वता ॥ १५२ ॥
यावज्ञोत्पद्यते सत्या बुद्धिनैतदहं यथा ।
नैतत्पमेति विज्ञाय ज्ञः सर्वमतिवर्तते ॥ १५३ ॥

Any thing that has a cause constitutes misery; it is alien and ephemeral. It is not produced by the Soul (*Ātman*); but one has got a feeling of its ownership until one has got a real knowledge to the effect that this is something different from him; and is not his own. As soon as one knows it, he gets rid of all (miseries). [152–153]

One subjects himself to miseries only so long as he identifies himself with the various wordly events. As soon as an individual realises the fact that all events are just consequences of the developments of *Prakṛti* (nature), he conquors miseries altogether.

Attainment of Final renunciation :

तर्त्स्मश्चरमसन्यासे समूलाः सर्ववेदनाः ।
ससंज्ञाज्ञानविज्ञाना निवृत्तिं यान्त्यशेषतः ॥ १५४ ॥

As soon as the final renunciation in respect of all subsequent actions is attained, the very consciousness together with its final causes in the form of indeterminate, determinate or scriptural knowledge is completely eradicated. [154]

The State thereafter :

अतः परं ब्रह्मभूतो भूतात्मा नोपलभ्यते ।
निःसृतः सर्वभावेभ्यश्चिह्नं यस्य न विद्यते ॥
ज्ञानं ब्रह्मविदां चात्र नाशस्तज्ज्ञातुमर्हति ॥ १५५ ॥

Thereafter, one identifies himself with Brahman and the Empirical Soul ceases to exist. He is easily distinguishable from all other manifestations. He does not even leave any indication (inspiration, expiration etc.) of his existence. This is what those well versed in the knowledge of Brahman say. It is impossible for an ignorant person to know this. [155]

तत्र स्तोकः—

प्रश्नाः पुरुषमांश्चित्य त्रयोर्विशतिसृत्तमाः ।
कतिधापुरुषीयेऽस्मिन्निर्णीतास्तत्त्वदर्शिना ॥ १५६ ॥

To sum up :

In this chapter on “the various Division of the Empirical Soul etc., as conducive to the understanding of the body”, 23 important questions regarding the Empirical Soul have been answered by the enlightened Seer. [156]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थाने कतिधापुरुषीयं
शारीरं नाम प्रथमोऽध्यायः ॥ १ ॥

Thus ends the first chapter on “the Divisions of the Empirical Soul etc., as conducive to the understanding of the body” of the *Sārīra* section of Agniveśa’s work as redacted by Caraka. [1]

CHAPTER 11

EMBRYOLOGICAL DEVELOPMENT

द्वितीयोऽध्यायः

अथातोऽनुल्यगोत्रीयं शारीरं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the development of embryo caused by the union of males and females of mutually different clan.

Thus said Lord Atreya. [1-2]

The origin of the body has been described in the previous chapter. The procedure of pregnancy etc; through which the body along with the Soul is manifested is being described in this chapter.

Query about semen :

अनुल्यगोत्रस्य रजःक्षयान्ते रहोविसृष्टं मिथुनीकृतस्य ।
किं स्याच्चतुष्पात्रभवं च षड्भ्यो यत् स्त्रीषु गर्भत्वमुपैति पुंसः ॥३॥

When a woman after her menstruation cohabits with a man of a different clan in a lonely place, the man ejaculates something composed of four *mahabhūtas* and having six tastes, which results in conception in a woman. What is it ? [3]

For procreation of a healthy child, it is necessary that the male and female should be mutually of a different clan. Coitus among the members of the same clan is a sinful act which does not have the sanction of scriptures. Similarly, cohabitation is prohibited during the first three days of the period of fertilization when there is flow of menstrual blood. Privacy is a *sine qua non* for undisturbed ejaculation. For proper conception, it is necessary that both the sexual partners are in an appropriate position. Coitus in reversed position is prohibited.

The above paragraph represents the query of a disciple to his preceptor regarding the real nature of semen. It is not that the disciple is unaware of the gross form of the semen.

Composition of semen :

शुक्रं तदस्य प्रवदन्ति धीरा यद्वीयते गर्भसमुद्घवाय ।
वाय्वग्निभूम्यज्ञुणपादवत्तत् षड्भ्यो रसेभ्यः प्रभवश्च तस्य ॥४॥

This factor which is implanted for the formation of embryo is known as *śukra* or sperm. This is composed of *vāyu*,

agni, jala and *prthvi* in the state of their excellence—all these factors individually share one fourth of the attributes of each of the *mahābhūtas*. This also shares all the six tastes. [4]

The four elements, viz. *vāyu*, *agni*, *jala* and *prthvi* only when they are in the state of their excellence can produce pure sperm. All the above mentioned elements in equal quantity take part in the formation of sperm. *Ākāśa* is also no doubt present in sperms in view of its all pervasive nature but as it does not move together with the other four *mahābhūtas* present in sperm in the course of ejaculation, it is not considered to be a distinct factor responsible for the composition of sperms. *Ākāśa* does not figure even in the process of transmigration of a Soul from one body to the other—c. f. *Śloka* 31.

Sperms are pure only when they are produced out of the materials having all the six tastes. Substances having sweet taste no doubt produce sperms and those having sour taste destroy them. But this happens only if such substances are used excessively.

Queries about embryo :

संपूर्णदेहः समये सुखं च गर्भः कथं केन च जायते स्त्री ।
गर्भं चिराद्विन्दति सप्रजातपि भूत्वा अथवा नश्यति केन गर्भः॥ ५ ॥

What are the factors responsible for the development of the body of the embryo in its entirety ? How does the delivery of the child take place in proper time ? How does the delivery take place with ease ? Why is conception delayed even in a fertile woman ? Why does the foetus get destroyed after its formation ? [5]

Factors responsible for easy delivery of a healthy foetus etc., :

शुक्रास्तुगात्माशयकालसंपद् यस्योपचारश्च हितैस्तथाऽन्नैः ।
गर्भश्च काले च सुखी सुखं च संजायते संपरिपूर्णदेहः ॥ ६ ॥
योनिप्रदोषान्मनसोऽभितापाच्छुक्रास्तुगाहारविहारदोषात् ।
अकालयोगाद्वलसंक्षयाच्च गर्भं चिराद्विन्दति सप्रजातपि ॥ ७ ॥
असुखिरुद्धं पवनेन नार्या गर्भं व्यवस्थन्त्यबुधाः कदाचित् ।
गर्भस्य रूपं हि करोति तस्यास्तदस्तुगाम्नावि विवर्धमानम् ॥ ८ ॥
तदग्निसर्वथ्रमशोकरोगैरुषणान्नपानैरथवा प्रवृत्तम् ।
द्वष्ट्राऽस्तुगेकं न च गर्भसंक्षं केचिन्नरा भूतहृतं वदन्ति ॥ ९ ॥
ओजोशानानां रजनीचराणामाहारहेतोर्न शरीरमिष्टम् ।
गर्भं हरेयुर्यदि ते न मातुर्लघ्वावकाशा न हरेयुरोजः ॥ १० ॥

The foetus gets delivered easily in time in its well developed form and without any pain, if the sperms, the ovum,

the uterus and the timings (of sexual union and delivery) are in excellent condition and the woman during the period of pregnancy takes wholesome diet.

Even in a fertile woman, there is delay in conception because of the defects in the uterus, mental afflictions, defects in sperms, ovum, diet and regimens, union in inappropriate time and want of strength.

The flow of menstrual blood in a woman at times get obstructed by the wind and this grows slowly due to the stoppage of subsequent menstrual flow leading to the manifestation of some of the symptoms of pregnancy. The ignorant consider it as real pregnancy. Due to exposure to fire and the sun, exhaustion, grief, affliction with disease and intake of hot diet and drinks, the menstrual flow starts again. Because parts of the foetus are not found there, some people say that the foetus has been taken out by the evil spirit. Actually the body of the foetus does not serve as food for evil spirits who move in nights and live on *ojas*. Further, if the evil spirit can take away the foetus, having obtained entrance into the mother's body, it could have easily eaten *ojas* in her body leading to her death also. [6-10]

Sperm, ovum and uterus in their excellent state, the association of auspiciousness with the Soul present in the union of sperms and ovum, and suitable timing (for conception and delivery) are responsible for the easy delivery of a well grown foetus in time. The proper time of delivery is ninth or tenth month of pregnancy—c. f. Śārira 4 : 25.

The time of fertilization as it is stated in the Hārīta is sixteen days after the day of onset of menstruation. According to the Suśruta however, it is only twelve days. If the woman cohabits with a man after the period of fertility, there will be no conception.

Ojas is of two types:—one type is of eight drops in quantity and the other is half *añjali* (48 ml.). Evil spirits eat away the former type of *ojas*. There is no question of these spirits eating away the entire body of the foetus. Further, having entered into the body of the mother, these spirits would have eaten away the *ojas* of the mother as well which would have caused her death. Thus the statement that the foetus is eaten away by evil spirits is not correct.

Query about the sex and number of foetus :

कन्यां सुतं वा सहितौ पृथग्वा सुतौ सुते वा तनयान् बहून् वा ।
कस्मात् प्रसूते सुचिरेण गर्भमेकोऽभिवृद्धि च यमेऽभ्युपैति ॥११॥

What is the reason for a woman to give birth to :

- (1) a female child;
- (2) a male child;
- (3) twins of male and female children;
- (4) twins of female children;
- (5) twins of male children; and
- (6) many children at a time ?

Why is the delivery of a foetus delayed ? Why does only one out of a twin grow well ? [11]

Factors responsible for sex determination twins etc., :

रक्तेन कन्यामधिकेन पुत्रं शुक्रेण तेन द्विविधीकृतेन ।
 बीजेन कन्यां च सुतं च सूते यथास्ववीजान्यतराधिकेन ॥ १२ ॥
 शुक्राधिकं द्वैधमुपैति बीजं यस्याः सुतौ सा सहितौ प्रसूते ।
 रक्ताधिकं वा यदि भेदमेति द्विधा सुते सा सहिते प्रसूते ॥ १३ ॥
 भिनत्ति यावद्रहुधा प्रपञ्चः शुक्रार्तवं वायुरतिप्रवृद्धः ।
 तावन्त्यपत्यानि यथाविभागं कर्मात्मकान्यस्ववशात् प्रसूते ॥ १४ ॥
 आहारमाप्नोति यदा न गर्भः शोषं समाप्नोति परिस्तुर्ति वा ।
 तं खी प्रसूते सुचिरेण गर्भं पुष्टो यदा वर्षगणैरपि स्यात् ॥ १५ ॥
 कर्मात्मकत्वाद्विषमांशभेदाच्छुक्रासृजोर्वृद्धिमुपैति कुक्षौ ।
 एकोऽधिको न्यूनतरो द्वितीय एवं यमेऽप्यभ्यधिको विशेषः ॥१६॥

Dominance of ovum during the conception results in the procreation of a female child, and dominance of sperm, of a male child. During the process of union, the sperm and ovum undergo divisions and if one division of sperm dominates over one of the divisions of the ovum and another division of ovum dominates over the other division of sperm, then there is formation of twins—one male child and a female child. When both the divisions of the sperm dominate over both the divisions of the ovum, then there is a twin of male children. When both the divisions of ovum dominate over both the divisions of the sperm, then there is a twin of female children.

When the excessively aggravated *vata* brings about many divisions of the sperm and ovum, many children are born; their number depends upon the number of divisions. This is not under the control of the individual himself; this happens due to one's action during previous life.

When the foetus does not get nutrition and when the foetus is emaciated or there is exudation (due to threatening abortion), then the woman delivers after a long time and it may even take several years for the proper development and delivery of the foetus.

Depending upon the action in the past life of an individual the sperm and ovum may undergo uneven divisions during conception leading to the formation of twins and this may result in the better growth of one foetus than the other in the uterus leading to their inequality. [12-16]

Both the sperm and ovum have subtle forms. These subtle parts undergo unequal divisions due to the individuals action in the past life and this results in unequal development of foetus.

Query about sex abnormality :

कस्माद्विरेताः पवनेन्द्रियो वा संस्कारवाही नरनारिषण्डौ ।

वक्री तथ्यर्थाभिरतिः कथं वा संजायते वातिकषण्डको वा ॥ १७ ॥

What are the reasons for *dviretas* (hermaphrodisim), *pavanendriyatva* (aspermia), *samskāravāhi* (anaphrodisia), male sterility, female sterility, *vakri* (hypospadias), *irśyābhīrati* (mixoscopia) and *vātikasandaka* (eviration) of the procreation ? [17]

Factors responsible for sex abnormality :

बीजात् समांशादुपतस्बीजात् स्त्रीपुंसलिङ्गी भवति द्विरेताः ।

शुक्राशयं गर्भगतस्य हत्वा करोति वायुः पवनेन्द्रियत्वम् ॥ १८ ॥

शुक्राशयद्वाराविघट्टनेन संस्कारवाहं कुरुतेऽनिलश्च ।

मन्दाल्पबीजावबलावहर्षौ क्लीबौ च हेतुर्विश्वितद्वयस्य ॥ १९ ॥

मातुर्व्यवायप्रतिघेन वक्री स्याद्वीजदौर्बल्यतया पितुश्च ।

ईर्ष्याभिभूतावपि मन्दहर्षवीर्ष्यारत्तेरेव वदन्ति हेतुम् ॥ २० ॥

वायवश्चिदोषाद्वृष्टौ तु यस्य नाशं गतौ वातिकषण्डकः सः ।

इत्येवमष्टौ विकृतिप्रकाराः कर्मात्मकानामुपलक्षणीयाः ॥ २१ ॥

When that portion of the sperm and ovum of parents which is responsible for the creation of the genital cells of the foetus is vitiated and these sperm and ovum undergo equal division, then the offspring becomes a hermophrodite. Such an offspring will have the characteristic features of both the sexes.

If the testicles (reservoirs of sperms) of the foetus are afflicted with *vāta*, then the offspring becomes aspermic.

Obstruction of the seminal passage by *vāta* makes the offspring *samskāravāha* (anapbrodisiac).

The congenital lack of strength and passion results in the impairment and insufficiency of sperm and ovum which in turn give rise to male and female sterility respectively.

Weakness in sperms of the male partner and irregular posture of the female partner during coitus make the offspring hypospadiac.

Reduced passion along with jealousy of the parents cohabitation produces mixoscopia in the offspring.

Being affected with *vāyu* and *agni* (*pitta*), if the testicles of the foetus get destroyed, then there is eviration in the offspring.

These are the eight types of sexual abnormalities. They are caused by the effects of the misdeeds in the previous life of the individual. [I8-21]

Different parts of the human body are represented in the sperm and ovum. If that fraction of the sperm and ovum which is responsible for the creation of the germinal cells in the foetus is afflicted and if these sperm and ovum are equally divided during the process of conception, then the offspring will be hermaphrodite. This type of offspring may have such physical characteristics as are common to both the sexes, e. g. nose, eye etc. Male and female sexual organs, breasts and hair in the face may be absent in them because these organs are normally manifested due to the dominance of the respective germinal cells. Such an offspring may also have both the male and female sexual organs in the same body but the secondary sexual organs like breasts, hair in the face may be absent.

In the *pavanendriyatva* (aspermia) the testicles of the individual are without any sperm. During the time of coitus, only air is ejaculated in the place of semen.

In the case of *samiskāravāha* (anaphrodisia), the channels for the ejaculation of semen are obstructed by *vāta*. This obstruction can be removed by *basti* (enema including urethral enema) and administration of aphrodisiac drugs. Suśruta has described *āsekya*, *saugandhika* and *kumbhika* among others, as sexual abnormalities. *Āsekya* is caused by the weakness of the sperm of the father; his offspring gets erection of the genital organ by taking the semen of others. A child born of polluted genital tract of mother is known as *saugandhika*. He gets strength for cohabitation by the smell of the female and male genital tract. Similarly, a *kumbhika* gets

strength for cohabitation after he is used by another man for anal sodomy. All these three types of sexual abnormalities viz. *āsekyā*, *saugandhika* and *kumbhika*, described in the *Suśruta* (c. f. *Suśruta* : *Śārīra* 2 : 38-40) come under the category of *sāṁskāravāha* (anaphrodisia) described here.

In *śāṇḍya* (sterility) men and women have sperms and ova respectively but these sperms and ova are vitiated. According to the *Suśruta*, there is complete absence of sperm in *śāṇḍya* (sterility)—c. f. *Suśruta* : *Śārīra* 2 : 44).

If the mother is without passion or if she maintains an irregular posture during coitus, then the offspring suffers from hypospadias and his sperms do not get into the uterus properly.

An individual suffering from mixoscopia (*irśyābhīratī*) gets sexual passion only when he sees sexual act of others—c. f. *Suśruta* : *Śārīra* 2 : 41.

Query about signs of conception etc., :

गर्भस्य सद्योऽनुगतस्य कुक्षौ श्रीपुंनपुंसामुदरस्थितानाम् ।
किं लक्षणं ? कारणमिष्यते किं सरूपतां येन च यात्यपत्यम् ॥२२॥

What are the signs of conception which has just taken place ? What are the signs to indicate if the foetus in the womb is a boy, girl or an eunuch ? What are the reasons for a child to resemble some body ? [22]

Signs of Conception etc., :

निष्ठीविका गौरवमङ्गसादस्तन्द्राप्रहर्षौ हृदये व्यथा च ।
तृप्तिश्व वीजग्रहणं च योन्यां गर्भस्य सद्योऽनुगतस्य लिङ्गम् ॥२३॥
सव्याङ्गचेष्टा पुरुषार्थिनीं श्री श्रीस्वप्रपानाशनशोलचेष्टा ।
सव्यात्तगर्भा न च वृत्तगर्भा सव्यप्रदुम्धा श्वियमेव सूते ॥ २४ ॥
पुत्रं त्वतो लिङ्गविपर्ययेण व्यामिश्रलिङ्गा प्रकृतिं तृतीयाम् ।
गर्भोपपत्तौ तु मनः श्विया यं जन्तुं व्रजेत्तत्सदृशं प्रसूते ॥ २५ ॥
गर्भस्य चत्वारि चतुर्विधानि भूतानि मातापितृसंभवानि ।
आहारजान्यात्मकृतानि चैव सर्वस्य सर्वाणि भवन्ति देहे ॥ २६ ॥
तेषां विशेषाद्बूलवन्ति यानि भवन्ति मातापितृकर्मजानि ।
तानि व्यवस्थेत् सदृशत्वहेतुं सत्त्वं यथानूकमपि व्यवस्थेत् ॥ २७ ॥

Signs of conception which has just taken place are salivation, heaviness, prostration, drowsiness, horripilation, cardiac distress, satisfaction, and non-elimination of the ejaculated semen from the uterus.

If the pregnant woman resorts to her activities predominantly in left limbs, if there is desire for the society of males,

if her dreams, drinks, taking food and other activities resemble that of a woman, if the conception has taken place in the left side of the womb, if the shape of the gravid uterus is not round (it is rather elongated), if the left breast is endowed with the excellence of lactation, then such a pregnant woman delivers a female child. If the above mentioned signs and symptoms are of opposite nature, then she delivers a male child. If there is combination of both these types of signs and symptoms then she delivers an eunuch.

The child resembles those things which the mother thinks in her mind during conception.

All the foetus are composed of four *mahābhūtas*. Each of these *mahābhūtas* is again of four types, viz. (1) those from the mother's ovum, (2) those from the father's sperm, (3) those from the diet of the pregnant mother and (4) those accompanying the soul which enters into the foetus. Because of the past actions of the parents and the soul, those of the above mentioned factors which ultimately dominate the composition of the foetus determine its resemblance to one or the other thing. [23-27]

Thoughts which occupy the mind of the woman during conception, because of their specific action, determine the resemblance of the offspring to one or the other thing. These thoughts of the woman create that condition in the sperm and ovum in her womb by which they can produce a foetus resembling those thoughts. Psychic factors are well known to initiate identical reactions in the body of living beings. Determination stimulates ejaculation of semen. During the period of *dohada*, the pregnant woman desires for many things and if her desires are not satisfied then those thoughts create abnormalities in the foetus and there is diminution of *ojas* and semen by jealousy and fear. Thus in *Sārīra* 8 : 14 it is stated that the woman desirous of a particular type of child should think in her mind about countries where such people are born.

Besides these psychic factors, physical factors, viz. four *mahābhūtas* derived from four different sources also determine the resemblance of the child to one or the other thing.

If the past actions associated with the Soul are auspicious, then the child bears features as those of his parents; otherwise, his features are dissimilar to his parents. Subtle *bhūtas* which accompany the Soul during the process of transmigration are common for all individuals; hence they do not act as determining factors for the child to resemble one thing or the other.

In verse-27 only three factors (excluding the diet of the pregnant woman) are mentioned which if predominant determine the manifestation of similar or dissimilar features in the child. In this case the food is included under the actions of the past life because one gets food according to the manner she had acted in the previous life. Further, mention of food as determinant factor is not necessary here because dominance of mother's ovum makes the offspring resemble his mother; this does not hold good in the case of food, because one cannot resemble food articles.

Psychic disposition of the individuals in the previous life determines the characteristics of the mind in this life as well. If the Soul had godly disposition in previous life, then the individual is endowed with godly faculties in this life. Association of different types of actions and species to which the individual belonged in the past life also determines psychosomatic disposition during the existing life.

Query about abnormality in foetus etc., :

कस्मात् प्रजां स्त्री विकृतां प्रसूते हीनाधिकाङ्गीं विकलेन्द्रियां च ।
देहात् कथं देहमुपैति चान्यमात्मा सदा कैरनुबध्यते च ॥ २८ ॥

Why does a woman give birth to an abnormal offspring with deficient or excess of limbs or impaired sensory and motor organs? How does the Soul transmigrate from one body to another? With whom is it always attached? [28]

Factors responsible for abnormality in foetus :

वीजात्मकर्मशयकालदोषैर्मातुस्थथाऽऽहारविहारदोषैः ।
कुर्वन्ति दोषा विविधानि दुष्टाः संस्थानवर्णेन्द्रियवैकृतानि ॥ २९ ॥
वर्षासु काष्ठाशमघनाम्बुद्धेगास्तरोः सरित्स्रोतसि संस्थितस्य ।
यथैव कुर्याद्विकृतिं तथैव गर्भस्य कुक्षो नियतस्य दोषाः ॥ ३० ॥

Because of the defects in seeds (sperms, ovum), actions associated with the Soul, uterus, time and food as well as regimen of the mother, *doṣas* get variously vitiated and this results in the impairment of the shape, colour and sensory as well as motor organs of the offspring. As a tree standing in the current of a river gets afflicted by the forceful downward movement of wood, stone pieces and water during the rainy season, so the foetus in the uterus of the mother gets afflicted with the vitiated *doṣas*. [29-30]

Atman-its transmigration :

भूतैश्चतुर्भिः सहितः सुसूक्ष्मैर्मनोज्ञो देहमुपैति देहात् ।
कर्मात्मकत्वात् तु तस्य दृश्यं दिव्यं विना दर्शनमस्ति रूपम् ॥ ३१ ॥

स सर्वगः सर्वशरीरभृत्य स विश्वकर्मा स च विश्वरूपः ।
 स चेतनाधातुरतीन्द्रियश्च स नित्ययुक्तसानुशयः स एव ॥ ३२ ॥
 रसात्ममातापितृसंभवानि भूतानि विद्यादृश षट् च देहे ।
 चत्वारि तत्रात्मनि संश्रितानि स्थितस्तथाऽत्मा च चतुर्षु तेषु ॥ ३३ ॥
 भूतानि मातापितृसंभवानि रजश्च शुक्रं च वदन्ति गर्भे ।
 आप्याच्यते शुक्रमसृक् च भूतैर्यैस्तानि भूतानि रसोद्भवानि ॥ ३४ ॥
 भूतानि चत्वारि तु कर्मजानि यान्यात्मलीनानि विशन्ति गर्भम् ।
 स बीजधर्मा हृष्परापराणि देहान्तराण्यात्मनि याति याति ॥ ३५ ॥
 रूपाद्वि रूपप्रभवः प्रसिद्धः कर्मात्मकानां मनसो मनस्तः ।
 भवन्ति ये त्वाकृतिबुद्धिभेदा रजस्तमस्तत्र च कर्म हेतुः ॥ ३६ ॥

Being guided by the associated past actions, the Soul who travels with the help of the mind, transmigrates from one body to another along with the four subtle *bhūtas*. This Soul cannot be perceived by any other sense except the divine vision. He is omnipresent; He can enter into any physique; He can perform any action and can take any shape; He is the conscious element; He is beyond any sensory perception; and it is due to His association with the intellect etc. that he gets involved in attachment etc.

In the body of living beings, there are sixteen types of *bhūtas*. They are derived from *rasa* (digestive product of mother's food), Soul (those accompanying Him), mother and father. Four of these *bhūtas* accompany the Soul and the Soul Himself depends upon four of them for His existence. *Bhūtas* from the mother and father are derived through their ovum and sperm. It is the *rasa* (digestive product of food) which provides nourishment in the form of *bhūtas* to the sperm and ovum.

The four *bhūtas* which get fused (constantly associated) with the Soul to enter into the foetus are the products of the past actions. Continuity of the migration of *bhūtas* is maintained as the Soul who is like a seed (and who is responsible for several incarnations) transmigrates from one body to another.

It is a fact that in individuals having the association of past action, the physique and the mind are respectively derived from the physique and mind of his past life. The dissimilarity in the shape and intellectual faculties is caused by the *rajas*, *tamas* and the nature of the past actions. [31-36]

Verses 31 to 36, represent a reply to the second question envisaged in the earlier verse no.—28. According to verse—31, only four *bhūtas* transmigrate from one body to another; the fifth *bhūta* that is *ākāśa* being devoid of any action does not transmigrate.

Ātman is omnipresent. Hence there is no question of His transmigrating from one body to another. But when He comes in conglomeration with the mind, He forms an individual entity which transmigrates from one body which dies, to another body which takes birth. Depending upon His virtuous or sinful past acts, the Soul (*Ātman*) takes birth in another suitable body for the sake of enjoyment of fruits of such actions. This *sūkṣmaśarīra* (subtle body) composed of the Soul, the mind including intellect and the *bhūtas* cannot be seen through ordinary eyes. It is visible only to a *yogin* through his divine vision.

Depending upon the past actions, the Soul may enter into the body of any species, viz. human beings, animals etc.

It is stated in the scriptures (specially in the *Sāṃkhya*) that this gross body is the product of the subtle body (*sūkṣmaśarīra*). The sperm and ovum, after their combination, can manifest a gross body in the form of foetus, only when the subtle body (*sūkṣmaśarīra*) is associated with them. This association or combination of the subtle body with the sperm and ovum is conditioned by the actions in the past life. The cause and effect always bear resemblance with each other. The colour of the cloth is dependant upon the colour of the threads composing the cloth. Similarly the characteristic features of the gross body resemble those of the subtle body. Not only the physique but also the mental faculties of the individual resemble those of the subtle body. Actions, viz, charity, study, meditation etc., in the past life give the individual a *sāttvika* type of mind.

The subtle *bhūtas* which transmigrate through the Soul are, no doubt, identical in all individuals. But the psychic faculties are not the same. At times they are dominated by *rajas* and *tamas*. The actions in the past life of individuals are dissimilar to each other. Dominance of *rajas* and *tamas*, and the actions in the past life are responsible for the variations in the characteristic features of individuals.

Factors responsible for keeping the Soul attached :

अतीन्द्रियस्तैरतिसूक्ष्मरूपैरात्मा कदाचिन्वियुक्तरूपः ।
न कर्मणा नैव मनोमतिभ्यां न चाप्यहङ्कारविकारदोषैः ॥ ३७ ॥
रजस्तमोभ्यां हि मनोऽनुबद्धं ज्ञानं विना तत्र हि सर्वदोषाः ।
गतिप्रवृत्त्योस्तु निमित्तमुक्तं मनः सदोषं बलवच्च कर्म ॥ ३८ ॥

The Soul can never dissociate Himself from the trans-sensory and excessively subtle *bhūtas* or from the effects of the past actions or from the mind and the intellect or from ego and other morbid factors.

The mind is constantly associated with *rajas* and *tamas*. In the absence of knowledge, *rajas* and *tamas* cause all morbidity. The morbid mind and strong action (with strongly determined results) are responsible for transmigration of the Soul from one body to another and for the individuals inclination to do virtuous or vicious work. [37-38]

The third question raised in verse—28 is replied here. Mind is always associated with *rajas* and *tamas*. If it is not enlightened with the knowledge of ‘truth’ then there is morbidity which results in the form of transmigration and inclination to do virtuous and vicious acts. In short, the association of impure mind makes the Soul enter into the wordly bondage.

The information furnished in the second part of verse—38 is not directly relevant to the queries raised in verse—28. Even then this is described here just for contextual propriety.

Query about diseases :

रोगाः कुतः संशमनं किमेषां हर्षस्य शोकस्य च किं निमित्तम् ।

शरीरसत्त्वप्रभवा विकाराः कथं न शान्ताः पुनरापत्तेयुः ॥ ३९ ॥

What are the causative factors of diseases ? What are their curatives ? What is the cause of happiness ? What is the chuse of sorrow ? How can the recurrence of psychosomatic diseases be prevented after their manifestation ? [39]

Factors for causation and alleviation of diseases :

प्रज्ञापराधो विषमास्तथाऽर्था हेतुस्तुतीयः परिणामकालः ।

सर्वामयानां त्रिविधा च शान्तिर्ज्ञानार्थकालाः समयोगयुक्ताः ॥ ४० ॥

Causative factors of diseases are :

1. Intellectual blasphemy;
2. Unwholesome contact with senses; and
3. Seasonal vagaries.

All diseases can be cured in three ways, viz. correct knowledge, wholesome contact with senses and seasonal normality. [40]

Causes of happiness and misery and their cessation :

धर्म्याः क्रिया हर्षनिमित्तमुकास्ततोऽन्यथा शोकवशं नयन्ति ।

शरीरसत्त्वप्रभवास्तु रोगास्तयोरवृत्त्या न भवन्ति भूयः ॥ ४१ ॥

Righteous acts are responsible for happiness and unrighteous acts for misery. The body and the mind are the

seats of diseases. When there is a break in the continuity of the body and mind, then diseases cease to recur. [41]

A break in the continuity of the body and the mind which are the seats of diseases can be attained only by salvation.

Ceasation of continuity of body and mind :

रूपस्थ सत्त्वस्य च सन्ततिर्या नोक्षनदादिर्नहि सोऽस्ति कश्चित् ।
तयोरवृत्तिः क्रियते पराभ्यां धृतिस्मृतिभ्यां परया धिया च ॥४२॥

According to scriptures, there is no beginning of the mind and the body. The continuity of the mind and the body is broken only when the individual is in possession of the excellence of power of meditation, memory and intellect. [42]

The factors responsible for the salvation of the Soul and the factors that bring about an end to the continuity of the body and the mind are enumerated in the first chapter of this section.

Factors responsible for non-affliction by diseases :

सत्याश्रये वा द्विविधे यथोक्ते पूर्वं गदेभ्यः प्रतिकर्म नित्यम् ।
जितेन्द्रियं नानुपतन्ति रोगास्तत्कालयुक्तं यदि नास्ति दैवम् ॥ ४३ ॥

One does not get afflicted with diseases even during the existence of the body and the mind which are the seats of diseases, if before the manifestation of diseases, he takes recourse to preventive therapeutic measures and abstains from intellectual blasphemy and unwholesome contact with senses, provided the manifestation of the diseases at that time is not pre-determined. [43]

Therapies for the prevention of diseases are composed of such measures as would counteract the ill effects of seasons which are unavoidable. In spite of the adoption of all measures to prevent a disease, it does occur if its manifestation at that time is pre-determined due to effects of the actions during the previous life.

Daiva and puruṣakāra :

दैवं पुरा यत् कृतमुच्यते तत् तत् पौरुषं यस्त्वह कर्म दृष्टम् ।
प्रवृत्तिहेतुर्विषमः स दृष्टो निवृत्तिहेतुहि समः स एव ॥ ४४ ॥

The effect of what is done during the previous life is known as *daiva*. The effect of what is done during the present life is known as *puruṣakāra*. The unrighteous deeds of the previous life induces one to diseases; if however, they are righteous, then the individual remains free from diseases. [44]

Even though the *Karman* is neuter gender, still it reflects the idea of *puruṣakāra* (actions during the present life) and because of this, the term 'saḥ' a pronoun of masculine gender is used here in place of *Karman*.

Some scholars interprete the latter part of the verse in a slightly different way. According to them unrighteous deeds of the previous life keep the individual in the worldly bondage whereas the righteous acts result in salvation.

Methods for prevention of seasonal diseases :

हैमन्तिकं दोषचयं वसन्ते प्रवाहयन् ग्रैष्मिकमध्यकाले ।
घनात्यये वार्षिकमाशु सम्यक् प्राप्नोति रोगानृतुजान्न जातु ॥ ४५ ॥

Doṣas accumulated during *Hemanta* (December-February) be eliminated in the month of *Caitra* (March-April). Those accumulated during summer (April-June) in the month of *Srāvanya* (July-August) and those accumulated during rainy season (August-October) should be eliminated in the month of *Mārgaśīrṣa* (November-December). [45]

The exact months for the elimination of *doṣas* aggravated during different seasons are described in *Sutra* 7 : 46.

Factors responsible for keeping a person free from diseases :

नरो हिताहार्तव्याहरसेवी समीक्ष्यकारी विषयेष्वसक्तः ।
दाता समः सत्यपरः क्षमावानासोपसेवी च भवत्यरोगः ॥ ४६ ॥
मतिर्वचः कर्म सुखानुवन्धं सत्त्वं विधेयं विशदा च बुद्धिः ।
शानं तपस्तत्परता च योगे यस्यास्ति तं नानुपर्त्ति रोगाः ॥ ४७ ॥

One who resorts to wholesome diet and regimens, who enters into action after proper observation, who is unattached to the pleasure drawn from the satisfaction of sensory objects, who is given to charity, impartiality, truthfulness and forgiveness and who is at service of learned people, seldom gets afflicted with diseases.

Diseases do not afflict an individual who is endowed with excellence of thoughts, speech and acts which are ultimately blissful, independent thinking, clear understanding, knowledge, observance of spiritual prescriptions and love for meditation. [46-47]

तत्र श्लोकः ।

इहाग्निवेशस्य महार्थयुक्तं षट्क्रिशकं प्रश्नगणं महर्षिः ।
अनुत्तुल्यगोत्रे भगवान् यथावक्त्रिणीतिवान् ज्ञानविवर्धनार्थम् ॥ ४८ ॥

To sum up :

With a view to enlightenment, Lord Ātreya has properly replied thirty six important queries of Agniveśa in this chapter on “the development of embryo caused by the union of males and females of mutually different clan. [48]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थानेऽनुत्तुल्यगोत्रीयं
शारीरं नाम द्वितीयोऽध्यायः ॥ २ ॥

Thus ends the second chapter on the development of embryo caused by the union of males and females and females of mutually different clan, of the *Śārira section* of Agniveśa's work as redacted by Caraka. [2]

CHAPTER III FORMATION OF EMBRYO

तृतीयोऽध्यायः

अथातः खुड़िकां गर्भाचक्रान्ति शारीरं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

Now we shall expound the minor chapter on “the formation of embryo as conducive to the understanding of the body”.

Thus said Lord Atreya. [1-2]

The subject matter of the previous chapter is the union of the sperm and the ovum resulting in the formation of embryo. Several other factors which are responsible for the formation of embryo are going to be discussed in this chapter.

Factors responsible for procreation :

पुरुषस्यानुपहतरेतसः ख्याश्चाप्रदुष्योनिशोणितगर्भाशयाया यदा भवति संसर्गः क्रतुकाले, यदा चानयोस्तथायुक्ते संसर्गे शुकशोणितसंसर्गमन्तर्गर्भाशयगतं जीवोऽवक्रामति सत्त्वसंप्रयोगात्तदा गर्भोऽभिनिर्वर्तते, स सात्म्यरसोपयोगादरोगोऽभिवर्धते सम्यगुपचारैश्चोपचर्यमाणः, ततः प्राप्तकालः सर्वेन्द्रियोपपत्नः परिपूर्णशारीरो बलवर्णसत्त्वसंहननसंपदुपेतः सुखेन जायते समुदयादेषां भावानां—मातृजश्चायं गर्भः पितृजश्चात्मजश्च सात्म्यजश्च रसजश्च, अस्ति च खलु सत्त्वमौ—पपादुकमिति होवाच भगवानात्रेयः ॥ ३ ॥

When a man with unimpaired sperm and a woman with unafflicted genital tract, ovum and uterine bed cohabit during the period of fertilization, the *jiva* (Soul) along with the mind descends into the zygote (combined form of the sperm and ovum) lodged inside the uterus. This results in the formation of the embryo. It grows, unafflicted, being nourished by the wholesome *rasa* (final product of digestion of mother's food) and being managed with proper regimen. Thereafter the foetus is formed with all the sensory and motor organs, possessed of all the limbs of the body and endowed with the excellence of strength, complexion, mental faculties and compactness for delivery in time (ninth or tenth month of gestation). This occurs due to the combination of the factors derived from the following sources:-

(1) Mother, (2) Father, (3) Soul, (4) Wholesomeness and
 (5) Rasa (digestive product of the mother's food).

Mind is also responsible for the transmigration of the Soul. Thus said Lord Ātreya. [3]

Man after crossing his juvenile stage and the woman in her youth are considered to be suitable partners for procreation. The period of fertilization starts from the day the woman menstruates. But during the first three days of the menstruation, cohabitation is prohibited because it is inauspicious—c.f. *Sūtra* 25 : 40. As a seed sown in proper season (*r̥tu*) grows, so also the sperm when ejaculated into the woman's genital tract during her period of fertilization (*r̥tu*) results in conception. Because of this identity in the purpose of season and the period of fertilization, the same term “*r̥tu*” is used in both the cases.

The sperm which was otherwise unimpaired earlier may get afflicted during the time of coitus because of jealousy etc. For conception, it is necessary that the sperm and ovum as also the genital tract and the uterine bed remain unafflicted even during the time of cohabitation.

Conception takes place only when the Soul along with the mind enters into the zygote of the sperm and ovum, when they are inside the uterus. If such union takes place outside the uterus, then there is no possibility of conception.

Ātman or Soul which represents the element of consciousness is omnipresent. There is no question of His migrating from one place to another. But when the mind gets lodged in a place in accordance with result of past actions, consciousness is manifested there and because of this conscious manifestation, it is said that the Soul transmigrates along with the mind. The embryo can grow properly after its formation if the food and regimen resorted to by the mother are conducive thereto.

Wholesomeness is considered to be one of the factors responsible for the proper development of the foetus. This does not include the wholesomeness of *rasa* (digestive product of mother's food) which is described separately. Wholesomeness here indicates the wholesomeness of other factors, viz. vision etc., and regimen.

Right from the time of conception till delivery it is the mother who carries and nourishes the foetus; the foetus derives all its merits and defects from the mother during this period. Hence, the mother is described first among the factors responsible for the proper growth of the foetus. The male partner has an important role to play. Apart from his active role during cohabitation, it is from the sperm that all the tissue elements like bone etc., which give firmness and stability to the body of the foetus, are formed. Hence, in the beginning the sperm of man is given priority over the ovum of the woman.

Bharadvāja's objection :

नेति भरद्वाजः, किं कारणं—न हि माता न पिता नात्मा न सात्म्य न पानाशनभक्ष्यलेह्योपयोगा गर्भं जनयन्ति, न च परलोकादेत्य गर्भं सत्त्वमवक्रामति ॥ (१) ॥

'No', said Bharadvāja, because neither mother nor father, nor wholesomeness, nor the utilization of drinkables, eatables, chewables or lickables can produce a foetus. It is also not correct to say that the mind transmigrates from another world to take part in the formation of the foetus. [4-1]

यदि हि मातापितरौ गर्भं जनयेतां, भूयस्यः स्थियः पुमांसश्च भूयांसः पुत्रकामाः, ते सर्वे पुत्रजन्माभिसन्धाय मैथुनधर्ममापद्यमानाः पुत्रानेव जनयेयुर्दुहितर्वा दुहितकामाः, न तु काश्चित् स्थियः केचिद्ग्रापुरुषा निरपत्याः स्युरपत्यकामावा परिदेवरन् ॥ (२) ॥

If parents are responsible for the formation of the foetus, many men and women who are keenly desirous of sons can produce them by resorting to cohabitation. Similarly those who desire daughter can get them. None of men and women without a child should be grieved for want of a child. [4-II]

In brief, it is said that parents are not directly responsible for the production of the child, hence, they need not be included among the factors which help the formation and growth of the foetus.

न चात्माऽत्मानं जनयति । यदि ह्यात्माऽत्मानं जनयेज्ञातो वा जनयेदात्मानमजातो वा, तच्चोभयथाऽप्ययुक्तम् । न हि जातो जनयति सत्त्वात्, न चाजातो जनयत्यसत्त्वात्, तस्मादुभयथाऽप्यनुपत्तिः । तिष्ठतु तावदेतत् । यद्यायमात्माऽत्मानं शक्तो जनयितुं स्यात्, न त्वेनमिष्टास्वेव कथं योनिषु जनयेद्विशिनमप्रतिहतगतिं कामरूपिणं तेजोवलजबवर्णसत्त्वसंहननसमुदितमजरमरुजमरम्; एवंविधं ह्यात्माऽत्मानमिच्छत्यतो वा भूयः ॥ (३) ॥

Atman (Soul) is not produced by another *Atman*. If it is stated that *Atman* produces *Atman* the question may arise as to whether the Soul, born produces another Soul or an unborn one ? Both these propositions are untenable. As the Soul already born is in existence there is no question of His producing Himself. As the Soul unborn is non-existent He cannot produce Himself. Therefore the proposition is untenable both ways. Let us consider the problem from another angle. If the Soul is capable of reproducing Himself, then how is it that He does not choose a desirable

womb endowed with lordship, unrestrained movement, capacity to have forms as He pleases, luste, strength, speed, complexion, mental faculties, compactness and having freedom from aging, disease and death ? The Soul wants Himself to be like this or even better. [4-III]

असात्म्यजश्चायं गर्भः । यदि हि सात्म्यजः स्यात्, तर्हि सात्म्यसेविनामे-
वैकान्तेन प्रजा स्यात्, असात्म्यसेविनश्च निखिलेनानपत्याः स्युः, तच्चोभयमुभय-
त्रैव दृश्यते ॥ (४) ॥

Wholesomeness is not responsible for the formation of the foetus. Had it been so, only those who resort to wholesomeness should get children and the remaining ones who resort to unwholesomeness should never get a child but both the types of people are found to be equally succesful or unsuccessful in getting children. [4-IV]

अरसजश्चायं गर्भः । यदि हि रसजः स्यात्, न केचित् रुपुरुषेष्वनपत्याः
स्युः, न हि कश्चिदस्त्येषां यो रसान्नोपयुद्भ्क्ते; शेषुरसोपयोगिनां चेद्भर्मा जायन्त
इत्यभिप्रेतमिति, एवं सत्याजौरभ्रमार्गमायूरगोक्षीरदधिघृतमधुतैलसैन्धवेश्वरसमु-
द्रशालिभृतानामेवैकान्तेन प्रजा स्यात्, इथामाकवरकोदालककोरदूषककन्दमूल-
भक्षाश्च निखिलेनानपत्याः स्युः, तच्चोभयमुभयत्र दृश्यते ॥ (५) ॥

The foetus is not formed of *rasa* (digestive product of (food). Had it been so, none of men and women should remain without a child. None of them live without *rasa* (digestive product of food). If the intention here is that individuals having the excellence of *rasa* should have children, then only those who take meat soup of goat, sheep, deer, and peacock, milk, curd and ghee of the cow, honey, oil, rock salt, sugarcane juice, *mudga* (*phaseolus mungo* Linn.) and *sāli* rice for nourishment should get children and the others who take *śyāmaka*, *varaka*, *uddālaka*, *koradūsa* (type of corn, rhizomes and roots should always be deprived of a progeny. But both the types of people are equally successful or unsuccessful in getting children. [4-V]

न खल्वपि परलोकादेत्य सत्त्वं गर्भमवकामति; यदि होनमवकामेत, नास्य
किञ्चित् पौर्वदेहिकं स्यादविदितमश्रुतमद्युषं वा, स च तच्च न किञ्चिदपि
स्मरति ॥ (६) ॥

तस्मादेतद्दूमहे—अमातृजश्चायं गर्भोऽपितृजश्चानात्मजश्चासात्म्यजश्चारस-
जश्च, न चास्ति सत्त्वमौपपादुकमिति (होवाच भरद्वाजः) ॥ ४ ॥

The mind does not come from the world beyond to enter into the foetus. If it does so, nothing of its past life should remain unknown, unheard and unseen by him. But actually it does not remember any such thing.

Therefore, I say, the foetus is not formed out of the mother, father, Soul, wholesomeness or *rasa* (digestive product of food). It is also not correct to say that the mind transmigrates from another world to take birth in the formation of the foetus.

Thus said Bharadvāja. [4]

If the mind, which had the experience of the past life continues to exist in the present life, then the individual should remember everything known, heard and seen during the past life as the same individual in his old age remembers everything he has known, heard and seen during the youth.

Ātreya's decision :

नेति भगवानात्रेयः, सर्वेभ्य यम्यो भावेभ्यः समुदितेभ्यो गर्भोऽभिनिर्वर्तते ॥ ५ ॥

Lord Ātreya said, "No, the foetus is formed from out of the combination of all these factors." [5]

It is the combination of all the six factors which help in the formation of a child. Of course none of these factors in isolation would be able to produce a child. At the same time there is no reason why any of these factors should not be recognised as a causative factor for the formation of embryo. Threads alone cannot produce clothes. But this does not mean that threads do not constitute causative factors for the production of clothes. Threads will not cease to be causative factors of the clothes because without the help of other factors, threads alone cannot produce the cloth.

Factors derived from mother :

मातृजश्चायं गर्भः । न हि मातुर्विना गर्भोत्पत्तिः स्यात्, न च जन्म जरायुजानाम् । यानि खल्यस्य गर्भस्य मातृजानि, यानि चास्य मातृतः संभवतः संभवन्ति, ताम्यनुव्याख्यास्यामः; तद्यथा—त्वक् च लोहितं च मांसं च मेदश्च नाभिश्च हृदयं च क्लोम च यकृश्च मीहा च वृक्कौ च वस्तिश्च पुरीषाधानं चामाशयश्च पक्षाशयश्चोत्तरगुदं चाधरगुदं च क्षुद्राक्रं च स्थूलाक्रं च वपा च वपावहनं चेति (मातृजानि) ॥ ६ ॥

The foetus is produced out of the mother. Without mother there is no possibility of conception and birth of viviparous creatures. We shall hereafter describe those organs which are

derived from the maternal source (from ovum) and which are formed because of the existence of the mother. They are skin, blood, flesh, fat, umblicus, heart, *kloman* (right lung ?) liver, spleen, kidneys, bladder, rectum, stomach, *pakvāśaya* (colon), upper and lower parts of the anus, small intestine, large intestine, mesentery and omentum. (These are the organs derived from maternal source.) [6]

Those creatures which are delivered being covered with the amniotic membrane are known as *jarāyuja* or viviparous. Mosquitoes which are *samsvedaja* (born out of hot moisture) and frog etc., which are *ubdhija* (born out of earth) can take birth even without a mother. No doubt, mother is the cause of birth of egg-born animals but they are not taken into account in the above paragraph because the discussion here relates to human beings alone which are viviparous. There can be another explanation for the omission of the egg-born creatures from the above description. In the case of a viviparous creature, mother carries the foetus till the time of delivery. In egg-born creatures, the foetus in the form of eggs remain inside the mother's womb till the laying of eggs. In some creatures of this group, viz. tortoise etc., the mothers responsibility entirely ceases after the laying of eggs—the mother has no role to play in the birth of baby tortoise.

In the para 7 it will be described that viviparous animals cannot take birth in the absence of the father i.e. father is directly responsible for the birth of such type of animals. On the other hand, egg-born creatures like fish etc., take birth during the proper season even without a father to play his role.

Mother as the source for the derivation of the organs like skin, described in para 6 is known from religious scriptures.

Factors derived from father :

पितृजश्चायं गर्भः । नहि पितुर्क्षते गर्भोत्पत्तिः स्यात्, न च जन्म जरायु-
जानाम् । यानि खल्वस्य गर्भस्य पितृजानि, यानि चास्य पितृतः संभवतः संभ-
वन्ति, तान्यनुव्याख्यास्यामः; तद्यथा—केशश्मश्रुनखलोमदन्तास्थिसिरास्त्रायु-
धमन्यः शुक्रं चेति (पितृजानि) ॥ ७ ॥

The foetus is produced from out of the father (from sperm). Without father there is no possibility of conception and birth of viviparous creatures. We shall hereafter describe those organs which are derived from paternal source (from sperm) and which are formed because of the existence of the father.

They are hair of the head, hair of the face, nail, small hairs of the body, teeth, bones, veins, ligaments, arteries

and semen. (These are the organs derived from paternal source). [7]

Atman as a Source :

आत्मजश्चायं गर्भः । गर्भात्मा ह्यन्तरात्मा यः, तं 'जीव' इत्याचक्षते शाश्वतमरुजमजरमरमक्षयमभेद्यमच्छेद्यमलोड्यं दिश्वरूपं विश्वरूपं विश्वकर्मणमव्यक्तमनादिमनिधनममक्षरमपि । स गर्भाशायमनुविदिश्य शुक्रशोणिताभ्यां संयोगमेत्य गर्भंत्वेन जनयत्यात्मनाऽऽत्मानम्, आत्मसंब्राह्म गर्भे । तस्य पुनरात्मनो जन्मानादित्वाच्चोपपद्यते, तस्माच्च जात प्रयायमजातं गर्भं जनयति, अजातो ह्यमजातं गर्भं जनयति; स चैव गर्भः कालान्तरेण बालयुवस्थधिरभावान् प्राप्नोति, स यस्यां यस्यामवस्थायां वर्तते तस्यां तस्यां जातो भवति, या त्वस्य पुरस्कृता तस्यां जनिष्यमाणश्च, तस्मात् स पव जातश्चाजातश्च युगपद्धवति; यस्मिंश्चेतदुभयं संभवति जातत्वं जनिष्यमाणत्वं च स जातो जन्यते, स चैवानागतेष्ववस्थान्तरेष्वजातो जन्ययत्यात्मनाऽऽत्मानम् । सतो ह्यस्थान्तरगमनमात्रमेव हि जन्म चोच्यते तत्र तत्र वयसि तस्यां तस्यामवस्थायां; यथा-सतामेव शुक्रशोणित-जीवानां प्राक् संयोगाद्भूत्वं न भवति, तच्च संयोगाद्भवति; यथा-सतस्तस्यैव पुरुषस्य प्रागपत्यात् पितृत्वं न भवति, तच्चापत्याद्भवति; तथा सतस्तस्यैव गर्भस्य तस्यां तस्यामवस्थायां जातत्वमजातत्वं चोच्यते ॥ ८ ॥

The foetus is produced out of the Soul. The *Antarātman* (Soul inside the animal body) is the same as *Garbhātman* (Soul in the foetus). This is known as *jīva* or animated Soul. According to religious scriptures, this Soul is eternal. He does not get afflicted by diseases. He does not undergo the process of aging. He does not succumb to death. He does not undergo diminution. He cannot be penetrated. He cannot be cut. He cannot be made to get irritated. He is omnipresent and omnipotent. He is invisible. He is without the beginning and end, and He is unchangeable. By entering into the uterus, it gets combined with the sperm and the ovum thereby reproducing Himself in the form of a foetus. Thus the foetus takes the designation of Soul.

Again, the question of birth of the Soul does not arise as it is beginningless. Therefore it is not correct to say that He produces the unborn foetus either Himself being born or being unborn.

The same foetus during the course of time, attains the state of childhood, youth and old age. According to the state

attained by Him, He is stated to be born in those states of life but with reference to the state of life ahead, He is considered to be unborn or in the process of taking birth. Therefore, He is both born and unborn simultaneously. In such situations where the Soul is considered to be both born or being born, He produces that state of life after Himself having taken birth. In other situations, where that state of the body (Soul), is yet to come, the Soul is considered to produce himself without being born. In those particular ages i.e. types of growth as well as in these particular states (situations) of living beings, the change of the state of the associated body is considered to be the birth of *Ātman*. For example, the state of mere existence of sperm and ovum prior to be combination of the Soul cannot be called as foetus. They are only entitled to be known as foetus only when the Soul gets combined with them. The existant man cannot be called as a father prior to the birth of his offspring. He is considered to be the father only after the birth of his offspring. Similarly, the existant foetus (Soul) can be considered to be born or unborn depending upon the state attained or to be attained by him. [8]

The term ‘*Antarātman*’ is used here in order to distinguish the Empirical Soul as a causative factor of the embryo as distinct from the physical self composed of six *dhātus*. It is this Empirical Soul which is described as eternal in the scriptures and who produces the physical self in the form of embryo composed of six *dhātus*. The Empirical Soul being eternal is never born. Even though He is never born, He produces embryo not born earlier. The same Soul subsequently transforms Himself into the embryo and in that stage He can be said to have been born as well. Thus it is by process of transformation into the various stages of embryo that the Soul in a way is born. So the controversy raised in para—3 above is settled. To sum up : the Soul being eternal is never born; but as it is in the various stages of human life, juvenile, youth, old age etc. there is a sort of transformation which the Soul undergoes and so we can ascribe birth to the Soul also even though it cannot be ascribed to him in the real sense of the term. It seems the author has Sāṅkhya theory of evolution in view.

Guiding factors :

न खलु गर्भस्य न च मातुर्न पितुर्न चात्मनः सर्वभावेषु यथेष्टकारित्वमस्ति;
ते किंचित् स्ववशात् कुर्वन्ति, किंचि कर्मवशात्, कचिच्चेयां करणशक्तिर्भवति,
क्षचिन्न भवति । यत्र सत्त्वादिकरणसंपत्तत्र यथावलमेव यथेष्टकारित्वम्, अतो-

अन्यथा विपर्ययः । न च करणदोपादकरणमात्मा संभवति गर्भजनने, दृष्टुं चेष्टा
योनिरैश्वर्यं मोक्षश्रात्मविद्वारात्मायत्तम् । न हन्यः सुखदुःखयोः कर्ता । न चान्यतो
गर्भो जायते जायमानः, नाङ्करोत्पत्तिरवीजात् ॥ ९ ॥

Mother's father and Soul independently cannot satisfy all the requirements for the formation of a foetus. They themselves do certain things and some other things they do because of the force of the actions of the previous life. They possess the ability to do certain things themselves. For some other things, they do not have that ability. It is only when these factors are added with the excellence of other factors, viz. mind, sense organs, sperm, ovum etc., depending upon the actions in the previous life, they have the capacity to manifest things by themselves. Because of defects in these factors, the Soul (devoid of such instruments in their normal state) cannot help in the formation of a foetus if He is not properly equipped with other factors in excellent condition. It is well known that individuals who have realized Soul of their own can enter into the desired womb and attain salvation. There is none else who is responsible for the happiness and sorrow of the individual. The foetus is not formed by anything else being born. Nothing can be germinated from anything but seeds. [9]

If the Soul is capable of producing Himself, then why does He not choose a womb endowed with all good qualities, viz. lordship etc.? This query was raised by Bharadvāja in para—4 of this chapter. The above para provides an answer to this query.

In the present context only the role of the Soul in the formation of foetus is being discussed. Mother and father are also mentioned in the paragraph only to show that like Soul, these factors alone (not depending upon other instruments) cannot produce children.

The mother, father and Soul have no doubt their roles to play individually and independently. For example, cohabitation, intake of wholesome food etc., can be done by parents themselves without any external aid, but the entrance of the Soul into sperm and ovum joined together is controlled by other factors viz. the actions of the previous life. Similarly, the Soul is directly and independently responsible for the consciousness of the foetus. But in the matter of choosing the desirable or undesirable wombs, He is subordinate to the righteous and unrighteous acts of the past life.

When instruments, viz : mother etc., are powerful and the actions in the past life are favourable then the Soul can choose the desired womb.

If a couple with a view to procreating a son cohabitare and the man has pure semen in sufficient quantity, the woman has pure genital tract etc., and the action of the previous life is strong for the production of a male child then a son is born to that couple. The Soul along with the mind endowed, among others, with *sāttvika* qualities and auspicious past actions enter into the desirable womb at that time. In the absence of all these favourable factors, the Soul is incapable of entering into the desired womb.

If due to defects in the instruments, viz. mother (ovum) etc., the soul is unable to procreate, this does not in any way dispute His role as a causative factor. For example, if the potter is unable to manufacture a pot for want of clay, this does not prevent the potter from being called as one of the causative factors of the pot. His ability to manufacture the pot no doubt manifests itself only when other instruments are properly provided. Similar is the case with the Soul who can also play His role only when other accessories are available.

The choice of the womb and other virtues depends upon the Soul—c.f. *Śārira* 1 : 140. The Soul Himself is responsible for the happiness and sorrow of the individual, because happiness and sorrow are felt in the body and the Soul is responsible for the formation of the body.

A particular effect is always produced from a similar cause. A sprout of *jāna* (*Crotalaria juncia* Linn.) does not come out of the coconut seed. So the consciousness of the foetus does not come out from the *bhūtas* (elements), which by themselves are without consciousness but from the Soul who is conscious.

Factors derived from Ātman :

यानि तु खल्वस्य गर्भस्यात्मजानि, यानि चास्यात्मतः संभवतः संभवन्ति,
तान्यनुव्याख्यास्यामः; तदथा—तासु तासु योनिष्वृत्पत्तिरायुरात्मजानं मन इन्द्रि-
याणि-प्राणापानो प्रेरणं धारणमाहृतिस्वरबर्णविशेषाः सुखदुःखे इच्छाद्वेषौ चेतना
धृतिर्बुद्धिः स्मृतिरहङ्कारः प्रयत्नश्चेति (आत्मजानि) ॥ १० ॥

We shall hereafter describe those aspects of the individual which are derived from the Soul and which are formed because of the existence of Soul. They are taking birth in such and such wombs, life span, self realisation, mind, senses, to take things into and to excrete things out of the body, stimulation and substance of sense organs, characteristic shape, voice and complexion of the individual, desire for happiness and sorrow, liking and disliking, consciousness, courage, intellect, memory, egoism and efforts. All these aspects of the individual are derived from the Soul. [10]

Righteous and unrighteous acts are responsible for birth in the wombs of different species like the gods and animals. Soul is at the root of these righteous and unrighteous acts; hence Soul is considered to be ultimately responsible for taking birth in different wombs. Self-realization etc; are essentially the functions of the mind but the Soul is ultimately related with such activities.

Factors derived from satmya :

सात्म्यजश्चायं गर्भः । नह्यसात्म्यसेवित्वमन्तरेण स्त्रीपुरुषयोवैन्द्यत्वमस्ति, गर्भेषु वाऽप्यनिष्ठो भावः । यावत् खल्वसात्म्यसेविनां स्त्रीपुरुषाणां त्रयो दोषाः प्रकृष्टिः शरीरमुपसर्पन्ते न शुक्रशोणितगर्भार्शयोपघातायोपपद्यन्ते, तावत् समर्था गर्भजननाय भवन्ति । सात्म्यसेविनां पुनः स्त्रीपुरुषाणामनुपहतशुक्रशोणितगर्भार्शयानामृतुकाले सन्निपतितानां जीवस्यानवक्तमणाद्वर्भा न प्रादुर्भवन्ति । नहि केवलं सात्म्यज एवायं गर्भः, समुदयोऽत्र कारणमुच्यते । यानि खल्वस्य गर्भस्य सात्म्यजानि, यानि चास्य सात्म्यतः संभवतः संभवन्ति, तान्यनुव्याख्यास्यामः; तद्यथा—आरोग्यमनालस्यमलोलुपत्वमिन्द्रियप्रसादः स्वरवर्णवीजसंपत् प्रहर्षभूयस्त्वं चेति (सात्म्यजानि) ॥ ११ ॥

The foetus is produced from out of the wholesomeness. There cannot be sterility of the man, woman or defects in the foetus without resorting to unwholesome things. Human beings are capable of procreating offsprings as long as the sperm, ovum and uterus of men and women are not afflicted by the circulation of the three *dosas* vitiated by the intake of unwholesome things. Even during the period of fertilization, union (sexual) of the men and women who are given to wholesome things and whose sperms, ovums and uterus are unimpaired, do not produce the offspring if the Soul does not enter into it. Therefore, wholesomeness alone is not responsible for the formation of the foetus. It is the combination of all the factors which is responsible for the production of the foetus. We shall here-after describe these aspects of the individual derived from wholesomeness and which are manifested because of the existence of such wholesomeness. They are the state of freedom from diseases, laziness and greed, clarity of senses, excellence of voice and seeds and excessive, sex-vigor. (These aspects of the individual are derived from wholesomeness). [11]

Intake of wholesome things is not conducive to the formation of foetus. Only when wholesome things are taken, it helps in the formation

of the foetus. For the manifestation of the voice and complexion of the individual both the wholesomeness and Soul are responsible. Hence they are described both in para nos. 10 & 11.

Factors derived from Sātmya :

रसजश्चायं गर्भः । न हि रसादते मातुः प्राणयात्राऽपि स्यात्, किं पुनर्गर्भ-
जन्म । न चैवासम्यगुपयुज्यमाना रसा गर्भमभिनिर्वर्तयन्ति, न च केवलं सम्य-
गुपयोगादेव रसानां गर्भाभिनिर्वृत्तिर्भवति, समुदयोऽप्यत्र कारणदुच्यते । यानि
तु खल्वस्य गर्भस्य रसजानि, यानि चास्य रसतः संभवतः संभवन्ति, तान्यनु-
व्याख्यास्यामः; तद्यथा—शरीरस्याभिनिर्वृत्तिर्गमित्रुद्धिः प्राणानुवन्यस्तुप्सिः पुष्टिरू-
त्साहश्चेति (रसजानि) ॥ १२ ॥

The foetus is produced from out of *rasa* (digestive product of the mother's food). Without *rasa* even the mother will not live what to speak of the formation of the foetus in her womb. Employment of improper nourishment do not help in the production of the foetus. Conversely, a foetus is not formed simply by the employment of proper nourishment. Here also the combination of all the factors is responsible for the production of the foetus. We shall hereafter describe those aspects of the individual which are derived from *rasa* (digestive product of mother's food) and which are manifested (formed) because of the existence of *rasa*. They are manifestation and growth (in height) of the body, continuity of the strength, satisfaction, plumpness and enthusiasm. (These aspects of the individual are derived from *rasa*). [12]

Rasa (digestive product of food) comes in the way of the foetus formation only when because of this the three *dosas* circulating all over the body get vitiated and in their turn they vitiate the sperm, the ovum and the uterus of the couple. This is on the same line as it happens in the case of taking unwholesome things.

The use of the term "iti" at the end of the para 12 as also at the end of some of the other paragraphs indicates that the organs/aspects described prior to this term are some of the important ones. In addition, there are many more organs/aspects produced by these factors, viz. maternal source, paternal source, Soul, wholesomeness and *rasa*, which are not numerated here. Only important ones are decribed here and less important ones are left out.

Factors derived from sattva :

अस्ति खलु सत्त्वमौपपादुकं, यज्जीवं स्पृकशरीरेणाभिसंबभाति, यस्मिन्न-
पगमनपुरस्कृते शीलमस्य व्यावर्तते, भक्तिर्विपर्यस्यते, सर्वेन्द्रियाण्युपतप्यन्ते,

बलं हीयते, व्याधय आप्याय्यन्ते, यस्माद्वीनः प्राणाञ्छ्राति, यदिन्द्रियाणामभि-
ग्राहकं च 'मन' इत्यभिधीयते; तत्रिविधमाल्यायते—शुद्धं, राजसं, तामसमिति ।
येनास्य खलु मनो भूयिष्ठं, तेन द्वितीयायामाजातौ संप्रयोगो भवति; यदा तु तेनैव
शुद्धेन संयुज्यते, तदा जातेरतिक्रान्ताया अपि स्मरति । स्मार्ते हि ज्ञानमात्मन-
स्तस्यैव मनसोऽनुवन्धादनुवर्तते, यस्यानुवृत्तिं पुरस्कृत्य पुरुषो 'जातिस्मर' इत्यु-
च्यते । यानि खल्वस्य गर्भस्य सत्त्वजानि, यान्यस्य सत्त्वतः संभवतः संभवन्ति,
तान्यनुव्याख्यास्यामः; तद्यथा—भक्तिः शीलं शौचं द्वेषः स्मृतिर्माहस्त्यागो मात्सर्यं
शौर्यं भयं क्रोधस्तन्द्रोत्साहस्तैश्चण्यं मार्दवं गार्भीर्यमनवस्थितत्वमित्येवमादय-
श्चान्ये, ते सत्त्वविकारा यानुत्तरकालं सत्त्वभेदमधिकृत्योपदेक्ष्यामः । नानावि-
धानि खलु सत्त्वानि, तानि सर्वाण्येकपुरुषे भवन्ति, न च भवन्त्येककालम्,
एकं तु प्रायोवृत्स्याऽह ॥ १३ ॥

Mind is also the connecting link which connects the Soul with the physical body. So, on the eve of death when the mind starts living the body, there occurs a change in the normal behaviour and inclinations, the sense organs are disturbed, strength diminishes and living beings are attacked with diseases. Living beings devoid of mind, breath their last because the sense organs derive their inspiration from nothing but mind.

The objects of senses are of three types, viz. *sattvika*, *rajas*a and *tāmasa*. The mind dominated by any of the above mentioned attributes in one life follows in the subsequent life as well. When the individual is endowed with the *sattvika* type of mind from his previous life then he can recall things even beyond that life (that is he can recall the events of his past life). Because of the continuity of the same mind, he can remember things of the past incarnation. Because of this power to recall things of the past incarnation, the individual is called as "jātismara".

We shall hereafter describe those aspects of the individual which are derived from mind and which are manifested because of the existence of mind. They are likings, conduct, purity, enmity, memory, attachment, detachment, *matsarya* (strong desire not to part with), valour, fear, anger, drowsiness, enthusiasm, sharpness, softness, seriousness, unstability and such other manifestations of the mind which will be described later while discussing the various types of mind. All

of them occur in the same man but all of them are not manifested at the same time. An individual is said to belong to that particular type of mind by which he is dominated. [13]

The mind is responsible for uniting the *jīvātman* (Animated Soul) with the subtle (*ātivāhika*) body. This subtle body is composed of four *bhūtas* in their subtle form—c.f. Śārira 2 : 31. This mind also helps in the union of the *jīvātman* with the physical body. *Ātman* (Soul) is omnipresent. If he has to come in contact with the body directly then there will be universality of the feelings of the individual. Because of the union of the *Ātman* and the body through the mind, which later is limited to the individuals' body alone, there is limitations to the feelings of happiness, sorrow etc. of the individual.

The term '*prk*' (meaning having tactile sensation) has been used as an epithet of the body with a view to indicate that *Ātman* does not come in contact with such of the parts of the body, viz. urine, nails, hair etc; which are not accessible to the mind.

If an individual is in possession of *sāttvika*, *rājasa* or *tāmasa* type of mind, then in the next incarnation he is most likely to get that type of mind.

Because of the pressure inflicted upon the foetus by the genital tract during the process of delivery, he generally forgets the events of his previous incarnation. But, he, whose mind is dominated by *sāttvika* qualities (instead of *tāmasika* ones) can recollect events of his past life. The attributes of mind have already been described in the eighth chapter of Sūtra section. In view of the contextual propriety, they are again described here. In addition to the role played by the mind in the formation of the foetus, it has another specific property to migrate from one incarnation to another and because of this specific feature, the role of mind has been worded slightly (and) differently in the above paragraph.

The same man may have different types of mind at different times. When engaged in the righteous work, he will have *sāttvika* type of mind, when afflicted with passion, the same man will have *rājasika* type of mind and when attached to something he will have *tāmasika* type of mind. One cannot have all these types of mind at the same time. They may occur consequitively. Even though the same individual is likely to have all the types of mind, still he is considered as *sāttvika*, *rājasika* or *tāmasika*, depending upon the predominance of one or the other of the attributes of the mind.—c.f. Sūtra 8 : 6.

Embryo-conglomeration of several factors :

एवमयं नानाविधानामेषां गर्भकरणां भावानां समुदायादभिनिर्वर्तते
गर्भः; यथा—कूटागारं नानाद्रव्यसमुदायात्, यथा च—रथो नानारथाङ्गसमुदा-

यात्; तस्मादेतद्वोचाम—मातृजश्चायं गर्भः, पितृजश्च, आत्मजश्च, सात्म्यजश्च, रसजश्च, अस्ति च सत्त्वमौपापुकमिति (होवाच भगवानात्रेयः) ॥ १४ ॥

As a *kūtagāra* (round shaped cottage used for administering hot fomentation therapy) is constructed from out of various types of construction material and as a cart is constructed from out of various parts, similarly the embryo is formed from out of various types of procreative factors. Therefore we assert that the foetus is formed from out of various factors, viz. mother (ovum), father (sperm), Soul, wholesomeness and *rasa* (digestive product of mother's food). The mind serves as the connecting link. Thus said Lord Ātreya. [14]

Six procreative factors enumerated above can be classified into two categories—the first category comprising mother (ovum), father (sperms), mind and Soul and the second category comprising wholesomeness and *rasa* (digestive product of mother's food). The four factors belonging to the first category are responsible for initial formation of the embryo and the remaining two factors belonging to the second category only help subsequently for the growth of the foetus. The factors belonging to the second category, viz. wholesomeness and *rasa* can manifest their actions only in the presence of the remaining factors and it is with this end in view that the term समुदायोऽव्यत्र कारणम् has been used in the paragraphs describing these two factors—vide : paras 11-12.

Observations of Bharadvāja :

भरद्वाज उवाच—यद्यमेषां नानाविधानां गर्भकराणां भावानां समुदायादभिनिर्वर्तते गर्भः कथमयं सन्धीयते, यदि चापि सन्धीयते कस्मात् समुदायप्रभवः सन् गर्भो मनुष्यविग्रहेण जायते, मनुष्यश्च मनुष्यप्रभव उच्यते; तत्र चेदिष्टमेतद्यस्मान्मनुष्यो मनुष्यप्रभवस्तस्मादेव मनुष्यविग्रहेण जायते, यथा-गौर्गोप्रभवः, यथा-चाश्वोऽश्वप्रभव इति; एवं सति यदुक्तमग्रे समुदयात्मक इति तदयुक्तम् । यदि च मनुष्यो मनुष्यप्रभवः, कस्माज्जडान्धकुञ्जमूकवामनमिम्मन-व्यङ्गोन्मत्तकुष्ठिकिलासिभ्यो जाताः पितृसदशरूपा न भवन्ति । अथात्रापि बुद्धिरेवं स्यात्—स्वैर्वायमात्मा चशुषा रूपाणि वेत्ति, श्रोत्रेण शब्दान्, द्वाणेन गन्धान्, रसनेन रसान्, स्पर्शेन स्पर्शान्, बुद्ध्या वोद्धव्यमित्यनेन हेतुना न जडादिभ्यो जाताः पितृसदशा भवन्ति । अत्रापि प्रतिशाहानिदोषः स्यात्, एव-मुक्ते ह्यात्मा सत्स्वन्दियेषु द्वाः स्यादसत्स्वद्वाः; यत्र चैतदुभयं संभवति ज्ञात्वमङ्गत्वं च, सविकारश्चात्मा । यदि च दर्शनादिभिरात्मा विषयान् वेत्ति, निरन्दियो दर्शनादिविरहादद्वाः स्यात्, अशब्दादकारणम्, अकारणत्वाच्च नात्मेति वाग्वस्तु-मात्रमेतद्वचनमनर्थं स्यादिति (होवाच भरद्वाजः) ॥ १५ ॥

Bharadvāja said, "If the foetus is formed out of the conglomeration of these various procreative factors then how do they get united ? Their conglomeration apart, how is that the union of these factors results in the production of a creature in the form of a human being ? The man is known to be born from another man. If it is argued that the individual takes the form of a human being because he is born from out of a man as the cow is born from out of a cow and the horse from a horse, then the statement made before that the foetus is formed from out of the conglomeration of all these factors stands inappropriate. If the man is produced from another man then why the child born to parents who are dull, blind, hunch-backed, mute, dwarf, lisping, suffering from freckles, insanity, *kuṣṭha* (obstinate skin diseases including leprosy) and *kilāsa* (leucoderma) does not carry the defects of his parents ? If it is argued that the Soul sees things by His own eyes, hears by His own ears, smells by His own nose, tastes by His own tongue, touches by His own skin, understands by His own intellect and because of this individuals born of dumbs etc; do not carry the defects of their parents (because it is not the sense organs of parents but those of the Soul which takes part in procreation), this will also be in contrary to the proposition because if it is considered to be correct then the Soul will be endowed with consciousness only in the presence of sense organs:, otherwise not. Thus the Soul will be both conscious and unconscious. This follows that the Soul undergoes changes. If the Soul understands things by vision etc., in the absence of these sense organs, He won't be able to know things. Because of the absence of the power to know things, He cannot serve as a causative factor and if He is not a causativ factor, then he cannot be called *Ātman* (Soul). Thus, this proposition will be ridiculed as a story. (Thus said Bharadvāja). [15]

The problem discussed in the above paragraph relates to the one unified form the foetus takes out of the various mutually divergent elements. How is it that a human foetus takes a human form ? If it is argued that as a human foetus represents the various factors inherent in the human parents; so it takes a human form; this argument is not wholly correct. If it were so, the disabilities of parents would have also uniformly reflected themselves in the foetus. Tnat is to say the progeny of

blind parents would always be blind and, so on and so forth; but it is not so. As a matter of fact, it is the Soul of the living being in the womb who provides consciousness as well as sense organs so the foetus. So the sense organs of parents have nothing to do with the sense organs of the progeny.

Here again the question arises as to whether *Atman* derives His consciousness from His sense organs? If *Atman* gains consciousness only when He is endowed with sense organs and not otherwise, then the very definition of *Atman* (*Atma jñāḥ*—the Soul represents consciousness) would be wrong. Moreover, the association of *Atman* with the sense organs as a precondition of His consciousness would also amount to ascribing morbidity to Him which again goes against the description of *Atman* as a being devoid of morbidity.

In other words, the *Atman* would have no consciousness at all if He is devoid of sense organs and an *Atman* devoid of consciousness would not constitute a causative factor for foetus. And, if He is not the causative factor, He would cease to be an *Atman*. Thus, the above statement regarding the association of *Atman* with the sense organs appears to be a statement confined to words only—far from reality.

Atreya's observations :

आत्रेव उवाच--पुरस्तदेतत् प्रतिक्षातं—सत्त्वं जीवं सृष्टकशरीरेणाभिसं-
बधातीति । यस्मात्तु समुदायप्रभवः सन् स गर्भो मनुष्यविग्रहेण जायते, मनु-
ष्यो मनुष्यप्रभव इत्युच्यते, तद्रक्ष्यामः-भूतानां चतुर्विधा योनिर्भवति—जरा-
रवणडस्वेदोद्धिदः । तासां खलु चतस्रूपामपि योनीनामेकैका योनिरपरिसंख्येय-
भेदा भवति, भूतानामाकृतिविशेषापरिसंख्येयत्वात् । तत्र जरायुजानामरुडजानां च
प्राणिनामेते गर्भकरा भावा यां यां योनिमापद्यन्ते, तस्यां तस्यां योनौ तथातथा-
रूपा भवन्ति; यथा—कनकरजतताम्रत्रपुसीसकान्यासिच्यमानानि तेषु तेषु
मधूच्छिष्ठविग्रहेषु, तानि यदा मनुष्यविग्रहमापद्यन्ते तदा मनुष्यविग्रहेण जायन्ते,
तस्मात् समुदायप्रभवः सन् गर्भो मनुष्यविग्रहेण जायते; मनुष्यश्च मनुष्यप्रभव
उच्यते, तद्योनित्वात् ॥ १६ ॥

Lord Atreya said, "It has already been concluded that the mind is responsible for the union of the Soul with the physical body. A human being is considered to be a causative factor for the production of another human being simply because a foetus is composed of the conglomeration of various factors which produce a human form.

Thus, there are four species of living beings, viz. viviparous, oviparous, *svedaja* (living-beings born of hot misture) and *vdbhijja* (living-beings born by piercing earth). Each

of these four species is of innumerable types. This is because of the innumerability of distinctive features, they possess. The species of the first two categories take their specific forms depending on the contact of the causative factors of the foetus with the wombs of the specific species as gold, silver, copper, tin and lead poured into various designs of bee-wax take respective forms. So when they come in contact with human foetus, they are produced in the human form. That is why the foetus coming out of the conglomeration of various factors is produced in the human form and a human being is considered to be the product of a human being because he belongs to the same species. [16]

The query raised in the preceding paragraph regarding the union of sperms and ovum is answered in this paragraph. The term 'yoni' is taken here in the sense of species. Even if this term is taken to mean the causative factor in general, the beings belonging to the various species are named after the species in which they are born. Thus the term 'yoni' is used also for a group of living beings belonging to a particular species by transference of its meaning from the cause to the effect.

Living beings belonging to a particular species are no doubt similar in their forms. Even so they have their own distinctive features as human beings, elephants, horses etc.,

The causative factors like sperms and ovum take different shapes depending upon the species which they come in contact with. This is like the transformation of bee's wax into different shapes depending upon the pictures engraved on the moulds. So the combination of sperms etc; apart from parents also constitute the causative factors for giving definite shapes to the embryo of different species.

Factors for hereditary defects :

यच्चोक्तं—यदि च मनुष्यो मनुष्यप्रभवः, कस्मान्न जडादिभ्यो जाताः पितृ-सदृशरूपा भवन्तीति; तत्रोच्यते—यस्य यस्य ह्यङ्गावयवस्य बीजे बीजभाग उपतस्तो भवति, तस्य तस्याङ्गावयवस्य विकृतिरूपजायते, नोपजायते चानुपतापात्; तस्मादुभयोपपत्तिरप्यत्र। सर्वस्य चात्मजानीन्द्रियाणि, तेषां भावाभाव-हेतुदैवं; तस्मान्नैकान्ततो जडादिभ्यो जाताः पितृसदृशरूपा भवन्ति ॥ १७ ॥

A question was also raised that if the human being is a product of another human being, why a progeny of a dull human being is not always dull ? The reply is that if the part of the seed (sperm or ovum) which is responsible for the formation of a particular organ is vitiated, this will result in the vitiation of the respective organ. If it is not vitiated, there would

be no vitiation of the respective organs either. So both the possibilities are there (i. e. the respective organs of the progeny may or may not be vitiated depending upon the vitiation or otherwise of the part of the seed responsible for the formation of such organs). As a matter of fact, the sense organs of all living beings are born out of the Soul and their existence or otherwise is determined by the fate i. e. the result of the past action. So the offsprings of the dull parents do not invariably resemble thir parents. [17]

The progeny of a leper will not always be a leper. Such a progeny will be a leper only when the parental seed (sperm and ovum) is also affected by *doṣas* causing leprosy—c.f. (*Sufruta : Nidāna 5 : 28.*) Otherwise, the leprosy of parents cannot be inherited by the progeny. As regards the presence or absence of sense organs, this is determined by the effect of the past action. So the progeny of a blind person will also not necessarily suffer frm blindness. Sometimes it happens that the progeny of a blind person is also a blind; but this is a mere coincidence caused by the past action of the Soul and nothing else.

Knowledge of Soul through sense organs :

न चात्मा सत्स्वन्दियेषु ज्ञः, असत्सु वा भवत्यज्ञः; न ह्यसत्त्वः कदाचि-
दात्मा, सत्त्वविशेषाद्योपलभ्यते ज्ञानविशेष इति ॥ १८ ॥

It is not that the Soul is endowed with consciousness only when He is possessed of sense organs and is devoid of consciousness otherwise. The soul can never be separated from the mind, and so, He is always endowed with consciousness. [18]

By virtue of His constant association with mind, the Soul is always endowed with consciousness. Even if He be devoid of external sense organs, He does not lose His consciousness owing to His inseparability from the mind.

भवन्ति चात्र—

न कर्तुरिन्द्रियाभावात् कार्यक्षानं प्रवर्तते ।
या क्रिया वर्तते भावैः सा विना तैर्न वर्तते ॥ १९ ॥
जानन्नपि मृदोऽभावात् कुम्भकश्च प्रवर्तते ।

Thus it is said :

The Soul is never devoid of consciousness. Of course, He cannot respond to the various actions in the absence of the sense organs. So it is not possible to perform any act without the presence of sense organs as it is not possible for

a potter to work if he does not have the required quantity of mud irrespective of his knowledge regarding the production of a pitcher. [19-20]

The purpose of the above passage is to clarify the limitations of the Soul with regard to His action. He may have inner consciousness alright but as regards His external action, it will be always determined by the sense organs He possesses.

Concentration of mind for proper examination :

श्रूयतां चेदमध्यात्ममात्मज्ञानवलं महत् ॥ २० ॥
 इन्द्रियाणि च संक्षिप्य मनः संक्षिप्य चञ्चलम्।
 प्रविश्याध्यात्ममात्मज्ञः स्वे ज्ञाने पर्यवस्थितः ॥ २१ ॥
 सर्वत्रावहितज्ञानः सर्वभावान् परीक्षते ।

Listen to this spiritual wisdom which is of immence help for the attainment of the knowledge of Soul. One should control his sense organs as well as fickle mind and keep himself established in his ownself after knowing the real nature of the Soul and attaining the height of spiritual wisdom. Thus, with his knowledge undisturbed in all situations, he will be able to examine all aspects (of the science of medicine). [20-21]

Even if some of the sense faculties are not working properly a wise person will be able to understand things by virtue of his spiritual wisdom. This only shows that it is only the Soul who is responsible for all types of consciousness.

गृह्णीष्व चे(वे)दमपरं भरद्वाज विनिर्णयम् ॥ २२ ॥
 निवृत्तेन्द्रियवाकचेष्टः सुसः स्वप्रगतो यदा ।
 विषयान् सुखदुःखे च वेत्ति नान्नोऽप्यतः स्मृतः ॥२३॥
 नात्मज्ञानादते चैकं ज्ञानं किञ्चित् प्रवर्तते ।
 न होको वर्तते भावो वर्तते नाप्यहेतुकः ॥ २४ ॥

Try to understand this point also, O ! Bharadvāja. Even if somebody has lost some of his sense organs—vocal and motor faculties, in a dream he does experience the various objects of sense happiness, miseries etc., He cannot, therefore, be treated as a creature devoid of consciousness. There cannot be any knowledge without any knowledge of the Soul.

Nothing can move alone unless prompted by an efficient cause to do so. [22-24]

In the above passage, a popular example is cited in order to prove the action of the Soul in spite of other disabilities. Even if somebody is devoid of certain sense faculties, he has the experiences of all types in his dream states. This would not have occurred, had the consciousness of the Soul been not there. The omniscience of the Soul is described by Vyāsa—Cf. *Sōñkhyā pravacana bhāṣya* on *Yogaśūtra* 1 : 2. Nothing that is produced can move alone. It is not only produced by a cause. But it requires a causative factor for its further movement as well. A pitcher is the product of clay but at the same time it also requires the help from a conscious being like a potter. This is the case with the sense organs. They are not only caused by the Soul but are also prompted by the Soul to enjoy the respective objects.

तस्माज्ञः प्रकृतिश्वात्मा द्रष्टा कारणमेव च ।
सर्वमेतद्वरद्वाजं निर्णीतं जहि संशयम् ॥ २५ ॥

So get rid of all doubts.

O ! Bharadvāja, I have explained to you everything about the Soul. The Soul is omniscient, primary cause, seer and efficient cause. [25]

तत्र श्लोकौ—

हेतुर्गर्भस्य निवृत्तौ वृद्धौ जन्मनि चैव यः ।
पुनर्वसुमतिर्या च भरद्वाजमतिश्च या ॥ २६ ॥
प्रतिज्ञाप्रतिषेधश्च विशदश्वात्मनिर्णयः ।
गर्भाचक्रान्तिसुद्दिश्य खुड्डीकां तत्प्रकाशितम् ॥ २७ ॥

To sum up :—

In the minor chapter on the formation of embryo as conducive to the understanding of the body, the following topics are discussed :

1. Factors responsible for the formation, growth and delivery of the embryo;
2. the views of Punarvasu and Bharadvāja on this topic;
3. the attack on the conclusions (by Bharadvāja) and
4. a detailed exposition of the nature of the Soul. [26-27]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थाने
खुड्डीकांगर्भाचक्रान्तिशारीरं नाम तृतीयोऽध्यायः ॥ ३ ॥

Thus ends the third minor chapter of *Śārīra* Section the “Formation of Embryo as Conductive to the Understanding of the Body” of Agniveśa’s work as redacted by Caraka. [3]

CHAPTER IV

FORMATION OF EMBRYO

चतुर्थोऽध्यायः

अथातो महर्तीं गर्भावक्रान्ति शारीरं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the major chapter on the formation of the Embryo as conducive to the understanding of the body.

Thus said Lord Atreya. [1-2]

Important topics discussed in this chapter :

यतश्च गर्भः संभवति, यस्मिंश्च गर्भसंज्ञा, यद्विकारश्च गर्भः, यथा चानु-
पूर्व्याऽभिनिर्वत्ते कुक्षी, यश्चास्य वृद्धिहेतुः, यतश्चास्याजन्म भवति, यतश्च
जायमानः कुक्षो विनाशं प्राप्नोति, यतश्च कात्स्वर्णेनाविनश्यन् विकृतिमापद्यते,
तदनुव्याख्यास्यामः ॥ ३ ॥

We shall now discuss the origin of the embryo, its definition, its composition, its successive development in the womb, the cause of its growth, the cause of the non-manifestation of the embryo, the cause of destruction of the embryo in the womb and the cause of its morbidity without complete destruction. [3]

Factors composing the foetus :

मातृतः पितृत आत्मतः सात्मयतो रसतः सत्त्वत इत्येतेभ्यो भावेभ्यः समु-
दितेभ्यो गर्भः संभवति । तस्य ये येऽवयवा यतो यतः संभवतः संभवन्ति तान्
विभज्य मातुजादीनवयवान् पृथक् पृथगुक्तमग्रे ॥ ४ ॥

The embryo is formed out of the combination of parents, the soul, wholesomeness, *rasa* (digestive product of mother's food) and mind. The sources of the respective organs/phenomena like ovum etc., have already been described in greater detail. [4]

The sources of different organs/phenomena that constitute the embryo have already been described in greater details in the previous chapter. So it is not necessary to repeat them in this chapter.

Definition of the term "garbha" :

शुक्रशोणितजीवसंयोगे तु खलु कुक्षिगते गर्भसंज्ञा भवति ॥ ५ ॥

The union of sperm, ovum and the Soul in the womb is designated as embryo. [5]

In the previous chapter, the formation of the embryo has no doubt been described, but no definition of the embryo as such has been given. The above passage represents precise definition of the term embryo. The term 'Kukṣi' stands for the pelvis as a whole. But here it stands for only that part of this pelvis which is known as womb, the site of the formation of embryo.

Six elements composing the foetus :

गर्भस्तु खलवन्तरिक्षवायवश्चितोयभूमिविकारश्चेतनाधिष्ठानभूतः । एवम-
नया युक्त्या पञ्चमहाभूतविकारसमुदायात्मको गर्भश्चेतनाधिष्ठानभूतः । स ह्यस्य
षष्ठो धातुरुक्तः ॥ ६ ॥

The embryo is formed by the five *mahābhūtas*, viz. *ākāśa*, *vāyu*, *agni*, *jala* and *prthvī* and it serves as the receptacle of consciousness. Applying this principle, it represents the combination of five *mahābhūtas* and is also a receptacle of consciousness. In fact, the Soul (i. e. conscious element) constitutes the sixth *dhātu* (element) responsible for the formation of embryo. [6]

As explained in the previous chapter, *ākāśa* being ubiquitous does not play a direct role in the formation of the embryo. But in view of the fact that *ākāśa* is the first and foremost of the five *mahābhūtas* and forms an integral part in the evolution of the embryo it is mentioned first in the list of the five *mahābhūtas*.

Embryo is considered to be the receptacle of consciousness inasmuch as it is the *sine qua non* for the enjoyment of happiness and miseries by the Soul who represents the pure consciousness.

The term 'bhūta' in the clause '*cetanādhiṣṭhanabhūta*' may also convey the sense of similarity. That is to say, the embryo only appears to be the receptacle of the Soul even though it is not so in the real sense of the term. In other words, the Soul being omnipresent and omniscient, does not have any contact anywhere. He only appears to be having contacts with the embryo for the purpose of enjoyment of happiness and miseries.

According to the principle enunciated in the first chapter of this section, the embryo is composed of 24 elements. Applying the principle discussed in the above paragraph, it is composed of six elements. There is no contradiction whatsoever in the two types of description because even if the 24 elements are accepted, the predominance of five *mahābhūtas* in the embryo remains unquestioned—e. f. *Sarira* 2:33.

Process of conception :

यथा चानुपूर्व्याऽभिनिर्वर्तते कुक्षो तां व्याख्यास्यामः—गते पुराणे रजसि नवे चावस्थिते शुद्धस्तातां ख्रियमव्यापन्नयोनिशोणितगर्भाशयासृतुमतीमाच्छमहे । तया सह तथाभूतया यदा पुमानव्यापन्नबीजो मिश्रीभावं गच्छति, तदा तस्य हर्षोदीरितः परः शरीरधात्वात्मा शुक्रभूतोऽज्ञादज्ञात् संभवति । स तथा हर्षभूतेनात्मनोदीरितश्चाधिष्ठितश्च बीजरूपो धातुः पुरुषशरीरादभिनिष्पत्योचितेन पथा गर्भाशयमनुप्रविश्यार्थवेन अभिसंसर्गमेति ॥ ७ ॥

Now we shall explain in the order in which the embryo develops in the womb. A woman not suffering from sterility attains the state of fertility after the period of menstruation is over and the formation of fresh blood (inside the uterus) begins, provided she has had purificatory bath and her genital track, ovum and uterus are in excellent condition. If a man with his sperms unimpaired, cohabits with such a woman, his semen which constitutes the essence of the tissue elements of his body, comes out from each and every organ. The semen consisting of sperms impelled by the orgasm is ejaculated from the body of the man and enters the uterus through the genital track finally uniting with the ovum. [7]

During menstruation, the matter accumulated in the uterus after the previous period of fertility is eliminated and there is the accumulation of fresh matter in the uterus. This is the proper time for conception. A woman during the period of menstruation is considered to be impure unless she has had her purificatory bath. Cohabitation is not allowed unless she has had her purificatory bath. Semen constitutes the essence of *dhātus* (tissue elements), or in other words it is the final product of the *dhātus*.

It is not that semen is produced out of all organs in the body. Semen is, in fact, already present everywhere in the body. It only manifests itself in a state of sexual excitement—c. f. *Cikitsā* 2 : 4 : 46.

The manifestation of semen does not take place, or even if it does, it is without the required force if there is no excitement. It is only in a state of excitement that semen manifests itself with full force so as to reach the uterus.

Union of Atman :

तत्र पूर्वं चेतनाधातुः सत्त्वकरणो गुणग्रहणाय प्रवर्तते; स हि हेतुः कारणं निमित्तमक्षरं कर्ता मन्ता वेदिता बोद्धा द्रष्टा धाता व्रह्मा विश्वकर्मा विश्वरूपः पुरुषः प्रभवोऽव्ययो नित्यो गुणी ग्रहणं प्रधानमव्यक्तं जीवो ज्ञः पुद्गलश्चेतनावान् विभुर्भूतात्मा चेन्द्रियात्मा चान्तरात्मा चेति । स गुणोपादानकाले उत्तरिक्षं पूर्व-

तरमन्येभ्यो गुणेभ्य उपादत्ते, यथा—प्रलयात्यये सिसूक्ष्मभूतान्यक्षरभूत आत्मा सत्त्वोपादानः पूर्वतरमाकाशं सृजति, ततः क्रमेण व्यक्ततरगुणान् धातून् वाय्वादिकांश्चतुरः; तथा देहग्रहणेऽपि प्रवर्तमानः पूर्वतरमाकाशमेवोपादत्ते, ततः क्रमेण व्यक्ततरगुणान् धातून् वाय्वादिकांश्चतुरः। सर्वमपि तु खल्वेतद्गुणोपादानमणुना कालेन भवति ॥ ८ ॥

First of all the concious element i. e. the Soul endowed with mental equipment unites with the *mahabhūtas*. He is known as *Hetu* (Concomitant Cause), *kāraṇa* (Non-constituent cause), *Nimitta* (Efficient cause), *Akṣara* (the Indestructible one), *Kartṛ* (the Agent), *Manṭr* (the Thinker), *Vedita* (the Knower), *Boddha* (the Intelligent one), *Draṣṭr* (the Seer), *Dhātṛ* (the Supporter), *Brahma* (the creater), *Viśvakarman* (the Builder of the universe), *Viśvarūpa* (the Prototype of the universe), *Purusa* (the supreme person), *Prabhāva* (the source of origin), *Avyaya* (the Immutable), *Nitya* (the Eternal), *Gūḍin* (the Receptacle of *mahabhūtas*), *Grahanā* (One having capacity to unite with *mahabhūtas*), *Pradhāna* (the Nature), *Avyakta* (the Unmanifested one), *Jīva* (the Animated one), *Jñā* (the conscious one), *Pudgala* (the Ego), *Cetanāvat* (one having the power of sensation), *Vibhu* (Omnipresent), *Bhūtātman* (Empirical Soul), *Indriyātman* (Organic Soul) and *Antarātman* (Inner Soul).

The Soul, first of all, unites with *ākāśa* before uniting with the other *bhūtas*. This is like the creation of *ākāśa* by God after the period of deluge. As God, the indestructible one, equipped with the mind creates *ākāśa* first, and then the other *bhūtas* whose attributes are more and more manifested successively, so does the Soul, desirous of creating another body, first of all, unites with the *ākāśa*, and then with other four *bhūtas* whose attributes are more and more manifested successively. All this action (association of the Soul with the five *mahabhūtas*) takes place in a very short time. [8]

As a matter of fact, the Soul is not active, but being equipped with the mind, He is stated to have been performing all functions being actually performed by the mind—c.f. *Śāṅkara* 1 : 76.

According to the *Sāṃkhya* system, the Nature (*Prakṛti*) and the Soul (*Purusa*) are the only two entities that survive in the deluge when all the manifestations of Creation revert to their latent states. After the period of deluge is over and the equilibrium of the Nature is disturbed,

the various manifestation beginning with *Mahat* start. The first *mahābhūta* to be created in the process of evolution is *ākāśa*; thereafter come *vāyu* etc., which, comparatively speaking, have grosser forms. Similarly, the Soul, desirous of creating an embryo, first of all, unites with *ākāśa*. His union with other grosser *mahābhūtas* follows. The union of the Soul with all the five *mahābhūtas* is, of course, completed in a very short time.

Manifestations during first month :

स सर्वगुणवान् गर्भत्वमापन्नः प्रथमे मासि संमूचिष्ठतः सर्वधातुकल्पी-
कृतः खेटभूतो भवत्यव्यक्तविग्रहः सदसद्गुताङ्गावयवः ॥ ९ ॥

When accompanied with all the attributes, the Soul takes the form of an embryo. During the first month of gestation, it takes the form of jelly because of the intimate mixture of the five *mahābhūtas* (which get developed in the subsequent months as the tissue elements, viz. *rasa* etc., of the body). During this month, the embryo bears no particular form and the organs of the embryo are both manifested and latent. [9]

During the first month of gestation the organs of the embryo are both manifested and latent. It is from this state of the embryo that various organs of the foetus develop; thus they are manifested. But these organs are not well manifested for differentiation and recognition; hence they are simultaneously described as latent as well as manifested.

Characteristics during second month :

द्वितीये मासि घनः संपद्यते पिण्डः पेश्यर्बुदं वा । तत्र घनः पुरुषः, पेशी
खी, अर्द्धर्बुदं नपुंसकम् ॥ १० ॥

During the second month of gestation, the embryo takes a compact form in the shape of a knot, elongated muscle or tumour (round and elevated). The knot shaped embryo leads to the production of a male foetus, the muscle shaped to a female foetus and the tumour shaped to an eunuch one. [10]

Manifestations during third month :

तृतीये मासि सर्वेन्द्रियाणि सर्वाङ्गावयवाश्च योगपद्येनाभिनिर्वर्तन्ते ॥ ११ ॥

During the third month, all the senses and limbs along with their organs manifest themselves simultaneously. [11]

In *Śārira* 6 : 21, as the first part of the argument, various organs like head and heart are described to get manifested in the beginning. Such views are contradicted here in advance and all organs are stated to manifest simultaneously.

Factors derived from various sources :

तत्रास्य केचिदङ्गावयवा मातृजादीनवयवान् विभज्य पूर्वमुक्ता यथावत् ।
महाभूतविकारप्रविभागेन त्विदानोमस्य तांश्चैवाङ्गावयवान् कांश्चित् पर्याया-
न्तरेणापरांश्चानुव्याख्यास्यामः । मातृजादयोऽप्यस्य महाभूतविकारा एव ।
तत्रास्याकाशात्मकं शब्दः श्रोत्रं लाघवं सौक्ष्म्यं विवेकश्च, वायवात्मकं स्पर्शः
स्पर्शनं रौक्ष्यं प्रेरणं धातुव्यूहनं चेष्टाश्च शारीर्यः, अग्न्यात्मकं रूपं दर्शनं प्रकाशः
पक्षिरौज्यं च, अबात्मकं रसो रसनं शैत्यं मार्दवं स्नेहः क्लेदश्च, पृथिव्यात्मकं
गन्धो ग्राणं गौरवं स्थैर्यं मूर्तिश्चेति ॥ १२ ॥

Some of the limbs and organs of the foetus are already described before under various heads such as those derived from mother etc., (vide *Sarira 3 : 6-13*). Different aspects of some of these limbs and organs, and some more will now be described here in a different way of classification according as they are manifested by the modifications of various *mahabhūtas*. In fact, organs derived from mother etc., are nothing but the modifications of the *mahabhūtas*.

Sound, the sense or audition, lightness, subtlety and distinctiveness are derived from *akāsa*. Touch, the sense of touch, roughness, impulsion, formation and transportation of the *dhatus*, and actions of the body are derived from *vāyu*. Sight, the sense of vision, brightness, digestion and heat production are derived from *agni*. Taste, the sense of gustation, coldness, softness, unctuousness and stickiness are derived from *jala*. Smell, the sense of smell, heaviness, steadiness and hardness are derived from *prthvi*. [12]

In *Sarira 3 : 6-13*, organs of the foetus are described under various heads, viz. those derived from the mother (ovum) etc. These organs as such are not described in the above paragraph; only some aspects of these organs are described. For example, in *Sarira 3 : 6*, the skin and blood are described as derived from the maternal source (ovum). These organs are not directly mentioned here; only the form, unctuousness, softness etc., of the skin are described here as derived from the various *mahabhūtas*. Thus by describing various attributes of skin etc; these organs themselves are considered as enumerated here.

The description of skin etc; as derived from mother etc; (c.f. *Sarira 3 : 6-13*) is given here with a view to indicating that these organs are dependant upon mother etc. Their description here again as derived from various *mahabhūtas* is to impart knowledge regarding the treatment of diseases caused in these organs by the excess or diminution of the

respective *mahābhūtas*. The organ/phenomena derived from a *mahābhūta* gets increased by the administration of the drugs having that particular *mahābhūta* in composition. By the administration of drugs having opposite qualities, that particular organ/phenomena gets reduced.

In *Sūtra* 1 : 59, lightness is ascribed to the *vāta dosa*. Here lightness is ascribed to *ākāśa mahābhūta* because *ākāśa* being excessively subtle is lighter than *vāyu*.

Individual and Universe :

एवमयं लोकसंमितः पुरुषः । यावन्तो हि लोके मूर्तिमन्तो भावविशेषा-स्तावन्तः पुरुषे, यावन्तः पुरुषे तावन्तो लोके इति; बुधास्त्वेचं द्रष्टुमिच्छन्ति ॥१३॥

Thus the individual is an epitom of the universe. All the material and spiritual phenomena of the universe are present in the individual. Similarly all those present in the individual are also contained in the universe. This is how the wise desire to perceive. [13]

Visualization of the identity of the individual with the universe paves the way for salvation; hence this is described here. In paragraph no. 12, the body is described as the modified form of *mahābhūta* hence the description of the identity of the individual and the universe in para 13 relates to *mahābhautic* composition only. The spiritual aspect of this identity is however, described in *Sārira* 5 : 3. There is an indication to this spiritual identity in this paragraph also. In the fifth chapter of this section, the author himself will say that the visualisation of the identity of the individual with the universe is meant for salvation.

एवमस्येन्द्रियाण्यज्ञावयवाश्च यौगपद्येनाभिनिर्वर्तन्ते ऽन्यत्र तेभ्यो भावे-भ्यो येऽस्य जातस्योत्तरकालं जायन्ते; तदथा—दन्ता व्यञ्जनानि व्यक्तीभावस्त-थायुक्तानि चापराणि । एषा प्रकृतिः, विकृतिः पुनररतोऽन्यथा । सन्ति खल्व-स्मिन् गर्भे केचिन्नित्या भावाः, सन्ति चानित्याः केचित् । तस्य एवाङ्गाव-यवाः सन्तिष्ठन्ते, त एव स्त्रीलिङ्गं पुरुषलिङ्गं नपुंसकलिङ्गं वा विभ्रति । तत्र स्त्रीपुरुषयोर्ये वैशेषिका भावाः प्रधानसंश्रया गुणसंश्रयाश्च, तेषां यतो भूयस्त्वं ततोऽन्यतरभावः । तदथा—क्लैव्यं भीरुत्वमवैशारदं मोहोऽनवस्थानमधोगुरु-त्वमसहनं शैथिल्यं मार्दवं गर्भाशयबीजभागस्तथायुक्तानि चापराणि स्त्री-कराणि, अतो विपरीतानि पुरुषकराणि; उभयभागावयवा नपुंसककराणि भवन्ति ॥ १४ ॥

Thus the senses and organs of the foetus are simultaneously manifested except those that are manifested only after birth. For example, teeth, secondary sexual characteristics like beard and breasts, signs of puberty like the production of

semen and ovum and such other traits are developed later. This is the normalcy and anything other than this is abnormal.

In this foetus, there are some characteristics which are permanent and some others are temporary. These permanent characteristics determine the masculine, feminine or neutral character of the foetus. The characteristic features which determine its male or female sex are either of spiritual or material (*bhautika* derived from sperm and ovum) nature. Sex difference is caused by the dominance of one or the other of these factors. For example, (1) weakness (2) timidity, (3) lack of wisdom, (4) ignorance, (5) unsteadiness, (6) hauiness of lower limbs, (7) intolerance, (8) slackness, (9) softness, (10) presence of the uterus and ovary and other characteristic features determine the female sex; opposite traits determine the male sex and in a eunuch both these traits are equally present. [14]

In the normal course, teeth, beard, breasts, semen, ovum etc., get manifested after the birth of the child, other organs including the senses are manifested right in the third month of gestation. Any deviation from this like the appearance of teeth while the foetus is in the womb is the morbid manifestation.

Organs like hands, legs are the permanent manifestations in the foetus and they remain with the individual till the end. But there are other characters like teeth which are not permanently associated with the individual.

Both the permanent and temporary characters determine the sex of the child. The male genital organ and beard characterize a male, the female genital organ and breasts characterize a female and an eunuch is characterized by a simple hole in the place of the genital organ and it may have the secondary sexual characters of both the sexes.

Even though the seeds for secondary sexual characters like breasts and beard are already present in the foetus, still, due to the specific nature of these seeds, the organs are manifested only later on. This is on the analogy of the seed of corns thrown on the ground which sprout only when a congenial atmosphere in the form of proper season etc; is available. Natural manifestations are not conditioned by any factor.

The first five characteristic features of the female enumerated in the text originate from the Soul and the remaining are of material origin. Those belonging to the latter category are caused by the dominance of the maternal factor (ovum) in the conception—C.f. *Śārīra* 2 : 12. The use of neuter gender in the clause 'नपुंसककरणिः' is meant to signify the latent form of the attributes common both to male and female.

Bicardiac state :

तस्य यत्कालमेवेन्द्रियाणि संतिष्ठन्ते, तत्कालमेव चेतसि वेदना निर्बन्धं प्राप्नोति; तस्मात्तदा प्रभृति गर्भः स्पन्दते, प्रार्थयते च जन्मान्तरानुभूतं यत् किञ्चित्, तद्द्वैहृदयमाचक्षते वृद्धाः । मातृजं चास्य हृदयं मातृहृदयेनाभिसंबद्धं भवति रसवाहिनीभिः संवाहिनीभिः; तस्मात्तयोस्ताभिर्मिक्तिः संस्पन्दते । तच्चैव कारणमवेक्षमाणा न द्वैहृदयस्य विमानितं गर्भमिन्छन्ति कर्तुम् । विमानने हास्य दश्यते विनाशो विकृतिवाऽ । समानयोगक्षेमा हि तदा भवति गर्भेण केषु-चिदर्थेषु माता । तस्मात् प्रियहिताभ्यां गर्भिणीं विशेषेणोपचरन्ति कुशलाः॥१५॥

As soon as senses are manifested in the embryo, its mind gets associated with feelings and from that time onwards, there is pulsation in the embryo and the desire for whatever was experienced in the previous life of the individual. This condition according to the wise is known as *dauhyda* or bicardiac state.

The heart of the foetus which is derived from the maternal source is connected with the mother's heart through the channels carrying nutrient material. These channels, connecting the foetus and the mother, carry the desires of the one to the other. It is with this end in view that people do not want to ignore the desires of the foetus as reflected through the wishes of the pregnant mother. If such desires are ignored, the foetus may either be destroyed or get deformed. The proper maintenance and protection of the pregnant mother is as good as the maintenance or protection of the foetus itself. So the wise attends upon a pregnant mother with special care to fulfil her favourite and useful needs. [15]

The consciousness is created in the foetus as soon as the latter is endowed with the sense organs. Then the foetus starts moving so as to enjoy happiness and get rid of miseries. It is at that stage, it starts longing for things of pleasure enjoyed in the previous life. The heart of a pregnant mother together with such desires of the foetus is designated as *dvihrdayya* i.e. the combination of two hearts, viz. the heart of the foetus as well as the heart of the pregnant mother. As a matter of fact the foetal heart itself is a material product. So it gets easily connected with the heart of the pregnant mother through the channels carrying nutrition from the mother to the foetus. The foetal desires are reflected in the heart of the pregnant mother and so also the mother longs for the objects desired by the foetus.

In any case, the desires of a pregnant mother must not be ignored. If ignored, the foetus may either get destroyed or deformed. In case it is the foetal desire that has been ignored this results in the destruction of the foetus through the aggravated *vāta* in the foetal body. If it is the desire of the pregnant mother not connected with the foetal desire, the neglect thereof may result in the deformity of the foetus through the aggravation of *vāta* in the mother herself.

For the reasons stated above, the maintenance and protection of the pregnant mother is as good as the maintenance and protection of the foetus. But it is not always so. For example, the hunger of a pregnant mother does not necessarily affect the foetus and *vice versa*.

A pregnant mother requires special attention and cares. Even otherwise, a woman during the period of fertilization requires special attention—c.f. *Śārīra* 8 : 9

Signs of bicardiac state :

तस्या गर्भापत्तेद्वैदृष्टयस्य च विज्ञानार्थं लिङ्गानि समासेनोपदेश्यामः ।
उपचारसाधनं ह्यस्य ह्वाने, ह्वानं च लिङ्गतः, तस्मादिष्ठो लिङ्गोपदेशः । तदथा—
आर्तवादर्शनमास्यसंस्करणमनन्नाभिलाषश्छर्दिररोचकोऽस्लकामता च विशेषेण
श्रद्धाप्रणयनमुच्चावचेषु भावेषु गुरुगात्रत्वं चशुषोर्गर्लानिः स्तनयोः स्तन्यमोष्टयोः
स्तनमण्डलयोश्च काण्यर्यमत्यर्थं श्वयथुः पादयोरीषष्ठोमराज्युद्दमो योन्याश्चाटा-
लत्वमिति गर्भे पर्यागते रूपाणि भवन्ति ॥ १६ ॥

Now we shall explain in brief the signs and symptoms that are indicative of pregnancy as well as the bi-cardiac condition. The knowledge of signs and symptoms facilitate the management of these conditions. Therefore, it is necessary to explain their signs and symptoms. They are as follows :

1. Stoppage of menstruation;
2. excessive salivation;
3. loss of appetite;
4. vomiting;
5. anorexia;
6. liking for taking sour things;
7. liking for all types of food—both wholesome and unwholesome;
8. heaviness of the body;
9. feeling of heaviness in the eyes;
10. appearance of milk in breasts;

11. appearance of excessive darkness in the lips and the areola of breasts;
12. slight oedema of feet;
13. appearance of small hairs; and
14. dilation of vagina. [16]

There are specific regimens prescribed for pregnant woman, specially during the bi-cardiac state—c. f. Śārira 8 : 32 and Śārira 4 : 17–19. The signs and symptoms described above relate to the state of pregnancy and such they are also applicable to the bicardiac state which occurs during the third month of gestation.

Satisfaction of her desires :

सा यद्यदिच्छेत्तत्तदस्यै दद्यादन्यत्र गर्भोपघातकरेत्यो भावेभ्यः ॥ १७ ॥

The mother should be given whatever she wants during this period except perhaps those that are harmful for the foetus. [17]

Factors injurious to foetus :

गर्भोपघातकरास्त्वमे भावा भवन्ति; तदथाः—सर्वमतिगुरुण्णतीक्ष्णं दारुणश्च चेष्टाः; इमांश्चान्यानुपदिशन्ति वृद्धाः—देवतारक्षोऽनुचरपरिरक्षणार्थं न रक्तानि वासांसि विभृयाश्च मदकराणि मदान्यभ्यवहरेन्न यानमधिरोहेन्न मांस-मशीयात् सर्वोन्द्रियप्रतिकूलांश्च भावान् दूरतः परिवर्जयेत् यच्चान्यदपि किञ्चित् लियो विद्यः ॥ १८ ॥

The following are the factors inflicting injury to the foetus :

1. all things that are very heavy, hot and sharp; and
2. violent actions like sexual intercourse;

Wise men also prescribe the following precautionary measures with a view to avoid any injury to the foetus :

1. With a view to be saved of the gods, *rakṣasas* (devils) and their followers, she should not use red apparel;
2. She should not take intoxicant wines;
3. She should not take meat;
4. She should be far away from things as are unwholesome to the senses; and
5. She should avoid all such things as are advised by (experienced) ladies.] 18]

Experienced ladies advise many prohibitions for pregnant ladies. For example, she should not look inside a well; she should not cross a river

etc. Such observations are based on scriptures. They are described here but too briefly as an elaborate discussion would be too lengthy to be accommodated in a text like this.

Embryonic defects by ignoring her desires :

तीव्रायां तु खलु प्रार्थनायां काममहितमप्यस्यै हितेनोपहितं दद्यात् प्रार्थनाविनयनार्थम् । प्रार्थनासंधारणाद्वि वायुः प्रकृषितोऽन्तःशरीरमनुचरन् गर्भस्यापद्यमानस्य विनाशं वैरूप्यं वा कुर्यात् ॥ १९ ॥

If the longing is very strong, then even things which are harmful can be given by neutralizing their injurious effects through processing or adding wholesomethings. This is necessary with a view to satisfying the desires. By the suppression of the longings, the *vata* gets vitiated, moves inside the body, and destroys or deforms the foetus in the formative stage. [19]

Any denial of the bicardiac desires leads to the aggravation of *vata*. Such a denial can be compared with the other disturbing factors like fear etc. Even by the slightest denial of bicardiac longings, the desires of a pregnant woman is disturbed partly or fully which is to be avoided at all costs.

Developments during fourth month :

चतुर्थे मासि स्थिरत्वमापद्यते गर्भः, तस्मात्तदा गर्भिणी गुरुगात्रत्वमधिकमापद्यते विशेषेण ॥ २० ॥

During the fourth month of gestation, the foetus gets stabilised. Therefore, at that time, pregnant woman specifically gets excessive heaviness in her body. [20]

During this month, the foetus becomes compact and this adds to the weight of the foetus. Because of the increase in the weight of the foetus, the mother feels heaviness in her body.

Manifestations during fifth month :

पञ्चमे मासि गर्भस्य मांसशोणितोपचयो भवत्यधिकमन्येभ्यो मासेभ्यः, तस्मात्तदा गर्भिणी काश्यमापद्यते विशेषेष ॥ २१ ॥

In comparison to other months, there is an excessive increase of flesh and blood of the foetus during the fifth month of gestation. Therefore at that time the pregnant woman grows excessively thinner. [21]

It is in the fifth month of pregnancy that the mother grows exceedingly thin in comparison with her health for the first four months. After the fifth month also she gains flesh etc; slowly. The nutrition of the

mother is utilised for the growth of the child during this month; hence the mother grows thinner.

Developments during sixth month :

षष्ठे मासि गर्भस्य बलवर्णोपचयो भवत्यधिकमन्येभ्यो मासेभ्यः, तस्मात्तदा गर्भिणी वलवर्णहानिमापद्यते विशेषेण ॥ २२ ॥

In comparison with other months, there is excessive increase in the strength and complexion of the foetus during the sixth month of gestation. Therefore, at that time the pregnant woman loses her strength and complexion considerably. [22]

Developments during seventh month :

सप्तमे मासि गर्भः स्वैर्भविराप्यात्यते, तस्मात्तदा गर्भिणी सर्वकारैः क्लान्ततमा भवति ॥ २३ ॥

There is an all round development of the foetus during the seventh month of gestation. Therefore, a pregnant woman becomes exceedingly deficient in all aspects of her health. [23]

During the period prior to the seventh month of gestation, there is, no doubt, some reduction in the physical state of the mother. But in the seventh month all the factors viz. flesh, blood etc., get reduced simultaneously.

Manifestations during eighth month :

अष्टमे मासि गर्भश्च मातृतो गर्भतश्च माता रसहारिणीभिः संवाहिनी-मुरुमुरुहुरोजः परस्परत आददाते गर्भस्यासंपूर्णत्वात् । तस्मात्तदा गर्भिणी मुहुर्मुहुर्मुदा युक्ता भवति मुहुर्मुहुश्च म्लाना, तथा गर्भः; तस्मात्तदा गर्भस्य जन्म व्यापत्तिमद्वत्योजसोऽनवस्थितत्वात् । तं चैवार्थमभिसमीक्ष्याष्टमं मास-मगण्यमित्याचक्षते कुशलाः ॥ २४ ॥

During the eighth month of gestation, the *ojas* formed in its body moves to the body of the mother and *vice versa* through the channels carrying nourishment from the mother to the foetus because of the immaturity of foetus. Therefore, at that time, the pregnant woman often has a wavering feeling of joy and sorrow. Similar is the condition of the foetus. It is because of this unsteadiness of the *ojas* that the delivery of the foetus during this month is shrouded with danger. In view of this, experts advise that even the reckoning of the eighth month of pregnancy should be avoided. [24]

The mother's heart is connected with the foetus through the channels carrying nourishment from the body of the former to that of the latter. The *ojas* moves from the body of the mother to the foetus and *vice versa* through these channels. The immaturity of the receptacle i.e. the body of the foetus is responsible for the unsteadiness of the *ojas*.

In the text it is mentioned that *ojas* of the foetus moves to the body of the mother and that of the mother's body moves to the foetus. The latter part of this statement implies that the *ojas* which has moved to the mother's body from the foetus comes back again to the latter. This does not mean that the *ojas* which originally belongs to the mother's body moves to the foetus. This type of interpretation is not in conformity with the spirit of the discussion, because the body of the mother, unlike that of the foetus, is mature and there is no question of the movement of *ojas* originally contained in a mature body. The author himself has described the immaturity of the foetal body as a factor responsible for the instability of *ojas*. Further, if the *ojas* originally contained in the mother's body moves to the body of the child, then birth of the child at that particular moment should cause the death of the mother. But that is not the fact. In both the cases, whether the *ojas* is in the body of the mother or in the foetus, delivery causes death to the foetus only and not to the mother. Jātūkarṇa has also supported this view that even if the mother's *ojas* moves into the foetus, delivery during this particular moment does not cause the death of the mother because of unforeseen causes. Some of the commentators of the *Susruta* describe this in a different way. According to them even though there is an unsteadiness of *ojas*, delivery during this time does not cause the death of the mother, but only of the child because during this period the child lies in the *nairṛita* (South West) direction.

When the *ojas* of the foetus moves to the body of the mother, then the latter feels joyful; when it goes back to the body of the foetus then the mother feels distressed. The foetus also experiences similar happiness and sorrow by the movement of *ojas* to and from his body respectively.

Expert physicians advise against reckoning the eighth month of gestation because if the pregnant woman comes to know of the danger involved in this month, then her fear will aggravate *vāyu* in her body which in its turn will result in dangerous consequences.

Time of delivery :

तस्मिन्नेकदिवसातिक्रान्ते उपि नवमं मासमुपादाय प्रसवकालमित्याहुरा-
दशमान्मासात् । एतावान् प्रसवकालः, वैकारिकमतः परं कुक्षाववस्थानं
गर्भस्य ॥ २५ ॥

Even the first day after this eighth month i.e. from the first day of the ninth month till the end of the tenth month is known as the period of parturition. Normally delivery takes

place during this period. Retention of the foetus in the pelvis thereafter is abnormal. [25]

The time from the first day of the ninth month till the last day of the tenth month of gestation is considered as the most conducive period for normal delivery. But according to Suśruta, this period may extend to even the eleventh or twelfth months; but that period is likely to be involved with minor difficulties which can also be ignored.

एवमनयाऽनुपूर्वाभिनिर्वर्तते कुक्षौ ॥ २६ ॥

This is the description of the successive manifestations of the foetus in the pelvis. [26]

Factors for growth of foetus :

मात्रादीनां खलु गर्भकरणां भावानां संपदस्तथा वृत्तस्य सौष्ठवान्मा-
तृतश्चौपस्नेहोपस्वेदाभ्यां कालपरिणामाऽ स्वभावसंसिद्धेश्च कुक्षौ वृद्धि
प्राप्नोति ॥ २७ ॥

The following factors help in the growth of the foetus in the pelvis of the mother :

1. excellence of the factors responsible for the production of the foetus, viz. mother (ovum), father (sperm), *satmya* (wholesomeness), *rasa* (digestive product of the mother's food) and *sattva* (mind);
2. adoption of proper regimen by the mother during pregnancy;
3. availability of nourishment and heat through *upasneha* (transudation) and *upasveda* (conduction) respectively;
4. proper time; and
5. instinctive or natural tendencies. [27]

The above passage provides an answer to the question regarding the factors responsible for the growth of the foetus. Among others, heat is also responsible for the growth of the foetus. This is observed in oviparous animals also whose eggs grow by the heat of the mother. Other factors apart, there is also a natural tendency in the embryo to grow through successive stages.

Factors responsible for absence of birth :

**मात्रादीनामेव तु खलु गर्भकरणां भावानां व्यापत्तिनिमित्तमस्याजन्म
भवति ॥ २८ ॥**

Because of the defects in the factors responsible for the production of the foetus, viz. mother (ovum), father (sperm) etc; there is no birth of the child. [28]

Death or delay in delivery of the foetus :

ये ह्यस्य कुश्लौ वृद्धिहेतुसमाख्याता भावास्तेषां विपर्ययादुदरे विनाश-
मापद्यते, अथवाऽप्यचिरजातः स्यात् ॥ २९ ॥

The foetus gets destroyed in the pelvis (of the mother) or there is delay in delivery if factors contrary to the ones described for its growth are present. [29]

When the factors responsible for promoting growth viz. mother (ovum) etc., are excessively defective, then there is destruction of the foetus. In the case of their minor defects, there is only delay in delivery.

Causes of deformity in a female child.

यतस्तु कात्स्न्येनाविनश्यन् विकृतिमापद्यते, तदनुव्याख्यास्यामः—यदा
ख्लिया दोषप्रकोपणोक्तान्यासेवमानाया दोषाः प्रकुपिताः शरीरसुपर्सर्पन्तः शोणि-
तगर्भाशयाबुपपद्यन्ते, न च कात्स्न्येन शोणितगर्भाशयौ दूषयन्ति, तदेयं गर्भं
लभते ख्ली; तदा तस्य गर्भस्य मातृजानामवयवानामन्यतमोऽवयवो विकृतिमा-
पद्यत एकोऽथवाऽनेके, यस्य यस्य हावयवस्य बीजे बीजभागे वा दोषाः प्रकोप-
मापद्यन्ते, तं तमवयवं विकृतिराविश्वाति । यदा ह्यस्याः शोणिते गर्भाशयबीज-
भागः प्रदोषमापद्यते; तदा वन्ध्यां जनयति; यदा पुनरस्याः शोणिते गर्भाशयबी-
जभागावयवः प्रदोषमापद्यते, तदा पूतिप्रजां जनयति; यदा त्वस्याः शोणिते गर्भा-
शयबीजभागावयवः ख्लीकराणां च शरीरबीजभागानामेकदेशः प्रदोषमापद्यते,
तदा रूपाकृतिभूयिष्टामख्लियं वार्ता नाम जनयति, तां ख्लीव्यापदमाचक्षते ॥ ३० ॥

Factors which lead to deformity and not complete destruction are now being described.

If the woman conceived when her ovum and uterus were not completely vitiated but simply afflicted by the circulating *dosas* aggravated because of her indulgence in *dosa* aggravating regimens, one or many of the organs of the foetus derived from the maternal source (ovum), viz. skin, blood etc; get deformed. These vitiated *dosas* may afflict the *bija* (generally meaning a division of the ovum or sperm which is responsible for the production of a particular organ—the nearest term in the parlance of modern genetics is chromosome) or the *bijabhaga* (a part of the *bija*—the nearest term in the parlance of modern genetics is the gene) by which the corresponding organs derived from these *bijas* and *bijabhagas* get deformed.

When the *bijabhāga* (part of the *bija*) in the ovum of the mother which is responsible for the production of uterus is excessively vitiated, then she gives birth to a sterile child. When the *bijabhāgavayava* (a fraction of the part of the *bija*) in the ovum of the mother which is responsible for the production of the uterus is excessively vitiated, then she gives birth to a *pūtiprājā* (who delivers dead foetus—c.f. commentary). When the *bijabhāgavayava* which is responsible for the production of the uterus and also the portions of the *bijabhāgas* which are responsible for the production of organs that characterize a female, viz. breasts, genital organ, hair etc., in the ovum of the mother gets excessively vitiated then she gives birth to a child who is not a complete female but only having the feminine characteristics in abundance—such a type of child is known as *Vartā*.

These deformities are caused by the vitiation of the ovum. [30]

The term ‘*vināśa*’ (lit. meaning destruction) used in the text carries the same implication as the term ‘*vikṛti*’ (lit. meaning deformity). For example, a person of unsocial conduct is commonly called as ‘*vināśta*’ (lit. destroyed).

Dosas get vitiated in two different ways—they may get vitiated directly by resorting to their respective aggravating factors or indirectly by resorting to the factors which mainly aggravate other *dosas* (For example, sour things aggravate *pitta* mainly but secondarily *kapha* is also vitiated by the use of such things). The former type leads to an acute vitiation of *dosas* and it is with a view to indicate this type of acute vitiation that the term दोषप्रकोपरात्यासेवमानायाः has been used in the text with otherwise appears to be redundant.

The term “*garbhāśayabijabhāga*” can be explained in two different ways. It may mean that portion of the *bija* which is responsible for the production of *garbhāśaya* (uterus) or it may mean that portion of the seed which is responsible for the production of both the *garbhāśaya* (uterus) and the *bija* (seed-ovum) in the foetus. Both the uterus and ovum are derived from the maternal source (ovum.)

It is true that (menstruation and) ovulation take place only after the twelfth year of age of the child but the ovum is present in latent form in the body of the foetus from the period of pregnancy itself.

The term *pūtiprājā* implies a woman who delivers only dead foetus. The term ‘*pūti*’ also implies a child having deformed (not well developed) limbs and organs.

The term *vārtā* was used to connote a specific condition at the time when the original text of *Carakasamhitā* was composed.

Causes of deformity in a male child :

एवमेव पुरुषस्य यदा वीजे वीजभागः प्रदोषमापद्यते, तदा बन्ध्यं जनयति; यदा पुनरस्य वीजे वीजभागावयवः प्रदोषमापद्यते, तदा पूतिप्रजं जनयति; यदा त्वस्य वीजे वीजभागावयवः पुरुषकराणां च शरीरवीजभागानामेकदेशः प्रदोषमापद्यते, तदा पुरुषाकृतिभूयिष्ठमपुरुषं तृणपुत्रिकं नाम जनयति; तां पुरुषव्यापदमाचक्षते ॥ ३१ ॥

Similarly, when the part of the *bija* which is responsible for the production of the sperm in the foetus is excessively vitiated, then this gives birth to a sterile child. When the *bijabhāgavayava* (only a fraction of the part of the *bija*) which is responsible for the production of the sperm is excessively vitiated, then this gives birth to a *pūtiprāja* (whose child dies before delivery). When the *bijabhāgavayava* which is responsible for the production of sperm and also portions of the *bijabhāgas* which are responsible for the production of organs that characterize a male, are excessively vitiated, then this gives birth to a child who is not a complete male but only having masculine characteristics in abundance. Such a type of child is known as *trṇaputrika*.

These deformities are caused by the vitiation of the sperm. [31]

Like *vārtā*, the term *trṇaputrika* was used to connote a specific condition at the time when the original text of *Carakasamhitā* was composed. Both *vārtā* and *trṇaputrika* are known to have the desire for sexual intercourse but they are incapable of doing so.

एतेन मातृजानां पितृजानां चावयवानां विकृतिव्याख्यानेन सात्म्यजानां रसजानां सत्त्वजानां चावयवानां विकृतिव्याख्याता भवति ॥ ३२ ॥

Thus the deformities of organs derived from the mother (ovum) and father (sperm) are explained. On the same line the deformities of the organs derived from *sātmya* (wholesomeness), *rasa* (digestive product of the mother's food) and *sattva* (mind) can be explained. [32]

The organs/phenomena derived from *sātmya*, *rasa* and *sattva* are described in *Sārira* 3 : 11-13. Any impairment of these factors brings about deformity or derangement in their respective organs.

Absoluta Soul :

निर्विकारः परस्त्वात्मा सर्वभूतानां निर्विशेषः; सत्त्वशरीरयोस्तु विशेषा-द्विशेषोपलब्धिः ॥ ३३ ॥

The absolute Soul does not undergo any modification. Its presence in different types of creatures does not bear any distinction. It appears to have distinctions only on account of the specific features of the body and mind of different types of creatures. [33]

Deformities caused by the vitiation of factors derived from the mother (ovum) and father (sperm) are described in paras 30-31. Those caused by the impairment of *sātmya*, *rasa* and *sattva* is described to be on the same line in para 32. The seventh factor which is responsible for the growth of the foetus i. e. *Ātman* (Soul) is accounted for in this paragraph.

The term '*Ātman*' also implies the conglomeration of the body, mind and Soul, but in the present context, it is used to specify the Soul only, excluding the body and the mind. With a view to make this clear the author has used the epithet *para* before the term *Ātman*. This *Ātman* is present in all creatures alike. Specific characteristics of the body and the mind are responsible for causing happiness and miseries in living beings and because of these specific features the '*Ātman*' appears to have distinctions in different creatures. But this is not correct. Happiness etc., are not related to the *Paramātman* (Absolute Soul); they are described here to be only the attributes of intellect.

In *Śārira* 3 : 10, certain factors are described to be derived from *Ātman*. These factors are actually not derived from *Paramātman*. But the virtuous or sinful dispositions which are the results of the impairment of the mind because of the predominance of *sattva*, *rajas* or *tamas* are responsible for the manifestation of all these factors (described in *Śārira* 3 : 10).

On minute analysis, the factors described to have been derived from the *Ātman* are actually derived from the mind. Therefore, the deformities/derangements of the factors derived from *Ātman* should be considered to be the same as those of the mind.

Doṣas of the body & mind :

तत्र त्रयः शरीरदोषा वातपित्तश्लेष्माणः, ते शरीरं दूषयन्ति; द्वौ पुनः सत्त्वदोषौ रजस्तमश्च, तौ सत्त्वं दूषयतः। ताभ्यां च सत्त्वशरीराभ्यां दुष्टाभ्यां विहृतिरुपजायते, नोपजायते चाप्रदुष्टाभ्याम् ॥ ३४ ॥

Now, there are three physical *Doṣas* (vitiating elements), viz. *vāta*, *pitta* and *kapha*—they vitiate the body. Again there are two mental *doṣas*, viz. *rajas* and *tamas*—they vitiate the mind. Vitiation of the body and the mind result in the manifestation of diseases·there is no disease without their vitiation.[34]

In the previous para (No. 33), the body and the mind are described to be the cause of the happiness and miseries. The way in which this happens, is described in this paragraph.

Types of body :

तत्र शरीरं योनिविशेषाच्चतुविधमुक्तमये ॥ ३५ ॥

Depending upon the *yoni* (mode of propagation) the body of *animals* is already described to be of four types--c. f. *Sānra* 3 : 16. [35]

Types of mind :

त्रिविधं खलु सत्त्वं-शुद्धं, राजसं, तामसमिति । तत्र शुद्धमदोषमाल्यातं कल्याणांशत्वात्, राजसं सदोषमाल्यातं रोषांशत्वात्, तामसमपि सदोषमाल्यातं मोहांशत्वात् । तेषां तु त्रयाणामपि सत्त्वानामेकैकस्य भेदात्रमपरिसङ्ग्येयं तरतमयोगाच्छरीरायोनिविशेषेभ्यश्चात्योन्यानुविधानत्वाच्च । शरीरं ह्यपि सत्त्वमनुविधीयते, सत्त्वं च शरीरम् । तस्मात् कतिचित्सत्त्वभेदाननूकाभिनिर्देशेन निर्दर्शनार्थमनुव्याख्यास्यामः ॥ ३६ ॥

Mental faculty is of three types—*sattvika*, *rajasa* and *tamasa*. The *sattvika* one is free from defects as it is endowed with auspiciousness. The *rajasa* type is defective because it promotes wrathful disposition. The *tamasa* one is similarly defective because it suffers from ignorance.

Each of the three types of mental faculty is in fact of innumerable variety by permutation and combination of the various factors relating to the body, species and mutual interactions. Sometimes even the body follows the mind and *vica versa*. So we shall now explain some of the varities of mental faculties briefly by way of illustration. [36]

Mental faculty varies according to the degree of purity of individuals. Variation in the age is like the childhood, youth etc; and variation in the species, is human beings animals etc.

The body follows the mind e.g. if the mental faculty is pure then one gets a divine body. Similarly, the mind also follows the body e.g. the mind in the bodies of animals, human beings and the gods are *tamasa*, *rajasa* and *sattvika* respectively.

Different types of sattvika individuals :

तद्यथा—शुचि सत्याभिसन्धं जितात्मानं संविभागिनं ज्ञानविश्वानवचनप्रतिवचनसंपन्नं स्मृतिमन्तं कामक्रोधलोभमानमोहेष्वाहषीमषोपेतं समं सर्वभूतेषु ब्राह्मं विद्यात् ॥ (१) ॥

इज्याध्ययनवतहोमब्रह्मचर्यपरमितिथ्रतमुपशान्तमदमानरागद्वेषमोहलोभ-
रोषं प्रतिभावचनविज्ञानोपधारणशक्तिसंपत्तमार्प विद्यात् ॥ (२) ॥

ऐश्वर्यवन्तमादेयवाक्य यज्वानं शूरमोजस्विनं तेजसोपेतमङ्गिष्ठकर्माणं
दीर्घदर्शिनं धर्मार्थकामाभिरतमैन्द्रं विद्यात् ॥ (३) ॥

लेखास्थवृत्तं प्राप्तकारिणमसप्रहार्यमुत्थानवन्तं स्मृतिमन्तमैश्वर्यलम्भिनं
व्यापगतरागेष्वद्वेषमोहं याम्यं विद्यात् ॥ (४) ॥

शूरं धीरं शुचिमशुचिद्वेषिणं यज्वानमस्मोविहाररतिमङ्गिष्ठकर्माणं
स्थानकोपप्रसादं वारुणं विद्यात् ॥ (५) ॥

स्थानमानोपभोगपरिवारसंपत्तं धर्मार्थकामनित्यं शुचि सुखविहारं व्यक्त-
कोपप्रसादं कौबेरं विद्यात् ॥ (६) ॥

प्रियनृत्यगीतवादित्रोल्लापकश्चोकास्त्वायिकेतिहासपुराणेषु कुशलं गन्ध-
माल्यानुलेपनवसनस्त्रीविहारकामनित्यमनसूयकं गन्धवं विद्यात् ॥ (७) ॥

इत्येवं शुद्धस्य सत्त्वस्य सप्तविधं भेदांशं विद्यात् कल्याणांशत्वात् ; तत्सं-
योगात् ब्राह्ममत्यन्तशुद्धं व्यवस्थेत् ॥ ३७ ॥

The *sattvika* type of mental faculty is auspicious and is of seven categories. Their characteristic features are furnished in the statement given below :

<i>Types of the mental faculty</i>	<i>Characteristic features of the individual</i>
(१)	(२)
1. <i>Brahma</i> (sharing the traits of <i>Brahma</i>)	1. Purity, love for truth, self-contro- lled; 2. Power of discrimination, material and spiritual knowledge; 3. Power of exposition, reply and memory; 4. Freedom from passion, anger, greed, ego, ignorance, jealousy, dejection and intolerance; and 5. Favourable disposition equally for all creatures.
2. <i>Arṣa</i> (sharing the traits of <i>rṣis</i>)	1. Devotion to sacred rituals, study, sacred vows, oblations and celibacy,

(1)

(2)

2. Hospitable disposition,
 3. Freedom from pride, ego, attachment, hatred, ignorance, greed and anger;
 4. Intellectual excellence and eloquence;
- and
5. Power of understanding and retention.

3. *Aindra*

(sharing the traits
of *Indra*)

1. Lord-ship and authoritative speech!
2. Performance of sacred rituals;
3. Bravery, strength and splendour;
4. Freedom from mean acts;
5. Far sightedness; and
6. Devotion to virtuous acts, earning of wealth and proper satisfaction of desires;

4. *Tamya*

(sharing the traits
of *Tama*)

1. Observance of the propriety of actions;
2. Initiation of actions in time;
3. Non-violability;
4. Readiness for initiating action;
5. Memory and lordship;
6. Freedom from attachment, envy, hatred and ignorance.

5. *Varuṇa*

(sharing the traits
of *Varuṇa*)

1. Bravery, patience, purity and dislike for impurity;
2. Observance of religious rites;
3. Fondness for aquatic sports;
4. Aversion for mean-acts; and
5. Exhibition of anger and pleasure in proper place.

(1)

(2)

6. *Kauvera*

- (sharing the traits of *Kuvera*)
1. Possession of station, honour, luxuries and attendants;
 2. Constant liking for virtuous acts, wealth and satisfaction of desires,
 3. Purity; and
 4. Liking for pleasures of recreation;

7. *Gandharva*

- (sharing the traits of *Gandharva*)
1. Fondness for dancing, singing, music and praise;
 2. Expertness in poetry, stories, historical narrations and epics;
 3. Constant fondness for scents, garlands, unguents apparel, association of women and passion.

Of the seven types of *sattvika* mental faculties described above, the one likened to *Brahma* is the purest. [37]

Different types of rajasa individuals :

शूरं चण्डमसूयकमैश्वर्यवन्तमौपथिकं रौद्रमनुबोशमात्मपूजकमासुरं
विद्यात् ॥ (१) ॥

अमर्षिणमनुबन्धकोपं छिद्रप्रहारिणं क्रूरमाहारातिमात्ररुचिमामिषग्रियतमं
स्वप्रायासबहुलमीर्ष्ये राक्षसं विद्यात् ॥ (२) ॥

महाशनं स्त्रैणं स्त्रीरहस्काममशुर्चि शुचिदेषिणं भीरुं भीषयितारं विकृत-
विहाराहारशीलं पैशाचं विद्यात् ॥ (३) ॥

कुद्रशूरमकुद्रभीरुं तीक्ष्णमायासबहुलं संत्रस्तगोचरमाहारविहारपरं
सार्पं विद्यात् ॥ (४) ॥

आहारकाममतिदुःखशीलाचारोपचारमसूयकमसंविभागिनमतिलोलुपम-
कर्मशीलं प्रैतं विद्यात् ॥ (५) ॥

अनुषक्तकाममजस्यमाहारविहारपरमनवस्थितमर्षणमसंचयं शाकुनं
विद्यात् ॥ (६) ॥

इत्येवं खलु राजसस्य सत्त्वस्य षड्विधं भेदांशं विद्यात्, रोषांशत्वात् ॥ ३८ ॥

The *rajasika* type of mental faculty represents wrathful disposition and is of six types. Their characteristic features are furnished in the statement given below :

Type of mental faculty (1)	Characteristic features of the individual (2)
1. <i>Āsura</i> (sharing the traits of <i>Āsura</i>)	1. Bravery, cruelty, envy, lordship, movement in disguise, terrifying appearance and ruthlessness and 2. Indulgence in self-praise.
2. <i>Rākṣasa</i> (sharing the traits of <i>Rākṣasa</i>)	1. Intolerance, constant anger, violence at weak points, cruelty, gluttonous habit and fondness for non-vegetarian food; 2. Excessive sleep and indolence; and 3. Envious disposition.
3. <i>Paiśāca</i> (sharing the traits of <i>Paiśāca</i>)	1. Gluttonous habit; 2. Fondess for women; 3. Liking for staying with women in lonely place; 4. Unclean habits, disliking for cleanliness; 5. Cowardice and terrifying disposition; and 6. Resorting to abnormal diet and regimens.
4. <i>Sarpa</i> (sharing the traits of <i>Sarpa</i> or Snake)	1. Bravery when in wrathful disposition and cowardice when not in wrathful disposition; 2. Sharp reaction; 3. Excessive indolence; and 4. Walking, taking food and resorting to other regimens with a fearful disposition;
5. <i>Praita</i> (sharing the traits of a <i>Preta</i>)	1. Excessive desire for food; 2. Excessively painful disposition in character and past times; 3. Enviousness; and 4. Actions without discrimination, excessive greediness and inaction.
6. <i>Śakuna</i> (sharing the traits of a <i>Śakuni</i> or bird)	1. Attachment with passion, excessive food and regimen, unsteadiness, ruthlessness and unacquisitiveness. [38]

Different types of tamasa individuals :

निराकरिष्णुमेघसं जुगुप्तिताचाराहारं मैथुनपरं स्वप्नशीलं पाशवं
विद्यात् ॥ (१) ॥

भीरुमबुधमाहारलुभ्यमनवस्थितमनुषक्तकामकोदं सरणशीलं तोयकामं
मात्स्यं विद्यात् ॥ (२) ॥

अलसं केवलमभिनिविष्टमाहारे सर्वबुद्ध्यज्ञहीनं वानस्पत्यं विद्यात् ॥ (३) ॥
इत्येवं तामसस्य सत्त्वस्य त्रिविधं भेदांशं विद्यन्मोहांशत्वात् ॥ ३९ ॥

The *tamasika* type of mental faculty represents ignorant disposition and is of three types. Their characteristic features are furnished in the statement given below :

<i>Type of mental faculty</i>	<i>Characteristic feature of the individual</i>
(1)	(2)
1. <i>Pāśava</i> (sharing the traits of animal)	1. Forbidding disposition; 2. Lack of intelligence; 3. Hateful conduct and food habit; 4. Excessive sexual indulgence and sleep.
2. <i>Matsya</i> (sharing the traits of fish)	1. Cowardice, lack of intelligence, greediness for food, unsteadiness, constant passionate and wrathful disposition; and 2. Fondness for constant movement and desire for water.
3. <i>Vānapratya</i> (sharing the traits of vegetable life)	Indolence, indulgence in food, and deficiency of all the intellectual faculties. [39]

Innumerability of the types of mental faculties :

इत्यपरिसंख्येयभेदानां त्रयाणामपि सत्त्वानां भेदैकदेशो व्याख्यातः; शुद्ध-
स्य सत्त्वस्य सप्तविधो ब्रह्मर्षिशक्यमवरुणकुबेरगन्धर्दसत्त्वानुकारेण, राजसस्य
षड्विधो दैत्यपिशाचराक्षसर्पप्रेतशकुनिसत्त्वानुकारेण, तामसस्य त्रिविधः
पशुमत्स्यवनस्पतिसत्त्वानुकारेण, कथं च यथासत्त्वमुपचारः स्यादिति ॥ ४० ॥

The three types of mental faculties have innumerable varieties. The *sattvika* type of mental faculty is of seven types depending upon the dispositions of *Brahma*, *Rsi*, *Indra*, *Yama*, *Varuṇa*, *Kubera* and *Gandharva*. The *rajasa* type of mental

faculty is of six types depending upon the dispositions of *Asura*, *Rakṣasa*, *Piśaca*, *Sarpa*, *Preta* and *Śakuni*. The *tāmasa* type of mental faculty is of three types depending upon the dispositions of *paśu* (animal), *matsya* (fish) and *vanaspatti* (vegetable life).

All these descriptions are made with a view to indicate the general mode of treatment that should be provided for these types of persons. [40]

The varieties of mental faculties described above on the analogy of the gods and other creatures are those that are commonly found in human beings. There are some other types of mental faculties which can be likened to those of *Viṣṇu*, *Śaṅkara*, *Vyāghra* (tiger) etc.,

केवलश्चायमुद्देशो यथोद्देशमभिनिर्दिष्टो भवति गर्भवक्तान्तिसंप्रयुक्तः; तस्य चर्थस्य विज्ञाने सामर्थ्यं गर्भकरणां च भावानामनुसमाधिः; विद्यातश्च विद्यातकरणां भावानामिति ॥ ४१ ॥

The description above is fully in keeping with the purpose with which the chapter was initiated i.e. to provide knowledge regarding the formation of embryo. By obtaining this knowledge one can help resort to the factors which are responsible for the proper growth of the foetus and avoid such factors which come in the way of its proper development.

तत्र श्लोकाः—

निमित्तमात्मा प्रकृतिर्वृद्धिः कुक्षौ क्रमेण च ।
वृद्धिहेतुश्च गर्भस्य पञ्चार्थाः शुभसंज्ञिताः ॥ ४२ ॥
अजन्मनि च यो हेतुर्विनाशो विकृतावपि ।
इमांखीनशुभान् भावानाहुर्गर्भविद्यातकान् ॥ ४३ ॥
शुभाशुभसमाख्यातानष्टौ भावानिमान् भिषक् ।
सर्वथा वेद यः सर्वान् स रात्रः कर्तुमर्हति ॥ ४४ ॥
अवास्युपायान् गर्भस्य स एवं शातुमर्हति ।
ये च गर्भविद्यातोक्ता भावास्तांश्चाप्युदारधीः ॥ ४५ ॥

To sum up :

The following topics are discussed in this chapter :

1. The five auspicious factors, viz. (a) Instrumental cause (b) Soul, (c) material cause, (d) gradual development of the foetus in the womb and (e) factors responsible for the growth of the foetus in the womb.

2. The five inauspicious factors which are injurious to the foetus, viz. (a) factors which are responsible for the prevention of conception and (b) destruction of or (c) deformity in the foetus.

He who knows all aspects of all these eight factors which are auspicious and inauspicious for the foetus is fit to be a royal physician.

An intelligent physician should know those factors which help in the formation and growth of the foetus and also those which are responsible for the destruction of the foetus. [42-45]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थाने महतोगर्भावकान्तिशारीरं
नाम चतुर्थोऽध्यायः ॥ ४ ॥

Thus ends the fourth major chapter of the Śārira section of "Formation of the Embryo" as conducive to the understanding of the body of Agniveśa's work as redacted by Caraka. [4]

CHAPTER V

INDIVIDUAL AND UNIVERSE

पञ्चमोऽध्यायः

अथातः पुरुषविचयं शारीरं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

Now we shall expound the chapter dealing with “the Individual as an Epitome of the Universe” as conducive to the understanding of the body.

Thus said Lord Ātreya. [1-2]

In the previous chapter, it has been stated that “all the physical and spiritual phenomena of the universe are present in the individual”—c.f. Sārira 4 ; 13. The statement was however not explained in detail. The present chapter represents an elaborate exposition of this statement.

Individual—an epitome of universe :

‘पुरुषोऽयं लोकसंमितिः’ इत्युवाच भगवान् पुनर्वसुरात्रेयः । यावन्तो हि लोके (मूर्तिमन्तो) भावविशेषास्तावन्तः पुरुषे, यावन्तः पुरुषे तावन्तो लोके; इत्येवंवार्दिनं भगवन्तमात्रेयमश्विवेश उवाच—नैतावता वाक्येनोक्तं वाक्यार्थम्-वगाहामहे, भगवता बुद्ध्या भूयस्तरमतोऽनुव्याख्यायमानं शुश्रूषामह इति ॥३॥

तमुवाच भगवानात्रेयः—अपरिसंख्येया लोकावयविशेषाः, पुरुषावयव-विशेषा अन्यपरिसंख्येयाः, तेषां यथास्थूलं कतिचिद्ग्रावान् सामान्यमभिप्रेत्योदाहरिष्यामः, तानेकमना निवोध सम्यगुपचण्ठ्यमानानश्विवेश । । पद्धधातवः समुदिताः ‘पुरुष’ इति शब्दं लभन्ते; तद्यथा—पृथिव्यापस्तेजो वायुराकाशं ब्रह्म चाव्यक्तमिति, एत पव च पद्धधातवः समुदिताः ‘पुरुष’ इति शब्दं लभन्ते॥४॥

An individual is an epitome of the universe as all the material and spiritual phenomena of the universe are present in the individual and all those present in the individual are also contained in the universe.” Thus said Punarvasu Ātreya. Then Agniveśa enquired, “We cannot grasp the idea contained in this aphoristic statement. We would like to hear a more detailed exposition from your enlightened self.” Lord Ātreya replied, “Innumerable are the specific parts of the universe and so are innumerable the specific parts of an individual. I will now explain to you some of the gross phenomena common (to the universe as well as the individual).

Listen to me attentively Agniveśa. *Puruṣa* is nothing but the combination of the six *dhatus*, viz. *pr̥thvi*, *jala*, *tejas*, *vāyu*, *akāśa* and *Brahman* the manifested one. [3-4]

The specific phenomena of the universe such as trees, grass, animals etc; and of an individual such as ligament, tendon, artery etc; are all innumerable. So it is difficult to enumerate all of them. So only a few gross phenomena are described here by a way of illustrating common features of the universe and man.

Identity of factors in individual with those of universe :

तस्य पुरुषस्य पृथिवी मूर्तिः, आपः क्लेदः, तेजोऽभिसन्तापः, वायुः प्राणः, विषयत् सुविराणि, ब्रह्म अन्तरात्मा । यथा खलु ब्राह्मी विभूतिलोके तथा पुरुषे-उप्यान्तरात्मिकी विभूतिः, ब्रह्मणो विभूतिलोके प्रजापतिरन्तरात्मनो विभूतिः पुरुषे सत्त्वं, यस्त्वन्द्रो लोके स पुरुषेऽहङ्कारः, आदित्यस्त्वादानं, रुद्रो रोषः, सोमः प्रसादः, वसवः सुखम्, अश्विनौ कान्तिः, मरुदुत्साहः, विश्वेदेवाः सर्वे-न्द्रियाणि सर्वेन्द्रियार्थाश्च, तमो मोहः, ज्योतिर्क्षानं, यथा लोकस्य सर्गादिस्तथा पुरुषस्य गर्भाधानं, यथा कृतयुग्मेव बाल्यं, यथा त्रेता तथा यौवनं, यथा द्वापर-स्तथा स्थाविर्यं, यथा कलिरेवमातुर्यं, यथा युगान्तस्तथा मरणमिति । एवमेतेनानुमानेनानुकानामपि लोकपुरुषयोरवयवविशेषाणामग्निवेश ! सामान्यं विद्य-द्विति ॥ ५ ॥

Pr̥thvi constitutes the form of man, *jala*, moisture; *tejas*, heat; *vāyu*, *elan vital*; *akāśa*, all the porous parts; and *Brahman* the Internal Soul. Identity of the various universal phenomena as present in the individual is given below :

<i>Universal phenomena</i>	<i>Corresponding phenomena in man</i>
(1)	(2)
1, 2, Potentiality of the <i>Brahman</i> symbolised by Dakṣa Prajāpati.	1, 2, Potentiality of the Internal Soul symbolised by the mind.
3. Indra	3. <i>Ahamkara</i> (ego)
4. <i>Aditya</i>	4. Accumularion.
5. <i>Rudra</i>	5. anger.
6. <i>Soma</i> (Moon)	6. pleasure.
7. <i>Vasus</i>	7. happiness.
8. <i>The Aśvins</i>	8. Complexion.
9. <i>Marut</i>	9. enthusiasm.
10. <i>Viśvedeva</i>	10. all the senses and objects of senses.

(1)	(2)
11. <i>Tamas</i> (darkness)	11. ignorance.
12. <i>Jyoti</i> (light)	12. knowledge.
13. beginning of creation	13. impregnation.
14. <i>Kṛta</i> age	14. childhood.
15. <i>Treta</i> age	15. Youth.
16. <i>Dvāpara</i> age	16. middle age.
17. <i>Kali</i> age	17. old age.
18. Deluge	18. death.

The above description is given only by way of illustration. There are many other phenomena common to the universe and man which can be understood by inference, O !, Agniveśa. [5]

The identity of the mind with Prajāpati is explained in the scriptures. There are several other phenomena which are not explained here even though they are common both to the universe and man. They can be understood by inference. For example, Bṛhaspati in the universe is symbolised by the mind in man, *Gandharva* by *Kāma* (passion) and so on.

Utility of the knowledge of the Individual as an epitome of Universe :

एवं वादिनं भगवन्तमात्रेयमग्निवेश उवाच—एवमेतत् सर्वमनपवादं यथोक्तं भगवता लोकपुरुषयोः सामान्यम् । किञ्चस्य सामान्योपदेशस्य प्रयोजनमिति ॥६॥

भगवानुवाच—शृणु ग्निवेश ! सर्वलोकमात्मन्यात्मानं च सर्वलोके सम-
मनुपश्यतः सत्या बुद्धिः समुत्पद्यते । सर्वलोकं ह्यात्मनि पश्यतो भवत्यात्मैव सुखदुःखयोः कर्ता नान्य इति । कर्मात्मकत्वाच्च हेत्वादिभिर्युक्तः सर्वलोकोऽहमिति विदित्वा ज्ञानं पूर्वमुत्थाप्यते उपचर्गायेति । तत्र संयोगापेक्षी लोकशब्दः । षड-
धातुसमुदायो हि सामान्यतः सर्वलोकः ॥ ७ ॥

Agniveśa again asked Lord Ātreya, "All that you have said about the identity of phenomena present in the universe and man is true without any exception. But then how is this statement relevant in the context of medicine ?".

Lord Ātreya replied, "Listen to me O ! Agniveśa. One who sees equally the entire universe in his own self, and his own self in the entire universe is in possession of true knowledge. Such a person experiencing the entire universe in his own self believes that none but his own self is responsible for happiness and miseries. The Individual self being subordinate to his own action indulges in various activities only when

impelled by *hetu* (cause) etc. As soon as he realises his identity with the entire universe, he is in possession of true knowledge which stands him in good stead in getting salvation."

The term "loka" implies here a combination of several factors. For, a congregation of six *dhātus* constitutes the entire universe consisting of all creatures. [6-7]

Is the statement relating to the identity of the universe and man relevant in the context of medicine ? Realization of the identical nature of the universe and the man brings about real knowledge of things as a person equipped with such a knowledge considers himself as responsible for every external event and thus gets rid of the bondage of happiness (which is also tinged with miseries) as well as miseries. By virtue of this realization, he is absolutely free from attachment and hatred.

The transmigration of the Soul and the enjoyment of happiness and miseries are always guided by his own past actions. Once he realises his own actions as responsible for every thing happening to him, he avoids attaching himself to any drastic actions. Thus in the absence of any further causative factor in the form of new action, he is not susceptible to the fruits of such actions. This leads to his salvation which represents absolute freedom from the fruits of action.

Miseries and happiness of the Individual :

तस्य हेतुः उत्पत्तिः, वृद्धिः, उपस्थितिः, वियोगश्च । तत्र हेतुरुत्पत्तिकारणं, उत्पत्तिर्जन्म, वृद्धिराप्यायनम्, उपस्थितिः दुःखागमः, षडधातुविभागो वियोगः सजीवापगमः स प्राणिनिरोधः स भङ्गः स लोकस्वभावः । तस्य मूलं सर्वोपस्थितानां च प्रवृत्तिः, निवृत्तिरुपरमः । प्रवृत्तिर्दुःखं, निवृत्तिः सुखमिति यज्ञानमुत्पद्यते तत् सत्यम् । तस्य हेतुः सर्वलोकसामान्यज्ञानम् । एतत्प्रयोजनं सामान्योपदेशस्येति ॥ ८ ॥

An individual has a *hetu* (cause), *utpatti* (birth), *vṛddhi* (growth), *upaplava* (decay) and *viyoga* (dissolution). *Hetu* is the cause of manifestation, *utpatti* is birth, *vṛddhi* is growth, *upaplava* is onslaught of miseries and *viyoga* is the cessation of the *elan vital* or dissolution or attainment of the natural state. His attachment to the various actions constitutes a causative factor of all his miseries and detachment of cessation of all miseries. Realisation of the fact that attachment leads to miseries and detachment to happiness is the real knowledge. This knowledge can be achieved only by virtue of the realisation of the identity of the universe and man. This is the

object of instructions relating to the identity of the universe and man. [8]

Cause of attachment and method of detachment :

अथाग्निवेश उवाच—किमूला भगवन् ! प्रवृत्तिः, निवृत्तौ च क उपाय
इति ॥ ९ ॥

भगवानुवाच—मोहेच्छाद्वेषकर्ममूला प्रवृत्तिः । तज्जा ह्यहङ्कारसङ्गसंशया-
भिसंस्पवाभ्यवपातविप्रत्ययाविशेषानुपायास्तरुणमिव दुममतिविपुलशास्त्रस्तर-
द्वाऽभिभूय पुरुषमवतत्यैवोच्चिष्ठन्ते; यैरभिभूतो न सत्तामतिवर्तते । तत्रैवंज्ञाति-
रूपविच्छबुद्धिशीलविद्याभिजनवयोवीर्यप्रभावसंपन्नोऽहमित्यहङ्कारः, यन्मनो-
वाक्यायकर्म नापवर्गाय स सङ्गः, कर्मफलमोक्षपुरुषप्रेत्यभावादयः सन्ति वा नेति
संशयः, सर्वावस्थास्वनन्योऽहमहं संष्टा स्वभावसंसिद्धोऽहमहं शरीरेन्द्रियबुद्धि-
स्मृतिविशेषराशिरिति ग्रहणमभिसंभवः, मम मातृपितृभ्रातृदारापत्यवन्युमित्र-
भृत्यगणो गणस्य चाहमित्यभ्यवपातः, कार्याकार्यहिताहितशुभेषु विपरीता-
भिनिवेशो विप्रत्ययः, ज्ञानयोः प्रकृतिविकारयोः प्रवृत्तिनिवृत्योश्च सामान्यदर्शन-
मविशेषः, प्रोक्षणानशनाग्निहोत्रिष्ववणाभ्युक्षणावाहनयाजनयजनयाचनसलिल-
हुताशनप्रवेशादयः समारम्भाः प्रोच्यन्ते ह्यनुपायाः । एवमयमधीधृतिस्मृतिरह-
ङ्काराभिनिविष्टः सक्तः ससंशयोऽभिसंसुतबुद्धिरभ्यवपितोऽन्यथाद्विष्टरविशेष-
ग्राही विमार्गगतिर्निवासवृक्षः सत्त्वशरीरदेषमूलानां सर्वदुःखानां भवति । एव-
महङ्कारादिभिर्दोषैर्भ्राम्यमाणो नातिवर्तते प्रवृत्तिः, सा च मूलमघस्य ॥ १० ॥

Thereafter Agniveśa asked, "What is cause of attachment and what are the factors responsible for detachment?" Lord Ātreya said, "Attachment is caused by ignorance, desire, hatred and purposeful action. *Ahamkara*, *sāṅga*, *samsaya*, *abhisamplava*, *abhyavapata* *vipratyaya*, *aviseṣa* and *anupdya* arising out of attachment overcome and engulf and individual as trees with very long branches overcome and engulf a young tree. A person overcome by these factors does not transcend the worldly habits.

Ahamkara represents an egoistic feeling, such as "I am endowed with the best, descent, beauty, wealth, character, intelligence, conduct, learning, locality, age, poteney and influence."

Sāṅga represents that mental, vocal or bodily action which is not conducive to the attainment of salvation.

Samsaya stands for doubt regarding the existence of the result of the past action, salvation, soul, life after death etc.

Abhisamplava stands for vanity, such as "I am second to none in any situation; I am the creator; I am an accomplished person by nature; I am in the excellent state of health, sense organs, intelligence and memory.

Abhyavapata stands for selfish disposition, such as "The mother, father, brother, wife, progeny, keen, friend and servants belong to me and I belong to them".

When a person considers an desirable act as undesirable, a beneficial thing as harmful and an auspicious one as inauspicious—and *vice versa* such a feeling is known as *vibrat-yaya*. Lack of distinction between a conscious and an unconscious element, Nature and its modifications, attachment and detachment is known as *aviseṣa*.

Action like *prokṣāṇa* (consecration), *anaśana* (fasting), *agnihotra* (oblation to the fire), *trisevana* (the three *Soma* libations or the three daily ablutions), *abhyuksana* (wetting), *avahana* (invocation), *yajana* (pristhood), *yājana* (performance of rituals), *yacana* (begging) and entering into water and fire are known as *anupāya*.

So a person devoid of intellect, patience and memory influenced by egoism, having attachment with doubts, full of vanity and selfishness with a wrongful insight devoid of power of distinction, going astray is an abode of all miseries which are at the root of the *doṣas* relating to the mind and body. So moving in the state of confusion caused by the turmoil of the *doṣas* like *ahāmkāra*, he cannot overcome attachment which is the root cause of all evils. [9-10]

It is only when one identifies himself with his body composed of six *dhātus*, he suffers from *ahāmkāra* (egoism), vanity, selfishness etc. The knowledge relating to the immutability of God in all situations, on the other hand, constitutes knowledge in true sense of the term. The term *anupāya* stands for the devices which though conducive to the attainment of various worldly objects are not useful for the attainment of salvation.

An individual who has fallen a victim to the factors enumerated in the above para is the abode of all miseries, as a tree serves as the abode of all types of birds.

Salvation and ways and means of attaining it :

निवृत्तिरपवर्गः, तत् परं प्रशान्तं तच्चदक्षरं तद्द्वास स मोक्षः ॥ ११ ॥

तत्र मुमुक्षुणामुदयनानि व्याख्यास्यामः । तत्र लोकदोषदर्शिनो मुमुक्षोरादित
एवाचार्याभिगमनं, तस्योपदेशानुष्टानम्, अनेरोपचर्या, धर्मशास्त्रानुगमनं,
तदर्थाविबोधः, तेनावृष्टम्भः, तत्र यथोक्ताः क्रियाः, सतामुपासनम्, असतां परि-
वर्जनम्, असङ्गतिर्दुर्जनेन, सत्यं सर्वभूतहितमपर्षमनतिकाले परीक्ष्य चर्चनं,
सर्वप्राणिषु चात्मनीवावेक्षा, सर्वासामस्मरणमसङ्कल्पनमप्रार्थनमनभिभाषणं च
खोणां, सर्वपरिग्रहत्यागः, कौपीनं प्रच्छादनार्थं, धातुरागनिवसनं, कन्थासीवन-
हेतोः सूचीपिप्पलकं, शौचाधानतोर्जलकुण्डिका, दण्डधारणं, भैक्षचर्यार्थं पात्रं,
प्राणधारणार्थमेककालमग्राम्यो यथोपपन्नोऽभ्यवहारः, अमापनयनार्थं शीर्णशुष्क-
पर्णतृणास्तरणोपधानं, ध्यानहेतोः कायनिवन्धनं, वनेष्वनिकेतवासः, तन्द्रानिन्द्रा-
लस्यादिकर्मवर्जनं, इन्द्रियार्थेष्वनुरागोपतापनिग्रहः, सुस्पस्थितगतप्रेक्षिताहारवि-
हारप्रत्यङ्गचेष्टादिकेष्वारम्भेषु स्मृतिपूर्विका प्रवृत्तिः, सत्कारस्तुतिगहार्विमानक्ष-
मत्वं, क्षुत्पिपासायासश्रमशीतोष्णवातवर्षासुखदुःखसंस्पर्शसहत्वं, शोकदैन्यमा-
नोद्वेगमवलोभरागेष्वाभ्यक्रोधादिभिरसंचलनम्, अहङ्कारादिष्वपसर्गसंज्ञा, लोक-
पुरुषयोः सर्गादिसामान्यावेक्षणं, कार्यकालात्ययमयं, योगारम्भे सततमनिवेदः,
सत्त्वोत्साहः, अपवर्गाय धीर्घतिस्मृतिबलाधानं, नियमनभिन्द्रियाणां चेतसि,
चेतस आत्मनि, आत्मनश्च; धातुभेदेन शरीरावयवसंख्यानमभीक्षणं, सर्वं कारण-
वद्वःखमस्वमनित्यमित्यभ्युपगमः, सर्वप्रवृत्तिष्वघसंज्ञा, सर्वसंन्यासे सुखमित्य-
भिनिवेशः; एष मार्गोऽपवर्गाय, अतोऽन्यथा वध्यते; इत्युदयनानि व्याख्या-
तानि ॥ १२ ॥

Detachment is salvation. It is *Para* (Absolute). It is *Praśanta* (Serene). It is *Akṣara* (Immutable). It is *Brahman*. It is *Mokṣa* (Emancipation).

We shall now explain the ways and means of getting salvation. From the very beginning the following constitute the conduct and behaviour of a man who has realised the defects of the world and who is desirous of getting salvation :

1. Visit to the preceptor i. e. the one imparting instruction on salvation;
2. to carry out his instructions;
3. exclusive service to the fire;
4. to follow the prescriptions of religious scriptures;
5. to understand the meaning of such scriptures;
6. to have patience as prescribed in scriptures;
7. to perform acts as prescribed therein;
8. devotion to the noble;

9. to shun the company of the wicked;
10. dissociation with the wicked;
11. to make statement which are true, useful for all creatures and not harsh; such statements should be made after proper examination at appropriate time;
12. to look at all creatures as if they represent himself;
13. avoidance of all contacts including remembering, thinking, requesting and talking with women;
14. avoidance of all acquisitions;
15. wearing of *kaupina* (loin-cloth);
16. wearing of saffron coloured dress;
17. having a needle case for the sewing of robe;
18. having a water pot for maintaining cleanliness;
19. having a sacred *danda* (stick);
20. having sacred begging bowel;
21. taking prescribed food only once a day just to preserve his life;
22. having a bed consisting of dry leaves, grass etc. just for rest;
23. use of *yogapatta* (a wooden resting plank) for meditation;
24. living in the woods without having any home;
25. avoidance of drowsiness, sleep, laziness etc;
26. avoidance of attachment and hatred towards the objects of sense organs;
27. initiating actions like sleeping, staying, going, seeing, eating, enjoying, movement of the various limbs with a sense of recollection (of the nature of his own soul etc.)
28. maintenance of serenity in the face of honour, praise, criticism and insult;
29. to stand the onslaught of hunger, thirst, efforts, labour, cold, heat, wind, rains, happiness, miseries and sensory contacts;
30. non-disturbance by sorrow, miseries, respect, perturbation, vanity, greed, attachment, envy, fear, anger etc;
31. to view pride etc; as disturbing factors;
32. to remember the identical nature of creation etc, of the self and the universe;

33. to be afraid of postponing actions conducive to salvation;
34. to have confidence in yogic practices;
35. to be optimistic about spiritual attainments;
36. to direct intelligence, patience, memory and strength for salvation;
37. restraint of sense organs in the mind (so as not to allow them to move towards external objects); restraint of the mind in the self and finally of the self in Himself;
38. realisation of different organs of the body as composed of *dhatus* (tissue elements);
39. to realise that everything caused is miserable, ephemeral and not belonging to Self;
40. to view all attached actions as sinful; and
41. to consider renunciation as a potent factor for happiness.

This is the gate way to salvation. One finds himself in bondage otherwise. Thus the ways and means to salvation are explained. [11-12]

भवन्ति चात्र—

पतैरविमलं सत्त्वं शुद्धयुपायैर्विशुद्धति ।
 मृज्यमान इवादर्शस्तैलचेलकचादिभिः ॥ १३ ॥
 ग्रहाम्बुदरजोधूमनीहारैरसमावृतम् ।
 यथा उर्कमण्डलं भाति भाति सत्त्वं तथा उमलम् ॥ १४ ॥
 ज्वलत्यात्मनि संरुद्धं तत् सत्त्वं संवृतायने ।
 शुद्धः स्थिरः प्रसन्नार्चिर्दीपो दीपाशये यथा ॥ १५ ॥

Thus it is said :

The vitiated mind gets purified by these purifying factors as a mirror is cleaned with the help of oil-cloth, hair etc. As the solar-disc dazzles when it is not covered by *Rahu*, cloud, dust, smoke and fog, so does the mind shine when it is in a state of purity.

While restrained in the soul with his movement obscured, the mind, pure and stable, shines as the lamp shines with bright flame in the lamp case. [13-15]

The solar-disc not covered with *Rahu* etc. symbolises the purity of mind. Here, there are five factors which might obstruct the brilliance of the sun; so there are five sense organs which obstruct the purity of mind.

शुद्धसत्त्वस्य या शुद्धा सत्या बुद्धिः प्रवर्तते ।
 यया भिन्नतिबलं महामोहमयं तमः ॥ १६ ॥
 सर्वभावस्वभावज्ञो यया भवति निःस्पृहः ।
 योगं यया साधयते सांख्यः संपद्यते यया ॥ १७ ॥
 यया नोपैत्यहङ्कारं नोपास्ते कारणं यया ।
 यया नालम्बते किञ्चित् सर्वं संन्यस्यते यया ॥ १८ ॥
 याति ब्रह्म यया नित्यमज्जरं शान्तमव्ययम् ।
 विद्या सिद्धिर्मितिर्मेधा प्रज्ञा ज्ञानं च सा मता ॥ १९ ॥

A person with his mind pure, is in possession of true wisdom which dispels the excessively thick darkness caused by ignorance, which brings about detachment and knowledge about the nature of all things, which is conducive to the attainment of yogic power, which renders an individual wise, which brings about freedom from vanity and detachment from the causative factors of miseries, which renders an individual free from hopes, which brings about renunciation and which serves as a means to attainment of *Brahman*, the Eternal, Immutable, Tranquil and Indestructible. It is this wisdom which is known as *vidyā* (learning), *siddhi* (accomplishment), *mati* (wisdom), *medhā* (power of retention), *prajñā* (intellect) and *jñāna* (knowledge). [16-19]

Identification of the individual with the Universe—the effect :

लोके वित्तमात्मानं लोकं चात्मनि पश्यतः ।
 परावरद्वशः शान्तिर्ज्ञानमूला न नश्यति ॥ २० ॥

If one realises himself as spread in the entire universe and the entire universe spread in himself, he is indeed in possession of transeedental and worldly vision. His serenity of mind based on wisdom does never fade away. [20]

Cessation of Contacts :

पश्यतः सर्वभावान् हि सर्वावस्थासु सर्वदा ।
 ब्रह्मभूतस्य संयोगो न शुद्धस्योपपद्यते ॥ २१ ॥

When a person visualises the presence of everything in all situations, he is one with *Brahman*, the Absolute. He does no longer have any contacts with the virtuous and sinful acts. [21]

A wise person is as good as Brahmā Himself because he attains salvation while living. In the state of absolute salvation, there is no scope even for knowledge, vision and wisdom.

Liberation from bondage :

नात्मनः करणभावालिङ्गमप्युपलभ्यते ।
स सर्वकरणायोगान्मुक्त इत्यभिधीयते ॥ २२ ॥

It is not possible even to characterize the liberated Soul. For he has no contact whatsoever with mental or other sense faculties. So, being detached of all sensory contacts, he is considered to be a liberated Soul. [23]

Once the contacts with the mind and other sense faculties are removed, there is no question of any bodily contacts whatsoever. So a liberated Soul does not in fact have a distinctive feature of His own. Even otherwise, the Soul transcends all senses. So owing to the absence of any observability, the Soul remains unobservable for all times to come and so are unobservable His distinctive features.

The term *kāraṇa* (lit. cause) stands for mental faculty, intellect and sensory and motor organs.

Synonyms of "Śanti (Liberation)"

विपापं विरजः शान्तं परमक्षरमव्ययम् ।
अमृतं ब्रह्म निर्वाणं पर्यायैः शान्तिस्त्वयते ॥ २३ ॥
पतत्तत् सौम्य ! विज्ञानं यज्ज्ञात्वा मुक्तसंशयाः ।
मुनयः प्रशमं जग्मुर्वीतमोहरजःस्पृहाः ॥ २४ ॥

Śanti (Liberation) is synonymous with *vipāpa* (free from sinful acts), *viraja* (free from attachments), *śanta* (serene), *para* (absolute), *akṣara* (indestructible), *avyaya* (immutable), *amṛta* (immortal), *Brahman* (God) and *nirvāṇa* (the state of extinction of all miseries). This is spiritual knowledge after knowing which, the sages free from all doubts, ignorance, attachment and desires attained the state of *praśama* (absolute tranquility) i.e. salvation. [23-24]

तत्र स्तोकौ—

सप्रयोजनमुद्दिष्टं लोकस्य पुरुषस्य च ।
सामान्यं मूलमुत्पत्तौ निवृत्तौ मार्ग एव च ॥ २५ ॥
शुद्धसत्त्वसमाधानं सत्या बुद्धिश्च नैष्ठिकी ।
विचये पुरुषस्योक्ता निष्ठा च परमर्षिणा ॥ २६ ॥

To sum up :

In this chapter dealing with the individual as an epitome of the universe, the sage has described the following topics :

- a. The common origin of the universe and the individual together with the purpose behind the knowledge of such a common knowledge;
- b. attainment of the pure state of the mind;
- c. virtuous intellect conducive to the attainment of salvation; and
- d. salvation. [25-26]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थाने पुरुषविचयशारीरं
नाम पञ्चमोऽन्धायः ॥ ५ ॥

Thus ends the fifth chapter dealing with “the Individual as an Epitome of the universe as conducive to the understanding of the body” of the *Sārira* section of Agniveśa’s work as redacted by Caraka. [5]

CHAPTER VI CONSTITUTION OF PHYSIQUE

षष्ठोऽध्यायः

अथातः शरीरविचयं शारीरं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ ३ ॥

We shall now expound the chapter on “the Knowledge of the Details of the Body” as conducive to its understanding.

Thus said Lord Atreya. [1-2]

In the previous chapter, details regarding the Soul which paves the way for salvation has been described with a view to provide knowledge for the treatment of diseases. Details regarding the human body are being described in this chapter.

Utility of the detailed knowledge of body :

शरीरविचयः शरीरोपकारार्थमिष्यते । ज्ञात्वा हि शरीरतत्त्वं शरीरोप-
कारकरेषु भावेषु ज्ञातमुत्पद्यते । तस्माच्छरीरविचयं प्रशंसन्ति कुशलाः ॥ ३ ॥

Detailed knowledge of the human body is conducive to the well-being of the individual. Understanding of the factors that constitute the body provides knowledge regarding the factors which are responsible for its wellbeing. It is because of this that experts extol the knowledge of the details of the body. [3]

By the knowledge of the details of the body one can know about the factors which are to be prescribed for the maintenance of health. When the natural attributes of the constituents of the human body, viz. *rakta* (red blood corpuscle specially hemoglobin fraction of it) etc., are known then the factors which are of opposite qualities can be ascertained and by the administration of such substances the aggravated *dhātus* can be reduced and *vice versa*. This helps in the maintenance of health. Similarly knowledge about the factors which produce ill health can be obtained.

Composition of body—results of their concordance & discordance :

तत्र शरीरं नाम चेतनाधिष्ठानभूतं पञ्चमहाभूतविकारसमुदायात्मकं सम-
योगवाहि । यदा ह्यस्मिन् शरीरे धातवो वैषम्यमापद्यन्ते तदा क्लेशं विनाशं वा
प्राप्नोति । वैषम्यगमनं हि पुनर्धातूलां वृद्धिहासगमनमकात्म्येन प्रकृत्या च ॥ ४ ॥

The body which is maintained in a state of equilibrium represents the conglomeration of factors derived from five *mahābhūtas* and this is the site of manifestation of consciousness. When *dhātus* in this body becomes discordant then there is disease or destruction (of the body). Aggravation or diminution of *dhātus* either partially or in their entirety constitutes this discordance. [4]

The Soul is conscious and this consciousness is manifested in the body of the individual. From this, it is assumed that the body is the dwelling place of the Soul. But in reality the Soul does not have any such dwelling place for which the word *bhūta* (lit. meaning 'as if') is added to the term '*cetanādhīśṭhān*' in the text.

Dhātus, viz., *rasa* etc., which are derived from five *mahābhūtas* constitute the body. The body represents the conglomeration of all these factors and not merely their combination (*sanyoga*). This combination (*sanyoga*) of these factors derived from five *mahābhūtas* however, subserves as a causative factor for the manifestation of the body as an effect.

When these *dhātus* exist in proper quantity, then the product of their conglomeration i.e. the body of the individual is maintained in a healthy way free from any disease. When, however, there is any discordance among these *dhātus*, this results in ill health—if there is a minor discordance then there is the manifestation of diseases which produces pain in the body, and if there is a major discordance, the body gets completely destroyed i.e. the individual succumbs to death.

Even in the normal and natural state, there is some discordance among these *dhātus* due to various factors. Such discordance is not considered to produce any disease. With a view to exclude this type of discordance from the purview of the description here, and to include only such major discordance as would result in disease or decay, that the term '*gamana*' has been suffixed to the term *vaiśamya* in the text.

Vṛddhi (increase) and *kṣaya* (decrease) of *dhātus*—both individually and jointly constitute *vaiśamya* or the state of discordance. *Dhātus* may undergo increase or decrease partially or in their entirety.

Some scholars interpret the text in a slightly different way. According to them, the term *akārtsnyena* should be linked up with *klesa* and *vināśa* occurring in the text. On the basis of this interpretation, it is explained that discordance of *dhātus* does not necessarily produce a disease or result in death. They cite the example of (1) the effects of aphrodisiacs by which there is an increase in the quantity of *sukra* (semen) and (2) the increase of *dhātus* (tissue elements) of a child along with the increase of its age both of which do not constitute or produce diseases. This type of interpretation is not very correct because the increase of *dhātus* in a child is in conformity with the increase of his age and such

increase should be considered as natural. Therefore, there is no increase of the *dhātu* from the quantity which should be naturally maintained according to the age of the individual. Even the increase of *sukra* (semen) by the administration of aphrodisiacs does not cause any disease and therefore, this increase should be considered as within the normal range. Any increase in *dhātus*, if it does not result in the production of a disease should be considered as within the normal range.

In the next chapter, quantities of *dhātus* are described taking the *añjali* (cup formed by joining both hands) as the unit—c.f. *Sārira* 7 : 15. This description represents only the average quantity of *dhātus*. As *dhātus* cannot be perceived directly for measurement, their normalcy should be inferred from the signs and symptoms manifested by them in the body. Therefore, the maximum increase of *sukra* (semen) which does not produce a disease should be considered as the limit of the normal range of this *dhātu*. Any increase or decrease beyond this normal range constitute *vaiśamya* (discordance). Therefore, the explanation of this text given in the above paragraph is not proper.

Similarly the term '*prakṛtyā*' occurring in the text is differently explained by some scholars. According to them the term '*prakṛtyā*' here means "by nature and naturally." According to them, not only increase decrease in the quantity of *dhātus*, but also *dhātus* in their normal state may also constitute discordance. In support of this view, they cite the example of the statement in *Sūtra* 17 : 45-46 where it is said "Because of the diminution of *kapha*, the aggravated *vāta* draws the *pitta* which is in its normal state from its abode and circulates in the body to produce pain in the sites of its circulation". According to them, even though the *dosa* (*pitta*) is in its normal state, still because of some extraneous factors it plays the role of the producer of discordance. This interpretation is also not very correct. Because in another verse of the same chapter (*Sūtra* 17 : 62) the author has described three different states of *dhātus*, viz. increase, decrease and normal, and signs and symptoms of each of these states are described. In the normal state, *dhātus* are described to produce their normal signs and symptoms and not the symptoms of abnormalcy. In *Sūtra* 9:4 also, a disease is defined 'as the result of the discordance of *dhātus*' and the normal state of these *dhātus* is described to constitute the health.

The correct interpretation of the statement in *Sūtra* 17 : 45—46 should be that, if the *pitta* in its normal state, when carried by the aggravated *vāta*, circulates in the body, and come in contact and gets mixed up with the *pitta* of other places, then there is actually an increase in the *pitta* of those places. This increased state of *pitta* produces the disease and not the *pitta* in its normal state. This has been explained in greater detail in the commentary of that verse (—c.f. commentary on *Sūtra* 17 : 45—46).

Similarly aggravated *vāta* etc., may produce diseases of *rakta* etc. Even though such *dhātus* were in normal state before they came into con-

tact with the aggravated *doṣas*, still after such contact, the equilibrium of *dhātus* gets disturbed. By coming into contact with the aggravated *doṣas* which are directly responsible for the production of disease, these *dhātus* get either increased or decreased in their attributes. Therefore, for the manifestation of diseases, even *dūṣyas* (*dhātus* or tissue elements which do not vitiate but get vitiated) get either increased or decreased. So there is no reason to believe that *doṣas* in their normal state can produce a disease.

यौगपद्येन तु विरोधिनां धातूनां वृद्धिहासौ भवतः । यद्दि यस्य धातो-
वृद्धिकरं तत्ततो विपरीतगुणस्य धातोः प्रत्यवायकरं संपद्यते ॥ ५ ॥

Dhātus having mutually opposite qualities undergo increase and decrease simultaneously. A thing which increases a particular *dhātu* is also responsible for the decrease of the *dhātu* of opposite quality. [5]

A thing which is responsible for the increase of one *dhātu* will simultaneously reduce the *dhātu* of opposite quality. For example, milk increases *kapha* and *sukra* (semen) and simultaneously, it reduces *vāta* etc; which are of opposite qualities.

Cow's urine and *kapha* and *doṣa* both are liquid in consistency. Still cow's urine reduces *kapha* because of latter's opposite attributes, viz. pungentness, hot, roughness etc. Thus it is not the physical nature (*jāti*) but the attributes, which are responsible for the increase or decrease of *dhātus*, and with a view to emphasise this, the term 'guna' has been added as a suffix to 'viparita' in the text.

Maintaining equilibrium of dhātus is the object of treatment :

तदेव तस्माद्देषजं सम्यगवचार्यमाणं युगपन्न्यूनातिरिक्तानां धातूनां
साम्यकरं भवति, अधिकमपकर्षति न्यूनमाप्याययति ॥ ६ ॥

Therefore, medical therapies when properly administered simultaneously bring both the reduced and increased *dhātus* to their normal state by reducing the increased ones and increasing the reduced ones. [6]

Medicines bring about the normal state of *dhātus* only when administered in proper dose etc.. Medicines should also be administered only upto that length of time by which the *dhātus* come to their normal state and not beyond that. Medicines administered without taking into account these factors do not produce effects properly. Substances having pungent taste, when administered, simultaneously reduce the aggravated *kapha* and increase the reduced *pitta*. But after these *doṣas* come to their normal state, if these substances having pungent taste are continued to be administered then there will be increase in *pitta* and reduction of *kapha* from their normal level resulting again in their discordance.

Para 5 envisages the increase and reduction of *dhātus* having opposite qualities by the administration of medicines. This para (no. 6) envisages that medicines bring about the equilibrium of *dhātus*. The apparent contradiction in these two statements are further clarified by saying that the medicine reduces the increased *dhātus* and increase the reduced *dhātus* resulting in their equilibrium. These statements hold good only when there is already increase or reduction of the *dhātus* having opposite qualities. If there is only an increase of *dhātus*, then they have to be simply reduced without increasing any one.

Maintenance of equilibrium of dhātus :

एतदेव हि भैषज्यप्रयोगे फलमिष्टं स्वस्थवृत्तानुष्ठाने च यावद्धातूनां साम्यं स्यात् । स्वस्था ह्यपि धातूनां साम्यानुग्रहार्थमेव कुशला रसगुणानाहार-विकारांश्च पर्यायेणेच्छन्त्युपयोक्ते सात्म्यसमाज्ञातान् ; एकप्रकारभूयिष्ठांश्चोपयुज्ञानास्तदिपरीतकरसमाज्ञातया चेष्ट्या सममिच्छन्ति कर्तुम् ॥ ७ ॥

It is the equilibrium of *dhātus* which is sought as the result while administering therapies and also while resorting to regimens for the maintenance of positive health. Even healthy persons should properly use wholesome food with appropriate *rasas* (taste) and *guṇas* (attributes) and processed properly with a view to maintain the equilibrium of *dhātus*. After taking the food dominated by particular attributes, it is desirable to neutralize their effects by resorting to such of the regimens as are contradictory to them. [7]

Bringing about the equilibrium of *dhātus* is the only aim of administering therapies for the cure of diseases as well as maintenance of positive health. Diseases get automatically alleviated when *dhātus* are brought to their normal state. Promotion of the strength of a healthy individual by the administration of rejuvenation (*rasayana*) therapy also aims at maintaining the equilibrium of *dhātus* in their excellent state. Therefore, in *āyurveda*, there is nothing more to be achieved than to bring *dhātus* to their normal state or to maintain this normalcy – c. f., *Sūtra* 1 : 53.

In healthy persons, *dhātus* are already in a state of equilibrium. But, for such persons therapies are prescribed with a view to bring about a continuity in this state of equilibrium in successive stages.

For healthy persons, food preparations should be given in such an order as would be conducive to the maintenance of the equilibrium of *dhātus*. For example, pungent things should be taken with a view to alleviate *kapha* which latter was aggravated by the intake of sweet things. Light things should be taken after the intake of heavy things with a view to prevent the undesirable effects of the latter. Similarly, the intake of chewable (*khādya*) food should be followed by drinkable (*peya*) preparations.

Food articles may have wholesome effect (*sātmya*) when they are naturally useful (*svābhāvika pathya*) and taken habitually (*abhyāsa*). The term "sātmyasamājnāta" used in the text, implies such of the food articles as are invariably wholesome at all times. The wholesomeness of substances described here includes that of *rasas* (tastes) and *gunas* (attributes).

If food articles dominated by ingredients having one type of taste are taken, then it may produce the discordance among *dhātus*, and to prevent such discordance, it is necessary to resort to such of the regimens as would have opposite effects. For example, when a person eats food dominated by sweet taste then *kapha* having identical qualities gets aggravated and with this in view, he should resort to regimens like exercise that produce opposite effects i.e. reduce *kapha*. But such regimens should not be resorted to in excess.

Instructions for maintaining equilibrium :

देशकालात्मगुणविपरीतानां हि कर्मणामाहारविकाराणां च क्रियोपयोगः
सम्यक्, सर्वातियोगसन्धारणम्, असन्धारणमुदीर्णनां च गतिमतां, साहसानां
च वर्जनं, स्वस्थवृत्तमेतावद्भातूनां साम्यानुग्रहार्थमुपदिश्यते ॥ ८ ॥

For the maintenance of the equilibrium of *dhātus* which provides for positive health, one should observe the following advice :

1. One should properly resort to such actions and take such food as are of contrary disposition to the locality, season and physical constitution of the individual. For example, one should indulge in sleep while living in a desert; one should resort to exercise during the spring season; an individual with a fatty body should resort to exercise and vigil in excess;
2. One should refrain from excessive utilization, wrong utilization and non-utilization of the time, intellect and objects of senses;
3. One should not suppress manifested urges; and
4. One should refrain from exhibiting strength beyond one's real capacity. [8]

It may not be possible for an individual to refrain from utilising the wrong effects of seasons but he can resort to such therapies (measures) as would neutralize this wrong effect.

Food and dhātus :

धातवः पुनः शारीराः समानगुणैः समानगुणभूयिष्ठैर्वा॑उप्याहारविकारै॒
रभ्यस्यमानैर्वृद्धिप्रापुवन्ति, हासं तु विपरीतगुणविपरीतगुणभूयिष्ठैर्वा॑उप्याहा॒
रैरभ्यस्यमानैः ॥ ९ ॥

Dhatus (tissue elements) inside the body of the individual get increased by the habitual use of food preparations which are either of similar attributes or are dominated by such attributes. Habitual use of food having opposite qualities or having the dominance of such opposite qualities reduce the *dhatus*. [9]

In this paragraph, the nature of the food ingredients which either increase or decrease the *dhatus* is described. Only physical factors are amenable to this principle laid down in this paragraph; Other factors like intellect etc; do neither increase nor decrease by similar or opposite factors.

A substance may be either identical in entirety or have identical qualities in dominence. For example, meat is identical with flesh; hence the intake of meat increases the muscle tissue of the body. Semen and milk are not identical with each other. Of course, certain qualities of the semen are predominantly found in milk, for example, both of them are liquid in nature. Hence the habitual use of milk increases semen even though to a lesser extent.

Such increase or decrease of *dhatus* by similar or dissimilar food ingredients takes place only when they are taken habitually. Occasional intake of such food does not produce any such effect.

Attributes of dhatus in the body :

तत्रेमे शरीरधातुगुणाः संस्थासामर्थ्यकराः; तदथा—गुरुलघुशीतोष्ण-
म्निघरूपमन्दतीक्ष्णस्थिरसरमृदुकठिनविशदपिच्छिलशुक्षणखरसूक्ष्मस्थूलसान्द्र-
द्रवाः । तेषु ये गुरवस्ते गुरुभिराहारविकारगुणैरभ्यस्यमानैराप्याश्यन्ते, लघ-
वश्च हसन्ति; लघवस्तु लघुभिराप्याश्यन्ते, गुरवश्च हसन्ति । एवमेव सर्वधातु-
गुणानां सामान्ययोगाद्वृद्धिः, विपर्ययाद्वासः । तस्मान्मांसमाप्याश्यते मांसेन
भूयस्तरमन्येभ्यः शरीरधातुभ्यः, तथा लोहितं लोहितेन, मेदो मेदसा, वसा
वसया, अस्थि तरुणस्थना, मज्जा मज्जा, शुक्रं शुक्रेण, गर्भस्त्वामगर्भेण ॥ १० ॥

(1) *Guru* (heaviness), (2) *laghu* (lightness), (3) *sita* (coldness), (4) *uṣṇa* (heat), (5) *snigdha* (unctuousness), (6) *rukṣa* (roughness), (7) *manda* (dullness), (8) *uksṇa* (sharpness), (9) *sthira* (immobility); (10) *sara* (mobility), (11) *mṛdu* (softness), (12) *kathina* (hardness), (13) *visada* (non-sliminess), (14) *picchila* (sliminess), (15) *slakṣṇa* (smoothness), (16) *khara* (coarseness), (17) *sukṣma* (subtlety). (18) *sthūla* (density), (19) *sāndra* (density) and (20) *drava* (liquidity) these are the twenty attributes of bodily *dhatus* which account for their increase or decrease. By the habitual use of heavy food preparations the *dhatus* among them that are heavy get increased,

and light ones get reduced. By the (continued use of) light (food preparations), the *dhātus* that are light get increased and the heavy ones get reduced. Similarly, all *dhātus* get increased by the use of substances having similar properties and they get reduced by the use of those having opposite properties. Therefore, among other *dhātus* of the body, the muscle (*mānsa dhātu*) gets more increased by the administration of meat, blood by blood, adipose tissue (*medas*) by fat, muscle-fat (*vasa*) by muscle-fat, bone by cartilage, bone marrow (*majja*) by bone marrow, semen by semen and foetus by immature foetus (*amagarbha*) like egg. [10]

The attributes of bodily *dhātus* which take part in the increase or decrease of *dhātus* are described in this para. Attributes concerning the body only take part in this connection and those concerning the mind and the Soul do not. In addition to the twenty attributes described above, there are some more physical attributes, viz. *para* (nearness) etc., but they do not take part in the increase and decrease of *dhātus*; hence they are not enumerated in this paragraph. Similarly, *sabda* (sound), *rūpa* (vision) and *gandha* (smell) do not take part in such changes and therefore they are not described here. *Rasa* (taste) plays an important role in such changes in *dhātus*. It is separately enumerated in this connection in para-7; hence it does not find a place in this para. *Sparsa* (touch) which also take part in such changes is not directly mentioned here; it is included in two of the attributes described in this para, viz. hot and cold.

The twenty attributes described in this para represent ten pairs of mutually contradictory attributes. As an illustration, effects of substances having one pair of such mutually contradictory attributes, viz. heaviness and lightness are described.

Similarity (*sāmanya*) which is responsible for the increase of *dhātus* is related to both the attributes (*guṇas*) and the categories (*jāti*) of substances,

At times, substances which are dissimilar in nature may also help in the increase of *dhātus*. For example, milk is not similar to semen but the use of the former increases the latter.

In this paragraph, substances of the same category are described to illustrate the statement because by the administration of such substances, the increase in *dhātus* is far greater than the administration of substances having similarity only in attributes.

Intake of meat increases other *dhātus*, viz. *rakta* (blood) etc; in addition to muscle tissue (*mānsa dhātu*) but the effect of the intake of meat in increasing muscle tissue is far greater than its effect on other *dhātus*.

The immature foetus in the form of egg etc; is a conglomeration of all *dhātus*. Hence the administration of egg to the mother promotes all the *dhātus* of her foetus.

Administration of ingredients having predominance of attributes :

यत्र त्वेवंलक्षणेन सामान्येन सामान्यवतामाहारविकाराणाम् सान्निध्यं स्यात्, सन्निहितानां वाऽप्ययुक्तत्वाद्वोपयोगे वृणित्वादन्यस्माद्वा कारणात्, स च धातुरभिवर्धयितव्यः स्यात्, तस्य ये समानगुणाः स्युराहारविकारा असेव्याश्च, तत्र समानगुणभूयिष्ठानामन्यप्रकृतीनामप्याहारविकाराणामुपयोगः स्यात्। तथा--शुक्रश्चये क्षीरसपिषोरूपयोगे मधुरस्त्रिघशीतसमाख्यातानां चापरेषां द्रव्याणां, मूत्रश्चये पुनरिक्षुरसवारुणीमण्डद्रवमधुराम्लवणोपक्रेदिनां, पुरीषक्षये कुल्माषमाषकुण्डाजमध्यवशाकथान्याम्लानां, वातक्षये कटुकतिक्कषायरुक्षलघुशीतानां, पित्तक्षये उम्ललवणकटुकक्षारोषणतीक्षणानां, श्लेष्मक्षये खिर्गगुरुमधुरसान्द्रपिण्डिलानां द्रव्याणाम्। कर्माणि यद्यस्य धातोर्वृद्धिकरं तत्तदासेव्यम्। एवमन्येषामपि शरीरधातूनां सामान्यविपर्यशाभ्यां वृद्धिहासात्मकैकशोऽतिदेशतश्च वृद्धिहासकराणि व्याख्यातानि भवन्ति ॥ ११ ॥

If a particular *dhātu* (tissue element) is to be increased and the homologous dietary articles cannot be taken because of their non-availability or even if available, they cannot be used because of unsuitability, hateful disposition or any other cause, then food preparations of different nature but having the predominance of the attributes of the *dhātus* to be promoted should be used. (Certain examples in this connection are given below :)

1. When there is a deficiency of semen, with a view to promote it, milk, ghee and such other substances known to be sweet, unctuous and cold should be administered;

2. For treating a patient suffering from the diminution of urine, sugar-cane-juice, *vāruṇī* type of wine, *māṇḍa* (thin gruel) liquid things and substances having sweet, saline and sour tastes and of sticky nature are to be administered;

3. For treating a patient suffering from the diminution of feces, *kulmaṣa* (paste of barley mixed up with hot water and slightly boiled so as to form a cake), *māṣa* (*Phaseolus radiatus* Linn.), *kuśkunda* (mushroom), *ajamadhyā* (middle portion of the goat consisting of intestines and other abdominal viscera), *yava* (barley), leafy vegetables and *dhānyāmla* (sour fermented liquor from rice gruel) should be given.

4. For the treatment of patients suffering from the diminution of *vāta*, substances having pungent, bitter and astrin-

gent tastes, and dry, light and cooling property should be administered;

5. For the treatment of patients suffering from the diminution of *pitta*, substances having sour, saline and pungent tastes and alkaline, hot and sharp properties should be administered; and

6. For the treatment of patients suffering from the diminution of *kapha*, substances having sweet taste, unctuous, heavy, dense and slimy properties should be administered.

Even such of the activities as would increase these *dhatus* should also be resorted to. Similarly other *dhatus* should also be either increased or decreased by the administration of homologous and non-homologous substances in appropriate time.

Thus the factors which increase or decrease all the *dhatus* are described—some *dhatus* are individually described and for remaining *dhatus*, the principle laid down here should be applied. [11]

There are certain substances, which, even though, are useful in increasing specific *dhatus*/factors and are available readily, still they cannot be used as food for various reasons. For example, intake of a foetus and semen is considered as a sinful act. When there is a deficiency of semen and extraneous semen is not available for administration or even if available, it cannot be taken for hateful disposition, then (for hateful disposition, then (for the promotion of semen) milk should be given. Similarly, for the treatment of other deficiencies like that of urine for which extraneous urine cannot be administered because of hateful disposition, other substances having the predominance of the attributes of urine can be given.

Actions of various types like *acintā* (thoughtless disposition) etc; promote various *dhatus* by specific action and because of this, it is not mentioned that they should be of similar qualities.

Other *dhatus* which are not mentioned here directly also obey the same principle in so far as its increase or decrease is concerned.

Dhatus get increased or decreased by homologous or non-homologous substances respectively only when such substances are administered in proper time.

Factors responsible for growth of body :

कात्कर्येन शरीरवृद्धिकरास्त्वमे भावा भवन्ति; तदथा—कालयोगः,
स्वभावसंसिद्धिः, आहारसौष्ठवम्, अविघातश्रेति ॥ १२ ॥

The following factors are responsible for the growth of the body in its entirety.

1. Opportunity; For example, youth is the proper time for the growth of the individual. During young age, it is the specificity of time which is responsible for the growth of the individual;

2. favourable disposition of the nature; For example, results of the unseen (past) actions are also responsible for the growth of individual's body;

3. excellence of the properties of food; and

4. absence of inhibiting factors; For example, excessive indulgence in sex and mental affliction inhibits the growth of the individual's body. [12]

Factors responsible for promotion of strength :

बलवृद्धिकरास्त्वमे भावा भवन्ति । तदथा—बलवत्पुरुषे देशे जन्म बलवत्पुरुषे काले च, सुखश्च कालयोगः, बीजक्षेत्रगुणसंपद्य, आहारसंपद्य, शरीरसंपद्य, सात्म्य संपद्य, सत्त्वसंपद्य, स्वभावसंसिद्धिश्च, यौवनं च, कर्म च, संहर्षश्चेति ॥ १३ ॥

The following factors are responsible for the promotion of strength :

1. Birth in a country where people are naturally strong;
2. birth at a time when people naturally gain strength;
3. favourable disposition of time (pleasant and moderate climate);
4. excellence of the qualities of the seed (sperm) and *āśaya* (ovum and uterus) of the parents;
5. excellence of the ingested food;
6. excellence of the physique;
7. excellence of the *sātmya* (wholesomeness of various factors responsible for the maintenance of the body);
8. excellence of the mind;
9. favourable disposition of the nature;
10. exercise; and
11. cheerful disposition. [13]

Inhabitants of certain places like Sindh are strong by nature. This is because of the specific characteristics of those places. Birth in such

countries makes the man strong. Similarly, in certain seasons like *hemanta* (November to January) and *sīṣira* (January to March), people generally gain strength, and birth in such seasons makes the individual strong. Moderate climate when there is no excess of heat and cold and which is pleasant, also, promotes the strength of the individual.

The progeny of parents having no abnormality or having the excellence of sperm, ovum and uterus is endowed with strength. Mind also control over the body—c.f. *Sārira* 4 : 36. If the individual is having a sound mind, then his body will also be quite strong. Some people are also endowed with a strong physique because of their virtuous actions in the past life. Habitual performance of exercise is also known to promote the strength of the individual.

Factors responsible for transformation of food :

आहारपरिणामकरास्त्वमे भावा भवन्ति । तदथा—ऊष्मा, वायुः,
क्लेदः, स्नेहः, कालः, समयोगश्चेति ॥ १४ ॥

Head (*pitta*), *vāta*, *kleda* (moisture), unctuousness, time of digestion and appropriate administration—these factors are responsible for the transformation (digestion, assimilation and metabolism) of food. [14]

For the administration of food in appropriate manner, eight factors are to be kept in view. They are described in *Vimāna* 1 : 21-22.

Specific actions of transforming factors :

तत्र तु स्वल्वेषामूष्मादीनामाहारपरिणामकराणां भावानामिमे कर्मचि-
शेषा भवन्ति । तदथा—ऊष्मा पचति, वायुरपकर्षति, क्लेदः शैथिल्यमापादयति,
स्नेहो मार्दवं जनयति, कालः पर्यात्प्रभिनिर्वत्यति, समयोगस्त्वेषां परिणाम-
धातुसाम्यकरः संपद्यते ॥ १५ ॥

Factors described in the above para to be responsible for transformation (digestion, assimilation and metabolism) perform the following specific actions :

1. *Pitta* (heat) digests;
2. *vāta* transports food nearer to *pitta* for digestion;
3. moisture loosens the food particles;
4. unctuousness softens the ingredients;
5. time bring about the maturity of the process of digestion; and
6. appropriate administration of food brings about equilibrium of *dhatus*. [15]

In the above paragraph, *pitta* is described to take part directly in the digestion of food and the remaining factors take part indirectly.

Vata transports food to a place nearer to the site of *agni* (digestive fire) to facilitate digestion—c.f. *Cikitsā* 15 : 6. It also stimulates *agni* thereby facilitating digestion of food—c.f. *Cikitsā* 15 : 17.

Even in the presence of all other factors digestion requires time for completion of the process; hence time is described to be responsible to bring about maturity of the process.

Details of the process of digestion and metabolism are described in *Cikitsā* 15 : 6-11.

Transformation of attributes :

परिणमतस्त्वाहारस्य गुणः शरीरगुणभावमापद्यन्ते यथास्वमविरुद्धाः
विरुद्धाश्च विहन्युर्विहताश्च विरोधिभिः शरीरम् ॥ १६ ॥

During the process of transformation the attributes of food ingredients assume the attributes of (or become homologous with) such of the tissue elements of the body as are not contradictory in nature. When the are contradictory, properties of one acts against the other during the process of interaction resulting in the decay of the body. [16]

The process by which the undigested food brings about the equilibrium of *dhātus* is described in this paragraph. The process of transformation including assimilation of the food ingredients into the tissue elements of the body goes on in stages. It is not that the entire food ingested simultaneously gets transformed into the tissue elements of the body. With a view to indicate this, the author has used present tense in ‘*parināmataḥ*’.

Food provided nourishment to the tissue elements of the body which are homologous and not of contrary nature. Ingredients of the food having hardness nourishes the tissue elements of the body having hardness e.g. muscle tissue, bone etc. Similarly liquid ingredients of food provide nourishment to the liquid tissue elements of the body, viz. blood etc.

If the properties of the food ingredients are contrary to those of the body, then there is emaciation of the body due to deficient nourishment. Similarly, food ingredients which are mutually contradictory like simultaneous use of fish and milk also cause emaciation of the body.

Two categories of physical attributes :

शरीरगुणः पुनर्द्विविधाः संग्रहेण—मलभूताः, प्रसादभूताश्च । तत्र
मलभूतास्ते ये शरीरस्याबाधकराः स्युः । तद्यथा—शरीरच्छिद्रेष्यपदेहाः पृथ-
ग्नमानो बहिर्मुखाः, परिपकाश्च धातवः, प्रकुपिताश्च वातपित्तश्लेष्माणः, ये
चान्येऽपि केचिच्छरीरे तिष्ठन्तो भावाः शरीरस्योपघातायोपपद्यन्ते, सर्वास्ता-
न्मले संचक्षमहे; इतरांस्तु प्रसादे, गुर्वार्दीश्च द्रवान्तान् गुणभेदेन, रसार्दीश्च
शुक्रान्तान् द्रव्यभेदेन ॥ १७ ॥

Attributes of the body are again of two categories, viz. *prasāda* (pure substance) and *mala* (impurities). Of them, those which are impurities afflict the body with pain. They are the substances which stick to the variour orifices inside the body, which are of divergent forms and are in the process of being removed out of the body. Putrified tissue elements of the body, vitiated *vāta*, *pitta* and *kapha* and such other substances which while existing in the body causes its destruction belong to this category. All of them come under the category of *mala* (impurities) and the remaining are *prasāda* (pure substance). Depending upon the variation of matter, the latter are classified into seven categories beginning with *rasa* (plasma) and ending with *śukra* (semen). They can be classified into twenty categories on the basis of their attributes beginning with *gurutva* (heaviness) and ending with *dravatva* (fluidity). [17]

Attributes of the body can be classified in many ways involving the description of *dhātu*, *upadhātus* etc.. Their classification as *prasāda* (pure substance) and *mala* (impurities) here is only a brief one.

Picolikā (excreta from eyes), *singhānaka* (nasal excreta) and various other substances having similar attributes constitute the *mala* (impurities). These impurities get separated from the body, and are in the process of being removed out of the body, and during this process they cause pain. Substances which are not in the process of being removed out of the body but simply adhere to the wall of the circulating channels, serve some useful purpose and are not considered as *mala* or impurities.

Some scholars read परिपक्वाश्च धातवः occurring in the text as अपरिपक्वाः धातवः. If this reading is accepted, then *dhātus* which are not properly formed (*sāma*) will come under this category.

Vitiation implies both increase and decrease of *vāta* etc; because any discordance in the state of these *doṣas* is called vitiation.

The term 'mala' has been used in the text in singular number because it is indicative of a species of impurities.

Puriṇa (stool), *vāta* (flatus) etc., belong to *prasāda* category if they are in their normal state because in this state they do not cause any disease; they rather serve a useful purpose by producing *avaṣṭambhana* (support).

Vitiation by doṣas :

तेषां सर्वेषामेव वातपित्तश्लेष्माणो दुष्टा दूषयितारो भवन्ति, दोषस्वभावात् । वातादीनां पुनर्धात्वन्तरे कालान्तरे प्रदृष्टानां विविधाशितपीतीये-

उच्याये विज्ञानान्युक्तानि । एतावत्येव दुष्टोषगतिर्याचत् संस्पर्शनाच्छरीरधातू-
नाम् । प्रकृतिभूतानां तु खलु वातादीनां फलमारोग्यम् । तस्मादेषां प्रकृतिभावे
प्रयतितव्यं बुद्धिमद्भूरिति ॥ १८ ॥

Of all these, *vata*, *pitta* and *kapha* are by nature vitiators; when vitiated (by extraneous factors) they vitiate others in the body. Signs and symptoms of the vitiation of various *dhatus* in different times have already been described in the 28th chapter of *Sutra* section. Such are the manifestations of the vitiated *doṣas* when they come in contact with the tissue elements of the body.

When in normal state, *vata* etc; are responsible for the maintenance of the health of the individual. So a wise man should try to keep them in their normal state. [18]

Before vitiating *dhatus*, *doṣas* themselves get vitiated by extraneous factors: Here vitiation implies only aggravation i. e. increase in the quantity of *doṣas* because *doṣas* when diminished in *quantity* are incapable of vitiating others.

Some scholars interpret the third sentence of the paragraph in a slightly different way as follows :

"In 28th chapter, the author has not described the signs and symptoms of vitiation of *malas* like *kesā* (hair), *mūtra* (urine), *nakha* (nail) etc. Such signs and symptoms are not described here either. This means that vitiated *doṣas* have no direct action on these *malas* (hair etc.). Graying of hair, appearance of white spots in *mṛtanakha* (lit. meaning dead nail; a particular type of disease by which they get disfigured) etc., occur not due to their vitiation by the *doṣas* directly but because of some abnormality caused in the remaining parts of the body by these *doṣas*."

The above interpretation is not correct. In 28th chapter of the *Sutra* section, vitiation of all elements is discussed. Nothing more is intended to be discussed here. In the *Sutra* 28 : 22 manifestations of the vitiation of all the *malas* are described in general. Afflictions of nails and hair are included under this description.

भवति चात्र--

शरीरं सर्वथा सर्वं सर्वदा वेद यो भिषक् ।

आयुर्वेदं स कात्स्थ्येन वेद लोकसुखप्रदम् ॥ १९ ॥

The physician who is always conversant with the various aspects of the entire body, is verily proficient in the ayurveda which can bring about happiness to the universe. [19]

Query about foetus :

एवंवादिनं भगवन्तमात्रेयमग्निवेश उचाच—श्रुतमेतद्यदुक्तं भगवता शरी-
राधिकारे वचः । किञ्चु खलु गर्भस्याङ्गं पूर्वमभिनिर्वर्तते कुक्षौ, कुतो मुखः कथं
चान्तर्गतस्तिष्ठति, किमाहारश्च वर्तयति, कथंभूतश्च निष्कामति, कैश्चायमाहा-
रोपचारैर्जातः सद्यो हन्यते, कैरव्याधिरभिवर्धते, कि चास्य देवादिग्रकोपनिमित्ता
चिकाराः संभवन्ति आहोस्विन्न, किंचास्य कालाकालमृत्युर्भावयोर्भर्गवा-
नन्ध्यवस्थति, किंचास्य परमायुषो निमित्तानीति ॥ २० ॥

While Lord Ātreya was imparting the above instructions, Agniveśa asked, “We have heard your expositions on the body. Now we would like to hear the following :

- (1) Which of the organs of the foetus is manifested first in the pelvis of the mother ?
- (2) Where lies the fact of the foetus and what posture does it maintain inside ?
- (3) By which food is it nourished and how does it come out ?
- (4) What are the food and regimens which are responsible for its immediate death after birth ?
- (5) What are the factors that help in the growth of the foetus without any disease ?
- (6) Whether it is afflicted with diseases caused by the gods etc., or not ?
- (7) What is your opinion regarding the existence or non-existence of its timely or untimely death ?
- (8) What is the span of its life ? and
- (9) What are the factors which are responsible for the maintenance of the span of its life.” [20]

Views of sages about first formation of organ of foetus :

तमेवमुक्तवन्तमग्निवेशं भगवान् पुनर्वसुरात्रेय उचाच—पूर्वमुक्तमेतद्ग-
र्भावक्रान्तौ यथाऽयमभिनिर्वर्तते कुक्षौ, यच्चास्य यदा संतिष्ठतेऽङ्गजातम् । विप्र-
तिवादास्त्वत्र बहुविधाः सूत्रकृतामृषीणां सन्ति सर्वेषां; तानपि निबोधोच्यमा-
नान्—शिरः पूर्वमभिनिर्वर्तते कुक्षाविति कुमारशिरा भरद्वाजः पश्यति, सर्वे-
न्द्रियाणां तदधिष्ठानमिति कृत्वा; हृदयमिति काङ्क्षायनो बाह्यीकभिषक् चेतना-
धिष्ठानत्वात्; नाभिरिति भद्रकाप्यः, आहारागम इति कृत्वा; पक्षाशयगुदमिति
भद्रशौनकः, मास्ताधिष्ठानत्वात्; हस्तपादमिति वडिशः, तत्करणत्वात् पुरुष-
स्य; इन्द्रियाणीति जनको वैदेहः, तान्यस्य बुद्धयधिष्ठानानीति कृत्वा; परोक्षत्वा-

दचिन्त्यमिति मारीचिः कश्यपः; सर्वाङ्गाभिनिर्वृत्तिर्युगपदिति धन्वन्तरिः; तदुपपन्नं, सर्वाङ्गानां तुल्यकालाभिनिर्वृत्तत्वाद्वृद्धयप्रभृतीनाम् । सर्वाङ्गानां ह्यस्य दृष्ट्यं मूलमधिष्ठानं च केषाञ्चिद्द्वावानाम्, नव तस्मात् पूर्वाभिनिर्वृत्तिरेषां; तस्माद्वृद्धयप्रभृतीनां सर्वाङ्गानां तुल्यकालाभिनिर्वृत्तिः, सर्वे भावा ह्यन्योन्यप्रतिबद्धाः; तस्माद्यथाभूतदर्शनं साधु ॥ २१ ॥

Lord Punarvasu Ātreya replied to Agniveśa, "In the fourth chapter of this section dealing with the formation of embryo, the manner in which the foetus is formed in the uterus of the mother and the mode of manifestation of its various organs are already described. But there are various types of controversies on such problems among all the sages who are authors in the subject. They are enumerated below :

- (1) Kumāraśiras Bharadvāja observed that the head of the foetus is first manifested in the uterus because it is the receptacle of all sense organs.
- (2) According to Kāñkāyana, the physician from Bāhlika, heart being the receptacle of consciousness is first formed.
- (3) According to Bhadrakāpya *nābhi* (umblicus) is first formed as it serves as the means to providing nourishment to the foetus.
- (4) According to Bhadraśaunaka, rectum located near the colon is first formed as this is the site for *vata*.
- (5) According to Baḍīśa, hands and feet are first formed being the instruments of the individual for his activities.
- (6) According to Janaka of Videha, sense organs being the receptacles of senses are first formed.
- (7) Mārici Kāśyapa is of the view that is not possible to make any statement about first formation of any organs as they cannot be observed directly.
- (8) Dhanvantari is of the view that all the organs are formed simultaneously.

The view of Dhanvantari is correct as all the organs like heart etc., are (actually) formed simultaneously. It is true that the heart is the origin of all organs and the receptacle of certain phenomena. So there is no room for the formation of these phenomena preceding the formation of heart. So all these organs like heart etc., are formed simultaneously.

All phenomena are in fact inter-dependent. So the view of Dhanvantari is quite correct. [21]

In para—14 of chapter—4 of this section, it has been stated that all the sensory and other organs of the foetus except those that are formed after birth like teeth and beard, are formed simultaneously. The same is being discussed here by quoting several views about the priority in the manifestation of various organs. A simultaneous manifestation of the organs of the foetus can also be inferred from their simultaneous growth after birth. This is just like the inference regarding the simultaneous production of fruits from their simultaneous growth.

It is not possible to establish the priority of the manifestation of the heart. The manifestation of heart as a receptacle of all the organs can be established only when all organs are manifested simultaneously. Thus the question of the priority of the manifestation of head etc., does not arise. So it is the doctrine of simultaneous manifestation of all organs in the foetus as propounded by Dhanvantari which is acceptable.

Posture of the foetus :

गर्भस्तु खलु मातुः पृष्ठाभिमुख ऊर्ध्वशिराः सङ्कुच्याङ्गान्यास्तेऽन्तःकुक्षौ ॥२२॥

The foetus lies in the uterus with its face towards the back of the mother, head upwards and limbs folded. [22]

Thirst and hunger of foetus :

व्यपगतपिपासाबुभुक्षस्तु खलु गर्भः परतञ्चवृत्तिर्मातरमाश्रित्य वर्तयत्यु-
पस्नेहोपस्वेदाभ्यां गर्भाशये सदसङ्गताङ्गावयवः, तदनन्तरं ह्यस्य कश्चिल्लोमकूपाय-
नैरुपस्नेहः कश्चिन्नाभिनाड्यन्ते । नाभ्यां ह्यस्य नाडी प्रसक्ता, नाड्यां चापरा,
अपरा चास्य मातुः प्रसक्ता हृदये, मातृहृदयं ह्यस्य तामपरामभिसंस्थवते सिराभिः
स्थन्दमानाभिः; स तस्य रसो बलवर्णकरः संपद्यते, स च सर्वरसवानाहारः ।
ख्लिया ह्यापन्नगर्भायाख्लिधा रसः प्रतिपद्यते—स्वशरीरपुष्टये, स्तन्याय, गर्भवृद्धये
च । स तेनाहारेणोपष्टव्यः (परतञ्चवृत्तिर्मातरमाश्रित्य) वर्तयत्यन्तर्गतः ॥ २३ ॥

The foetus is free from thirst and hunger. It is dependent upon the mother for all its activities. It lives upon the nourishment by the process of *upasneha* (exudation) and *upasveda* (conduction of heat). Some of its organs are well manifested and some others are not so. It draws nourishment by the process of exudation sometimes through the holes in the hair follicles and sometimes through the channels of umbilical cord. The umbilical cord of the foetus is attached to the umbilicus and the placenta to the umbilical

cord. The placenta is in its turn connected with the heart of the mother. The heart of the mother floods the placenta (with nourishment) by the pulsating vessels. This *rasa* (nutritive fluid) promotes strength and complexion of the foetus because it is composed of material having all tests.

Rasa (digestive product of food) of the pregnant woman serves three purposes, viz. (1) nourishment of her own body, (2) lactation and (3) growth of the foetus. Being supported by that food, the foetus who is dependant upon the mother keeps living inside (the uterus). [23]

The *aparā* (placenta) connected with the umbilical cord of the foetus is commonly known as *amarā*. Formation of placenta etc., takes place by virtue of the past action of the foetus.

Process of delivery :

स चोपस्थितकाले जन्मनि प्रसूतिमारुतयोगात् परिवृत्त्यावाक्शिरा
निष्कामत्यपत्यपथे, एषा प्रकृतिः, चिकृतिः पुनरतोऽन्यथा । परं त्वतः स्वतन्त्र-
वृत्तिर्भवति ॥ २४ ॥

During the time of delivery, the foetus turns its head downwards by virtue of the *prasūti maruta* (*vayu* which regulates the process of delivery) and gets delivered through the vaginal path. This is the normal situation. Situations other than this constitute abnormality. After delivery the child is free in its movement. [24]

Normally delivery takes place with the foetus turning its head downwards. But it does not always happen so. Sometimes delivery also takes place with the legs of the child remaining downwards.

Factors responsible for proper growth of foetus :

तस्याहारोपचारौ जातिसूत्रीयोपदिष्टावविकारकरौ चाभिवृद्धिकरौ
भवतः ॥ २५ ॥

ताभ्यामेव च विषमसेविताभ्यां जातः सद्य उपहन्यते तस्मिन्वाचिरव्यप-
रोपितो वातातपाभ्यामप्रतिष्ठितमूलः ॥ २६ ॥

The diet and regimen described in the 8th chapter of this section, if adopted, promotes the growth of foetus without causing any morbidity.

The same diet and regimens inappropriately administered might destroy the foetus immediately after birth as the

wind and sun destroy a newly planted tree whose roots are not yet firmly established. [25-26]

Diet and regimens conducive to the growth of the foetus will be described in chapter—8 of this section. Acquaintance with the contents of that chapter has been anticipated here.

Justifications for the existence of diseases caused by divine displeasure:

आसोपदेशादद्वृतरूपदर्शनात् समुत्थानलिङ्गचिकित्सतविशेषाच्चादोषप्रकोपानुरूपा देवादिप्रकोपनिमित्ता विकाराः समुपलभ्यन्ते ॥ २७ ॥

The fact that diseases are also caused by the displeasure of the gods can be established by the following :—

1. Such statements by enlightened sages, for example; instructions in Kumāratantra of Brahmā;
2. sight of unexpected events like super-natural strength, knowledge, charm etc.;
3. specific nature of the etiology, signs, symptoms and treatment; and
4. there are certain diseases which do not correspond to the aggravation of any of these *dosas*. [27]

According to the science of pediatrics as propounded by Brahmā etc., some diseases are caused not only by the gods etc., but also by their attendants. Suśruta also lists eight types of supernatural beings that cause diseases—c.f. *Saśruta : Uttaratantra* 60 : 17.

Timely and Untimely death :

कालाकालमृत्युवोस्तु खलु भावाभावयोरिदमध्यवसितं नः—“यः कश्चिन् म्रियते स काल एव म्रियते, न हि कालच्छिद्रमस्ति” इत्येके भाषन्ते । तच्चास-म्यक् । न ह्यच्छिद्रता सच्छिद्रता वा कालस्योपपद्यते, कालस्वलक्षणस्वभावात् । तत्राहुरपरे—यो यदा म्रियते स तस्य नियतो मृत्युकालः; स सर्वभूतानां सत्यः, समक्रियत्वादिति । एतदपि चान्यथाउर्थग्रहणम् । न हि कश्चिन्न म्रियते इति समक्रियः । कालो ह्यायुषः प्रमाणमधिकृत्योच्यते । यस्य चेष्टं यो यदा म्रियते स तस्य मृत्युकाल इति, तस्य सर्वे भावा यथास्वं नियतकाला भविष्यन्ति; तच्च नोपपद्यते, प्रत्यक्षं ह्यकालाहारवचनकर्मणां फलमनिष्टं; विषर्यये चेष्टं; प्रत्यक्षत-ओपलभ्यते खलु कालाकालव्यक्तिस्तासु तास्ववस्थासु तं तमर्थमभिसमीक्ष्य, तद्यथा—कालोऽयमस्य व्याधेराहारस्यौषधस्य प्रतिकर्मणो विसर्वास्य, अकालो वेति । लोकेऽयेतद्वति—काले देवो वर्षत्यकाले देवो वर्षति, काले शीतम-काले शीतं, काले तपत्यकाले तपति, काले पुण्यफलमकाले च पुण्यफलमिति ।

तस्मादुभयमस्ति—काले मृत्युरकाले च; नैकान्तिकमत्र । यदि ह्यकाले मृत्युर्न स्यान्नियतकालप्रमाणमायुः सर्वं स्यात् ; एवं गते हिताहितश्चानमकारणं स्यात् , प्रत्यक्षानुमानोपदेशाश्राप्रमाणानि स्युर्ये प्रमाणभूताः सर्वतत्त्वेषु, येराशुष्याण्यनायुष्याणि चोपलभ्यन्ते । वाग्वस्तुमात्रमेतद्वादमृषयो मन्यन्ते—नाकाले मृत्युरस्तीति ॥ २८ ॥

Our views on the existence and non-existence of timely and untimely death are as follows :

“Whosoever dies he dies on time. Time has no void whatsoever”. This is what some scholars say. But this not correct. Time has neither void nor absence of void. Time has a distinct feature of its own which does not admit any void or absence there of in its definition.

Some others say “Whenever one dies, he dies at the appointed hour of death. Being free from hatred or attachment, time deals equally with all creatures (so death always occurs at the predestined moment).” This also is simply distortion of facts.

The fact that everybody dies does not prove the equality in temporal actions. Time is always construed in relation to the standard span of life. If it is said that the time when one dies is the time predetermined for his death, then every movement of life as and when it occurs can be taken as pre-determined in respect of time. But this also is not true.

Food, speech and action taken in disregard to temporal factor give rise to undesirable effects; to desirable effects otherwise (when taken with due regard to temporal factor). This can be observed through direct perception.

One can also observe by means of direct perception manifestation of various factors depending upon their timely or untimely action. For example, such and such is the opportune or inopportune time for such and such diseases, food, medicine, therapy and remission. Even a layman talks in these terms, such as, it rains on time or otherwise; it is cold or hot on time or otherwise; flowering and fruition of the tree have occurred in time of otherwise. So both the things equally hold good. Therefore, death occurs on time and even otherwise. One cannot say that it always occurs in time. If there

was no untimely death, then the span of every one would have been fixed and therefore the knowledge of wholesome and unwholesome objects would be of no use at all. The sources of knowledge like perception, inference and verbal testimony accepted in all scriptures would cease to be sources of knowledge because all these sources of knowledge clearly prove that there are factors which are conducive to longevity and otherwise. So the statement of some *ṛsis* to the effect that untimely death cannot occur is confined to words only (and not to facts). [28]

There are two theories about the time of death. According to the first theory, time being infinite all the occurrences of death are related to time only. As there is no division of time there is no scope for any situation where time does not exist. So there cannot be any death with relation to time. According to the second theory, time has got division, imaginary though. So the time when some one dies is the appointed time for his death. There cannot be any other interpretation about time of death, for, time is devoid of any partiality towards any one. It has no attachment or hatred whatsoever for anybody. Thus, death occurs only when time kills an individual according to a pre-determined schedule. Time cannot kill any one as and when it pleases. It is incapable of doing so as it is known for its impartiality and equality of treatment to all individuals. So it kills everyone without sparing anybody but it does so only at the appointed hour.

Both the above theories are refuted in the above passage. If *kāla* (time) has no division; it cannot have any non-division either. Time has a distinctive feature of its own does not include any division *chidra*, or non-division (*achidra*) whatsoever in its definition. So, to say that all the occurrences of death are related to time and as such there is no untimely death is not correct.

In the second theory cited above, an imaginary division of time is accepted and various arguments are put forth in order to prove that death occurs only on time. But this theory is also fallacious in many respects. To say that time treats everyone equally and so everyone has to die without any discrimination at the appointed time of his death is not correct.

In the context of the "Science of Medicine", time represents an individual's span of life. If time were to act equally for all, everything would occur to an individual at an appointed hour automatically. But it is not so. There are variations in the span of life of different individuals.

If the above theory regarding timely death for all is accepted, nobody should die before or after 100th year of his age. Even otherwise there are temporal variations in the life of an individual. Something (disease, intake of food etc.,) happens at an appointed hour—something

before or after the appointed hour. For example, if a patient suffers from *trityaka jvara* (Tertian fever) the scheduled time for the occurrence of the fever is the third day. In case fever occurs before or after the scheduled time, it will be considered to be an untimely occurrence of fever. The prescribed time for meals is when the individual feels exhausted (*glāni*) or hungry. Food taken otherwise cannot be considered to be timely.

So one cannot say that death occurs always on time. One cannot even say that death is always untimely. As a matter of fact death can be timely or untimely depending upon the various circumstances. That is why the "Science of Medicine" has prescribed various measures to avoid untimely death. It is only then that the knowledge of wholesome and unwholesome regime is necessary. If this view is not accepted, the entire prescription of the "Science of Medicine" and even the validity of different cognitions like perception, inference and verbal testimony would be redundant.

Factors responsible for maintenance of normal span of life :

वर्षशतं खल्वायुषः प्रमाणमस्मिन् काले ॥ २९ ॥

तस्य निग्रन्तं प्रकृतिगुणात्मसंपत् सात्योपेषेवनं चेति ॥ ३० ॥

In the *Kali age* the normal span of life (of human beings) is one hundred years.

The factors responsible for the maintenance (of the normal span) of life are :

1. *Prakṛti sampat* i. e. equipoise state of *dosas* in the constitution of the individual.
2. *Guna sampat* i. e. excellence of the compactness of the body and excellence of hereditary qualities; and
3. *Ātmasampat* i. e. virtuous acts conducive to longevity. [29-30]

तत्र श्लोकाः—

शरीरं यदथा तत्त्वं वर्तते क्लिष्टमामयैः ।

यथा क्लेशं विनाशं च याति ये चास्य धातवः ॥ ३१ ॥

वृद्धिहासौ यथा तेषां क्षीणानामौषधं च यत् ।

देहवृद्धिकरा भावा बलवृद्धिकराश्च ये ॥ ३२ ॥

परिणामकरा भावा या च तेषां पृथक् क्रिया ।

मलास्याः संप्रसादास्या धातवः प्रश्न एव च ॥ ३३ ॥

नवको निर्णयश्चास्य विधिवत् संप्रकाशितः ।

तथ्यः शरीरविच्चये शारीरे परमर्षिणा ॥ ३४ ॥

To sum up :

The following nine topics are duly discussed by the great sage in this chapter on the "Knowledge of the Details of the Body" as conducive to its understanding :

1. Definition of *śarīra* (body)—the way how it is afflicted leading to disease and destruction;
2. increase or decrease of *dhātus*;
5. treatment of deficient *dhātus*;
4. factors responsible for the growth of the body;
5. factors responsible for the promotion of strength;
6. factors which help in the digestion and metabolism of food;
7. the mode of action of each of the above mentioned factors;
8. *mala* (impurities) and *prasāda* (pure) types of *dhātus*; and
9. Various queries. [31-34]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थाने शारीरविचयशारीरं
नाम पष्टोऽध्यायः ॥ ६ ॥

Thus ends the sixth chapter of *Śarīra* section on "the knowledge of the Details of the Body as conducive to its understanding" of Agnivesa's work as redacted by Caraka. [6]

CHAPTER VII

ENUMERATION OF ORGANS

सप्तमोऽध्यायः

अथातः शरीरसंख्याशारीरं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on “the Enumeration of the organs as conducive to the understanding of the human body”.

Thus said Lord Atreya. [1-2]

In the previous chapter, the body was classified according to *dhātus* (tissue elements) contained in it. In this chapter the same body is being differently classified according to its various organs.

Query about organs of body :

**शरीरसंख्यामवयवशः कृत्त्वं शरीरं प्रविभज्य सर्वशरीरसंख्यानप्रमाण-
द्वानहेतोर्भगवन्तमात्रेयमश्चिवेशः पप्रच्छ ॥ ३ ॥**

With a view to ascertaining the number and measurement of the entire body by classifying it according to component organs, Agniveśa asked Lord Atreya to enumerate the organs of the body. [3]

Knowledge of the entire body enables one to treat diseases successfully. This will be described at the end of this chapter (—vide verse 19).

The term “संख्यानप्रमाण” can be explained in two different ways, viz. (1) limitation (प्रमाण) of the number (संख्या) and (2) number (संख्या) as well as volume (प्रमाण). There are six layers of skin (—vide para 4)—this indicates the number. Udakadhātu is of ten *añjalis* (—vide para 15)—this indicates the volume.

Another reading of the term ‘संख्यानप्रमाण’ is ‘संख्यानामप्रमाण’ according to which number, name as well as volume of different organs are described. Examples of number and volume are already given. There is one organ by name *gojūhvikā*—vide para 11—this provides the example of name.

Six layers of skin :

**तमुवाच भगवानात्रेयः—शृणु मत्तोऽश्चिवेश ! सर्वशरीरमाचक्षाणस्य
यथाप्रश्नमेकमना यथावत् । शरीरे षट् त्वचः; तद्यथा—उदकधरा त्वग्बाह्या,
द्वितीया त्वसृग्धरा, तृतीया सिध्मकिलाससंभवाधिष्ठाना, चतुर्थी दद्रुकुष्टसंभवा-**

धिष्ठाना, पञ्चमी त्वलजीविद्रधिसंभवाधिष्ठाना, पष्टी तु यस्यां छिन्नायां ताम्यत्यन्ध इव च तमः प्रविशति यां चाप्यधिष्ठायारूपं जायन्ते पर्वसु कृष्ण-रक्तानि स्थूलमूलानि दुश्चिकित्स्यतमानि च; इति षट् त्वचः । एताः षडङ्गं शरीरमवतत्य तिष्ठन्ति ॥ ४ ॥

Lord Ātreya replied, “listen to me O ! Agniveśa, attentively. I shall describe the entire body in appropriate manner as per your questions”.

There are six layers of skin as follows :

1. First one is the external layer which is known as *udakadhara* (containing watery substance or lymph).
2. The second layer is *asṛagdhara* (containing blood capillaries).
3. The third layer is the site for the manifestation of *sidhma* (a type of dermatosis) and *Kilasa* (leucoderma).
4. The fourth layer is the site for the manifestation of *dadru* (ring-worm) and *kuṣṭha* (obtinate skin diseases including leprosy).
5. The fifth layer is the site for the manifestation of *alaji* (boil) and *vidradhi* (abscess).
6. The sixth layer is that by the excision of which the individual gets trembling and enters into darkness (gets fainting) like a blind man. Boils of joints which are blackened in colour and having thick root are manifested in this layer. Such boils are extremely difficult of treatment. These are the six layer of the skin by which the entire body along with its six organs (parts) remain covered. [4]

There is difference of opinion regarding the number of different organs of the body. For example, Suśruta has described seven layers of skin and three hundred bones—vide *Suśruta* : Śārira 5 : 6, 18. It is with a view to suit the specific purpose of a part of branch of āyurveda that the organs of the body are counted differently. Suśruta deals mainly with surgery whereas Caraka with internal medicine. So the difference in the description of number of some organs by these authors is accounted for—c.f. *Suśruta* : Śārira 5 : 18. Similarly the difference in the number of other organs of the body according to Caraka and Suśruta can be explained.

The third layer of the skin is described as the site of manifestation of *sidhma* (a type of dermatosis) and *kilāsa* (leucoderma). This layer of the skin is actually the place in which *dosas* which are vitiated to give rise to dermatosis and leucoderma are lodged. Similarly the diseases of the other layers of the skin can be explained.

Parts of the body :

तत्रायं शरीरस्याङ्गविभागः; तद्यथा—द्वौ बाहू, द्वे सक्षियनी, शिरोग्रीवम्, अन्तराधिः, इति षडङ्गमङ्गम् ॥ ५ ॥

The body is divided into six parts, viz. two upper limbs, head including neck and the trunk. (These are the six parts of the body). [5]

Number of bones :

त्रीणि सषट्ठीनि शतान्यस्थनां सह दन्तोलूखलनखेन । तद्यथा—द्वार्तिश-इन्ताः, द्वार्तिशइन्तोलूखलानि, विशर्तिर्नखाः, षष्ठिः पाणिपादाङ्गुल्यस्थीनि, विशर्तिः पाणिपादशलाकाः, चत्वारि पाणिपादशलाकाधिष्ठानानि, द्वे पाष्योर-स्थिनी, चत्वारः पादयोर्गुल्फाः, द्वौ मणिकौ हस्तयोः, चत्वार्यरत्नयोरस्थीनि, चत्वारि जङ्घयोः, द्वे जानुनी, द्वे जानुकपालिके, द्वावूरुलकौ, द्वौ बाहुनलकौ, द्वावंसौ, द्वे अंसफलके, द्वावक्षकौ, एकं जन्म, द्वे तालुके, द्वे श्रोणिफलके, एकं भगास्थ, पञ्चचत्वारिंशत् पृष्ठगतान्यस्थीनि, पञ्चदश ग्रीवायां, चतुर्दशोरसि, द्वयोः पार्वयोश्चतुर्विशतिः पर्शुकाः, तावन्ति स्थालकानि, तावन्ति वैब स्थाल-कार्बुदानि, एकं हन्तस्थ, द्वे हनुमूलबन्धने, एकास्थ नासिकागण्डकूटललाटं, द्वौ शङ्खौ, चत्वारि शिरःकपालानीति; एवं त्रीणि सषट्ठीनि शतान्यस्थनां सह दन्तोलूखलनखेनेति ॥ ६ ॥

Along with teeth, sockets of teeth and nails, bones in the body are 360 in number. They are as follows :

1. Teeth	—	32
2. sockets of teeth	—	32
3. nails	—	20
4. phalangeal bones of hands and feet	—	60
5. metaphalangeal bones of hands and feet	—	20
6. six bones which from the base to support the metaphalangeal bones of hands & feet	—	4
7. <i>Parsñi</i> (bones of heels or calcaneums)	—	2
8. <i>gulpha</i> (ankle bones)	—	4
9. <i>mani</i> (wrist bones)	—	2
10. <i>aratni</i> (bones of forearms)	—	4

11.	<i>jāṅgha</i> (bones of legs)	—	4
12.	<i>jānu</i> (bones of knees)	—	2
13.	<i>jānu Kapala</i> (knee caps)	—	2
14.	hollow bones of thighs (femurs)	—	2
15.	hollow bones of arms (humerous)	—	2
16.	<i>amśa</i> (bones of the shoulder)	—	2
17.	<i>amśaphalaka</i> (shoulder blades)	—	2
18.	<i>akṣaka</i> (clavicles)	—	2
19.	<i>jatru</i> (wind pipe ?)	—	2
20.	<i>talu</i> (palated bones)	—	2
21.	<i>śroniphalaka</i> (hip blades)	—	2
22.	<i>bhagasthi</i> (pubic bone)	—	1
23.	bones of the back	—	45
24.	bones of the neck	—	15
25.	bones of chest	—	14
26.	bones of the sides (ribs)	—	24
27.	sockets (for ribs)	—	24
28.	tubercles in the sockets (for ribs)	—	24
29.	<i>hanvasti</i> or jawbone (lower)	—	1
30.	<i>hanumūla bandhana</i> (bones which keep the lower jaw locked up)	—	2
31.	bone constituting the nose, pro- minences of cheeks and forehead-	—	1
32.	<i>śamkha</i> (temporal bones)	--	2
33.	<i>Śirah kapala</i> (pan shaped bones of the head)	--	4

Thus the 360 bones including teeth, sockets of teeth and nails are accounted for. [6]

According to *Sūtra 28 : 4*, nails are nourished by the *mala* (impuri-
ties); hence they are considered as products of *mala* (waste products).
They are enumerated in this chapter as bones because of their bone-like
structure.

In each finger and toe, there are three phalanges. Thus there are
sixty phalanges in total. In thumb and great toe, only two phalangeal

bones are protruding out of the hands and feet respectively. The bones immediately below the thumb and toe inside the hands and feet respectively are the third phalangeal bones which are to be taken into account. The rod shaped bones (metaphalangeal bones) of these fingers/toes are quite small in shape.

As a matter of fact, nose cheek and fore-head have one and the same root and as such have got only one bone for all of them combined. If such bones are accounted for separately then the total number of bones in the human body will exceed the prescribed number.

Sensory and motor organs :

पञ्चेन्द्रियाधिष्ठानानि; तद्यथा—त्वग्, जिह्वा, नासिका, अक्षिणी, कण्ठौ च । पञ्च बुद्धीन्द्रियाणि; तद्यथा—स्पर्शं, रसनं, ग्राणं, दर्शनं, श्रोत्रमिति । पञ्च कर्मेन्द्रियाणि; तद्यथा—हस्तौ, पादौ, पायुः, उपस्थः, जिह्वा चेति ॥ ७ ॥
हृदयं चेतनाधिष्ठानमेकम् ॥ ८ ॥

There are five organs of senses, viz. (1) skin, (2) tongue, (3) nose, (4) two eyes and (5) two ears. There are five sense faculties, viz. (1) tactile, (2) gustatory, (3) olfactory, (4) visual and (5) auditory. There are five motor organs, viz. (1) two hands, (2) two feet, (3) anus, (4) sex organs and (5) tongue.

The site of consciousness is only one, viz. the heart. [7-8]

Resorts of life :

दश प्राणायतनानि; तद्यथा—मूर्धा, कण्ठः, हृदयं, नाभिः, गुदं, बस्तिः, ओजः, शुक्रं, शोणितं, मांसमिति । तेषु षट् पूर्वाणि मर्मसंख्यातानि ॥ ९ ॥

There are ten resorts of life, viz. (1) head, (2) throat, (3) heart, (4) umbilicus. (5) anus, (6) bladder, (7) ojas (?), (8) semen, (9) blood and (10) flesh. Of them the first six organs are known as *marma* (vital organs). [9]

In the *Sutra* 29 : 3, ten resorts of life are also enumerated. Two *samkhas* (areas of temporal bones) are enumerated there. In the place of these two *samkhas*, umbilicus and flesh are described here as the resorts of life. By implication, the two *samkhas* along with umbilicus and flesh are required to be included as resorts of life.

Visceras :

पञ्चदश कोष्ठाङ्गानि; तद्यथा—नाभिश्च, हृदयं च, क्लोम च, यकृच्च, स्त्रीहा च, वृक्षी च, बस्तिश्च, शुरीषाधारश्च, आमाशयश्च, पक्षशयश्च, उत्तरगुदं च, अधरगुदं च, क्षुद्राक्रं च, स्थूलाक्रं च, वपावहन चेति ॥ १० ॥

Koṣṭhangas (viscerae in the thorax and abdomen) are fifteen in number. They are (1) *nābhi* (umbilicus), (2) *hṛdaya*.

(heart), (3) *kloman* (lungs ?), (4) *yakṛt* (liver), (5) *plihā* (spleen), (6) *vṛkkau* (two kidneys), (7) *bastī* (urinary bladder), (8) *puriṣadhāra* (pelvic colon), (9) *amāsaya* (stomach), (10) *pakvāsaya* (colon), (11) *uttaraguda* (rectum), (12) *adharaguda* (anus), (13) *Kṣudrāntra* (small intestine) (14) *sthulantra* (large intestine) and (15) *vapāvahana* (omentum). [10]

Kloman is the site in which thirst is manifested. *Vapāvahana* (omentum) is the site of fat and it is commonly known as *taila vartikā* (lit. meaning wick of an oil-lamp).

(Note : Some of the terms used in the text are difficult to be identified according to known facts of anatomy.)

Pratyāṅgas or sub-parts of body :

षट्पञ्चाशत् प्रत्यञ्जनि षट्स्वङ्गेषूपयनिबद्धानि, यान्यपरिसंख्यातानि
पूर्वमङ्गेषु परिसंख्यायमानेषु, तान्यन्यैः पर्यायैरिह प्रकाशयानि भवन्ति । तद्यथा-
द्वे जङ्घापिण्डिके, द्वे ऊरुपिण्डिके, द्वौ स्फितौ, द्वौ वृषणौ, एकं शोफः, द्वे उखे,
द्वौ वङ्घणौ, द्वौ कुकुन्दरौ, एकं बस्तिशीर्षम्, एकमुदरं, द्वौ स्तनौ, द्वौ स्तेष्य-
भुवौ, द्वे बाहुपिण्डिके, चिरुकमेक, द्वावोष्ट्रौ; द्वे सूक्ष्मण्यौ, द्वौ दन्तवेष्टकौ, एकं
तालु, एका गलशुणिडिका, द्वे उपजिह्विके, एका गोजिह्विका, द्वौ गण्डौ, द्वे कर्ण-
शाष्कुलिके, द्वौ कर्णपुत्रकौ, द्वे अक्षिकूटे, चन्वार्यक्षिक्षवर्त्मानि, द्वे अक्षिकनीनिके,
द्वे भ्रुवौ, एकाऽवदुः, चत्वारि पाणिपादहृदयानि ॥ ११ ॥

In the six *āṅgas* (parts) of the body there are about 56 *pratyāṅgas* (sub-parts). They were not described before while enumerating the six parts of the body. They are enumerated below following a different mode of classification :

1. <i>Jāṅghapindika</i> (calves)	- 2
2. <i>arupiṇḍika</i> (muscular portion of the thigh)	- 2
3. <i>sphik</i> (buttocks)	- 2
4. <i>vṛṣana</i> (testicles)	- 2
5. <i>śepha</i> (phallus)	- 1
6. <i>ukha</i> (elevations bordering axillae)	- 2
7. <i>vañkṣana</i> (groins)	- 2
8. <i>Kukundara</i> (hips)	- 2
9. <i>vastiśirṣa</i> (pelvis)	- 1
10. <i>udara</i> (abdomen)	- 1
11. <i>stana</i> (breasts)	- 2

12. <i>śleśmabhū</i> (tonsils)	-	2
13. <i>bahupiṇḍikā</i> (muscular portion of arms)	-	2
14. <i>cibuka</i> (chin)	-	1
15. <i>oṣṭha</i> (lips)	-	2
16. <i>sṛkkaṇī</i> (angles of the mouth)	-	2
17. <i>dantavesṭaka</i> (gums)	-	2
18. <i>tālu</i> (palate)	-	1
19. <i>galaśuṇḍikā</i> (uvula)	-	1
20. <i>upajihvikā</i> (epiglottis and posterior tongue)	-	2
21. <i>gojihvā</i> (tongue or the organs of speech) -	1	
22. <i>ganya</i> (cheeks)	-	2
23. <i>karṇaśaṣkulikā</i> (ear holes)	-	2
24. <i>karṇaputraka</i> (external portion of the ear)	-	2
25. <i>akṣikūṭa</i> (orbit of eye)	-	2
26. <i>akṣivartma</i> (eye bids)	-	4
27. <i>akṣikaninikā</i> (medial angles of the eyes near the nose)	-	2
28. <i>bhrū</i> (eye brows)	-	2
29. <i>avaṭu</i> (thyroid)	-	1
30. <i>pāṇipādahṛdaya</i> (soles of hands and feet)-	4	[11]

Major orifices :

नव महान्ति छिद्राणि—सप्त शिरसि, द्वे चाषः ॥ १२ ॥

एताबद्वयं शक्यमपि निर्देष्टुम् ॥ १३ ॥

There are nine major orifices—seven in the head and two below.

The above are the visible factors and are capable of description. [12-13]

Euumeration of other organs :

अनिर्देश्यमतः परं तकर्यमेव । तद्यथा—नव खायुशतानि, सप्त सिराशतानि, द्वे धमनीशते, चत्वारि पेशीशतानि, सप्तोत्तरं मर्मशतं, द्वे सन्धिशते, एकोर्नाशतसहस्राणि नव च शतानि षट्पञ्चशत्कानि सिराधमनीनामणुशः प्रविभज्यमानानां मुखाग्रपरिमाणं, तावन्ति चैव केशशमश्रुलोभानीति । एतद्य-

थावत्संख्यातं त्वक्प्रभृति दृश्यं, तर्क्यमतः परम् । एतदुभयमपि न विकल्पते,
प्रकृतिभावाच्छरीरस्य ॥ १४ ॥

Beyond what is described above can be ascertained from inference only. They are enumerated below :

1. <i>Snayu</i> (sinieu)	- 900
2. <i>sira</i> (viens)	- 700
3. <i>dhamani</i> (arteries)	- 200
4. muscles	- 400
5. <i>marma</i> (vital parts in the body)	- 107
6. joints	- 200
7. terminals of the fine ramifications of the veins and arteries	- 29956
8. <i>Keśa</i> (hair), <i>smaśru</i> (beard and mous- taches) and <i>loman</i> (small hair)	- 29946

Tvak (skin) etc., enumerated above are properly visible and the number of the remaining can be ascertained by inference only. Both these categories do not undergo any variation during the normal state of the individual's body. [14]

Some of the ligaments (sinieu) can be directly observed. But the enumeration here involves the ligaments in their entirety which include those which are not visible. Hence the number of ligaments is required to be ascertained by inference only.

Veins are 700 in number and arteries 200. But the veins and arteries ramify into subtle channels the number of which is 29956. The number of hair etc., (29956) include only those which appear near the openings of major vessels. In their subtle division, they are many more in number as described in other classics.

The enumeration given above pertains to a healthy body only. In abnormal states of the body, the number of these organs varies.

It is immaterial whether the number is ascertained through inference or direct perception, the fact remains that the number is the same.

Measurement of liquid constituents of body :

यत्त्वज्ञलिसंख्येयं तदुपदेश्यामः; तत् परं प्रमाणमभिष्ठेयं, तत्त्व वृद्धिहास-
योगि, तर्क्यमेव । तथा—दशोदकस्याज्ञलयः शरीरे स्वेनाज्ञलिप्रमाणेन, यत्तु
प्रच्यवमानं पुरीषमनुबधात्यतियोगेन तथा मूत्रं रुधिरमन्यांश्च शरीरधातून्,
यत्तु सर्वशरीरचरं बाह्या त्वग्विभर्ति, यत्तु त्वगल्तरे ब्रणगतं लसीकाशब्दं लभते,
यस्त्रोभणाऽनुबद्धं लोमकूपेभ्यो निष्पत्तं स्वेदशब्दमवाप्नोति, तदुदकं दशाज्ञलि-

प्रमाणं; नवाखलयः पूर्वस्याहारपरिणामधातोः, यं 'रस' इत्याचक्षते; अष्टौ शोणि-
तस्य, सप्त पुरीषस्य, षट् श्लेष्मणः, पञ्च पित्तस्य, चत्वारो मूत्रस्य, त्रयो वसायाः;
द्वौ मेदसः, एको मज्जायाः, मस्तिष्कस्याधाराञ्जलिः, शुक्रस्य तावदेव प्रमाणं, ताव-
देवश्लेष्मिकस्यौजस इति । पतच्छरीरतत्त्वमुक्तम् ॥ १५ ॥

Substances of the body which can be measured by volume taking *añjali* (space created by joining both the hands in the form of a cup) as a unit are now being described. The measurement described here pertains to the ideal standard; these substances can undergo variation in the form of increase or decrease in a normal individual and this can be ascertained by inference. Measurement of these substances is given below :

<i>Substances</i>	<i>Measurement in the añjali of the individual himself</i>
(1)	(2)
1. <i>Udaka</i> (aqueous element) a substance which is seen mixed with feces during the occurrence of diarrhoea; it is also found in association with urine, blood, and other tissue elements of the body; It is spread all over the body with its site in the external skin. Inside the skin, it is known as <i>lasika</i> (lymph) which exudes through ulcers; when the body becomes hot, it comes out from hair follicles in the form of sweat.	- 10
2. <i>Rasa</i> which is the first product of the ingested food after it is metabolised.	- 9
3. blood	- 8
4. feces	- 7
5. <i>Kapha</i>	- 6
6. <i>pitta</i>	- 5
7. urine	- 4
8. <i>vata</i> (muscle fat)	- 3

	(1)	(2)
9.	<i>medas</i> (fat)	- 2
10.	<i>majjā</i> (bone-marrow)	- 1
11.	<i>mastiṣka</i> (the fat-like substance inside the skull)	- $\frac{1}{2}$
12.	<i>śukra</i> (semen)	- $\frac{1}{2}$
13.	<i>ślaiṣmika</i> type of <i>ojas</i>	- $\frac{1}{2}$

Thus the various factors in the body are described. [15]

The measurement of various factors of the body described above pertains to ideal standard and this measurement undergoes (limited) changes even in a normal individual. *Lasikā* (lymph), *sveda* (sweat) etc; describe only the different aspects of the same *uddakadhātu* (aqueous element).

Ojas is of two types—the *ojas* of excellent type is eight drops in quantity; the other type is known as *ślaiṣmika ojas* the quantity of which is described here as $\frac{1}{2}$ *añjali*. The latter type of *ojas* circulated through vessels (*ojovaha dhamanis*) and its attributes are similar to those of pure *ślesma*. These two types of *ojas* are described in the 30th chapter of *Sūtra* section.

Mahabhautic predominance in various constituents :

तत्र यद्विशेषतः स्थूलं स्थिरं मूर्तिमद्गुरुखरकठिनमङ्गं नखास्थिदन्तमांस-
चर्मवर्चः केशश्मश्रुलोमकरण्डरादि तत् पर्थिवं गन्धो धाणं च; यद्वसरमन्द-
ज्ञिघमृदुपिच्छिलं रसरुधिरवसाकफपित्तमूत्रस्वेदादि तदाप्यं रसो रसनं च; यत्
पित्तमूष्मा च यो या च भाः शरीरे तत् सर्वमानेयं रूपं दर्शनं च; यदुच्छ्वासप्र-
श्वासोन्मेषनिमेषाकुञ्जनप्रसारणगमनप्रेरणधारणादि तदायवीयं स्पर्शः स्पर्शनं
च; यद्विकिं यदुच्यते महान्ति चाणूनि ओतांसि तदान्तरीक्षं शब्दः ओत्रं च;
यत् प्रयोक्तृ तत् प्रधानं बुद्धिर्मनश्च। इति शरीरावयवसंस्था यथास्थूलभेदेना-
वयवानां निर्दिष्टा ॥ १६ ॥

These organs are dominated by one or other of the *mahabhutas*. Their specific characteristics are given below :

Mahabhautika predominance

respective organs with their specific characteristics.

(1)	(2)
1. <i>Parthiva</i> (dominated by <i>prthvi mahabhuta</i>)	1. Organs which are gross, stable, having form, heavy, rough and hard like nail, bone, teeth, flesh, skin, feces, hair, śmaśru (tendons);

(1)	(2)
	2. smells (of the body) and 3. olfactory faculty.
2. <i>Āpya</i> , (dominated by <i>jala mahābhūta</i>)	1. Factors in the body which are liquid, mobile, slow, unctuous, soft and stimy like <i>rasa</i> (plasma), <i>rudhira</i> (blood) <i>vasa</i> , (muscle fat), <i>kapha</i> , <i>pitta</i> , urine and sweat; 2. tastes (of various elements of the body) and 3. Gaustatory faculty.
3. <i>agneya</i> (dominated by <i>agnimahābhūta</i>)	1. All factors like <i>pitta</i> , tem- perature and lustre of the body; 2. Colours (of different factors in the body) and 3. Visual faculty.
4. <i>Vayavīya</i> (dominated by <i>Vāyu mahābhūta</i>)	1. Bodily phenomena like in- halation, exhalation, ope- ning and closing of eyes, contraction; extension, loco- motion, impelling and rete- nition; 2. factors of the body which are known by touch and 3. tactful faculty.
5. <i>Antarikṣa</i> (dominated by <i>mahābhūta</i>)	1. Factors of the nature of void, speaking (voice), gross and subtle channels; 2. sounds (excluding speech) emanating from different organs of the body and 3. auditory faculty.

The Soul, the intellect & the mind while stimulating the various sense organs towards their objects are dominated by the qualities of the respective sense organs.

Thus the body divided into various gross organs is enumerated. [16]

Innumerability of organs of body :

शरीरावयवास्तु परमाणुभेदेनापरिसंख्येया भवन्ति, अतिबहुत्वादतिसौ-
क्षम्योदतीनिद्रियत्वाच्च । तेषां संयोगविभागे परमाणूनां कारणं वायुः कर्मस्व-
भावश्च ॥ १७ ॥

Minutest units (cells ?) into which all organs of the body are divided are known as *paramāṇus* and they cannot be counted because (1) they are extremely numerous (2) they are extremely subtle and (3) they are beyond sensory perception. *Vāyu* and the specific nature of the results of the past action associated with these *paramāṇus* are responsible for their union and disjunction. [17]

Paramāṇus of the body are beyond sensory perception of ordinary man. They can be perceived by sages only.

For the union of *paramāṇus*, *vāyu* is responsible when it is associated with *karman* (results of past action) which is favourable for such union. Similarly, their disjunction takes place (i.e. the body cells undergo destruction) when *vāyu* is associated with such *karman* as is not favourable for this union.

Knowledge of organs of body-Salvation :

तदेतच्छरीरं संस्थातमनेकावयवं दृष्टमेकत्वेन सङ्गः, पृथक्त्वेनापवर्गः ।
तत्र प्रधानमसत्त्वं सर्वसत्त्वानिवृत्तौ निवर्तते इति ॥ १८ ॥

When this body composed of various parts is perceived as one unit, this leads to attachment; when the various composing factors are viewed as separate from each other, this leads to salvation. Of the various parts, the Soul is unattached. When He dissociates Himself from all (favourable and unfavourable) manifestations, there is salvation (from the worldly affairs). [18]

The body is composed of many parts. In spite of this, if because of ignorance any body considers this as one unit only, then this leads to *sanga* (attachment) because, in view of this he tries for its well being and during this he himself gets victimised by the sense of attachment and

hatred. When the body is viewed to be composed of several parts then there will be no attachment and he will neither make efforts for the well being of the body nor there will be any attachment or hatred for such substance as are responsible for its well being. In the absence of any initiation, the individual will not be afflicted with sins or virtues leading to salvation.

तत्र श्लोकै—

शरीरसंख्यां ये वेद सर्वाचयवशो भिषक् ।
 तदज्ञाननिमित्तेन स मोहेन न युज्यते ॥ १९ ॥
 अमूढो मोहमूलैश्च न दोषैरभिभूयते ।
 निर्दोषो निःस्पृहः शान्तः प्रशास्यत्यपुनर्भवः ॥ २० ॥

The physician who knows the number of various components of the body in their entirety, does not associate himself with illusion which is caused by ignorance. Because of the absence of illusion he does not get afflicted with the faults (of such illusion) and being free from faults, he becomes unattached and peaceful which leads to the prevention of his rebirth. [19-20]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते शारीरस्थाने शरीरसंख्याशारीरं
 नाम सप्तमोऽच्यायः ॥ ७ ॥

Thus ends the seventh chapter of *Śārira* Section on “the Enumeration of Organs as conducive to the understanding of the human body” of Agniveśa’s work as redacted by Caraka [7]

CHAPTER VIII

METHOD OF PROCREATION

आष्टमोऽस्यायः

अथातो जातिसूत्रीयं शारीरं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on "The Method of Procreation" as conducive to the understanding of the human body.

Thus said Lord Atreya. [1-2]

Method of procreating excellent progeny :

खीपुंसयोरव्यापश्चुक्षोणितगर्भाशययोः श्रेयसी प्रजायिच्छतोस्तदर्थं-
भिनिर्वृत्तिकरं कर्मोपदेश्यामः ॥ ३ ॥

Now we shall explain the method by which the man with unimpaired semen and, the woman with unimpaired ovum and uterus desirous of an excellent progeny can achieve their objective. [3]

According to the normal, syntactical rules, the term 'sukra' (meaning semen) should have been placed after 'sonita' (ovum) and 'garbhā-saya' (uterus) in the text. This order has been changed and the term 'sukra' has been placed in the beginning because of its having the least number of syllables. The term 'prajā' means children implying both male and female.

Procreation of male and female progeny endowed with excellent qualities is always desired by parents. Sons and daughters who are not endowed with such excellent qualities or eunuchs are not wanted. The method of procreating sons and daughters of excellent qualities is described in this chapter.

Some scholars hold the view that the term 'prajā' stands for a male child only as the method for procreating a male child of excellent qualities forms by and large the subject matter of this chapter.

Preparatory measures :

अथात्येतो खीपुंसो ष्ठेहस्वेदाभ्यामुपपाद्य, वमनविरेचनाभ्यां संशोध्य,
क्रमेण प्रकृतिमापादयेत् । संशुद्धौ चास्थापनानुवासनाभ्यामुपाचरेत् ; उपा-
चरेच्च मधुरौषधसंस्फुताभ्यां घृतक्षीराभ्यां पुरुषं, स्त्रियं तु तैलमालाभ्याम् ॥ ४ ॥

The couple should be treated with oleation and sudation therapies and thereafter *doṣas* from their body should be eliminated by the administration of *vamana* (emesis) and *virecana* (purgation) therapies. Then the patient should be brought to normalcy in stages (by administering prescribed diet, viz. *peya* or thick gruel etc.). After the elimination of *doṣas*, the couple should be administered *asthapana* (corrective) and *anuvasana* (unctuous) types of enema. Man should also be administered ghee and milk boiled with drugs having sweet taste. The woman should be given til oil and *māṣa* (*Phaseolus radiatus* Linn.) to eat. [4]

In para-3 above, it is stated that for the procreation of progeny having excellent qualities, man should have unaffected semen and the woman should have unimpaired ovum and uterus. Even such men and women desirous of having progeny of excellent qualities should be administered elimination therapies described in this para, viz. oleation etc.

Drugs having sweet taste should be administered to a man because such drugs promote the quantity of semen. Some scholars suggest that drugs belonging to *jīvanya* (vitalizing) group should also be administered to men.

Cohabitation :

ततः पुष्पात् प्रभृति त्रिरात्रमासीत् ब्रह्मचारिण्यधःशायिनी, पाणिभ्याम-
ञ्चमर्जरपात्राद्गुज्जाना, न च काञ्चिन्मृजामापद्येत् । ततश्चतुर्थेऽहन्येनामुत्साद्य
सशिरस्कं खापयित्वा शुक्रानि वासांस्याच्छादयेत् पुरुषं च । ततः शुक्रवाससौ
स्मग्विणौ सुमनसावन्योन्यमभिकामौ संवसेयातां ज्ञानात् प्रभृति युग्मेष्वहःसु
पुत्रकामौ, अयुग्मेष्वहःसु दुहितकामौ ॥ ५ ॥

न च न्युज्जां पार्श्वगतां वा संसेवेत् । न्युज्जाया वातो बलवान् स योनिं
पीडयति, पार्श्वगताया दक्षिणे पार्श्वे श्लेष्मा स च्युतः पिदधाति गर्भाशयं, वामे
पार्श्वे पित्तं तदस्याः पीडितं विदहति रक्तं शुक्रं च, तस्मादुत्ताना बीजं गृहीयतात्;
तथाहि यथास्थानमवतिष्ठन्ते दोषाः । पर्यस्ते चैनां शीतोदकेन परिषिञ्चेत् ।
तत्रात्यशिता क्षुधिता पिपासिता भीता विमनाः शोकार्ता कुद्वाऽन्यं च पुमां-
समिच्छन्ती मैथुने चातिकामा वा न गर्भं धत्ते, विगुणां वा प्रजां जनयति । अति-
बालामतिवृद्धां दीर्घरोगिणीमन्येन वा विकारेणोपसृष्टां वर्जयेत् । पुरुषेऽप्येत
एव दोषाः । अतः सर्वदोषवर्जितौ स्त्रीपुरुषौ संसृजयेयाताम् ॥ ६ ॥

संजातहर्षीं मैथुने चानुकूलाचिष्टगन्धं स्वास्तीर्णं सुखं शयनमुपकल्प्य
मनोङ्गं हितमशनमशित्वा नात्यशितौ दक्षिणपादेन पुमानारोहेत् वामपादेन
रुपी ॥ ७ ॥

तत्र मन्त्रं प्रयुजीत—“अहरसि आयुरसि सर्वतः प्रतिष्ठाऽसि धाता त्वा
ददतु विधाता त्वा दधातु ब्रह्मवर्चसा भव” इति ।

“ब्रह्मा बृहस्पतिर्विष्णुः सोमः सूर्यस्तथाऽश्विनौ । भगोऽथ मित्रावरुणौ
वोरं ददतु मे सुतम्” इत्युक्त्वा संवसेयाताम् ॥ ८ ॥

For three days, right from the day of onset of menstruation, the woman should observe celibacy, sleep on the ground, take food from an unbroken vessel kept in her hands and should never clean her body. On the fourth day she should use unction, take head-bath and wear white apparel. Her husband should also adopt the same regimen. Both of them wearing white apparel and garlands, with happiness of mind and having attraction for each other, should enter into cohabitation. If a male child is desired, they should meet on the even days and if a female child is desired, they should meet on the odd days.

During cohabitation, the woman should not assume a prone posture nor should she be in her sides. If she maintains a prone posture during cohabitation, then *vata* gets aggravated and afflicts her uterus. If she remains in her right side during cohabitation then *kapha* which remains in that side gets displaced and blocks the uterus. Left side is the abode of *pitta*. If pressure is put on that side during cohabitation, then the ovum and the sperm get burnt up. Therefore, the woman should receive seed while lying on her back side. In this posture *dosas* remain in their respective sites. After the completion of intercourse she should be sprinkled with cold water. Intake of food in excess, fasting, thirst, fear, dejection, grief, anger, desire for another man, excessive desire for intercourse—these factors in a woman during cohabitation prevents conception or produces a deformed child. One should not indulge in cohabitation with a woman who is too young or too old, who is suffering from a chronic disease or afflicted with any other disease. Similar are the defects in a male. Therefore, the couple should be free from all such defects before they enter into cohabitation.

The couple having excitement for cohabitation should take relishing and wholesome food (not in excess), and arrange for bed which is pleasant, scented, well spread and

comfortable; man should ascend this bed with his right leg first and the woman with her left leg first.

Then this *mantra* (incantation) should be recited. “अहिरसि० सुतम्” (You are the serpent god, you are the life, you constitute the support of everything. May god Dhāṭṛ release you, may god Vidyāṭṛ maintain you. Be equipped with *brahmavarcas*, my Brahmā, Bṛhaspati, Viṣṇu, Soma, Sūrya, the Aśvins, Bhaga, Mitra and Varuṇa provide me with a brave male child.

Having recited this *mantra*, they suould enter into cohabitation.] 5-8]

Intercourse during even days produces a male child and during odd days a female child. These even and odd days are to be counted from the first day of the menstruation and not from the date of purificatory bath. Of course, sexual intercourse is prescribed only after purificatory bath. It is stated in Hārita, “Cohabitation during 4th, 6th, 8th and 12th days produces a son endowed with good qualities and long life; during 5th, 9th and 11th days, a daughter endowed with good qualities and cohabitation during 7th day produces an unfortunate daughter.

Regimens for a son of excellent qualities :

सा चेदेवमाशासीत—वृहन्तमवदातं हर्यक्षमोजस्त्वनं शुचि॒ सत्त्वसंपन्नं पुत्रमिच्छेयमिति, शुद्धस्तानात् प्रभृत्यस्यै मन्थमवदातयवानां मधुसर्पिर्भ्यौ संसूज्य श्वेताया गोः सरूपवत्सायाः पयसाऽङ्गोऽय राजते कांस्ये वा पात्रे काले काले सप्ताहं सततं प्रयच्छेत् पानाय । प्रातश्च शालियवान्विकारान् दधिमधु-सर्पिर्भिः पयोभिर्वा संसूज्य भुजीत, तथा सायमवदातशरणशयनासनपानबसन-भूषणा च स्यात् । सायं प्रातश्च शश्वच्छुतं महान्तं वृषभमाजानेयं वा हरि-चन्दनाङ्गदं पश्येत् । सौम्याभिश्चैनां कथाभिर्मनोनुकूलाभिरुपासीत । सौम्याकृतिवचनोपचारचेष्टांश्च खीषुरुषानितरानपि चेन्द्रियार्थानवदातान् पश्येत् । सहचर्यश्चैनां प्रियहिताभ्यां सततमुपचरेयुस्तथा भर्ता । न च मिश्रीभावमाप-घेयातामिति । अनेन विधिना सप्तरात्रं स्थिस्त्वाऽष्टमेऽहन्यामुत्याद्धः सशिरस्कं सह भर्ता अहतानि वस्त्राण्याच्छादयेदवदातानि, अवदाताश्च स्त्रजो भूषणानि च विभृयात् ॥ ९ ॥

If she desires to have a son with a massive body, white complexioned with the strength like that of a lion, with vigour, purity and strong mind, then from the first day of her purificatory bath (after the menstruation) she should be given *manhaṭa* (thin gruel) prepared with white barley by boiling it

with the milk of a white cow having a white calf and mixing it with ghee and honey in a silver or bronze vessel to drink every morning and evening continuously for one week. In the morning, she should take food preparation made of *sāli* rice or barley along with curd, honey, ghee or milk. In the evening she should resort to white apartment and use the bed sheet, drink, apparel and ornaments, all of white colour. In the morning and evening, she should continuously look at a white and corpulent bull or stallion (horse of high breed) or paste of white sandal wood. She should be entertained with pleasing and favourite stories. Men and women with good personalities, pleasing words and refined behaviour and actions, and other white things should form the objects of her vision as well as other senses. Her companions as well as her husband should always attend on her in a pleasing and favourable manner. They should however refrain from cohabitation during this period. After having adopted the above regimens for seven nights, she along with her husband should take a complete bath including the head and should wear white and untorn apparel as well as white garlands and ornaments. [9]

According to *Sāmudrika śāstra* (the science dealing with the determination of good or bad fortune of the individual depending upon various marks in his body), possession of gait, strength etc., of a lion is considered to be an excellent quality of man. So the desire of a woman to have a male child of such qualities is an ideal one.

Mantha (thin gruel) and *sāli* rice are to be taken separately in proper quantity at appropriate times.

Vedic rites for procreating a child of desired qualities :

तत ऋत्विक् प्रागुक्तरस्यां दिश्यगारस्य प्राग्प्रवणमुदक्प्रवणं वा प्रदेशम्-
भिसमीक्ष्य, गोमयोदकाभ्यां स्थरिडलमुपलिप्य, प्रोक्ष्य चोदकेन, वेदीमस्मिन्-
स्थापयेत् । तां पश्चिमेनाहृतवस्त्रसंचये श्वेतार्षभे वा उपजिज्ञ उपविशेद् ब्राह्मण-
प्रयुक्तः, राजन्यप्रयुक्तस्तु वैयाघे चर्मण्यानडुहे वा, वैश्यप्रयुक्तस्तु रौरवे वास्ते वा ।
तत्रोपविष्टः पालाशीभिरैङ्गुदीभिरौदुम्बरीभिर्माधूकीभिर्वा समिद्धिराग्नमुपसमा-
धाय, कुशैः परिस्तीर्य, परिधिभिश्च परिधाय, लाजैः शुक्लाभिश्च गन्धवतीभिः
सुमनोभिरूपकिरेत् । तत्र प्रणीयोदपात्रं पवित्रपूतमुपसंस्कृत्य सर्पिराज्यार्थं यथो-
क्तवर्णानाजानेयादीन् समन्ततः स्थापयेत् ॥ १० ॥

ततः पुत्रकामा पश्चिमतोर्जिन दक्षिणतो ब्राह्मणमुपविश्यान्वालभेत सह
भर्त्रा यथेष्टुं पुत्रमाशासाना । ततस्तस्या आशासानाया ऋत्विक् प्रजापतिमभि-

निर्दिश्य योनौ तस्याः कामपरिपूरणार्थं काम्यामिष्टि निर्वर्तयेद् 'विष्णुयोनिं कल्पयतु' इत्यनयन्वा । ततश्चैवाऽयेन स्थालीपाकमभिधार्य त्रिजुहुयाद्यथाम्नायम् । मन्त्रोपमन्त्रितमुदपात्रं तस्यै दद्यात् सर्वोदकार्थान् कुरुष्वेति । ततः समाप्ते कर्मणि पूर्वं दक्षिणापादमभिहरन्ती प्रदक्षिणमग्निमनुपरिकामेत् सह भर्त्रा । ततो ब्राह्मणान् स्वस्ति वाच्यगित्वा उज्ज्यशेषं प्राशीयात् पूर्वं पुमान्, पश्चात् स्त्री; न चोच्छिष्टमवशेषयेत् । ततस्तौ सह संवसेयातामप्त्रात्रं, तथाविधपरिच्छदावेव च स्यातां, तथेष्टुपुत्रं जनयेताम् ॥ ११ ॥

या तु स्त्री श्यामं लोहिताक्षं व्यूढोरस्कं महावाहूं च पुत्रमाशासीत, या वा कृष्णं कृष्णमृदुदीर्घकेशं शुक्राक्षं शुक्रदन्तं तेजस्विनमात्मवन्तम्; एष एवान्योरपि होमविधिः । किन्तु परिवर्हों वर्णवर्जं स्यात् । पुत्रवर्णानुरूपस्तु यथाशीरेव तयोः परिवर्होऽन्यः कार्यः स्यात् ॥ १२ ॥

शूद्रा तु नमस्कारमेव कुर्यात् (देवाग्निद्विजगुरुतपस्त्रिसिङ्गेभ्यः) ॥१३॥

या या च यथाविधं पुत्रमाशासीत तस्यास्तस्यास्तां तां पुत्राशिष्मनुनिशम्य तांस्ताज्ञनपदान्मनसा उनुपरिक्रामयेत् । ततो या या येषां येषां जनपदानां मनुष्याणामनुरूपं पुत्रमाशासीत सा सा तेषां तेषां जनपदानां मनुष्याणामाहारविहारोपचारपरिच्छदाननुविधत्स्वेति वाच्या स्यात् । इत्येतत् सर्वं पुत्राशिषां समद्विकरं कर्म व्याख्यातं भवति ॥ १४ ॥

Then the priest should select a suitable place. The place should have sloping towards the east or the north. This place should be smeared with cow dung mixed with water. There, an altar should be erected after the sprinkling of water. He (the priest) should thereafter have his seat towards the west of the altar. If he is invited by a *brāhmaṇa*, he should sit on a cushion prepared of un torn (fresh) clothes or the hide of a white bull. If he is invited by a *kṣatriya*, he should sit on the hide of a tiger or a bullock. If invited by a *vaiśya* he should sit on the hide of an antelope or a he-goat.

The priest should then offer the wood of *palāśa* (*Butea monosperma* Kuntze), *īngudi* (*Balanites aegyptica* Delile), *udumbara* (*Ficus recemosa* Linn.), or *madhuka* (*Madhuka indica* J. F. Gmel.) as oblation to the Fire. Then the altar should be covered with *kuśa* (*Desmostachya bipinnata* Stapf.) and it should be bound by the four big sticks of *palāśa* (*Butea monosperma* Kuntze). The priest should then bestrew fried paddy, white and fragrant flowers. Then he should take the sacred water pot, purified with sacred *mantras* and get the ghee purified for

the sake of oblation and then bring the steed etc., as described above to be placed all around the altar.

The woman along with her husband desirous of having such a son should sit towards the west of the sacred fire and towards the south of the priest, should perform the sacred rites and should express her desire to have the progeny of excellent quality.

After she has expressed her desire, the priest should respectfully remember Prajāpati and with a view to fulfilling the desired object in her womb, should offer *Kāmya* type of oblation (to the fire), reciting the *mantra* "विष्णुर्योनि कल्पयतु" (May Lord Viṣṇu fulfil her desire in the womb)—*Rgveda* 10 : 148 : 8.

विष्णुर्योनि कल्पयतु त्वष्टा रूपाणि पिशतु ।

आ सिंचतु प्रजापतिर्धर्ता गर्भं दधानु ते ॥

Rgveda, X : 184 : 1

[May Lord Viṣṇu prepare the womb; May Lord Tvaṣṭṛ make the respective forms; May Lord Prajāpati spray the sperm; May Lord Dhātṛ protect your (wife's) womb].

Immediately thereafter the priest should prepare the *sthāli paka* (*caru* i.e. rice cooked with ghee) and offer it three times as oblation to the fire as prescribed in the Vedas. He should then hand over the water vessel impregnated with *mantras* to her and say "You should use this for all purposes for which water is required. On completion of these sacred rites, she should take a round of the sacred fire along with her husband with her right step preceding the other one. Then other *brahmaṇas* assembled there should recite auspicious hymns. Thereafter the husband should partake the remaining *caru* and the wife should follow. They should not leave any portion of this *caru*. Thereafter they should have cohabitation for eight nights. They should continue to use the same type of apparel in order to procreate a son of desired qualities.

A woman who desires to have a son of bluish complexion, red eyes, elevated chest and long arms or who desires to have a son of black complexion having black soft and

long hair, white eyes (irish), white teeth, brilliance and self control should perform the same sacred rite as mentioned above. But the variation will be only with regard to the colour of the apparel used. Whatever colours she desires to have in her child, she should use apparel of the same colour.

A woman of *śūdra* caste should offer only obeiscence to the gods, fire, *brāhmaṇas*, preceptors, ascetics and *siddhas* (those who have attained perfection).

The woman should be made to have a mental visit to the country of her choice according as she wishes her son to resemble. She should also be asked to adopt the food, regimen, manners and apparel of the people of those countries whom she wishes her son to resemble.

Thus the regimens to be followed by a woman desirous of having a son of her choice have been explained. [10-14]

Other factors responsible for the Complexion of progeny :

न खलु केवलमेतदेव कर्म वर्णवैशेष्यकरं भवति । अपि तु तेजोधातुर-
प्युदकान्तरिक्षधातुप्रायोऽवदातवर्णकरो भवति, पृथिवीवायुधातुप्रायः कृष्णवर्ण-
करः, समसर्वधातुप्रायः यामवर्णकरः ॥ १५ ॥

It is not that only the above mentioned factors are responsible for beggting a child of a specific colour. Even the *agni mahābhūta* when associated with *jala* and *akāsa mahābhūtas* also produce white complexion. Associated with *prthvi* and *vāyu* it produces black complexion and with all the *maha-bhūtas* in equal proportion, it produces blue complexion. [15]

Mental faculty of the progeny :

सत्त्ववैशेष्यकराणि पुनस्तेषां तेषां प्राणिनां मातापितृसत्त्वान्यन्तर्वर्त्त्वाः
श्रुतयश्चाभीक्षणं स्वोचितं च कर्म सत्त्ववैशेषाभ्यासश्चेति ॥ १६ ॥

The following factors determine the state of the mental faculty of the child :

1. The mental faculty of parents;
2. the sounds (music etc.,) heard repeatedly by the pregnant woman;
3. actions performed by the embryo in his previous life;
and

4. frequent desires for a particular type of mental faculty by the progeny in his previous life. [16]

Whatever offerings, studies and penance were habitually performed in the past life, the same habit automatically reflects itself in the current life of an individual.

Importance of purification of body of the couple :

यथोक्तेन विधिनोपसंस्कृतशरीरयोः स्त्रीपुरुषयोर्मिश्रभावमापन्नयोः शुक्रं शोणितेन सह संयोगं समेत्याव्यापन्नमव्यापन्नेन योनावनुपहतायामप्रदुषे गर्भाशये गर्भमभिनिर्वर्तयत्येकान्तेन । यथा—निर्मले वाससि सुपरिकल्पते रञ्जनं समुदितगुणमुपनिपातादेव रागमभिनिर्वर्तयति, तद्वत् ; यथा वा क्षीरं दध्नाऽभिषुतमभिपवणाद्विहाय स्वभावमापद्यते दध्निभावं, शुक्रं तद्वत् ॥ १७ ॥

When a man and woman cohabit after purifying their bodies according to the methods prescribed above, the unimpaired sperm unites with the unimpaired ovum in the unimpaired womb lying within an unimpaired genital tract. Then this definitely results in the formation of an embryo. This may be likened to the colouring of a spotless good cloth just by the touch of a colouring substance or to transformation of milk into curd after abandoning its previous form just by the addition of a few drops of curd. [17]

Sexual characteristics of progeny :

एवमभिनिर्वर्तमानस्य गर्भस्य स्त्रीपुरुषस्वे हेतुः पूर्वमुक्तः । यथा हि बीजमनुपत्तसुतं स्त्रां स्त्रां प्रकृतिमनुविधीयते ब्रीहिर्वा ब्रीहित्वं यवो वा यवत्वं तथा स्त्रीपुरुषावपि यथोक्तं हेतुविभागमनुविधीयते ॥ १८ ॥

Factors responsible for bringing about masculine or feminine characteristics in the embryo have already been described. As an unimpaired seed sown (in a fertile land) germinates bearing its own characteristic features e. g. paddy from paddy seed and barley from barley seed; so the male and female characteristics of the embryo are determined by those of the parents. (-cf. *Sarira*, 2 : 12). [18]

Pumsavana :

तयोः कर्मणा वेदोक्तेन विवर्तनमुपदिश्यते प्राग्व्यक्तीभावात् प्रयुक्तेन सम्यक् । कर्मणां हि देशकालसंपदुपेतानां नियतमिष्टफलत्वं, तथेतरेषामितरत्वम् । तस्मादापन्नगर्भां स्त्रियमभिसमीक्ष्य प्राग्व्यक्तीभावाद्गर्भस्य पुंसवनमस्यै

दद्यात् । गोष्टे जातस्य न्यग्रोधस्य प्रागुत्तराभ्यां शाखाभ्यां शुङ्गे अनुपहते आदाय द्वाभ्यां धान्यमाषाभ्यां संपदुपेताभ्यां गौरसर्पपाभ्यां वा सह दधि प्रक्षिप्य पुष्येण पिबेत्, तथैवापराञ्जीवकर्षभकापामार्गसहचरकल्कांश्च युगपदेकैकशो यथेष्टु वाऽप्युपसंस्कृत्य पयसा, कुड्यकीटकं मत्स्यकं चोदकाजलौ प्रक्षिप्य पुष्येण पिबेत्, तथा कनकमयान् राजतानायसांश्च पुरुषकानग्निवर्णोनुप्रमाणान् दधि पयस्यु-दकाजलौ वा प्रक्षिप्य पिबेदनवशेषतः पुष्येण, पुष्येणैव च शालिपिष्टस्य पञ्चमा-नस्योष्माणमुपाग्राय तस्यैव च पिष्टस्योदकसंसृष्टस्य रसं देहल्यामुपनिधाय दक्षिणे नासापुटे स्वयमासिञ्चेत् पिचुना । यच्चान्यदपि ब्राह्मणा ब्रूयुरासा वा स्त्रियः पुंसवनमिष्टं तच्चानुष्टेयम् । इति पुंसवनानि ॥ १९ ॥

The procedure prescribed in the *Vedas* (*āyurveda*) to be properly adopted to change the sex of the foetus before its manifestation is now being described. These methods, if adopted, in association with the excellence of locality and time produce the desired effects invariably. If there is any variation in these, the result becomes otherwise. Therefore, the pregnant woman should be administered *pumsavana* therapy (to beget a male child) before the manifestation of the sex of the foetus. These recipes are given below :

1. During the conjunction of *puṣya* star (with moon), she should be made to drink curd added with either two *dhānyamāṣas* (*Phaseolus radiatus* Linn.) or white variety of *sarṣapa* (mustard seeds) endowed with excellent qualities along with two intact (fresh) *śuhgas* (buds) from the eastern and northern side branches of a banyan tree grown in *goṣṭha* (cow-pan);

2. Similarly milk boiled with the paste of *jivaka* (?), *r̥ṣabhaka* (?), *apāmārga* (*Achyranthes aspera* Linn.) and *sahacara* (*Barleria cristata* Linn.)—all of them together or any one, two or three of them as per requirement should be given to the pregnant woman for the desired effect.

3. During *puṣya* conjunction, she should drink an *añjali* (a handful of) of water added with *kudyakītaka* (a type of small insect) or *masyaka* (a type of small fish).

4. During *puṣya* conjunction, she should be made to drink without leaving any remnant, an *añjali* (a handful of) of curd, milk or water added with a small and dazzling (fire coloured) statue of a man prepared of gold, silver or iron.

5. During *pūṣya* conjunction, she should inhale the steam coming out of the paste of *sāli* rice during roasting while sitting on *dehali* (threshold) and she herself should drop with the help of a cotton swab in her right nostril, the juice extracted from the same paste of *sāli* rice after adding water into it.

In addition to the above, other therapies as prescribed by *brahmaṇas* and saintly ladies for *pūṁsavana* (to beget a male child) should also be adopted.

Thus ends the *pūṁsavana* rites. [19]

Predominance of the fraction of ovum and sperm in the formation of an embryo was described above as a factor responsible for the production of a female and male child respectively. In this paragraph the vedic rites to be observed to get a male child are described.

The embryo itself gets conspicuously manifested during the second month of pregnancy—C.f. *Sārira*, 4 : 10. But during the third month all the organs of the embryo become conspicuously manifested—c.f. *Sārira*, 4 : 16—and therefore *pūṁsavana* therapy to get a male child should be administered during the first two months of pregnancy.

If the *pūṁsavana* therapy is administered in improper place and time, this leads to harmful effects.

In the first recipe for *pūṁsavana* described above *śūngas* (buds) are required to be collected from the eastern or northern side branches of a banyan tree which has grown in a cow pan. Specific action produced by the drugs collected from such selected places do not have any rational basis as such. We have only to depend on verbal testimony in such cases.

Kuṭyakiṭaka type of insect is commonly known as *kavacīgaṇā*. Some people use *jyeṣṭhi* type of insect as *kudiyakiṭa*. In this connection Jātūkarāṇa has prescribed the use of *kudiyamatsya* which is known as *jyeṣṭhi* in the western region.

In the fifth recipe, the pregnant woman is asked to take the inhalation therapy, while sitting on the threshold. A similar statement is also found in the work of Jātūkarāṇa. But some scholars hold the view that the head of the lady should be made to rest over the threshold during the administration of inhalation therapy and she should not sit over it.

Measures for maintenance of pregnancy :

अत ऊर्ध्वं गर्भस्थापनानि व्याख्यास्यामः—ऐन्द्री ब्राह्मी शतधीर्या सहस्र-
धीर्याऽमोघाऽव्यथा शिवाऽरिष्टा वात्यपुष्टी विष्वक्सेनकान्ता चेत्यासामोष-
धीनां शिरसा दक्षिणेन वा पाणिना धारणं, एताभिश्वैव सिद्धस्य पर्यासः सर्पिषो
वा पानम्, एताभिश्वैव पुष्ये पुष्ये स्नानं, सदा च ताः समालभेत । तथा

सर्वासां जीवनीयोक्तानामोषधीनां सदोपयोगस्तैस्तैरूपयोगचिधिभिः । इति गर्भ-स्थापनानि व्याख्यातानि भवन्ति ॥ २० ॥

Hereafter we shall describe the measures which help in the maintenance of pregnancy.

1. *Aindri* (*Citrulus colocynthis* Schrad) 2. *brahma* (*Bacopa monnieri* Pennel) 3. *śatavīryā* (*Cynodon dactylon* Pers.) 4. *sahasra-viryā* (a variety of *dūrvā*) 5. *amongha* or *pāṭala* (*Stereospermum suaveolens* DC.) 6. *avyathā* or *guduci* (*Tinspora cordifolia* Miers) 7. *śiva* (*Terminalia chebula* Linn.) 8. *ariṣṭā* (*Picrorhiza kurroa* Royle ex Benth) 9. *Vātyapuṣpi* or yellow variety of *balā* (*Sida cordifolia* Linn.), 10. *Viśvaksenākānta* or *priyaṅgu* (*Callicarpa macrophylla* Vahl.)—all these medicines should be worn in the form of a talisman) in the head or right hand (of the pregnant woman) and milk or ghee boiled with these drugs should be taken by her. She should take bath in water boiled with these drugs during *puṣya* conjunction. She should also touch these drugs.

In the above manner all drugs included under *jivanīya* group—vide *Śūtra*, 4 : 8—should always be used by her.

Thus measures which help in the maintenance of pregnancy are described. [20]

Factors injurious to pregnancy :

गर्भोपघातकरास्त्वमें भावा भवन्ति; तथा—उत्कटचिषमकठिनासन-सेविन्या वातमूत्रपुरीषवेगानुपरुद्धत्या दारणानुचितव्यायामसेविन्यास्तीक्ष्णो-ज्ञातिमात्रसेविन्याः प्रमिताशनसेविन्या गर्भो म्रियते उन्तः कुश्मः, अकाले वा स्नासते, शोषो वा भवति; तथा उभित्वात्प्रपीडनैः श्वभ्रकूपप्रपातदेशावलोकनैर्वर्द्धीक्षणं मातुः प्रपतत्यकाले गर्भः, तथा उभित्वात्संक्षोभिभिर्यानैर्यनेन, अग्निया-तिमात्रश्रवणैर्वा । प्रततोत्तानशायिन्याः पुनर्गर्भस्य नाभ्याश्रया नाडी करण्ठमनु-वेष्ट्यति, विवृतशायिनी नक्तंचारिणी चोन्मत्तं जनयति, अपस्मारिणं पुनः कलि-कलहशोला, व्यवायशीला दुर्वपुष्पमहीकं स्वैणं वा, शोकनित्या भीतमपचितम-ल्पायुषं वा, अभिध्यात्री परोपतापिनमीर्युं स्वैणं वा, स्तेना त्वायासवहुलमति-द्रोहिणमकर्मशीलं वा, अमर्पिणी चण्डमौषधिकमसूयकं वा, स्वप्रनित्या तन्द्रा-लुमबुधमल्पार्ग्नि वा, मद्यनित्या पिपासालुमल्पस्मृतिमनवस्थितचित्तं वा, गोधा-मांसप्राया शार्करिणमश्मरिणं शनैर्मेहिणं वा, वराहमांसप्राया रक्ताक्षं क्रथनमति-परुषरोमाणं वा, मत्स्यमांसनित्या चिरनिमेषं स्तब्धाक्षं वा, मधुरनित्या प्रमेहिणं

मूकमतिस्थूलं वा, अम्लनित्या रक्तपित्तिनं त्वगक्षिरोगिणं वा, लवणनित्या शीघ्र-
वलीपलितं खालित्यरोगिणं वा, कटुकनित्या दुर्बलमल्पशुक्रमनपत्यं वा, तिक्क-
नित्या शोषणमबलमनुपचितं वा, कषायनित्या इयावमानाहिनमुदावर्तिनं वा,
यद्यच्च यस्य यस्य व्याधेनिदानमुक्तं तत्तदासेवमानाऽन्तर्वर्त्ती तन्मित्तविकार-
बहुलमपत्यं जनयति । पितृजास्तु शुक्रदोषा मातृजैरपचारैव्याख्याताः । इति गर्भो-
पद्यातकरा भावा भवन्त्युक्ताः । तस्मादहितानाहारविहारान् प्रजासंपदमिच्छन्ती
रुही विशेषेण वर्जयेत् । साध्वाचारा चात्मानमुपचरेद्दिताभ्यामाहारविहारा-
भ्यामिति ॥ २१ ॥

The following factors cause impairment or pregnancy :

1. (a) Resorting to seats which are uncomfortable, irregular and high;
- (b) inhibition of the urges of flatus, micturition and defecation;
- (c) resorting to difficult and unsuitable exercises; and
- (d) intake of sharp and hot food and food in excessive quantity or in less quantity.

The above mentioned factors lead either to the death of the foetus inside the uterus, abortion or cachexia of the foetus.

2. (a) Injury or pressure frequently;
- (b) frequently looking inside abysses, deep wells and place of water fall;
- (c) travelling in the conveyance which is excessively uncomfortable (jerky); and
- (d) hearing of unendearing sounds in excess.

If the expectant mother resorts to above mentioned factors, this results in abortion.

3. *Constantly sleeping in her back*—By this the cord attached to the umbilicus of the foetus gets twisted around the neck.
4. *Sleeping in open air and moving at night alone*—This results in the production of an insane progeny (insanity is caused by the attack of evil spirits which get an access to the mother's body conveniently in such situations).
5. *Resorting to vocal abuses and physical assaults*—They make the progeny epileptic.
6. *Habitually resorting to sexual intercourse*—It makes the progeny physically illformed, shameless and subjugated to women.

7. *Constantly given to grief*—This makes the progeny fearful, thin and short lived.
8. *Thinking ill of others*—This makes the offspring anti social, envious and subjugated to women.
9. *Stealing (others property)*—This makes the offspring exceedingly lazy, malicious and of inactive disposition.
10. *Resorting to anger*—This makes the offspring fierceful, deceitful and jealous.
11. *Constantly given to sleep*—This makes the offspring drowsy, dull and deficient in digestive power.
12. *Addiction to wine*—This makes the offspring constantly thirsty, short of memory and fickle minded.
13. *Addiction to the intake of inguana flesh*—This makes the offspring suffer from diabetes, stone in bladder and dribbling of urine.
14. *Addiction to the intake of pork*—This produces redness in eyes, sudden obstruction of respiration and excessive roughness of the hair of the offspring.
15. *Addiction to the intake of fish*—This causes delayed closure or non-closure of eyes.
16. *Addiction to the intake of sweet things*—This makes the offspring suffer from *prameha* (obstinate urinary disorder including diabetes), *mūka* (dumbness) and *atisthaulya* (excessive corpulence).
17. *Addiction to the intake of sour things*—This makes the offspring suffer from *raktapitta* (a disease characterized by bleeding from different parts of the body) and diseases of the skin and eyes.
18. *Addiction to the intake of salt*—This makes the offspring suffer from early onset of wrinkles in the skin, graying of hair and baldness.
19. *Addiction to the intake of pungent things* : This makes the offspring weak, deficient in semen or issueless.
20. *Addiction to the intake of bitter things* : This makes the offspring cachectic, weak and emaciated.
21. *Addiction to the intake of astringent things* : This makes the offspring gray in complexion, constipated and *udāvartin* (tympanitic).

If the pregnant woman resorts to the regimens described as the causative factors for the various diseases, her offspring also predominantly suffers from the diseases caused by such etiological factors.

Defects in the offspring caused by the vitiation of the sperm of the father are to be described on the same line as those of the mother. Thus the factors responsible for the impairment of the pregnancy are described.

Thus the parents, more especially the mother, desirous of an offspring endowed with excellent qualities should refrain from unwholesome diet and regimens. They should perform virtuous acts and resort to diets and regimens which are beneficial. [21]

The term "garbha" (lit. meaning foetus), also implies a new born child. When a pregnant woman sleeps in open air and moves (alone) at night she is likely to be victimized by evil spirits and because of this the offspring gets afflicted with insanity.

Addiction to sweet things is described above (item—16) as a factor responsible for certain diseases in the offspring. But this excludes the use of milk (in spite of its sweetness), which is prescribed for a pregnant woman (—c.f. *Sārira*, 8 : 32) because of its wholesome effects.

The above factors responsible for the impairment of the pregnancy are of two categories. One category includes such impairments which are in accordance with the effects of the causative factors; e. g. drowsiness of the offspring by the excessive sleep of the pregnant mother; causation of *meha* (obstinate urinary disorders including diabetes) due to excessive intake of sweet things; and causation of *raklapitta* (a disease characterised by bleeding from different parts of the body) by the excessive intake of sour things. The second category includes such of the impairments as are at variance with the effects of the causative factors; e. g. causation *sarkarā* (gravels in urine) and *aśmarī* (stones in bladder) of the meat of inguana by a pregnant mother. Such manifestations are offspring due to the intake due to the specific action of the substances which serve as causative factors.

The above factors present in the father also cause the impairment of pregnancy, if they are resorted to (by him) before conception. This is caused by the vitiation of the sperm which later results in conception. In the mother, however these factors play their role both before and during pregnancy. Before pregnancy, they cause impairment of the foetus by vitiating the ovum which results in conception later. These factors have their effects on the foetus instantaneously after pregnancy.

Line of treatment of a pregnant woman:

व्याधीश्चास्या मृदुमधुरशिरशिरसुखसुकुमारप्रायैरौषधाहारोपचारैरुपचरेत्, न चास्या वमनविरेचनशिरोविरेचनानि प्रयोजयेत्, न रक्तमवसेचयेत्, सर्वकालं च नास्थापनमनुवासनं वा कुर्यादन्यत्रात्यथिकाङ्गाधेः। अष्टमं मासमुपादाय वमनादिसाध्येषु पुनर्विकारेवात्ययिकेषु मृदुभिर्वमनादिभिस्तदर्थकारिभिर्वैपचारः स्यात्। पूर्णमिव तैलपात्रमसंक्षेमयताऽन्तर्वर्त्ती भवत्युपचर्या॥२२॥

A physician should treat her ailments by means of drugs, diet and other regimens which are mostly soft, sweet, cold, pleasant and tender. She should not be administered emesis; purgation, *śirovirecana* (therapy for the elimination of *doṣas* from the head) and *raktamokṣana* (blood-letting). Unless the disease is exceedingly serious, she should never be administered *asthāpana* (corrective type of enema) and *anuvāsana* (oleating type of enema). Emesis etc., may however, be given to the pregnant woman after the eighth month of pregnancy, if there is any serious emergency. But these therapies or such others having similar action should be of very mild nature. A pregnant woman is to be treated very cautiously as if one is walking with a pot full of oil, in hand without letting a drop to fall. [22]

Drugs to be used for emetic therapy etc., for the pregnant woman should be of very mild nature and the therapy itself should be administered in a small quantity.

There are other therapies like *nīṣṭhivana* (spitting) and *phalavartī* (suppository) which also have the same effects as those of emesis and purgation respectively. Such therapies can also be administered to the pregnant woman during emergency.

Abortion :

सा चेदपचाराद् इयोन्निषु वा मासेषु पुष्पं पश्येन्नास्या गर्भः स्थास्यतीति विद्यात्; अजातसारो हि तस्मिन् काले भवति गर्भः॥ २३॥

If there is a flow of menstruation during the second or third month of pregnancy due to the use of unwholesome regimens, then one should conclude that the pregnancy will not be stable because during this period, the embryo lacks maturity. [23]

Miscarriage & its management :

सा चेच्चतुष्प्रवृत्तिषु मासेषु क्रोधशोकासूर्येष्यभियत्रासव्यवायव्यायामसंक्षेमसंधारणविषमाशनशयनस्थानक्षुतिपासातियोगात् कदाहाराद्वा पुष्पं पश्येत्,

तस्या गर्भस्थापनविधिमुपदेक्ष्यामः । पुष्पदर्शनादैवैनां ब्रूयात्—शयनं तावनम्-
दुसुखशिशिरास्तरणसंस्तीर्णमीषदवनतशिरस्कं प्रतिपद्यस्वेति । ततो यष्टीमधु-
कसर्पिभ्यां परमशिशिरवारिणि संस्थिताभ्यां पिञ्चुमाम्नाव्योपस्थसमीपे स्थापये-
त्तस्याः, तथा शतधौतसहस्रधौताभ्यां सर्पिभ्यांमधोनामेः सर्वतः प्रदिहात्,
सर्वतश्च गव्येन चैनां पयसा सुशीतेन मधुकाम्बुना वा न्यग्रोधादिकषायेण वा
परिषेकयेदधो नामेः; उदकं वा सुशीतमवगाहयेत्, क्षीरिणां कषायद्रुमाणां च
स्वरसपरिपीतानि चेलानि ग्राहयेत्, न्यग्रोधादिशुङ्गासिद्धयोर्वा क्षीरसर्पिषोः
पिञ्चुं ग्राहयेत्, अतश्चैवाक्षमात्रं प्राशयेत्, प्राशयेद्रा केवलं क्षीरसर्पिः, पद्मोत्प-
लकुमुदकिञ्चलकांश्चास्यै समधुशर्करान् लेहार्थं दयात्, शुद्धाटकपुष्करवीजकशेरु-
कान् भक्षणार्थं, गन्धप्रियलघुसितोत्पलशालूकोदुम्बरशलादुन्यग्रोधशुङ्गानि वा
पाययेदेनामाजेन पयसा, पयसा चैनां चलातिवलाशालिपिएकेभुमूलकाकोलीशु-
तेन समधुशर्करं रक्तशालीनामोदनं मृदुसुरभिशीतलं भोजयेत्, लावकपिञ्चलकु-
रङ्गशम्वरशाहरिणैकालपुच्छकरसेन वा वृत्तसुसंस्कृतेन सुखशिशिरोपवातदे-
शस्थां भोजयेत्, क्रोधशोकायासव्यवायव्यायामेभ्यश्चाभिरक्षेत्, सौम्याभिश्चैनां
कथाभिर्मनोनुकूलाभिरूपासीत्; तथाऽस्या गर्भस्तिष्ठति ॥ २४ ॥

If there is bleeding from the genital tract during the fourth month of pregnancy or thereafter due to excess of anger, grief, envy, jealousy, fear, terror, cohabitation, exercise, jerk, suppression of the manifested urges, improper food, sleep and posture, hunger, thirst and intake of unwholesome food then following procedure should be adopted for the maintenance of pregnancy;

1. Immediately after the manifestation of bleeding she should be advised to lie down in such a position as would keep her head side downwards and legside upwards on the bed covered with a soft, soothing, comfortable and cooling bed-sheet,
2. Thereafter, a cotton swab dipped in ghee mixed with the powder of *yastimadhu* (*Glycyrrhiza glabra* Linn.) which are kept inside excessively cold water should be placed over the vagina.
3. Her entire body below the navel should be smeared with *śatadhauta-ghṛta* (ghee washed for one hundred times) and *sahasradhauta ghṛta* (ghee washed for one thousand times).
4. Her entire body below the navel should be sprinkled with excessively cold cow-milk, decoction of *yasthimadhu* and

the decoction prepared of *nyagrodha* (*Ficus bengalensis* Linn.) etc.

5. She should be bathed with cold water.
6. Cotton swabs dipped in the juice of *kṣirivṛkṣas* (trees bearing milk) and trees having astringent taste should be kept inside her vagina.
7. Cotton swabs dipped in the milk or ghee boiled with the *śunga* (bud) of *nyagrodha* etc., may also be kept inside the vagina.
8. She may be given the milk or ghee boiled with the bud of *nyagrodha* to be taken in the dose of an *akṣa* (12 ml.).
9. She may also be given milk or ghee alone.
10. Pollens of *padma* (*Nelumbo nucifera* Gaertn.), *utpalā* (*Nymphaea alba* Linn.) and *kumuda* (a variety of *utpalā*) along with honey and sugar may be given to her as a linctus.
11. She should eat *śīṅgātaka* (*Trapa bispinosa* Roxb.), seeds of *puṣkara* (*Nelumbo nucifera* Gaertn.) and *kaśeruka* (*Scirpus grossus* Linn. f.).
12. She may be given milk boiled with *priyaṅgu* (*Callicarpa macrophylla* Vahl.), blue variety of *utpalā* (*Nymphaea alba* Linn.), *śālāka* (rhizome of lotus), cut and dried pieces of tender fruits of *udumbara* (*Ficus racemosa* Linn.) and buds of *nyagrodha* (*Ficus bengalensis* Linn.) to drink.
13. She should be given to eat soft, fragrant and cold rice of red variety of *śāli* (*Oryza sativa* Linn.) along with honey and sugar mixed with the milk boiled with *bala* (*Sida cordifolia* Linn.), *atibala* (a variety of *bala*), roots of *śāli*, *śaṣṭika* (a variety of *śāli*) and *ikṣu* (*Saccharum officinarum* Linn.) and *kākoli* (?);
14. She should reside in a comfortable place having cold breeze and take the rice prepared of red variety of *śāli* (*Oryza sativa* Linn.) along with the meat soup of animals, viz. *lāva* (Common quail), *kapiñjala* (Gray partridge), *kuraṅga* (Roe deer), *śambara* (Indian sambar), *śāśa* (Rabbit), *harina* (Black buck), *eṇa* (Antelope) and *Kālapucchaka* (Black tailed deer) well seasoned with ghee.
15. She should refrain from anger, sorrow, exertion, sexual intercourse and exercise.

16. She should be entertained with talks which are gentle and pleasing to her mind.

The above measures help in maintaining pregnancy.[24]

Miscarriage caused by āma :

यस्याः पुनरामान्वयात् पुष्पदर्शनं स्यात्, प्रायस्तस्यास्तद्भीमपघातकरं भवति, विरुद्धोपक्रमत्वात्त्ययोः ॥ २५ ॥

If bleeding appears because of the factors which are simultaneously responsible for the formation of *āma*, this mostly leads to abortion because both of them (correction of bleeding and *āma* formation) requires mutually contradictory treatment. [25]

For the treatment of abortion, drugs which are *stambhaka* (retentive) are required to be used and they are normally cooling, soft and sweet and thus antagonistic to the treatment of *āma*. Thus the line of treatment of both these conditions are mutually contradictory.

Upavistaka and Nāgodara :

यस्याः पुनरुष्णतोक्षणोपयोगाद्गर्भिरया महति संजातसारे गर्भे पुष्पदर्शनं स्यादन्यो वा योनिस्त्रावस्तस्या गर्भो वृद्धिं न प्राप्नोति निःखुतत्वात्; स कालमवतिष्ठतेऽतिमात्रं, तमुपविष्टकमित्याचक्षते केन्द्रित । उपवासव्रतकर्मपरायाः पुनः कदाहारायाः स्नेहद्वेषिष्या वातप्रकोपणोक्तान्यासेवमानाया गर्भो वृद्धिं न प्राप्नोति परिशुष्कत्वात्; स चापि कालमवतिष्ठतेऽतिमात्रम्, अस्पन्दनश्च भवति, तं तु नागोदरमित्याचक्षते ॥ २६ ॥

Bleeding or any other form of uterine secretion may occur because of the intake of hot and sharp thing by a pregnant woman at a stage when the foetus is well formed and matured. Evidently this amounts to the loss of vital elements from its body through exudation, resulting in inhibition to the growth of foetus. Such a foetus remains inside the womb for a very long time. This condition is known by some as *upavistaka* (prolonged gestation).

If the pregnant women resorts to fast and observance of religious rites, if there is malnutrition, if she has aversion to the intake of fats and if she resorts to such factors as are aggravators of *vāta*, the foetus dries up and does not grow. Such a foetus remains in the womb of the mother for a very long period and there is no quickening of the foetus. This condition is known as *nāgodara* (elephantine gestation). [26]

Management of Upavistaka etc. :

नार्योस्तयोरुम्योरपि चिकित्सतविशेषमुपदेश्यामः—भौतिकजीवनीय-
बृहणीयमधुरवातहरसिद्धानां सर्पिणां पयसामामगर्भाणां चोषयोगो गर्भवृद्धिकरः;
तथा संभोजनमेतैरेव सिद्धैश्च वृतादिभिः सुभिक्षायाः, अभीक्षणं यानवाहनापमा-
र्जनावज्ञभमणैरुपपादनमिति ॥ २७ ॥

We shall now explain the specific treatment for both the above mentioned conditions of the pregnant woman.

1. She should use eggs, and ghee or milk boiled with *bhautika* (drugs which are antagonistic to evil spirits and germs like *vacā*) *guggulu*, *Mahāpaiśacika ghṛta*—vide *Cikitsā*, 9:45–48), *jivaniya* (vitilizing drugs) *bṛmhāṇiya* (drugs promoting the copulence of the body), *madhura* (drugs having sweet taste) and *vātahara* (drugs which alleviate *vāta*) drugs for the growth of the foetus.

2. She should take ghee etc., boiled with the above mentioned drugs when there is good appetite.

3. This should be supplemented by the frequent use of a (proper) conveyance for travelling, bath and pendiculation. [27]

The nature of the treatment of these conditions is different from those prescribed for other ailments of pregnancy. Treatment of different symptoms of those conditions like the absence of quickening in the foetus is also described here. Therefore the prescriptions here are described as specific treatment.

Treatment of Nāgodara :

यस्याः पुनर्गर्भः प्रसुप्तो न स्पन्दते तां श्वेनमत्स्यगवयशिखिताप्रचूडति-
त्तिरीणामन्यतमस्य सर्पिष्मता रसेन माषयूषेण वा प्रभूतसर्पिणा मूलकयूषेण
वा रक्तशालीनामोदनं मृदुमधुरशीतलं भोजयेत् । तैलाभ्यङ्गनं चास्या अभीक्षण-
मुदरवस्तिवंक्षणोरुकटीपार्वपृष्ठपदेशानीषुदुष्णोपचरेत् ॥ २८ ॥

The patient whose foetus being inactive does not quicken, should be given soft, sweet and cooling juice of red variety of *śāli* (*Oryza sativa* Linn.) along with the (1) meat soup of either of the animals and birds like falcon, fish, gayal cow, peacock, cock, and partridge mixed with ghee or with (2) soup prepared of *māṣa*. (*Phaseolus radiatus* Linn.) or radish mixed with ghee in large quantity. Her abdomen, lower abdomen, groin, thighs, waist, sides of chest and back should be frequently massaged with luke-warm oil. [28]

Treatment of ailments in eighth month :

यस्याः पुनरुदावर्तविवन्धः स्यादप्रमे मासे न चानुवासनसाध्यं मन्येत ततस्तस्यास्तद्विकारप्रशमनमुपकल्पयेत्त्रिरूहम् । उदावर्तो ह्युपेक्षितः सहसा सगर्भी गर्भिणी गर्भमथवाऽतिपातयेत् । तत्र वीरणशालिषष्टिककुशकाशेश्वरा-लिकावेतसपरिव्याधमूलानां भूतीकानन्ताकाइमर्यपरूपकमधुकमृद्धीकानां च पयसाऽर्थोदकेनोद्दूमय्य रसं प्रियालयभीतकमज्जतिलकलकसंप्रयुक्तमीषज्ज्वरण-मनत्युज्ञं च निरुहं दद्यात् । अपगतविवन्धां चैनां सुखसलिलपरिषिक्ताङ्गीं स्थैर्यकरमविद्विहिनमाहारं भुक्तवर्तीं सायं मधुरकसिङ्गेन तैलेनानुवासयेत् । न्युञ्जां त्वेनामास्यापनानुवासनाभ्यामुपचरेत् ॥ २९ ॥

If she suffers from *udāvarta* (an acute condition in the abdomen characterized by the retention of feces) along with constipation during the eighth month of pregnancy and because of the association of *ama* in this condition administration *anuvāsana basti* (unctuous enema) is considered to be unsuitable, then she should be given *nirūha* (corrective enema). If neglected, *udāvarta* causes the death of the pregnant woman along with the foetus or of the foetus alone.

A decoction should be prepared by boiling the roots of *viranya* (*Vetiveria zizanioides* Nash), *sāli* (*Oryza sativa* Linn.), *sastika* (a type of *sāli*), *kuśa* (*Desmostachya bipinnata* Staf), *kāśa* (*Saccharum spontaneum* Linn.), *ikṣuvālikā* (*Astercantha longifolia* Nees), *vetasā* (*Salix caprea* Linn.), *parivyādhī* (a type of *vetasā*), and *ōhūlikā* (*Trachyspermum ammi* Sprague), *ananta* (*Hemidesmus indicus* R. B.), *Kāśmarya* (*Gmelina arborea* Linn.), *parūṣaka* (*Grewia asiatica* Linn.) *madhuka* (*Glycyrrhiza glabra* Linn.) and *mṛdūkā* (*Vitis vinifera* Linn.), in milk added with water half in quantity. To this decoction, the paste of *priyāla* (*Buchanania lanzen* Spreng), pulp inside the seed of *bibhitaka* (*Terminalia belerica* Roxb.) and *tila* (*Sesnum indicum* Linn.) and small quantity of salt should be added. This mixture, when slightly warm, should be administered as *nirūha* (corrective enema).

After the constipation is relieved, her body should be washed with water of pleasant temperature and she should be given food which promotes stability and does not cause burning sensation. Thereafter, in the evening she should be administered *anuvāsana* (unctuous) type of enema prepared

by boiling oil with the group of sweet drugs. *Anuvāsana* and *nīrūha* types of enema should be administered to her while she is in a prone posture. [29]

Signs of foetal death :

यस्याः पुनर्गतिमात्रदोषोपचयाद्वा तीक्ष्णोषणातिमात्रसेवनाद्वा वातमूत्रपुरीषवेगविधारणैर्वा विषमाशा(स)नशयनस्थानसंपांडनाभियातैर्वा क्रोधशोकेर्ष्याभियत्रासादिभिर्वा साहसैर्वाऽपरैः कर्मभिरन्तःकुक्षेर्गर्भो म्रियते, तस्याः स्तिमितं स्तव्यमुदरमाततं शीतमश्मान्तर्गतमिव भवत्यस्पन्दनो गर्भः, शूलमधिकमुपजायते, न चाव्यः प्रादुर्भवन्ति, योनिर्न प्रस्थवति, अक्षिणी चास्याः स्त्रस्ते भवतः, तास्यति, व्यथते, भ्रमते, श्वसिति, अग्निवहुला च भवति, न चास्या वेगप्रादुर्भावो यथावदुपलभ्यते; इत्येवंलक्षणां स्त्रियं मृतगर्भेयमिति विद्यात् ॥ ३० ॥

The foetus may die inside the womb of the woman due to (1) excessive accumulation of *dosas*, (2) excessive intake of sharp and hot things, (3) suppression of the manifested urges of flatus, urine and stool, (4) maintenance of irregular posture in sitting, sleeping, standing, compression and injury, (5) anger, grief, envy, fear, terror etc., and (6) other rash acts. Then the following symptoms are manifested :

(1) Her abdomen becomes still, rigid, extended, cold and hard as if a stone is inside; (2) absence of quickening of the foetus; (3) manifestation of excessive pain; (4) nonmanifestation of labour pain; (5) absence of any secretion from the genital tract; (6) drooping of eyes; (7) fainting, getting agonizing pain, giddiness, stertorous breathing and excessive disliking for everything; and (8) improper manifestation of natural urges.

With these symptoms, the woman should be diagnosed as carrying a dead foetus in her womb. [30]

Management of a woman with dead foetus :

तस्य गर्भशल्यस्य जरायुप्रपातनं कर्म संशमनमित्याहुरेके, मन्त्रादिकमथर्ववेदविहितमित्येके, परिवृष्टकर्मणा शल्यहर्वा हरणमित्येके । व्यपगतगर्भशल्यां तु स्त्रियमामगर्भां सुरासीध्विग्रहमधुमदिगसवानामन्यतममग्रे सामर्थ्यतः पाययेद्वर्मकोष्ठुङ्गर्भर्थमर्तिविस्मरणार्थं प्रहर्षणार्थं च, अतः परं संग्रीणनैर्बलानुरक्षिभिरस्तेहसंप्रयुक्तैर्यवाग्वादिभिर्वा तत्कालयोगिभिराहारैस्पचरेद्विषयातुक्लेदविशेषणमात्रं कालम् । अतः परं स्त्रेहपानैर्वस्तिभिराहारविधिभिश्च दीपनीयजीवनीयबृहणीयमधुरवातहर्गसमाख्यातैरुपचरेत् । परिपक्गर्भशल्याः पुनर्विमुक्तगर्भशल्यायास्तदहरेव स्त्रेहोपचारः स्यात् ॥ ३१ ॥

To give relief to such a patient having a dead foetus in her womb, the following three methods are prescribed :

1. expulsion of the placenta;
2. recitation of *mantras* etc., as prescribed in the Atharva veda; and
3. removal of the dead foetus by surgical measure by an experienced surgeon.

(The dead foetus inside the womb may either be a mature or an immature one). If it is immature, then after the removal of the dead foetus, she should be given in the beginning to drink either of the *surā*, *sidhu*, *ariṣṭa*, *madhu*, *madira* and *asava* types of wine, in accordance with her capacity, for the purification of *kōṣṭha* (womb), removal of pain and production of the sense of exhilaration. Thereafter, till the excessive moisture in *dōgas* and *dhātus* are dried up, she should be immediately given *yavāgu* (gruel) etc; which are palatable and strength promoting, without of course adding any fat into it. Thereafter she should be treated with the administration of fats, enemata and different types of diet which are *dipaniya* (promoters of digestive power), *jivaniya* (promoters of vitality), *bṛmhaniya* (promoters of corpulence), *madhura* (sweet in taste), and *vātahara* (alleviators of *vāta*).

For a patient whose foetus had attained maturity before death, should be given fatty things on the very day immediately after the dead foetus is removed. [31]

Regimens for a pregnant woman :

परमतो निर्विकारमाप्याय्यमानस्य गर्भस्य मासे मासे कर्मोपदेश्यामः । प्रथमे मासे शङ्खिता चेद्वर्ममापन्ना क्षीरमनुपस्थृतं मात्रावच्छीतं काले काले पिवेत्, सामत्यमेव च भोजनं साथं प्रातश्च भुजीत; द्वितीये मासे क्षीरमेव च मधुरौषधसिद्धं; तृतीये मासे क्षीरं मधुसर्पिर्भासुपसंसृज्य; चतुर्थे मासे क्षीरनवनीतमश्नमात्रमशीयात्; पञ्चमे मासे क्षीरसर्पिः; षष्ठे मासे क्षीरसर्पिर्मधुरौषधसिद्धं; तदेव सप्तमे मासे । तत्र गर्भस्य केशा जायमाना मातुर्धिदाहं जनयन्तीति स्त्रियो भाषन्ते; तन्नेति भगवानात्रेयः, किन्तु गर्भोत्पीडनाद्वातपितृश्वेष्माण उरः प्राप्य विदाहं जनयन्ति, ततः कण्डूरूपजायते, कण्डूमूला च किञ्चिसावासिर्भवति । तत्र कोलोदकेन नवनीतस्य मधुरौषधसिद्धस्य पाणितलमात्रं काले कालेऽस्यै पानार्थं दद्यात्, बन्दनमूणालक्लैश्चास्याः स्तनोदरं विसृद्धीयात्; शिरीषधा-

तकोसर्षपमधुकचूर्णैर्वा, कुटजार्जकवीजमुस्तहरिद्राकलैर्वा, निम्बकोलसुरसम-
जिष्ठाकलैर्वा, पृष्ठतहरिणशशाहधिरयुतया त्रिफलया वा; करवीरपत्रसिङ्गे
तैलेनाभ्यङ्गः; परिषेकः पुनर्मालतीमधुकसिङ्गेनाम्भसा; जातकण्डूश्च कण्डूयनं
वर्जयेत्वग्भेदवैरूप्यपरिहारार्थम्, असहायां तु कण्डूमुमर्दनोद्धर्पणाभ्यां परि-
हारः स्यात्; मधुरमाहारजातं वातहरमल्पमस्तेहलवणमल्पोदकानुपानं च
भुजीत। अष्टमे तु मासे क्षोरयवागृं सर्पिष्मर्तीं काले काले पिवेत्; तत्रेति भद्र-
कायः, पैङ्गल्यावाद्यो ह्यस्या गर्भमागच्छेदिति; अस्त्वत्र पैङ्गल्यावाद्य इत्याह भग-
वान् पुनर्वसुरात्रेयः, त्वेवैतत्र कार्यम्; एवं कुर्वती ह्यरोगाऽरोग्यवलवर्णस्वरसं-
हननसंपदुपेतं ज्ञातीनामपि श्रेष्ठमपत्यं जनयति। नवमे तु खल्वेनां मासे मधु-
रौपधसिङ्गेन तैलेनानुवासये।। अतश्चैवास्यास्तैलात् पिचुं योनौ प्रणयेद्गर्भ-
स्थानमार्गस्तेहनार्थम्। यदिदं कर्म प्रथमं मासं समुपादायोपदिष्टमानवमान्मा-
सात्तेन गर्भिण्या गर्भसमये गर्भधारिणीकुक्षिकटीपार्व्वपृष्ठं मृदुभवति, वातश्चा-
नुलोमः संपद्यते, मूत्रपुरीषे च प्रकृतिभूते सुखेन मार्गमनुपद्यते, चर्मनखानि च
मार्दवमुपयान्ति, वलवर्णैः चोपचीयेते; पुत्रं चेष्टं संपदुपेतं सुखिनं सुखेनैषा
काले प्रजायत इति ॥ ३२ ॥

Now we shall describe the measures to be adopted month by month for the foetus which grows without any morbidity.

First month :

During the first month, if pregnancy is suspected then she should take milk in adequate quantity regularly. This milk need not be boiled with anything and should be taken when it is cold. She should take wholesome food morning and evening.

Second month :

During this month, milk should be given boiled with drugs having sweet taste.

Third month :

During this month milk mixed with honey and ghee should be given.

Fourth month :

During this month milk should be given along with butter in one *karṣa* (12 g) dose.

Fifth month :

During this month, ghee taken out directly from milk (without subjecting it to fermentation leading to the formation of curd) should be given to her.

Sixth month :

During this month, ghee taken out directly from milk and boiled with *madhurausadhis* (certain selected drugs having sweet taste) should be given.

Seventh month :

During this month she should be given the potion prescribed for sixth month.

According to the notion commonly prevalent among women, the mother during this month gets burning sensation (in the chest) because of the growth of hair in the foetus. But this is not correct according to Lord Ātreya. According to him, three *dosas* viz. *vata*, *pitta* and *kapha* get into the chest because of the pressure of the foetus and this causes burning sensation there which leads to itching resulting in the formation of *kikkisa* (*linea albicantes* or white abdominal lines seen after pregnancy). For the management of such a condition the following therapies are prescribed.

1. She should be made to drink regularly one *tola* (12 g) of butter boiled with *madhurausadhi* (certain selected drugs having sweet taste) along with the decoction of *kola* (*Zizyphus jujuba Lam.*)

2. Her breasts and abdomen should be anointed with (i) the paste of *candana* (*Santalum album Linn.*) and *mṛṅala* (lotus stalk), (ii) powder of *śiriṣa* (*Albizia lebbeck Benth.*), *dhātaki* (*Woodfordia fruticosa Kurz*), *sarṣapa* (*Brassica nigra Koch*) and *madhūka* (*Glycyrrhiza glabra Linn.*) or (iii) paste of *Kuṭaja* (*Holarrhena antidysenterica wall*), seed of *arjaka* (*Ocimum gratissimum Linn.*), *musta* (*Cyperus rotundus Linn.*), *haridrā* (*Curcuma longa Linn.*) or (iv) paste of *nimba* (*Azadirachta indica A. Juss*), *kola* (*Zizyphus jujuba Lam.*), *surasa* (*ocimum sanctum Linn.*) and *mañjisthā* (*Rubia cordifolia Linn.*) or (v) *triphalā* (*Terminalia chebula Linn.*, *Terminalia belerica Roxb.* and *Emblica officinalis Gaertn.*) mixed with the blood of *ṛṣata* (spotted deer), deer and rabbit,

3. There should be (gentle) massage with the oil boiled with the leaves of *karavira* (*Nerium indicum* Mill.).

4. Water boiled with *mālatī* (*Aganosma dichotoma* K. Schum.) and *madhuka* (*Glycyrrhiza glabra* Linn.) should be used for affusion.

When she feels the itching sensation, she should not scratch the part because it may injure the skin and disfigure it. When the itching is intolerable, it should be corrected by kneading and friction massage.

The ingredients of her food should be sweet in taste and they should be alleviators of *vāta*. The food should be taken in small quantity without adding fat and salt. Water, in small quantity should be used as *anupāna* (post-prandial drink).

Eighth month :

During this month, she should regularly take milk and gruel added with ghee. This was not acceptable to Bhadra-kāpya. According to him, this will cause *piṅgala* (tawny) colouration of the eyes of the foetus. Lord Punasvasu Ātreya replied, "Even if there is tawny colouration of the eyes of the foetus, it is not that this therapy should not be given. By doing this, the mother herself will keep good health and give birth to a child endowed with the excellence of health, strength, complexion, voice and compactness which will make him the best even among the children of the entire clan."

Ninth month :

She should be given *anuvasana* (unctuous enema) with the oil boiled with *madhurausadhi* (certain selected drugs having sweet taste). Cotton swabs soaked in this oil should be kept in the vagina for the oleation of the uterus and genital tract.

Adoption of the above mentioned procedure for the management of the pregnant woman right from the first month upto the ninth month of pregnancy help in the following.

1. softening of placenta, pelvis, waist, sides of the chest and back;
2. downward movement of *vāta* (flatus);

3. normalization of the urine and stool and their elimination with ease;
4. softening of her skin and nails;
5. promotion of strength and complexion; and
6. delivery with ease of desirable and healthy son (child) endowed with excellent qualities in proper time. [32]

The common belief prevalent among women regarding growth of hair of the foetus as the cause of burning sensation in the chest of the pregnant woman during the seventh month of pregnancy is contradicted by Lord Ātreya. Hair actually starts growing right from third month of pregnancy because during this month all organs of the foetus are manifested; they do not all of a sudden grow during the seventh month. Hence the cause of burning sensation in the chest during the seventh month of pregnancy cannot be attributed to the growth of hair of foetus.

Tawny colour of eyes is caused by *pitta*. It is so described in *śālākya tantra* (the branch of medicine dealing with the diseases of head and neck). But here *pitta* is not responsible for the morbidity in eyes. During the eighth month of pregnancy, milk, gruel etc; produce tawny colour of eyes, because of their specific action.

Even though milk, gruel etc. may cause tawny colour in eyes, still they are required to be administered to the pregnant mother during the ninth month because tawny colour in the eyes is not a serious morbid condition and can be easily corrected at a later stage, and the intake of milk, gruel etc; are very much beneficial during this period.

Construction of maternity home :

प्राक् चैवास्या न व्रमान्मासात् सूतिकागारं कारयेदपहृतास्थिशर्कराकपाले
देशे प्रशस्तरुपरसगन्धायां भूमौ प्राग्छारमुदग्धारं वा वैत्वानां काष्ठानां तैन्दुकै-
जुद्कानां भाज्ञानकानां वार(रु)णानां खादिराणां वा; यानि चान्यान्यपि
ब्राह्मणाः शंसेयुरथर्ववेदविदस्तेषां; वसनालेपनाच्छादनापिधानसंपदुपेतं वास्तु-
विद्याहृदययोगाग्निसलिलोदूखलवर्चःस्थानस्तानभूमिमहानसमृतुसुखं च ॥ ३३ ॥

Before the ninth month of her pregnancy, the maternity home should be constructed in a place cleared of bones, gravels and pieces of earthen vessels. The soil of the locality should have excellent colour, taste and smell. Its doors should face towards the east or the north and the wood of *bilva* (*Aegle marmelos* Corr.), *tinduka* (*Diospyros peregrina* Gurke), *ingudi* (*Balanites aegyptica* Delile), *bhallātaka* (*Semecarpus anaeardium* Linn.), *Varaṇa* (?) and *khadira* (*Acacia catechu*

willd.) should be used for the construction of this maternity home. Such other measures prescribed by the brahmins well versed with the Atharva veda should also be adopted. This house should be equipped with cloth, sheet and bed covers, fire place, water storage, place for pounding, lavatory, bath-room and kitchen should be provided here as per the instructions laid down in *vastuvidya* (Science of House building). It should be made air-conditioned to make it comfortable for that particular season. [33]

Another reading of the term 'varāṇa' occurring in the text is *varuṇa*. (Botanical name of *varuṇa* is *Crataeva nuriala* Buch-Ham.) *Vāstuvidyā* (Science of House-building) lays down certain rules regarding the construction of fire place etc., in the house, and these rules should be adhered to in the construction of maternity home.

Drugs to be Stored in Maternity home :

तत्र सर्पिस्तेलमधुसैन्धवसौवर्चलकालविड्लवणविडङ्गकुष्ठकिलिमनाग-
रपिण्पलीपिण्पलीमूलहस्तिपिण्पलोमण्डुकपण्यंलाङ्गलीवचाचव्यचित्रकचिरवि-
ल्वहिङ्गसर्षपलशुनकतककणकणिकानीपातसीवल्वजभूर्जकुलतथमैरेयसुरासवाः
सञ्चिहिताः स्युः; तथाऽश्मानौ द्वौ, द्वे कु(च)ण्डमुसले, द्वे उद्घवले, खरवृष-
भश्च, द्वो च तीक्ष्णो मूलीपिण्पलकौ सोवर्णराजतौ, शश्वाणि च तीक्ष्णायसानि,
द्वौ च विल्वमयौ पर्यङ्गौ, तैन्दुकैङ्गुदानि च काषाण्यश्चिसन्धुक्षणानि, खियश्च
बहृथो बहुशः प्रजाताः सौहार्दयुक्ताः सततमनुरक्ताः प्रदक्षिणाचाराः प्रतिपत्तिकु-
शलाः प्रकृतिवत्सलास्त्यक्तविपादाः ङ्गेशसहिन्योऽभिमताः, ब्राह्मणाश्चार्थवेद-
विदः; यच्चान्यदपि तत्र समर्थ मन्येत, यच्चान्यच्च ब्राह्मणा त्रूयुः खियश्च वृङ्गास्तन्
कार्यम् ॥ ३४ ॥

The following drugs should be stored in the maternity home :

1. ghee, 2. oil, 3. honey, 4. rock-salt, 5. sonchal salt,
6. black salt, 7. *viḍa* salt, 8. *viḍaṅga* (*Embelia ribes* Burm. f.),
9. *kuṣṭha* (*saussurea lappa* C. B. Clarke), 10. *kilima* (*Cedrus deodara* Loud.), 11. *nāgara* (*Zingiber officinale* Rosc.), 12. *pippali* (*piper longum* Linn.), 13 root of *pippali*, 14. *hasti pippali* (*Scindapsus officinalis* Schott), 15. *māndūkaparnī* (*Centella asiatica* urban), 16. *ela* (*Elettaria Cardamomum* Maton), 17. *lāṅgālī* (*Gloriosa superba* Linn.), 18. *vacā* (*Acorus calamus* Linn.), 19. *cavya* (*Piper chaba* Hunter), 20. *citraka* (*Plumbago zeylanica* Linn.), 21. *cirabilva* (*Pongamia pinnata* Merr.), 22. *hiṅgu*

(*Ferula narthex* Boiss.); 23. *sarṣapa* (*Brassica nigra* Koch), 24. *laśuna* (*Allium sativum* Linn.), 25. *Kataka* (*Strychnos potatorum* Linn. f.) 26. *kāṇa* (also known as *kundaka* (?)), 27. *kaṇika* (having grains thicker than those of *kāṇa*), 28. *nipa* (*Anthocephalus indicus* A. Rich.), 29. *atasī* (*Linum usitatissimum* Linn.), 30. *balvaja* (?) , 31. *bhūrja* (*Betula utilis* D. Don.), 32. *kulattha* (*Dolichos biflorus* Linn.), (33–35) *maireya*, *sura* and *asava* types of wine.

In addition to the above, the following substances should be kept there.

36. two grinding stones, 37. two small pestles, 38. two mortars, 39. one untamed bull, 40. two gold and silver cases for keeping needles; 41. various surgical instruments which should be sharp and prepared of metal. 42. two bed-steads made of *bilva* (*Aegle marmelos* Corr.), 43. wood of *tinduka* (*Diospyros peregrina* Gurke) and *ingudi* (*Balanites aegyptica* Delile) for fuel, 44. Number of female attendants who are multipara, affectionate, constantly attached to the lady, well mannered, resourceful, naturally disposed to love, free from grief, tolerants of hardship and agreeable, 45. Brahmins well versed in the Atharva Veda.

Besides the above, whatever is found necessary and advised by the brahmins and old ladies should also be kept there. [34]

Utility of some of the above mentioned substances will be described later. With a view to avoid details, the utility of remaining substance; are not described here; but their actual use should be inferred by the physician.

Another reading of the term “*kundamusala*” occuring in the text is *chandamusala* which better means heavier pestles. The author himself has advised a pregnant woman against carrying a pestle at the time of delivery but the pestle has other uses which will be described later.

Admission into maternity home :

ततः प्रवृत्ते नवमे मासे पुण्येऽहनि प्रशस्तनक्षत्रयोगमुपगते प्रशस्ते भगवति शशिनि कल्याणे कल्याणे च करणे मैत्रे मुहूर्ते शान्तिं हुत्वा गोब्राहणमग्निमुदकं चादौ प्रवेश्य गोभ्यस्तृणोदकं मधुलाजांश्च प्रदाय ब्राह्मणेभ्योऽक्षतान् सुमनसो नान्दीमुखानि च फलानीष्टानि दत्त्वोदकपूर्वमासनस्थेभ्योऽभिवाद्य पुनराचम्य स्वस्ति वाचयेत् । ततः पुण्याहशब्देन गोब्राह्मणं समनुवर्तमाना प्रदक्षिणं प्रविशेत् सूतिकागारम् । तत्रस्था च प्रसवकालं प्रतीक्षेत ॥ ३५ ॥

At the onset of ninth month of pregnancy, on an auspicious day having the propitious moon in conjunction with a favourable constellation and during a propitious *karaṇa* (an astrological term indicating a division of the day) and *muhūrta* (an astrological term for a span of time equivalent to 3/4 of an hour approximately) oblation should be offered to the sacred fire for peace. Cows, *brāhmaṇas*, fire and water should be brought to the maternity home in the first instance. Cows should be given grass, water and fired paddy added with honey and the *brāhmaṇas* should be given *akṣata* (unbroken grains of rice), flowers, fruits like *kharjūra* (*Phoenix sylvestris Roxb.*) which are indicative of good fortune.

The woman should take water and then, after prayers to the respected ones, seated properly. Thereafter she should perform *acamana* (taking water in a manner prescribed for auspicious occasions) again and thereafter others should recite auspicious *mantras*. Then *pūṇyāha* (lit. auspicious day) *mantra* should be recited. Keeping the cows and the *brāhmaṇas* in right side, she should enter into the maternity home. There, she should await the time of delivery. [35]

Signs of impending delivery :

तस्यास्तु खलिवमानि लिङ्गानि प्रजननकालमभितो भवन्ति; तद्यथा—क्षमो
गात्राणां, ग्लानिराननस्य, अक्षणोः शैथिल्यं, विमुक्तवन्धनत्वमिव वक्षसः, कुक्षेरव-
स्थं सन्सनम्, अधोगुरुत्वं, वंशणवस्तिकटीकुक्षिपाश्वर्पृष्ठनिस्तोदः, योनेः प्रस्तवणम्,
अनन्नाभिलाषश्चेति; ततोऽनन्तरमावीनां प्रादुर्भावः, प्रसेकश्च गर्भोदकस्य ॥३६॥

The following signs indicate the approach of the time of delivery.

1. Exhaustion of the limbs;
2. feeling of depression in the face;
3. looseness in eyes;
4. feeling in the chest as if a knot is being untied;
5. feeling as if something is coming down from the pelvis;
6. heaviness in the lower part of the body;
7. pain in groin, region of bladder, pelvis, sides of the chest and back;
8. onset of show from the genital tract; and
9. loss of appetite.

Thereafter true labour pain associated with the excretion of amniotic fluid starts. [36]

Management after onset of Labour pain :

आवीप्रादुर्भावे तु भूमौ शयनं विदध्यान्मुद्ग्रास्तरणोपपन्नम् । तदध्यासीत सा । तां ततः समन्ततः परिवार्य यथोक्तगुणाः क्षियः पर्युपासीरज्ञाश्वासयन्त्यो वाग्मिर्ग्रहिणीयाभिः सान्त्वनीयाभिश्च ॥ ३७ ॥

When the labour pain starts, a bed should be prepared in the ground with soft material used as bed spread and she should be asked to sit over it. Female attendants having the above mentioned qualities should thereafter remain all around her and console her with talks which are comforting and consoling to her. [37]

Management in case of delay in delivery :

सा चेदावीभिः संक्षिप्तयमाना न प्रजायेताथैनां ब्रूयात्—उत्तिष्ठ, मुसलमन्तरं गृहीत्व, अनेनैतदुलूखलं धान्यपूर्णं मुहुर्मुहुरभिजहि मुहुर्मुहुरवज्रमस्व चड्कमस्व चान्तराऽन्तरेति; पवमुपदिशन्त्येके तन्त्रत्याह भगवानात्रेयः । दाहणव्यायामवर्जनं हि गर्भिण्याः सततमुपदिश्यते, विशेषतश्च प्रजननकाले प्रचलितसर्वथातुदोषायाः सुकुमार्या नार्या मुसलव्यायामसमीरितो वायुरन्तरं लब्ध्वा प्राणान् हिस्यात्, दुष्प्रतीकारतमा हि तस्मिन् काले विशेषेण भवति गर्भिणी; तस्मान्मुसलग्रहणं परिहार्यमृषयो मन्यन्ते, जृम्भणं चड्कमणं च पुनरनुष्टेयमिति । अथास्यै दद्यात् कुष्ठैलालाङ्गलिकीवचाचित्रकचिरविलवचव्यचूर्णमुपद्यातुं, सा तन्मुहुर्मुहुरपिङ्गेत, तथा भूर्जपत्रधूमं शिशापासारधूमं वा । तस्याश्वान्तराऽन्तरा कटीपार्श्वपृष्ठसकृथिदेशानीषदुष्णेन तैलेनाभ्यज्यानुसुखमवमृद्धीयात् । अनेन कर्मणा गर्भोऽवाक् प्रतिपद्यते ॥ ३८ ॥

Some are of the view that if the delivery does not take place in spite of severe labour pain, the pregnant woman should be instructed to get up and take up one of the pounding clubs (pestles). With the help of this club she should frequently strike the container filled up with corns. Simultaneously she should frequently resort to pendiculation and while doing so, according to them, she should be asked to resort to circumambulation at intervals.

This proposition is not acceptable to Lord Ātreya because pregnant women are invariably advised to avoid violent exercises. Specially during the time of delivery, in the delicate body of the woman, all the *dosas* and *dhātus* are in a

state of unstability and if she resorts to exercise with the help of a club, *vayu* gets aggravated, and finding an opportunity, it may destroy the life. Such a condition of a pregnant woman is too difficult to cure. Therefore, *rasis* (sages) are of the view that a pregnant woman should not resort to exercise with a club. Pendiculation and circumambulation can however be resorted to.

For inhalation she should be given the powder of *kustha* (*Saussurea lappa* C. B. Clarke), *ela* (*Elettaria cardamomum* Maton), *langaliki* (*Gloriosa superba* Linn.), *vacā* (*Acorus calamus* Linn.), *citraka* (*Plumbago zeylanica* Linn.), *cirabilva* (*Pongamia pinnata* Mirr.) and *cavya* (*Piper chaba* Hunter) She should inhale this powder frequently. Bark of *bhūrja* (*Betula utilis* D. Don) and the pith of *śīṁśapa* (*Dalbergia sissoo* Roxb.) may be used for fumigation.

At intervals she should be anointed with warm oil in her waist, sides of the chest, back and thighs, and they should be gently massaged.

By doing so, the foetus is brought downwards. [38]

Recitation of mantra :

स यदा जानीयाद्विमुच्य हृदयमुदरमस्यास्त्वाविशति, बस्तिशिरोऽवगृ-
ह्णाति, त्वरयन्त्येनामाव्यः, परिवर्तते ऽधो गर्भं इति; अस्यामवस्थायां पर्यङ्कमेनामा-
रोप्य प्रवाहयितुमुपक्रमेत । कर्णे चास्या मन्त्रमिममनुकूला स्त्री जपेत—

‘क्षितिर्जलं वियत्तेजो वायुविष्णुः प्रजापतिः ।

सगर्भं त्वां सदा पान्तु वैशल्यं च दिशन्तु ते ॥

प्रसूष्व त्वमविक्लिष्टमविक्लिष्टा शुभानने ! ।

कार्तिकेयद्युति पुत्रं कार्तिकेयाभिरक्षितम्’ इति ॥ ३९ ॥

When a pregnant woman feels as if the foetus got separated from her heart and entered into the lower abdomen and had approached the area of *bastiśiras* (brim of the pelvis?), when the frequency of labour pain has increased and the foetus has turned and come downwards, the physician should, at this stage, make her lie down over a bed-stead (specially prepared for the purpose). She should then be asked to effect necessary strain to facilitate delivery. A woman favourably disposed to her should recite the following *mantra* near her ears : “क्षितिर्जलं कार्तिकेयाभिरक्षितम्” ॥

(May the *pr̥thvi*, *jala*, *akasha*, *agni*, *vāyu*, *Viṣṇu* and *Prajā-pati* protect you the pregnant one at all times and facilitate the delivery of the child. O ! auspicious one. May the delivery take place without any distress either to yon or to your son, who be endowed with brilliance of Lord Kārtikeya and also be protected by him.). [39]

Duties of attendants :

ताश्वैनां यथोक्तगुणाः स्त्रियोऽनुशिष्युः—अनागतावीर्मा प्रवाहिष्टाः; या हनागतावीः प्रदाहते व्यर्थमेवास्यास्तत् कर्म भवति, प्रजा चास्या विकृता विकृतिमापन्ना च, श्वासकासशोषस्तीहप्रसन्ना वा भवति। यथा हि क्षवथूदगारवात्मूलपुरीषवेगान् प्रयतमानोऽप्यप्राप्तकालान्न लभते कृच्छ्रेण वा ऽप्यवाप्नोति, तथा अनागतकालं गर्भमपि प्रवाहमाणा; यथा चैषामेव क्षवथ्वादीनां सन्धारणमुपघातायोपपद्यते, तथा प्राप्तकालस्य गर्भस्याप्रवाहणमिति। सा यथानिर्देशं कुरुष्वेति वक्तव्य स्यात्। तथा च कुर्वती शनैः पूर्वं प्रवाहेत, ततोऽनन्तरं बलवत्तरम्। तस्यां च प्रवाहमाणायां स्त्रियः शब्दं कुर्यात्—‘प्रजाता प्रजाता धन्यं धन्यं पुत्रम्’ इति। तथा ऽस्या हर्षेणाप्याय्यन्ते प्राणाः ॥ ४० ॥

Ladies having the above mentioned (vide para-34) qualities should instruct her as follows :

“Do not strain in the absence of labour pain.” Straining in the absence of labour pain does not serve any useful purpose. It rather causes morbidity and deformity in the foetus and produces diseases like *svāsa* (breathlessness), *kāsa* (cough), *sōsa* (consumption) and *plihā* (enlargement of spleen). As in the absence of natural urges, sneezing, eructation, passage of flatus, urination and defecation do not occur, if at all they occur, they do so with considerable difficulty and artificial efforts, similarly, premature straining in the absence of natural (normal) labour pain does not produce the desired result. As the suppression of manifested urges of sneezing etc., leads to disastrous effects so does the absence of straining while there is labour pain. She should be asked to obey instructions. While doing so, she should put strain slowly in the beginning and gradually increase the pressure, while she puts strain, female attendants should say aloud, “Thanks, you have delivered a son”. This gives her relief and joy, and adds to her regaining vitality. [40]

Removal of Placenta :

यदा च प्रजाता स्यात्तदैवैनामवेक्षेत—काचिदस्या अपरा प्रपञ्चा न वेति । तस्याश्वेदपरा न प्रपञ्चा स्यादैवैनामन्यतमा रुदी दक्षिणेन पाणिना नाभेरुपरिष्ठा-द्वलवन्धिपीड्य सवयेन पाणिना पृष्ठत उपसंगृहा तां सुनिर्धूतं निर्धुनुयात् । अथा-स्याः पाण्यर्या श्रोणीमाकोट्येत् । अस्याः स्फित्वाबुपसंगृहा सुपीडितं पीडयेत् । अथास्या वालवेण्या कण्ठतालु परिमृशेत् । भूर्जपत्रकाचमणिसर्पनिर्मोक्षास्या योनिं धूपयेत् । कुष्टतालीसकलं बल्वजयूषे मैरेयसुरामण्डे तीक्ष्णे कौलत्थे वा यूषे मण्डकपर्णीपिपलीसंपाके वा संसाध्य पाययेदेनाम् । तथा सूक्ष्मैलाकिलि-मकुष्टनागरविडङ्गपिण्पलीकालागुरुचव्यचित्रकोपकुश्चिकालं खरवृषभस्य वा जीवतो दक्षिणं कर्णमुक्तत्य दृपदि जर्जरीकृत्य बल्वजकाथादीनामासावनानामन्य-तमे प्रक्षिप्यामाद्य मुहूर्तस्थितमुड्त्य तदासावनं पाययेदेनाम् । शतपुष्पाकुष्टम-दनहिङ्गुसिद्धस्य चैनां तैलस्य पिचुं ग्राहयेत् । अतश्चैवानुवासयेत् । एतैरेव चासावनैः फलजीमूतेक्ष्वाकुधामार्गवकुटज्ञतवेधनहस्तिपिपल्युपहितैरास्थाप-येत् । तदास्थापनमस्याः सह वातमूत्रपुरीषैर्निर्हरत्यपरामासकां वायोरेवा-प्रतिलोमगत्वात् । अपरां हि वातमूत्रपुरीषाण्यन्यानि चान्तर्बहिर्मर्गाणि सज्जन्ति ॥ ४१ ॥

Immediately after delivery, she should be examined if the placenta has come out. If the placenta does not come out the following measures should be adopted :

1. One of the female attendants should forcefully press her (patient's) abdomen (downwards) with her right hand from above the umbilical region while holding her (patient's) back by her left hand and then shake the body of the patient well.
2. The attendant with her heels should press the hip region of patient.
3. Her buttocks should be taken by hand and strongly pressed by the attendant.
4. Her throat should be rubbed with the help of the braid of her hair.
5. Her vagina should be fumigated by burning the bark of *bhūrja* (*Betula utilis* D. Don), *kācamāṇi* (quartz) and slough of snake.
6. She should be made to drink the paste of *kusṭha* (*Sau-surea lappa* C. B. clarke) and *tāliśa* (*Abies webiana* Lindl.) mixed with either the following :

(i) decoction of *balvaja* (?), (ii) the scum of *maireya* or *sura* types of wine having an acute effect, (iii) the decoction of *kulattha* (*Dolichos biflorus* Linn.), (iv) decoction of *maṇḍukaparṇī* (*Centella asiatica* Urban) and *pippali* (*Piper longum* Linn.).

7. A portion of the right ear of the untamed and alive bull should be cut and smashed in a stone mortar, and this should be added with the paste of *sūkṣmailā* (*Elettaria cardamomum* Moton), *kilima* (*Cedrus deodara* Loud), *kuṣṭha* (*Saussurea lappa* C. B. clarke), *nagara* (*Zingiber officinale* Rosc.), *vidāṅga* (*Embelia ribes* Burm f.), *pippali* (*Piper longum* Linn.), *kalaguru* (black variety of *Aquilaria agallocha* Roxb.), *cavya* (*Piper chaba* Hunter), *citraka* (*Plumbago zeylanica* Linn.) and *upkuñcika* (*Nigella sativa* Linn.). The paste should then be soaked in the decoction of *balvaja* (?) etc., described above and kept for some time. Then the paste should be taken out and the liquid thus remained should be given to her to drink.

8. The cotton swab soaked in oil boiled with *śata-puṣpa* (*Foeniculum vulgare* Mill.), *kuṣṭha* (*Saussurea lappa* C. B. clarke), *madana* (*Randia dumetorum* Lam.) and *hiṅgu* (*Ferula narthex* Boiss.) should be kept in her genital tract. With this oil she should be given *anuvāṣana basti* (unctuous enema).

9. The decoction of *balvaja* (?) should be mixed with the paste of *phala* (*Randia dumetorum* Lam.), *jīmūta* (*Luffa echinata* Roxb.), *ikṣvāku* (*Legenaria siceraria* Standl.), *dhāmārgava* (*Luffa cylindrica* M. Roem), *kuṭaja* (*Holarrhena antidysenterica* wall.), *kṛtavedhana* (*Luffa acutangula* Roxb.) and *hasti-pippali* (*Scindapsus officinalis* Schott) and used for *asthāpana* (corrective) type of enema. By this *asthāpana*, there will be downward movement of *vāyu* (in the abdomen) as a result of which along with flatus, urine and stool, the placenta also comes out. Flatus, urine and stool, and such other excreta as having a tendency to come out of the body during normal course of events may get obstructed inside the abdomen resulting in the obstruction of the placenta from coming out. [41]

Management of new-born baby :

तस्यास्तु खल्वपरायाः प्रपतनार्थे कर्मणि क्रियमाणे जातमात्रस्यैव कुमार-
स्य कार्याण्येतानि कर्मणि भवन्ति; तद्यथा—अश्मनोः संघट्नं कर्णयोर्मूले,

शीतोदकेनोष्णोदकेन वा मुखपरिषेकः, तथा स क्लेशविहतान् प्राणान् पुनर्लभेत् । कृष्णकपालिकाशूर्पैण चैनमभिनिष्पुणीयुर्यदचेष्टः स्याद् यावत् प्राणानां प्रत्याग-मनम् (तत्तत् सर्वमेव कार्यम्) । ततः प्रत्यागतप्राणं प्रकृतिभूतमभिसमीक्ष्य स्नानोदकग्रहणाभ्यामुपपादयेत् ॥ ४२ ॥

अथास्य ताल्वोष्टुकण्ठजिह्वाप्रमार्जनमारभेताङ्गुल्या सुपरिलिखितनखया सुप्रक्षालितोपधानकार्पाससपिच्चुमत्या । प्रथमं प्रमार्जितास्यस्य चास्य शिर-स्तालु कार्पासपिच्चुना स्नेहगम्भैण प्रतिसंछादयेत् । ततोऽस्यानन्तरं सैन्धवोप-हितेन सर्पिषा कार्यं प्रच्छर्दनम् ॥ ४३ ॥

While taking steps to bring out the placenta, the following measures should be taken for the resuscitation of the foetus immediately after birth :

1. Striking of stones near the ears of the child;
2. Sprinkling of the face with cold water (during summer) and warn water (during winter).

3. By the above mentioned measures, the child will gain vitality which was lost as a result of the strain caused by the pressure of the genital tract during the process of delivery. If after this, there is no movement, then the child should be fanned with a fan prepared of straps of bamboo etc., till he breaths. (All the above mentioned measures are required to be taken). When the respiration is established and the child attains normalcy, his excretory passages should be cleaned with water and he should be given bath.

Thereafter his palate, lips, throat and tongue should be wiped with attendant's finger, nails from which are properly clipped off and which are well-cleaned and covered with cotton swabs. After cleaning his mouth, the *sirastalu* (anterior fontanel in head) of the child should be covered with cotton swabs soaked with unctuous substances. Thereafter, the child should be given to eat ghee mixed with rock-salt for emesis. [42-43]

Separation of Umblical cord :

ततः कल्पनं नाड्याः । अतस्तस्याः कल्पनविधिमुण्डेक्ष्यामः—नाभिबन्ध-नात् प्रभृत्यश्चाङ्गुलमभिज्ञानं कृत्वा छेदनावकाशास्य द्वयोरन्तरयोः शनैर्गृहीत्वा तीक्ष्णेन रौक्मराजतायसानां छेदनानामन्यतमेनार्धधारेण छेदयेत् । तामप्रे सूत्रेणोपनिवृद्ध्य कण्ठेऽस्य शिथिलमवसृजेत् । तस्य चेष्टाभिः पच्येत्, तां लोद्ध-

मधुकप्रियज्ञसुरदारुहरिद्राकलकसिद्धेन तैलेनाभ्यज्यात्, एषामेव तैलौषधानां
चूर्णेनावचूणयेत् । इति नाडीकल्पनाविधिरुक्तः सम्यक् ॥ ४४ ॥

Thereafter the cord should be separated (by cutting and ligature). Now the method of separating the cord is being described. The cord should be marked at a distance of eight *āngulas* (approximately 25.5 cm.) from its root where it is attached with the navel. Both the sides of this mark should be carefully taken in hand and with the help of an *ardhadhāra* type of instrument (having very sharp edge), made of gold, silver or steel, the cord should be cut at this mark. The proximal end of the cord should be carefully tied with the help of a thread and the ends of the thread should be loosely tied to the neck of the foetus.

If there is suppuration of the umbilical cord, the oil boiled with the paste of *lodhra* (*Symplocos racemosa* Roxb.), *madhuka* (*Glycyrrhiza glabra* Linn.) *priyaṅgu* (*Callicarpa macrophylla* Vahl), *suradaru* (*Cedrus deodara* Loud) and *haridra* (*Curcuma longa* Linn.) should be applied. These very medicines which are prescribed to be used for the preparation of oil should be made to a powder and sprinkled over the suppurated umbilicus.

Thus the proper method of the separation of umbilical cord is discussed. [44 [

Defective separation of the cord :

असम्यक्लपने हि नाड्या आयामव्यायामोत्तुण्डिता-पिण्डलिका-विनामिका-विज्ञभिकावाधेभ्यो भयम् । तत्राविदाहिभिर्वाँतपित्तप्रशमनैरभ्यङ्गोत्सादनपरिषेकेः सर्पिभिर्श्वोपक्रमेत गुहलाघवमभिसमीक्ष्य ॥ ४५ ॥

Improper separation of the cord may cause the following morbidity :

1. *ayamottundita* (elevation of the umbilicus length wise);
2. *vyayamottundita* (elevation of the umbilicus in breadth);
3. *pindalika* (formation of a circular ring around the umbilicus);
4. *vināmikā* (elevation of the umbilicus in the periphery and depression in the centre); and
5. *vijrbhika* (constant increase in the size of the umbilicus).

Carefully observing the seriousness or mildness of the afflicted *doṣas*, these conditions should be treated by massage, unction and sprinkling of ghee prepared of drugs which are not irritant but alleviators of *vāta* and *pitta*. [45]

Suppuration of the umbilicus is caused by *pitta*; *vāta* is responsible for the morbidity of the umbilicus like *āyāmottunditā* and *vyāyāmottunditā*. In such conditions, the *doṣa* which is more seriously afflicted should be taken into account and the others which are less afflicted are to be neglected for the purpose of treatment and various drugs are to be selected accordingly.

Birth-rites :

अतोऽनन्तरं जातकर्म कुमारस्य कार्यम् । तद्यथा—मधुसर्पिणी मन्त्रोप-
मन्त्रिते यथामनायं प्रथमं प्राशितुं दद्यात् । स्तनमत ऊर्ध्वमेतेनैव विधिना
दक्षिणं पातुं पुरस्तात् प्रयच्छेत् । अथातः शीर्षतः स्थापयेदुदकुम्भं मन्त्रोपम-
न्त्रितम् ॥ ४६ ॥

Thereafter the birth rite of the foetus as prescribed in the *vedas* should be performed which are as follows :

1. First of all, the child should be given honey and ghee impregnated with *mantra* prescribed for this purpose in the *Vedas*;
2. Thereafter, following the same procedure, milk from the right breast should be given to the child at first.
3. An earthen jar filled with water should be impregnated with *mantras* and kept near the head of the child. [46]

The milk inside the breast (or the mother or nurse) should also be impregnated by *mantras* before it is administered to the child.

Protection of new-born :

अथास्य रक्षां विद्ध्यात्—आदानीखदिरकर्कन्धुपीलुपरूषकशाखाभिरस्या
गृहं समन्ततः परिवार्येत् । सर्वतश्च सूतिकागारस्य सर्षपातसीतण्डुलकण-
कणिकाः प्रकिरेयुः । तथा तण्डुलबलिहोमः सततमुभयकालं कियेतानामकर्मणः ।
द्वारे च मुसलं देहलीमनु तिरश्चीनं न्यसेत् । वचाकुष्ठक्षेमकहिङ्कुसर्पपातसी-
लशुनकणकणिकानां रक्षोद्घसमारूप्यातानां चौषधीनां पोट्टलिकां बद्धा सूतिकागार-
स्योत्तरदेहल्यामवस्त्रजेत्, तथा सूतिकायाः कण्ठे सपुत्रायाः, स्थाल्युदककुम्भ-
पर्यङ्केष्वपि, तथैव च द्वयोद्वारपक्षयोः । कणककण्टकेन्धनवानभिस्तन्दुककाष्ठे-
न्धनश्चाग्निः सूतिकागारस्याभ्यन्तरतो नित्यं स्यात् । खियश्चैनां यथोक्तगुणाः
सुहृदश्चानुशानुजागृयुदशाहं द्वादशाहं वा । अनुपरतप्रदानमङ्गलाशीःस्तुतिगीत-

वादित्रमन्नपानविशदभनुरक्तप्रहृजनसंपूर्णं च तदेशम् कार्यम् । ब्राह्मणश्वार्थव-
वेदवित् सततमुभयकालं शान्तिं जुहुयात् स्वस्त्ययनार्थं कुमारस्य तथा सूति-
कायाः । इत्येतद्रक्षाविधानमुक्तम् ॥ ४७ ॥

Thereafter measures should be taken for the protection of the child. Branches of *adāni* (?) *khadira* (*Acacia catechu* Willd.) *karkandhu* (*Zizyphus nummularia* W.&A.) *pilu* (*Salvadora persica* Linn.) and *paruṣaka* (*Grewia asiatica* Linn.) should be placed all around the maternity home. Grains of mustard, *atasi* (*Linum usitatissimum* Linn.), and broken rice should be strewn in all places of the maternity home. Till the name giving ceremony (which occurs on the 10th day after birth), *tāṇḍulalabalihoma* (a type of *yajña* in which rice is offered to the sacred fire) should be constantly performed both the times during the day. At the gate, a pestle should be placed parallel to the threshold. Broken pieces of *vacā* (*Acorus calamus* Linn.), *kustha* (*Saussurea lappa* C. B. Clarke), *Kṣaumaka* (?) *hiṅgu* (*Ferula narthex* Boiss.) *sarṣapa* (*Brassica nigra* Koch) *atasi* (*Linum usitatissimum* Linn.) and *laśuna* (*Allium sativum* Linn.) and such other drugs which are known to provide protection from the attacks of evil spirits (like *guggulu* or *Commiphora mukul* Engl.) should be tied in a packet and hanged to the upper beam of the threshold of the maternity home. Similar packets should be made to hang in the neck of the mother and the child. They should be kept in cooking vessels, water jars, bed-steads and doors of both the sides. Inside the maternity home, fire from the fuel of, the thorn of *kañaka* (?) and wood of *tinduka* (*Diospyros peregrina* Gurke) should be constantly kept burning.

Female attendants having the attributes described in para-34 and friends of the lady should keep constant vigil by remaining awake for 10 or 12 days. The whole house should be kept crowded with people who are pious, affectionate and happy, and engaged constantly in gifts, propitious blessings, praise, song, music, food and drinks. To bestow auspiciousness upon the mother and the child, brahmins well versed with the Atarva-veda should constantly offer sacrifices in the sacred fire during both the times of the day.

Thus measures to be adopted for the protection of the mother and the child are described. [47]

Jatūkarṇa has described *tanṭula baliḥoma* to be performed twice a day for ten days after the birth of child.

Management of mother after aelivery:

सूतिकां तु खलु बुभुक्षितां विदित्वा स्नेहं पाययेत परमया शक्त्या सर्पि-
स्तैलं वसां मज्जानं वा सात्स्मीभावमभिसमीक्ष्य पिप्पलीपिप्पलीमूलचव्यचित्रक-
श्टुङ्गवेरचूर्णसहितम् । स्नेहं पीतवत्याश्च सर्पिस्तैलाभ्यामभ्यज्य वेष्येदुदरं मह-
ताऽन्तेन वाससा; तथा तस्या न वायुरुदरे विकृतिमुत्पादयत्यनवकाशत्वात् ।
जोरेण तु स्नेहे पिप्पल्यादिभिरेव सिंडां यवागूँ सुखिग्धां द्रवां मात्रशःपाययेत् ।
उभयतःकालं चोष्णोदकेन च परिषेचयेत् प्राक् स्नेहयवागूपानाभ्याम् । एवं
पञ्चरात्रं सप्तरात्रं वाऽनुपाल्य क्रमेणाभ्याययेत् । स्वस्थवृत्तमेतावत् सूति-
कायाः ॥ ४८ ॥

Ghee, oil, *vasā* (muscle fat) and *majja* (bone-marrow), which-ever is found suitable, should be given along with the powder of *pippalī* (*Piper longum* Linn.), root of *pippalī*, *cavya* (*Piper chaba* Hunter), *citraka* (*Plumbago zeylanica* Linn.) and *śṛṅgavera* (*Zingiber officinale* Rosc.) to the mother after she feels hungry. The quantity of this should be in conformity with the strength of the mother. After the intake of fat, her abdomen should be anointed with ghee and oil, and wrapped round tightly with a long and clean cloth. By doing so, *vāyu* does not cause any morbidity in her abdomen because of the absence of any empty spacee therein.

After the unctuous potion is digested, gruel prepared by boiling with *pippalī* etc., should be given in proper quantity. This gruel should be in liquid form and added with unctuous substances. Before the administration of unctuous substances and gruel, she should be sprinkled over with warm water both the times. She should be maintained like this for five to seveu nights and then gradually nourished.

These are the measures for the maintenance of positive health of the mother who has recently delivered. [48]

Unctuous potion should be given to the mother after delivery only when she feels hungry. The quantity of unctuous substance to be given to the mother should be in conformity with the strength of the woman so that she can digest it properly. Administration of unctuous potions in the above mentioned manner is not conducive to women living in marshy climate; they are useful only in aried climate.

Line of treatment of her ailments :

तस्यास्तु खलु यो व्याधिरुपद्यते स कृच्छ्रसाध्यो भवत्यसाध्यो वा, गर्भ-
वृद्धिक्षयितशिथिलसर्वधातुत्वात्, प्रवाहणवेदनाङ्गेदेनरक्तनिःस्रुतिविशेषशून्यश-
रीरत्वाच्च; तस्मात्तां यथोक्तेन विधिनोपचरेत्; भौतिकजीवनीयवृंहणीयम-
धुरवातहरसिद्धैरभ्यङ्गोत्सादनपरिषेकावगाहनान्नपानविधिभिर्विशेषतश्चोपचरेत्;
विशेषतो हि शून्यशरीराः ख्यिः प्रजाता भवन्ति ॥ ४९ ॥

If she is afflicted with any disease, the condition becomes either difficult of cure or incurable because all the tissue elements of her body are diminished in quantity. This is because the nutrition of the mother is utilized for the most part for the growth of the foetus. Further her body is afflicted with emptiness because of the strain involved in labour pain and the loss of fluid and blood from the body. Therefore, she should be treated according to the procedure already laid down. She should be specifically treated by massage, sprinkling, bath, food, drink prepared with drugs which are *bhautika* (alleviators of the effects of evil spirits and germs), *jivaniya* (promoter of vitality), *bṛmhanyiya* (promoter of corpulence), sweet in taste and *vatahara* (alleviators of *vata*). The body of the woman specifically becomes empty after delivery. [49]

Occurrence of any disease in a woman shortly after delivery leads to disastrous consequences. It is because of this that the author has emphasised upon the prevention of diseases in her for which various regimens are prescribed in this para and in the one before. After manifestation, diseases in her body are for the most part not amenable to therapies; hence drug for the cure of her various ailments are not described.

Rites for Naming the child :

दशमे त्वहनि सपुत्रा स्त्री सर्वगन्धौषधौर्सर्वपलोधैश्च स्राता लध्वहत-
शुचिवस्त्रं परिधाय पवित्रेष्टलघुविचित्रभूषणवती च संस्पृश्य मङ्गलान्युचिताम-
र्चयित्वा च देवतां शिखिनः शुक्रवाससोऽव्यङ्गांश्च ब्राह्मणान् स्वस्ति बाचयित्वा
कुमारमहतानां च वाससां संचये प्राक्शिरसमुदक्शिरसं वा संवेश्य देवतापूर्वं
द्विजातिभ्यः प्रणमतीत्युक्त्वा कुमारस्य पिता द्वे नामनी कारयेन्नाक्षत्रिकं नामा-
भिप्रायिकं च । तत्राभिप्रायिकं घोषवदाधन्तस्थान्तमूष्मान्तं वाऽवृद्धं त्रिपुरुषा-
नूकमनवप्रतिष्ठितं, नाक्षत्रदेवतासमानाख्यं इक्षरं चतुरक्षरं वा ॥५०॥

On the tenth day, the mother along with her son should be bathed in water boiled with all fragrant drugs, white

mustard seeds and *lodhra* (*Symplocos racemosa* Roxb.). Then, she should wear light, untoned and clean apparel and ornaments which are clean, desirable, light and variegated. Thereafter, she should touch auspicious things and offer prayer to appropriate deity and fire, and take blessings from *brahmaṇas* who are dressed with white apparel and who have no deformity of organs.

The child should be kept over a bed of untoned new cloths with his head towards the east or the north. Then the father should say that the child is offering prayer to the deity and *brahmaṇas*, and then give two names—one *nakṣatrika* (based upon the constellation in which the child was born) and the other *abhiprāyika* (the name by which he would be called or known in the family or society). The second category of name should begin with a letter of *ghoṣa* character (e.g. *g*, *gh*, *j*, *jh*, *d*, *dh*, *d*, *dh* and *b*, *bh*—according to Cakra-pāṇi only voiced asperated stops) and end with letters of *antyaṣṭha* character (viz. *ya*, *ra*, *la* and *va*) or *uṣma* character (viz. *śa*, *ṣa*, *sa* and *ha*). There should not be letters of *vṛddhi* category (diphthongs) in this type of name and it should be in conformity with the pattern of naming a child prevalent three generations (father, grand father and great grand father). The name should also be a famous one.

The *nakṣatrika* type of name should have similarity with that of the god who is ascribed to the constellation in which the child is born. It should be composed of either two or four letters. [50]

Examination of the child to ascertain his span of life :

वृत्ते च नामकर्मणि कुमारं परीक्षितुमुपक्रमेतायुषः प्रमाणज्ञानहेतोः । तत्रे-
मान्यायुध्मतां कुमाराणां लक्षणानि भवन्ति । तद्यथा—एकैकजा मृद्वोऽल्पा:
स्थिर्धा: सुब्रह्मूलाः कृष्णाः केशाः प्रशस्यन्ते, स्थिरा बहला त्वक्, प्रकृत्याऽति-
संपन्नमीषत्प्रमाणातिवृत्तमनुरूपमातपत्रोपमं शिरः, व्यूढं वृढं समं सुक्षिष्ठशङ्क-
सन्ध्यूर्धवयञ्जनसंपन्नमुपचितं वलिभर्मध्यचन्द्राकृति ललाटं, बहलो विपुलसम-
पीठो समो नीचैवृद्धौ एष्टोऽवनतौ सुक्षिष्ठकर्णपुत्रकौ महाच्छिद्रौ कर्णौ, ईषत्प्र-
लम्बिन्यावसंगते समे संहते महत्यौ भ्रुवौ, समे समाहितदर्शने व्यक्तभागविभागे
बलवती तेजसोपपन्ने स्वङ्गापाङ्गे चक्षुषी, ऋज्यी महोच्छासा वंशसंपन्नेपदवन-
ताग्रा नासिका, महद्वजुसुनिविष्टदन्तमास्यम्, आयामविस्तारोपपन्ना श्लेषणा

तन्वी प्रकृतिवर्णयुक्ता जिह्वा, श्लक्षणं युक्तोपचयमूष्मोपपन्नं रक्तं तालु, महानदीनः स्निग्धोऽनुनादी गम्भीरसमुत्थो धीरः स्वरः, नातिस्थूलौ नातिक्षशौ चिस्तारोप-पन्नावास्यप्रच्छादनौ रक्तावौष्ठौ, महत्यौ हनू, वृत्ता नातिमहती श्रीवा, व्यूढमु-पचितमुरः, गूढं जन्म पृष्ठवंशश्च, चिप्रकृष्टान्तरौ स्तनौ, असंपातिनी स्थिरे पार्वेः, वृत्तपरिपूर्णायतौ बाहू सकृथिनी अङ्गुलयश्च, महदुपचितं पाणिपादं, स्थिरा वृत्ताः स्निग्धास्ताम्रास्तुङ्गाः कूर्माकाराः करजाः, प्रदक्षिणावर्ता सोत्सङ्गा च नाभिः, उरस्त्रिभागहीना समा समुपचितमांसा कटी, वृत्तौ स्थिरोपचितमांसौ नात्युक्तौ स्फिक्तौ, अनुपूर्वं वृत्ताखुपचययुक्तान् नात्युपचिते नात्युपचिते एणीपदे प्रगृढ-सिरास्थिसन्धी जङ्गे, नात्युपचितौ नात्युपचितौ गुल्फौ, पूर्वोपदिष्टगुणौ पादौ कूर्माकारौ, प्रकृतियुक्तानि वातमूत्रपुरीषगुह्यानि तथा स्वप्रजागरणायासस्मित-रुदितस्तनग्रहणानि, यच्च किञ्चिदन्यदप्यनुक्तमस्ति तदपि सर्वं प्रकृतिसंपन्नमिष्टं, चिपरीतं पुनरनिष्टम् । इति दीर्घायुर्लक्षणानि ॥ ५१ ॥

After performing the rites for giving a name to the child, he should be examined with a view to ascertaining the span of his life. The following are signs and symptoms of children having a long span of life.

<i>Organs of the child</i>	<i>Characteristic feature indicative of long span of life.</i>
(1)	(2)
1. Hair	discrete, soft, sparse, unctuous, firmly rooted and black;
2. Skin	thick and not loose;
3. Head	Constitutionally of excellent type, slightly bigger in size (than the measurement furnished in <i>Vimāna</i> 8:117), proportionate with other parts of the body and resembling an umbrella in shape.
4. Fore-head	broad, strong, even, compact having firm union with temporal bones, having three transverse lines, plump, having wrinkles and having the shape of a half moon.
5. Ears	thick, large in size, having even lobes, equal in size, having elongations downwards, bent towards back side, having compact tragus and having a big earhole.

(1)	(2)
6. Eye brows	slightly hanging downwards, separated from each other, equal in size, compact and large in size.
7. Eyes	equal in size, having fixed look, having clear cut divisions (of pupil, iris or black portion of the eye, sclera or white portion of the eye), strong, lustrous, beautiful and having beautiful <i>apāṅga</i> (corners of eyes);
8. Nose	straight, capable of taking deep breath well ridged, and slightly curved at the tip;
9. Mouth	big in size, straight and having (two rows of) compact teeth;
10. Tongue	having proper length and breadth, smooth, thin and endowed with natural colour.
11. Palate	smooth, plump, hot in touch and red in colour.
12. Voice	profound, not sluggish, sweet, having echo, deep toned and steady;
13. Lips	neither very thick nor very thin, having adequate width, capable of covering the mouth cavity and red in colour;
14. Jaws	large in size;
15. Neck	round in shape and not very large in size;
16. Chest	broad and plumpy;
17. Clavicles and Vertibral column	not visible;
18. Breasts	having wide space in between them;
19. <i>Paśva</i> (sides of the chest)	absence of any uneven appearance, downwards and firm;
20. Arms, thighs, fingers including toes	round, full and extended;
21. Hands and Legs	large in size and plump.

(1)	(2)
22. Nails	firm, round, unctuous, coppery coloured, properly elevated and convex like the back of a tortoise;
23. Umblicus	whirled clock-wise and well depressed;
24. Waist	less than 3/4th of the chest in circumference, even and plump with muscles;
25. Buttocks	round, firm, plump with muscles and neither excessively elevated nor excessively depressed;
26. Thighs	tapering downwards, round and plump;
27. Calf region	neither excessive plump nor excessively emaciated, having resemblance with that of a deer and having vessels, bones and joints well covered;
28. Ankles	neither excessively plump nor excessively emaciated;
29. Feet	having the characteristic features described above and having the shape like that of a tortoise;

To child having a long span of life is given to normal flatus, urine, stool, anus, sleep, vigil, fatigue, smiling, crying, suckling of milk and similar other factors/phenomena which are not described here—they are neither more nor less than the normal.

If the child is with the organs/phenomena having attributes in contradistinction with what is described above, then they are indicative of a short span of life of the child.

Thus ends the signs and symptoms of a child having a long span of life. [51]

In *Vimāna*, 8 : 117, the ideal measurement of various organs of the body is described. Any deviation from this measurement is considered to be undesirable. But according to the above passage (item Nos. 3 & 21 refer), the head, hands and legs of the child with a long span of life are longer in size than what is described earlier as normal. These are to be taken as exceptions to the general rule laid down in *Vimāna*, 8 : 117. But the description of larger size in the above para implies only a minor change in size. It is also stated here that the head should be proportionate with the body.

Selection of wet-nurse :

अतो धात्रीपरीक्षामुपदेश्यामः । अथ ब्रूयात्—धात्रीमानय समानवर्णं यौवनस्थां निभृतामनातुरामव्यक्तामव्यसनामविरुपामजुगुप्सितां देशजातीयाम-शुद्धामशुद्धकर्मिणीं कुले जातां वत्सलामरोगां जीवद्वत्सां पुंवत्सां दोग्धीमप्रम-त्तामनुच्चारशायिनीमनन्त्यावसायिनीं कुशलोपचारां शुचिमशुचिद्वेषिणीं स्तनस्त-न्यसंपदुपेतामिति ॥ ५२ ॥

Now we shall describe the procedure to be adopted in selecting a wet-nurse. She should be of the same caste, youthful (women before the attainment of youth have immature tissue elements and the tissue elements of old women had undergone destruction—hence they are not suitable to be employed as wet-nurse), submissive, free from diseases, not deficient of limbs, not given to luxurious living, not ugly looking (because of deformity in her organs), not given to hateful disposition, born in the same locality, not mean minded, not given to mean acts, born in a respectable family, having affection for children, free from illness, having living children, having sons, having plenty of milk, careful, not given to sleeping over cloths soiled with excreta, not having a husband of lower caste (e.g. a *ādرا* woman having a *Cañḍāla* husband), skilful in service, observing cleanliness, having aversion for dirty things, having the excellence of breasts and milk [52].

Excellence of breasts :

तत्रेयं स्तनसंपत्—नात्यूच्चौ नातिलम्बावनतिक्षशावनतिपीनौ युक्तिपि-प्पलकौ सुखप्रपानौ चेति (स्तनसंपत्) ॥ ५३ ॥

The qualities of excellent breasts are as follows :

1. They should not be situated at a very high level in the chest;
2. They should not hang very loose;
3. They should neither be very lean nor very plump;
4. They should be attached with nipples of proportionate size;
5. The child should find it easy to suckle them;

This is about the excellence of breasts. [53]

Excellence of breast-milk :

स्तन्यसंपत्तु प्रकृतिवर्णगन्धरससर्पशम्, उदपात्रे च दुष्यमानमुदकं व्येति
प्रकृतिभूतत्वात् ; तत् पुष्टिकरमारोग्यकरं चेति (स्तन्यसंपत्) ॥ ५४ ॥

अतोऽन्यथा व्यापनं क्षेयम् । तस्य विशेषाः—स्थावारणवर्णं कषायानुरसं
विशदमनालक्ष्यगन्धं रुक्षं द्रवं फेनिल लघ्वतृसिकरं कर्शनं वातविकाराणां कर्तृं
वातोपसृष्टं क्षीरमभिश्वेयं; कृष्णनीलपीतताप्रावभासं तिकाम्लकदुकानुरसं कुण-
परुधिरगन्धि भृशोष्णं पित्तविकाराणां कर्तृं च पित्तोपसृष्टं क्षीरमभिश्वेयम्, अत्य-
र्थशुक्रमतिमाधुर्योपपन्नं लवणानुरसं घृततैलवसामज्जगन्धि पिच्छिलं तनुमदुद-
कपात्रेऽवसीदद्वेष्मविकाराणां कर्तृं क्षेष्मोपसृष्टं क्षीरमभिश्वेयम् ॥ ५५ ॥

Milk of excellent quality should have natural colour, smell, taste and touch. When poured over a pot of water, it gets mixed up with the water if it is endowed with natural qualities. This provided nourishment and maintains good health of the child.

If the qualities of milk do not conform to the above, then it should be considered as vitiated. Characteristic features of the milk vitiated *doṣas* are as follows :

Vitiating Doṣa Characteristic features of the vitiated milk.

(1)

(2)

Vata

blackish or reddish in colour, astringent in *anurasa* (after taste), clear, absence of any conspicuous smell, ununctuous, liquid, frothy, light, not satisfying, and causing emaciation *vatika* diseases.

(2) *Pitta*

blackish, bluish, yellowish or coppery in colour; bitter, sour or pungent in after-taste; having smell like that of a dead body or blood; excessively hot and causing *paittika* diseases.

(3) *Kapha*—

exceedingly white in colour; excessively sweet in taste and having saline after taste; having the smell of ghee, oil, *vasa* (muscle fat) and bone marrow; slimy; thready; settling down at the bottom when poured into a vessel containing water and causing *ślaiṣmika* type of diseases. [54—55]

If the milk, poured into a vessel containing water, gets mixed up with water, then this should be considered as normal (unvitiated). This view has also been supported by Jatūkāraṇa. When milk is vitiated by *kapha*, it produces saline *anurasa* (after taste). This is caused by the specificity that emerges because of the interaction between the *dōṣa* and the *dhātu*. Saline taste alone of the milk is indicative of simultaneous vitiation by two *dōṣas* (*dvandvaja*) or by all the three *dōṣas* (*samnnipātaja*).

Treatment of vitiated breast-milk :

तेषां तु त्रयाणामषि क्षीरदोषाणां प्रतिविशेषमभिसमीक्ष्य यथास्वं यथा-
दोषं च वमनविरेचनास्थापनानुवासनानि विभज्य कृतानि प्रशमनाय भवन्ति ।
पानाशनविधिस्तु दुष्क्षीराया यवगोधूमशालिषष्टिकमुद्दहरेणुककुलथसुरासौ-
वीरकमैरेयमेदकलशुनकरञ्जप्रायः स्यात् । क्षीरदोषविशेषांश्चावेक्ष्यावेक्ष्य तत्त-
द्विधानं कार्यं स्यात् । पाठामहौषधसुरदारमुस्तमूर्वागुड्हचीवत्सकफलकिरात-
तिक्तकटुकरोहिणीसारिवाकघायाणां च पानं प्रशस्यते, तथाऽन्येषां तिक्तकषा-
यकटुकमधुराणां द्रव्याणां प्रयोगः क्षीरविकारविशेषानभिसमीक्ष्य मात्रां कालं
च । इति क्षीरविशेषधनानि ॥ ५६ ॥

When (breast) milk gets vitiated; the specific nature of the vitiation should be ascertained, and depending upon the *dōṣas* involved and the quantum of their vitiation, the mother should be given *vamana* (emetic therapy), *virecana* (purgation therapy), *asthapana* (corrective enema) and *anuvāsana* (uuctuous enema) which ever is found suitable, for the cure of the ailment. The food and drink of the mother whose milk is vitiated should for the most part consist of barley, wheat, *śāli* (*Oryza sativa* Linn.), *saṭhika* (a type of *śāli*), *mudga* (*Phaseolus mungo* Linn.), *hareñuka* (*Lathyrus aphaca* Linn.), alcoholic preparatihns like *sura sauviraka maireyaka* and *medaka*, *laśuña* (*Allium sativum* Linn.) and *karañja* (*Pongamia pinnata* Merr.). Suitable regimens should be advised to her depending upon the specific nature of the vitiation of milk. Keeping in view the specific nature of the vitiation of milk, dose and time, it is beneficial to administer the decoction of *pāṭha* (*Cissampelos pareira* Linn.), *mahausadha* (*Zingiber officinale* Rosc.), *suradaru* (*Cedrus deodara* Loud.), *mustā* (*Cyperus rotundus* Linn.), *mūrvā* (*Clematis triloba* Heyne ex Roth) *guḍūci* (*Tinospora cordifolia* Miers) fruit of *vatsaka* (*Holarrhena antidysentrica* wall.) *kirātatikta* (*Swertia chirata* Buch.-Han.) *Kaṭurohiṇī* (*Picrorhiza kurroa* Royle ex Benth.) (individually or

all of them together) and *sārivara* (*Hemidesmus indicus* R. B.) and such other drugs having bitter, astringent, pungent and sweet tastes.

Thus the measures for the correction of the vitiation of milk are described. [56]

Vitiating *dosas* may get lodged in different parts of the body, viz, *kōṣṭha* etc; and they may be fully active of otherwise in the process of vitiation. Keeping these states of vitiating *dosas* in view, elimination therapies should be administered. Different elimination therapies are meant to correct different *dosas* e.g. emesis for correcting the vitiation of *kapha*, purgation for pitta and *asthāpana* (corrective) as well as *anuvāsana* (unctuous) types of enema for *vāyu*. Thus, a suitable therapy should be selected to correct the *dosa* concerned. The quantum in which these therapies are to be administered for correcting the vitiating conditions depends upon the extent to which the respective *dosas* are vitiated.

Promoters of lactation :

क्षीरजननानि तु मद्यानि सीधुवर्ज्यानि, ग्राम्यानपौदकानि च शाकधान्य-
मांसानि, द्रवमधुराम्ललवणभूयष्टिश्वाहाराः, क्षीरिण्यश्वैषधयः, क्षीरपानमना-
यासश्च, वीरणषष्ठिकशालीक्षुवालिकादर्भकुशकाशगुन्देत्कटमूलकषायाणां च
पानमिति (क्षीरजननानि) || ५७ ||

The following are the promoters of lactation :

1. wines except *sidhu* (a type of wine);
2. vegetables, corns and meat of animals which are domesticated and which inhabit the marshy land and water;
3. food having the predominance of liquid ingredients or ingredients having sweet, sour and saline tastes;
4. medicinal plants having milky juice like *dugdhikā* (*Euphorbia microphylla* Heyne) and *Kalambikā* (*Ipomoea reptans* Poir);
5. intake of milk and care free living;
6. intake of the decoction of the roots of *viraṇa* (*Vetiveria zizanioides* Nash.), *śaṣṭhika* (a type of *śāli*), *śali* (*Oryza sativa* Linn.), *ikṣuvālikā* (*Astercantha longifolia* Nees), *darbhā* (a type of *kuṣa*) *kuṣa* (*Desmostachya bipinnata* Stapf), *kāṣa* (*Saccharum spontaneum* Linn.) *gundrā* (*Saccharum sara*) and *itkata* (?).

These are the promoters of lactation. [57]

Procedure for feeding the child :

धात्री तु यदा स्वादुबहुलशुद्धुग्धा स्यात्तदा स्नातानुलिपा शुक्रवस्त्रं परिधायैन्द्रीं ब्राह्मीं शतवीर्यां सहस्रवीर्यामोघामव्यथां शिवामरिष्टां वार्ष्यपुष्टीं विष्वक्सेनकान्तां वा विभ्रत्योषधिं कुमारं प्राढ्युखं प्रथमं दक्षिणं स्तनं पाययेत्। इति धात्रीकर्म ॥ ५८ ॥

The milk of the wet-nurse should be sweet in taste, copious and pure. Such a wet-nurse should take her bath, use unction, wear white cloth as well as medicines like *aindri* (*Citrullus colocynthis* Schrad.), *brāhma* (*Bacopa monnieri* Pennel), *śataviryā* (*Cynodon dactylon* Pers.), *sahasravyā* (a type of *śataviryā*), *amogha* (*Emblica officinalis* Gaertn.), *avyathā* (*Tinspora cordifolia* Miers), *śiva* (*Terminalia chebula* Linn.), *ariṣṭa* (*Picrothiza kurroa* Royle ex Benth.), *Vātyapuṣṭī* (*Sida rhombifolia* Linn.) and *viśvaksenakāntā* (*Callicarpa macrophylla* Vahl.). Thereafter, keeping the child facing toward the east, she should make him to suckle her right breast first.

Thus the duties of a wet-nurses are described. [58]

Nursery :

अतोऽनन्तरं कुमारागारविधिमनुव्याख्यास्यामः—वास्तुविद्याकुशलः
प्रशस्तं रस्यमतमस्कं निवातं प्रवातैकदेशं दद्यमपगतश्वापदपशुदंष्ट्रिमूषिकपतकं
सुविभक्तसलिलोल्खलमूत्रवर्चाः स्थानस्नानभूमिमहानसमृतुसुखं यथर्तुशयनासना-
स्तरणसंपन्नं कुर्यात् ; तथा सुविहितरक्षाविधानबलिमङ्गलहोमप्रायश्चित्तं शुचि-
वृद्धवैद्यानुरक्तजनसंपूर्णम् । इति कुमारागारविधिः ॥ ५९ ॥

Now we shall describe the procedure for the construction of a nursery for the child. The nursery should be constructed under the supervision of an expert architect. It should be (1) a commendable one, (2) beautiful, (3) free from darkness, (4) sheltered from draught, (5) admitting air only from one side, (6) sturdy, (7) free from *śvapada* (animals having legs like those of dogs like tiger and leopard), *paśu* (animals in general), *dāmśṭrin* (fanged creatures), rats and moths; (8) well planned places for water storage, grinding, lavatory, bath and kitchen; (9) comfortable for living in all seasons (air conditioned) and (10) furnished with beds, seats and spreads in conformity with the needs of that particular season.

There should be proper arrangement for the protection of the house from outside attacks. Sacrifices, auspicious rites,

offerings of oblations and recitation of expiatory verses should be performed in the house. This house should be kept crowded with persons who are clean, experienced physicians and those who have attachment with the family.

Thus the procedure for the construction of the nursery is described. [59]

Cleanliness of beds etc. :

शयनासनास्तरणप्रावरणानि कुमारस्म मृदुलघुशुचिसुगन्धीनि स्युः;
स्वेदमलजन्तुमन्ति मूत्रपुरीषोपसृष्टानि च वर्ज्यानि स्युः; असति संभवेऽन्येषां
तान्येव च सुधूपितानि शुद्धशुष्काण्युपयोगं गच्छेयुः ॥ ६० ॥

Beds, seats, spreads and apparel of the child should be soft, light, clean and fragrant—those which are soiled with sweat, excreta, germs, urine and stool should be discarded. If it is not possible to procure others, then the soiled ones should be well exposed to sun; after their covers are well-washed. Thus they can be used only after they are rendered clean and dry. [60]

The apparel of the child should be well washed so as to render them free from dirt, and spots caused thereby. Even though clean, wet cloth should not be used for the child—they should be dried well before use.

Drugs for fumigation of cloths :

धूपनानि पुनर्वासिसां शयनास्तरणप्रावरणानां च यवसर्षपातसीहिङ्गुभु-
लुवचाचोरकवयःस्थागोलोमीजटिलापलङ्घाशोकरोहिणीसर्पनिर्मोकाणि घृत-
युक्तानि स्युः ॥ ६१ ॥

Barely, mustard, *atasi* (*Linum usitutissimum* Linn.), *hiṅgu* (*Ferula narthex* Boiss.), *guggulu* (*Commifora mukul* Engl.), *vaca* (*Acorus calamus* Linn.), *coraka* (*Angelica glauca* Edgw.), *Vayasthā* (*Bacopa monnieri* Pennel), *golomi* (a type of *vaca*), *jaṭila* (*Nardostachys jatamansi* D. C.), *palanķaṣā* (a type of *guggulu*), *aśoka* (*Saraca indica* Linn.), *rohiṇī* (*Picrorhiza kurroa* Royle ex Benth) and slough of snake mixed with ghee should be used for fumigation of cloths used for beds, spreads and apparel. [61]

Wearing talismans :

मण्यश्च धारणीयाः कुमारस्य खड्गरुगवयवृषभाणां जीवतामेव दक्षिणे-
भ्यो विषाणेभ्योऽग्राणि गृहीतानि स्युः; पेन्द्रयाद्याशौषधयो जीवकर्षभकौ च,
यानि चान्यान्यपि ब्राह्मणाः प्रशंसेयुरथर्ववेदविदः ॥ ६२ ॥

The child should be made to wear the following as talisman :

1. jewels viz., pearl etc. (as prescribed in the Atharva-Veda).

2. tips of the right horns of rhinoceros, dear, gayal or bull collected when they are alive;

3. medicinal plants like *aindri* etc; (vide para 58 of this chapter and *Sūtra 4 : 18*) *jivaka* (?) and *ṣabhaṇa* (?);

4. such other things as are praised and prescribed by the *brāhmaṇas* well versed with the Atharva-veda. [62]

Toys :

क्रीडनकानि खलु कुमारस्य विचित्राणि धोषवन्त्यभिरामाणि चागुरूणि
चातीश्कण्डग्राणि चानास्यप्रवेशीनि चाप्राणहराणि चावित्रासनानि स्युः ॥ ६३ ॥

Toys of the child should be variegated, sound producing, beautiful, light, without sharp edge, incapable of being swallowed, fraught with no danger to life and unfrightening. [63]

Child should not be frightened :

न हास्य वित्रासनं साधु । तस्मात्स्मिम् रुदत्यभुज्ञाने वाऽन्यत्र विद्येय-
तामगच्छति राक्षसपिशाचपूतनाद्यानां नामान्याहयता कुमारस्य वित्रासनार्थं
नामग्रहणं न कार्यं स्यात् ॥ ६४ ॥

It is not advisable to frighten the child (at any stage). Therefore, whether he cries or does not eat or does not submit to discipline, he must not be frightened by calling the names of *rakṣasa*, *pisāca*, *pūtana* etc. (all evil creatures). [64]

Management of pediatric diseases :

यदि त्वातुर्यं किञ्चित् कुमारमागच्छेत् तत् प्रकृतिनिमित्तपूर्वरूपलिङ्गोपश-
यविशेषस्तत्त्वतोऽनुबृथ्य सर्वविशेषानातुरौषधदेशकालाश्रयानवेक्षमाणश्चि-
कित्सितुमारभेतैनं मधुरमृदुलघुसुरभिशीतशङ्करं कर्म प्रवर्तयन् । एवंसातम्या हि
कुमारा भवन्ति । तथा ते शर्म लभन्ते चिराय । अरोगे त्वरोगवृत्तमातिष्ठेदेश-
कालात्मगुणविपर्ययेण वर्तमानः, क्रमेणासातम्यानि परिवर्त्योपयुज्ञानः सर्वार्ण-
हितानि वर्जयेत् । तथा बलवर्णशरीरायुषां संपदमवाप्नोतीति ॥ ६५ ॥

एवमेनं कुमारमायौषनग्रासेर्धर्मार्थं कौशलागम्नाद्यानुपालयेत् ॥ ६६ ॥

If the child gets afflicted with any disease, it should be properly diagnosed, with due regard to the specific nature of

the etiology, premonitory symptoms, signs and symptoms and *upāśayat a* (homologatory signs) of the disease. Simultaneously, characteristic features of the patient, drugs, locality, season and physical constitution of the child should be examined. Thereafter, he should be treated by administering therapies which are sweet, soft, light, fragrant, cold and propitious. Such types of therapies are wholesome for children and produce everlasting good effects. If he is free from any disease whatsoever; the child should made to resort to regimens which are opposite in quality to the locality, time and bodily constitution for the maintenance of positive health. Unwholesome regimens should be gradually changed to wholesome ones and all things injurious for health should be avoided. By doing so, child gets endowed with excellent strength, complexion, physical constitution and span of life.

In this manner, from childhood to youth, the child should be brought up till he is competent to perform religious rites and earn wealth. [65-66]

Measures to be adopted for the maintenance of positive health are described in *Sārira* 6 : 8. The procedure for giving up unwholesome things and resorting to wholesome ones is described in *Sūtra* 7 : 36-37.

शति पुत्राशिषां समृद्धिकरं कर्म व्याख्यातम् । तदाचरन् यथोक्तविधिभिः
पूजां यथेष्टुं लभते उनसूयक इति ॥ ६७ ॥

Thus the measures for the fulfilment of desire to have progeny are described. By taking recourse to these factors in the prescribed manner, one who is free from envy is blessed (with progeny) according as he wishes. [67]

तत्र स्तोकौ—

पुत्राशिषां कर्म समृद्धिकारकं यदुक्तमेतन्महदर्थसंहितम् ।
तदाचरन् ज्ञो विधिभिर्यथातथं पूजां यथेष्टुं लभते उनसूयकः ॥ ६८ ॥

To sum up :

Measures described here fulfil the desire of the individual to obtain a son and they are of great importance. By taking recourse to these measures in a prescribed manner, wise man free from envy is blessed (with a child) according as he wishes. [68]

This description relates to both men and women who are desirous of having a male child.

शरीरं चिन्त्यते सर्वं दैवमानुषसंपदा ।
सर्वभावैर्यतस्तस्माच्छारीरं स्थानमुच्यते ॥ ६९ ॥

This section is known as “*Sārirasthana*” because it deals with the description of the knowledge which is conducive to be understanding of all the godly and human aspects of the phenomena in the individual's body. [69]

इत्यग्निवेशकृते तन्ने चरकप्रतिसंस्कृते शारीरस्थाने जातिसूत्रीयं शारीरं
नामाष्टमोऽध्यायः ॥ ८ ॥

Thus ends the eighth chapter of the *Sārira* section dealing with the description of the method of procreation as conducive to the understanding of the human body, of Agniveśa's work as redacted by Caraka. [8]

शारीरस्थानं सम्पूर्णम् ।

Thus ends the *Sārira* Section.

इन्द्रिय स्थानम्

INDRIYA STHĀNA

CHAPTER I

SECTION ON THE SYMPTOMS OF IMMINENT DEATH

प्रथमोऽध्यायः

अथातो वर्णस्वरीयामन्दिद्यं व्याख्यास्यामः ॥ १ ॥

दूति ह स्माह भगवानात्रेयः ॥ २ ॥

Now we shall expound the chapter on “Signs and symptoms of Imminent Death as indicated by complexion and Voice”.

Thus said Lord Ātreya. [1-2]

In the previous section, the various constituents of the body are described. The treatment of diseases is going to be taken up in the next section. The present chapter represents a discussion on the signs and symptoms of imminent death.

The placement of this section between the previous section on bodily constitution and the subsequent section on the treatment of diseases is significant. A physician equipped with the observation made in this section will undertake the treatment of curable cases only, and not the incurable ones. It has been stated in *Sūtra*, 10 : 8 that a physician undertaking the treatment of incurable diseases would only subject himself to loss of wealth, learning and fame as well as bad reputation and would lose confidence of people. Such a situation can be avoided if the physician is fully aware of the signs and symptoms of imminent death which form part of discussion of this section.

This section is entitled ‘*Indriyasthāna*’. Here ‘*Indriya*’ means the signs and symptoms (*līṅga*) of the life (*indra*) approaching its end; cf. *Aṣṭādhyāyī*, 5 : 2 : 93.

Such of the signs and symptoms as can be directly observed by visual or other faculties are described in this first chapter relating to the signs and symptoms of imminent death as indicated by complexion and voice. The subtle types of such signs and symptoms will be described in subsequent chapters.

Factors to be examined to determine residual span of life :

इह खलु वर्णश्च स्वरश्च गन्धश्च रसश्च स्पर्शश्च चक्षुश्च श्वोत्रं च द्राणं च
रखनं च स्पर्शनं च सत्त्वं च भक्तिश्च शौचं च शीलं चाचारम् स्मृतिश्चाकृतिश्च

प्रकृतिश्च विकृतिश्च बलं च ग्लानिश्च मेधा च हर्षश्च रौक्ष्यं च स्नेहश्च तन्द्रा चार-
म्भश्च गौरवं च लाघवं च गुणाश्चाहारश्च विहारश्चाहारपरिणामश्चोपायश्चापायश्च
व्याधिश्च व्याधिपूर्वरूपं च वेदनाश्चोपद्रवाश्च च्छाया च प्रतिच्छाया च स्वग्रहर्दर्शनं
च दूनाधिकारश्च पथि चौत्पातिकं चातुरकुले भावावस्थान्तराणि च भेषजसंबृ-
त्तिश्च भेषजविकारयुक्तिश्चेति परीक्ष्याणि प्रत्यक्षानुमानोपदेशैरायुषः प्रमाणावशेषं
जिज्ञासमानेन भिषजा ॥ ३ ॥

The following factors should be examined by the physician desirous of ascertaining the residual span of life of the patient by direct observation, inference and scriptural testimony :

1. complexion, 2. voice, 3. smell, 4. taste, 5. touch,
6. eyes, 7. ears, 8. nose, 9. tongue, 10. skin, 11. mind, 12. desire,
13. purity, 14. conduct, 15. refined behaviour, 16. memory,
17. shape, 18. nature, 19. morbidity, 20. strength, 21. exhaustion,
22. intelligence, 23. exhilaration, 24. dryness, 25. unctuousness,
26. drowsiness (sleep), 27. onset, 28. heaviness, 29.
lightness, 30. attributes, 31. diet, 32. regimens, 33. digestion,
of food, 34. manifestation of the disease, 35. disappearance of
the disease, 36. characteristic features of the disease, 37. pre-
monitory signs of the disease, 38. pain, 39. complication, 40.
lustre, 41. shadow, 42. dream, 43. messenger, 44. bad omens
visualised by the physician on his way to the patient's house.,
45. bad omens at the residence of the patient, 46. adminis-
tration of proper medicine and 47. effect of medicine in
disease. [3]

The above paragraph represents a complete description of the subject matter dealt within this section.

Sense organs being the receptacles of the various objects should have normally occupied the first position in the list given above. But the sense organs in themselves are transcendental in nature, and so the premonitory symptoms reflected in them are also too subtle to be noticed. The premonitory symptoms pertaining to more concrete items like complexion, on the other hand, are more easily observable. So they are mentioned first in the order of their relative conspicuousness. One might argue that the thunderous noise of cloud is more easily perceptible than complexion and as such, it deserves priority over complexion. But as a matter of fact, the sound mentioned here is confined to the sound produced out of contacts with palate etc. Such sound is definitely more subtle than complexion.

All these items are enumerated here in an uncompound form. This is for the sake of clarity. The intention is that the symptoms pertaining to any one of these items equally hold good as instruments of premonition. If the sentence were in a compounded form, one might suspect, that all these items only in a combined form would be indicative of premonition. Here complexion includes coarseness etc. which form the object of visual perception—cf. *Indriya*, 1 : 10. Sound etc., include even their absence e.g. absence of sound in phalangeal joints. Touch includes perception of hardness etc., Impairment of mental faculty is illustrated in *Indriya* 12 : 47. As a matter of fact desire, purity, conduct, refined behaviour etc.. are included under mental faculty itself—cf. *Sārira*, 3 : 13. They are however mentioned here separately as each one of them might be indicative of imminent death. Premonitory symptoms as reflected in the onset of diseases are described in *Indriya* 6 : 12. Examples of heaviness are given in *Indriya*, 9 : 18. Feeling of lightness in heavy limbs constitutes premonitory condition. For attributes vide *Indriya*, 12 : 54. Āhāra (food) is explained in *Indriya*, 12 : 8. Effect of āhāra (food) as indicative of imminent death is explained in *Indriya*, 7 : 22. Manifestation and disappearance of diseases are described in *Indriya* 8 : 23, and *Indriya*, 9 : 15 respectively. The disease itself as a premonitory condition is described in *Indriya*, 10 : 4. Shadow includes the shadow in the pupil of the eye. Lustre, shadow etc., are described in the chapter-7 of this section. Premonitory condition as reflected by the events in the family of the patient are described in *Indriya*, 12 : 34. Administration of proper medicine is described in *Indriya*, 12 : 6. For the effect of medicine vide *Indriya*, 12 : 7.

All the items described above are required to be examined in relation to the quest for longevity. In the present context however, they are required to be examined as a means to the knowledge of the residual span of life.

Out-line of the method of examination :

तत्र तु खल्वेषां परीक्ष्याणां कानिचित् पुरुषमनाश्रितानि, कानिचित्पुरुषसंश्रयाणि । तत्र यानि पुरुषमनाश्रितानि तान्युपदेशातो युक्तिश्च परीक्षेत, पुरुषसंश्रयाणि पुनः प्रकृतितो विकृतिश्च ॥ ४ ॥

Some of the items described in the above paragraph do not relate to patients and some others are related to them. Those wh.ch do not relate to the patients are required to be ascertained from scriptural instructions and inference. Those which are related to patients are required to be ascertained from their natural and unnatural (morbid) dispositions. [4]

Premonitory symptoms of imminent death are sometimes not related to patients e.g. in the chapter, 12 : 9-24 of this section, certain situa-

tions relating to a messenger calling on the physician are described as indicative of imminent death of the patient. One can only see the messenger or his situations by direct perception but the value of these situations as indicative of imminent death can be ascertained only from scriptural testimony.

Thus direct perception might be useful in ascertaining symptoms pertaining to patients. But in so far as symptoms pertaining to messenger etc., are concerned, it does not help (except in actually ascertaining the situations of messenger etc.).

The knowledge of the normal condition of a patient is useful for distinguishing the morbid conditions and so it is exceedingly useful for ascertaining the premonitory condition indicative of imminent death. The examination of normalcy and morbidity can be conducted by direct perception etc.

Various types of prakṛti (natural disposition) :

तत्र प्रकृतिर्जातिप्रसक्ता च, कुलप्रसक्ता च, देशानुपातिनी च, कालानुपातिनी च, वयोऽनुपातिनी च, प्रत्यात्मनियता चेति । जातिकुलदेशकालवयःप्रत्यात्मनियता हि तेषां तेषां पुरुषाणां ते ते भावविशेषा भवन्ति ॥ ५ ॥

Natural disposition is of six categories depending upon the distinctive feature of :

1. caste e. g. purity among *brāhmaṇas*;
2. family e. g. purity with regard to character and conduct in a good family;
3. locality among people of *antarvedi* region (the doab or the district between the Ganga and the Yamuna rivers MW.);
4. time e.g. purity in the *Satya yuga* i. e. the first age;
5. age of the patient e. g. impurity in childhood;
6. the individual e. g. purity rarely found in some individuals. [5]

Various types of vikṛti (unnatural disposition) :

विकृतिः पुनर्लक्षणनिमित्ता च, लक्ष्यनिमित्ता च, निमित्तानुरूपा च ॥ ६ ॥

The morbid condition of three types, viz.

- (1) *lakṣyānimitṭa* (caused by bodily marks);
- (2) *lakṣyānimitṭa* (caused by etiologicat factors) and
- (3) *nimitṭānurūpa* caused by such factors which resemble the etiological factors. [6]

Bodily marks as indicative of unnatural disposition :

तत्र लक्षणनिमित्ता नाम सा यस्याः शरीरे लक्षणान्येव हेतुभूतानि भवन्ति दैवात् ; लक्षणानि हि कानिचिच्छुरीरोपनिबद्धानि भवन्ति, यानि हि तर्स्मित्स्मिन् काले तत्राधिष्ठानमासाद्य तां तां विकृतिसुत्पादयन्ति ॥ (१) ॥

If as a result of past action bodily marks indicate certain morbid conditions; they are known as *lakṣaṇa nimitta*. There are certain bodily marks which, depending upon certain situations, give rise to morbid conditions in course of time. [7-i]

As a matter of fact, it is the past action, which constitutes the fate of an individual and which is responsible for morbid conditions. Such conditions e.g. attainment of empire, wealth, assassination, imprisonment etc., are no doubt indicated by bodily marks like the sign of lotus etc. So these marks are considered as causative factors for such morbid condition in a secondary sense.

Etiological factors as indicative of unnatural disposition

लक्ष्यनिमित्ता तु सा यस्या उपलभ्यते निमित्तं यथोक्तं निदानेषु ॥ (से) ॥

Morbid conditions caused by etiological factors as described in *Nidāna* section are known as *lakṣyanimitta* e. g. aggravation of *vata* etc., due to the intake of dry food etc. [7-ii]

Factors resembling etiology :

निमित्तानुरूपा तु निमित्तार्थानुकारिणी या, तामनिमित्तां निमित्तमायुषः प्रमाणज्ञानस्येच्छन्ति भिषजो भूयश्चायुषः क्षयनिमित्तां प्रेतलिङ्गानुरूपां, यामायुषोऽन्तर्गतस्य ज्ञानार्थमुपदिशन्ति धीराः । यां चाधिकृत्य पुरुषसंश्याणि मुर्मूर्तां लक्षणान्युपदेश्यामः । इत्युद्देशः । तं विस्तरेणानुव्याख्यास्यामः ॥ ७ ॥

There certain premonitory symptoms which only resemble the objects of the two types of causative factors described above. Such unnatural situations i. e. symptoms are known as *nimittanurūpa*. Even though they are not causative factors in the real sense of the term, they serve as a yard stick to measure the span of life. Further more, they are indicative of death as a result of the diminution of the span of life. So it is of primary importance for a physician to have a thorough knowledge of this type of unnatural situation inasmuch as it is exceedingly useful in ascertaining the span of life of an individual which cannot be determined otherwise. We shall describe such symptoms in relation to moribund patients. This is stated here but too briefly. We shall explain them in greater detail later. [7]

The two types of unnatural situations mentioned above are caused by the respective causative factors. There are certain situations which even though not caused by these causative factors appear as if they are caused by them. The objects of the above mentioned causative factors

are twofold, viz. production of an effect and indication of an effect. The situations of this type apparently imbibe the attributes of both these categories of objects. These situations might as well have been caused by certain causative factors. But such factors are not readily traceable.

These causative factors are sometimes available in a latent form which can be inferred from the unnatural situations indicative of imminent death.

Normal abnormal complexion :

तत्रादित एव वर्णाधिकारः । तदथा—कृष्णः, श्यामः, श्यामावदातः, अवदातश्चेति प्रकृतिवर्णः शरीरस्य भवन्ति; यांश्चागरानुपेक्षमाणो विद्यादनूकते-
ज्ञयथा वाऽपि निर्दिश्यमानां स्तज्ज्वैः ॥

नीलश्यामवताप्रहरितशुक्राश्च वर्णः शरीरस्य वैकारिका भवन्ति; यांश्चा-
गरानुपेक्षमाणो विद्यात् प्राग्विकृतानभूत्वोत्पन्नान् । इति प्रकृतिविकृतिवर्णा भव-
न्त्युकाः शरीरस्य ॥ ८ ॥

To start with, complexion is being described. There are four types of natural complexions—black, bluish, bluish white and white. There are some other types of natural complexion which can be ascertained by similarities or from the instructions of experts.

There are five types of unnatural complexions, viz. blue, grey, coppery, green and albinotic (abnormally white). Similarly, there are some other unnatural types of complexions which are produced anew.

Thus the normal (natural) and abnormal (unnatural) complexions in the body are described. [8]

Natural colour is generally considered to be the natural complexion of a person. Complexions caused by abnormalcy constitutes morbid condition of complexion. Sometimes natural complexion itself is caused by morbidity and *vice versa*.

It is possible to change the natural complexion by taking recourse to rejuvenation therapy. For example, a person having dark complexion can have white complexion as a result of the administration of such therapy. But this change of complexion might be a temporary phase and after the therapy is withdrawn, the original colour of the individual may reappear. This reappearance of the original complexion is a natural phenomenon, and this should not be considered as a symptom indicative of imminent death. It is only when the original complexion was white and all of a sudden it changes to some other colour, this would constitute such a symptom.

Combination of normal and abnormal complexions indicating imminent death :

तत्र प्रकृतिवर्णमर्धशरीरे विकृतिवर्णमर्धशरीरे, द्वावपि वर्णौ मर्यादाविभक्तो दृष्ट्वा; यदेवं सव्यदक्षिणविभागेन, यदेवं पूर्वपश्चिमविभागेन, यद्युत्तराधरविभागेन, यदन्तर्बहिर्विभागेन, आतुरस्यारिष्टमिति विद्यात्; एवमेव वर्णभेदो मुखेऽप्यन्यत्र वर्तमानो मरणाय भवति ॥ ९ ॥

It may so happen that half of the body may have natural complexion and the other half unnatural complexion and both of them are demarcated by an even demarcating line. These normal and abnormal complexions may simultaneously appear in right and left sides, front and back sides, upper and lower parts or internal and external parts of the body. They are the signs of imminent death for the individual.

Natural and unnatural complexions may simultaneously appear in the face and other parts of the body; they also indicate imminent death of the individual.

Natural and unnatural complexions may simultaneously appear in the face and other parts of the body and they also indicate imminent death of the individual. [9]

It is stated above that natural and unnatural complexions may simultaneously appear in the internal and external parts of the body and this indicates the imminent death of the individual. The colour of the inside surface of the mouth, nose and ear, are to be taken as the internal parts of the body in the present context.

Similar other factors :

वर्णभेदेन ग्लानिहर्षरोक्ष्यस्त्वा व्याख्याताः ॥ १० ॥

The description pertaining to the complexion also applies to other signs like emaciation and plumpness as well as dryness and unctuousness. [10]

Other morbid signs indicating imminent death :

तथा पिप्लुव्यङ्गतिलकालकपिडकानामन्यतमस्यानने जन्मातुरस्यैवमेवाप्रप्रशस्तं विद्यात् ॥ ११ ॥

Similarly the appearance of any one of *piplu* (port-wine mark), *vyāṅga* (freckles), *tilakālaka* (black mole) and *pidaka* (pimple) in the face of the patient is indicative of imminent death. [11]

Morbid Complexions :

नखनयनवदनमूत्रपुरीषहस्तपादैषादिष्वपि च वैकारिकोक्तानांवर्णानाम-
न्यतमस्य प्रादुर्भावो हीनबलवर्णेन्द्रियेषु लक्षणमायुषः क्षयस्य भवति ॥ १२ ॥

Appearance of any one of the abnormal colours in nails, eyes, face, urine, stool, hands, legs and lips (as described in para 9 of this chapter) together with diminution of strength, complexion and sensory perception is indicative of imminent death. [12]

Other morbid conditions :

यच्चान्यदिपि किञ्चिद्वर्णवैकृतमभूतपूर्वं सहसोत्पद्येतानिमित्तमेव हीयमान-
स्यातुरस्य शश्वत्, तदरिष्टमिति विद्यात् । इति वर्णाधिकारः ॥ १३ ॥

Sudden and accidental appearance of any other unusual morbid complexion is always indicative of growing weakness of the patient and does therefore constitute premonition for imminent death. [13]

Any change in colour constitutes premonitory symptom of imminent death only when it is of unusual type and not caused by such measures as the administration of rejuvenation therapy.

Normal and abnormal voice :

स्वराधिकारस्तु—हंसकौञ्जनेमिदुन्दुभिकलविङ्काकपोतजर्जरानुकाराः
प्रकृतिस्वरा भवन्ति; यांश्चापरानुपेक्षमाणोऽपि विद्यादनूकतोऽन्यथा वाऽपि निर्दिः
श्यमानांस्तज्ज्ञैः । एडककलग्रस्ताव्यक्तगददक्षामदीनानुकीर्णस्त्वातुराणां स्वरा
वैकारिका भवन्ति; यांश्चापरानुपेक्षमाणोऽपि विद्यात् प्राग्विकृतानभूत्वोत्पन्नान् ।
इति प्रकृतिविकृतिस्वरा व्याख्याता भवन्ति ॥ १४ ॥

The normal human voice resembles the voice of *hamsa* (swan), *krauñca* (demoiselle crane), *nemi* (wheel), *dundubhi* (kettle drum), *kalavīñka* (house sparrow), *kaka* (crow), *kapota* (dove) and *jarjara* (a type of drum). There are some other types of natural voice which can be ascertained by similarities or from the instructions of experts.

The voice of moribund patients resembles that of sheep (or wild goat) and is feeble, inaudible, indistinct, choked, hoarse, painful and stammering. Similarly, there are some other unnatural types of complexions which are produced anew.

Thus the normal and abnormal types of voice of the individual are explained. [14]

Morbidity in voice indicating imminent death :

तत्र प्रकृतिवैकारिकाणां स्वराणामाश्वभिन्निर्वृत्तिः स्वरानेकत्वमेकस्य चानेकत्वमप्रशस्तम् । इति स्वराधिकारः ॥ १५ ॥

If the abnormal type of voice manifest spontaneously or in an individual there are many such abnormal types of voice or if only one abnormal voice in the individual appears to be of diverse types then this indicates imminent death. Thus the morbidity pertaining to voice is explained. [15]

इति वर्णस्वराधिकारौ यथावदुक्तौ मुमूर्षतां लक्षणाङ्गानार्थमिति ॥ १६ ॥

So the topics on complexion and voice are properly described with a view to provide knowledge regarding moribund persons. [16]

Recapitulation :

भवन्ति चात्र—

यस्य वैकारिको वर्णः शरीर उपपद्यते ।
 अर्धे वा यदि वा कृत्वे निमित्तं न च नास्ति सः ॥ १७ ॥
 नीलं वा यदि वा श्यावं ताम्रं वा यदि वाऽरुणम् ।
 मुखार्थमन्यथा वर्णो मुखार्थैऽरिष्टमुच्यते ॥ १८ ॥
 स्नेहो मुखार्थं सुव्यक्तो रौक्ष्यमर्थमुखे भृशम् ।
 ग्लानिर्धर्मं तथा हर्षो मुखार्थं प्रेतलक्षणम् ॥ १९ ॥
 तिलकाः पिसावो व्यङ्गा राजयश्च पृथग्विधाः ।
 आतुरस्याशु जायन्ते मुखे प्राणान् मुमुक्षतः ॥ २० ॥
 पुष्पाणि नखदन्तेषु पङ्को वा दन्तसंश्रितः ।
 चूर्णको वाऽपि दन्तेषु लक्षणं मरणस्य तत् ॥ २१ ॥
 ओष्ठयोः पादयोः पाण्योरक्षणोर्मूत्रपुरीषयोः ।
 नखेष्वपि च वैवर्ण्यमेतत् श्रीणवलेऽन्तकृत् ॥ २२ ॥
 यस्य नीलाखुभावोष्ठो पक्जाम्बवयसञ्जिभौ ।
 मुमूर्षुरिति तं विद्यान्नरो धीरो गतायुषम् ॥ २३ ॥
 एको वा यदि वा उनेको यस्य वैकारिकः स्वरः ।
 सहसोत्पद्यते जन्तोर्हीयमानस्य नास्ति सः ॥ २४ ॥
 यज्ञान्यदपि किञ्चित् स्याद्वैकृतं स्वरवर्णयोः ।
 बलमांसविहीनस्य तत् सर्वं मरणोदयम् ॥ २५ ॥

Thus it is said :

The following are the symptoms of moribund persons :

1. appearance of abnormal complexion in the entire or half of the body of the individual without any (visible) cause;

2. if in half of the face there is blue, blackish, coppery or tawny colour and the colour of the remaining half is otherwise;

3. manifestation of unctuousness in one half of the face and roughness in the other half;

4. appearance of plumpness in one half of the face and emaciation in the other half.

5. Spontaneous appearance of various types of *tila* (black mole), *piplu* (portwine mark), *vyaṅga* (freckles) and *rāji* (spots like mustard) in the face of the patient;

6. appearance of flower life spots in nails and teeth, and sticky and powder like substance in the teeth;

7. discolouration of lips, legs, heels, eyes, urine, stool and nails of the patient when he is diminished of strength;

8. when both the lips become bluish like the ripe fruits of *jambu* (*Syzygium cumini* Skeels); and

9. sudden manifestation of single or multiple morbidities in the voice in a weak patient.

Such other abnormalities in the voice and complexion of an individual who is devoid of strength and flesh also indicate imminent death. [17-25]

The duel number used was enough to indicate discolouration of both the lips. The use of the term ‘*ubhau*’ (meaning the two) only emphasises the fact that discolouration should cover the entire lips.

तत्र श्लोकः—

इति वर्णस्वरावृक्तौ लक्षणार्थं मुमूर्षताम् ।
यस्तौ सम्यग्विजानाति नायुज्ञने स मुश्यति ॥ २६ ॥

To sum up :

Various types of morbidity pertaining to complexion and voice are described here with a view to ascertaining the signs and symptoms of moribund patients. One who knows this does not tumble in ascertaining the span of life. [26]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने वर्णस्वरीयमिन्द्रियं
नाम प्रथमोऽध्यायः ॥ १ ॥

Thus ends the first chapter on Signs and Symptoms of Imminent Death as indicated by complexion and voice of *Indriya* section of Agniveśa's work as redacted by Caraka.

CHAPTER II

द्वितीयोऽध्यायः

अथातः पुण्यितकमिन्द्रियं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानाश्रेयः ॥ २ ॥

We shall now expound the chapter on “the Exhalation of odour indicative of imminent Death.”

Thus said Lord Ātreya. [1-2]

After explaining complexion and voice as indicative of imminent death, it is now proposed to take up the description of odour as a premonitory symptom—c.f. *Indriya*, 1 : 3. What is stated above as a matter of fact applies to all types of premonitory symptoms which form the subject matter of chapter I. But the simile relating to flower indicates that odour is going to form the most predominant subject matter of this chapter.

A simile :

पुष्पं यथा पूर्वरूपं फलस्येह भविष्यतः ।
तथा लिङ्गमरिष्टास्यं पूर्वरूपं मरिष्यतः ॥ ३ ॥

As the flower anticipates the production of a fruit, so does particular types of physical odour anticipate imminent death. [3]

अप्येवं तु भवेत् पुष्पं फलेनाननुबन्ध्य यत् ।
फलं चापि भवेत् किञ्चिदस्य पुष्पं न पूर्वजम् ॥ ४ ॥
न त्वरिष्टास्य जातस्य नाशोऽस्ति मरणाद्वते ।
मरणं चापि तन्नास्ति यन्नारिष्टपुरःसरम् ॥ ५ ॥

The flower may sometimes be devoid of fruition. Sometimes even fruits may be produced without any flower. But once an odour indicative of imminent death is manifested, it cannot disappear without resulting in death. Conversely there cannot be any death either without being preceded by premonitory symptoms. [4-5]

The simile regarding flower and fruit does not perhaps infallibly convey the concept of premonitory symptoms. A flower may not always be followed by a fruit e.g. *Vetasa* (*Salix caprea* Linn.) etc; similarly, fruits may not also be preceded by flowers e.g. *āvattha* (*Ficus religiosa* Linn.) etc. So it is necessary to clarify the position in this behalf. The simile

given above (verse—3) has been cited just by way of illustrating the concept of premonitory symptoms. Fully manifested premonitory symptoms in fact always anticipate imminent death. It is only when they are not well manifested that their value as a harbinger of imminent death is doubtful.

Some scholars however, hold the view that premonitory symptoms are of two types, viz. (1) variable and (2) invariable. The invariable type of premonitory symptoms are well illustrated in *Indriya*, 7 : 25, and the variable type in *Indriya*, 9 : 15, and *Indriya*, 5 : 40. Suśruta also has the invariable type of premonitory symptoms in view while stating that even though such symptoms represent sure signs of imminent death still can be avoided by the pious *brāhmaṇas* with the help of administration of rejuvenation therapy, penance and incantation of mantras—vide *Suśruta* : *Sūtra*, 28 : 5.

Some scholars do not however agree with the above classification of invariable and variable premonitory symptoms. They are of the view that the author has stated the relationship between such symptoms and imminent death in very clear terms. Even the statement regarding the doubtful sequence in In *Indriya*, 9 : 15 of this section in a way does not contradict the value of such symptoms as harbingers of imminent death. As regards the avoidability of death by rejuvenation therapy etc., that is an exception and not a general rule. Administration of rejuvenation therapy and divine blessings can always overcome the entire worldly tradition. Lord Śiva Could revive Kāmadeva (god of libido) even after he was burnt to ashes; so did Lord Rāma revive the dead son of a *brāhmaṇa* by penance.

Some other scholars hold the view that these premonitory symptoms anticipate imminent death only when that death is predetermined. If premonitory symptoms were related to untimely death, then all symptoms indicated above would have no purpose, whatsoever. For, in the case of untimely death, even if such symptoms appear, death could be averted by taking recourse to appropriate therapeutic measures. It is only in the case of timely death that once such symptoms appear, death must occur in spite of all possible measures taken.

The above theory is, however, not tenable. Premonitory symptoms equally hold good in all cases of death irrespective of their being timely and untimely death such symptoms appear only when the disease produced out of unwholesome regimens transcends all therapeutic measures. So it is said, “Such symptoms appear in a moment.”

If this view is not accepted, then a person the time of whose death is predetermined would never suffer from an incurable disease in spite of his unwholesome regimens. Since it is not so and such persons may suffer from incurable diseases, then the *dosas* which produce such diseases may also produce the pre-monitory symptoms of imminent death.

Inability to comprehend signs of imminent death because of Intellectual blasphemy :

मिथ्यादृष्टमरिष्टाभमनरिष्टमजानता ।

अरिष्टं वाऽप्यसंबुद्धमेतत् प्रक्षापराधजम् ॥ ६ ॥

An ignorant person sometimes wrongly views pseudo-symptoms as real premonitory symptoms. Sometimes he does not even recognise the real premonitory symptoms as such. All this is the result of intellectual blasphemy. [6]

Wherever premonitory symptoms occur, imminent death is certain. On the other hand, death shall not occur in the absence of such symptoms. In case, death does not occur in spite of such symptoms, the fault lies with the physician who has not been able to distinguish pseudo-symptoms from the real ones. Similarly, if death occurs even in the apparent absence of such symptoms, again the physician is to blame who has not been able to recognise such symptoms because of their subtlety.

शानसंबोधनार्थं तु लिङ्गैर्मरणपूर्वजैः ।

पुष्पितानुपदेश्यामो नरान् बहुविधैर्बहून् ॥ ७ ॥

With a view to explaining the several premonitory symptoms preceding death as indicative of its imminence, we now illustrate the various persons with such manifestations. [7]

As the tree endowed with flowers emit fragrance, so the moribund persons exhibit different types of premonitory symptoms. This justifies the use of the term 'puṣpita' in the present context.

Characteristic smell of moribund persons :

नानापुष्पोपमो गन्धो यस्य भाति दिवानिशम् ।

पुष्पितस्य वनस्येव नानाद्रुमलतावतः ॥ ८ ॥

तमाहुः पुष्पितं धोरा नरं मरणलक्षणैः ।

स ना संवत्सराद्देहं जहातीति विनिश्चयः ॥ ९ ॥

एवमेकैकशः पुष्पैर्यस्य गन्धः समो भवेत् ।

इष्टैर्वा यदि वाऽनिष्टैः स च पुष्पित उच्यते ॥ १० ॥

समासेनाशुभान् गन्धानेकत्वेनाथवा पुनः ।

आजिघेदस्य गात्रेषु तं विद्यात् पुष्पितं मिषक् ॥ ११ ॥

आसुतानासुते काये यस्य गन्धाः शुभाशुभाः ।

व्यत्यासेनानिमित्ताः स्युः स च पुष्पित उच्यते ॥ १२ ॥

तद्यथा चन्दनं कुष्ठं तगरागुरुणी मधु ।

माल्यं मूत्रपुरीषे च मृतानि कुणपनि च ॥ १३ ॥

ये चान्ये विविधात्मानो गन्धा विविधयोनयः ।
तेऽप्यनेनानुभासेन विक्षेपा विकृतिं गताः ॥ १४ ॥
इदं चाप्यतिदेशार्थं लक्षणं गन्धसंश्यम् ।
वक्ष्यामो यदभिज्ञाय भिषज्ञरणमादिशेत् ॥ १५ ॥
वियोनिर्विदुरो गन्धो यस्य गात्रेषु जायते ।
इष्टो वा यदि वाऽनिष्टो न स जीवति तां समाम् ॥ १६ ॥
पतावद्वन्धविज्ञानं,

One who, day and night, *emits* the fragrance of several flowers—a garden with various types of trees and creepers full of flowers as it were—is known as '*puspita*'. Such manifestations are indicative of imminent death. A person with such manifestations is sure to die within a year.

Even if the smell of the body resembles the fragrance of different pleasant and unpleasant flowers, one by one, a person with such manifestation is also regarded as '*puspita*'.

Another type of '*puspita*' person is he in whose body one can smell a variety of unpleasant odours taken together simultaneously.

If the body emits unpleasant odour even when covered with fragrant unguentum and pleasant odour when there is no such unguentum—a person with such manifestations without any appreciable cause is also known as '*puspita*'.

Odours of *candana* (*Santalum album* Linn.), *kuṣṭha* (*Saussurea lappa* C. B. Clarke), *tagara* (*Valeriana wallichii* DC.), *aguru* (*Aquilaria agallocha* Roxb.), honey and garland is pleasant and that of urine, feces and dead bodies (of human beings or animals) is unpleasant. On this analogy, odours from simillar other sources are also to be considered as premonitory symptoms by inference.

We shall further explain the premonitory symptoms based on olfactory perception in order to facilitate general appreciation of such symptoms by knowing which a physician can predict imminent death.

The individual whose body emits pleasant or unpleasant smell continuously without any appreciable cause cannot survive for more than a year.

This is all about pre-monitory symptoms based on the smell of the body of the individual. [8-17]

In verse—8, the imagery is based on a garden full of varieties of trees and creepers. This is quite significant. The intention is that just as a garden full of variety of trees and creeper (not all of one and the same type) emits different types of odour so does the body of moribund person emit a variety of odour.

All *puspita* type of patients illustrated above are sure to die within a year.

Taste of moribund persons :

रसश्चानमतः परम् ।

आतुराणां शरीरेषु वक्ष्यते विधिपूर्वकम् ॥ १७ ॥

यो रसः प्रकृतिस्थानां नराणां देहसंभवः ।

स एषां चरमे काले विकारं भजते द्रव्यम् ॥ १८ ॥

कश्चिदेवास्यवैरस्यमत्यर्थमुपपद्यते ।

स्वादुत्त्वमपरश्चापि विपुलं भजते रसः ॥ १९ ॥

तमनेनानुभानेन विद्याद्विकृतिमागतम् ।

मनुष्यो हि मनुष्यस्य कथं रसमवामुयात् ॥ २० ॥

मक्षिकाश्वैव यूकाश्व दंशाश्व मशकैः सह ।

विरसादपरस्पर्न्ति जन्तोः कायान्मुमूर्षतः ॥ २१ ॥

अत्यर्थरसिकं कायं कालपक्षस्य मक्षिकाः ।

अपि ज्ञातानुलिपस्य भृशमायान्ति सर्वशः ॥ २२ ॥

Now we shall appropriately describe the signs of imminent death, as indicated by the taste in the patient's body.

The normal bodily taste of human beings undergoes two types of modification on the eve of death. This modification may be either in the form of appearance of extremely abnormal taste (? in the mouth) or in the form of extreme sweetness. Morbid conditions of taste can only be inferred. One cannot otherwise have a direct perception of such conditions.

In the case of the first types of morbidity, flies, lice, wasps and mosquitoes get away from the body of a moribund person having an abnormal taste. On the other hand, flies repeatedly surround the body of a moribund person having extremely sweet taste even after he has taken bath has applied unguentum. [17-22]

Gangadhar Sen splits the first *pāda* of the verse—19 as कश्चिदेव अस्य वैरस्यं and interpretes this as अस्य कश्चिद् रसोऽत्यर्थं अशुभं रसत्वमुत्पद्यते प्राप्नोति । Yogendranath Sen however splits this *pāda* as कश्चिदेव आन्य वैरस्यं and interpretes as कश्चिदेकः अत्यर्थं आस्यस्य मुखस्य वैरस्यं विरसता उपपद्यते ॥

तत्र श्लोकः—

सामान्येन मयोक्तानि लिङ्गानि रसगन्धयोः ।
पुष्पितस्य नरस्यैतत्कलं मरणमादिशेत् ॥ २३ ॥

To sum up :

Symptoms of imminent death of the individual (*puspita*) relating to the taste and smell in his body are described here in general. Such symptoms lead to death of the individual. [23]

इत्यग्निवेशकृते तच्चे चरकप्रतिसंस्कृते इन्द्रियस्थाने पुष्पितकमिन्द्रियं
नाम द्वितीयोऽध्यायः ॥ २ ॥

Thus ends the second chapter on the “Exhalation of Odour Indicative of Imminent Death” of *Indriya* section of Agnivesa’s work as redacted by Caraka.

CHAPTER III

त्रृतीयोऽध्यायः

अथातः परिमर्शनीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

Now we shall expound the chapter on the signs of imminent death as indicated by touch.

Thus said Lord Atreya. [1-2]

वर्णे स्वरे च गन्धे च रसे चोक्तं पृथक् पृथक् ।
लिङ्गं मुमूर्षतां सम्यक् स्पर्शेष्वपि निबोधत ॥ ३ ॥

Signs of imminent death as indicated by complexion, voice, smell and taste are already described separately. Those indicated by touch are being described now. [3]

Examination of moribund persons by touch :

स्पर्शश्राधान्येनैवातुरस्यायुषः प्रमाणावशेषं जिज्ञासुः प्रकृतिस्थेन पाणिना
शरीरमस्य केवलं स्पृशेत्, परिमर्शयेद्वाऽन्येन । परिमृशता तु खल्वातुरशरीर-
मिमे भावास्तत्र तत्रावदोद्वया भवन्ति । तद्यथा—सततं स्पन्दमानानां शरीर-
देशानामस्पन्दनं, नित्योष्मणां शीतीभावः, मृदूनां दारुणत्वं, श्लक्षणानां खरत्वं,
सतामसद्वावः, सन्धीनां स्वंसध्र्वशच्यवनानि; मांसशोणितयोर्वीतीभावः, दारुण-
त्वं, स्वेदानुबन्धः, स्तम्भो वा; यत्कान्यदपि किञ्चिदीदृशं स्पशीनां लक्षणं भृशवि-
कृतमनिमित्तं स्यात् । इति लक्षणं स्पृश्यानां भावानामुक्तं समाप्तेन ॥ ४ ॥

One desirous of ascertaining the remaining span of life of a patient, only on the basis of tactful signs should touch the entire body of the patient with his palm, neither too hot nor too cold, or (if social customs do not permit the physician to touch the body of a particular patient e. g. a disciple is not allowed to touch the body of his preceptor's wife) get it touched by some body else. The following points are required to be observed with touching the body of the patient :

1. Absence of pulsation in such of the organs of the body which pulsate constantly;
2. coldness in organs which normally remain constantly hot;

3. hardness in soft organs;
4. roughness in smooth organs;
5. absence of organs which are normally present;
6. major or minor dislocation of joints—downwards or sideways;
7. excessive diminution of muscle tissue and blood;
8. appearance of hardness;
9. persistent sweating or its total absence;

The above mentioned symptoms or similar other symptoms which reflect abnormal tactal conditions without any appreciable cause are indicative of imminent death.

Thus the tactal symptoms indicative of imminent death are briefly described. [4]

In the context of tactal morbidity indicative of imminent death it would have sufficed to say 'sparśena' in the beginning of the para. But the paragraph actually begins with 'sparśaprādhānyena'. This is because it is intended to include some non-tactal items such as 'redness of the eye' etc. also.

Details of examination :

तद्यासतोऽनुव्याख्यास्यामः—तस्य चेत् परिमृश्यमानं पृथक्त्वेन पादज-
ङ्गोरुस्फगुदरपार्श्वपृष्ठेषिकापाणिग्रीवाताल्बोष्टललाटं स्थितं शीतं स्तब्धं दारुणं
चीतमांसणोणितं वा स्यात्, परासुररयं पुरुषो न चिरात् कालं मरिष्यतीति
विद्यात्। तस्य चेत् परिमृश्यमानानि पृथक्त्वेन गुलफजानुवङ्गणगुदवृषणमेद्भ-
नाभ्यंस्तनमणिकपर्गुकाहनुनासिकाकरणांक्षिभ्रूशङ्कादीनि स्वस्तानि व्यस्तानि
च्युतानि स्थानेभ्यः स्कन्धानि वा स्युः, परासुररयं पुरुषोऽचिरात् कालं मरिष्य-
तीति विद्यात्॥ ५ ॥

We shall now expound such symptoms in greater detail. If the feet, knees, thighs, buttocks, abdomen, sides of the chest, vertebral column, hands, neck, palate, lips and forehead of the patient are touched separately and found wet, cold, rigid, hard or devoid of flesh and blood, it should be inferred that his span of life has come to an end and he will die soon. If ankles, knees, hips, anus, testicles, penis, umbilicus, shoulder, breasts, wrist joints, ribs, jaws, nose, ears, eyes, eyebrows and temples are separately touched and found falling, scattering, displaced or dislocated, then in such situations also one can predict instantaneous death of the individual. [5]

Details of examination (contd.) :

तथा उस्योच्छ्वासमन्यादन्तपक्ष्मचशुः केशलोमोदरनखाङ्गुलीरालक्षयेत् । तस्य चेदुच्छ्वासोऽतिदीघ्रोऽतिहस्तो वा स्यात्, परासुरिति विद्यात् । तस्य चेन्मन्ये परिमृश्यमाने न स्पन्देयातां, परासुरिति विद्यात् । तस्य चेदन्ताः परिकीर्णाः श्वेता जातशर्कराः स्युः, परासुरिति विद्यात् । तस्य चेत् पक्ष्माणि जटाबद्धानि स्युः, परासुरिति विद्यात् । तस्य चेच्छशुपी प्रकृतिहीने, विकृतियुक्ते—अत्युत्पिण्डिते, अतिप्रविष्टे, अतिजिह्वे, अतिविषमे, अतिमुक्तवन्धने, अतिप्रस्थुते, सततोन्मिपिते, सततनिमिपिते, निमिपोन्मेषातिप्रवृत्ते, विभ्रान्तदृष्टिके, विपरीतदृष्टिके, हीनदृष्टिके, अस्तदृष्टिके, नकुलान्धे, कपोतान्धे, अलातवर्णे, कृष्णपीतनीलश्यावताम्ब्रहरितहारिद्रशुक्लवैकारिकाणां वर्णानामन्यतमेनातिसुते वा स्यातां, तदा परासुरिति विद्यात् । अथास्य केशलोमान्यायच्छेत्, तस्य चेत् केशलोमान्यायम्यमानानि प्रलुच्येन न चेद्वेदयेयुस्तं परासुरिति विद्यात् । तस्य चेदुदरेसिराः प्रकाशोरञ्च इशावताम्ब्रनीलहारिद्रशुक्ला वा स्युः, परासुरिति विद्यात् । तस्य चेन्खा वीतमांसशोणिताः पक्जाम्बववर्णाः स्युः, परासुरिति विद्यात् । अथास्याङ्गुलीरायच्छेत्; तस्य चेदङ्गुलय आयम्यमाना न स्फुटेयुः, परासुरिति विद्यात् ॥ ६ ॥

The physician should carefully examine the exhalation, *manyā* (region of carotid arteries), teeth, eyelashes, eyes, hair (of the head), *loman* (short hair of the remaining parts of the body of the individual), abdomen, nails and fingers of the patients.

The following conditions are indicative of imminent death of the patient.

1. If the exhalation is too long or too short;
2. If there is no pulsation in his *manyā* (region of Carotid arteries) when touched;
3. If his teeth are adhered with dirt, (excessively) white, covered with sugar-like particles;
4. If his eyelashes are matted;
5. If his eyes are devoid of natural characteristics and endowed with unnatural ones e. g. if they are
 - (a) excessively projected;
 - (b) excessively withdrawn;
 - (c) excessively slanted;

- (d) excessively uneven;
 - (e) excessively loose;
 - (f) with excessive secretions;
 - (g) perpetually open;
 - (h) perpetually closed;
 - (i) with increased frequency in opening and closure;
 - (j) with rolling, reverted, deficient or scattered vision;
 - (k) with the morbidity of *nakulāndhya* or blindness of mongoose i. e. they view everything as white during day time;
 - (l) with the morbidity of *kapotāndhya* or the blindness of pigeon i. e. they view everything as black during day time;
 - (m) like fire-brand in appearance, and
 - (n) endowed with excessively black, yellow, blue, darkish brown, coppery, green, turmeric, yellow or white colour;
6. If the hair (of the head) and *loman* (short hair of the remaining parts of the body of the individual) get severed without pain when pulled;
 7. If the veins in the abdomen are visible or have such colours like darkish brown, coppery, blue, turmeric yellow and white;
 8. If his nails are devoid of flesh and blood and black like ripe fruit of *jambu* (*Syzygium cumini* skeels) and
 9. If finger joints do not produce cracking sound even when bent and pressed. [6]

The above examination relates to the tactful observation. There are, however, certain symptoms which cannot be directly ascertained by touch e.g. exhalation, whiteness of teeth, redness of the eyes and colour of the veins on the abdomen. But all these factors are directly or indirectly observable by tactful means. Whiteness of teeth is no doubt an object of visual perception but teeth as such are required to be observed by tactful means. Similarly exhalation is also examined by applying the palm near the nostrils.

तत्र श्लोकः—

एतान् स्पृश्यान् वहन् भावान् यः स्पृशन्नवबुद्ध्यते ।
आतुरे न स संमोहमायुर्ज्ञानस्य गच्छति ॥ ७ ॥

To sum up :

The physician who can understand all the various tactical factors by touch will seldom fail to ascertain the life span of the patient. [7]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने परिमर्शनीयमिन्द्रियं
नाम तृतीयोऽध्यायः ॥ ३ ॥

Thus ends the third chapter on “the signs of Imminent Death as indicated by touch” of the *Indriya* Section of Agniveśa’s work as redacted by Caraka.

CHAPTER IV

चतुर्थोऽध्यायः

अथात इन्द्रियानीकमिन्द्रियं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the Chapter on the signs and symptoms of imminent death as indicated by the characteristic features of sense organs.

Thus said Lord Atreya. [1-2]

Following the description of the signs and symptoms of imminent death pertaining to complexion, voice, smell, taste and touch i.e. objects of senses, such symptoms relating to sense organs themselves are now being described.

Role of inference in the examination :

इन्द्रियाणि यथा जन्तोः परीक्षेत विशेषवित् ।
ज्ञानुग्रिच्छन् मिषड्डानमायुषस्तन्त्रिबोधत ॥ ३ ॥
अनुमानात् परीक्षेत दर्शनादीनि तत्त्वतः ।
अद्वा हि विदितं ज्ञानमिन्द्रियाणामतीन्द्रियम् ॥ ४ ॥

We shall now explain as to how an expert physician desirous of ascertaining the span of life of patients should examine the sense organs of a patient.

He should examine the visual and other sense organs by means of inference. For, the knowledge of sense organs is undoubtedly beyond the purview of perception. [3-4]

Specific features of signs of imminent death :

स्वस्थेभ्यो विकृतं यस्य ज्ञानमिन्द्रियसंश्ययम् ।
आलक्ष्येतानिमित्तेन लक्षणं मरणस्य तत् ॥ ५ ॥
इत्युक्तं लक्षणं सम्यगिन्द्रियेष्वशुभोदयम् ।
तदेव तु पुनर्भूयो विस्तरेण निवोधत ॥ ६ ॥

If any morbidity develops out of healthy sense organs without any visible cause, this is indicative of imminent death. The signs and symptoms of imminent death pertaining to sense organs are explained here in most general terms. They will be further elaborated in subsequent paragraphs. [5-6]

Characteristic features of vision indicative of imminent death :

घनीभूतमिवाकाशमाकाशमिव मेदिनीम् ।
विगीतमुभयं ह्येतत् पश्यन् मरणमृच्छति ॥ ७ ॥

If a patient views the sky as something solid (or like the earth) and the earth as something void (or like the sky), he is sure to die soon as both these symptoms are inauspicious. [7]

Both these symptoms are indicative of imminent death only when they appear simultaneously. Such symptoms appear automatically without any visible cause. It has no rational basis whatsoever.

As a matter of fact, symptoms indicative of imminent death pertaining to sense organs are already described in general terms in para five. It is only with a view to citing illustrations that specific symptoms are now being described one by one.

यस्य दर्शनमायाति मारुतोऽस्वरगोचरः ।
अग्निर्नायाति चादीसस्तस्यायुःशयमादिशेत् ॥ ८ ॥

One who views the wind in the sky in a corporeal form but does not see the flame of kindled fire, should be considered as a moribund person. [8]

It is only when the patient sees the wind in the sky in a corporeal form, he is considered as moribund. If he can perceive the 'Wind God' present in the earth this does not constitute premonitory symptom of imminent death.

जले सुविमले जालमजालावतते नरः ।
स्थिते गच्छति वा दृष्टा जीवितात् परिमुच्यते ॥ ९ ॥

If in clean water-stagnant or moving-one has the hallucination of a net even though actually there is no such net, then this constitutes the premonitory symptom of imminent death. [9]

Whenever there is no time limit prescribed for the occurrence of death after the occurrence of premonitory symptoms, one year should be considered as the limit.

जाग्रत् पश्यति यः प्रेतान् रक्षांसि विविधानि च ।
अन्यद्वाऽप्यद्रुतं किञ्चिन्न स जीवितुमर्हति ॥ १० ॥

If one, even while awake, perceives *pretas* (ghosts) and various types of *rakshasas* (demons) or any other supernatural elements, he will not live long. [10]

It is only in the event of several ghosts or demons being seen in the waking stage that one can predict imminent death of the patient.

योऽर्थं प्रकृतिवर्णस्थं नीलं पश्यति निष्प्रभम् ।
कृष्णं वा यदि वा शुक्लं निशां व्रजति सप्तमीम् ॥ ११ ॥

When the fire in its natural colour i.e. yellowish or reddish is viewed as blue, lustreless, black or white, this is indicative of the death of the patient after seventh night. [11]

The natural colour of fire can normally be seen only if no foreign elements in the form of poisonous food etc., are added to it. In the event of such foreign elements being added to it, fire automatically appears in a different colour. But that does not constitute premonitory symptom. It constitutes the premonitory symptom if in spite of its natural colour being intact, it looks as if possessed of different colours.

मरीचीनसतो मेघान्मेघान् वाऽप्यसतोऽम्बरे ।
विद्युतो वा विना मेघैः पश्यन् मरणमृच्छति ॥ १२ ॥

If one sees *marici* (cloud-light), or cloud or lightening when there is no cloud in the sky, this is indicative of imminent death. [12]

Even a normal person can see lightening without the presence of cloud but the lightening which always accompanies the cloud cannot be normally seen in the absence of cloud. If such lightening is seen by a person even when there is no cloud, this should be considered as premonitory symptom indicative of imminent death.

सृन्मयीमिव यः पात्रीं कृष्णाम्बरसमावृताम् ।
आदित्यमीक्षते शुद्धं चन्द्रं वा न स जीवति ॥ १३ ॥
अर्पर्वणि यदा पश्येत् सूर्याचन्द्रमसोर्ग्रहम् ।
अव्याधितो व्याधितो वा तदन्तं तस्य जीवितम् ॥ १४ ॥
नक्तं सूर्यमहश्चन्द्रमनश्चौ धूममुत्थितम् ।
अग्निं वा निष्प्रभं रात्रो दृष्ट्वा मरणमृच्छति ॥ १५ ॥
प्रभावतः प्रभाहीनान्निष्प्रभांश्च प्रभावतः ।
नरा विलङ्घान् पश्यन्ति भा वान् भावाङ्गिहासवः ॥ १६ ॥
व्याकृतीनि विवर्णानि विसंख्योपगतानि च ।
विनिमिसानि पश्यन्ति रूपाण्यायुःक्षये नराः ॥ १७ ॥
यश्च पश्यत्यदश्यान् वै दश्यान् यश्च न पश्यति ।
तावुभौ पश्यतः क्षिप्रं यमक्षयमसंशयम् ॥ १८ ॥

The following symptoms relating to the visual sense organs indicate imminent death of the person :

1. To view the sun or the moon unobstructed by the cloud like an earthen plate covered with a black cloth;
2. To see the lunar or solar eclipse when there is no full-moon or new-moon respectively (by both normal and abnormal persons);
3. To see the sun in the night, the moon in the day, the smoke when there is no fire or fire without flame in the night;
4. Appearance of bright things as devoid of lustre, the ones having no lustre as bright—i.e. to view things devoid of their real characteristics;
5. To have visual perception in a distorted form i.e. to view things appearing as having multiple forms, devoid of complexion and inaccurate numbers without any reason;
and
6. To visualise the invisible ones and not to visualise the visible ones. [13-18]

Hearing :

अशब्दस्य च यः श्रोता शब्दान् यश्च न बुद्ध्यते ।
 द्वावप्येतौ यथा प्रेतौ तथा ज्ञेयौ विजानता ॥ १९ ॥
 संवृत्यकूलिभिः कर्णौ ज्वालाशब्दं य आतुरः ।
 न शृणोति गतासु तं बुद्धिमान् परिवर्जयेत् ॥ २० ॥

The following symptoms relating to the auditory sense organ indicate imminent death of the person :

1. Hearing inaudible sounds and not to hear audible ones;
2. Inability to hear the internal (astral) sound even after closing ears with fingers; [19-20]

The astral sound is normally audible as the sound of the flame of the fire.

Smell :

विषर्ययेण यो विद्याद्वन्धानां साध्वसाधुताम् ।
 न वा तान् सर्वशो विद्यात्तं विद्याद्विगतायुषम् ॥ २१ ॥

If the olfactory sense of a person fails to distinguish between good and bad smells or is not responsive to any smell at all, he is to be considered as a moribund person. [21]

Taste :

यो रसान्न विजानाति न वा जानाति तत्त्वतः ।
मुखपाकाद्वेषं पक्वं तमाहुः कुशला नरम् ॥ २२ ॥

If a person free from *mukhapāka* (stomatitis and glossitis) does not have the gustatory sensation at all or has a wrong gustatory sensation, he is also ripe for death. [22]

Touch :

उष्णाङ्गीतान् खराज्ञ्लक्षणान्मृदूनपि च दारुणान् ।
स्पृश्यान् स्पृश्वा ततोऽन्यत्वं मुमूर्षुस्तेषु मन्यते ॥ २३ ॥

If one has the tactual sensation of coldness in heat, of smoothness in coarseness, of softness in hardness and vice versa, he is to be considered as a moribund one. [23]

Supra-sensory perception :

अन्तरेण तपस्तीवं योगं वा विधिपूर्वकम् ।
इन्द्रियैरधिकं पश्यन् पञ्चत्वमधिगच्छति ॥ २४ ॥
इन्द्रियाणामृते व्यप्रेरिन्द्रियार्थानदोषजान् ।
नरः पश्यति यः कश्चिदिन्द्रियैर्न स जीवति ॥ २५ ॥

Supra-sensory perception not preceded by austere, penances or due yogic practices is indicative of imminent death.

If one perceives things in an infallible manner in spite of the impairment of the respective sensory faculties, this is also indicative of imminent death. [24-25]

Sometimes one can have pseudo-perception due to certain defects in the sense organs. For example, the eye pressed with fingers sees one and the same thing as two or a person suffering from the aggravation of *pitta* does not taste sweetness even in sweet eatables. This sort of fallible perception should not be considered as a premonitory symptom indicative of imminent death.

Wrong perception :

स्वस्थाः प्रज्ञाविपर्यासैरिन्द्रियार्थेषु वैकृतम् ।
पश्यन्ति येऽसद्बुशस्तेषां मरणमादिशेत् ॥ २६ ॥

If a healthy person perceives things wrongly in contravention of the normal relationship between the sense organs and their objects as a result of mental perversion he is sure to die soon. [26]

तत्र श्लोकः—

एतदिन्द्रियविक्षानं यः पश्यति यथातथम् ।
मरणं जीवितं चैव स मिष्टक् ज्ञातुमहति ॥ २७ ॥

To sum up :

A physician who knows the science of premonition of death as indicated by the characteristic features of the sense organs can verily distinguish between life and death. [27].

इत्यग्निवेशकृते तत्त्वे चरकप्रतिसंस्कृते इन्द्रियस्थाने इन्द्रियानीकमिन्द्रियं
नाम चतुर्थोऽध्यायः ॥ ४ ॥

Thus ends the Fourth Chapter on the signs and symptoms of imminent death as indicated by the characteristic features of sense organs of *Indriya* Section of *Angiveśa's* work as redacted by *Caraka*.

CHAPTER V

पञ्चमोऽध्यायः

अथातः पूर्वरूपीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

Now, we shall expound the chapter on the signs and symptoms of imminent death as indicated by the pre-monitory symptoms of diseases.

Thus said Lord Atreya. [1-2]

According to the order prescribed in para-3 of the first chapter of this section, description of symptoms of imminent death as indicated by the various mental phenomena should have normally followed the description of such symptoms relating to sense organs as expounded in the previous chapter. But as there is not much to be said about the mental phenomena as indicative of imminent death, their description is postponed to a subsequent chapter. There is quite a lot to be said about symptoms of imminent death as indicated by the pre-monitory symptoms of diseases. This is going to form the subject matter of this chapter. As the premonitory symptoms of diseases precede the diseases themselves, the former are being discussed in the present chapter and the latter will be dealt with in the next chapter.

Premonitory symptoms indicative of imminent death :

पूर्वरूपाण्यसाध्यानां विकाराणां पृथक् पृथक् ।

भिन्नाभिन्नानि वक्ष्यामो भिषजां ज्ञानवृद्धये ॥ ३ ॥

पूर्वरूपाणि सर्वाणि ज्वरोक्तान्यतिमात्रया ।

यं विशन्ति विशत्येनं मृत्युर्ज्वरपुरःसरः ॥ ४ ॥

अन्यस्यापि च रोगस्य पूर्वरूपाणि यं नरम् ।

विशन्त्यनेन कल्पेन तस्यापि मरणं ध्रुवम् ॥ ५ ॥

We shall now separately explain the premonitory symptoms-general as well as special-relating to the incurable diseases as a means to promote the knowledge of the physician.

If all the premonitory symptoms of fever manifest themselves excessively, this is a sure sign of death preceded by fever. Similarly, the premonitory symptoms of other diseases manifesting themselves excessively are sure signs of imminent death of the patient. [3-5]

Premonitory symptoms in general are described in 4th & 5th verses of this chapter. The special ones will be described in subsequent verses. Some of the premonitory symptoms of diseases are described in the *Nidāna* and *Cikitsā* sections and some others which are not described there will be mentioned in this section. So the clause ‘*bhinnābhinnāni*’ may as well convey the sense of *uktānuktāni* (lit. meaning told and untold).

पूर्वरूपैकदेशांस्तु वक्ष्यामोऽन्यान् सुदारुणान् ।
 ये रोगाननुवग्निं मृत्युर्यनुवध्यते ॥ ६ ॥
 बलं च हीयते यस्य प्रतिश्यायश्च वर्धते ।
 तस्य नारीप्रसक्तस्य शोषोऽन्तायोपजायते ॥ ७ ॥
 श्वभिरुष्टैः खरैर्वार्डिपि याति यो दक्षिणां दिशम् ।
 स्वप्ने यक्षमाणमासाद्य जीवितं स विमुच्छति ॥ ८ ॥
 प्रेतैः सह पिबेत्पद्यं स्वप्ने यः कृष्टते शुना ।
 सुघोरं ज्वरमासाद्य जीवितं स विमुच्छति ॥ ९ ॥

We shall now explain some other premonitory symptoms of the most fatal type which follow the various diseases and are in turn followed by death.

If a patient of consumption indulging in sex suffers from diminution of strength and aggravation of *pratisyaya* (coryza) he is sure to die.

If a person travels towards the south riding dog, camel or ass in dream, he gets afflicted with Tuberculosis leading to his death.

If a person drinks wine in the company of ghosts or gets dragged by dogs in dream, he gets afflicted with serious type of fever leading to his death. Such of the diseases as follow the premonitory symptoms described above must result in death. Riding dog, camel, pig and ass in a dream is already described in *Nidāna* 6 : 13 as premonitory symptoms of *Rajayakṣman-* (Tuberculosis). The same dream is regarded as premonitory symptom of death if the travel is towards the south. [6-9]

लाक्षारक्तम्बराभं यः पश्यत्यम्बरमन्तिकात् ।
 स रक्तपित्तमासाद्य तेनैवान्ताय नीयते ॥ १० ॥
 रक्तम्बग्रक्तसर्वाङ्गो रक्तवासा मुहुर्हसन् ।
 यः स्वप्ने हियते नार्या स रक्तं प्राप्य सीदति ॥ ११ ॥

If the sky appears to be red like a cloth dyed with lac from a distance nearby, the patient falls a victim to *raktaguttī*

(a disease characterized by bleeding from different parts of the body) leading to his death.

If a person in a dream wearing red garlands and apparel with his entire body looking red, laughs frequently and is dragged by a woman, he fall a victim to *rakta-pitta* leading to his death. [10-11]

शूलाटोपात्रकुजाश्च दौर्बल्यं चातिमात्रया ।
नखादिषु च वैवर्ण्ये गुलमेनान्तकरो ग्रहः ॥ १२ ॥
लता कण्टकिनो यस्य दरूणा हृदि जायते ।
स्वमे गुलमस्तमन्ताय क्रूरो विशति मानवम् ॥ १३ ॥

Colic pain, meteorism, gurgling sound in the intestine and excessive discolouration of nails etc., results in *gulma* (a disease characterised by a growth in the abdomen) leading to death of the patient.

If in a dream, one has the growth of spiky creeper in his chest, he falls a victim to fatal type of *gulma*. [12-13]

कायेऽल्पमपि संस्पृष्टं सुभृशं यस्य दीर्घते ।
क्षतानि च न रोहन्ति कुष्ठैर्मृत्युर्हिनस्ति तम् ॥ १४ ॥
नग्नस्याज्यावसिक्षस्य जुहतोऽग्निमन्तर्चिष्म ।
पद्मान्त्युरसि जायन्ते स्वमे कुष्ठैरिष्यतः ॥ १५ ॥

If even the slightest injury gives rise to excessive wound in the body and the wounds do not heal up, the patient dies of leprosy.

If in a dream, a person naked, anointed with ghee, offering oblations to the fire without flame has growth of lotus flower in his chest, he dies of leprosy. [14-15]

स्नातानुलिप्तगात्रेऽपि यस्मिन् गृधन्ति मक्षिकाः ।
स प्रमेहेण संस्पर्शं प्राप्य तेनैव हन्यते ॥ १६ ॥

If flies are attracted towards an individual even after he has taken bath and used unguentum, he falls a victim to *prameha* (obstinate urinary disorders including diabetes) which is bound to be fatal for him. [16]

In the para-22 of the second chapter of this section, this premonitory condition is described in a different context. The same is repeated here in order to bring in the incidence of *prameha* as an immediate cause of death. If such symptoms are not followed by *prameha*, death may be caused by any other disease,

Dream :

स्नेहं बहुविधं स्वप्ने चण्डालैः सह यः पिबेत् ।
बध्यते स प्रमेहेण स्पृश्यते उन्ताय मानवः ॥ १७ ॥

If one drinks various types of unctuous substance in accompaniment with the *cāndalas* (a person born from a *śūdra* father and a brahmin mother MW.) in his dreams, he also falls a victim to *prameha* which is bound to be fatal to him. [17]

Premonitory symptoms of psychic diseases :

ध्यानायासौ तथोद्देशो मोहश्चास्थानसंभवः ।
अरतिर्वंलहानिश्च मृत्युरुन्मादपूर्वकः ॥ १८ ॥
आहारद्वेषिणं पश्यन् लुपचित्तमुदर्दितम् ।
विद्याद्वीरो मुमूर्षुं तमुन्मादेनातिपातिना ॥ १९ ॥
क्रोधनं त्रासवहुलं सकृतप्रहसिताननम् ।
मूर्छापिपासावहुलं हन्त्युन्मादः शरीरिणम् ॥ २० ॥
नृत्यन् रक्षोगणैः साकंयः स्वप्ने उम्भसि सीदति ।
स प्राप्य भृशमुन्मादं याति लोकमतः परम् ॥ २१ ॥
असत्तमः पश्यति यः शृणोत्प्राप्यसतः स्वनान् ।
बहून् बहुविधान् जाग्रत् सोऽपस्मारेण बध्यते ॥ २२ ॥
मत्तं नृत्यन्तमाविध्य प्रेतो हरति यं नरम् ।
स्वप्ने हरति तं मृत्युरपस्मारपुरुषरः ॥ २३ ॥

Mental wandering, exertion, bewilderment, illusion in inopportune situations, indifference and loss of strength are indicative of imminent death preceded by insanity.

One who has aversion to food, whose mind is lost, who suffers from *udarda* or urticaria (*urdhvavāta* or the condition caused by the upward movement of *vāta*), is sure to die soon due to a strong attack of insanity.

Extreme irritation, frightfulness, continued smile on his face after its onset, excess of fainting and thirst are indicative of imminent death due to insanity.

If one gets drowned in water while dancing with the demons in his dream, he succumbs to an acute attack of insanity.

If one, in his wakeful state sees darkness where there is no darkness and listens to all types of sound even though there are no such sounds, he succumbs to *apasmāra* (epilepsy)

If a patient while dancing in an intoxicated state is caught by a *preta* (soul of a dead person) with his face downwards, he is sure to succumb to an attack of *apasmāra*. [18-23]

स्तम्भेते प्रतिबुद्धस्य हनू मन्ये तथाऽक्षिणी ।
यस्य तं बहिरायामो गृहीत्वा हन्त्यसंशयम् ॥ २४ ॥
शङ्कुलीर्वाऽप्यपूपान् वा स्वप्ने खादति यो नरः ।
स चेत्तावक् छर्दयति प्रतिबुद्धो न जीवति ॥ २५ ॥

If jaw bone (lower), *manyā* (the region of Carotid artery) and the two eyes become stiff while awake, he is sure to succumb to *bahirayama* (a condition characterized by opisthotonus of the body).

If one takes *śākuli* (a large round cake prepared of ground rice, sugar and sesamum, and cooked in oil MW.) and *apūpa* (cake of flour MW.) in dream and vomits similar substance while awake cannot live long. [24-25]

एतानि पूर्वरूपाणि यः सम्यगवबुध्यते ।
स एषामनुवन्धं च फलं च आतुर्मर्हति ॥ २६ ॥

If one is conversant with these premonitory symptoms, he can very well comprehend the consequential developments and final results thereof. [26]

Dreams indicative of imminent death :

इमांश्चाप्यपरान् स्वप्नान् दारणानुपलक्ष्येत् ।
व्याधितानां विनाशाय क्लेशाय महतेऽपि वा ॥ २७ ॥
यस्योत्तमाङ्गे जायन्ते वंशगुल्मलतादयः ।
वयांसि च विलीयन्ते स्वप्ने मौण्डघमियाच्च यः ॥ २८ ॥
गृधोल्दकश्वकाकादौः स्वप्ने यः परिवार्यते ।
रक्षःप्रेतपिशाचखोचण्डालद्रविडान्ध्रकैः ॥ २९ ॥
वंशवेत्रलतापाशतृणकण्टकसङ्कटे ।
संसज्जति हि यः स्वप्ने यो गच्छन् प्रपतत्यपि ॥ ३० ॥
भूमो पांशूपधानायां वल्मीके वाऽथ भस्मनि ।
इमशानायतने श्वभ्रे स्वप्ने यः प्रपतत्यपि ॥ ३१ ॥
कलुषेऽम्भसि पङ्के वा कूपे वा तमसाऽवृत्ते ।
स्वप्ने मज्जति शीघ्रेण स्रोतसा ह्रियते च यः ॥ ३२ ॥
स्नेहपानं तथाऽभ्यङ्गः प्रच्छर्दनविरेचने ।
द्विरण्यलाभः कलहः स्वप्ने बन्धपराजयौ ॥ ३३ ॥

उपानद्युगनाशश्च प्रपातः पादचर्मणोः ।
हर्षः स्वप्ने प्रकुपितैः पितॄमिश्रावभर्तसेनम् ॥ ३४ ॥
दन्तचन्द्रार्कनक्षत्रदेवतादीपचम्भुषाम् ।
पतनं वा विनाशो वा स्वप्ने भेदो नगस्य वा ॥ ३५ ॥
रक्तपुष्पं वनं भूमि पापकर्मालयं चिताम् ।
गुहान्धकारसंवाधं स्वप्ने यः प्रचिशत्यपि ॥ ३६ ॥
रक्तमाली हसन्नुचैर्दिग्वासा दक्षिणां दिशम् ।
दारुणामटवीं स्वप्ने कपियुक्तेन याति वा ॥ ३७ ॥
काषायिणामसौम्यानां नग्नानां दण्डधारिणाम् ।
कृष्णानां रक्तनेत्राणां स्वप्ने नेच्छन्ति दर्शनम् ॥ ३८ ॥
कृष्णा पापा निराचारा दीर्घकेशनखस्तनी ।
विरागमाल्यवसना स्वप्ने कालनिशा मता ॥ ३९ ॥
इत्येते दारुणाः स्वप्ना रोगी यैर्याति पञ्चताम् ।
अरोगः संशयं गत्वा कथिदेव प्रमुच्यते ॥ ४० ॥

The following are the other dreams of the most dangerous type which indicate either the death of the patient or affliction of individuals with serious types of diseases.

1. Growth of bamboo, shrubs, creepers etc., in the head and disappearance of flying bird therein;
2. Circumvention by vultures, owls, dogs, crows etc., and *raksas* (demons), *preta* (soul of dead persons) *pisāca* (evil spirits), women, *cāndala* (a person born of *sūdra* father and brahmin mother MW.), *Dravidas* and *Andhras*;
3. Involvement in the heaps of bamboos, *vatra* (*Salix caprea* Linn.), creeper, snare, grass and thorns;
4. falling down while walking;
5. Lying down on the ground with dust as pillow, on ant-hill or ashes or cemetery or ditch;
6. Drowning in dirty water, mud or the well covered with darkness or being carried away by the stream flowing rapidly;
7. Intake of fatty substance, anointment, emesis, purgation, receipt of gold, quarrel, arrest and defeat;

8. Losing both the shoes, peeling of the skin out of feet, exhilaration and insult by angry forefathers;
9. Fall or extinction of teeth, moon, sun, stars, the gods, lamp and eyes or cracking of a hill;
10. Entrance into a forest full of red flowers, the earth, the place of sinfull acts, funeral pyre or a cave dense with darkness;
11. Movement by an individual wearing red garlands, laughing loudly and naked, towards the south through frightful forests on a chariot yoked by a monkey;
12. To have the vision of persons wearing ochre coloured cloth, of terrific appearance, naked, with a stick in hand, black and with red eyes;
13. To have vision of a sinful women of black colour devoid of conduct with long hair, nails and breasts, with garlands and apparel devoid of colour.

These are the dangerous types of dream which indicate the death of patients. If an individual not afflicted with any disease sees such dreams, he is also likely to succumb to diseases. Instances of such persons surviving after such dream are very rare. [27-40]

Process of manifestation of dreams :

मनोवहानां पूर्णत्वाद्वैरतिवलैखिभिः ।
स्रोतसां दारुणान् स्वप्नान् काले पश्यति दारुणे ॥४१॥
नातिप्रसुप्तः पुरुषः सफलानफलांस्तथा ।
इन्द्रियेशेन मनसा स्वप्नान् पश्यत्यनेकधा ॥ ४२ ॥

When the *manovahasrotas* (vessels attached to the heart) are filled with the exceedingly aggravated three *dosas*, one sees terrific dreams in ominous situations. It is only in a half awakened state that a person is enabled by his mind which controls the sense organs, to have the diverse types of dreams—meaningful or meaningless. [41-42]

The channels carrying the mind are not separately listed. It is however stated in *Vimāna*, 5 : 7 that the entire sentient body represents the abode of the mind. So as a matter of fact, all the channels of circulation should be considered as the channels of the mind as well. However,

special mention may be made of the ten arteries of the heart which are designated as *manovaha* inasmuch as the heart is the site of the mind. The arteries of the heart may get afflicted by the three aggravated *dosas* jointly or severally.

Types of dream :

दृष्टं श्रुतानुभूतं च प्रार्थितं कल्पितं तथा ।
भाविकं दोषजं चैव स्वप्नं सत्त्विधं विदुः ॥ ४३ ॥

The dream relates to the following seven factors in wakeful state;

1. Visual perception;
2. auditory perception;
3. experiences through other means;
4. one's own desire;
5. imaginary;
- 6, as premonitions;
7. caused by the aggravation of *dosas*. [43]

Results of various types of dream :

तत्र पञ्चविधं पूर्वमफलं भिषगादिशेत् ।
दिवास्वप्नमतिहस्यमतिदीर्घं च बुद्धिमान् ॥ ४४ ॥
दृष्टः प्रथमरात्रे यः स्वप्नः सोऽल्पफलो भवेत् ।
न स्वपेद्यं पुनर्दृश्या स सद्यः स्यान्महाफलः ॥ ४५ ॥
अकल्याणमपि स्वप्नं दृश्या तत्रैव यः पुनः ।
पश्येत् सौम्यं शुभाकारं तस्य विद्याच्छुभं फलम् ॥ ४६ ॥

The first five types of dream listed in the previous paragraph, dreams experienced during the day time, those which are either too short or too long are not meaningful for a physician (that is to say such dreams cannot be regarded as having any premonitory value).

Dreams experienced in the first part of the night are less meaningful. If one does not get sleep after experiencing a dream, then that dream is highly meaningful.

Even if one experiences an inauspicious dream but thereafter again if he experiences an auspicious one, this is indicative of auspicious results. [44-46]

The last two types of dreams enumerated in para—43 above are meaningful. The *bhāvika* type may have auspicious or inauspicious results depending upon the nature of the dream. The *dōṣaja* type is responsible for the causation of diseases as a result of the aggravation of the same *dōṣa*.

In this chapter only such of the diseases are described which carry some specific premonitory value. Therefore, in diseases like *grahāṇī* (sprue syndrome) for which such description is not furnished here should not be interpreted as having no such premonitory symptoms indicative of imminent death. They are however not specific.

तत्र श्लोकः—

पूर्वरूपाण्यथ स्वप्नान् य इमान् वेत्ति दारुणान् ।
न स मोहादसाध्येषु कर्माण्यारभते भिषक् ॥ ४७ ॥

To sum up :

The physician who is acquainted with these premonitory symptoms and dreams indicative of imminent death does not, out of ignorance, initiate the treatment of patients who are incurable. [47]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने पूर्वरूपीयमिन्द्रियं
नाम पञ्चमोऽध्यायः ॥ ५ ॥

Thus ends the fifth chapter on the “signs and symptoms of imminent death as indicated by the premonitory symptoms of diseases” of *Indriya* section of Agniveśa’s work as redacted by Caraka.

CHAPTER VI

षष्ठोऽध्यायः

अथातः कतमानिशरीरीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

Now we shall expound the chapter on the signs and symptoms of Imminent death as indicated by the characteristic physical features of the patient.

Thus said Lord Ātreya. [1-2]

In the previous chapter, premonitory symptoms of diseases as indicative of imminent death were described. In this chapter actual signs and symptoms of diseases which indicate imminent death are being described.

Physical symptoms indicative of imminent death :

कतमानि शरीराणि व्याधिमन्ति महासुने । ।
यानि वैद्यः परिहरेद्यु कर्म न सिद्ध्यति ॥ ३ ॥
इत्याप्नेयोऽम्निवेशेन प्रश्नं पृष्ठः सुदुर्बलम् ।
आचक्षेण यथा तस्मै भगवांस्तन्निबोधत ॥ ४ ॥
यस्य वै भाषमाणस्य रुजत्यूर्ध्वमुरो भृशम् ।
अन्नं च च्यवते भुक्तं स्थितं चापि न जीर्यति ॥ ५ ॥
बलं च हीयते शीघ्रं दृष्णा चातिप्रवर्द्धते ।
जायते हृदि शूलं च तं भिषक् परिवर्जयेत् ॥ ६ ॥

O ! great sage, who are the ailing persons for whom treatment is of no avail and to whom the physician must not treat ? Hearing this extremely difficult question from Agniveśa, Lord Ātreya explained follows :

Feeling of excruciating pain in the upper part of the chest while speaking, vomiting out food, indigestion of food even if it is retained in the stomach, sudden diminution of strength, excessive increase of thirst and pain in the heart—the patient with these symptoms must not be treated by the physician. [3-6]

Diseases in themselves cannot be considered as *arīṣas* (premonitory symptoms of imminent death). It is the characteristic features of some diseases which constitute such symptoms. But as a matter of fact there

is little difference between diseases and their characteristic features. So some of the incurable diseases representing premonitory symptoms of imminent death form the subject matter of this chapter.

हिक्का गम्भीरजा यस्य शोणितं चातिसायते ।
न तस्मै भेषजं दद्यात् स्मरन्नात्रेयशासनम् ॥ ७ ॥

The patient suffering from blood diarrhoea and hiccup which has taken origin from a deeply located organ should not be administered any medicine remembering the instructions of Ātreya. [7]

There are five types of hiccup, and one of them is known as *gambhirā*—cf. *Cikitsā*, 17 : 27—30. The term ‘*gambhirājā*’ used in this verse should not be interpreted as ‘*gambhirā*’ type of hiccup even though both of them literally connote almost the same meaning. The ‘*gambhirā*’ type of hiccup itself may lead to death—cf. *Cikitsā* 17 : 30. Hence its description here as a premonitory symptom of death along with other ailments does not appear to be quite appropriate. The term ‘*gambhirājā*’ may, however be interpreted as the type of hiccup which has taken origin (ja) from deep seated organs (*gambhirā*) like *nābhi* (umblicus) etc.

आनाहश्चातिसारश्च यमेतौ दुर्बलं नरम् ।
व्याधितं विशतो रोगौ दुर्लभं तस्य जीवितम् ॥ ८ ॥

If a weak patient is afflicted with painful conditions like *anāha* (distention of abdomen) and diarrhoea, his survival is impossible. [8]

The term ‘*durlabha*’ actually implies that the patient will never survive. Some scholars are of the view that *ariṣṭa* (symptoms of imminent death) need not necessarily lead to death and so they interpret this term as “difficult of survival.” In this connection they quote *Indriya*, 9 : 15. But this is not correct. The actual implications of the above reference are explained in the commentary on the relevant paragraph as well as the commentary on *Indriya*, 2 : 4—5.

आनाहश्चातिरूप्णा च यमेतौ दुर्बलं नरम् ।
विशतो विजहत्येनं प्राणा नातिचिरान्नरम् ॥ ९ ॥

If a weak patient is afflicted with *anāha* (distention of abdomen) and excessive thirst, he is sure to die soon. [9]

ज्वरः पौर्वाह्लिको यस्य शुष्ककासश्च दारुणः ।
बलमांसविहीनस्य यथा प्रेतस्तथैव सः ॥ १० ॥

If a person deficient in strength and flesh suffers from morning fever along with severe dry cough, he is as good as dead. [10]

यस्य मूत्रं पुरीषं च ग्रथितं संप्रवर्तते ।
 निरुप्मणो जटरिणः श्वसनो न स जीवति ॥ ११ ॥
 श्वयथुर्यस्य कुक्षिस्थ्यो हस्तपादं विसर्पति ।
 जातिसङ्घं स सङ्केश्य तेन रोगेण हन्यते ॥ १२ ॥
 श्वयथुर्यस्य पादस्थस्तथा स्नस्ते च पिण्डिके ।
 सीदतश्चाप्युभे जह्वे तं भिषक् परिवर्जयेत् ॥ १३ ॥
 शूनहस्तं शूनपादं शूनगुद्योदरं नरम् ।
 हीनवर्णबलाहारमौषधैर्नोपपादयेत् ॥ १४ ॥

If a patient suffering from dyspnoea, abdominal disease, lack of power of digestion passes hard stool and urine in condensed form, he cannot survive. If the abdominal oedema of the patient spreads to hands and feet, he dies after a prolonged illness.

If there is slackness in the calf muscles and there is extreme weakness in the legs of a patient suffering from oedema in feet, the physician must not treat such a patient.

If there is diminution in the complexion, strength, capacity for the intake of food of a patient suffering from oedema in hands, legs, *guhyades'a* (perineum) and abdomen, such a patient must not be administered any medicine. [11-14]

उरोयुक्तो बहुश्लेष्मा नीलः पीतः सलोहितः ।
 सततं च्यवते यस्य दूरात्तं परिवर्जयेत् ॥ १५ ॥
 हृष्टरोमा सान्द्रमूत्रः शूनः कासज्वरादितः ।
 क्षीणमांसो नरो दूराद्वर्जयो वैद्येन जानता ॥ १६ ॥
 त्रयः प्रकुपिता यस्य दोषाः कष्टाभिलक्षिताः ।
 कृशस्य बलहीनस्य नास्ति तस्य चिकित्सितम् ॥ १७ ॥
 ज्वरातिसारौ शोफान्ते श्वयथुर्वा तयोः क्षये ।
 दुर्बलस्य विशेषेण नरस्यान्ताय जायते ॥ १८ ॥
 पाण्डुरश्च कृशोऽत्यर्थं तृणयाऽभिपरिमुतः ।
 इन्वरी कुपितोच्छ्वासः प्रत्याख्येयो विजानता ॥ १९ ॥

If there is copious expectoration of phlegm having blue, yellow or red colour from the chest of a patient, the physician should discard him from a distance.

If an emaciated person gets horripilation, passes condensed urine and suffers from oedema, cough and fever, a wise physician should discard him from a distance.

If in a person who is emaciated and weak, all the three *dosas* get (simultaneously) aggravated to such an extent that they are incapable of being corrected, he should not be treated.

If fever and diarrhoea occur after oedema or *vice versa* patient suffering from such ailments, specially the weak ones succumb to death.

A patient having pallor, excessive emaciation, excessive thirst, rigid and fixed vision, and difficult expiration, should be discarded by an enlightened physician. [15-19]

हनुमन्याग्रहस्तृष्णा बलहासोऽतिमात्रया ।
प्राणाश्वोरसि वर्तन्ते यस्य तं परिवर्जयेत् ॥ २० ॥

If a person having lock jaw and rigidity in *manyā* (region of carotid artery in the neck) suffers from thirst and excessive diminution of strength and the signs of life are confined to the chest only, such a patient should be discarded. [20]

The term '*prāṇāḥ*' used in the above verse, according to some commentators stand not for *elan vitae* but for the *vāyu* present in the cardiac region. If the *elan vitae* is present only in the cardiac region, this according to them means that the patient has already breathed his last. At this stage the question of declaring the patient as incurable does not arise. So it is the presence of *vāyu* in the cardiac region which according to them constitutes a premonitory symptom of imminent death.

But as a matter of fact, even if the term '*prāṇāḥ*' for *elan vitae*, there is no incongruity in the explanation given above inasmuch as there is little difference between a person who has just expired and one who is about to expire.

तास्यत्यायच्छते शर्म न किञ्चिदपि विन्दति ।
क्षीणमांसबलाहारो मुमूर्षुरचिरान्नरः ॥ २१ ॥
विरुद्धयोनयो यस्य विरुद्धोपक्रमा भृशम् ।
वर्धन्ते दारुणा रोगाः शीघ्रं शीघ्रं स हन्यते ॥ २२ ॥
बलं विक्षानमारोग्यं ग्रहणी मांसशोणितम् ।
एतानि यस्य क्षीयन्ते क्षिप्रं क्षिप्रं स हन्यते ॥ २३ ॥
आरोग्यं हीयते यस्य प्रकृतिः परिहीयते ।
सहसा सहसा तस्य मृत्युर्हरति जीवितम् ॥ २४ ॥

If a person with emaciation diminished strength and lack of digestive power gets attacks of fainting and violent

movement of the organs of the body and does never get rest in any situation, he succumbs to death immediately.

If serious diseases of mutually contradictory etiological factors and lines of treatment get suddenly aggravated in a person, he is bound to succumb to death soon.

A person having sudden diminution of strength, intellect, health, flesh, blood and functions of *grahani* (duodenum and the upper part of small intestine which are responsible for digestion and absorption of food) succumbs to death soon.

If there is sudden deterioration of health and change in the physical constitution of the individual, such a patient succumbs to death immediately. [21-24]

If in a person suffering from more than one disease, the etiological factors of these diseases are of mutually contradictory attributes and the lines of treatment prescribed for them are also mutually contradictory i.e. if the treatment prescribed for one disease aggravates another disease and *vice versa*, this is indicative of fatal prognosis. If they appear suddenly, the sudden death of the patient is also certain.

तत्र श्लोकः—

इत्येतानि शरीराणि व्याधिमन्ति विवरज्येत् ।
न हेषु धीराः पश्यन्ति सिर्द्धि कञ्चिदुपक्रमात्॥ २५ ॥

Ailing persons of these (above mentioned) types should be discarded. The wise physician should not anticipate success of his treatment in such cases. [25]

इत्यम्बिवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने कतमानिशरीरीय-
मिन्द्रियं नाम षष्ठोऽध्यायः ॥ ६ ॥

Thus ends the Sixth chapter on the signs and symptoms of imminent death as indicated by the characteristic features of the patient of *Indriya* section of Agnivesha's work as redacted by Caraka.

CHAPTER VII

सप्तमोऽध्यायः

अथातः पञ्चरूपीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

Now we shall expound the chapter on the signs of imminent death as indicated by the distortion of the image reflected in the pupil.

Thus said Lord Ātreya. [1-2]

According to the order indicated in para—3 of the first chapter of this section, description of *vedanā* (pain) and *upadrava* (complications) should have followed the description of the characteristic features of diseases as described in the last chapter. Description of signs of imminent death as indicated by *vedanā* (pain) and *upadrava* (complications) is already furnished in *Indriya*, 5 : 12 and *Indriya*, 6 : 8 respectively. Hence the next item i.e. signs of imminent death as indicated by *chāya* (shadow) and *prabhā* (lustre) are now being described.

Shadow image in pupil :

दृष्ट्यां यस्य विजानीयात् पञ्चरूपां कुमारिकाम् ।
प्रतिच्छायामयीमक्षणोन्नेनमिच्छेच्चिकित्सतुम् ॥ ३ ॥

If any distortion is found in the shadow image in the pupil of the patient the physician should not treat such a case. [3]

If there is any distortion in the image of the patient which is reflected as a shadow in the pupil of another person, this should also be considered as a sign indicative of imminent death of the patient.

Other types of shadow :

ज्योत्स्नायामातपे दीपे सलिलादर्शयोरपि ।
अङ्गेषु विकृता यस्य च्छाया प्रेतस्तथैव सः ॥ ४ ॥

If there is any distortion in any part of the shadow of the body caused by moon-light, sunlight or the light of a lamp and of the image as reflected in the water or mirror, the patient is to be considered as good as dead. [4]

Distortions in shadow :

छिन्ना भिन्नाऽऽकुला च्छाया हीना वाऽप्यधिकाऽपि वा ।
नष्टा तन्वी दिधा च्छिन्ना विकृता विशिरा च या ॥ ५ ॥

एताश्चान्याश्च याः काश्चित् प्रतिच्छाया विगर्हिताः ।
सर्वा मुमूर्षतां श्लेया न चेत्प्रक्षयनिमित्तजाः ॥ ६ ॥

Persons having shadows which are broken, torn, hazy, devoid of certain organs, added with certain more organs, not conspicuous, bifurcated, deformed and without the head, and similar other shadows, without any visible cause, may be considered as moribund. [5-6]

Due to certain defects in the light or the medium of reflection, there may be some abnormality in the shadow and such abnormal shadows should not be considered as indicative of imminent death, when such abnormalities occur without any appreciable cause, only then they should be considered as the signs of imminent death.

संस्थानेन प्रमाणेन वर्णेन प्रभया तथा ।
छाया विवर्तते यस्य स्वस्थोऽपि प्रेत एव सः ॥ ७ ॥

A person whose shadow or reflected image changes in shape, measurement, colour and lustre, he is as good as dead, even if he appears to be keeping good health. [7]

संस्थानमाकृतिश्लेया सुषमा विषमा च सा ।
मध्यमलं प्रमाणं त्रिविधं नृणाम् ॥ ८ ॥
प्रतिप्रमाणसंस्थाना जलादर्शातपादिषु ।
छाया या सा प्रतिच्छाया छाया वर्णप्रभाश्रया ॥ ९ ॥

The term ‘*samssthāna*’ stands for shape which may be even or uneven. Similarly measurement may be of three kinds—medium, short or large. The image reflected in water, mirror, sun etc., corresponding to the measurement and shape of the body of the individual is known as *praticchaya* which is nothing but reflected shadow based on the colour and lustre of the individual. [8-9]

Mahabhutas and shadow :

खादीनां पञ्च पञ्चानां छाया विविधलक्षणाः ।
नाभसी निर्मला नीला सखेहा सप्रमेव च ॥ १० ॥
रुक्षा इयावारुणा या तु वायवी सा हतप्रभा ।
विशुद्धरक्ता त्वाग्नेयी दीप्ताभा दर्शनप्रिया ॥ ११ ॥
शुद्धचैदूर्यविमला सुखिघा चाभसी मता ।
स्थिरा लिङ्घा घना श्लक्षणा इयामा श्वेता च पार्थिवी ॥ १२ ॥

वायवी गर्हिता त्वासां चतुषः स्युः सुखोदयाः ।
वायवी तु विनाशाय क्लेशाय महतेऽपि वा ॥ १३ ॥

The following are the distinctive features of shadows relating to each of the five *mahābhūtas*.

<i>Mahābhūta</i>	<i>distinctive features of shadow</i>
1. <i>akāśa</i>	clear, blue, unctuous and lustrous.
2. <i>vāyu</i>	dry, brown and <i>aruna</i> (redish).
3. <i>agni</i>	pure red, brilliant and pleasing to the eyes.
4. <i>jala</i>	clear like <i>vaidūrya</i> (cat's eye) and excessively unctuous.
5. <i>prithvi</i>	stable, unctuous, compact, smooth, black and white.

The shadow pertaining to *vāyu* is of inferior category whereas the remaining four are indicative of happiness. The former is indicative of great calamities and miseries. [10-13]

If the distinctive features of *vāyu* appear at the very time of birth, they are indicative of miseries of life. If they appear all of a sudden, they are to be considered as premonitory symptoms indicative of death.

Various types of lustre :

स्थात्तैजसी प्रभा सर्वा सा तु सप्तविधा स्मृता ।
रक्ता पीता सिता श्यावा हरिता पाण्डुराऽसिता ॥ १४ ॥
तासां याः स्युर्विकासिन्यः खिञ्चाश्च विपुलाश्च याः ।
ताः शुभा रुक्षमलिनाः संक्षिप्ताश्चाशुभोदयाः ॥ १५ ॥

All types of lustre are constituted of *tejas mahābhūta*. They are of seven types, viz. red, yellow, white, brown, green, *pāndura* (pale yellow) and black. Of them which are emanative, unctuous and dense are auspicious and those others which are dry, dirty and thin are inauspicious. [14-15]

If the inauspicious type of lustre appears all of a sudden, then they are indicative of imminent death. If appearing in their natural course, they represent sources of miseries.

Shadow vis a vis lustre :

वर्णमाक्रामति च्छाया भास्तु वर्णप्रकाशिनी ।
आसन्ना लक्ष्यते च्छाया भाः प्रकृष्टा प्रकाशते ॥ १६ ॥

नाच्छायो नाप्रभः कश्चिद्विशेषाश्चिह्नयन्ति तु ।
नृणां शमाशुभोत्पर्ति काले छायाप्रभाश्रयाः ॥ १७ ॥

The *chaya* (shadow) circumscribes the complexion of the body whereas the *prabha* (lustre) illuminates the complexion. The shadow can be observed from nearby whereas the lustre illuminates from a distance. There is nothing devoid of shadow or lustre. Certain distinctive features of the shadow and the lustre when mature indicate emergence of auspicious or inauspicious results in respect of human beings. [16-17]

A shadow can be observed only from nearby e.g. the shadow pertaining to a painting. Lustre on the other hand is discernible from a distance e.g. light emanating from gems, pearl etc.

Signs of imminent death :

कामलाऽक्षणोर्मुखं पूर्णं शङ्खयोर्मुक्तमांसता ।
संत्रासश्चोषणगात्रत्वं यस्य तं परिवर्जयेत् ॥ १८ ॥
उत्थाप्यमानः शयनात् प्रमोहं याति यो नरः ।
मुहुर्मुहुर्न सप्ताहं स जीवति विक्तथनः ॥ १९ ॥
संसृष्टा व्याधयो यस्य प्रतिलोमानुलोमगाः ।
व्यापना ग्रहणी प्रायः सोऽर्धमासं न जीवति ॥ २० ॥

Yellowness of the eyes, swelling in the face, temples devoid of flesh, terrifying appearance and high temperature of the body (are the symptoms of imminent death). Patients with such symptoms must not be treated.

A patient who faints again and again while being taken out of the bed cannot survive even for a week.

A patient who suffers from diseases caused by more than one *dosa* in which both the upward and downward tracks are afflicted and whose *grahaṇī* (duodenum and other parts of small intestine) are deranged cannot survive longer than a fortnight. [18-20]

उपरुदस्य रोगेण कशितस्याल्पमश्रतः ।
बहु मूत्रपुरीषं स्यादस्य तं परिवर्जयेत् ॥ २१ ॥
दुर्बलो बहु भुड्केयः प्राणभुक्तादन्नमातुरः ।
अल्पमूत्रपुरीषश्च यथा प्रेतस्तथैव सः ॥ २२ ॥
इष्टं च गुणसंपन्नमन्नमश्राति यो नरः ।
शश्वच्च वलवर्णाभ्यां हीयते न स जीवति ॥ २३ ॥

प्रकूजति प्रश्वसिति शिथिलं चातिसार्यते ।
 वलहीनः पिपासार्तः शुष्कास्यो न स जीवति ॥ २४ ॥
 हस्तं च यः प्रश्वसिति व्याविद्धं स्पन्दते च यः ।
 मृतमेव तमात्रेयो व्याचचक्षे पुनर्वसुः ॥ २५ ॥
 ऊर्ध्वं च यः प्रश्वसिति श्लेषणा चाभिभूयते ।
 हीनवर्णवलाहारो यो नरो न स जीवति ॥ २६ ॥

An emaciated patient who takes very little food but passes urine and stool in large quantity, should not be treated.

A weak patient who takes food which is more in quantity than his previous meal(s) but passes urine and stool in small quantity should be considered as already dead.

A person who takes food which is nutritious and endowed with the desired taste but constantly deteriorates in strength and complexion, does not survive.

If a person who is weak, thirsty and having dryness of mouth, suffers from groaning, dyspepsia and diarrhoea, then he does not survive.

If the person is short of breath and there are irregular movements in his body, then according to Punarvasu Ātreya, he should be considered as already dead.

If a person whose complexion, strength and capacity of intake of food are diminished, develops inspiratory dyspnoea and gets afflicted with *kapha*, then he does not survive.[21-26]

ऊर्ध्वग्रे नयने यस्य मन्ये चारतकम्पने ।
 वलहीनः पिपासार्तः शुष्कास्यो न स जीवति ॥ २७ ॥
 यस्य गण्डावुपचितो ज्वरकासौ च दास्यौ ।
 शूली प्रदेषि चायनं तस्मिन् कर्म न सिद्धति ॥ २८ ॥
 व्यावृत्तमूर्यजिह्वास्यो भ्रुवौ यस्य च विच्छ्यते ।
 कण्टकैश्चाचिता जिह्वा यथा प्रेतस्तथैव सः ॥ २९ ॥
 शोफश्चान्यर्थमुनिकं निःसृतौ वृषणौ भृशम् ।
 अतश्चेव विपर्यासो विकृत्या प्रेतलक्षणम् ॥ ३० ॥
 निचितं यस्य मांसं स्यात्यगस्थिष्वेव दृश्यते ।
 शीणस्यानश्चतस्तस्य मासमायुः परं भवेत् ॥ ३१ ॥

If a person who is weak, thirsty and having dryness of mouth suffers from rigid and upward look of the eyes and

constant throbbing of the carotid region of the neck, he does not survive.

If a person having swollen cheeks suffers from high fever and severe cough, colicky pain and aversion for food, then no treatment will succeed in curing him.

If there is distortion of the head, tongue and face, drooping of the eyebrows and appearance of thorny coating over the tongue, then such a person should be considered as already dead.

If the phallus gets excessively shrunken and the testicles hang excessively loose or *vice versa*, then the person having such abnormal signs should be considered as already dead.

If an emaciated person who has wasting of muscle and who is reduced to skin and bones does not take food, then his residual span of life is not more than one month. [27-31]

Because of some congenital defects, the phallus of an otherwise normal person may get shrunken and the testicles may hang excessively loose. Such congenital defects should not be considered as signs of imminent death when such signs occur spontaneously without any known cause only then they should be considered as indicative of imminent death.

तत्र श्लोकः—

इदं लिङ्गमरिप्रारूपमनेकमभिजिवान् ।
आयुर्वेदविदित्याख्यां लभते कुशलो जनः ॥ ३२ ॥

To sum up :

A wise person who is well versed with these various types of signs indicative of imminent death, is entitled to be called *ayurvedavit* (knower of the “Science of Medicine”). [32]

इत्यग्निवेशाकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने पञ्चरूपोयमिन्द्रियं
नाम सप्तमोऽध्यायः ॥ ७ ॥

Thus ends the seventh chapter on the signs of imminent death as indicated by the “distortion of images reflected in the pupil” of the *Indriya* section of Agniveśa’s work as redacted by Caraka.

CHAPTER VIII

अष्टमोऽध्यायः

अथतोऽवाक् शिरसीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on imminent death as indicated by signs like the distortion of the shadow of the individual viz., the inversion of the shadow of the head.

Thus said Lord Ātreys. [1-2]

Some of the signs of imminent death which were not mentioned in the previous chapters will be described in this as well as in the subsequent chapter. Because of their relation with the topics dealt with in the previous chapter, signs of imminent death as indicated by the distortion of the shadow are being described in this chapter.

Signs of imminent death :

अवाक्षिरा वा जिह्वा वा यस्य वा विशिरा भवेत् ।
जन्तो रूपप्रतिच्छाया नैनग्निच्छेष्विकित्सितुम् ॥ ३ ॥
जटीभूतानि पक्षमाणि दृष्टिश्चापि निगृह्यते ।
यस्य जन्तोर्न तं धीरो भेषजेनोपपादयेत् ॥ ४ ॥
यस्य शूनानि वर्त्मानि न समायान्ति शुष्यतः ।
चक्षुषी चोपदिहेते यथा प्रेतस्तथैव सः ॥ ५ ॥
भ्रुवोर्वा यदि वा मूर्ध्नि सोमन्तावर्तकान् बहून् ।
अपूर्वानकृतान् व्यक्तान् दृष्टा मरणमादिशेत् ॥ ६ ॥
व्यहमेतेन जीवन्ति लक्षणेनातुरा नराः ।
अरोगाणां पुनस्त्वेतत् पद्मात्रं परमुच्यते ॥ ७ ॥

If the shadow of the individual is found to be inverted (head downwards and legs upwards), irregular or without the head, he must not be treated.

If in a person, there is matting of eye-lashes or absence of vision (because of the matting of eye-lashes of the upper and lower eye lids together), he should not be treated.

If in an emaciated person, there is swelling in the eye-lids as a result of which both the lids do not meet each other

and there is burning sensation in the eyes he should be considered as good as dead.

If in a person, there are many well manifested *sīmantas* (lines formed by the parting of hair to each side) and *avar-takas* (whirls of hair) in the eyebrows or in the hair of the head which were neither found earlier nor made artificially, he is sure to die soon.

If the above mentioned signs appear in individuals suffering from diseases, they survive for three days only. If they appear in persons who are not suffering from any disease, such individuals may live for six days maximum.[3-7]

आयम्योत्पाटितान् केशान् यो नरो नाववृद्ध्यते ।
अनातुरो वा रोगी वा षड्ग्रामं नातिवर्तते ॥ ८ ॥
यस्य केशा निरभ्यङ्गा दृश्यन्ते उभ्यक्तसञ्चिभाः ।
उग्रहृदयुपं ज्ञात्वा तं धोरः परिवर्जयेत् ॥ ९ ॥

If a person with or without a disease, does not have any sensation when his hair is pulled and uprooted, he does not survive for more than six nights.

If the hair of the individual appears to be greasy even when no unctuous substances is applied to it, then such a person should be considered as at the fag-end of his life and should not be treated. [8-9]

The sign of imminent death described in verse 8 has already been described in *Indriya*, 3 : 6. There was a need to repeat it here with a view to indicate its applicability both for normal healthy persons as well as patients. There is also a subtle difference in these two statements. In the one at *Indriya*, 3 : 6, there is no mention of uprooting the hair but it itself get uprooted when pulled. In the statement at the verse—8 of this chapter, hair is to be pulled with force for getting them uprooted. In view of this difference in implication, the statement here is amply justified.

ग्लायते नासिकावंशः पृथुत्वं यस्य गच्छति ।
अशूनः शूनसंकाशः प्रत्याख्येयः स जानता ॥ १० ॥
अत्यर्थविवृता यस्य यस्य चात्यर्थसंवृता ।
जिह्वा वा परिशुष्का वा नासिका न स जीवति ॥ ११ ॥
मुखं शब्दश्रवावोष्टो शुक्लश्यावातिलोहितो ।
विकृत्या यस्य वा नीलौ न स रोगाद्विमुच्यते ॥ १२ ॥

Depression and thickening of the ridge of the nose and its appearance as if swollen even though actually it is not—patients with such signs must not be treated by the wise physician.

Excessive elevation or depression, distortion in shape and extreme dryness of the nose indicate that the individual will not survive.

If the face, ears and lips become abnormally (without any visible cause) white, brown, excessively red or blue, then such a patient seldom recovers from the disease. [10-12]

अस्थिश्वेता द्विजा यस्य पुणिपाः पङ्कसंवृताः ।
 विकृत्या न स रोगं तं विहायारोग्यमश्रुते ॥ १३ ॥
 स्तब्धा निश्चेतना गुर्वी कण्ठकोपचिता भृशम् ।
 श्यावा शुष्काऽथवा शूना प्रेतजिह्वा विसर्पिणी ॥ १४ ॥
 दीर्घमुच्छुस्य यो हस्यं नरो निःश्वस्य ताम्यति ।
 उपरुद्धायुषं ज्ञात्वा त धीरः परिवर्जयेत् ॥ १५ ॥
 हस्तौ पादौ च मन्ये च तालु चैवातिशीतलम् ।
 भवत्यायुःक्षये क्रूरमथवाऽपि भवेन्मृदु ॥ १६ ॥
 घट्यजानुता जानु पादाख्यम्य पातयन् ।
 योऽपास्थयति मुहुर्वक्मानुरो न स जोवति ॥ १७ ॥
 दन्तैश्चिछन्दन्नखाग्राणि नखैच्छिन्दचिछिरोरुहान् ।
 काष्ठेन भूमि विलिखन्त रोगात् परिमुच्यते ॥ १८ ॥
 दन्तान् खादति यो जाग्रदसाम्ना विरुद्नं हसन् ।
 विजानाति न चेद्व्यं न स रोगाद्विमुच्यते ॥ १९ ॥
 मुहुर्हसन् मुहुः क्षेत्रन् शायां पादेन हन्ति यः ।
 उच्चैश्चिछ्राणि विमृशनातुरो न स जीवति ॥ २० ॥

A patient having morbid conditions like (1) teeth becoming white like the colour of the bone, (2) appearance of white spots (*puṣpa*-lit. meaning flower) over teeth and (3) adhesion of mind like substance over them cannot recover from the disease.

If the tongue becomes rigid, senseless, heavy, excessively coated with a thorn like fur, brown in colour, dry or swollen and constantly mobile, then the patient having such signs should be considered as good as dead.

If a person faints after a short expiration followed by a long inspiration, then he should be considered as nearing his end and must not be treated.

Excessive coldness, roughness and softness in hands, legs and *manyas* (carotid region of the neck)—such signs indicate the end of the life of the person.

A person who strikes one knee with the other, throws down legs after lifting them up and frequently turns the face to one or the other side, does not survive.

The patient who cuts tips of his nail by biting, clips hair by nail and writes on the ground with the help of a stick, succumbs to the disease.

The patient who gnashes teeth while awake, cries and laughs loudly and does not have the pain sensation, does not recover from the disease.

The patient who frequently laughs and shouts, strikes the bed by feet and puts finger into the nostrils, ears and eyes does not survive. [13-20]

यैर्विन्दति पुरा भावैः समेतैः परमां रतिम् ।
 तैरेवारमाणस्य ग्लास्त्रोर्मणमादिशेत् ॥ २१ ॥
 न बिभर्ति शिरो ग्रीवा न पृष्ठं भारमात्मनः ।
 न हनू पिण्डमास्यस्थमातुरस्य मुमूर्षतः ॥ २२ ॥
 सहसा उवरसंतापस्तृष्णा मूच्छां बलक्षयः ।
 विश्लेषणं च सन्धीनां मुमूर्षोरुपजायते ॥ २३ ॥
 गोसर्गं वदनाद्यस्य स्वेदः प्रच्यवते भृशम् ।
 लेपञ्चरोपतस्य दुर्लभं तस्य जीवितम् ॥ २४ ॥
 नोपैति कण्ठमाहारो जिह्वा कण्ठमुपैति च ।
 आयुध्यन्तं गते जन्तोर्बलं च परिहीयते ॥ २५ ॥
 शिरो विक्षिपते कृच्छान्मुञ्चयित्वा प्रपाणिकौ ।
 ललाटम्बुप्रतस्वेदो मुमूर्षुश्चयुतबन्धनः ॥ २६ ॥

If a debilitated patient develops disliking for such of the factors by getting which, in the past, he used to become extremely happy, his death is imminent.

If the neck of the patient is unable to support the weight of the head, the back that of the body and the jaw bones the

morsel of food in the mouth, this indicates his imminent death.

If in a patient signs like fever, thirst, fainting, diminution of strength and looseness of joints take place all of a sudden, he succumbs to death.

If a patient suffering from *pralepaka* (hectic) type of fever gets profuse perspiration in the face, there is little chance of his survival.

If the ingested food does not reach the throat, or the tongue falls back over the throat (thereby causing obstruction) and there is diminution of strength, then the death of the person is imminent.

If the person moves his head with difficulty by the help of the fore-arms and if there is sweating in the forehead and looseness of joints, he is moribund. [21-26]

Need for immediate observation :

तत्र श्लोकः—

इमानि लिङ्गानि नरेषु बुद्धिमान् विभावयेतावहितो मुमूषुषु ।
क्षणेन भूत्वा ह्युपयान्ति कानिचिन्नचाफलं लिङ्गमिहास्ति किञ्चन॥२७॥

To sum up :

The wise physician should closely search for these signs repeatedly because some of them disappear in a short moment after their manifestation.

None of these signs remain without leading to the consequences already described i.e. all of them indicate imminent death. [27]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थानेऽवाक्शिरसोयमिन्द्रियं
नामाष्टमोऽध्यायः ॥ ८ ॥

Thus ends the eighth chapter on imminent death as indicated by signs like the distortion of shadow of the individual, viz. the inversion of the shadow of the head, of the *Indriya* section of Agniveśa's work as redacted by Caraka.

CHAPTER IX

नवमोऽध्यायः

अथातो यस्यश्यावनिमित्तीयमिन्द्रियं व्यास्त्यास्यामः ॥ १ ॥

इति ह स्माह भगवानाश्रेयः ॥ २ ॥

. Now we shall expound the chapter on imminent death as indicated by signs like blackish brown coloration of the eyes.

Thus said Lord Atreya. [1-2]

Signs of imminent death :

यस्य श्यावे परिघ्वस्ते हरिते चापि दर्शने ।
 आपन्नो व्याधिरन्ताय ज्ञेयस्तस्य विजानता ॥ ३ ॥
 निःसंज्ञः परिशुष्कास्यः समृद्धो व्याधिभिश्च यः ।
 उपरुद्गायुपं ज्ञात्वा तं धीरः परिवर्जयेत् ॥ ४ ॥
 हरिताश्च सिरा यस्य लोमकूपाश्च संवृत्ताः ।
 सोऽप्लाभिलाषी पुरुषः पित्तान्मरणमश्रुते ॥ ५ ॥
 शरोरन्ताश्च शोभन्ते शरीरं चोपशुष्ट्यति ।
 बलं च हीयते यस्य राजयक्षमा हिनस्ति तम् ॥ ६ ॥
 अंसाभितापो हिक्का च छर्दनं शोणितस्य च ।
 आनाहः पार्श्वशूलं च भवत्यन्ताय शोषणः ॥ ७ ॥
 वातव्याधिरपस्मारो कुष्ठो शोफी तथोदरी ।
 गुल्मी च मधुमेही च राजयक्षमी च यो नरः ॥ ८ ॥
 अचिकित्स्या भवन्तयेते बलमांसक्षये सति ।
 अन्येष्वपि विकारेषु तान् भिषक् परिवर्जयेत् ॥ ९ ॥
 विरेचनहृतानाहो यस्तृष्णानुगतो नरः ।
 विरिक्तः पुनराध्माति यथा प्रेतस्तथेव सः ॥ १० ॥
 पेयं पातुं न शक्नोति कण्ठस्य च मुखस्य च ।
 उरसश्च विशुष्कत्वाद्यो नरो न स जीवति ॥ ११ ॥
 स्वरस्य दुर्वलीभावं हार्नि च बलवर्णयोः ।
 रोगवृद्धिमयुक्त्या च दृष्टा मरणमादिशेत् ॥ १२ ॥
 ऊर्ध्वश्वासं गतोष्माणं शूलोपहतवल्क्षणम् ।
 शर्म चानधिगच्छन्तं बुद्धिमान् परिवर्जयेत् ॥ १३ ॥

If the eyes of the patient become blackish brown, green and devoid of vision, he is sure to die.

Non-sensitiveness and dryness of the mouth of the patient associated with the aggravation of the disease indicates the end of the span of his life. A wise physician should not treat such cases.

A person having green coloration of veins, obstruction of hairs follicles and desire for the intake of sour things succumbs to death being afflicted with the disease caused by the vitiation of *pitta*.

If a person has plumpness of the extremities but emaciation of the trunk associated with the diminution of strength, he dies of Tuberculosis.

Consumption associated with *amsabhitapa* (burning sensation in the shoulder region), hic-cup, haemoptysis (lit. vomiting of blood), *anaha* (constipation along with distension of stomach) and *parsvastula* (pain in the sides of the chest) lead to the death of the patient.

Patients suffering from *vatavyadhi* (diseases caused by the vitiation of *vata*), epilepsy, *kuṣṭha* (obstinate skin diseases including leprosy), *sopha* (oedema), *udara* (obstinate types of abdominal diseases including ascitis), *gulma* (abdominal tumours including phantom tumour), *madhumeha* (obstinate urinary disorders including Diabetes mellitus) do not yield to any treatment when there is diminution of strength and flesh. Similarly other patients in such conditions should also be discarded by the physician.

If a person suffering from *anaha* (constipation associated with distension in abdomen) is relieved by purgation but subsequently develops thirst and suffers from *anaha* again in spite of the purgation, he should be considered as good as dead.

If a person is unable to drink liquid substances due to the dryness of throat, mouth and the chest, he does not survive.

Weakness in the voice, diminution of the strength and complexion and inappropriate aggravation of the disease indicate the imminent death of the patient.

A patient having dyspnoea, absence of heat in the body, affliction with pain in the chest and absence of any response to the treatment should not be treated by the physician. [3-13]

Exploratory therapy :

अपस्वरं भाषमाणं ग्रासं मरणमात्मनः ।
 थोतारं चाप्यशब्दस्य दूरतः परिवर्जयेत् ॥ १४ ॥
 यं नरं सहसा रोगो दुर्बलं परिमुच्छति ।
 संशयप्राप्तमात्रेयो जीवितं तस्य मन्यते ॥ १५ ॥
 अथ चेज्ञातयस्तस्य याचेन् प्रणिपाततः ।
 रसेनाद्यादिति ब्रयान्नास्मै दद्याद्विशोधनम् ॥ १६ ॥
 मासेन चेन्न दृश्येत विशेषस्तस्य शोभनः ।
 रसैश्चान्वयेवद्विधैर्दुर्लभं तस्य जीवितम् ॥ १७ ॥

A patient who makes a statement in a choked voice about the advent of his own death and hears sounds when actually there is none should be discarded from a distance.

If a weak patient gets rid of a disease all of a sudden, according to Lord Ātreya his life should be considered as in danger. If his relatives approach the physician in all humility for help, he should prescribe food with meat-soup and must not be administered any elimination therapy. If specific improvement in his health is not observed within one month in spite of the administration of various types meat soup, the patient is sure to die. [14-17]

According to some, *ariṣṭa* (sign of imminent death) is of two types viz., *niyata* (invariable) and *aniyata* (variable). The former type of *ariṣṭa* invariably leads to death whereas the consequence of the latter type is doubtful. They cite the term “*samīkṣaya-prāptamātreyah*” occurring in Verse—15 in order to illustrate the latter type of *ariṣṭa*. According to them the patient may survive even after the manifestation of certain category of *ariṣṭa* and that is why Lord Ātreya himself is quoted here as suggesting that the patients' survival is doubtful.

The above interpretation is however not correct. The sage himself has very clearly stated that manifestation of any *ariṣṭa* invariably leads to death and this point has already been explained earlier.

Sage Ātreya is free from any doubt. In order that the disciples whose mind is exposed to doubts are taught well the sage has explained this point of doubt. His subsequent exposition in verses 16 and 17 removes this doubt. A similar statement is made in *Cikitsā*, 6 : 55 in order to

explain the exact nature (*vātika* or *slaiṣmika*) of *prameha* (obstinate urinary disorder including Diabetes mellitus).

A weak patient may get sudden relief from the disease in two ways. It may happen as a result of prolonged fasting by the patient or it may be manifested as a sign of *ariṣṭa*. If fasting was the cause of the sudden weakness, the patient will soon recover from weakness by taking nourishing food like meat-soup. If it was due to *ariṣṭa* there will be no improvement in the condition of the moribund patient even if he takes nourishing food. This type of examination helps the physician to ascertain the real condition of the patient.

In view of the above, there is no contradiction in the statements in this work.

निष्ठयूतं च पुरीषं च रेतश्चाम्भसि मज्जति ।
 यस्य तस्यायुषः प्राप्तमन्तमाहुर्मनीषिणः ॥ १८ ॥
 निष्ठयूते यस्य हृश्यन्ते वर्णा बहुविधाः पृथक् ।
 तच्च सीदत्यपः प्राप्य न स जीवितुर्महति ॥ १९ ॥
 पित्तमूष्मानुगं यस्य शङ्खौ प्राप्य विमूर्च्छति ।
 स रोगः शङ्खको नास्त्रा त्रिरात्राद्विन्ति जीवितम् ॥ २० ॥
 सफेनं सधिरं यस्य मुहुरास्यात् प्रसिद्ध्यते ।
 श्लेष्म तुद्यते कुक्षिः प्रत्याख्येयस्तथाविधः ॥ २१ ॥
 बलमांसक्षयस्तीव्रो रोगवृद्धिररोचकः ।
 यस्यातुरस्य लक्ष्यन्ते त्रीन् पक्षान्न स जीवति ॥ २२ ॥

If the sputum, stool and semen of a person sink when placed on water, he should be considered as moribund.

If several colours appear in the sputum of a person and it sinks in water, he cannot survive.

A morbid condition caused by the interaction of the vitiated *pitta* with *agni* (bodily heat) in the temporal region is known as *śāṅkhaka* which kills the patient in three nights.

If a person suffering from pain in the lower abdomen frequently vomits blood along with foam like substance, then he should not be treated.

If there is sudden diminution in strength and flesh of the patient and aggravation of the disease associated with *arocaka* (anorexia), the patient cannot survive for more than three fort-nights. [18-22]

The disease '*Śāṅkhaka*' has already been described in *Sūtra*, 18 : 26. The same is described here again with a view to show its fatal nature.

Need for comprehensive knowledge :

तत्र श्लोकौ—

विश्वानानि मनुष्याणां मरणे प्रत्युपस्थिते ।
भवन्त्येतानि संपद्येदन्यान्यविधानि च ॥ २३ ॥
तानि सर्वाणि लक्ष्यन्ते न तु सर्वाणि मानवम् ।
चिशन्ति चिनशिष्यन्तं तस्माद्गोध्यानि सर्वतः ॥ २४ ॥

To sum up :

The above are the signs indicative of imminent death of a person. These signs and such others should be observed by the physicians. All of them are manifested in moribund persons. All of them, however, do not appear in the same moribund person. The physician should be conversant with these signs in their entirety. [23-24]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने यस्यश्यावनिमित्तीय-
मिन्द्रियं नाम नवमोऽध्यायः ॥ ९ ॥

Thus ends the ninth chapter on imminent death as indicated by signs like black-brown coloration of the eyes of the *Indriya* section of Agnivesha's work as redacted by Caraka.

CHAPTER X

दशमोऽध्यायः

अथातः सद्योमरणीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on the “signs indicative of Impending sudden Death”.

Thus said Lord Atreya. [1-2]

In the previous chapters, signs of death which do not take place immediately, but after a few days have been described. In this chapter, signs which indicate sudden death of the patient are being described. Death of the second category may, however, take place within three to seven days after the manifestation of these signs.

Premonitory Signs of sudden death :

सद्यस्तितिक्षतः प्राणांक्षण्यानि पृथक् पृथक् ।
अग्निवेश ! प्रवस्थामि संस्पृष्टो यैर्जीवति ॥ ३ ॥
वाताष्टीला सुसंचुद्धा तिष्ठन्ती दारुणा हृदि ।
तृष्णयाऽभिपरीतस्य सद्यो मुष्णाति जीवितम् ॥ ४ ॥
पिण्डके शिथिलीकृत्य जिह्वीकृत्य च नासिकाम् ।
वायुः शरीरे विचरन् सद्यो मुष्णाति जीवितम् ॥ ५ ॥
भ्रुवौ यस्य च्युते स्थानादन्तर्दर्ढहश्च दारुणः ।
तस्य हिक्काकरो रोगः सद्यो मुष्णाति जीवितम् ॥ ६ ॥
क्षीणशोणितमांसस्य वायुरुर्ध्वगतिश्चरन् ।
उभे मन्ये समे यस्य सद्यो मुष्णाति जीवितम् ॥ ७ ॥
अन्तरेण गुदं गच्छन् नाभिं च सहसाऽनिलः ।
कृशस्य वंशक्षौ गृह्णन् सद्यो मुष्णाति जीवितम् ॥ ८ ॥
वितत्य पर्युक्तग्राणि गृहीत्वोरश्च मारुतः ।
स्तिमितस्यायताक्षस्य सद्यो मुष्णाति जीवितम् ॥ ९ ॥
हृदयं च गुदं चोभे गृहीत्वा मारुतो वली ।
दुर्बलस्य विशेषेण सद्यो मुष्णाति जीवितम् ॥ १० ॥
वंशणं च गुदं चोभे गृहीत्वा मारुतो वली ।
श्वासं संजनयञ्जन्तोः सद्यो मुष्णाति जीवितम् ॥ ११ ॥
नाभिं मूत्रं वस्तिशीर्पं पुरीपं चापि मारुतः ।
प्रच्छिद्धं जनयञ्जूलं सद्यो मुष्णाति जीवितम् ॥ १२ ॥

भिन्धेते वंक्षणौ यस्य बातशूलैः समन्ततः ।
 भिन्नं पुरीषं तृष्णा च सद्यः प्राणाञ्छहाति सः ॥ १३ ॥
 आमुतं मारुतेनेह शरीरं यस्य केवलम् ।
 भिन्नं पुरीषं तृष्णा च सद्यो जहात् स जीवितम् ॥ १४ ॥
 शरीरं शोफितं यस्य वाताशोफेन देहिनः ।
 भिन्नं पुरीषं तृष्णा च सद्यो जहात् स जीवितम् ॥ १५ ॥
 आमाशयसमुत्थाना यस्य स्यात् परिकर्तिका ।
 भिन्नं पुरीषं तृष्णा च सद्यः प्राणाञ्छहाति सः ॥ १६ ॥
 पकाशयसमुत्थाना यस्य स्यात् परिकर्तिका ।
 तृष्णा गुदग्रहश्चोग्रः सद्यो जहात् स जीवितम् ॥ १७ ॥
 पकाशयमधिष्ठाय हत्वा संशां च मारुतः ।
 कण्ठे घुर्घुरकं कृत्वा सद्यो हरति जीवितम् ॥ १८ ॥
 दन्ताः कर्दमदिग्धाभा मुखं चूर्णकसञ्चिभम् ।
 सिप्रायन्ते च गात्राणि लिङ्गं सद्यो मरिष्यतः ॥ १९ ॥
 तृष्णाश्वासशिरोरोगमोहदौर्बल्यकूजनैः ।
 स्पृष्टः प्राणाञ्छहात्याशु शक्तद्वेदेन चातुरः ॥ २० ॥

O ! Agniveśa, I shall describe separately the signs indicative of sudden death. The patient afflicted with these signs does not survive. They are as follows :-

1. Intense thirst in a patient suffering from a painful and fully manifested *vatasthīla* (hard tumour caused by vitiated *vata*) in the cardiac region;
2. Movement of the vitiated *vāyu* all over the body after producing laxity in the calf muscles and irregularity in the structure of the nose;
3. Development of hiccup in a patient who has drooping of the eye brows and excessive burning sensation in the body;
4. Distension of both the *manyas* (carotid regions of the neck) by the aggravated *vāyu* moving upwards in a patient having diminution of blood and flesh;
5. Affliction of the groins of a weak patient by the sudden aggravation of *vāyu* between the anus and the umbilicus;
6. Stretching of the tips of ribs by the aggravated *vāyu* afflicting the chest of a patient whose eyes are dilated and who feels *staimitya* (as if covered with a wet cloth);
7. Seizure (affliction) of both heart and anus by strongly aggravated *vāyu* in a patient who is exceedingly weak;

8. Dyspnoea by the strongly aggravated *vāyu* after having afflicted (seized) both the groins and the anus;
9. Production of cutting-pain by *vāyu* as a result of the affliction of umbilicus, urine, *bastiśrṣa* (kidneys) and feces,
10. Manifestation of diarrhoea and thirst in a patient suffering from pricking pain in the groins caused by the vitiated *vāta*;
11. Occurrence of diarrhoea and thirst in patient whose entire body is pervaded by aggravated *vāta*;
12. Occurrence of diarrhoea and thirst in a patient whose body is swollen because of *śotharoga* of *vātika* type;
13. Occurrence of diarrhoea and thirst in a patient suffering from sawing pain originated from *amāsaya* (stomach including the small-intestine);
14. Occurrence of thirst and acute spasm of the anus in a patient suffering from sawing pain originated from *pakvāsaya* (large intestine);
15. Occurrence of stertorous breathing (obstruction of breathing by *kapha*) in the throat and unconsciousness caused by the aggravated *vāta* having its site of manifestation in *pakvāsaya* (large intestine);
16. Appearance of teeth as if adhered with mud, face as if covered with ashes and excessive perspiration;
17. Appearance of diarrhoea in a patient having thirst, dyspnoea, *sīroroga* (headache), unconsciousness, debility and groaning sound from the throat. [3-20]

Utility of the knowledge :

तत्र श्लोकः—

एतानि खलु लिङ्गानि यः सम्यगवबुध्यते ।

स जीवितं च मर्त्यानां मरणं चावबुध्यते ॥ २१ ॥

To sum up :

The physician who perfectly comprehends these signs can very well anticipate the survival or death of the patient. [21]

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने सद्योमरणीयमिन्द्रियं
नाम दशमोऽध्यायः ॥ १० ॥

Thus ends the tenth chapter on the "Signs Indicative of Impending Sudden Death" of the *Indriya* Section of Agniveśa's work as redacted by Caraka.

CHAPTER XI

एकादशोऽध्यायः

अथातोऽणुज्योतीयमिन्द्रियं व्याख्यास्यामः ॥ १ ॥

इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on “Imminent Death as indicated by Signs like the Diminution of Bodily Heat.”

Thus said Lord Ātreya. [1-2]

In the previous chapter, signs indicative of sudden death are described. In this chapter, signs indicative of death within or after a specified period are being discussed,

The term ‘*anujyoti*’ literally means diminution of bodily heat. But here it represents all signs and symptoms of imminent death within or after a specified period.

Signs of imminent death :

अणुज्योतिरनेकाग्रो दुर्भायो दुर्मनाः सदा ।
र्त्ति न लभते याति परलोकं समान्तरम् ॥ ३ ॥

Diminution of the bodily heat, absence of the power of concentration of mind, loss of complexion, weakness of mind and absence of attachment for life indicate the death of the person within one year. [3]

बर्लि बलिमृतो यस्य प्रणीतं नोपभुजते ।
लोकान्तरगतः पिण्डं भुड्के संवत्सरेण सः ॥ ४ ॥
सप्तर्षीणां समीपस्थां यो न पश्यत्यरुन्धतीम् ।
संवत्सरान्ते जन्तुः स संपश्यति महत्तमः ॥ ५ ॥
विकृत्या विनिमित्तं यः शोभामुपचयं धनम् ।
प्राप्नोत्यतो वा विभ्रंशं समान्तं तस्य जीवितम् ॥ ६ ॥

Refusal of the birds (crows), to eat the *bali* (the offering of a portion of the daily meal to all creatures) offered by an individual indicates his death within one year. He partakes the manes offered by his relatives in the world beyond death within a year thereafter.

If a person is not able to see the star "Arundhatī" which is situated adjacent to the constallation of Saptarṣi (The Great Bear), he succumbs to death one year thereafter.

Sudden gain or loss of lustre, plumpness or wealth without any appreciable reason or *sāmudrika lakṣaṇa* (marks on the body which are supposed to indicate good or bad fortune of the individual) indicate the death of the person one year thereafter. [4-6]

भक्तिः शीलं स्मृतिस्त्यागो बुद्धिर्बलमहेतुकम् ।
षडेतानि निवर्तन्ते षड्भिर्मासैरिष्यतः ॥ ७ ॥

Cessation of desire, conduct, memory, sense of sacrifice, intellect and strength without any appreciable reason indicates the death of the person within six months. [7]

धमनीनामपूर्वाणां जालमत्यर्थशोभनम् ।
ललाटे दद्यते यस्य पण्मासान्न च जीवति ॥ ८ ॥
लेखाभिश्चन्द्रवक्काभिर्लाटमुपचीयते ।
यस्य तस्यायुषः षड्भिर्मासैरन्तं समादिशेत् ॥ ९ ॥

Appearance of exceedingly shinning net-work of vessels in the fore-head of the individual indicates that he will not survive beyond six months.

If there is increase in the plumpness of the fore-head of the individual because of the development of crescent-shaped furrows, his span of life is bound to come to an end within six months. [8-9]

शरीरकम्पः संमोहो गतिर्वचनमेव च ।
मत्तस्येवोपलभ्यन्ते यस्य मासं न जीवति ॥ १० ॥
रेतोमूत्रपुरीषाणि यस्य मज्जन्ति चाभसि ।
स मासात् स्वजनदेष्टा मृत्युवारिणि मज्जति ॥ ११ ॥

If the tremours in the body, stupor, gait and speech of the individual resembles those of an intoxicated person, he cannot survive even for one month.

If the semen, urine and feces of a person sinks when placed on water and there is aversion for his own relatives, then he succumbs to death within one month. [10-11]

In *Indriya*, 9 : 8 similar symptoms as indicative of imminent death are discussed. Here aversion for relatives as an additional sign indicating of death within a month is also included.

हस्तपादं मुखं चोभे विशेषाद्यस्य शृण्वतः ।
 शूयेते वा विना देहात् स च मासं न जीवति ॥ १२ ॥
 ललाटे मूर्ध्नि बस्तौ वा नीला यस्य प्रकाशते ।
 राजी बालेन्दुकुटिला न स जीवितुमर्हति ॥ १३ ॥
 प्रवालगुटिकाभासा यस्य गात्रे मसूरिकाः ।
 उत्पद्याद्यु विनश्यन्ति न चिरात् स विनश्यति ॥ १४ ॥
 श्रीवाचमर्दो बलवाञ्छिह्नाश्वयथुरेव च ।
 ब्रह्मास्यगलपाकश्च यस्य पकं तमादिशेत् ॥ १५ ॥
 संध्रमोऽतिप्रलापोऽतिभेदोऽस्थनामतिदारुणः ।
 कालपाशपरीतस्य त्रयमेतत् प्रवर्तते ॥ १६ ॥
 प्रमुह्यं लुच्चयेत् केशान् परिगृह्णात्यतीव च ।
 नरः स्वस्थवदाहारमब्लः कालचोदितः ॥ १७ ॥

If there is emaciation or swelling of the hands, feet and face of the individual, with the body without undergoing any such change, then he does not survive for one month.

Appearance of crescent shaped blue lines in the forehead, head and pelvic region indicates that the person will not survive.

If eruptions of *masūrika* (pox) having the appearance of coral beads disappear immediately after their manifestation in an individual, he dies immediately.

A person having acute squeezing-pain in the neck, swelling of the tongue, inguinal lymphadinitis and inflammation of mouth and throat should be considered as ripe for death.

Excessive giddiness, extreme delirium and acute breaking-pain in bones--these three symptoms present in a person lead him to the noose of Death.

A weak person who pulls out his hair in a state of unconsciousness and eats food in excessive quantity as if he is a healthy man, is as good as dead. [12-17]

समीपे चक्षुषोः कृत्वा मृगयेताङ्गुलीकरम् ।
 समयते ऽपि च कालान्धं ऊर्ध्वगानिमिषेक्षणः ॥ १८ ॥
 शयनादासनादङ्गात् काष्ठात् कुड्यादथापि वा ।
 असन्मृगयते किञ्चित् स मुहान् कालचोदितः ॥ १९ ॥

A person whose vision is fixed and directed upwards, who searches for his hands and fingers which are placed in

front of his eyes and smiles while doing so, succumbs to death immediately.

If because of hallucination, a person gropes for a non-existent thing in the beds, seats, limbs of the body, wooden blocks or walls, he is as good as dead.] 18-19]

अहास्यहासी संमहान् प्रलेदि दशनच्छदौ ।
शीतपादकरोच्छासो यो नरो न स जीवति ॥ २० ॥
आह्वयस्तं समोपस्थं स्वजनं जनमेव वा ।
महामोहावृतमनाः पश्यन्नपि न पश्यति ॥ २१ ॥

A person, who out of delusion laughs in circumstances where there is no cause for laughter, who licks his lips and whose feet, hands and breathing are cold does not survive.

A person with his mind shrouded with great delusion (indicative of immediate death) does not see things even though his eyes are unaffected and calls out for his relatives and other people who are actually standing nearly in the range of his visual field. [20-21]

अयोगमतियोगं वा शरोरे मतिमान् भिषक् ।
खादीनां युगपद्मूषा भेषजं नावचारयेत् ॥ २२ ॥

Persons who are unable to have perception of the objects of senses which are existent and simultaneously having perception of the objects of senses which are non-existent, should not be treated. [22]

अतिप्रबृद्धया रोगाणां मनसश्च बलक्षयात् ।
वासमुत्सृजति क्षिप्रं शरोरी देहसंक्षकम् ॥ २३ ॥
वर्णस्वरावश्चिवलं चागिन्द्रियमनोबलम् ।
हीयते उसुक्षये निद्रा नित्या भवति वा न वा ॥ २४ ॥

Excessive aggravation of the disease and diminution of will-power results in the departure of the Soul from His physical abode. When the span of life comes to an end there is diminution of complexion, voice as well as the power of digestion, speech, senses and the mind and the person either sleeps always or does not get sleep at all. [23-24]

भिषग्भेषजपानान्नगुरुमित्रद्विषश्च ये ।
वशगाः सर्वं एवैते बोद्धव्याः समवर्तिनः ॥ २५ ॥

एतेषु रोगः क्रमते भेषजं प्रतिहन्ते ।
नैषामन्नानि भुजीत न चोदकमपि स्पृशेत् ॥ २६ ॥

Person having aversion for physicians, medicine, drinks, preceptors and friends should be considered as already under the grip of the “God of Death”.

Diseases of these persons progress continuously and medicines do not produce any effect on them. One should never take food from them, nor touch water offered by them. [25-26]

Some scholars hold the view that the signs described in the verse— 25 are indicative of timely death and include under this category all the signs of imminent death described earlier and those that will be described later.

One should not take food and drinks offered by them because they are impure in nature.

पादाः समेताश्वत्वाः संपन्नाः साधकैर्गुणैः ।
व्यर्था गतायुषो द्रव्यं विना नास्ति गुणोदयः ॥ २७ ॥

The four factors essential for the treatment, viz. the physician, the drug, the attendant and the patient along with their excellent attributes are of no avail in the cases where the span of life has come to an end. Without *dravya* or cause i.e. life span there is no possibility of the manifestation of the the *guna* or effect i. e. cure from the disease. [27]

The four factors of treatment and their attributes are described in the ninth chapter of *Sūtra* Section.

परीक्ष्यमायुभिषजा नीरुजस्यातुरस्य च ।
आयुर्ब्रानिफलं कृत्वा मायुर्ब्लै व्यनुवर्तते ॥ २८ ॥

The physician should examine the span of life of healthy person as well as patients because the entire treatment is dependent upon this knowledge. [28]

Definition of “arīṣṭa” :

तत्र स्थोकः—

क्रियापथमतिक्रान्ताः केवलं देहमासुताः ।
चिह्नं कुर्वन्ति यदोषास्तदरिष्टं निरुच्यते ॥ २९ ॥

To sum up :

Signs produced by the vitiated *doṣas* which have transcended the sphere of treatment and pervaded all over the body, are known as *arīṣṭas* (signs of imminent death). [29]

The definition of *ariṣṭa* (signs of imminent death) furnished here is not all comprehensive and is related only to the body of the individual. This does not comprehend *ariṣṭas* as indicated by various characteristics features of messenger etc.

An all comprehensive definition is indicated by the term “*indriya*” which has been explained in the commentary on *Indriya*, 1 : 1.

It has earlier been stated that *ariṣṭas* have no causative factors. In the present verse, they are stated to be caused by the vitiated *dosas*. There appears to be a contradiction in these two statements. It is not correct to say that *ariṣṭas* have no causative factors. Sometimes they are visible and some other times they are not. Even though it may not be possible to appreciate the distant cause of *ariṣṭa* like the use of ununctuous substance etc; the impending death by virtue of its specific features vitiate *dosas* to manifest these *ariṣṭas* and with this in view their causative factors are described here which is relevant and therefore there is no contradiction with the earlier statements.

इत्यग्निवेशकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थानेऽणुज्योतीयमिन्द्रियं
नामैकादशोऽध्यायः ॥ ११ ॥

Thus ends the eleventh chapter on the “Imminent Death as Indicated by Signs like Diminution of Bodily Heat” of *Indriya* Section of Agniveśa’s work as redacted by Caraka.

CHAPTER XII

द्वादशोऽध्यायः

अथातो गोमयचूर्णीयमिन्द्रिय व्याख्यास्यामः ॥ १ ॥
इति ह स्माह भगवानात्रेयः ॥ २ ॥

We shall now expound the chapter on “Imminent Death as indicated by signs like the appearance of a Substance resembling Cow dung powder in the Head.”

Thus said Lord Ātreya. [1-2]

Signs of imminent death :

यस्य गोमयचूर्णामि चूर्ण मूर्धनि जायते ।
सम्भेहं भ्रश्यते चैव मासान्तं तस्य जीवितम् ॥ ३ ॥
निकषश्चिव यः पादौ च्युतांसः परिघ्रावति ।
विकृत्या न स लोकेऽस्मश्चिरं वसति मानवः ॥ ४ ॥
यस्य स्नातानुलिपस्य पूर्वं शुच्यत्युरो भृशम् ।
आद्रेषु सर्वगात्रेषु सोऽर्धमासं न जीवति ॥ ५ ॥
यमुद्दिश्यातुरं वैद्यः संवर्तयितुमौषधम् ।
यतमानो न शक्नोति दुर्लभं तस्य जीवितम् ॥ ६ ॥
विश्वातं बहुशः सिङ्गं विधिवच्छावचारितम् ।
न सिद्ध्यत्यौषधं यस्य नास्ति तस्य चिकित्सितम् ॥ ७ ॥
आहारसूपयुज्ञानो भिषजा सूपकल्पितम् ।
यः फलं तस्य नाम्नोति दुर्लभं तस्य जीवितम् ॥ ८ ॥

If an unctuous powder resembling that of cow dung appears in and falls down from the head, the patient may live for one month only.

Morbid conditions like the rubbing of legs on the ground and drooping of the shoulders of an individual while running, indicate his imminent death.

If after bath or application of unction, the chest gets dried up while the rest of the body remains wet, the individual does not live for more than a fort-night.

If the physician is very keen to administer a therapy to the patient, but does not succeed in doing so, such a patient hardly survives.

If a drug which is wellknown for its therapeutic effects, which is successfully tried in many other cases and which is administered according to the prescriptions in the scriptures, fails to produce the desired effect on a particular patient, he should be considered as beyond treatment.

If the diet properly administered to a patient does not produce the desired effect, the patient succumbs to death.[3-8]

The eighth verse of this chapter and the 23rd verse of the seventh chapter of this section appear to be similar in meaning. But the former is presented in the context of a healthy person whereas the latter is in the context of a patient.

Characteristic features of messenger :

दूताधिकारे वक्ष्यामो लक्षणानि सुमूर्षताम् ।
 यानि दृष्टा भिषक् प्राणः प्रत्याख्यायादसंयमम् ॥ ९ ॥
 मुक्तकेशोऽथवा नग्ने रुदत्यप्रयत्नेऽथवा ।
 भिषगभ्यागतं दृष्टा दूतं मरणमादिशेत् ॥ १० ॥
 सुसे भिषजि ये दूताश्छिन्दत्यपि च भिन्दति ।
 आगच्छन्ति भिषक् तेषां न भर्तारमनुब्रजेत् ॥ ११ ॥
 जुहत्यांश्च तथा पिण्डान् पितृभ्यो निर्वपत्यपि ।
 वैद्ये दूता य आयान्ति ते घन्ति प्रजिघांसवः ॥ १२ ॥
 कथयत्यप्रशस्तानि चिन्तयत्यथवा पुनः ।
 वैद्ये दूता मनुष्याणामागच्छन्ति सुमूर्षताम् ॥ १३ ॥
 मृतदग्धविनष्टानि भजति व्याहरत्यपि ।
 अप्रशस्तानि चान्यानि वैद्ये दूता सुमूर्षताम् ॥ १४ ॥
 विकारसामान्यगुणे देशे कालेऽथवा भिषक् ।
 दूतमभ्यागतं दृष्टा नातुरं तमुपाचरेत् ॥ १५ ॥
 दीनभीतदुतत्रस्तमलिनमसर्तीं छ्रियम् ।
 त्रीन् व्याकृतीश्च पण्डांश्च दूतान् विद्यान्मनूर्षताम् ॥ १६ ॥
 अङ्गव्यसनिनं दूतं लिङ्गिनं व्याधितं तथा ।
 संप्रेक्ष्य चोग्रकर्माणं न वैद्यो गन्तुर्महति ॥ १७ ॥
 आतुरार्थमनुप्राप्तं खरोपूरथवाहनम् ।
 दूतं दृष्टा भिषग्विद्यादातुरस्य पराभवम् ॥ १८ ॥
 पलालबुसमांसास्थिकेशलोमनखद्विजान् ।
 मार्जनीं सुसलं शूर्पमुपानश्चर्म विच्छयतम् ॥ १९ ॥
 तृणकाष्ठतुषाङ्गारं स्पृशन्तो लोष्टमश्म च ।
 तत्पूर्वदर्शने दूता व्याहरन्ति सुमूर्षताम् ॥ २० ॥

यस्मिन्दूते ब्रुवति वाक्यमातुरसंश्रयम् ।
पश्येन्निमित्तमशुभं तं च नानुवजेऽद्विषक् ॥ २१ ॥
तथा व्यसनिनं प्रेतं प्रेतालङ्कारमेव वा ।
भिन्नं दग्धं विनष्टं वा तद्वादीनि वचांसि वा ॥ २२ ॥
रसो वा कदुकस्तीव्रो गन्धो वा कौणपो महान् ।
स्पर्शो वा विपुलः क्रूरो यद्वाऽन्यदशुभं भवेत् ॥ २३ ॥
तत्पूर्वमभितो वाक्यं वाक्यकालेऽथवा पुनः ।
दूतानां व्याहृतं श्रुत्वा धीरो मरणमादिशेत् ॥ २४ ॥
इति दूताधिकारोऽयमुक्तः कृत्स्नो मुमूर्षताम् ।

Now we shall explain the signs of imminent death as indicated by characteristic features of the messenger who comes to take the physician to the patient's house. If such signs are observed, the wise physician should unhesitatingly refuse treatment.

If the messenger arrives at the physician's house when the latter is dishevelled, naked, crying or unclean, the patient should be considered as moribund.

If the messenger arrives at the physician's house when the latter is asleep or cutting or splitting something, the physician should not accompany him to the patient.

If the messenger arrives at the physician's house while the latter is offering oblations to the fire or *pinda* (balls of food) to the manes, then the patient for whom the messenger was sent succumbs to death.

If the messenger comes to the physician's house when the latter is speaking or thinking of inauspicious things the patient by whom the messenger was sent should be considered as moribund.

If the messenger arrives while the physician is thinking or speaking of dead, burnt or destroyed things or such other inauspicious substances, the patient should be considered as moribund.

If the messenger arrives at the physician's house or place which have attributes similar to those of the disease from which the patient is suffering, he should be considered as moribund.

If the patient is suffering from *rakta-pitta* (a condition characterised by bleeding from various parts of the body) and the messenger sent by him arrives at the physician's house

when fire is burning nearby (*desa*) or during mid-day (*kāla*), both of which have attributes similar to those of *rakta-pitta*, the patient is sure to die.

If the messenger is in a miserable condition, frightened, hurried, terrified and unclean or if the messenger happens to be a woman who is without chastity or if they are three in number or if he has deformed organs or if the messenger is an eunuch, the patient for whom such a messenger is sent is to be considered as moribund.

If the messenger is deficient in any organ of his body, if he is an ascetic or himself suffering from diseases or if he indulges in cruel activities, the physician should not attend the patient for whom such a messenger has come.

If the messenger comes in a vehicle carried by a donkey or camel, the patient by whom he has been sent succumbs to death.

When the physician sees the messenger for the first time, if the latter, be touching either straw, chaff, flesh, bone, hair of the head, *loman* (small hair of the body), nails, teeth, broom, *musala* (rod meant for pounding grains), *sūrpa* (tray for winnowing), leather pieces from shoes, grass, wood pieces, husk, charcoal, *loṣṭha* (clod of earth), or stone, the patient for whom he is sent should be considered as moribund.

If the physician sees bad omens while the messenger describes the condition of the patient, he should not accompany such a messenger to the patient's house, i. e. such an incident indicates imminent death of the patient. Similarly if the physician comes across a sorrowful person, dead body or *pretalaṅkāra* (adornments of dead persons), he should not attend the patient.

If the physician comes across the vision of something cut, burnt and destroyed or the sound of statements describing such incidents, or tastes which are acute and pungent, or smell which is exceedingly stinky like that of a corpse, or touch of things which are exceedingly harsh or such other sensory objects which are considered inauspicious, immediately before or during the receipt of the message or after hearing the call of the messenger, the patient for whom the messenger is sent should be considered as nearing death.

Thus, all about the signs of imminent death as indicated by the characteristic features of the messenger who comes from the patient's house to the physician is described. [9-25]

Incidents in physician's way to patient's house :

पथ्यातुरकुलानां च वक्ष्याम्यौत्पातिकं पुनः ॥ २५ ॥
 अवश्रुतमयोत्पुष्टं स्खलनं पतनं तथा ।
 आकोशः संप्रहारो व ग्रतिषेधो विगर्हणम् ॥ २६ ॥
 वस्त्रोष्णीषोत्तरासङ्गश्छत्रोपानद्युगाश्रयम् ।
 व्यसनं दर्शनं चापि मृतव्यसनिनां तथा ॥ २७ ॥
 चैत्यध्वजपताकानां पूर्णानां पतनानि च ।
 हतानिष्ठप्रवादाश्च दूषणं भस्मपांशुभिः ॥ २८ ॥
 पथच्छेदो बिडालेन शुना सर्पेण वा पुनः ।
 मृगद्विजानां क्रूराणां गिरो दीप्तां दिशं प्रति ॥ २९ ॥
 शयनासनयानानामुत्तानानां च दर्शनम् ।
 इत्येतान्यप्रशस्तानि सर्वाण्याहुर्मनोषिणः ॥ ३० ॥
 एतानि पथि वैद्येन पश्यताऽतुरवेशमनि ।
 शृणवता च न गन्तव्यं तदगारं विषश्चिता ॥ ३१ ॥
 इत्यौत्पातिकमास्यातं पथि वैद्यविगर्हितम् ।

Now we shall discuss the signs of imminent death as indicated by the characteristic features of incidents in the physicians' way to the patient's house or at the time of arrival at his (patient's) house.

Sneezing, crying out of fear, stumbling, falling, *akrośa* (crying out of disappointment), beating, *pratisedha* (prevention from going), reviling, attachment cloth, turban and upper garment in a thorny plant, tearing of the cloth of the umbrella or of the pair of shoes, vision of dead persons, or persons having deformity of organs, falling of *caitya* (religious Fig tree), flag staff, flag or *pūrṇakumbha* (pitcher full of water), arrival of information regarding death or other inauspicious things, pollution by ashes or dust, *pathaccheda* (crossing of the road in front of the physician) by cat, dog or snake, cries of cruel animals like jackals and vultures from the direction of *dīpta* (in which sun is present or south), vision of beds, seats, vessels which are turned upside down—all these are considered to be inauspicious by the wise.

A wise physician who comes across them or hears about them in his way to the patient's house or at the time arrival at his (patient's) house should not proceed further (to the patient's house).

Thus the signs of imminent death as indicated by the characteristic features of the incidents on the physician's way to the patient's house are described. The physician should avoid treating the patient in such situations. [25-31]

Incidents while entering and inside the patient's house :

इमामपि च बुध्येत गृहावस्थां सुमूर्षताम् ॥ ३२ ॥
 प्रवेशो पूर्णकुम्भास्त्रिमृद्धोजफलसंपिणाम् ।
 ब्रुषब्राह्मणरक्तान्नदेवतानां च निर्गतिम् ॥ ३३ ॥
 अग्निपूर्णानि पात्राणि भिन्नानि विशिखानि च ।
 मिषड् सुमूर्षतां वेश्म प्रविशन्नेव पश्यति ॥ ३४ ॥
 छिन्नभिन्नानि दग्धानि भग्नानि मृदितानि च ।
 दुर्बलानि च सेवन्ते मुमूर्षोऽवेश्मिका जनाः ॥ ३५ ॥
 शयनं वसनं यानं गमनं भोजनं रुतम् ।
 श्रूयते उमझलं यस्य नास्ति तस्य चिकित्सितम् ॥ ३६ ॥
 शयनं वसनं यानमन्यं वाऽपि परिच्छदम् ।
 प्रेतवद्यस्य कुर्वन्ति सुहृदः प्रेत एव सः ॥ ३७ ॥
 अन्नं व्यापद्यते उत्थर्यं ज्योतिश्चैवोपशाम्यति ।
 निवाते सेन्धनं यस्य तस्य नास्ति चिकित्सितम् ॥ ३८ ॥
 आतुरस्य गृहे यस्य भिद्यन्ते वा पतन्ति वा ।
 अतिमात्रममत्राणि दुर्लभं तस्य जीवितम् ॥ ३९ ॥

The characteristic features of the house of the moribund patient are as follows :

At the time of entrance into the house of the moribund patient, the physician will observe the existence of *purnakumbha* (pitcher full of water), fire, earth, seeds, fruit, ghee, a bull, a brahmin, precious stones, prepared food and (idols of) the gods.

Inside such a patient's house he may see the vessels full of fire which are either broken or with the flame extinguished.

Things that are broken, cracked, burnt, split or crushed are used by important persons residing in the house of the patient who is moribund.

The patient whose bed, cloth, vehicle, gait, food and voice bears inauspiciousness should not be treated.

If the relatives of the patient arrange for his bed, cloth, vehicle and other apparel which are befitting for dead bodies, then the patient should be considered as already dead.

If the food for a patient becomes exceedingly rotten and the fire for him gets extinguished even it is supplied with fuel in adequate quantity and there is no wind, then no treatment will succeed in curing the patient.

If saucers and plates often fall down and get broken in the house of a patient then his life can hardly be saved.[32-39]

Need and scope of repetition :

भवन्ति चात्र—

यदुद्वादशभिरध्यायैर्व्यासतः परिकीर्तितम् ।

मुरूषंतां मनुष्याणां लक्षणं जीवितान्तकृत् ॥ ४० ॥

तत् समासेन वक्ष्यामः पर्यायान्तरमाश्रितम् ।

पर्यायवचनं हर्थविश्वानायोपपद्यते ॥ ४१ ॥

अत्यर्थं पुनरेवेयं विवक्षा नो विधीयते ।

तस्मिन्ब्रेवाधिकरणे यत् पूर्वमभिशब्दितम् ॥ ४२ ॥

Thus it is said :

Signs of imminent death of moribund persons described in detail in these twelve chapters will now be described in brief in a different way which will elucidate their inherent meaning.

It is ofcourse not the intention to go into the subject again in detail because such details are already described in the respective chapters. [40-42]

Certain words carry different meanings in different contexts. It may not always be possible to clearly understand them. Therefore, they are described here again of course in a different way with a view to elucidate their inherent meaning.

Signs of impending death :

वसतां चरमं कालं शरीरेषु शरीरिणाम् ।

अभ्युग्राणां विनाशायु देहेभ्यः प्रविवत्सताम् ॥ ४३ ॥

इष्टांस्तितिक्षतां ग्राणान् कान्तं वासं जिहासताम् ।

तन्त्रयन्त्रेषु भिन्नेषु तमोऽन्त्यं प्रविविक्षताम् ॥ ४४ ॥

विनाशायेह रूपाणि यान्यवस्थान्तराणि च ।

भवन्ति तानि वक्ष्यामि यथोद्देशं यथागमम् ॥ ४५ ॥

प्राणाः समुपत्पन्ते विज्ञानसुपरुद्धते ।
 वमन्ति बलमङ्गानि चेष्टा व्युपरमन्ति च ॥ ४६ ॥
 इन्द्रियाणि विनश्यन्ति खिलोभवति चेतना ।
 औत्सुक्यं भजते सत्त्वं चेतो भीराविशात्यपि ॥ ४७ ॥
 स्मृतिस्त्यजति मेधा च हीश्चियो चापसर्पतः ।
 उपस्थिते पाप्मान ओजस्तेजश्च नश्यति ॥ ४८ ॥
 शीलं व्यावर्तते उत्यर्थं भक्तिश्च परिवर्तते ।
 विक्रियन्ते प्रतिच्छायाश्छायाश्च विकृतिं प्रति ॥ ४९ ॥
 शुक्रं प्रच्यवते स्थानादुन्मार्गं भजते उनिलः ।
 क्षयं मांसानि गच्छन्ति गच्छत्यसुगापि क्षयम् ॥ ५० ॥
 ऊर्ध्माणः प्रलयं यान्ति विश्लेषं यान्ति सन्धयः ।
 गन्धा विकृतिमायान्ति भेदं वर्णस्वरौ तथा ॥ ५१ ॥
 वैवर्ण्यं भजते कायः कायच्छिद्रं विशुद्धति ।
 धूमः संजायते मूढिं दाहणाख्यश्च चूर्णकः ॥ ५२ ॥
 सततस्पन्दना देशाः शरीरे येऽमिलक्षिताः ।
 ते स्तम्भानुगताः सर्वे न चलन्ति कथंचन ॥ ५३ ॥
 गुणाः शरीरदेशानां शीतोष्णसृदुदारुणाः ।
 विपर्यासेन वर्तन्ते स्थानेष्वन्येषु तद्विधाः ॥ ५४ ॥
 न खेषु जायते पुण्यं पङ्को दन्तेषु जायते ।
 जटाः पक्षमसु जायन्ते सीमन्ताश्चापि मूर्धनि ॥ ५५ ॥
 भेषजानि न संवृत्तिं प्राप्नुवन्ति यथाखचि ।
 यानि चाप्युपपद्यन्ते तेषां वीर्यं न सिद्ध्यति ॥ ५६ ॥
 नानाप्रकृतयः क्रूरा विकारा विविधौषधाः ।
 क्षिप्रं समभिवर्तन्ते प्रतिहत्य बलौजसी ॥ ५७ ॥
 शब्दः स्पर्शो रसो रूपं गन्धश्चेष्टा विचिन्तितम् ।
 उत्पद्यन्ते उशुभान्येव प्रतिकर्मप्रवृत्तिषु ॥ ५८ ॥
 दृश्यन्ते दारुणाः स्वप्ना दौरात्म्यमुपजायते ।
 प्रेष्याः प्रतीपतां यान्ति प्रेताकृतिरुदीर्यते ॥ ५९ ॥
 प्रकृतिर्हीर्यते उत्यर्थं विकृतिश्चाभिवर्धते ।
 कृत्स्नमौत्पातिकं घोरमरि(नि)ष्टमुपलक्ष्यते ॥ ६० ॥
 इत्येतानि मनुष्याणां भवन्ति विनशिष्यताम् ।
 लक्षणानि यथोदेशं यान्युक्तानि यथागमम् ॥ ६१ ॥

While approaching death, the process of destruction is initiated in the body, functions of various limbs and organs of the body get dislocated. Soul desires to leave the body

and life which were liked by him earlier and migrate to another body before it succumbs to final darkness (death). As proposed earlier the signs which are manifested and the modifications which take place in the individual and his soul during this time will now be described. This is based upon the scriptural authority. They are as follows :

1. Affliction of *prāna* (vital breath);
2. clouding of understanding ;
3. drainage of strength from limbs ;
4. cessation of movements ;
5. destruction of sensory faculties;
6. impairment of consciousness;
7. restlessness in the mind;
8. affliction of the mind with fear;
9. deprivation of memory, intellect, *hṛī* (natural modesty) and *śrī* (lustre) of the body;
10. aggravation of *pāpma* (diseases caused by sinful acts);
11. destruction of *ojas* (?) and complexion;
12. radical change in the conduct;
13. change in likings;
14. perversion in the reflected image and lustre of the individual;
15. expulsion of the semen from its normal site;
16. upward movement of *vāyu*;
17. wasting of muscle tissue and blood;
18. diminution of the *uṣmas* (factors responsible for the production of heat including digestion and metabolism);
19. dislocation of joints;
20. morbid change in the smells of the body;
21. hoarseness of voice and impairment of complexion;
22. discoloration of the body,
23. dryness in the orifices of the body;
24. appearance of smoke in the head;
25. appearance of a substance like the power of cowdung in the head which is indicative of imminent death.
26. complete cessation of pulsation in the parts (organs) of the body which pulsate constantly in normal conditions;

27. manifestation of attributes of opposite nature in those parts of the body which are either cold, hot, soft or rough; and similar other features;
28. appearance of *puspa* (white spots) in nails and adherence of mud like substance in teeth;
29. matting of eye-lashes and manifestation of *simantas* (line caused by the parting of hair) in the head;
30. difficulty in obtaining the desired drugs and even if such drugs are obtained, their actions are not manifested in consonance with their potency.
31. sudden manifestation of serious diseases of diverse types and requiring different types of treatment by overpowering the strength and *ojas* (power of resistance to diseases and decay);
32. manifestation of inauspicious sound, touch, taste, vision, smell, action and thought in the physician while treating such patients;
33. appearance of cruel dreams and manifestation of evil disposition for the patient;
34. hostility of the messenger and change in complexion to that of a dead person;
35. diminution of the normal characteristic features of the body and aggravation of the morbid conditions; and
36. manifestation of all the inauspicious signs all of a sudden.

As proposed earlier, the signs of imminent death based on scriptural authority are described. [43-61]

Information on impending death to be kept secret :

मरणायेह रूपाणि पश्यताऽपि भिषग्विदा ।
 अपृष्टेन न वक्तव्यं मरणं प्रत्युपस्थितम् ॥ ६२ ॥
 पृष्टेनापि न वक्तव्यं तत्र यत्रोपघातकम् ।
 आतुरस्य भवेददुःखमयवाऽन्यस्य कस्यचित् ॥ ६३ ॥
 अब्रुवन्मरणं तस्य नैनमिच्छेच्चिकित्सतुम् ।
 यस्य पश्येद्विनाशाय लिङ्गानि कुशलो भिषक् ॥ ६४ ॥

The physician should not announce the imminence of death without being specially requested for that, even if he is aware of the onset of such bad prognostic signs. Even when specially requested, he should not say anything about the approaching death if such announcement is likely to result in the collapse of the patient or distress of others.

The wise physician should however refrain from treating patients having signs of imminent death without making announcement of the approaching death. [62-64]

Good prognostic signs should be disclosed :

लिङ्गेभ्यो मरणारूपेभ्यो विपरीतानि पश्यता ।
लिङ्गान्यारोग्यमागान्तु वक्तव्यं भिषजा ध्रुवम् ॥ ६५ ॥
दृतैरौत्पत्तिकैर्भावैः पथ्यातुरकुलाश्रयैः ।
आतुराचारशीलेष्टद्रव्यसंपत्तिलक्षणैः ॥ ६६ ॥

If the physician comes across auspicious signs of recovery of the patient as indicated by (1) characteristic features of the messenger, (2) *autpatika* (sudden manifestation of certain auspicious signs), (3) signs in the physician's way to patient's house, (4) characteristic features of the patient's residence, (5) manner and conduct of the patient and (6) availability of drugs at ease, he should make this announcement positively. [65-66]

Messengers indicating good prognosis :

स्वाचारं हष्टमव्यक्तं यशस्यं शुक्लवाससम् ।
अमुण्डमजटं दूतं जातिवेशक्रियासमम् ॥ ६७ ॥
अनुष्टुखरयानस्थमसन्ध्यास्वग्रहेषु च ।
अदारुणेषु नक्षत्रेष्वनुग्रेषु ध्रुवेषु च ॥ ६८ ॥
विना चतुर्थीं नवमीं विना रिक्तां चतुर्दशीम् ।
मध्याह्नमर्घरात्रं च भूकम्पं राहुदर्शनम् ॥ ६९ ॥
विना देशमशस्तं चाशस्तौत्पातिकलक्षणम् ।
दूतं प्रशस्तमव्यग्रं निर्दिशेदागतं भिषक् ॥ ७० ॥

The following types of messengers are to be considered as auspicious, that is, indicative of favourable prognosis :

1. who is with good conduct and pleasant behaviour;
2. who is not devoid of any organ of his body;
3. who is of repute and clad with white cloths;
4. who is not completely shaved (having a *sikha* or a tuft of hair in the crown of the head); and whose hair is not matted;
5. who is similar in caste, dress and action;

6. who has not come in a vehicle carried by camel or donkey;
7. who has not come at the time of *sandhyā* (morning or evening twilight);
8. who has come at a time when the cruel planets are not situated in the inauspicious houses of the zodiac;
9. who has come at a time when the *Uttaraphālguni*, *Uttaraśādhā*, *Uttarabhādrapadī* and *Rohini* are auspicious and on auspicious *tithis* barring 4th, 9th and 14th days of *pakṣa* (lunar fort-night);
10. who has come at a time other than the noon or midnight when there is no earthquake and when there is no eclipse;
11. who has come to a place which is not defamed and which is devoid of inauspicious characteristics; and
12. who is not perturbed. [67-70]

Ārdrā, *Jyeṣṭhā*, *Āśleṣā*, *Pūrvāphālguni*, *Pūrvāśāḍhā*, *Pūrvabhbādrapadā* and *Maghā* are considered to be inauspicious *nakṣatras*. *Uttaraphālguni*, *Uttaraśāḍhā*, *Uttarabhādrapadā* and *Rohini* are auspicious *nakṣatras*—cf. *Bṛhat-samhitā* : 98. The 4th, 9th and 14th days of *Pakṣa* (lunar fortnight) are considered to be void (*rikta*) in the sense that any work done in these days does not yield any results.

Incidents on the way or while entering patient's house indicating good prognosis :

दध्यक्षतद्विजातीनां वृषभाणां नृपस्य च ॥ ७१ ॥
रत्नानां पूर्णकुम्भानां सितस्य तुरगस्य च ।
सुरध्वजपताकानां फलानां यादवस्य च ॥ ७२ ॥
कन्यापुंवर्धमानानां बद्धस्यैकपशोस्तस्था ।
पृथिव्या उद्भृतायाश्च वह्नेः प्रज्वलितस्य च ॥ ७३ ॥
मोदकानां सुमनसां शुक्रानां चन्दनस्य च ।
मनोङ्गस्यान्नपानस्य पूर्णस्य शकटस्य च ॥ ७४ ॥
नृभिर्देव्याः सवत्साया वडवायाः खियास्तथा ।
जीवझीवकसिद्धार्थसारसप्रियवादिनाम् ॥ ७५ ॥
हंसानां शतपत्राणां चाषाणां शिखिनां तथा ।
मत्स्याजद्विजशङ्कानां प्रियङ्गनां घृतस्य च ॥ ७६ ॥
रुचकादर्शसिद्धार्थरोचनानां च दर्शनम् ।
गन्धः सुरभिर्वर्णश्च सुशुक्लो मधुरो रसः ॥ ७७ ॥

सृगपक्षिमनुष्याणां प्रशस्ताश्च गिरः शुभाः ।
 छत्रध्वजपताकानामुत्क्षेपणमभिषुतिः ॥ ७८ ॥
 भेरीमृदङ्गशङ्खानां शब्दाः पुण्याहनिस्वनाः ।
 बेदाध्ययनशब्दाश्च सुखो वायुः प्रदक्षिणः ॥ ७९ ॥
 पथि वेश्मप्रवेशो तु विद्यादारोग्यलक्षणम् ।

If while entering or on his way to patient's house, the physician comes across the following, then he can predict the recovery of the patient.

1. Curd, 2. *akṣata* (grains of intact rice, 3. *brahmaṇas*.
 4. bulls, 5. king, 6. gems, 7. pitchers full of water, 8. white horse, 9. flags and banners dedicated to Indra, 10. fruits, 11. grains of barley, 12. boys and girls seated on the lap (or boys, girls and earthen plate), 13. an animal of good breed tied to a rope, 14. cultivated land, 15. kindled fire, 16. sweets, 17. white coloured flower, 18. sandle paste, 19. delicious food articles and drinks, 20. a cart fully loaded with human beings, 21. a cow together with a calf, 22. a mare with her calf, 23. a woman with her child, 24. *cakora* (cukor), 25. *siddhārtha* (?) 26. *srāsasa* (crane), 27. *oṭṭaka* (sparrow), 28. swan, 29. *śatapatra* (parrot), 30. *cāsa* (blue joy), 31. peacock, 32. fish, 33. goat, 34. elephant tusk, 35. *priyangu* (*Callicarpa macrophylla Vahl*), 36. ghee, 37. *rucaka* (ornaments of horses), 38. mirror, 39. white mustard, 40. *gorocana* (bile of cow) 41. fragrance, 42. white complexion, 43. sweet taste, 44. sweet and auspicious voices of animals, birds and human beings, 45. unfolding of umbrellas, flags and banners, 46. prayers, 47. sound of cattle drums, drums and conches, 48. *pūṇyāha* (auspicious sounds), 49. sounds of vedic recitations and soothing wind from the South direction. [71-80]

Signs of good prognosis :

मङ्गलाचारसंपन्नः सातुरो वक्षिमको जनः ॥ ८० ॥
 श्रहधानोऽनुकूलश्च प्रभूतद्रव्यसंग्रहः ।
 धनैश्वर्यसुखावासिरिष्टलाभः सुखेन च ॥ ८१ ॥
 द्रव्याणां तत्र योग्यानां योजना सिद्धिरेव च ।
 गृहप्रासादशैलानां नागानामृषभस्य च ॥ ८२ ॥
 हृयानां पुरुषाणां च स्वप्ने समधिरोहणम् ।
 सोमाकर्णस्त्रिद्विजातीनां गवां नणां पर्यस्विनाम् ॥ ८३ ॥

अर्णवानां प्रतरणं वृद्धिः संबाधनिःसृतिः ।
 स्वप्रे देवैः सपितृभिः प्रसन्नैश्चाभिमाषणम् ॥ ८४ ॥
 दर्शनं शुक्रवर्णाणां हृदस्य विमलस्य च ।
 मांसमत्स्यविषामेध्यच्छ्रुत्रादर्शपरिग्रहः ॥ ८५ ॥
 स्वप्रे सुमनसां चैव शुक्रानां दर्शनं शुभम् ।
 अश्वगोरथयानं च यानं पूर्वोत्तरेण च ।
 रोदनं पतितोत्थानं द्विषतां चावर्मदनम् ॥ ८६ ॥

The following are the auspicious signs indicative of a sure success in the treatment of a patient :—

1. Engagement in auspicious acts, faithfulness and favourable disposition of the patient and his kinsmen;
2. collection of adequate funds and other accessories;
3. attainment of wealth, power and happiness;
4. easy access to desirable objects;
5. easy availability of drugs; and favourable effect of these drugs when administered, and
6. dreams like (a) climbing on house roof, palace, hill, elephant, bull, horse and human being; (b) vision of the moon, the sun, fire, *brāhmaṇa*, cow and man of repute, (c) swimming in the ocean; (d) improvement of health, (e) end of sufferings, (f) dialogue with the gods and forefathers in their pleasing mood; (g) vision of white garments and a clean lake (h) intake of meat, fish, poison and *amedhya* (unclean) objects; (i) use of umbrella and mirror; (j) vision of white flowers; (k) riding of horses, bulls and chariots and moving towards the north-east; (l) weeping; (m) rising after fall and (n) subjugation of enemies. [80-86]

The reading “*nīnām payavinām*” in the verse—83 is dubious. One cannot think of “men full of milk.” It seems “*yasavinām*” in the place of “*payavinām*” represents the correct reading. So it is men of repute and not men full of milk who are meant in this context.

सत्त्वलक्षणसंयोगो भक्तिवैद्यद्विजातिषु ।
 साध्यत्वं न च निर्वेदस्तदारोग्यस्य लक्षणम् ॥ ८७ ॥
 आरोग्याद्वलमायुष्म सुखं च लभते महत् ।
 इष्टांश्चाप्यपरान् भावान् पुरुषः शुभलक्षणः ॥ ८८ ॥



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Moreover appearance of noble qualities, faithful devotion to physicians and *brāhmaṇa*, subjective feeling of curability of diseases, freedom from anxiety constitute the signs and symptoms of quick recovery from illness. A man of auspicious characteristics attains strength, longevity, happiness and other desirable objects only when he possesses good health. [87-88]

तत्र श्लोकौ—

उक्तं गोमयचूर्णीये मरणारोग्यलक्षणम् ।
दूतस्वप्नातुरोत्पातयुक्तिसिद्धिव्यपाश्रयम् ॥ ८९ ॥

To sum up :

In this chapter on “Imminent death as indicated by signs like the appearance of substance resembling cowdung powder in the head”, signs and symptoms of imminent death and quick recovery, messengers, dreams, conditions of the patient, accidental happenings, reasoning and accomplishments of success are described. [89]

Utility of the knowledge :

इतीवमुक्तं प्रकृतं यथातथं तदन्वेष्यं सततं भिषग्विदा ।
यथा हि सिद्धिच यशश्च शाश्वतं स सिद्धकर्मा लभते धनानि च ॥९०॥

Signs and symptoms described in this chapter should always be properly studied by the physician. It is only then that a physician can attain success, fame and wealth as well as accomplishment through treatment. [90]

इत्यग्निवेशाकृते तत्रे चरकप्रतिसंस्कृते इन्द्रियस्थाने गोमयचूर्णीयमिन्द्रियं
नाम द्वादशोऽध्यायः ॥ १२ ॥

Thus ends the 12th Chapter on “Imminent death as indicated by signs like the appearance of a substance resembling cow-dung powder in the head” of the *Indriya* Section of Agniveśa’s work as redacted by Caraka.