

Charaka Samhita - Volume 4

Ayurveda

This document contains Ayurvedic knowledge from Charaka Samhita. Charaka Samhita is Ayurveda's Core Text.

This is Volume 4 from the total of 6 Volumes.

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Indriya Sthana

Preamble of Indriya Sthana(Section on assessment of lifespan of patients)

Indriya sthana deals with study of specific signs related to prana (vital life force) perceived by sense organs.

Fundamental principles

Indriya Sthana deals with the observation of signs predicting lifespan and signs indicative of reduced duration of remaining life (also called *arishta lakshana*). The word Indriya literally means organ, sense, force, vigor.¹. In the present context, it means prana or vital life force. [Chakrapani on Cha.Sa.Indriya Sthana 1/1-2] The seat of prana in the body is sneha or ojas. Indriya (sense organs) are said to be the *linga* (organs) of prana. An important concept discussed in this section is termed *Indriyadushti* (damage to the sensory system). A state of perfect health is life without any indication or perception of being alive (*Anirvedovarta Lakshanam*).[Cha.Sa. Sutra Sthana 25/40]

Logical sequencing of chapters

Life begins with the association of consciousness, or the atma, with the five fundamental elements (panchamahabhuta) and ends in the dissolution of this association. Since this union (that results in a living being) is by no means permanent and since there is always a possibility of dissolution or death anytime, Ayurvedic texts emphasize on identifying certain signs and symptoms that could forebear, with some level of certainty, imminent death. This section is dedicated to such determinants and is structured in the form of 12 chapters.

Glimpses of Chapters

- Signs and symptoms (arishta) of imminent death can be perceived by specific changes in sensory system (e.g., varna (color), swara (voice), gandha (smell), rasa (taste), sparsha(touch), along with chhaya (complexion) and prabha (radiance)) are addressed in chapters 1,2,3,4,7 and 9.
- Clinically useful early warning signs have been mentioned in Purvarupeeyya.
- Chapters 6, 8, 10, 11,12, give examples of arishta that could be perceived on the physical level (or, are *Bahyakarana*) as well as on the mental, intellectual, and emotional levels (or, afflicting the *Antahkarana*), with references to *shakun*(good / bad consequential happening)), doota(messenger), swapna (dreams) and miscellaneous occult sciences. The evidences laid down in these chapters may establish an Ayurveda-based clinical diagnostic methodology.

¹ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Scope and Importance

Even though all of the determinants (i.e., signs and symptoms) cannot be explained by rational scientific parameters (as evident by the references above to paranormal and occult sciences), some of these signs and symptoms have been documented and reported as having been experienced by people in various parts of the world ref. Within the treatise Charak Samhita, physicians are instructed to thoroughly examine the patient for certain signs that indicate terminal illness and investigate using biomarkers. The treatise then advises physicians to stop any therapeutic treatment being given to such terminal patients and provide them palliative care instead. In the present era, with advancements in medical sciences, many arishta lakshana are well treatable and cannot be considered as “predictors” of death as they used to even a few centuries back. However, these signs and symptoms could serve as important indicators of prognosis of disease and therefore, would be helpful in prompt management to save life of patients.

Researches

The following research works have been carried out on study of Indriya Sthana as observed in the directory of researches ²

1. Sharma V.K.Charakokta Indriya Sthana Ka Pratisanskara Swarupatmaka Vishleshna.Ph. D.Thesis.Rajasthan Ayurved University,Jodhpur.2011
2. Radhika.S .A Study On Indriya Sthana Of Charaka Samhita.Siddhanta And Darshan.Alva's Ayurvedic Medical College, Moodbidri .2015
3. Anurag Vats.A Critical Study Of Indriya Sthana From Charak Samita . Samhita . Bharti Vidyapeeth's University, College of Ayurved, Pune, Maharashtra.2006.

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² Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Varnasvariym Indriyam Adhyaya

Indriya Sthana Chapter 1.Fatal signs in complexion and voice Abstract

The chapter Varnasvariym Indriyam Adhyaya is about arishta lakshana (near death signs) perceived by auditory and visual senses. Swara (Voice) is an audible feature, whereas color and complexion are visual features. Sudden change in frequency, rhythm, resonance, tone, the pitch of voice and complexion of the body is indicative of serious pathology of the body. The characteristic features of arishta are described in the chapter. **Keywords:** arishta, fatal signs, near death signs, change in voice, change in complexion.

Introduction

Charak has placed Indriya Sthana (section about near death signs) before Chikitsa Sthana (section about the treatment of diseases) possibly, to guide physician when not to treat a patient. In this chapter of Indriya Sthana, Varnasvariym Indriyam Adhyaya, Charak mentions near death signs and symptoms that can be directly observed by visual and other faculties. This chapter also describes *prakriti*, the natural disposition of an individual, and *vikriti*, or abnormalities , since such knowledge helps in discerning any sign of *vikriti* in a “healthy” individual. Three types of morbid conditions are observed namely, *lakshana nimitta*, caused by bodily marks, *lakshya nimitta*, caused by etiological factors which disturb the health, and *nimitta anuroopa vikriti*, a break down for no apparent reason resembling etiological factors. The chapter describes various near death signs with changes in color, the complexion of body parts and voice.

Sanskrit text, Transliteration and English Translation

अथातोवर्णस्वरीयमिन्द्रियंव्याख्यास्यामः॥१॥ इति ह स्माह भगवानात्रेयः॥२॥

athātōvarṇasvariyamindriyamvyākhyāsyāmahaḥ||1|| itihasmāhabhagavānātrēyah||2||
athAto varNasvarlyamindriyaM vyAkhyAsyAmaH||1|| iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Varnasvariym Indriyam” (Fatal signs in complexion and voice). Thus said Lord Atreya.[1-2]

Note: This chapter deals with normal and abnormal color, complexion and voice in a person which especially relies on two “indriya” –visual and auditory faculty.

Factors for assessment of residual span of life

इह खलु वर्णश्च स्वरश्च गन्धश्च रसश्च स्पर्शश्च चक्षुश्च श्रोत्रं च घ्राणं च रसनं च स्पर्शनं च सत्त्वं च
भक्तिश्च शौचं च शीलं चाचारश्च स्मृतिश्चाकृतिश्च प्रकृतिश्च विकृतिश्च बलं च ग्लानिश्च मेधा च हर्षश्च
रौक्ष्यं च स्नेहश्च तन्द्रा चारम्भश्च गौरवं चलाघवं च गुणाश्चाहारश्च
विहारश्चाहारपरिणामश्चोपायश्चापायश्च व्याधिश्च व्याधिपूर्वरूपं च वेदनाश्चोपद्रवाश्च च्छाया
चप्रतिच्छाया च स्वप्नदर्शनं च दूताधिकारश्च पथि चौत्पातिकं चातुरकुले भावावस्थान्तराणि च

भेषजसंवृत्तिश्च भेषजविकारयुक्तिश्चेति परीक्ष्याणि प्रत्यक्षानुमानोपदेशैरायुषः प्रमाणावशेषं
जिज्ञासमानेन भिषजा॥३॥

iha khalu varṇaśca svaraśca gandhaśca rasaśca sparśaśca cakṣuśca śrōtrāṁ ca
ghrāṇāṁ ca rasanaṁ casparśanāṁ ca sattvaṁ ca bhaktiśca śaucarāṁ ca śīlāṁ
cācāraśca smṛtiścākṛtiśca prakṛtiśca vikṛtiśca balaṁ caglāniśca mēdhā ca harṣaśca
raukṣyaṁ ca snēhaśca tandrā cārambhaśca gauravaṁ ca lāghavaṁ caguṇāścāhāraśca
vihāraścāhārapariṇāmaścōpāyaścāpāyaśca vyādhiśca vyādhipūrvavarūpaṁ
cavēdanāścōpadravāśca cchāyā ca praticchāyā ca svapnadarśanaṁ ca dūtādhikāraśca
pathi cautpātikāmcāturakulē bhāvāvasthāntarāṇi ca bhēṣajasamvṛttiśca
bhēṣajavikārayuktiścēti parīkṣyāṇipratyakṣānumānōpadēśairāyuṣah pramāṇāvaśēṣaṁ
jijñāsamānēna bhiṣajā॥३॥

iha khalu varNashca svarashca gandhashcā rasashca sparshashcā cakShushcā
shrotraM ca ghrANaM carasanaM ca sparshanaM ca sattvaM ca bhaktishcā shaucaM
ca shllaM cAcArashcā smRutishcAkRutishcaprakRutishcā vikRutishcā balaM ca
gIAnishcā medhA ca harShashcā raukShyaM ca snehashcā tandrAcArambhashcā
gauravaM ca lAghavaM ca
guNAshcAhArashcavihArashcAhArapariNAmashcopAyashcApAyashcā vyAdhishcā
vyAdhipUrvarUpaM cavedanAshcopadravAshcā cchAyA ca praticchAyA ca
svapnadarshanaM ca dUtAdhikArashcā pathicautpAtikaM cAturakule
bhAvAvasthAntarANi ca bheShajasaMvRuttishcā
bheShajavikArayuktishcetiparIkShyANi pratyakShAnumAnopadeshairAyuShaH
pramANAvasheShaM jij~jAsamAnena bhiShajA॥३॥

The following entities should be examined by the physician desiring to assess the residual span of life of the patient using direct observation, and inference such as:

- Physical appearance (complexion, appearance of eyes, ears, nose, tongue, skin), including attributes perceived by the senses (voice, smell, taste, touch, etc.)
- Behavioral traits (mood, upkeep, conduct, etc.)
- Dietary habits and lifestyle (regimens, ability to digest, etc.)
- Existing health conditions (signs of diseases, symptoms, complications, drug use, effect of medicines on illness and on the patient)

Bad omens perceived by the physician on his way to patient's house, changed conditions of the patient's residence, signs and symptoms indicating the residual span of life may be evident on these factors. Hence physician should pay careful attention to each one of them and interpretation should be made based on his observations, knowledge and scriptural advice. [3]

तत्र तु खल्वेषां परीक्ष्याणां कानिचित् पुरुषमनाश्रितानि, कानिचिच्च पुरुषसंश्रयाणि। तत्र यानि
पुरुषमनाश्रितानि तान्युपदेशतो युक्तितश्च परीक्षेत, पुरुषसंश्रयाणि पुनः प्रकृतितोविकृतितश्च॥४॥

tatra tu khalvēṣāṁ parīkṣyāṇāṁ kānicit puruṣamanāśritāni, kānicicca
puruṣasamśrayāṇi। tatra yāni puruṣamanāśritāni tānyupadēśatō yuktitaśca parīkṣēta,

puruṣasamśrayānipunahprakṛtitōvikrtitaśca||4|| tatra tu khalveShAM parIkShyANAM
kAnicit puruShamanAshritAni, kAnicicca puruShasaMshrayANi] tatra yAni
puruShamanAshritAni tAnyupadeshato yuktitashca parIkSheta, puruShasaMshrayANi
punaHprakRutito vikRutitashca||4||

Some of the signs and symptoms are not apparent in a patient but can be observed in the surrounding of the patient. These are evaluated by logic based on scriptural instructions and inference. The factors not observed in patients are often circumstantial like an informer who comes with news of patient and the good/bad omens seen by the physician. Those which can be seen in patients are examined by observing their constitution and morbid conditions. But all these factors should be assessed wisely in the quest for the life of the patient. [4]

Factors responsible for natural constitution

तत्रप्रकृतिर्जातिप्रसक्ताच, कलप्रसक्ताच, देशानुपातिनीच, कालानुपातिनी च
वयोऽनुपातिनीच, प्रत्यात्मनियताचेति। जातिकुलदेशकालवयः प्रत्यात्मनियता हि तेषां तेषां पुरुषाणां ते ते
भावविशेषाभवन्ति॥५॥

tatraprakṛtirjātiprasaktāca,kulaprasaktāca,dēśānupātinīca, kālānupātinī ca
vayō'nupātinīca,pratyātmaniyatāceti] jātikuladēśakālavayaḥpratyātmaniyatā hi tēṣāṁ
tēṣāṁ puruṣāṇāṁtēbhāvaviśēśābhavanti||5|| tatra prakRutirjAtiprasaktA ca,
kulaprasaktA ca, deshAnupAtinI ca, kAIAnupAtinI ca vayo~anupAtinI ca,
pratyAtmaniyatA ceti] jAtikuladeshakAlavayaHpratyAtmaniyatA hi teShAM teShAM
puruShANAM te te bhAvavisheShAbhavanti||5||

The natural constitution of a person depends upon *Jati* (origin as per social structure), *Kula* (race), *Desa* (place), *Kala* (time and season), *Vaya* (age), *Pratyatmaniyata* (individual habits and habitat). The different variations seen in persons are based upon their origin as per social structure, race, place of living, season, age and individual habits.[5]

Types of pathological abnormalities

विकृतिः पुनर्लक्षणनिमित्ताच, लक्ष्यनिमित्ताच, निमित्तानुरूपाच॥६॥

vikṛtiḥ punarlakṣaṇanimittāca, lakṣyanimittāca, nimittānurūpāca||6||

vikRutiH punarlakShaNanimittA ca, lakShyanimittA ca, nimittAnurUpA ca||6||

The pathological conditions are classified as:

- *Lakshana nimitta*: pathological appearance based on symptoms
- *Lakshya nimitta* : Diseases based upon etiological factors
- *Nimittanurupa*: This type of pathology is based on signs resembling with etiological factors. [6]

Symptom based abnormalities

तत्र लक्षणनिमित्ता नाम सा यस्या: शरीरे लक्षणान्येव हेतुभूतानि भवन्ति दैवात्; लक्षणानि हि कानिचिच्छरीरोपनिबद्धानि भवन्ति, यानि हि तस्मिंस्तैस्मिन् काले तत्राधिष्ठानमासाद्य तां तां विकृतिमुत्पादयन्ति।।7।।

tatra lakṣaṇanimitṭā nāma sā yasyāḥ śarīrē lakṣaṇānyēva hētubhūtāni bhavanti daivāt; lakṣaṇāni hi kāniciccharīropanibaddhāni bhavanti, yāni hi tasmiṁstasmin kālētatrādhiṣṭhānamāsādyā tāṁ tāṁ vikṛtimutpādayanti।।7।।

tatra lakShaNanimittA nAma sA yasyAH sharIre lakShaNAnyeva hetubhUtAni bhavanti daivAt; lakShaNAni hi kAniciccharIropanibaddhAni bhavanti, yAni hitasmiMstasmin kAle tatrAdhiShThAnamAsAdya tAM tAM vikRutimutpAdayanti।।7।।

The first type of pathological conditions are based on symptoms, whose causative factors are pre-determined by destiny in the form of physiognomic signs. Some of these signs may be latent in the body, and appear at particular time in particular parts of body giving rise to particular related morbid conditions. [7[1]]

Etiopathogenesis based abnormalities

लक्ष्यनिमित्ता तु सा यस्या उपलभ्यते निमित्तं यथोक्तं निदानेषु।।7।।

lakṣyanimitṭā tu sā yasyā upalabhyatē nimittāṁ yathōktām [1] nidānēṣu।।7।।

lakShyanimittA tu sA yasyA upalabhyate nimittaM yathoktaM [1] nidAneShu।।7।।

The second type of pathological conditions are based on etiological factors which appear as per the etiopathogenesis described (in Nidana Sthana section). [7[2]]

Cause based abnormalities

निमित्तानुरूपा तु निमित्तार्थानकारिणी या, तामनिमित्तां निमित्तमायषः प्रमाणजानस्येच्छन्ति भिषजो भूयश्चायुषः क्षयनिमित्तां प्रेतौलैङगानुरूपां, यामायुषोऽन्तर्गतस्य ज्ञानार्थमुपदिशन्ति धीराः। यां चोधिकृत्य पुरुषसंश्याणि मुमूर्षतां लक्षणान्युपदेक्ष्यामः। इत्युद्देशः। तं विस्तरेणानुव्याख्यास्यामः॥।।7।।

nimittānurūpā tu nimittārthānukāriṇī yā, tāmanimitṭāṁ nimittamāyuṣah
pramāṇajñānasyēcchanti bhiṣajō bhūyaścāyuṣah kṣayanimittāṁ
prētēliṅgānurūpām, yāmāyuṣo'ntargatasya [1] jñānārthamupadiṣanti dhīrāḥ। yām
cādhikṛtya puruṣasarāṁśrayāṇi mumūrṣatāṁ lakṣaṇānyupadēkṣyāmah। ityuddēṣah। tāṁ
vistarēñānuvyākhyāsyāmah॥।।7।। nimittAnurUpA tu nimittArthAnukAriNI yA, tAmanimittAM
nimittAyuShaH pramANaj~jAnasyecchanti bhiShajo bhUyashcAyuShaH
kShayanimittAMpreteli~ggAnurUpAM, yAmAyuSho~antargatasya [1]
j~jAnArthamupadishanti dhIrlAH। yAM cAdhikRutyA puruShasAmshrayANI
mumUrShatAM lakShaNAnyupadekShyAmaH। ityuddeshaH। taM
vistareNAuvyAkhyAsyAmaH॥।।7।।

The third type of pathological conditions is based upon the factors that resemble etiological factors, but in fact, they are not etiological factors in nature. It appear without

any apparent cause and indicate the measure of the life-span particularly the signs of imminent death due to decadence of life. The physicians pay due importance to this for the knowledge of life (and death). Based on this, I will explain the signs observed in the person which indicate his imminent death. This is the summary. We shall explain this in detail. [7[3]]

Normal complexion

तत्रादितएववर्णाधिकारः| तदयथा- कृष्णः, श्यामः, श्यामावदातः, अवदातश्चेति प्रकृतिवर्णाः शरीरस्य भवन्ति; यांश्चापरानुपेक्षमाणो विद्यादनूक्तोऽन्यथा वाऽपि निर्दिश्यमानांस्तज्ज्ञैः॥८॥

tatrāditaēvavarṇādhikārah| tadyathā- kṛṣṇaḥ, śyāmaḥ , śyāmāvadātaḥ, avadātaścēti prakṛtivarṇaḥ śarīrasya bhavanti;yāṁścāparānupēkṣamāñō vidyādanūkatō'nyathā vā'pi nirdiśyamānāṁstajjñaiḥ||8|| tatrAdita eva varNAdhikAraH| tadyathA- kRuShNaH, shyAmaH [1] , shyAmAvadAtaH, avadAtashceti prakRutivarNAH sharIrasya bhavanti; yAMshcAparAnupekShamANo [2] vidyAdanUkato_{anyathAvA}api nirdishyamAnAMstajj~jaiH||8||

There are four types of natural complexion – black, dark (blue or brown), dark-fair (blue or brown), fair white, There may some more complexions with combinations of such colors.[8]

Abnormal complexion

नीलश्यावतामहरितशुक्लाश्च वर्णाः शरीरस्य वैकारिका भवन्ति; यांश्चापरानुपेक्षमाणो विद्यात्प्राग्विकृतानभूत्वोत्पन्नान | इति प्रकृतिविकृतिवर्णा भवन्त्युक्ताः शरीरस्य| तत्र प्रकृतिवर्णमर्धशरीरे विकृतिवर्णमर्धेशरीरे, द्वावपि वर्णां मर्यादाविभक्तौ दृष्ट्वा; यद्येवं सव्यदक्षिणविभागेन, यद्येवंपर्वपश्चिमविभागेन, यद्युत्तराधरविभागेन, यद्युन्तर्बहिर्विभागेन, आतुरस्यारिष्टमिति विद्यात्; एवमेव वर्णभेदोमुखेऽप्यन्यत्र वर्तमानो मरणाय भवति॥९॥

nīlaśyāvatāmraharitaśuklāśca varṇāḥ śarīrasya vaikārikā bhavanti; yāṁścāparānupēkṣamāñōvidyātprāgvikṛtānabhūtvōtpannān | iti prakṛtivikṛtivarṇā bhavantyuktāḥ śarīrasya| tatra prakṛtivarnamardhaśarīrē vikṛtivarnamardhaśarīrē, dvāvapi varṇau maryādāvibhaktau dṛṣṭvā;yadyēvaṁ savyadakṣiṇavibhāgēna, yadyēvaṁ pūrvapāscimavibhāgēna, yadyuttarādhara vibhāgēna,yadyantarbahirvibhāgēna, āturas yāriṣṭamiti vidyāt; ēvamēva varṇabhedo mukhē'pyanyatra vartamānōmarañaya bhavati||9|| nllashyAvatAmraharitashuklAshca varNAH sharIrasya vaikArikA bhavanti; yAMshcAparAnupekShamANo [1] vidyAt prAgvikRutAnabhUtvotpannAn [2] | iti prakRutivikRutivarNA bhavantyuktAH sharIrasya| tatra prakRutivarNamardhasharIre vikRutivarNamardhasharIre, dvAvapi varNau maryAdAvibhaktau dRuShTvA; yadyevaM savyadakShiNavibhAgena, yadyevaMpUrvapashcimavibhAgena, yadyuttarAdharavibhAgena, yadyantarbahirvibhAgena, AturasyAriShTamiti vidyAt; evameva varNabhedo mukhe~apyanyatra [3] vartamAnomaraNAya bhavati||9||

The unnatural or pathological complexions include blue, blackish, coppery, green and snow white. Similarly, there are some other unnatural types of complexion which appear

suddenly for unknown reason. These are the normal and abnormal complexions of body. Normal complexion in one half of the body and abnormal complexion in the other half and both are demarcated clearly by a line, same abnormality on left and right side of body, front and back side of body, upper and lower or internal and external parts of the body is considered *arishta* (near to death signs). Such demarcation abnormality on face and other parts too indicates death. [9]

वर्णभेदेन ग्लानिर्हर्षरौक्ष्यस्नेहा व्याख्याताः||१०||

varṇabhēdēnaglāniharṣaraukṣyasnēhavyākhyātāḥ||10||

varNabhedena glAniharSharaukShyasnehA vyAkhyAtAH||10||

On the same line of differentiation of complexion, malaise and cheerfulness, roughness and unctuousness are described. [10]

तथा पिप्लुव्यङ्गतिलकालकपिडकानामन्यतमस्यानने जन्मातुरस्यैवमेवाप्रशस्तं विद्यात्॥११॥

tathā pipluvyaṅgatilakālakapiḍakānāmanyatamasyānanē janmāturasyaivamēvāpraśastāṁ vidyāt||11||

tathA pipluvya~ggatilakAlakapiDakAnAmanyatamasyAnane janmAturasyaivamevAprashastaM vidyAt||11||

Similarly, sudden appearance of *piplu* (Acne), *vyanga* (Pigmented skin), *tilakalaka* (Mole) and *pidaka* (Boil) on the face of the patient is inauspicious. [11]

नखनयनवदनमत्रपुरीषहस्तपादौष्ठादिष्वपि च वैकारिकोक्तानां वर्णनामन्यतमस्य प्रादुर्भावो हीनबलवर्णन्द्रियेषुलक्षणमायुषः क्षयस्य भवति॥१२॥

यच्चान्यदपि किञ्चिद्वर्णवैकृतमभूतपूर्व सहसोत्पद्येतानिमित्तमेव हीयमानस्यातुरस्य शश्वत्, तदरिष्टमिति विद्यात् इति वर्णाधिकारः॥१३॥

nakhanayanavadanamūtrapurīṣahastapādausṭhādiṣvapi ca vaikārikōktānāṁ varṇānāmanyatamasyaprādurbhāvō hīnabalavarṇēndriyēṣu lakṣaṇamāyusah kṣayasya bhavati||12||

yaccānyadapi kiñcidvarṇavaikṛtamabhūtapūrvam sahasōtpadyētānimittamēva hīyamānasyāturasyaśāsvat,tadariṣṭamitividyāt|iti varṇādhikārah||13||

nakhanayanavadanamUtrapuriShahastapAdauShThAdiShvapi ca vaikArikoktAnAM varNAnAmanyatamasya prAdurbhAvo hInabalavarNendriyeShu lakShaNamAyuShaHkShayasya bhavati||12||

yaccAnyadapi ki~jcidvarNavaikRutamabhUtapUrvam sahasotpadyetAnimittameva hlyamAnasyAturasya shashvat, tadariShTamiti vidyAt| iti varNAdhikAraH||13||

Sudden appearance of any one of the abnormal colors in nails, eyes, face, urine, stool, hands, legs and lips together with diminished strength, complexion and senses indicate imminent death. Such other abnormal complexions too that appear suddenly for the first

time without any apparent cause in the patient with constant deterioration of health are the signs of death. [12-13]

Normal and abnormal voice

स्वराधिकारस्तु- हंसक्रौञ्चनेमिदुन्दुभिकलविडककाकपोतजर्जरानुकाराः प्रकृतिस्वरा भवन्ति; यांश्चापरानुपेक्षमाणोऽपि विद्यादनुकृतोऽन्यथा वाऽपि निर्दिश्यमानास्तज्जैः। एडककलग्रस्ताव्यक्तिगद्गदक्षामर्दीनानुकीर्णस्त्वातुराणां स्वरा वैकारिका भवन्ति; यांश्चापरानुपेक्षमाणोऽपि विद्यात्प्राग्विकृतानभूत्वोत्पन्नान्। इति प्रकृतिविकृतिस्वरा व्याख्याता भवन्ति॥१४॥

svarādhikārastu- haṁsakrauñcanēmidundubhikalaviñkakākakapōtajarjarānukārāḥ prakṛtisvarā bhavanti;yāṁścāparānupēkṣamāṇō’pi vidyādanūkatō’nyathā vā’pi nirdiśyamānāṁstajjñaiḥ| ēdakakalagrastāvyaktagadgadaksāmadīnānukīrṇāstvāturāṇāṁ svarā vaikārikā bhavanti;yāṁścāparānupēkṣamāṇō’pi vidyāt prāgvikṛtānabhūtvōtpannānitiprakṛtivikṛtisvarāvyākhyātābhavanti||14|| svarAdhikArastu-haMsakrau_{jcanemidundubhikalavi}gkakAkakapotajarjarAnukArAH prakRutisvarA bhavanti; yAMshcAparAnupekShamANo~api [1]vidyAdanUkato~anyathA vA~api nirdishyamAnAMstajj~jaiH| eDakakalagrastAvyaktagadgadakShAmadInAnukIrnAstvAturANAM [2] svarA vaikArikA bhavanti; yAMshcAparAnupekShamANo~api [3] vidyAtprAgvikRutAnabhUtvotpannAn [4] | iti prakRutivikRutisvarA vyAkhyAtA bhavanti||14||

The normal human voice resembles the voice of *hamsa* (swan), *krauncha* (demoiselle crane), *nemi* (wheel), *dundubhi* (kettle drum), *kalavinka* (house sparrow), *kaka* (crow), *kapota* (dove) and *jarjara* (a type of drum). The voice of person with disease resembles that of sheep and is feeble, inaudible, indistinct, choked, hoarse, painful and stammering. Thus normal and abnormal voices are described. [14]

तत्र प्रकृतिवैकारिकाणां स्वराणामाश्वभिनिर्वृत्तिः स्वरानेकत्वमेकस्य चानेकत्वमप्रशस्तम्। इतिस्वराधिकारः॥१५॥

इति वर्णस्वराधिकारौ यथावदुकृतौ मुमूर्षतां लक्षणज्ञानार्थमिति॥१६॥

tatra prakṛtivaikārikāṇāṁ svarāṇāmāśvabhinirvṛttiḥ svarānēkatvamēkasya cānēkatvamapraśastam|itiśvarādhikārah||15||

iti varṇasvarādhikārau yathāvaduktau mumūrṣatāṁ lakṣaṇajñānārthamiti||16||

If the abnormal and inauspicious voices occur suddenly, or rhythm, tone, pitch, resonance and frequency of voice changes on sudden onset, it is inauspicious (there is a grave indication of imminent death).[15]

Various fatal signs in complexion

भवन्तिचात्र- यस्यवैकारिकोवर्णःशरीरउपषद्यते। अर्द्धं वा यदि वा कृत्स्ने निमित्तं न च नास्ति सः॥१७॥ नीलंवायदिवाश्यावंतामंवायदिवाऽरुणम्। मुखार्द्धमन्यथा वर्णो मुखार्द्धरिष्टमुच्यते॥१८॥ स्नेहोमुखार्द्धसुव्यक्तोराक्ष्यमर्धमुखेभृशम्। ग्लानिरर्धं तथा हर्षो मुखार्द्धं प्रेतलक्षणम्॥१९॥

तिलकाःपिप्लवोव्यङ्गाराजयश्चपथग्निवधाः। आतुरस्याशुजायन्तेमुखे प्राणान् मुमुक्षतः॥२०॥
 पुष्पाणिनखदन्तेषुपङ्कोवादन्तसंश्रितः। चर्णको वाऽपि दन्तेषु लक्षणं मरणस्य तत्॥२१॥
 ओष्ठयोःपादयोःपाण्योरक्षणोमूत्रपुरीषयोः। नेखेष्वपिचैवर्ण्यमेतत्क्षीणबलेऽन्तकृत्॥२२॥
 यस्यनीलावभावोष्ठौपक्वजाम्बवसन्निभौ। ममर्षरिति तं विदयान्नरो धीरो गतायुषम्॥२३॥
 एकोवायदिवाऽनेकोयस्यवैकारिकःस्वरः। सहसौत्पदयते जन्तोर्हीयमानस्नास्ति सः॥२४॥
 यच्चान्यदपिकिञ्चित्स्याद् वैकृतं स्वरवर्णयोः। बलमासविहीनस्यतत्सर्वं मरणोदयम् ॥२५॥

bhavanti cātra- yasya vaikārikō varṇah śarīra upapadyatē| ardhē vā yadi vā kṛtsnē
 nimittam na ca nāsti sah॥17॥ nīlam vā yadi vā śyāvam tāmram vā yadi vā'ruṇam|
 mukhārdhamanyathā varṇō mukhārdhē'riṣṭamucyatē॥18॥ snēhō mukhārdhē suvyaktō
 raukṣyamardhamukhē [1] bhr̄sam| glānirardhē tathā harṣo mukhārdhē
 prētalakṣaṇam॥19॥ tilakāḥ piplavō vyāṅgā rājayaśca pṛthagvidhāḥ| āturasyāśu jāyantē
 mukhē prāṇān mumukṣataḥ॥20॥ puṣpāṇi nakhadantēsu pañkō vā dantasamśritah|
 cūrṇakō vā'pi dantēsu lakṣaṇam maraṇasya [2] tat॥21॥ ṥṣṭhayoh pādayoh
 pāṇyōrakṣṇōrmūtrapurīṣayoh| nakhēṣvapi ca vaivarṇyamētat kṣīṇabalē'ntakṛt॥22॥
 yasya nīlāvubhāvōṣthau pakvajāmbavasannibhau| mumūrṣuriti tam vidyānnarō dhīrō
 gatāyuṣam॥23॥ ēkō vā yadi vā'nēkō yasya vaikārikah svarah| sahasōtpadyatē
 jantōrhīyamānasya nāsti sah॥24॥ yaccānyadapi kiñcit syādvaiκrtam svaravarṇayoh|
 balamāṁsavihīnasya tat sarvarṇam maraṇodayam [3] ||25|| tatra ślōkah- iti
 varṇasvarāvuktau lakṣaṇārtham mumūrṣatām| yastau [4] samyagvijānāti nāyurjñānē sa
 muhyati॥26॥ bhavanticAtra- yasyavaikArikovarNaHsharlraupapadyate| ardhe vA yadi
 vA kRutsne nimittaM na canAstisaH॥17॥ nllaM vA yadi vA shyAvaM tAmraM vA yadi
 vA~aruNam| mukhArdhamanyathA varNo mukhArdhe~ariShTamucyate॥18॥ sneho
 mukhArdhe suvyakto raukShyamardhamukhe bhRusham| glAnirardhe tathA harSho
 mukhArdhe pretalakShaNam॥19॥ tilakAH piplavo vyā~ggA rAjayashca pRuthagvidhAH|
 AturasyAshu jAyante mukhe prANAn mumukShataH॥20॥ puShpANi nakhadanteShu
 pa~gko vA dantasaMshritaH| cUrNako vA~api danteShu lakShaNaM maraṇasya
 tat॥21॥ oShThayoH pAdayoH pANyorakShNormUtrapuriShayoH| nakheShvapi ca
 vaivarNyametat kShINabale~antakRut॥22॥ yasya nIIAvubhAvoShThau
 pakvajAmbavasannibhau| mumUrShuriti taM vidyAnnaro dhIro gatAyuSham॥23॥ eko
 vA yadi vA~aneko yasya vaikArikah svaraH| sahasotpadyate jantorhlyamAnasya nAsti
 saH॥24॥ yaccAnyadapi ki~jcit syAdvaikRutaM svaravarNayoH| balamAMsavihInasya
 tat sarvaM maraṇodayam ||25||

If half of the face there is blue, blackish, coppery or tawny color and the color of the remaining half is otherwise. Manifestation of unctuousness in one half of the face and roughness in the other half is inauspicious.

The appearance of swelling in one-half of the face and emaciation in the other half. Spontaneous appearance of various types of *tila* (black mole), *piplu* (port wine mark), *vyanga* (freckles), and *raji* (spots like mustard) on the face of the patient.

The appearance of flowers like spots in nails and teeth and sticky and powdery substance over the teeth is an indicator of death. Discoloration of lips, legs, heels, eyes, urine, stool and nails of the patient are indicators of diminished strength.

When both the lips become bluish like ripe fruits of *jambu*, this is a clear indication of death.

In a patient who is very much weak, due to *Ojokshaya* (immune depletion) along with any changes occur in voice either as single problem or multiple issues, that indicates death.

In chronic immune deficient person, there is all possibilities of *dhatusaraheenatha* (Severe wasting of tissues) can lead to abnormal voice.

Such other abnormalities in voice and complexion of an individual who is devoid of strength and flesh also indicate imminent death.[17-25]

Summary

तत्रश्लोकः- इति वर्णस्वरावुक्तौ लक्षणार्थं मुमूर्षताम्| यस्तौ सम्यग्विजानाति नायुर्जने स मुहयति॥२६॥
tatraślōkah- itivarṇasvarāvuktaulakṣaṇārthaṁmumūrṣatām| yastau samyagvijānāti
nāyurjñānē sa muhyati॥२६॥ tatra shlokaH- iti varNasvarAvuktau lakShaNArthaM
mumUrShatAm| yastau [4] samyagvijAnAti nAyur~jAne sa muhyati॥२६॥

Thus the fatal signs related with complexion and voice are described. One who knows the details of these facts will not be confused in knowing lifespan of patient.

Tattva Vimarsha (Fundamental Principles)

- The prognosis of disease leading to death can be predicted by keen observation of complexion, color of body parts and voice. [3]
- The natural constitution of a person depends upon *Jati* (caste), *Kula* (race), *Desha* (place), *Kala* (time and season), *Vaya* (age), *Pratyatmaniyata* (individual habits and habitat). The different variations seen in persons are based upon their caste, race, place of living, season, age and individual habits. [5]
- The complexion is a tool to assess malaise, cheerfulness, dryness and unctuousness in body i.e. the circulatory and metabolic state of body. [9]

Vidhi Vimarsha (Applied Inferences)

Factors indicating bad prognosis

Sudden change in following factors indicate bad prognosis or near death signs:

Complexion, voice, smell, taste, touch, eyes, ears, nose, tongue, skin, psyche, desire, cleanliness, conduct, behavior, memory, shape, nature, strength, malaise, intellect, exhilaration, dryness, unctuousness, drowsiness, heaviness, lightness, qualities, diet, regimens, digestion of food, manifestation of disease, disappearance of disease, characters of disease, premonitory signs of the disease, symptoms, complications, administration of proper medicine, and effect of medicine on disease, luster, shadow, dream, state of informer about the patient. Bad omens perceived by the physician on his way to patient's house, changed conditions of the patient's residence, signs and

symptoms indicating the residual span of life may be evident in these factors. Hence physician should pay careful attention to each one of them and interpretation should be made based on his observations, knowledge and scriptural advice.

The examination of complexion does not just mean the color only. It also includes objects of visual perception like coarseness, glossiness etc. Abnormal *swara* (voice) include fluctuations in the normal quality of sounds produced (hoarseness of voice, dysphonia), absence of the normal physiological sounds like absence of peristalsis in peritonitis, presence of abnormal sounds like crepitus in joints & crepitation, rhonchi etc. in lungs. Abnormalities in touch include tactile perception of abnormal hardness, softness, warmth etc.

Three types of morbid conditions

The morbid conditions are of three types. Such as those indicated by bodily marks, those caused by etiological factors and those resemble etiological factors.

Visible end stage manifestations

Lakshana nimitta include visible end stage manifestations. The abnormal color produced can be considered as *ojokshaya lakshana* (depletion of quality of tissue). In *Raktarshas* (bleeding piles), when there is excessive bleeding, it may lead to poor complexion, strength, enthusiasm and depleted ojas. If proper measure is not taken the condition may become fatal. The unnatural color of skin can be compared with the cyanotic conditions, discoloration seen in the fatal hepatic and renal pathologies etc. Appearance of white spots, white nails and loss of pigmentation can be seen in chronic liver failure.

In chronic kidney disease, the conjunctival deposition of calcium leads to redness and gritty feeling in the eye called uremic red eye. Also deposition of calcium as a band in the lamina propria of cornea leads to band keratopathy.

In chronic hepatic failure, erythematous patches may appear over many parts of the body, especially over the chest wall and supraclavicular regions.

Appearance of abnormal complexion in the entire or half of the body of the individual without any significant reason can be due to abnormal peripheral circulation.

Oxygenation can affect the complexion. In deep vein thrombosis (DVT) alteration in pigmentation is well appreciated.

When both the lips become bluish like ripe fruits of *jambu*, this is a clear indication of death. As per modern science this condition is similar to central cyanosis. It is directly due to *Vata Pratiromata* (reverse direction of *Vata*) in different organs. The main srotas involved are *Rasavaha srotas* and *Raktavaha Srotas*.

Abnormal voices

- In *sannipatha jwara - swarasada* (low pitched voice) is a *lakshana*.

- In *kshathaja kasa - paravatha ivaakoojan* (cooing sound like that of a pigeon comes out of the throat)
- In *Apatantraka –kapota iva koojan* (make sound like a pigeon).
- In Tetanus -sudden death occurs due to laryngeal spasm .
- Dysphonia—Disturbance of phonation is due to disturbance in vocal cords. Strained, harsh, low pitched voice, nasal voice.
- In laryngeal tumors like supra glottic cancer and glottis cancer hoarseness of voice is a late symptom.

In fact the abnormal changes in color and voice of the patient reflect serious changes in the physiology. Deep seated pathologies of cardio vascular system, Respiratory system, endocrine system often presents with color changes. Similarly lesions in the central nervous system can lead to changes in the voice. Dysarthria, Dysphasia and Dysphonia which may become fatal. In short this chapter highlights the events related with major systems in the body which can cause death.

Assessment of various prognostic factors

Various assessment scales and tools can be applied for objective assessment of the factors described in the chapter. The following tables depict probable tools and scales of assessment.³ These parameters can be applied for clinical assessment of relevant factors. There is a wide scope for research on implementing these practices to predict prognosis and life span of individual. Furthermore, each of these factors is elaborated in forthcoming chapters of this section (Indriya Sthana).

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments
1	Complexion (varna)	Fitzpatrick skin type , Reflectance spectroscopy, Minolta chromameter, Mexameter (using erythematic and melanin indices), C.L.B.T assessment;
2	Voice (swara)	Linear analog scale of assessment - voice quality (LASA-VQ), Vocal performance

³ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments
3	Smell (gandha)	questionnaire (VPQ), Vocal tract discomfort (VTD), Evaluating voice disability - Quality of life questionnaire (EVD-QOL), Speech disability questionnaire (SDQ), Voice handicap index (VHI), Voice symptom questionnaire (VSQ), Vocal fatigue index (VFI) etc;
4	Taste (rasam)	Odor fingerprints, Odor signatures, E-nose, Byoshu, Gas chromatography, Gas chromatography with mass spectrometry etc;
5	Touch (sparsha)	Biomarkers, Measuring various blood components, Breathalyser, VOCs (volatile organic compounds) etc;
6	Sensory organs (jnanendriya)	Thermography, Tenderness grading scale, Virtual palpation on 3D computer models, Elastography etc;
		Sensory over-responsivity scale (sensOR), Multi-Modality unusual sensory experiences questionnaire (MUSEQ), The

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments
7	Psyche (sattva)	Launay slade hallucination scale (LSHS), Cardiff anomalous perception scale (CAPS), Osteba critical appraisal cards, Sensory integration and Praxis test, The sensory profile, Perceived stress scale (PSS) etc;
8	Interest (bhakti)	Mental health quality of life, The satisfaction with life scale (SWLS), Scale of self esteem (Rosenberg scale), Quality of life index for mental health, Quality of well being scale, Mini mental status examination (MMSE) etc;
9	purity or cleanliness (shaucham)	The mood, interest and pleasure questionnaire (MIPQ), Strong interest inventory test etc;
10	Modesty (sheelam)	Hygiene behavior scale (HBS), Hand washing behavior scale Terms of planned behavior model, Yale-Brown obsessive compulsive scale (Y-BOCS), Cleaning and Hygiene scale etc; Philadelphia geriatric centre morale scales, The big five

Sr.no.	Prognostic factor	
11	Behavioral conduct (achara)	Assessment scales / questionnaires / instruments personality test (BFPT), The traits personality questionnaire 5 (TPQue5), Rorschach ink blot technique, Minnesota multiphasic personality inventory, Eysenck personality inventory, Maudsley personality questionnaire etc; Behavior and symptom identification scale (BASIS), Client adjustment rating scale, Social behavior assessment schedule, Social maladjustment schedule etc;
12	Memory (smriti)	Addenbrookes cognitive assessment - Revised (ACE-R), Abbreviated mental test score (AMTS), General practitioner assessment of cognition (GPCOG), Memory impairment screen (MIS), Montreal cognitive assessment (MoCA), PGI memory scale, Test your memory (TYM) etc;
13	Built (akruti)	Anthropometric measurements like height, weight, circumference, skin fold thickness and

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments several other measurements;
14	Fundamental constitution (prakriti)	Prototype Prakriti Analysis tool (PPAT), AyuSoft Prakriti software, Ayurveda child personality inventory (ACPI), Mysore tridosha scale etc;
15	Morbidity (vikruti)	Computerized adaptive assessment of disease impact (DICAT), Quality of life disease impact scale (QDIS), Multi group confirmatory factor analysis (MGCFA), Item response theory (IRT), Disease specific quality of life scales (QOLs) etc;
16	Strength or energy (bala)	Modifiable activity questionnaire (MAQ), Previous week modifiable activity questionnaire (PWMAQ), Recent physical activity questionnaire (RPAQ), International physical activity questionnaire (IPAQ), 7 day physical activity recall (PAR) etc;
17	Languor (glani)	Fatigue severity scale, Fatigue questionnaire, Multidimensional fatigue inventory, Fatigue impact scale,

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments
18	Intellect (medha)	Visual analogue scale - Fatigue etc; Classification of intellectual and other psychological impairments functioning, Mental residual functional capacity assessment (MRFC), Wechsler adult intelligence scale (WAIS-IV), Boston naming test, Controlled oral word association, Hopkins verbal learning test - Revisited;
19	Exhilaration (harsh)	Affect balance scale, General well being index, The positive and negative syndrome scale (PANSS), Quality of life enjoyment and satisfaction questionnaire etc;
20	Dryness (raukshya)	Surface characterizing impedance monitor (SCIM), Nova Dermal Phase Meter etc;
21	Unctuousness (sneha)	Moisture Map, Dermaflex, Biospec imager, SkinChip, Skicon, Corneometer, Dermal Torque Meter, Twistorimeter etc;
22	Drowsiness (tandra)	Pittsburgh sleep quality index (PSQI), Holland sleep disorder questionnaire (HSDQ),

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments
23	Onset (arambha)	Gorningen sleep quality scale (GSQS), Karolinska sleepiness scale (KSS), Expanded consensus sleep diary (CSD-E) etc;
24	Heaviness (gaurava)/ lightness (laghava)	Various screening tests like Mini-Cog, 6-CIT, The informant questionnaire on cognitive decline in the elderly (IQCODE), Geriatric depression screening scale, The Hospital anxiety and depression scale etc;
25	Quality of diet (ahara guna)	Increased or decreased specific gravity of sputum, semen, urine and faeces etc which can be measured by laboratory investigations like sputum, semen, urine analysis;
26	Lifestyle (vihara)	Diet satisfaction questionnaire (DSat-45), RESIDE dietary guideline index (RDGI), Food frequency questionnaire (FFQ), Dietary behavior questions (DBQ) etc; Simple lifestyle indicator questionnaire (SLIQ), The healthy lifestyle and personal

Sr.no.	Prognostic factor	
27	Post digestion effect (ahara parinama)	Assessment scales / questionnaires / instruments control questionnaire (HLPCQ), Lifestyle questionnaire related to cancer, Health protective behaviour scale etc;
28	Disease and its prediction (vyadhi and purvarupa)	Questionnaire to assess digestion and metabolism (jatharagni), Self assessment tool to estimate digestion capacity (Agni bala), VAS scales, Metabolic markers etc;
29	Complaints (vedana)	Severity scales, screening instruments or questionnaires, VAS (visual analogue scales) etc;
30	Complications (upadrava)	Oswestry disability index (ODI), Roland & Morris disability questionnaire, VAS, Graphic rating scale (GRS), Numerical rating scale (NRS), Verbal rating scale (VRS), McGill pain questionnaire (MPQ), Pain-O-Meter etc;
31	Luster (chchaya), shadow (pratichchaya)	Patient reported outcome measures (PROM), Patient reported experience measures (PREM), EQ-5D, EQ-VAS etc; Red reflex test, Radio diagnosis & imaging, Kirlian photography,

Sr.no.	Prognostic factor	Assessment scales / questionnaires / instruments
32	Dreams (swapna darshana)	Fitzpatrick skin type scale, C.L.B.T assessment, Computerized analysis of shadows, studies on cast shadows etc; Nightmare distress questionnaire (NDQ), Beliefs about dream questionnaire (BADQ), Chinese version of Van Dream anxiety scale (CVDAS), Dream survey questionnaire (DSQ) etc;
33	Messenger (doota adhikara)	Caregiver strain index (CSI), Zarit burden interview, Care related quality of life, Burden scale for family caregivers, Care giving knowledge questionnaire (CKQ-My), Caregiver burden scale - Indian population (CBS-IP), Caregiver confidence in sign/symptom management scale (CCSM), Revised scale of care giving self efficacy (RSSE), Self efficacy questionnaire for Chinese family caregivers (SEQCFC) etc;

Table 1: Assessment of prognostic factors

Assessment of complexion

The normal complexion can be compared and related to different skin types as per [Fitzpatrick skin type⁴](#) given in table 2.

Normal complexion (varna)	Skin colour	Fitzpatrick skin type
Krishna	Black	Type VI
Shyama	Brown	Type V
Shyama-Avadata	Light brown	Type III & Type IV
Avadata-Gaura	Fair or White	Type I & Type II

Table 2: Assessment of normal complexion (varna)

Observations of abnormal complexion and relevant morbidities

Clinical observations in change of complexion can be suggestive of probable underlying morbidities.⁵ These are summarized in the following table 3.

Observation	Probable relevant disease or pathology
Discoloration of whole body [Cha.Sa. Indriya Sthana 1/9]	Cyanosis; Melasma; Addison's disease; Post-inflammatory hyper pigmentation; Cutaneous amyloidosis; Acanthosis nigricans; Wilson's disease; Purpura; Fungal infections in immunocompromised patients; Jaundice; Hepatocellular carcinoma; Pallor; Hypomelanosis or hypopigmentation; Vitiligo;
Discoloration of right half of body [Cha.Sa.Indriya Sthana 1/10]	Harlequin color change;
Discoloration of upper half of body [Cha.Sa.Indriya Sthana 1/10]	Differential cyanosis; Reverse differential cyanosis; Spinal cord injury (SCI); Paraplegia;

⁴ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

⁵ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

Observation	Probable relevant disease or pathology
Discoloration of dorsal or posterior surface of the body [Cha.Sa.Indriya Sthana 1/10]	Venous stasis in chronic bed ridden patients;
Discoloration of internal or external mucosal surfaces [Cha.Sa.Indriya Sthana 1/10]	Acquired generalized hyper pigmentations due to various underlying conditions; Oral pigmentation; Sino-nasal melanosis; Nevus of Ota;
Unilateral facial discoloration [Cha.Sa.Indriya Sthana 1/10]	Unilateral facial flushing in Harlequin syndrome; Horner's syndrome; Parry-Romberg syndrome;
Unilateral numbness or hyperesthesia in body [Cha.Sa.Indriya Sthana 1/10]	Hemiplegia or hemiparesis; Paraplegia or paraparesis; Diplegia; HSP (Hereditary spastic paraplegia); CMV (cytomegalovirus) polyradiculopathy; SCI; Myelopathies;
Unilateral numbness or hyperesthesia on face [Cha.Sa.Indriya Sthana 1/10]	DAN (Diabetic autonomic neuropathy); Anhidrosis & Hyperhidrosis; SCI; Cervical spine pathology; Unilateral facial seborrhoea in Ramsay-Hunt syndrome & Facial paralysis; Paraplegia; SCI; Myelopathy;
Unilateral unctuousness or dryness of body [Cha.Sa.Indriya Sthana 1/10]	
Appearance of moles, freckles, pimples on body [Cha.Sa.Indriya Sthana 1/11]	Basal cell carcinoma; Squamous cell carcinoma; Scleroderma; SLE (Systemic lupus erythematosus); Inflammatory & Infectious dermatoses; Sturge-Weber syndrome; Fungal & Viral skin infections; Melanocytic nevi; Hyper pigmentations; Carcinoid syndrome;
Abnormal discoloration of nails, eyes, face, urine, stools, hands,	Cyanosis; Melanonychia; Acroperniosis; Chemosis; Jaundice; Panda eye; Iris nevi;

Observation	Probable relevant disease or pathology
legs, lips etc. [Cha.Sa.Indriya Sthana 1/12]	Horner's syndrome; Melanoma; Alkaptonuria; Black water fever; Biliary obstruction; Upper and lower gastrointestinal bleeding; Peripheral vascular disease (PWD); Acrocyanosis; Raynaud's phenomenon; Mottling at end-of-life stages;
Other sudden changes in complexion [Cha.Sa.Indriya Sthana 1/13]	Cyanosis, Pallor and Erythrosis seen in ALTE (Apparent Life-Threatening Events) & BRUE (Brief Resolved Unexplained Events);

Table 3: Bad prognostic factor related to change in complexion

Observations of abnormal voice and relevant morbidities

Clinical observations in change of voice can be suggestive of probable underlying morbidities.⁶ These are summarized in the following table 4.

Abnormal voice	Relevant disease or pathology
Hoarseness or raspiness like a sheep [Cha.Sa.Indriya Sthana 1/14]	Due to structural changes of vocal cords (Acute or chronic laryngitis, Polyps etc);
Feeble [Cha.Sa.Indriya Sthana 1/14]	Aphonic palilalia; Hypophonia; Paresis of vocal cords; LMN (lower motor neuron) lesions;
Subdued or Inaudible) [Cha.Sa.Indriya Sthana 1/14]	Aphonia; Hypophonia; LMN (lower motor neuron) lesions; ALS (Amyotrophic lateral sclerosis); MG (Myasthenia gravis); TIA (Transient ischemic attack) etc;
Indistinct or Indistinguishable) [Cha.Sa.Indriya Sthana 1/14]	Aphonia; Aphonic palilalia; Progressive supranuclear palsy; Bilateral upper brainstem lesions;

⁶ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

Abnormal voice	Relevant disease or pathology
Chocked or stammering [Cha.Sa.Indriya Sthana 1/14]	Spastic or Spasmodic dysphonia; Dysarthria (bilateral cerebral lesions, cerebral glioma of parietal origin etc);
Hoarse or rough [Cha.Sa.Indriya Sthana 1/14]	Hyperkinetic dysarthria; Structural lesions and inflammatory conditions of larynx;
Faint or painful [Cha.Sa.Indriya Sthana 1/14]	Dysphasia; Dysphonias; Motor or Broca's Aphasia; Inflammatory lesions of the pharynx and larynx; Neoplasms of larynx, pharynx, lungs, and thyroid; Lymphoma; Mediastinal metastases pressing laryngeal nerves; Unilateral vocal cord palsy (UVCP) etc;
Stuttering or stammering [Cha.Sa.Indriya Sthana 1/14]	Spastic paralysis; Dysarthria; Rigidity; Spasms of muscles of articulation;
Other abnormal voices [Cha.Sa.Indriya Sthana 1/15]	Migraine Aura; TIA; MG; ALS; LMN lesions; UVCP; Multiple sclerosis (MS); Epilepsy; Carcinomas of larynx, pharynx, lungs, and thyroid; Lymphoma; Mediastinal metastasis; Cancer cachexia etc;

Table 4: Bad prognostic factor related to change in voice

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Pushpitakam Indriyam Adhyaya

Indriya Sthana Chapter 2.Fatal signs of Tactile and Olfactory perception Abstract

This chapter sums up the variations in the sense of taste of the body and smell of the individual which indicate imminent death of the person (Arishta Lakshana). Variations in the smell of body and the altered taste sense of a person may reveal the disease processes in that patient.

Keywords: fatal signs, *pushpita*, body odour, sense of taste.

Introduction

While describing the qualities of an ideal *bhishaja* (physician) it has been stated that he should be friendly, and compassionate to the patients, should have devotion and love for treating the curable diseases and should not treat the untreatable ones.

[Cha.Sa.Sutra Sthana9/26] During the Samhita period, many diseases were incurable because of lack of treatments available at that time. Now, large number of diseases can be controlled and gives longer productive life to patients by providing emergency and intensive care treatments. That is why during that time it was important to determine the prognosis in terms of curability or incurability of diseases. Physicians did not treat incurable patients especially terminally ill patients. A set of symptoms and signs of terminally ill patients was identified called *Arishta lakshanas*. With the rising high cost of healthcare especially the end of life care, knowledge and recognition of these signs and symptoms have become more relevant during the current times.

After describing fatal signs regarding complexion and voice, diagnosed by visual and auditory senses respectively, the present chapter describes signs to be examined by gustatory and olfactory senses.

Sanskrit text, Transliteration and English Translation

अथातः पुष्पितकमिन्द्रियं व्याख्यास्यामहा॥१॥ इति ह स्माह भगवानात्रेयः॥२॥

athātaḥ puṣpitakamindriyam vyākhyāsyāmaha||1|| iti ha smāha bhagavānātreyah||2||
athAtaH puShpitakamindriyaM vyAkhyAsyAmaha||1|| iti ha smAha
bhagavAnAtreyaH||2||

Now We shall expound the chapter “Pushpitakam Indriyam”(Fatal signs of Tactile and Olfactory perception). Thus said Lord Atreya.[1-2]

Note: The chapter deals with features of odor and taste indicating impending death.

Definition of Arishta (fatal signs)

पुष्पं यथा पूर्वरूपं फलस्येह भविष्यतः। तथा लिङ्गमरिष्टाख्यं पूर्वरूपं मरिष्यतः॥३॥

puṣparāṁ yathā pūrvarūpaṁ phalasyēha bhavisyataḥ| tathā liṅgamaristākhyāṁ
pūrvarūpaṁ mariṣyataḥ||3|| puShpaM yathA pUrvarUpaM phalasyeha bhaviShyataH|
tathA li~ggamariShTAkhyāM pUrvarUpaM mariShyataH||3||

Similarly as a flower predicts the future growth of a fruit, appearance of various types of *arishta lakshanas* denote the impending death. [3]

Importance of *Arishta* (fatal signs)

अप्येवं तु भवेत् पुष्पं फलेनाननुबन्धिं यत्। फलं चापि भवेत् किञ्चिद्यस्य पुष्पं न पूर्वजम् ॥४॥ न
त्वरिष्टस्य जातस्य नाशोऽस्ति मरणादते। मरणं चापि तन्नास्ति यन्नारिष्टपुरःसरम् ॥५॥

apyēvaṁ tu bhavēt puṣparāṁ phalēnānanubandhi yat| phalaṁ cāpi bhavēt kiñcid�asya
puṣparāṁ na pūrvajam ||4|| na tvariṣṭasya jātasya nāśo'sti maraṇādṛtē| maraṇāṁ cāpi
tannāsti yannāriṣṭapuraḥsaram||5|| apyevaM tu bhavet puShpaM phalenAnanubandhi
yat| phalaM cApi bhavet ki~jcid�asya puShpaM na pUrvajam [1] ||4|| na tvariShTasya
jAtasya nAsho~asti maraNAdRute| maraNaM cApi tannAsti
yannAriShTapuraHsaram||5||

The flower may sometimes be devoid of fruits and sometimes even the fruits may be produced without being preceded by flowers. But once an *arishta* manifests, it doesn't depart without ensuing in death. Conversely, death can not occur without earlier manifestation of *arishta*. [4-5]

मिथ्याद्विष्टमरिष्टाभमनरिष्टमजानता| अरिष्टं वाऽप्यसम्बुद्धमेतत् प्रजापराधजम्॥६॥

mithyādṛṣṭamariṣṭābhamanariṣṭamajānatā| arīṣṭāṁ vā'pyasambuddhamētat
prajñāparādhajam||6|| mithyAdRuShTamariShTAbhamanariShTamajAnatA| ariShTaM
vA~apyasambuddhametat praj~jAparAdhajam||6||

An ignorant person may sometimes wrongly perceive symptoms presenting in an individual as *arishta lakshana* and sometimes he may even not recognize the *arishta lakshana* presenting in an individual, all this is the result of intellectual errors.[6]

सम्बोधनार्थं तु लिङ्गैर्मरणपूर्वजैः। पुष्पितानुपदेक्ष्यामो नरान् बहुविधैर्बहून् ॥७॥

jñānasambodhanārthaṁ tu liṅgairmaraṇapūrvajaiḥ| puṣpitānupadēkṣyāmō narān
bahuvidhairbahūn ||7|| j~jAnasambodhanArthaM tu li~ggairmaraNapUrvajaiH|
puShpitAnupadekShyAmo narAn bahuvidhairbahUn [1] ||7||

To expound the knowledge about various premonitory symptoms preceding death as indicative of its imminence, we now illustrate the various kinds of such presentations in persons.[7]

Fatal signs related to body odor

नानापुष्पोपमो गन्धो यस्य भाति दिवानिशम्। पुष्पितस्य वनस्येव नानाद्रुमलतावतः॥८॥ तमाहुः पुष्पितं
धीरा नरं मरणलक्षणैः। स ना संवत्सराददेहं जहातीति विनिश्चयः॥९॥ एवमेकैकशः पुष्पैर्यस्य गन्धः समो
भवेत् इष्टैर्का यदि वाऽनिष्टैः स च पुष्पित उच्यते॥१०॥ समासेनाशुभान् गन्धानेकत्वैनाथवा पुनः।

आजिघेद्यस्य गात्रेषु तं विद्यात् पूष्पितं भिषक्॥१॥ आप्लुतानाप्लुते काये यस्य गन्धा: शुभाशुभाः। व्यत्यासेनानिमित्ताः स्युः स च पूष्पित उच्यते॥२॥ तद्यथा- चन्दन कण्ठं तगरागुरुणी मधुं माल्यं मूत्रपरीषे च मूत्रानि कणपानि चौ॥३॥ ये चान्ये विविधात्मानो गन्धा विविधयोनयः। तेऽप्यनेनानुमानेन विज्ञेया विकृतिं गताः॥४॥ इदं चाप्यतिदेशार्थं लक्षणं गन्धसंश्रयम्। वक्ष्यामो यदभिजाय भिषड्मरणमादिशेत्॥५॥ वियोनिर्विदुरो गन्धो यस्य गात्रेषु जायते। इष्टो वा यदि वाऽनिष्टो न स जीवति तां समाम्॥६॥ एतावद्गन्धविजानं,...॥७॥

nānāpuṣpōpamō gandhō yasya bhāti divāniśam| puṣpitasya vanasyēva
 nānādrumalatāvataḥ॥८॥ tamāhuḥ puṣpitam dhīrā naram maraṇalakṣaṇaiḥ| sa nā
 saṁvatsarāddēham jahātīti viniścayah॥९॥ ēvamēkaikaśah puṣpairyasya gandhaḥ samō
 bhavēṭ| iṣṭairvā yadi vā'niṣṭaiḥ sa ca puṣpita ucyatē॥१०॥ samāsēnāśubhān
 gandhānēkatvēnāthavā punah| ājighrēdyasya gātrēṣu tam̄ vidyāt puṣpitam bhiṣak॥११॥
 āplutānāplutē kāyē yasya gandhāḥ śubhāśubhāḥ| vyatyāsēnānimittāḥ syuḥ sa ca
 puṣpita ucyatē॥१२॥ tadyathā- candanam kuṣṭham tagarāguruṇī madhu| mālyam
 mūtrapurīṣē ca mṛtāni kuṇapāni ca॥१३॥ yē cānyē vividhātmānō gandhā
 vividhayōnayah| tē'pyanēnānumānēna vijñēyā vikṛtiṁ gatāḥ॥१४॥ idam
 cāpyatidēśārtham lakṣaṇam gandhasamśrayam| vakṣyāmō yadabhijñāya
 bhiṣaṇmaraṇamādiśēt॥१५॥ viyōnirvidurō gandhō yasya gātrēṣu jāyatē| iṣṭō vā yadi
 vā'niṣṭō na sa jīvati tām samām॥१६॥ ētāvadgandhavijñānam,...॥१७॥ nAnApuShpopamo
 gandho yasya bhAti [1] divAnisham| puShpitasya vanasyeva nAnAdrumalatAvataH॥८॥
 tamAhuH puShpitaM dhIrA naraM maraNalakShaNaiH| sa nA [2] saMvatsarAddehaM
 jahAtlti vinishcayaH॥९॥ evamekaikashaH puShpairyasya gandhaH samo bhavet|
 iShTairvA yadi vA~aniShTaiH sa ca puShpita ucyate॥१०॥ samAsenAshubhAn
 gandhAnekatvenAthavA punaH| Ajighredyasya gAtreShu taM vidyAt puShpitaM
 bhiShak॥११॥ AplutAnAplute kAye yasya gandhAH shubhAshubhAH|
 vyatyAsenAnimittAH syuH sa ca puShpita ucyate॥१२॥ tadyathA- candanaM kuShThaM
 tagarAguruNI madhu| mAlyaM mUtrapuriShe ca mRutAni [3] kuNapAni ca॥१३॥ ye
 cAnye vividhAtmAno gandhA vividhayonayaH| te~apyanenAnumAnena vij~jeyA
 vikRutiM gatAH॥१४॥ idaM cApyatideshArthaM lakShaNaM gandhasamshrayam|
 vakShyAmo yadabhij~jAya bhiSha~gmaraNamAdishet॥१५॥ viyonirviduro [4] gandho
 yasya gAtreShu jAyate| iShTo vA yadi vA~aniShTo na sa jīvati tAM samAm॥१६॥
 etAvadgandhavij~jAnaM,...॥१७॥

One who emits the fragrance of several flowers or that of wood from various kinds of creepers and bushes - all blooming with flowers, from his body day and night is called *pushpita*, and is indicative of forth coming death. Such a person is sure to die within a year.

A person who emits various repulsive odors collectively and simultaneously is also called *pushpita*. A person who stinks when his body is covered with perfumed liniment or ointment and gives off a fragrant smell without any such liniment application and without any appreciable cause is also called *pushpita*. The smell of *Chandana* (Santalum album Linn.), *Kushtha* (Saussurea lappa G. B. Clarke), *Tagara* (Valeriana wallichii DC.), *Aguru* (Aquilaaria agallocha Roxb.), honey, garland, urine, feces, dead body and any other such smell emitted by person is considered premonitory symptom by inference.

We shall further discuss the premonitory symptoms based on various odors in order to facilitate the physician's knowledge by which he can predict 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 premonitory symptoms based on the smell emitted by the body of the individual.[8-16]

Fatal signs related to sense of taste

...रसज्ञानमतः परम्| आतुराणां शरीरेषु वक्ष्यते विधिपूर्वकम्||१७|| यो रसः प्रकृतिस्थानां नराणां देहसम्भवः| स एषां चरमे काले विकारं भजते द्रव्यम्||१८|| कश्चिद्गेवास्यवैरस्यमत्यर्थमुपपद्यते| स्वादुत्वमपरश्चापि विपुलं भजते रसः||१९|| तमनेनानुमानेन विद्यादविकृतिमागतम्| मनुष्यो हि मनुष्यस्य कथं रसमवाप्नुयात्||२०|| मक्षिकाश्चैव यूकोश्च दंशाश्च मशकैः सह| विरसादपसर्पन्ति जन्तोः कायान्ममर्षतः||२१|| अत्यर्थरसिकं कायं कालपक्वस्य मक्षिकाः| अपि स्नातानुलिप्तस्य भृशमायान्ति सर्वेशः||२२||

...rasajñānamataḥ param| āturāṇāṁ śarīrēṣu vakṣyatē vidhipūrvakam||17|| yō rasah
prakṛtisthānāṁ narāṇāṁ dēhasambhavah| sa ēśām caramē kālē vikāram bhajatē
dvayam||18|| kaścidēvāsyavairasyamatyarthamupapadyatē| svādutvamaparaścāpi
vipulam bhajatē rasah||19|| tamanēnānumānēna vidyādvikṛtimāgatam| manusyō hi
manusyasya kathām rasamavāpnuyāt||20|| makṣikāścaiva yūkāśca darīśāśca
maśakaiḥ saha| virasādapasarpanṭi jantōḥ kāyānmumūrṣataḥ||21|| atyarharasikāṁ
kāyām kālapakvasya makṣikāḥ| api snātānuliptasya bhṛśamāyānti sarvaśah||22||
..rasaj~jAnamataH param| AturANAM sharIreShu vakShyate vidhipUrvakam||17|| yo
rasaH prakRutisthAnAM narANAM dehasambhavaH| sa eShAM carame kAles vikAraM
bhajate dvayam||18|| kashcidevAsyavairasyamatyarthamupapadyate|
svAdutvamaparashcApi vipulaM bhajate rasaH||19|| tamanenAnumAnena
vidyAdvikRutimAgatam| manuShyo hi manuShyasya kathaM rasamavApnuyAt||20||
makShikAshcaiva yUkAshca daMshAshca mashakaiH saha| virasAdapasarpanṭi jantoH
kAyAnnumUrShataH||21|| atyarharasikaM kAyaM kAlapakvasya makShikAH| api
snAtAnuliptasya bhRushamAyAnti sarvashaH||22||

We shall now describe the various tastes expressed by the patient, which indicate imminent death of the person. The normal taste by human beings undergoes two types of modifications in case of impending death i.e. either the person develops excessive distaste or his body develops excessive sweetness. These modifications of taste can only be inferred as a person cannot have direct perception of taste of a person's body.

Flies, lice, wasps and mosquitoes start departing from the body of a moribund person in case of excessive distaste, while flies repeatedly surround the body in case of excessive sweet taste of a moribund person, even after the person has taken bath and applied unguent all over his body. [17-22]

Summary

तत्र श्लोकः- सामान्येन मयोक्तानि लिङ्गानि रसगन्धयोः| पुष्पितस्य नरस्यैतत्फलं मरणमादिशेत्||२३||

tatra ślōkaḥ- sāmānyēna mayōktāni liṅgāni rasagandhayōḥ| puspitasya
narasyaitatphalaṁ maraṇamādiśēt||23|| tatra shlokaH- sAmAnyena mayoktAni li~ggAni
rasagandhayoḥ| puShpitalya narasyaitatphalaM maraNamAdishet||23||

Symptoms of impending death of *pushpita* persons relating to the general variations in the taste and smell of individuals has been described here. Such symptoms lead to the death of the person. [23]

Tattva Vimarsha(Fundamental Principles)

- Death doesn't occur without showing *Arishta* (fatal signs). One shall always be free from *Prajnaparadha* (intellectual errors) to identify and diagnose these signs correctly. [5-6]
- *Arishta* related to *Gandha - Pitta* is primarily responsible factor for all odors as it has *visra gandha*. When *pitta* reaches the *twak* or skin and exerts its *visra gandha* by *bhrajaka pitta*, its odor is of sweat and sebum ??? In this way we can derive the cause and effect. All these verses describe how the various smells (both good as well as bad odors) emitted by the body of an individual without any appreciable causes denote the impending death of the person within a year.

Vidhi Vimarsha (Applied Inferences)

Prognostic signs related to odor (gandha)

These smells coming from the body of individuals represent manifestations of major metabolic disorder which is altering the normal smell of the body. For example, fruity odor in diabetes (ketoacidosis), odor of Ammonia in renal or hepatic failure and fecal smell in high intestinal obstruction etc. [Verse 8-16]

Prognostic signs related to taste (rasa)

The odor and other parameters can be examined by direct perception (pratyaksha pramaṇa), but taste (rasa) is always examined by inference (anumana pramaṇa) because of lack of laboratory investigations. For example, If flies and ants are attracted towards the body – then it is inferred that the taste of the body has become sweet and if the lice, mosquitoes etc. started leaving the patient's body, it is inferred that the patient's body has developed excessive distaste. This information can be helpful in certain rural areas of the world. [Verse 17-22]

Assessment of factors related to odor

The odor or smell of individual can indicate specific underlying morbidity. The probable abnormal conditions are summarized in table 1 and 2.⁷ These parameters can be

⁷ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

applied for clinical assessment of relevant factor. There is a wide scope for research on implementing these practices to predict prognosis and life span of individual.

Odour	Disease
Acetone / Rotten apple	Diabetes / Diabetic ketoacidosis
Sweetish	Rice water stools of Cholera
Sweetish / Putrid	Diphtheria
Sweetish / Pungent	Small pox lesions
Baked-bread	Typhoid
Caramelized sugar	Maple syrup urine disease
Sweet	Leukaemia

Table 1: Specific body odor and probable relevant morbidity

Odour	Disease
Offensive	Cancerous wounds / Infectious diseases / Gynaecological tumours / Necrotic cavity on penis in Squamous cell carcinoma
Unpleasant	Fungating wounds in advanced cancers / Vagabond's disease / Infected eczema / Pemphigus / Herpes labialis / Deep pressure sores on buttocks / Infected leg ulcers
Cheesy / Fishy	Vaginal & cervical bacterial infections
Severe malodor	Advanced breast, head and neck cancers
Foul	Scarlet fever / Pneumonia / Tuberculosis
Stale beer	Ulcerated lymph nodes
Butcher's shop	Yellow fever
Musty	Phenylketonuria
Cheesy / Acrid / Sweaty feet	Isovaleric academia (IVA)
Yeast / Malt / Hop-like	Methionine malabsorption syndrome
Cabbage like	Hypermethioninemia
Foul / Rotten fish like	Trimethylaminuria

Odour	Disease
Cabbage / Rancid butter	Tyrosinaemia
Rotten egg	Cystinuria
Urine	Uraemia / Kidney failure
Faecal	Ileus / Intestinal obstruction
Putrid	Scurvy
Rotting	Ozena
Musty / Skunk / Characteristic	Schizophrenia
Sweaty	Acromegaly
Malodor	Liver diseases
Obnoxious	Gangrenous feet

Table 2: Specific unpleasant body odor and probable relevant morbidity

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Parimarshaneeyam Indriyam Adhyaya

Indriya Sthana Chapter 3.Palpable signs of Imminent Death Abstract

Palpation and percussion enables a physician to make important observations that helps in understanding the disease. Parimarshaneeyam Indriyam Adhyaya deals with signs and symptoms of imminent death; especially the ones which can be elicited by touch or palpation. The chapter talks about various changes that occur in different parts of the body along with various signs elicited by palpation like hardening, softening, bowing, displacement of body structures, changes in breathing patterns, extreme wasting along with deficiency of blood, structural and functional changes in eyes, body hair, and various body parts.

Keywords: *lingam, sparsha, touch, palpation, fatal signs.*

Introduction

Parimarshaneeyam Indriyam Adhyaya mainly deals with the moribund symptoms based on palpating various regions of the body. It follows Pushpitakam Indriyam Adhyaya that deals with the prognosis based on observing the changes in the odour or taste in the body. The reason for this sequence can be understood as the changes in the odor or taste can be felt easily and from far whereas to palpate the patient is a must. The chapter also precedes Indriyanekam Indriyam Adhyaya, which deals with the prognosis based on observing the functioning of the sensory organs of the body.

Sanskrit text, Transliteration and English Translation

परिमर्शनीयेन्द्रियोपक्रमः अथातः परिमर्शनीयमिन्द्रियं व्याख्यास्यामः॥१॥ इति ह स्माह
अगवानात्रेयः॥२॥ वर्ण स्वरे च गन्धे च रसे चोक्तं पृथक् पृथक् लिङ्गं मुमूष्टां सम्यक् स्पर्शज्वपि
निबोधतः॥३॥

athātaḥ parimarśanīyamindriyam vyākhyāsyāmah॥1॥ iti ha smāha bhagavānātrēyah॥2॥
varṇe svarē ca gandhē ca rasē cōktam pṛthak pṛthak| liṅgam mumūṣatām samyak
sparśēvapi nibōdhata॥3॥ athAtaH parimarshanlyamindriyam vyAkhyAsyAmaH॥1॥ iti
ha smAha bhagavAnAtreyaH॥2॥ varNe svare ca gandhe ca rase coktaM pRuthak
pRuthak| li~ggaM mumUrShatAM samyak sparsheShvapi nibodhata॥3॥

Now we shall expound the chapter “Parimarshaneeyam Indriyam”(Palpable signs of Imminent Death). Thus said Lord Atreya.[1-2]

The person who is about to die manifests various signs in terms of colour, voice, odour, taste in mouth which are described separately. Now we will learn about the signs of imminent death pertaining to touch. [3]

Assessment factors by palpation

स्पर्शप्राधान्येनैवातुरस्यायुषः प्रमाणावशेषं जिज्ञासुः प्रकृतिस्थेन पाणिना शरीरमस्य केवलं स्पृशेत्, परिमर्शयेद्वाऽन्ये॑ परिमृशता तु खल्वातुरशरीरमिमे॒ भावास्तत्र तत्रावबोदधृव्या॑ भवन्ति। तद्यथा- सततं स्पन्दमानानां॑ शरीरदेशानामस्पन्दनं, नित्योष्मणां॑ शीतीभावः, मृदुनां॑ दारुणत्वं, श्लक्षणानां॑ खरत्वं, सतामसदभावः, सन्धीनां॑ संसञ्चयवनानि; मांसशोणितयोर्वीतीभावः, दारुणत्वं, स्वेदानुबन्धः, स्तम्भो वा, यच्चान्यदपिकिञ्चिदीदृशं स्पर्शानां॑ लक्षणं भृशविकृतमनिमित्तं स्यात्। इति लक्षणं स्पृश्यानां॑ भावानामुक्तं समासेन॥४॥

sparśaprādhānyēnaivāturasasyāyuṣah pramāṇāvaśēṣam jijñāsuḥ prakṛtisthēna pāṇinā śarīramasyakēvalam spṛśēt, parimarśayēdvā'nyēna| parimṛśatā tu khalvāturaśarīramimē bhāvāstatra tatrāvabōddhavyā bhavantī| tadyathā-satataṁ spandamānānāṁ śarīradēśānāmaspandanam, nityōṣmaṇānāṁ śītībhāvah, mṛdūnānāṁdāruṇatva, ślakṣṇānāṁ kharatvarām, satāmasadbhāvah, sandhīnāṁ sraṁsabhrāṁśacyavanāni;māṁsaśōṣitayōrvītībhāvah, dāruṇatvam, svēdānubandhah, stambhō vā; yaccānyadapi kiñcidīdṛśaṁsparśānāṁ lakṣaṇām bhr̄śavikṛtamanimittam syat| iti lakṣaṇām spṛśyānāṁ bhāvānāmuktam samāsēna||4||
sparshaprAdhAnyenaivAturasyAyuShaH [1] pramANAvasheShaM [2] jij~jAsuH
prakRutisthena pANinA sharIramasya kevalaM spRushet, parimarshayedvA~anyena|
parimRushatA tu khalvAturasharIramime bhAvAstatra tatrAvaboddhavyA bhavantī|
tadyathA- satataM spandamAnAnAM sharIraDeshAnAmaspandanaM, nityoShmaNAM
shItlbhAvaH, mRudUnAM dAruNatvaM, shlakShNaNAM kharatvaM,satAmasadbhAvaH
[3] , sandhInAM sraMsabhrāMshacyavanAni; mAMsashoNitayorvItlbhAvaH,
dAruNatvaM, svedAnubandhaH, stambho vA; yaccAnyadapiki~jcidiRushaM
sparshAnAM lakShaNaM bhRushavikRutamanimittaM syAt| iti lakShaNaM
spRushyAnAM bhAvAnAmuktaM samAsena||4||

The physician who wants to use the method of palpation for measuring the remaining lifespan of a patient, should palpate his (patient's) entire body with his hands, the hands being in normal condition. If the hands of the physician are not in normal condition, he should do so by using another person as a substitute for palpating the patient's body.

While palpating patient's body; following deviations should be studied keeping normal anatomy and physiology of the body in mind. Extreme deviations from normalcy in the body like the absence of pulsation in the pulsatile areas of the body, absence of warmth from warm regions of the body or the presence of hardness or rigidity in softer body structures can give important information in regards to the life span of the person. Similarly the presence of the signs like dislocation or displacement of joints, extreme alteration in perspiration, extreme emaciation or bulkiness of muscle etc. which are found without any apparent cause are to be studied to assess the span of life or the signs of death. [4]

Assessment by observation of body parts

तद्व्यासतोऽनुव्याख्यास्यामः- तस्य चेत् परिमृश्यमानं
पृथक्त्वेनपादजङ्गोरुस्फिगुदरपार्श्वपृष्ठेषिकापाणिग्रीवाताल्वोष्ठललाटं स्विन्नं शीतं स्तब्धं दारुणं

वीतमांसशोणितं वा स्यात् परासुरयं पुरुषो न चिरात् कालं मरिष्यतीति विद्यात् तस्य चेत्
परिमृश्यमानानि

पृथक्त्वेन गुल्फजानुवङ्क्षणगुदवृषणमेढनाभ्यं सस्तनमणिकपर्शुकाहनुनासिकाकर्णाक्षिभूशङ्खादीनि
सस्तानि व्यस्तानि च्युतानिस्थानेभ्यः स्कन्नानि वा स्युः, परासुरयं पुरुषोऽचिरात् कालं मरिष्यतीति
विद्यात्॥५॥

tadvyāsatō'nuvyākhyāsyāmaḥ- tasya cēt parimṛṣyamānāṁ
pr̥thaktvēnapādajaṅghōrusphigudarapārśvapṛṣṭhēśikāpāṇigrīvātālvōṣṭhalalāṭāṁ
svinnāṁ śītaṁ stabdhāṁ dāruṇāṁvītāmāṁsaśōṇītaṁ vā syāt, parāsurayaṁ puruṣo na
cirāt kālaṁ mariṣyatīti vidyāt| tasya cēt parimṛṣyamānāni
pr̥thaktvēnagulphajānuvaṅkṣaṇagudavṛṣaṇamēḍhṛanābhyaṁsastanamaṇikaparśukāha
nunāsikākarṇākṣibhrūśāṅkhādīnīsrastāni vyastāni cyutāni sthānēbhyaḥ skannāni vā
syuḥ, parāsurayaṁ puruṣō'cirāt kālaṁ mariṣyatīti vidyāt||5||
tadvyAsato~anuvyAkhyAsyAmaH- tasya cet parimRushyamAnaM pRuthaktvena
pAdaja~gghorusphigudarapArshvapRuShTheShikApANigrlvAtAlvoShThalalATaMsvinna
M shltāM stabdhāM [1] dAruNaM vltamAMsashoNitaM vA syAt, parAsurayaM puruSho
na cirAt kAlaM [2] mariShyatIti vidyAt| tasya cet parimRushyamAnAni
pRuthaktvenagulphajAnuva_{gkShaNagudavRuShaNameDhranAbhyaMsastanamaNikaparshukAhanunAsikAkarNAKShibhrUsa}
gkhAdIni srastAni vyastAni cyutAni sthAnebhyaHskannAni [3] vA syuH, parAsurayaM
puruSho~acirAt kAlaM mariShyatIti [4] vidyAt||5||

Now I will elaborate upon what I have stated above. If on individual palpation; the feet, calves, thighs, buttocks, belly, both the flanks, vertebral column, hands, neck, palate, lips, forehead are found to be soaked in perspiration, are cold, show stiffness or absence of sensation, inflexibility, or are deficient of flesh or blood, then the physician should note that the person is nearing the end of his live and will die soon.

The physician should similarly palpate separately ankles, knees, pelvis, anus, scrotum, penis, navel, nipples, rib cage, chin, nostrils, ears, eyes, eyebrows, temples to see if these are lax, broken, loosened, displaced from their normal position. If so then the physician should consider that the patient will face death in a short span of time. [5]

Observation of respiration and eyes

तथाऽस्योच्छ्रवासमन्यादन्तपक्षमचक्षुः केशलोमोदरनखाङ्गुलीरालक्षयेत् तस्य
चेदुच्छ्रवासोऽतिदीर्घोऽतिहस्वो वा स्यात्, परासुरिति विद्यात् तस्य चेन्मन्ये परिमृश्यमाने न
स्फन्देयातां, परासुरिति विद्यात् तस्य चेददन्ताः परिकीर्णाः श्वेता जातशर्कराः स्युः, परासुरिति विद्यात् तस्य चेत् पक्षमाणि जटाबद्धानि स्युः, परासुरिति विद्यात् तस्य चेचक्षुषी प्रकृतिहीने, विकृतियुक्ते-
अत्यतिपिण्डिते, अतिप्रविष्टे, अतिजिह्मे, अतिविषमे, अतिमक्तबन्धने, अतिप्रस्ते, सततोनिमिषिते,
सततनिमिषिते, निमिषोन्मेषातिप्रवृत्ते, विभ्रान्तदृष्टिके, विपरीतदृष्टिके, हीनदृष्टिके,
व्यस्तदृष्टिके, नक्लान्धे, कपोतान्धे, अलातवर्णे, कष्णपीतनीलश्यावतामहरितहारिद्रशुक्लवैकारिकाणां
वर्णानामन्यतमेनोतिप्लते वास्यातां, तदा परासुरिति विद्यात् अथास्य केशलोमान्यायच्छेत्, तस्य चेत्
केशलोमान्यायम्यमानानानि प्रलुच्येरन् न चेदवेदयेयुस्तं परासुरिति विद्यात् तस्य चेददरे सिराः प्रकाशेरञ्ज-
श्यावतामनीलहारिद्रशुक्ला वा स्युः, परासुरिति विद्यात् तस्य चेन्नखा वीतमांसशोणिताः
पक्वजाम्बववर्णाः स्युः, परासुरिति विद्यात् अथास्याङ्गुलीरायच्छेत्; तस्य चेदङ्गुलय आयम्यमाना न
स्फुटेयुः, परासुरिति विद्यात्॥६॥

tathā'syōcchvāsamanyādantapakṣmacaksuhkēśalōmōdaranakhāṅgulīrālaksayēt| tasya cēducchvāsō'tidīrghō'tihrasvō vā syāt, parāsuriti vidyāt| tasya cēnmanyē parimṛsyamānē na spandēyātām, parāsuriti vidyāt| tasya cēddantāh parikīrṇāh śvētā jātaśarkarāh syuḥ, parāsuriti vidyāt| tasya cēt pakṣmāṇi jaṭābaddhāni syuḥ, parāsuriti vidyāt| tasya cēccakṣuṣṭī prakṛtihīnē, vikṛtiyuktē- atyutpiṇḍitē, atipravistē, atijihmē, ativiṣamē, atimuktabandhanē, atiprasrutē, satatōnmiṣitē, satatanimiṣitē, nimiṣōnmēṣatipravṛttē, vibhrāntadr̄ṣṭikē, viparītadr̄ṣṭikē, hīnadṛṣṭikē, vyastadr̄ṣṭikē , nakulāndhē, kapotāndhē, alātavarṇē, kṛṣṇapītanīlaśyāvatāmraharitahāridraśuklavaikārikāṇāṁ varṇānāmanyatamēnātiplutē vā syātām, tadāparāsuriti vidyāt| athāsyā kēśalōmānyāyacchēt, tasya cēt kēśalōmānyāyamyamānāni pralucyēran na cēdvēdayēyustānparāsuriti vidyāt| tasya cēdudarē sirāh prakāśerañ śyāvatāmranīlahāridraśuklā vā syuḥ, parāsuriti vidyāt| tasya cēnnakhā vītamāṁsaśōnitāh pakvajāmbavavarṇāh syuḥ, parāsuriti vidyāt| athāsyāṅgulīrāyacchēt; tasya cēdaṅgulaya āyamyamānā na sphuṭeyuḥ, parāsuriti vidyāt||6||

tathā_{asyocchvAsamanyAdantapakShmacakShuHkeshalomedaranakhA}ggullrAlakShayet| tasya cēducchvāsō_{atidIrgho}atihrasvo vA syAt, parAsuriti vidyAt| tasya cenmanye parimRushyamAne na spandeyAtAM, parAsuriti vidyAt| tasya ceddantAH parikIrnAH shvetā jAtasharkarAH syuH, parAsuriti vidyAt| tasya cet pakShmAni jaTAbaddhAni syuH, parAsuriti vidyAt| tasya ceccakShuShi prakRutihIne, vikRutiyukte- atyutpiNDite, atipraviShTe, atijihme, ativiShame, atimuktabandhane, atiprasrute, satatonmiShite, satatanimiShite, nimiShonmeShAtipravRutte, vibhrAntadRuShTike, viparItadRuShTike, hInadRuShTike, vyastadRuShTike [5] , nakulAndhe, kapotAndhe, alAtavarNe, kRuShNapItanllashyAvatAmraharitahAridrashuklavaikArikANAM varNAAnAmanyatamenAtiplate vA syAtAM, tadA parAsuriti vidyAt| athAsya keshalomAnyAyacchet, tasya cet keshalomAnyAyamyamAnAni pralucyeron na cedvedayeyustaM parAsuriti vidyAt| tasya cedudare sirAH prakAshera~j shyAvatAmranllahAridrashuklA vA syuH, parAsuriti vidyAt| tasya cennakhA vltamAMsashoNitAH pakvajAmbavavarNAH syuH, parAsuriti vidyAt| athAsyA~ggullrAyacchet; tasya ceda~ggulaya AyamyamAnA na sphuTeyuH, parAsuriti vidyAt||6||

The physician should similarly examine the patient's respiration, two sides of the neck, teeth, eye-lashes, eyes, hair covering the head as well as body hair, abdomen, nails and fingers.

Following are considered bad prognostic features:

- If patient breaths either too long or too short of a breath
- Absence of pulsation in vessels of neck.
- Teeth are coated, abnormally white and have sugar/crystal like deposits on it.
- Eye-lashes are matted together.
- Eyes have lost physiological characteristics or are seen abnormal in any manner like- too bulging, too retracted, too oblique or squinted, too distorted, too loosened within their structure, having too much watery discharge, are either

continuously open or closed, continuously blinking, with unstable vision, abnormal vision, deficient vision, have lost their keenness of vision (or color blindness), night blind, sees everything complete white or black, or red.

- If, patient sees halo of different colors like- black, yellow, blue, blackish, coppery, green, turmeric, white or any other abnormal color. Absence of pain on plucking hair from any part of his body.
- Visibly prominent veins on abdominal region and appear to have various colors like-black, copper, blue, turmeric-like or white.
- If the nails are drained of blood and flesh, they look dark purple in color.
- Lastly physician should examine the patient's finger. If there is no cracking sound while stretching or pulling the fingers,it should be known that the person will not survive.[6]

Summary

तत्र श्लोकः- एतान् स्पृश्यान् बहून् भावान् यः स्पृशन्नवबुद्धयते। आतुरे न स सम्मोहमायुर्जनस्य गच्छति॥७॥

tatra ślōkaḥ- ētān sprśyān bahūn bhāvān yaḥ sprśannavabudhyatē| āturē na sa sammōhamāyurjñānasya gacchatī||7|| tatra shlokaH- etAn spRushyAn bahUn bhAvAn yaH spRushannavabudhyate| Ature na sa sammohamAyur~jAnasya gacchatī||7||

Here is the re-capitulatory verse:

The physician who, by palpation ascertains various palpable signs, will never be confused regarding the matter of prognostic knowledge regarding life span of a patient. [7]

Tattva Vimarsha(Fundamental Principles)

Palpation of patient, observation of respiration, eyes can suggest prognosis of disease.

Vidhi Vimarsha (Applied Inferences)

The physician who, by palpation ascertains various palpable signs, will never be confused regarding the matter of prognostic knowledge regarding life span of a patient. [7]

Parimarshaneeyam Indriyam Adhyaya deals with signs and symptoms of imminent death or moribund symptoms; specifically those are elicited by touch or palpation. The chapter commences with the importance of palpation as a modality for diagnosis and any changes in the body indicative of imminent death. The signs of imminent death are seen as abnormal manifestations which cannot be explained as they appear without any reason. These can be seen as absence of pulsation in the areas of the body that are pulsatile, coldness in the warm areas of the body, rigidity in softer body parts, roughness in the body parts that are slimy in nature, the inexplicable absence of body parts; laxity, bowing or displacement of joints, excessive deficiency of flesh or blood,

solidity of flesh or blood, excessive perspiration or stiffness, and/or whatever other similar symptoms that can be demonstrated by palpation. The important point to note here is that all the signs and symptoms seen here as well as other chapters of Indriya Sthana are seen without any causative factors. The rest of the Charak Samhita excluding the Indriya Sthana comprises of various signs and symptoms due to vitiation of dosha. [Cha.Sa.Indriya Sthana 3/4]

Examples of palpation

The carotid artery is palpated with the thumb or finger tips placed at the upper end of the thyroid cartilage along the medial border of the sternocleidomastoid muscle.⁸ The absence of pulsation in carotid artery usually results from atherosclerosis or carotid artery stenosis. The pulsations of jugular veins or the study of carotid circulation by using color Doppler test can provide more information on cerebral health which can give important information on the life span of the individual.

Thermoregulatory center of hypothalamus actively monitors thermostasis. If this gets altered it's a sign of fatality. Sudden drop of body temperature could be a result of an injury, hemorrhage, acute illness or shock. A persistently low temperature is commonly seen in emaciation or wasting diseases, hypothyroidism or Simmonds diseases (post-partum hypopituitarism).⁹

Cancer is one of the leading causes of death and disease worldwide today. Various changes like rigidity in soft tissues (e.g. breast cancer) and roughness in mucosal membranes (changes seen in gastric cancer) or extreme wasting are a few changes associated with cancer. Absence of normally existing body parts can be understood as atrophy of various glands or overall muscle atrophy.

Assessment by palpation of body parts

The abnormal signs on palpation of body parts, observation of respiratory pattern and eyes can indicate specific underlying morbidity. The probable abnormal conditions are summarized in table 1 and 2.¹⁰ These parameters can be applied for clinical assessment of relevant factor. There is a wide scope for research on implementing these practices to predict prognosis and life span of individual.

⁸ Vagbhata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

⁹ Vagbhata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

¹⁰ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

Body Parts	Probable Related diseases
Ankle (gulpha)	Foot drop / Functional or chronic ankle instability / Predislocation syndrome / Subluxations and dislocations of ankle joint / Inflammatory joint disease / Multiple sclerosis / Amyotrophic lateral sclerosis / Charcot-Marie-Tooth disease etc
Knee(janu)	Subluxation & dislocation of patella / Genu valgum& varum / Rickets / Inflammatory joint diseases / Rupture of quadriceps tendon
Inguinal region or Hip joint (vankshana)	Acetabular rim syndrome / Avascular necrosis / Hip dysplasia / Labral tears / Dislocation of hip / Femoroacetabular impingement (FAI) / Acetabular dysplasia / Poliomyelitis / Femoral neck fracture (due to osteoporosis)
Anus(Guda)	Rectal prolapse or Procidentia / Adenocarcinoma of rectum or sigmoid colon / Rectosigmoid tumour / Ischio rectal abscess etc
Testicle / Scrotum(Vrishana)	Acquired cryptorchidism / Testicular torsion / various tumours of testes / Anteversion and inversion of testis etc
Penis(Medhra)	Peyronie's disease / Lichen sclerosis / Fournier's gangrene / Buried penis / Idiopathic partial thrombosis of corpus cavernosum (IPT) / Ischemic priapism etc
Umbilicus(Nabhi)	Exomphalos / Umbilical or paraumbilical hernias / Everted umbilicus due to intra abdominal neoplasms etc
Shoulder(Amsa)	Subluxation & dislocation of shoulder / winging of the scapula / Sprengel's deformity / Glenohumeral joint dysplasia / Rotator cuff disease (RCD) /

Body Parts	Probable Related diseases
Breast(Stana)	Adhesive capsulitis (frozen shoulder) / Subacromial impingement syndrome (SIS) / Labral tears etc Benign tumours and carcinoma of breast / Retracted, deviated, inverted and flattened nipples (due to abscess or neoplasms)
Wrist(Manika)	Radial or ulnar deviation / Flexion deformity / Rheumatoid hand / Madelung's deformity / Preiser's disease / Kienbock's disease / Ligament tears / Motor neuron disease (MND) / Wrist drop / Varus and Valgus deformities of wrist / Rickets / Lunate or perilunate dislocations etc
Rib(parshuka)	Metastatic rib lesions / Gorham disease / Chondrosarcoma / Fibrous dysplasia / Rib fractures / Cervical rib / Paget disease / Kyphosis / Scoliosis / Rachitic rosary etc
Jaw(hanu)	Subluxation or dislocation or ankylosis of TMJ (Temporomandibular joint) / Trismus / Oromandibular dystonia
Nose(nasika)	Saddle nose / Septal deviation / Sinonasal tumours / Rhinoscleroma / Leprosy / Nasal polyps etc
Ear(karna)	Protruding or bat ears / Cup shaped or low-set ears in Down syndrome / Cauliflower ears / Mastoid abscess / Ear tumours
Eye(akshi)	Exophthalmos (in Graves' disease) / Enophthalmos / Squint / Retro orbital or orbital tumours / Ophthalmoplegia etc
Eyebrow(bhru)	Madarosis / Facial nerve palsy / Horner syndrome / Myasthenia

Body Parts	Probable Related diseases
Temple region(shankha)	gravis / Brow tumours like pleomorphic adenoma etc Multiple venous malformations with phleboliths at temples / Giant cell arteritis / Intra cranial abscess / Temporal osteitis or myositis / Multiple myeloma / Maxillary carcinoma etc

Table 1: Specific signs on palpation of body part and probable relevant morbidity

Prognostic feature	Probable related morbidity
Exophthalmos(atyutpindite)	Graves ophthalmopathy / Retro orbital or orbital tumours / Orbital cellulitis / Severe glaucoma etc
Enophthalmos(atipravishite)	Horner's syndrome / Marfan syndrome / Duane's syndrome / Silent sinus syndrome / Phthisis bulbi / Atrophy etc
Crossed eyes(atijimhe)	Squint or Strabismus / Acquired paralytic strabismus in Diabetes / Graves disease / Guillain-Barre syndrome (GBS) / Stroke / Brain tumours / Hydrocephalus / Cerebral palsy etc
Uneven(ativishame)	Irregular astigmatism / Keratoconus / Central cornea islands / Map-Dot-Fingerprint dystrophy (MDF) / Cysts or tumours in one eye etc
Plegia(ati mukta bandhane)	Ophthalmoplegia / Myasthenia gravis / GBS / Kearns-Sayre syndrome / Foville's syndrome / Internuclear ophthalmoplegia / Multiple sclerosis / Parinaud's syndrome / Stroke / Wernicke encephalopathy / Cavernous sinus syndrome / Paralysis of cranial nerves (CN III, IV & VI) etc
Watering eyes(ati prasrite)	Epiphora / Allergic or infective conjunctivitis / Trichiasis /

Prognostic feature	Probable related morbidity
Lagophthalmos(satatonmishite)	Ectropion / Keratitis / Corneal ulcers / Chalazion / Bell's palsy / Dacrocystitis / Punctal eversion / Stevens-Johnson syndrome / Neoplasms etc
Drooping / Ptosis(satatanimishite)	Lagophthalmos / Symblepharon formation / Acquired oculomotor synkinesis / Exophthalmos / Facial palsy / Ectropion etc
Excessive blinking(Nimisha-unmesha atipravritte)	Ptosis / Ocular myopathies / Horner's syndrome / Cranial nerve palsy (CN III) / Myasthenia gravis / Stevens-Johnson syndrome / Atrophy etc
Dancing eyes(vibhranta drishtike)	Corneal abrasion / Trichiasis / Inflammatory or allergic conditions of eyes / Benign essential blepharospasm / Meige syndrome / Tics etc
Distorted vision(viparita drishtike)	Nystagmus / Cataracts / Strabismus / Meniere's disease / Multiple sclerosis / Stroke / B12 or Thiamine deficiencies / Brain tumours etc
Defective vision(heena drishtike)	Metamorphopsia / Age related macular degeneration / Astigmatism / Keratoconus / Glaucoma / Migraine / Epiretinal membrane etc
Oscillopsia(vyasta drishtike)	Central retinal artery or vein occlusion / Ischemic optic neuropathy / Vitreous haemorrhage / Retinal detachment / Acute glaucoma / Transient ischemic attack / Tumours or infections in brain etc
	Seizures / Multiple sclerosis / Superior oblique myokymia / Stroke / Meningitis / Brain tumours / Meniere's disease etc

Prognostic feature	Probable related morbidity
Nyctalopia(nakulandhe)	Congenital high myopia / Tapeto-retinal degeneration / Glaucoma / Cataract / Diabetes / Retinitis pigmentosa / Vitamin A deficiency etc
Hamarlopia(kapotandhe)	Cone dystrophy / Achromatopsia / Central lenticular opacity / Central cataracts / Cancer associated retinopathy (CAR) etc
Bloodshot eyes(alata varne)	Chemosis / Various inflammatory & allergic conditions / Acute conjunctivitis / Sub conjunctival haemorrhage / Glaucoma etc
Eye colour changes(anya vaikarika varnani)	Panda eye / Jaundice / Heterochromia iridis / Iris nevi / Pigment dispersion syndrome / Horner's syndrome / Osteogenesis imperfecta / Arcus senilis / Keyser Fleischer ring in Wilson's disease etc

Table 2: Specific signs on eyes and probable relevant morbidity

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Indriyaneekam Indriyam Adhyaya

Indriya Sthana Chapter 4.Fatal signs in five sense organs Abstract

This chapter explicates about the alterations in the perception of the five sense organs which reveal impending death of an individual. The previous three chapters described arishta lakshana as perceived by senses vision, sound, taste and touch. This chapter describes arishta lakshana as perceived by all five Indriya or senses. Indriya and *aneekam* indicate the group of all five sense organs. There is a good synchronization between all sense organs for conversion of information into the knowledge.

Keywords: Perceptions, alterations, fatal signs of senses.

Introduction

The perception by the sense organs has been described in Ayurveda to be a function of the conjunction of *mana* (mind) with the *atman* (soul), the sense organs (*indriya*) and its subject (*indriyartha*) (Figure 1.) File:organs as per Ayurveda.png Fig. 1 – Showing the chart of perception by the sense organs as per Ayurveda

The correct perception has been described to be the function of *mana* and *vata*. *Vata* is the entity which joins the *mana* and the above stated three other components. The functions of *mana* and *vata* account for in the modern medical sciences to that of the nervous system and its components.

Perception by the sense organs occurs through conduction by the peripheral nerves to the brain. Some of the sensory arishta perceptions described in this chapter are now also described in the modern medical science. The conditions due to defect in the nervous system and peripheral nerves such as Dysosmia (Distorted identification of smell), Parosmia (Altered perception of smell in the presence of an odor, usually unpleasant), Phantosmia (detection of smells which are not present), Ageusia (Inability to taste), Dysgeusia (Distorted ability to taste), paraesthesia (altered tactile perception) etc.. Some of these are described in this chapter as an indicator of forthcoming death.

Sanskrit text, Transliteration and English Translation

इन्द्रियानीकेन्द्रियोपक्रमः अथात इन्द्रियानीकमिन्द्रियं व्याख्यास्यामः||१|| इति ह स्माह
भगवानात्रेयः||२||

athāta indriyānīkamindriyam vyākhyāsyāmahi||1|| iti ha smāha bhagavānātrēyah||2||
athAta indriyAnIkamindriyaM vyAkhyAsyAmaH||1|| iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Indriyaneekam Indriyam” (Fatal signs in five sense organs). Thus said Lord Atreya.[1-2]

Note: This chapter highlights the features of imminent death by faulty perceptions of sense organs of a person.

Importance of examination using senses and inference

इन्द्रियाणि यथा जन्तोः परीक्षेत विशेषवित्।

जातुमिच्छन् भिषड्मानमायुषस्तन्निबोधत् ॥३॥ अनुमानात् परीक्षेत दर्शनादीनि तत्त्वतः।

अद्धा हि विदितं जानमिन्द्रियाणामतीन्द्रियम्॥४॥

indriyāṇi yathā jantōḥ parīkṣēta viśeṣavit॥

jñātumicchan bhiṣāñmānamāyusastannibōdhata ॥३॥ anumānāt parīkṣēta darśanādīni tattvataḥ॥

addhā hi viditam jñānamindriyāṇāmatīndriyam॥४॥ indriyA Ni yathA jantoH parIkSheta visheShavit॥

j~jAtumicchan bhiSha~gmAnamAyuShastannibodhata ॥३॥ anumAnAt parIkSheta darshanAdIni tattvataH॥

addhA hi viditaM j~jAnamindriyANAmatIndriyam॥४॥

We will now explain how an expert physician who is desirous to know the life span of the person. He should go with keen observations of the sensory perceptions by a patient. Some of the observations may be based on the inference on questioning, where the physician cannot apply his senses such as taste and visual alterations. [3-4]

Various fatal signs of changes in sensorium

स्वस्थेभ्यो विकृतं यस्य जानमिन्द्रियसंश्रयम् । आलक्ष्येतानिमित्तेन लक्षणं मरणस्य तत्॥५॥ इत्युक्तं लक्षणं सम्यग्गिन्द्रियेष्वशुभोदयम् । तदेव तु पुनर्भूयो विस्तरेण निबोधता॥६॥

svasthēbhyo vikṛtam yasya jñānamindriyasamśrayam | ālakṣyētānimittēna lakṣaṇam maraṇasya tat॥५॥ ityuktam lakṣaṇam samyagindriyēṣvaśubhōdayam| tadēva tu punarbhūyō vistareṇa nibōdhata॥६॥ svasthebhyo vikRutaM yasya j~jAnamindriyasaMshrayam [1] | AlakShyetAnimittaNaIakShaNaM maraNasya tat॥५॥ ityuktaM IakShaNaM samyagindriyeShvashubhodayam| tadeva tu punarbhUyo vistareNa nibodhata॥६॥

In case where patient's sense organs are healthy and even they perceive the altered sense without any apparent cause, denote the cause of imminent death. Other general and specific altered sensory perceptions will be dealt in detail in subsequent paragraphs.[5-6]

Abnormal visual perceptions

घनीभूतमिवाकाशमाकाशमिव मेदिनीम् । विगीतमुभयं हयेतत् पश्यन् मरणमृच्छति॥७॥

ghanībhūtamivākāśamākāśamiva mēdinīm| vigītamubhayar̄m hyētat paśyan maraṇamrcchatि॥७॥ ghanlbhUtamivAkAshamAkAshamiva medinIm| vigItamubhayaM hyetat pashyan maraNamRucchatि॥७॥

A person who views the sky as something solid (like the earth) and the earth like something void (like the sky), he is sure to die soon as both the above signs are inauspicious. [7]

यस्य दर्शनमायाति मारुतोऽम्बरगोचरः| अग्निर्नायाति चादीप्तस्तस्यायुःक्षयमादिशेत्॥८॥

yasya darśanamāyātī māruto'mbaragōcaraḥ| agnirnāyātī
cādīptastasyāyuḥkṣayamādiśēt||८|| yasya darshanamAyAti mAruto~ambaragocaraH|
agnirnAyAti cAdIptastasyAyuHkShayamAdishet||८||

One who visualizes the wind in the sky in a physical form but does not see the flame of a kindled fire, should be considered as a moribund person. [8]

जले सुविमले जालमजालावतते नरः| स्थिते गच्छति वा द्रष्ट्वा जीवितात् परिमुच्यते॥९॥

jalē suvimalē jālamajālāvatatē narah| sthitē gacchatī vā dṛṣṭvā jīvitāt parimucyatē||९||
jale suvimale jAlamajAIAvatate naraH| sthite gacchatī vA dRuShTvA jlvitAt
parimucyate||९||

A person if views net like appearance in clean water either stagnant or moving one, when actually there is no such net, then it constitutes the premonitory symptom of forthcoming death. [9]

जाग्रत् पश्यति यः प्रेतान् रक्षांसि विविधानि च| अन्यद्वाऽप्यद्भुतं किञ्चिन्न स जीवितुमर्हति॥१०॥

jāgrat paśyati yaḥ prētān rakṣāṁsi vividhāni ca| anyadvā'pyadbhutam kiñcinna sa
jīvitumarhati||१०|| jAgrat pashyati yaH pretAn rakShAMsi vividhAni ca|
anyadvA~apyadbhutaM ki~jcinna sa jlvitumarhati||१०||

If a person when awake, perceives various kinds of *pretas* (ghosts) and *rakshasas* (demons) or any other supernatural creatures he will not survive for long. [10]

योऽग्निं प्रकृतिवर्णस्थं नीलं पश्यति निष्प्रभम्| कृष्णं वा यदि वा शुक्लं निशां व्रजति सप्तमीम्॥११॥

yō'gnim prakṛtivarnastham nīlam paśyati niṣprabhām| kṛṣṇam vā yadi vā śuklam niśām
vrajati saptamīm||११|| yo~agniM prakRutivarNasthaM nllaM pashyati niShprabhām|
kRuShNaM vA yadi vA shuklaM nishAM vrajati saptamlm||११||

If a person perceives fire burning in its natural color but is lusterless, bluish, black or white, it is indicative of death of the patient after seven nights.[11]

मरीचीनसतो मेघान्मेघान् वाऽप्यसतोऽम्बरे| विद्युतो वा विना मेघैः पश्यन् मरणमृच्छति॥१२॥

marīcīnasatō mēghānmēghān vā'pyasatō'mbarē| vidyutō vā vinā mēghaiḥ paśyan
maraṇamrcchati||१२|| marlcInasato meghAnmeghAn vA_{apyasato}ambare| vidyuto vA vinA
meghaiH pashyan maraNamRucchati||१२||

If a person visualizes *marichi* (cloud light) or cloud or lightening when there is such no cloud or lightening present in the sky, it is indicative of imminent death of the person. [12]

मन्मयीमिव यः पात्रीं कृष्णाम्बरसमावृताम्। आदित्यमीक्षते शुद्धं चन्द्रं वा न स जीवति॥१३॥ अपर्वणि
 यदा पश्येत् सूर्यचन्द्रमसोर्गहम्। अव्याधितो व्याधितो वा तदन्ते तस्य जीवितम्॥१४॥ नक्तं
 सूर्यमहश्चन्द्रमनग्नौ धूममुत्थितम्। अग्निं वा निष्प्रभं रात्रौ दृष्ट्वा मरणमृच्छति॥१५॥ प्रभावतः
 प्रभाहीनान्निष्प्रभांश्च प्रभावतः। नरा विलिङ्गान् पश्यन्ति भावान् भावाञ्जिहासवः [३] ॥१६॥ व्याकृतीनि
 विवर्णानि विसङ्ख्योपगतानि च। विनिमित्तानि पश्यन्ति रूपाण्यायुःक्षये नराः॥१७॥ यश्च पश्यत्यदृश्यान्
 वै दृश्यान् यश्च न पश्यति। तावूभौ पश्यतः क्षिप्रं यमक्षयमसंशयम्॥१८॥

mṛṇmayīmiva yaḥ pātrīṁ kṛṣṇāmbarasamāvṛtāṁ| ādityamīkṣatē śuddhaṁ candram vā
 na sa jīvati॥१३॥ aparvanī yadā paśyēt sūryācandramasōrgraham| avyādhito vyādhito vā
 tadantam tasya jīvitam॥१४॥ naktam sūryamahaścandramanagnau dhūmamutthitam|
 agnīm vā niśprabham rātrau dṛṣṭvā maraṇamṛcchati॥१५॥ prabhāvataḥ
 prabhāhīnānniśprabhamśca prabhāvataḥ| narā viliṅgān paśyanti bhāvān
 bhāvāñjihāsavaḥ ||१६|| vyākṛtīni vivarṇāni visañkhyōpagatāni ca| vinimittāni paśyanti
 rūpānyāyuḥkṣayē narāḥ॥१७॥ yaśca paśyatydṛṣyān vai dṛṣyān yaśca na paśyati|
 tāvubhau paśyataḥ kṣipram yamakṣayamasamśayam॥१८॥ mRunmayīmiva yaH pAtrIM
 kRuShNAmbarasamAvRutAm| AdityamlkShate shuddhaM candraM vA na sa jīvati॥१३॥
 aparvaNi yadA pashyet sUryAcandramasorgraham| avyAdhito vyAdhito vA tadantaM
 tasya jīvitam॥१४॥ naktaM sUryamahashcandramanagnau dhUmamutthitam| agniMvA
 niShprabham rAtrau dRuShTVA maraNamRucchati॥१५॥ prabhAvataH
 prabhAhInAnniShprabhAMshca prabhAvataH| narA vili~ggAn pashyanti bhAvAn
 bhAvA~jjihAsavaH ||१६|| vyAkRutIni vivarNAni visa~gkhyopagatAni ca| vinimittAni
 pashyanti rUpANyAyuHkShaye narAH॥१७॥ yashca pashyatyadRushyAn vai dRushyAn
 yashca na pashyati| tAvubhau pashyataH kShipraM yamakShayamaMshayam॥१८॥

Here in these verses are further described some symptoms which when present indicate imminent death of the person –

- To see the sun or the moon painted or fixed on an earthen plate covered with a black cloth;
- To see solar or lunar eclipse when there is no such occasion.
- To see the sun at night, moon in the day, the smoke when there is no fire or to perceive fire without flame at night
- Appearance of bright things without luster and the ones having no luster as bright i.e. unable to view real or actual characteristics.
- To have visual perception of things in a distorted manner i.e. to visualize things as having multiple forms, devoid of complexion and in inaccurate numbers without any reason and
- To visualize the invisible ones and not to visualize the visible ones.[13-18]

Abnormal auditory perceptions

अशब्दस्य च यः श्रोता शब्दान् यश्च न बुद्धयते। द्रवावप्येतौ यथा प्रेतौ तथा ज्ञेयौ विजानता ॥१९॥
 संवृत्याङ्गुलिभिः कर्णौ ज्वालाशब्दं य आतुरः। न शृणोति गतासु तं बुद्धिमान् परिवर्जयेत्॥२०॥

aśabdasya ca yaḥ śrōtā śabdān yaśca na budhyatē| dvāvapyētau yathā prētau tathā
 jñēyau vijānatā ॥१९॥ saṁvṛtyāṅgulibhiḥ karṇau jvālāśabdām ya āturah| na śṛṇōti

gatāsum tam buddhimān parivarjayēt||20|| ashabdasya ca yaH shrotA shabdAn yashca na budhyate| dvAvapyetau yathA pretau tathA j~jeyau vijAnatA ||19|| saMvRutyA~ggulibhiH karNau jvAlAshabdaM ya AturaH| na shRuNoti gatAsuM taM buddhimAn parivarjayet||20||

A person who hears the inaudible sounds and doesn't hear the audible ones; and the one who is unable to hear the internal (stellar) sound after closing the ear with fingers is sure to die hence a knowledgeable physician should not engage in treating him.[19-20]

Abnormal olfactory perceptions

विपर्ययेण यो विद्यादगन्धानां साध्वसाधुताम्| न वा तान् सर्वशो विद्यातं विद्याद्विगतायुषम्||२१||

viparyayēṇa yō vidyādgandhānāṁ sādhvasādhutām| na vā tān sarvaśō vidyāttām
vidyādvigatāyuṣam||21|| viparyayeNa yo vidyAdgandhAnAM sAdhvasAdhutAm| na vA
tAn sarvasho vidyAttaM vidyAdvigatAyuSham||21||

If a person fails to distinguish between good and bad smells or is not responsive to any smells at all, he is to be considered as a moribund person.[21]

Abnormal gustatory perceptions

यो रसान्ज विजानाति न वा जानाति तत्त्वतः| मुखपाकादृते पक्वं तमाहुः कुशला नरम्||२२||

yō rasānna vijānāti na vā jānāti tattvataḥ| mukhapākādṛtē pakvarā tamāhuḥ kuśalā
naram||22|| yo rasAnna vijAnAti na vA jAnAti tattvataH| mukhapAkAdRute pakvaM
tamAhuH kushalA naram||22||

A person who is not able to detect the various gustatory sensations at all or has altered gustatory perception despite having no mouth ulcers or inflammation in the mouth; should also be considered ripe for death. [22]

Abnormal tactile perceptions

उष्णाञ्छीतान् खराञ्छलक्षणान्मृदूनपि च दारुणान् स्पृश्यान् स्पृष्ट्वा ततोऽन्यत्वं मुमर्षुस्तेषु
मन्यते||२३||

uṣṇāñchītān kharāñchlakṣṇānmṛdūnapi ca dāruṇān| spr̄ṣyān spr̄ṣtvā tatō'nyatvarā
mumarṣustēṣu manyatē||23|| uShNA~jchItAn kharA~jchlakShNAnmRudUnapi ca
dAruNAn| spRushyAn spRuShTvA tato~anyatvaM mumUrShusteShumanyate||23||

If a person perceives hot things as cold, coarseness as smoothness, softness as hardness and vice- versa by touch, he should also be considered as moribund person.[23]

Abnormal extra sensorial perceptions

अन्तरेण तपस्तीवं योगं वा विधिपूर्वकम्| इन्द्रियैरधिकं पश्यन् पञ्चत्वमधिगच्छति||२४|| इन्द्रियाणामृते
हष्टेरिन्द्रियार्थानदोषजान्| नरः पश्यति यः कश्चिदिन्द्रियैर्न स जीवति||२५||

antarēṇa tapastīvraṁ yōgaṁ vā vidhipūrvakam| indriyairadhikarṁ paśyan
 पञ्चत्वम् पाञ्चत्वम् अद्विगच्छति ॥२४॥ indriyāṇāmr̥tē dṛṣṭērindriyārthānādōṣajān| narah
 paśyati yaḥ kaścidindriyairna sa jīvati ॥२५॥ antareNa tapastIvraM yogaM vA
 vidhipUrvakam| indriyairadhikaM pashyan pa~jcatvamadwigacchatil ॥२४॥
 indriyANAmRute dRuShTerindriyArthAnadoShajAn| naraH pashyati yaH
 kashcidindriyairna sa jlvti ॥२५॥

If a person starts having the perception of supernatural things without being preceded by severe ascetic practices or penance or by means of *yogic* practices, it is indicative of imminent death. [25]

अस्वस्था: प्रज्ञाविपर्यासैरिन्द्रियार्थेषु वैकृतम्। पश्यन्ति ये ऽसद्बहुशस्तेषां मरणमादिशेत्॥२६॥
 asvasthāḥ prajñāviparyāsairindriyārthēṣu vaikṛtam| paśyanti yē'sadbahuśastēṣām [1]
 maraṇamādiśēt ॥२६॥ svasthAH praj~jAviparyAsairindriyArtheShu vaikRutam| pashyanti
 ye~asadbahushasteShAM [1] maraNamAdishet ॥२६॥

If an otherwise healthy person starts perceiving things wrongly in contradiction to the normal relationship between the sense organs and their subjects as a result of mental perversion is sure to die soon. [26]

Summary

तत्र श्लोकः- एतदिन्द्रियविज्ञानं यः पश्यति यथातथम्। मरणं जीवितं वैव स भिषक् जातु मर्हति ॥२७॥
 tatra ślōkaḥ- ētadindriyavijñānam yaḥ paśyati yathātatham| maraṇam jīvitam caiva sa
 bhiṣak jñātumarhati ॥२७॥ tatra shlokaH- etadindriyavij~jAnaM yaH pashyati
 yathAtatham| maraNaM jlvtiM caiva sa bhiShak j~jAtumarhati ॥२७॥

To conclude, it can be said that a physician who knows the science of premonition of death as indicated by the characteristic features of the sense organs can very easily distinguish between life and death.[27]

Tattva Vimarsha (Fundamental Principles)

Indriya (sense organs) and their connection with mind to perceive the right object is important for health. If this is severely altered, then *arishta* (near death signs) are observed as wrong perceptions.

Vidhi Vimarsha (Applied Inferences)

Normally all senses are specific for a special purpose. One cannot be replaced by another. Usually there is a good synchrony seen during functioning of sensory organs.

Ideal code and conduct (achara rasayana)

A child and his senses (*indriya*) start getting trained according to codes and conducts of the society soon after birth and grow in that society normally and there is continued training throughout life. Intellectual errors (Pragyapradha) leads to altered behavior by

false and uncontrolled perception by senses, this can also occur because of alcohol, substance abuse or mental illness etc. If there is no known cause for the altered behavior then it can be called bad prognostic feature (arishta) and has been considered as a sign of fatality.

This chapter deals about the various perversions of the perception of the sensory organs. All these symptoms resemble the manifestations also seen in psychiatric conditions. It is important to keep in mind that the bad prognostic features (arishta lakshana) should be considered after excluding known conditions causing such symptoms, then only they should be valued as a tool to gauge span of life.

Assessment by sensory perceptions

The abnormal signs of visual, auditory, olfactory, gustatory and tactile sensations can be observed on the patient. These can indicate specific underlying morbidity. The probable abnormal conditions are summarized in table 1 and 2.¹¹ These parameters can be applied for clinical assessment of relevant factor. There is a wide scope for research on implementing these practices to predict prognosis and life span of individual.

Abnormal visual perception	Relevant pathology
Abnormal perception of sky and earth [Chakrapani on Cha.Sa.Indriya Sthana 4/7]	Visual perceptual distortions (VPDs)
Seeing wind in atmosphere [Cha.Sa.Indriya Sthana 4/8]	Visual hallucinations
Not seeing flame in kindled fire [Cha.Sa.Indriya Sthana 4/8]	Achromatopsia / Dyschromatopsia / Scieropia
Seeing net in clean water [Cha. Sa. Indriya Sthana 4/9]	Myodesopsia
Views of dead bodies, ghosts, demons when awake [Cha. Sa. Indriya Sthana 4/10]	Visual hallucinations
Extra sensorial or super natural views [Cha. Sa. Indriya Sthana 4/10]	Complex visual hallucinations / Photopsia
Abnormal colours and view of fire [Cha.Sa.Indriya Sthana 4/11]	Monochromats / Dichromats / Achromatopsia/ Cerebral dyschromatopsia

¹¹ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Abnormal visual perception	Relevant pathology
Seeing lightning without clouds [Cha.Sa.Indriya Sthana 4/12]	Visual hallucinations
Abnormal views of the Sun and Moon [Cha.Sa.Indriya Sthana 4/13-18]	Scieropia / Scierneuropsia/ Achromatopsia/ Hemeralopia/ Simple or complex visual hallucinations/ Colour agnosia/ Photopsia / Hyperchromatopsia/ Metamorphopsia / VPDs/ Micropsia / Macropsia / Pelopsia / Teleopsia / Dysmetropsia / Prosometamorphopsia / Visual illusions/ Dyschromatopsia/ Diplopia / Polyopia / Entomopia/ Apperceptive agnosia / Agnosopsia / Visual agnosia

Table 1: Prognostic features of visual perceptions

Abnormal sensory perception	Relevant pathology
Hears inaudible sounds [Cha.Sa.Indriya Sthana 4/19]	Auditory hallucinations
Don't hear audible sounds [Cha.Sa.Indriya Sthana 4/19]	Auditory agnosia
Unable to hear stellar sound after closing ears by fingers [Cha.Sa.Indriya Sthana 4/20]	Physiological tinnitus / Phantom noises / Spontaneous autoacoustic emissions (SOAE)
Abnormal olfactory sensation [Cha.Sa.Indriya Sthana 4/21]	Dysosmia / Parosmia / Cacosmia
Unable to smell [Cha.Sa.Indriya Sthana 4/21]	Anosmia
Unable to recognize taste [Cha.Sa.Indriya Sthana 4/22]	Ageusia / Hypogeusia
Altered gustatory sensation [Cha.Sa.Indriya Sthana 4/22]	Dysgeusia / Pargueusia / Phantogeusia
Altered tactile sensation [Cha.Sa.Indriya Sthana 4/23]	Dysesthesia / Paresthesia / Allodynia / Lack of tactile discrimination ability
Excessive sensations [Cha.Sa.Indriya Sthana 4/24]	Extra sensory perception (ESP), Altered states of consciousness (ASC), Hallucinations

Abnormal sensory perception	Relevant pathology
Supernatural sensations without ascetic practices or penance [Cha.Sa.Indriya Sthana 4/25]	Mental imagery / Phantom perception / Hallucinations / Neuroplasticity / Synesthesia
Defective intellectual functions [Cha.Sa.Indriya Sthana 4/26]	Cognitive distortions

Table 2: Prognostic features of auditory, olfactory, gustatory and tactile perceptions

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Purvarupeeyam Indriyam Adhyaya

Indriya Sthana Chapter 5. Predicting prognosis of diseases by prodromal symptoms Abstract

Purvarupeeyam Indriyam Adhyaya has been devoted to predict prognosis of diseases by prodromal symptoms. This chapter suggests that knowledge and examination of prodromal symptoms was important in ancient times and emphasis was given that physician should carefully recognize disease in early stage and predict course of disease. With the help of eight diseases of Nidana Sthana important principles related to prognosis have been laid down which are also applicable to all other diseases and are valid till now. Various aspects of dreams including physiology, types, interpretation and prognostic importance have also been described. Various dreams along with physical and mental features have been incorporated in prodromal symptoms which signify that dreams should also be analyzed and properly investigated before predicting prognosis of any disease. Even with restricted technological tools, par excellence observation and principles described regarding Arishta Lakshana are valid till now.

Keywords: Prodromal symptoms, dream, prognosis, disease, death.

Introduction

In this chapter prodromal symptoms and dreams related to poor prognosis of diseases-fatality are described. In the first verse, Charak has emphasized that he will describe both common and special prodromal symptoms. This indicates that while there may be some prodromata which result out of normal pathogenesis, some are unusual and unexpected. In the next verse it has been said that if all prodromal symptoms are manifesting and are severe in nature then such a condition will be fatal. This principle is applicable to all other diseases also. Prodromal symptoms of kushtha and prameha suggest that complications manifest before cardinal symptoms of the disease appear. If body metabolism in any disease is altered severely during latent phase of disease and complications are appearing before manifestation of full-fledged disease then such condition will be difficult to cure. Example of gulma suggests that there are certain diseases which are incurable in nature and prodromal symptoms related to such clinical conditions will always be precursors of imminent death. It is commonly seen that any person who is emaciated and have low immunity and strength, when affected by disease, has fatal consequences due to less resistance. This fact is explained with the example of shosha. Another important aspect regarding disease prognosis is that, if a person is continuously partaking causative factors or is in constant exposure to the causative factors, body will be unable to fight disease properly and thus there will be less chances of recovery from the disease. This point is also mentioned while describing prognosis of shosha.

From the above discussion it is clear that prodromal symptoms can be useful in predicting diagnosis of any disease. But now question arises whether it is practically

possible to predict prognosis with prodromal symptoms? We should admit that it is very difficult and one will need years of experience to attain such competence. Another important fact is that the prediction of prognosis can be done from purvarupa only after disease manifestation. Charak states that purvarupa converting into a particular disease in future can be termed a prognostic sign. This indicates that we cannot predict by only prodromal symptoms. We have to look into whether disease was produced after purvarupa or not. For example, delirium in raktapitta is indicator of poor prognosis. If delirium is seen in any patient but he is not developing raktapitta we cannot predict poor prognosis. In this condition, after manifestation of raktapitta we need to ask the patient whether he suffered from delirium before disease manifestation or not. It is a retrospective inquiry about purvarupa based on which a prospective prediction may be made. We will have to follow detailed retro-prospective approach and will need proper patient history comprising of each and every detail from prodromal symptoms to disease manifestation. Thus practically, prodromal symptoms are helpful only after disease manifestation as they are not independent. Since accompanying symptoms may also lead to predictions, they can also be regarded as tools of predictive prognosis. This might be the reason that Sushruta and Vaghbhata have not described dreams in reference of purvarupa but have described in the stage of disease manifestation.

Biomarkers are recent advancements can be the answer to above problem as we do not need to wait for disease manifestation and can predict prognosis by seeing values of biomarkers related to that disease. In 2001, a consensus panel at the National Institutes of Health defined the term biomarker as 'a characteristic that is objectively measured and evaluated as an indicator of normal biological processes, pathogenic processes, or pharmacologic responses to a therapeutic intervention or other health care intervention'.¹² Biomarker defined as alteration in the constituents of tissues or body fluids provide a powerful approach to understanding the spectrum of chronic disease with application in at least 5 areas like screening, diagnosis, prognostics, prediction of disease recurrence and therapeutic monitoring.¹³ The biomarker is either produced by the diseased organ (e.g., tumor) or by the body in response to disease. Before diagnosis, markers could be used for screening and risk assessment. Tumor classification, stage and sometimes grade are generally used to assess prognosis. Researches in the field of biomarkers may give us chance to know prognosis of disease in early stage.

Another important aspect mentioned in this chapter is concept of dreams. The descriptions related to dreams are found abundantly in the ancient oriental classics,

¹² Vaghbhata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

¹³ Vaghbhata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

specifically the Atharvaveda, Upanishadas, Puranas, Darshanas and Ayurveda]. The description of the *doshika* dreams of the Atharvaveda is similar to that in Ayurveda. Dreams are mentioned while describing purvarupa, rupa and arishta lakshanias.¹⁴ Sushruta states that sex of the unborn child can be predicted and Vaghbata says that "doshika prakriti can be known by the help of dreams.

Subject of dreams is dealt in very scientific manner. According to Charak, dreams occur when person is in relatively wakeful state. This has been proved now by the researches that dreams mainly occur in the rapid-eye movement (REM) stage of sleep—when brain activity is high and resembles that of being awake. In the late 19th century, psychotherapist Sigmund Freud developed a theory that the content of dreams is driven by unconscious wish fulfillment. Freud called dreams the "royal road to the unconscious".¹⁵ To Freud, no dream was of entertainment value, they all held important meanings. Dreams reflect the dreamer's mental, emotional, and physical state. This fact is well established in this chapter while describing classification of dreams. Dreams are based on our day to day interactions and so are classified as dreams seen, heard, felt etc. Two of the seven types, one which predict prognosis and one which is due to vitiation of dosha are said to have fatal consequences.

Research studies are needed to prove that dreams can be used as markers of prognosis. Some studies have been conducted in this regard but we cannot make strong conclusion on basis of their results. In a few studies it has been shown that hormone levels affect dreams. One of the studies states that cortisol plays an important role in controlling the state of memory systems during sleep. High levels of cortisol, as are observed late at night and, typically in the context of REM sleep, disrupt normal hippocampal → neocortical communication, thereby interfering with forms of memory consolidation dependent upon this communication. At the same time, the content of dreams is also affected.¹⁶ In neurological and psychological diseases dream disturbances are often seen but few other diseases have also been found to affect dreams. Patients with sleep apnea are reported to have intense nightmares.¹⁷ Abnormal

¹⁴ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

¹⁵ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

¹⁶ Sushruta. Sutra Sthana, Cha.17 Amapkweshaneeya Adhyaya verse 3 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

¹⁷ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 21-42. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

dreams have also been reported in diseases like Relapsing fever,¹⁸ Cardiac ischemia¹⁹ etc. Certain drugs also affect dreams e.g. Anti malarial drug has shown to alter dream types.²⁰ This proves that at times diseases certainly affect dreams but intense research studies are needed to actually establish this fact on scientific grounds.

Sanskrit text, Transliteration and English Translation

अथातः पूर्वरूपीयमिन्द्रियं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātaḥ pūrvarūpiyamindriyam vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAtaH pUrvarUplyamindriyaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Purvarupeeyam Indriyam”(Predicting prognosis of diseases by prodromal symptoms). Thus said Lord Atreya.[1-2]

Note: This chapter deals with of premonitory symptoms related to signs of death.

Incurable prodromal signs of Jwara leading to death

पूर्वरूपाण्यसाध्यानां विकाराणां पथक् पृथक् भिन्नाभिन्नानि वक्ष्यामो भिषजां जानवृद्धये||३||
पूर्वरूपाणि सर्वाणि ज्वरोक्तान्यतिमात्रया| यं विशन्ति विशत्येनं मृत्युज्वरपुरःसरः||४|| अन्यस्यापि च
र्गस्य पूर्वरूपाणि यं नरम्| विशन्त्यनेन कल्पेन तस्यापि मरणं ध्रुवम्||५||

pūrvarūpāṇyasādhyānāṁ vikārāṇāṁ pṛthak pṛthak| bhinnābhinnāni vakṣyāmō bhiṣajāṁ
jñānavṛddhayē||३|| pūrvarūpāṇi sarvāṇi jvarōktānyatimātrayā| yaṁ viśanti viśatyēnāṁ
mr̥tyurjvarapuraḥsarah||४|| anyasyāpi ca rōgasya pūrvarūpāṇi yaṁ naram| viśantyanēna
kalpēna tasyāpi maraṇāṁ dhruvam||५|| pUrvarUpANyAsAdhyAnAM vikArANAM
pRuthak pRuthak| bhinnAbhinnAni vakShyAmo bhiShajAM j~jAnavRuddhaye||३||
pUrvarUpANi sarvANi jvaroktAnyatimAtrayA| yaM vishanti vishatyenAM
mRutyurjvarapuraHsaraH||४|| anyasyApi ca rogasya pUrvarUpANi yaM naram|
vishantyanena kalpena tasyApi maraNaM dhruvam||५||

¹⁸ Madhavakara. Madhava Nidanam (Roga vinischaya). Translated from Sanskrit by K. R. Srikantha Murthy. 8th ed. Varanasi: Chaukhambha orientalia;2007.pp–

¹⁹ Sushruta. Nidana Sthana, Cha.11 Grandhiapachiarbudagalaganda Nidana Adhyaya verse 13-14 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

²⁰ American Journal of Clinical Nutrition. November 2004; 80(5):1185-93.

For enhancing the knowledge of physicians, we will distinctly explain the general and fatal prodromal symptoms of diseases. If all prodromal symptoms of jwara manifests in severe degree, the person will die. If prodromal symptoms of any other disease also appear in the same way as described above, death of the patient is certain. [3-5]

Incurable prodromal signs of Rajayakshma leading to death

पूर्वरूपैकदेशांस्तु वक्ष्यामोऽन्यान् सुदारुणान्| ये रोगाननुबद्धनन्ति मृत्युर्यनुबद्धयते [१] ||६|| बलं च हीयते यस्य प्रतिशयायश्च वर्धते| तस्य नारीप्रसक्तस्य शोषोऽन्तायोपजायते||७|| शवभिरुष्टैः खरैर्वाऽपि याति यो दक्षिणां दिशम्| स्वप्ने यक्षमाणमासादय जीवितं स विमुञ्चति||८|| प्रेतैः सह पिबेन्मद्यं स्वप्ने यः कृष्यते शुना| सुधोरं ज्वरमासादय जीवितं स विमुञ्चति||९||

pūrvarūpaikadēśāṁstu vakṣyāmō'nyān sudāruṇān| yē rōgānanubadhnanti
mr̥tyuryairanubadhyatē ||6|| balaṁ ca hīyatē yasya pratiṣyāyaśca vardhatē| tasya
nārīprasaktasya śōṣo'ntāyōpajāyatē||7|| śvabhiruṣṭraih kharairvā'pi yāti yō dakṣināṁ
diśam| svapnē yakṣmāṇamāsādya jīvitam sa vimuñcati||8|| prētaih saha pibēnmadyam
svapnē yah kr̥syatē śunā| sughōram jvaramāsādya jīvitam sa vimuñcati||9||
pUrvarUpaikadeShAMstu vakShyAmo~anyAn sudAruNAn| ye rogAnanubadhnanti
mRutyuryairanubadhyate ||6|| balaM ca hlyate yasya pratishyAyashca vardhate| tasya
nArlprasaktasya shoSho~antAyopajAyate||7|| shvabhiruShTraiH kharairvA~api yAti yo
dakShiNAM disham| svapne yakShmANamAsAdya jlitaM sa vimu~jcati||8|| pretaiH
saha pibenmadyaM svapne yaH kRuShyate shunA| sughoraM jvaramAsAdya jlitaM sa
vimu~jcati||9||

Now we shall discuss certain severe premonitory symptoms which are associated with certain diseases. The consumption which is associated with continuously decreasing strength, worsening rhinitis and over indulgence in sex in prodromal stage will turn out to be incurable.

A man, who in his dreams, is dragged by dog, camel or a donkey towards south, leaves his life as by consumption. A person who in his dreams takes alcohol with demons and who is dragged by a dog leaves his life getting affected with severe fever. [6-9]

Incurable prodromal signs of Raktapitta leading to death

लाक्षारक्ताम्बराभं यः पश्यत्यम्बरमन्तिकात्| स रक्तपितमासाद्य तेनैवान्ताय नीयते||१०||
रक्तस्त्रग्रक्तसर्वाङ्गो रक्तवासा मुहुर्हसन्| यः स्वप्ने ह्रियते नार्या स रक्तं प्राप्य सीदति||११||

lākṣāraktāmbarābhāṁ yah paśyatyambararamantikāt| sa raktaPittamāsādya tēnaivāntāya
nīyatē||10|| raktasragraktaSarvāṅgō raktavāsā muhurhasan| yah svapnē hriyatē nāryā
sa raktam prāpya sīdati||11|| IAkShAraktAmbarAbhaM yaH pashyatyambararamantikAt|
sa raktaPittamAsAdya tenaivAntAya nlyate||10|| raktasragraktaSarvA~ggo raktavAsA
muhrhasan| yaH svapne hriyate nAryA sa raktaM prApya sīdati||11||

He who sees clothes as if dyed with red lac, leaves his life if he gets affected with severe bleeding disorders. In his dream, the man who sees himself adorned with red garlands, clad in red clothes, anointed with red dye and dragged by a continuously laughing woman will succumb to severe bleeding disorders. [10-11]

Incurable prodromal signs of Gulma leading to death

शूलाटोपान्त्रकूजाश्च दौर्बल्यं चातिमात्रया। नखादिषु च वैवर्ण्यं गुल्मेनान्तकरो ग्रहः॥१२॥ लता कण्टकिनी
यस्य दारुणा हृदि जायते। स्वप्ने गुल्मस्तमन्ताय क्रूरो विशति मानवम्॥१३॥

śūlāṭopāntrakūjāśca daurbalyam cātimātrayā| nakhādiṣu ca vaivarṇyam
gulmēnāntakarō grahah||12|| latā kanṭakinī yasya dāruṇā hṛdi jāyatē| svapnē
gulmastamantāya krūrō viśati mānavam||13|| shUATopAntrakUjAshca daurbalyaM
cAtimAtrayA| nakhAdiShu ca vaivarNyaM gulmenAntakaro grahaH||12|| latA kaNTakinI
yasya dAruNA hRudi jAyatē svapne gulmastamantAya krUro vishati mAnavam||13||

A man who experiences severe pain, gurgling sounds in abdomen, intestinal peristalsis, excessive debility, discoloration of nails and other body parts is going to die if he is affected with gulma.

A person, who in his dreams sees hard and thorny creepers grown on his chest and then gets afflicted by gulma, is surely going to die soon. [12-13]

Incurable prodromal signs of Kushtha leading to death

कायेऽल्पमपि संस्पृष्टं सुभृंशं यस्य दीर्यते। क्षतानि च न रोहन्ति कष्ठैर्मृत्युर्हिनस्ति तम्॥१४॥
नग्नस्याज्यावसिक्तस्य जुहवतोऽग्निमनर्चिषम्। पद्मान्युरसि जायन्ते स्वप्ने कुष्ठैर्मरिष्यतः॥१५॥

kāyē'lpamapi saṁspr̥ṭam subhṛśam yasya dīryatē| kṣatāni ca na rōhanti
kuṣṭhairmr̥tyurhinasti tam||14|| nagnasyājyāvasiktasya juhvato'gnimanarcīṣam|
padmānyurasi jāyantē svapnē kuṣṭhairmarisyataḥ||15|| kAye~alpamapi saMspRuShTaM
subhRushaM yasya dlryate| kShatAni ca na rohanti kuShThairmRutyurhinasti tam||14||
nagnasyAgyAvasiktasya juhvato~agnimanarciSham| padmAnyurasi jAyante svapne
kuShThairmariShyataH||15||

A person whose body even if touched gently leads to deep cuts and whose injuries never heal will be killed by severe skin diseases. In his dream, a man who sees himself naked, anointed with ghee, offering the oblations without the fire being lit, who has lotuses grown on his chest, will be taken away by death as afflicted by skin diseases.[14-15]

Incurable prodromal signs of Prameha leading to death

स्नातानुलिप्तगात्रेऽपि यस्मिन् गृध्नन्ति मक्षिकाः। स प्रमेहेण संस्पर्शं प्राप्य तेनैव हन्यते॥१६॥ स्नेहं
बहुविधे स्वप्ने चण्डालैः सह यः पिंबेत्। बृद्यते स प्रमेहेण स्पृश्यतेऽन्ताय मानवः॥१७॥

snātānuliptagātrē'pi yasmin gr̥dhnanti makṣikāḥ| sa pramēhēṇa saṁsparśāṇ prāpya
tēnaiva hanyatē||16|| snēham bahuvidham svapnē caṇḍālaiḥ saha yaḥ pibēt| badhyatē
sa pramēhēṇa spr̥syatē'ntāya mānavah||17|| snAtAnuliptagAtre~api yasmin gRudhnanti
makShikAH| sa prameheNa saMsparshaM prApya tenaiva hanyate||16|| snehaM
bahuvidhaM svapne caNDAlaiH saha yaH pibet| badhyate sa prameheNa
spRushyate~antAya mAnavaH||17||

Even after taking bath and getting anointed with scents, flies are attracted towards person, he will certainly die, if affected with prameha.

One who sees in his dreams, drinking various kinds of oily substances with Chandalas becomes affected by prameha and will die. [16-17]

Incurable prodromal signs of Unmada and Apasmara leading to death

द्यानायासौ तथोद्वेगौ मोहश्चास्थानसम्भवः| अरतिर्बलहानिश्च मृत्युरुन्मादपर्वकः||१८|| आहारद्वेषिणं
पश्यन् लुप्तचित्तमुदर्दितम्| विद्यादधीरो मुमूर्षु तमुन्मादेनातिपातिना॑॥१९॥ क्रोधनं त्रासबहुलं
सकृतप्रहौसेताननम्| मूर्छोपिपासाबहुलं हन्त्युन्मादः शरीरिणम्॥२०॥ नृत्यन् रक्षोगणैः साकं यः
स्वप्नेऽम्भसि सीदति | स प्राप्य भशमून्मादं याति लोकमतः परम्॥२१॥ असत्तमः पश्यति यः
शृणोत्यप्यसतः स्वनान्| बहून् बहुविधान् जाग्रत् सोऽपस्मारेण बृद्धयते॥२२॥ मत्तं नृत्यन्तमाविद्य प्रेतो
हरति यं नरम्| स्वप्ने हरति तं मृत्युरपस्मारपुरःसरः॥२३॥

dhyānāyāsau tathōdvēgau mōhaścāsthānasambhavaḥ| aratirbalahāniśca
mr̄tyurunmādapūrvakah||18|| āhāradvēṣināṁ paśyan luptacittamudarditam| vidyāddhīrō
mumūrṣuṁ tamunmādēnātipātinā||19|| krōdhanāṁ trāsabahulāṁ sakṛtprahāsitānanām|
mūrcchāpāsābahulāṁ hantyunmādaḥ śarīriṇam||20|| nṛtyan rakṣogāṇaiḥ sākāṁ yaḥ
svapnē’mbhasi sīdati | sa prāpya bhṛśamunmādaṁ yāti lōkamataḥ param||21||
asattamaḥ paśyati yaḥ śr̄ṇōtyapyasataḥ svanān| bahūn bahuvidhān jāgrat
sō’pasmārēṇa badhyatē||22|| mattaṁ nṛtyantamāvidhya prētō harati yaṁ naram| svapnē
harati tam mṛtyurapasmārapurāḥsarah||23|| dhyAnAyAsau tathodvegau
mohashcAsthAnasambhavaH| aratirbalahAnishca mRutyurunmAdapUrvakaH||18||
AhAradveShiNaM pashyan luptacittamudarditam| vidyAddhlro mumUrShuM
tamunmAdenAtipAtinA||19|| krodhanaM trAsabahulaM sakRutprahāsitAnanam|
mUrcchApipAsAbahulaM hantyunmAdaH sharIriNam||20|| nRutyan rakShogaNaiH
sAkāM yaH svapne~ambhasi sīdati | sa prApya bhRushamunmAdaM yAti lokamataH
param||21|| asattamaH pashyati yaH shRuNotyapyasataH svanAn| bahUn bahuvidhAn
jAgrat so~apasmAreNa badhyate||22|| mattaM nRutyan tamAvidhya preto harati yaM
naram| svapne harati taM mRutyurapasmArapuraHsaraH||23||

He who is affected with disturbing thoughts, anxiety, stupefaction without any specific cause, restlessness, loss of strength will succumb to death as affected with insanity.

The person who feels excess anger, fear, always smiles and who is suffering from severe stupor and thirst will be certainly killed by insanity.

The man who in his dreams dances with evil spirits and sinks in water leaves the world. He who sees darkness even when he is awake and hears sounds when there is no real sound, will be killed by epilepsy. In dream, a person who sees himself dancing with ghosts while in intoxication with his head upside down, will be taken away by death getting affected with epilepsy. [18-23]

Incurable prodromal signs of bahirayama leading to death

स्तङ्ग्येते प्रतिबुद्धस्य हनू मन्ये तथाऽक्षिणी। यस्य तं बहिरायामो गृहीत्वा हन्त्यसंशयम्॥२४॥
शज्कलीर्वाऽप्यपूपान् वा स्वप्ने खादति यो नरः। स चेताद्वृक् छर्दयति प्रतिबुद्धो न जीवति॥२५॥

stabhyētē pratibuddhasya hanū manyē tathā'kṣinī| yasya tam bahirāyāmō gr̄hītvā
 hantyasamśayam||24|| śaśkulīrvā'pyapūpān vā svapnē khādati yō naraḥ| sa cēttādṛk
 chardayati pratibuddhō na jīvati||25|| stabhyete pratibuddhasya hanU manye
 tathA~akShiNī| yasya taM bahirAyAmo gRuhltvA hantyasaMshayam||24||
 shaShkullrvA~apyapUpAn vA svapne khAdati yo naraH| sa cettAdRuk chardayati
 pratibuddho na jlvati||25||

If individual is found with bahirayama(a disease with feature of opisthotonus or bending of body backwards) soon after awaking from sleep along with lock jaw, neck stiffness, stale eyes and paralysis is going to lose life soon.

Such an individual in his dream sees himself taking cakes of sesame seeds and *apupa* (a dietary item) and vomits the same when he is awake.[24-25]

General prodromal features and prognosis

एतानि पूर्वरूपाणि यः सम्यगवबुध्यते| स एषामनुबन्धं च फलं च ज्ञातुमर्हति||२६||

ētāni pūrvarūpāṇi yaḥ samyagavabudhyatē| sa ēśāmanubandham ca phalam ca
 jñātumarhati||26|| etAni pUrvarUpANi yaH samyagavabudhyate| sa eShAmanubandhaM
 ca phalaM ca j~jAtumarhati||26||

One who (physician) understands these premonitory symptoms thoroughly, also deserves the knowledge of associated diseases and their result i.e. death.[26]

इमांश्चाप्यपरान् स्वप्नान् दारुणानुपलक्षयेत्| व्याधितानां विनाशाय क्लेशाय महतोऽपि वा||२७||
 यस्योत्तमाङ्गे जायन्ते वंशगुल्मलतादयः| वर्यांसि च विलीयन्ते स्वप्ने मौण्ड्यमियाच्च यः||२८||
 गृध्रोलूकश्वकाकाद्यैः स्वप्ने यः परिवार्यते| रक्षःप्रेतपिशाचस्त्रीचण्डालद्रविडान्धकैः ||२९||
 वर्शवेत्रलतापाशतृणकण्टकसङ्कटे| संसज्जति हि यः स्वप्ने यो गच्छन् प्रपतत्यपि||३०|| भूमौ
 पांशुपथानायां वल्मीके वाऽथ भस्मनि| श्मशानायातने शवभ्रे स्वप्ने यः प्रपतत्यपि ||३१|| कलुषेऽम्भसि
 पड़के वा कपे वा तमसाऽस्वरूपे| स्वप्ने मज्जति शीघ्रेण स्रोतसा ह्रियते च यः||३२|| स्नेहपानं तथाऽभ्युड्गः
 प्रच्छर्दनविरैचने| हिरण्यलाभः कलहः स्वप्ने बन्धपराजयौ||३३|| उपानद्युग्नाशश्च प्रपातः पादचर्मणोः|
 हर्षः स्वप्ने प्रकुपितैः पितृभिंश्चावभर्त्सनम्||३४|| द्रन्तचन्द्राक्नक्षत्रदेवतादीपचक्षुषाम् | पतनं वा विनाशो
 वा स्वप्ने भेदो नगस्य वा||३५|| रक्तपृष्ठं वनं भूमिं पापकर्मालयं चिताम्| ग्रहान्धकारसम्बाधं स्वप्ने यः
 प्रविशत्यपि||३६|| रक्तमाली हसन्नुच्छैटिग्वासा दक्षिणां दिशम्| दारुणामटकीं स्वप्ने कपियक्तेन याति
 वा||३७|| काषायिणामसौम्यानां नरनानां दण्डधारिणाम्| कृष्णानां रक्तनेत्राणां स्वप्ने नेच्छान्ति
 दर्शनम्||३८|| कृष्णा पापा निराचारा दीर्घकेशनखस्तनी| विरागमाल्यवसना स्वप्ने कालनिशा मता||३९||
 इत्येते दारुणाः स्वप्ना रोगी यैर्याति पञ्चताम्| अरोगः संशयं गत्वा कर्शिदेव प्रमुच्यते||४०||

imāṁścāpyaparān svapnān dāruṇānupalakṣayēt| vyādhitānāṁ vināśāya klēśāya
 mahatē'pi vā||२७|| yasyōttamāṅgē jāyantē varṇśagulmalatādayah| vayāṁsi ca vilīyatē
 svapnē maunḍyamīyācca yaḥ||२८|| gr̄hrōlūkaśvakākādyaiḥ svapnē yaḥ parivāryatē
 rakṣahprētapiśācastrīcaṇḍāladravidāndhrakaiḥ ||२९||
 varṇśavētralatāpāśatṛṇakāṇṭakasāṅkaṭē| saṁsajjati hi yaḥ svapnē yō gacchan
 prapatyapi||३०|| bhūmau pāṁśūpadhānāyām valmīkē vā'tha bhasmani
 śmaśānāyatanē śvabhrē svapnē yaḥ prapatyapi ||३१|| kaluṣē'mbhasi paṅkē vā kūpē
 vā tamasā"vṛtē| svapnē majjati śīghrēṇa srōtasā hriyatē ca yaḥ||३२|| snēhapānam

tathā'bhyāṅgah pracchardanavirēcanē| hiraṇyalābhah kalahaḥ svapnē
 bandhaparājayau||33|| upānadyuganāśaśca prapātaḥ pādacarmaṇōḥ| harṣah svapnē
 prakupitaiḥ pitṛbhiścāvabhartsanam||34|| dantacandrārkanakṣatradēvatādīpacakṣuṣām |
 patanam vā vināśo vā svapnē bhēdō nagasya vā||35|| raktapuṣpam vanam bhūmir
 pāpakarmālayam citām| guhāndhakārasambādhām svapnē yaḥ praviśatyapi||36||
 raktamālī hasannuccairdigvāsā dakṣināṁ diśam| dāruṇāmaṭavīṁ svapnē kapiyuktēna
 yāti vā||37|| kāśāyināmasaumyānāṁ nagnānāṁ daṇḍadhāriṇāṁ| kṛṣṇānāṁ
 raktanētrānāṁ svapnē nēcchanti darśanam||38|| kṛṣṇā pāpā nirācārā
 dīrghakēśānakhaṣṭānī| virāgamālyavasanā svapnē kālaniśā matā||39|| ityētē dāruṇāḥ
 svapnā rōgī yairyāti pañcatām| arōgaḥ samśayam gatvā kaścidēva pramucyatē||40||
 imAMshcApyaparAn svapnAn dAruNAAnupalakShayet| vyAdhitAnAM vinAshAya
 kleshAya mahate~api vA||27|| yasyottamA~gge jAyante vaMshagulmalatAdayaH|
 vayAMsi ca villyante svapne mauNDyamiyAcca yaH||28|| gRudhrolUkashvakAkAdyaiH
 svapne yaH parivAryate| rakShaHpretapishAcastrlcaNDAladraviDAndhrakaiH ||29||
 vaMshavetalatApAshatRuNakaNTakasa~gkaTe| saMsajjati hi yaH svapne yo gacchan
 prapatatyapi||30|| bhUmau pAMshUpadhaNyAM valmlke vA~atha bhasmani|
 shmaskAnAyatane shvabhe svapne yaH prapatatyapi ||31|| kaluShe~ambhasi pa~gke
 vA kUpe vA tamasA_aavRute| svapne majjati shlghreNa srotasA hriyate ca yaH||32||
 snehapAnaM tathA_{abhyā}ggaH pracchardanavirecane| hiraṇyalAbhaH kalahaH svapne
 bandhaparAjayau||33|| upAnadyuganAshashca prapAtaH pAdacarmaNoH| harShaH
 svapne prakupitaiH pitRubhishcAvabhartsanam||34||
 dantacandrArkanakShatradevatAdlpacakShuShAm | patanaM vA vinAsho vA svapne
 bhedo nagasya vA||35|| raktapuShpaM vanaM bhUmiM pApakarmAlayaM citAm|
 guhAndhakArasambAdhaM svapne yaH pravishatyapi||36|| raktamAll
 hasannuccairdigvAsA dakShiNAM disham| dAruNAmaTavIM svapne kapiyuktena yAti
 vA||37|| kAṣhAyiNAmasaumyAnAM nagnAnAM daNDadhAriNAm| kRuShNAnAM
 raktanetrANAM svapnenecchanti darshanam||38| kRuShNA pApA nirAcArA
 dīrghakeshanakhaṣṭānī| virAgamAlyavasanā svapne kAlanishA matA||39|| ityete
 dAruNAH svapnA rogl yairyAti pa~jcatAm| arogaH saMshayaM gatvA kashcideva
 pramucyate||40||

Certain other dreams which are fierce should also be analyzed as they indicate the approaching death of the diseased and grave sufferings for those who are going to be affected.

He, who in his dreams sees bamboos, shrubs and creepers etc. growing in his head, birds coming to them and his scalp been shaved. Or who in his dreams sees himself surrounded by vultures, owls, dogs, crows and other birds or by Rakshasa, dead men, *pishachas*, women, *chandalas*, and inhabitants of Dravida and Andhra regions.

Or who in his dreams finds himself surrounded by pathless forests of bamboo, canes, creepers, grass and prickly plants and finds himself lost in the midst and falling down while trying to come out.

Or who in his dreams, falls down on the bare ground covered with dust or upon an anthill or upon ashes, or upon a crematorium or in to a hole.

Or who sinks in a ditch or pond of dirty water or into mire or in a dark well or who is carried away by a rapid current. Or who in his dreams drinks oily substances or anoints his body with oil, vomits, defecates, or gets gold, engages in quarrel, gets defeated and captured.

Or who lose his sandals, has skin of feet peeling off or feels excited or who is rebuked by his angry ancestors. Or who sees in his dreams the fall or destruction of his own tooth or the moon or the sun or the stars or the burning lamps or his own eyes or the cracking of a mountain.

Or who in his dreams, enters a forest of trees with red flowers or a place where sinful activities are done or a funeral place (crematorium), a dark cave.

Or who in his dreams sees himself proceeding towards south, finds himself adorned with garlands of red flowers, laughing aloud and naked. The sight of a woman who is dark in complexion, who is sinful, who has long hair and nails, hanging breasts, or who is clad in garlands of red flowers and red garments is regarded to be as fatal as a fatal night. These are severe dreams which indicate death of a patient.

If a healthy man sees such dreams, his life becomes doubtful, rarely does he escape.
[27-40]

Dreams

मनोवहानां पूर्णत्वाद् दोषैरतिबलैस्त्रिभिः। स्रोतसां दारुणान् स्वप्नान् काले पश्यति दारुणे॥४१॥
नातिप्रसुप्तः पुरुषः सफलानफलांस्तथा। इन्द्रियेशेन मनसा स्वप्नान् पश्यत्यनेकधा॥४२॥

manōvahānāṁ pūrṇatvād dōṣairatibalaistribhiḥ| srōtasāṁ dāruṇān svapnān kālē paśyati
dāruṇē॥41॥ nātiprasuptah puruṣah saphalānaphalāṁstathā| indriyēśena manasā
svapnān paśyatyanēkadhā॥42॥ manovahAñAM pUrNatvAddoShairatibalaistribhiH|
srotasAM dAruNAn svapnAn kAle pashyati dAruNe॥41॥ nAtiprasuptaH puruShaH
saphalAnaphalAMstathA| indriyeshena manasA svapnAn pashyatyanekadhdA॥42॥

When the channels associated with the mind are saturated by the excessively vitiated dosha, such terrible dreams appear in his sleep. The person who is not in deep sleep (subconscious state), sees various fruitful (meaningful) or fruitless (meaningless) dreams in association with sense organs. [41-42]

Types of dreams

thumb|400px दृष्टं श्रुतानुभूतं च प्रार्थितं कल्पितं तथा। भाविकं दोषजं चैव स्वप्नं सप्तविधं विदुः॥४३॥

dṛṣṭāṁ śrutānubhūtarām ca prārthitāṁ kalpitāṁ tathā| bhāvikāṁ dōṣajāṁ caiva svapnāṁ
saptavidhāṁ viduh॥43॥ dRuShTaM shrutAnubhUtaM ca prArthitaM kalpitaM tathA|
bhAvikaM doShajaM caiva svapnaM saptavidhaM viduH॥43॥

It is known that there are seven kinds of dreams: seen, heard, felt, desired, imagined, prognosticating and faulty by nature. [43]

Consequences of dreams

तत्र पञ्चविधं पूर्वमफलं भिषगादिशेत् दिवास्वप्नमतिहस्वमतिदीर्घं च बुद्धिमान् ॥४४॥ दृष्टः प्रथमरात्रे यः स्वप्नः सोऽल्पफलो भवेत् न स्वपेद्यं पुनर्दृष्ट्वा स सदयः स्यान्महाफलः ॥४५॥ अकल्याणमपि स्वप्नं दृष्ट्वा तत्रैव यः पुनः पश्येत् सौम्यं शुभाकारं तस्य विद्याच्छुभं फलम् ॥४६॥

tatra pañcavidham pūrvamaphalam bhiṣagādiśet| divāsvapnamatiḥrasvamatidīrgham ca buddhimān||44|| dṛṣṭah prathamārātrē yaḥ svapnah sō'lpaphalō bhavēt| na svapēdyam punardṛṣṭvā sa sadyaḥ syānmahāphalah||45|| akalyāṇamapi svapnam dṛṣṭvā tatraiva yaḥ punaḥ| paśyēt saumyam śubhākāram tasya vidyācchubhamphalam||46|| tatra pa~jcavidhaM pUrvamaphalaM bhiShagAdishet| divAsvapnamatiḥrasvamatidIrgaM ca buddhimAn||44|| dRuShTaH prathamAtre yaH svapnaH so~alpaphalo bhavet| na svapedyaM punardRuShTvA sa sadyaH syAnmahAphalaH||45|| akalyANamapi svapnaM dRuShTvA tatraiva yaH punaH| pashyet saumyaM shubhAkAraM tasya vidyAcchubhaM phalam||46||

Amongst these the first five (viz. seen, heard, felt, desired and imagined) are fruitless (meaningless), and also those seen during daytime, and those which are too short or too long.

The dream that is seen during the first part of night is partially fruitful. He, however who having seen a dream does not sleep after it, will be realizing the dream completely.

It should be known that if a person having seen an inauspicious dream, sees without waking up another dream that is auspicious and of beneficial form just afterwards, he meets with good results. [44-46]

Summary

तत्र श्लोकः- पूर्वरूपाण्यथ स्वप्नान् य इमान् वेति दारुणान् न स मोहादसाध्येषु कर्माण्यारभते भिषक् ॥४७॥

tatra ślōkaḥ- pūrvarūpānyatha svapnān ya imān vētti dāruṇān| na sa mōhādasādhyēṣu karmāṇyārabhatē bhiṣak||47|| tatra shlokaH- pUrvarUpAAnyatha svapnAn ya imAn vetti dAruNAn| na sa mohAdasAdhyeShu karmANyArabhatē bhiShak||47||

A physician who is conversant with those premonitory symptoms which are associated with such terrible dreams never starts the treatment for incurable diseases out of his ignorance.[47]

Tattva Vimarsha (Fundamental Principles)

- Important principle regarding disease prognosis states that “if all premonitory symptoms of a disease are fully manifested in severe form then it indicates poor prognosis”. [Verse No.3-5]
- If any person is continuously exposed to etiological agents and complications appear earlier than such disease is going to have poor prognosis. It is also emphasized that any person who is severely debilitated will not recover from any

disease easily. Interpretation based on dreams should also be considered while predicting course of the disease. One special note from this chapter is that they describe symptoms in combination than in solitary appearance which shows the complexity of disease causing and disease prognostic process leading to fatality. Perhaps this needs a specially designed research to study on relation between dreams and arishta. [Verse No.6-9]

- It has been emphasized that not only clinical presentations but personal experiences of the patient can play role in disease outcome and so should not be neglected. This analogy described here has a striking resemblance with astronomy and understanding of body components. They attribute special colors, precious stones in relation with dhatus, zodiac signs and body components. Perhaps Jyothisha Shastra (astrology) and gemology can be referred for more explanation. [Verse No.10-11]
- It has been emphasized that even minor complaints of the patient should not be ignored as they can be indicator of forthcoming serious and grave conditions. [Verse No.12-13]
- Significance of dreams in prodromal symptoms and fatal consequences have been described which need further study and research. All the three dosha should be excessively vitiated and should involve Manovahas Srotas, i.e. channels associated with mind for producing such kind of dreams.

Vidhi Vimarsha (Applied Inferences)

Contemporary views

In present era we do not predict prognosis by prodromal symptoms except in few cases as prodromal symptoms are not exactly known in most of the diseases. Due to ambiguity, prodromal symptoms are not considered reliable and this might be the reason they are not given importance in disease diagnosis and prognosis. [Verse No.3-5]

Bad prognostic signs

In the example of tuberculosis, if person is severely debilitated and then consumption is occurring then there are more chances that he will succumb to disease. Persistence of cause like sexual indulgence in such condition will further precipitate the possibility of fatality. Here one point is noticeable that rhinorrhea is not a symptom of tuberculosis. It can occur as complication of extra-pulmonary tuberculosis which may lead to bony erosion, out-pouching of the dura, CSF leak, and subsequent bacterial meningitis which is a fatal condition. This condition suggests that if severe complications are occurring earlier than manifestation of cardinal feature of the disease, it indicates poor prognosis

of disease.²¹ This rule applies to all other diseases: if prior health status of person is poor, he continues to partake etiological agents and complications are appearing in very early stage then disease produced in future will be fatal in nature.

Relation between dreams and psyche

Horrible dreams in a person indicate the decreased mental strength of the person. 'Mind' is component of health and patient can combat diseases easily with strong mind and will power. Disease is always difficult to cure in a depressed person with low will power. This might be a reason why Charak has mentioned importance of dreams while predicting prognosis of any disease. Lifestyle has changed since this text was composed, the type of dreams and their interpretation should also be changed, requiring research. We often give importance to sharira dosha and neglect the importance of manasadosha in causation and continuation of disease process. Perhaps this chapter gives us a scope to view things from different dimension. For all dreams the role of manasa dosha are pivotal. This needs further research [Verse No.6-9]

Delirium as a prognostic sign

As per description in verse 10-11, it can be inferred that delirium before bleeding disorders will be fatal for the patient. Important cause of delirium is old age and other risk factors are poor overall health, anemia, malnutrition, underlying medical or neurologic illness etc.²² If we critically analyze these factors we can infer that each of these will deteriorate general condition of the patient and so even slight bleeding can produce fatal results in such persons. [Verse No.10-11]

Skin disease and its prognosis

Kushtha literally means discoloration, disgrace, disfiguration of the normal skin texture. It can be inferred that here kushtha wound refers to non healing ulcers of leprosy. Leprosy is a chronic infectious disease caused by *Mycobacterium Leprae*, the only pathogenic bacteria able to infect peripheral nerves. About 30% of people with leprosy develop nerve damage. Neural impairment results in a set of sensitive, motor and autonomic disturbances, with ulcers originating primarily on the hands and feet. Neuropathic ulcers are one of the most common squeal of leprosy, but little is known

²¹ Mahalakshmipuram PS, Ramachandran A, Nishteswar K, Chandola HM. A preface study on exploring the pharmacodynamics of Curcuma neilgherrensis Wight- A folklore medicine. Indian J of Traditional Knowl 2013; 12(2): 288-294

²² M Prasad Shyam, Chandola HM, Ravishankar. A clinico- experimental study to evaluate the therapeutic efficacy of Curcuma neilgherrensis Weight in the management of MadhuMeha (Type 2 Diabete Mellitus). PhD thesis. Institute of Post Graduate Teaching and Resaerch in Ayurveda, Gujarat Ayurveda University, Jamnagar, India, 2011

about their clinical and epidemiological aspects.²³ If wounds are occurring before change in normal texture of skin it shows that wounds are occurring in prodromal stage and sensory loss has occurred till this stage and so slight injuries are resulting into wound formation. Such condition will lead to late diagnosis and hence chances of recovery will be minimal. [Verse No.14-15]

Psychiatric disorders and its prognosis

Symptoms mentioned above in prodromal symptoms of unmada are negative symptoms and so there are chances of more suicidal tendency which is a major cause of death in unmada. The presence and duration of prodromal symptoms may predict outcome in schizophrenia, that is, long duration of prodromal symptoms may be indicative of poor prognosis.²⁴

Aura are common in seizures of occipital or temporal lobe origin in patients with focal epileptic seizures.²⁵ Patients with refractory temporal lobe epilepsy (TLE) have an increased risk of sudden death that is 50 times greater than that in the general population. So if hallucinations are present in epilepsy they indicate grave prognosis. [Verse No.18-23]

Analysis of dreams

As mentioned earlier dreams are replica of mind and such kinds of dream represents weak and feeble mental status which is not strong enough to fight diseases properly. So if such dreams are frequently seen by patients they will have poor rate of recovery as compared to patient with strong mind and will power. [Verse No.27-40]

In modern era, during late 19th century, psychotherapist Sigmund Freud gave emphasis on dream connection with mind in his famous book 'The interpretation of dreams'. He developed a theory that the content of dreams is driven by unconscious wish fulfillment.²⁶ Presently dream is defined as successions of images, ideas, emotions, and

²³ Leach MJ. Gymnema sylvestre for diabetes mellitus: A systematic review. J Alter Complement Med 2007; 13: 977-983

²⁴ Shanmugasundaram ER, Gopinath KL, Radha Shanmugasundaram K, Rajendran VM. Possible regeneration of the islets of Langerhans in streptozocin- diabetic rats given Gymnema sylvestre leaf extracts. J Ethnnopharmacol 1990; 30: 265-279

²⁵ Leach MJ. Gymnema sylvestre for diabetes mellitus: A systematic review. J Alter Complement Med 2007; 13: 977-983

²⁶ Baskaran K, Kizar Ahamath B, Radha Shanmugasundaram K, Shanmugasundaram ER. Antidiabetic effect of a leaf extract from Gymnema sylvestre in non-insulin – dependent diabetes mellitus patients. J Ethnnopharmacol 1990; 30: 295-300

sensations that occur involuntarily in the mind during certain stages of sleep.²⁷ Description of manovaha srotas in pathogenesis of dream shows that role of mind in producing dreams was known in ancient times.

Various studies have established link between REM sleep and dreaming.²⁸ Poly somnograms show brainwave patterns in REM to be similar to that recorded during wakefulness. Intense dreaming occurs during REM sleep as a result of heightened brain activity. This proves that observations noted by ancient Ayurvedic seers related to pathogenesis of dream are minute and correct. [Verse No.41-42]

As mentioned above dreams more or less depict unconsciousness state. Freud called dreams the “royal road to the unconscious”. They are related to activities which we have seen, listened, wished, thought etc. Based on this fact seven types of dream have been classified here. Five of them are mild as they are more near to events which we encounter in day to day life. Last two have fatal consequences as they are due to disease or dosha involvement. [Verse No.43]

It is difficult to predict dream consequences on the basis of time or order in which they were seen. Researches are needed to scientifically prove the validity of such dream prediction. [Verse No.44-46]

Prognosis by assessment of prodromal features

The intensity or severity of prodromal features described earlier in respective context of Nidana Sthana can indicate prognosis. The prodromal features of disease and relevant pathologies in conventional medical terms are summarized in table 1. ²⁹ These parameters can be applied for further understanding of relevant disease pathology and prognosis.

Exacerbation of prodromal features	relevant disease or pathology
Fever (Jwara) [Cha.Sa.Indriya Sthana 5/4]	Severe prodromal symptoms in ‘Hemorrhagic Small pox’; presence of all prodromal features in ‘Plasmodium Falsiparum Malaria’;

²⁷ Shanmugasundaram ER, Rajeswari G, Baskaran K, et al. Use of Gymnema sylvestre leaf extract in the control of blood glucose in insulin- dependent diabetes mellitus. J Ethnopharmacol 1990; 30: 281-294

²⁸ Baskaran K, Kizar Ahamath B, Radha Shanmugasundaram K, Shanmugasundaram ER. Antidiabetic effect of a leaf extract from Gymnema sylvestre in non-insulin – dependent diabetes mellitus patients. J Ethnopharmacol 1990; 30: 295-300.

²⁹ Shanmugasundaram ER, Rajeswari G, Baskaran K, et al. Use of Gymnema sylvestre leaf extract in the control of blood glucose in insulin- dependent diabetes mellitus. J Ethnopharmacol 1990; 30: 281-294

Exacerbation of prodromal features	relevant disease or pathology mild neurological symptoms during catarrhal phase of Measles indicative of ‘Encephalitis’;
Consumption/pthisis/tuberculosis (Shosha) [Cha.Sa.Indriya Sthana 5/7]	Cachexia / severe weight loss or muscle wasting in ‘Nasal and Sinus tuberculosis’; Tuberculosis with HIV or associated other sexually transmitted infections; Immuno-compromised or immunodeficiency conditions; Charles Bonnet Syndrome (CBS); Hepatic Encephalopathy (HE); Rupture of cerebral Aneurysm; Vascular dementia; Hypertensive Encephalopathy; Vascular neuro-ophthalmological conditions; Gastric or duodenal ulcers; Gastric cancer; Oesophagitis; Oesophageal varices; Intra abdominal tumours; Acute abdomen; Abdominal tuberculosis; Chronic recurrent bleeding from gastro-intestinal tract;
Bleeding disorders (Raktapitta) [Cha.Sa.Indriya Sthana 5/10]	Basal cell carcinoma; Squamous cell carcinoma; Marjolin’s ulcer; Chronic non healing ulcers due to immunodeficiency or diabetes or peripheral artery disease etc;
Abdominal lumps or tumors (Gulma) [Cha.Sa.Indriya Sthana 5/12]	Various volatile organic compounds (VOCs) releasing from body due to an underlying disease (diabetes ketoacidosis or hyperglycemia etc) attracts mosquitoes or flies etc;
Skin diseases (Kushtha) [Cha.Sa.Indriya Sthana 5/14]	Delirium; Organic psychosis; Catatonia; Negative symptoms of Schizophrenia; Major depressive episode; Mood disorder; Metabolic or Toxic encephalopathy; Personality change due to a general medical condition; Frontal lobe tumours; Panic attack or
Obstinate urinary disorders including diabetes Prameha) [Cha.Sa.Indriya Sthana 5/16]	
Psychiatric disorders (Unmada, (Apasmara)) [Cha.Sa.Indriya Sthana 5/18-22]	

Exacerbation of prodromal features	relevant disease or pathology Panic disorder; Partial or focal seizures originating from visual cortical areas of occipital lobe; Auditory hallucinations of 'Temporal lobe epilepsy'; Space occupying lesions (SOL) in occipital or temporal lobes or in brain stem;
Opisthotonus Bahirayama [Cha.Sa.Indriya Sthana 5/24]	Trismus &Opisthotonus of Tetanus;

Table 1: Prognosis based on prodromal features

Relation of disease pathology and relevant dreams

The dreams can be suggestive of internal pathologies described earlier in respective context of Nidana Sthana. The probable relation between internal pathologies and dreams is summarized in table 2.³⁰ Further research is required to study the relations and their contemporary applications.

Internal pathologies	Relevant dreams
Consumption/pthisis/tuberculosis (Shosha) [Cha.Sa.Indriya Sthana 5/8]	Draught animals (dog, camel and donkey etc) are the 'Symbolic representations' of 'Cachexia' in Tuberculosis; The owner of south direction is 'Yama' (God of death); Source of the dream content is 'Internal organic somatic stimuli'.
Fever (Jwara) [Cha.Sa.Indriya Sthana 5/9]	Getting dragged by dogs in dreams, here dog is the 'Symbolic representation' of Jwara (fever) and 'Preta' for death; Madya (alcoholic beverages) denotes 'Displacement' mechanism of dream
Bleeding disorders (Raktapitta) [Cha.Sa.Indriya Sthana 5/11]	Red colour (apparels, garlands and items like Lac etc) objects in dreams are the 'Displacements' or

³⁰ Stanely P, Prince M, Menon VP. Hypoglycaemic and other related actions of Tinospora cordifolia roots in alloxan induced diabetic rats. J Ethnopharmacol 2000; 70: 9-15

Internal pathologies	Relevant dreams
Abdominal lumps or tumors (Gulma) [Cha.Sa.Indriya Sthana 5/13]	<p>'Symbolic representations' of blood. Laughing in this dream is the 'Modification' or 'Inversion' or 'Displacement' for the original feeling crying. Woman is the 'displacement' for the disease 'Rakta pitta'.</p>
Skin diseases (Kushta) [Cha.Sa.Indriya Sthana 5/15]	<p>Creeper in the dream is the 'Symbolic representation' of 'Gulma'. 'Lata' also represents symbolically the haematogenous or vascular, lymphatic and transcoelomic spread of tumours or pathways of metastasis.</p>
Obstinate urinary disorders including diabetes Prameha) [Cha.Sa.Indriya Sthana 5/17]	<p>Nakedness in the dream represents 'Social stigma' or 'Ashamedness' or 'Embarrassment' due to 'Kushta'. Excessive 'Snigdhata', 'Sheetata' and 'Mandagni' in dreams represent the aetiology of Kushta. Blossoming lotus flower represents 'Mud' or morbid dosha's in Kushta.</p>
Psychosis disorders (Unmada [Cha.Sa.Indriya Sthana 5/21]	<p>This dream represents the etiology of 'Prameha'. 'Sneha' denotes nutrient-dense foods; Source of the dream content is 'Internal organic stimuli'.</p>
Epilepsy and seizures (Apasmara [Cha.Sa.Indriya Sthana 5/23]	<p>Dancing may be symbolic representation for 'Disinhibition' or 'Mood lability' or 'Mania'; Absurd combinations of ideas and weakness of judgment are the characteristic features of dreams in insanity.</p>
	<p>Dead body (Preta) in dreams denotes death and to neutralize or reduce the anxiety associated with the idea of death, 'Dancing with euphoria' might be added in this dream. Dancing also symbolically</p>

Internal pathologies	Relevant dreams represents 'excessive abnormal movements' seen in seizures.
Opisthotonus Bahirayama [Cha.Sa.Indriya Sthana 5/25]	'Dreams come from the stomach'. Present dream indicates excessive muscular rigidity and spasms of the pharyngeal muscles (causes nausea, vomiting, difficulty in swallowing etc) seen in Tetanus which leads to death.
General pathologies [Cha.Sa.Indriya Sthana 5/28-40]	All dreams represent various internal organic pathology; Dream type: Anxiety or Punishment or Absurd dreams, Dream source: Internal organic pathology / somatic stimuli, Dream objects / symbols: Various places, articles, people, animals etc; Dream mechanisms: Displacements, Representations, Projections, Secondary revisions, Inversions, and Condensations

Table 2: Internal pathologies and relevant dreams

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Katamanisharireeyam Indriyam Adhyaya

Indriya Sthana Chapter 6. Specific fatal clinical features Abstract

This chapter, Katamanisharireeyam Indriyam Adhyaya, explains some specific clinical features that are different than sensory perceptions and prodromal symptoms. Most of the time they indicate serious complications and are indicative of imminent death.

Keywords: Death features, Bad prognostic features.

Introduction

Previous chapter (Purvarupeeyam Indriyam Adhyaya) dealt with the types of premonitory symptoms which indicate imminent death. The present chapter focuses on the characteristic signs and symptoms of diseases in individuals which results in imminent death. The chapter signifies the importance of observation of patient in assessing prognosis of disease. The word *katamani sharireeyam* implies types of presentations of diseases in body leading to immediate death.

This chapter is a random compilation of bad prognostic features of diseases that are mentioned in Nidana Sthana and Chikitsa Sthana. An experienced clinician can identify bad prognosis of disease well in time and shall intervene as per the condition of patient.

Sanskrit text, Transliteration and English Translation

अथातःकतमानिशरीरीयमिन्द्रियंव्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātaḥkatamāniśarīrīyamindriyamvyākhyāsyāmah||1||

iti ha smāha bhagavānātrēyah||2||

athAtaH katamAnisharIrIyamindriyaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Katamanisharireeyam indriyam”(Specific fatal clinical features). Thus said Lord Atreya.[1-2]

Questions by Agnivesha

कतमानिशरीराणिव्याधिमन्तिमहामुने!|यानिवैद्यःपरिहरेद्येषुकर्मनसिद्ध्यति||३||

इत्यात्रेयोऽग्निवेशेनप्रश्नंपृष्टःसुदुर्वचम्|आचचक्षेयथातस्मैभगवांस्तन्निबोधत||४||

katamāni śarīrāṇi vyādhimanti mahāmūnē!| yāni vaidyaḥ parihaṛēdyēṣu karma na siddhyati||3||

ityātrēyō'gnivēśēnapraśnar̄prṣṭahsudurvacam|ācacaksēyathātasmaibhagavāṁstannib
ōdhata||4||

katamAni sharIrANi vyAdhimanti mahAmune!| yAni vaidyaH pariharedyeShu karma na
siddhyati||3||

ityAtreya~agniveshena prashnaM pRuShTaH sudurvacam| AcacakShe yathA tasmai
bhagavAMstannibodhata||4||

Agnivesha asks Atreya that how many such symptoms are seen in a diseased individual for which treatment become ineffective. Hearing this, the great scholar explained him as follows.[3-4]

Poor prognosis in cardiac pain

यस्य वै भाषमाणस्य रुजत्यूर्ध्वमुरो भृशम्| अन्नं च च्यवते भुक्तं स्थितं चापि न जीर्यति||५||

बलं च हीयते शीघ्रं तृष्णा चातिप्रवर्धते| जायते हृदि शूलं च तं भिषक् परिवर्जयेत्||६||

yasyavaibhāṣamāṇasyarujatyūrdhvamurōbhṛśam|annarūḍcacyavatēbhuktarmsthitaṁcāpi
najīryati||5||

balaṁ ca hīyatē śīghram tṛṣṇā cātipravardhatē| jāyatē hṛdi śūlaṁ ca tam bhiṣak
parivarjayēt||6||

yasya vai bhAShamANasya rujatyUrdhvamuro bhRusham| annaM ca cyavate bhuktaM
sthitam cApi na jlryati||5||

balaM ca hlyate shlghraM tRuShNA cAtipravardhate| jAyate hRudi shUlaM ca taM
bhiShak parivarjayet||6||

One, who has severe pain in the upper part of chest while talking, vomits the ingested food, cannot digest the food ingested; one, whose bala (strength) is depleting suddenly and who has morbid thirst; one who has pain in the region of hridaya (heart) are incurable.[5-6]

Poor prognosis in hikka

हिक्का गम्भीरजा यस्य शोणितं चातिसार्यते| न तस्मै भेषजं दद्यात् स्मरन्नात्रेयशासनम्||७||

hikkā gambhīrajā yasya śōṇitam cātisāryatē| na tasmai bhēṣajam dadyāt
smarannātrēyaśāsanam||7||

hikkA gambhIrajA yasya shoNitaM cAtisAryate| na tasmai bheShajaM dadyAt
smarannAtreyashAsanam||7||

Gambheera hikka, or hiccups with deeper pathology, when accompanied with bleeding diarrhea, is a serious condition. In such a case, medication should not be given since the condition is not manageable by stream of Atreya school of medicine. (Note: It may be managed by Dhanwantari school of surgery).[7]

Poor prognosis in anaha

आनाहश्चातिसारश्च यमेतौ दुर्बलं नरम् व्याधितं विशतो रोगौ दुर्लभं तस्य जीवितम्॥८॥

ānāhaścātisāraśca yamētau durbalaṁ naram| vyādhitarṁ viśatō rōgau durlabham tasya jīvitam||8||

AnAhashcAtisArashca yametau durbalaM naram| vyAdhitaM vishato rogau durlabhaM tasya jlvitam||8||

Further, when *gambheera hikka* (hiccups with deeper pathology) is associated with *anaha* (distended abdomen) and *atisara* (diarrhea), both in a weak person is most difficult to treat and the person's life is in danger.[8]

Poor prognosis in atisara

आनाहश्चातितृष्णा च यमेतौ दुर्बलं नरम् विशतो विजहत्येनं प्राणा नातिचिरान्नरम्॥९॥

ānāhaścātitr̥ṣṇā ca yamētau durbalaṁ naram| viśatō vijahatyēnaṁ prāṇā nāticirānnaram||9||

AnAhashcAtitRuShNA ca yametau durbalaM naram| vishato vijahatyenaM prANA nAticirAnnaram||9||

The conditions of diarrhea associated with *anaha* (distended abdomen) and *trishna* (excessive thirst) in a weak person, has poor prognosis and he will die soon.[9]

Poor prognosis in jwara and kasa

ज्वरः पौर्वाह्निको यस्य शुष्ककासश्च दारुणः| बलमांसविहीनस्य यथा प्रेतस्तथैव सः॥१०॥

jvarah paurvāhniko yasya śuṣkakāsaśca dāruṇah| balamāṁsavihīnasya yathā prētastathaiva sah||10||

jvaraH paurvAhNiko yasya shuShkakAsashca dAruNaH| balamAMsavihInasya yathA pretastathaiva saH||10||

The conditions associated with *poorvanhika jwara* (fever in forenoon) and *shushka kasa* (dry cough) in a person with wasting of muscles and depleted strength as like as dead body.[10]

Poor prognosis in Shotha

यस्य मूत्रं पुरीषं च ग्रथितं सम्प्रवर्तते| निरूप्यमणो जठरिणः श्वसनो न स जीवति॥११॥

श्वयथुर्यस्य कुक्षिस्थो हस्तपादं विसर्पति| जातिसङ्घं स सङ्क्लेश्य तेन रोगेण हन्यते॥१२॥

श्वयथुर्यस्य पादस्थस्तथा स्सते च पिण्डिके| सीदतश्चाप्युभे जड्ये तं भिषक् परिवर्जयेत्॥१३॥

शूनहस्तं शूनपादं शूनगुह्योदरं नरम् हीनवर्णबलाहारमौषधैर्नोपपादयेत्॥१४॥

yasya mūtrāṁ purīśāṁ ca grathitāṁ sampravartatē| nirūṣmanō jaṭhariṇah śvasanō na sa jīvati||11||

śvayathuryasya kukṣisthō hastapādāṁ visarpatiḥ jñātisaṅghāṁ sa saṅklēśya tēna rōgēṇa hanyatē||12||

śvayathuryasya pādasthastathā srastē ca piṇḍikē| sīdataścāpyubhē jaṅghē tam bhiṣak parivarjayēt||13||

śūnahastāṁ śūnapādāṁ śūnaguhyōdaram naram|
hīnavarṇabalāhāramauṣadhairnōpapādayēt||14||

yasya mUtraM purIshaM ca grathitaM sampravartate| nirUShmaNo jaThariNaH
shvasano na sa jlvati||11||

shvayathuryasya kukShisto hastapAdaM visarpatiḥ jAtisaṅghaM sa sa~gkleshya tena
rogeNa hanyate||12||

shvayathuryasya pAdasthastathA sraste ca piNDike| sīdatashcApyubhe ja~gghe taM
bhiShak parivarjayet||13||

shUnahastaM shUnapAdaM shUnaguhyodaraM naram|
hInavarNabalAhAramauShadhairnopapAdayet||14||

In a person with abdominal disease, who passes hard stool and condensed urine, whose body temperature is subnormal, and has dyspnea, is unable to survive.

A person whose abdominal edema spreads towards upper and lower both extremities will cause great distress to his relatives (due to disease) and dies with same disease.

A person having pedal edema, with flaccid calf muscles and pain in both thighs shall be avoided by physician (due to poor prognosis).

A person having edema on hands, feet pelvic region, abdomen and diminution of color complexion, strength, and aversion of food should not be administered medicine [due to poor prognosis, medicines are of no use]. [11-14]

Poor prognosis in respiratory disorders

उरोयुक्तो बहुश्लेष्मा नीलः पीतः सलोहितः| सततं च्यवते यस्य दूरात् परिवर्जयेत्||१७||

uroyuktō bahuślēṣmā nīlah pītaḥ salōhitah| satataṁ cyavatē yasya dūrāttam
parivarjayēt||15||

uroyukto bahushleShmA nllaH pltaH salohitaH| satataM cyavate yasya dUrAttaM
parivarjayet||15||

One whose chest is full of phlegm, and constantly expectorates the blue, yellow, and blood mixed sputum, a wise physician should avoid to treat such patients even from distance.[15]

Other conditions with poor prognosis

हृष्टरोमा सान्द्रमूत्रः शूनः कासज्वरार्दितः | क्षीणमांसो नरो दूराद्वज्यो 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 तृष्णयाऽभिपरिप्लुतः| इम्बरी कुपितोच्छवासः प्रत्याख्येयो विजानता||१९||

हनुमन्याग्रहस्तृष्णा बलहासोऽतिमात्र्या| प्राणाश्चोरसि वर्तन्ते यस्य तं परिवर्जयेत्||२०||

ह्रष्टरोमा सान्द्रमूत्राह् शुनाह् कासज्वरार्दिताह् | क्षीणमांसो नरो दुराद्वरज्यो
वैद्येना जानता||१६||

trayaḥ prakupitā yasya dōśāḥ kaṣṭābhilakṣitāḥ | kṛśasya balahīnasya nāsti tasya
cikitsitam||१७||

jvarātisārau śōphāntē śvayathurvā tayoḥ kṣayē| durbalasya viśeṣēṇa narasyāntāya
jāyatē||१८||

pāṇḍuraśca kṛśō’tyartham tṛṣṇayā’bhipariplutah| ḍambarī kūpitōcchvāsaḥ pratyākhyeyō
vijānatā||१९||

hanumanyāgrahaḥastṛṣṇā balahrāsō’timātrayā| prāṇāścōrasi vartantē yasya tam
parivarjayēt||२०||

hRuShTaromA sAndramUtraH shUnaH kAsajvarArditaH | kShINamAMso naro
dUrAdvarjyo vaidyena jAnatA||१६||

trayaH prakupitA yasya doShAH kaShTAbhilakShitAH | kRushasya balahInasya nAsti
tasya cikitsitam||१७||

jvarAtisArau shophAnte shvayathurvA tayoH kShaye| durbalasya visheSheNa
narasyAntAya jAyate||१८||

pANDurashca kRusho~atyarthaM tRuShNayA~abhipariplutaH| DambarI
kupitocchvAsaH pratyAkhyeyo vijAnatA||१९||

hanumanyAgrahaḥastRuShNA balahrAso~atimAtrayA| prANAshcorasi vartante yasya taM
parivarjayet||२०||

One whose chest is full of phlegm, and constantly expectorates the blue, yellow, and blood mixed sputum, a wise physician should avoid to treat such patients even from distance.

A patient who is having thin stature, wasting of muscles, with Horripilation, colloidal or thick urine, with edema, cough, and fever, should be avoided by physician.

A person whose all the three doshas are vitiated, emaciated, having no strength, is untreatable.

If, in an emaciated patient with fever and diarrhea as sequel of edema or edema as sequel of these two, dies soon. A patient who is pale, excessively emaciated, having excessive thirst, eyes are fixed on one object, and with painful breath is better to declare untreatable. [16-19]

If a person having lock jaw and rigid neck suffers from thirst, diminished strength, and the signs of life(breath) are only confined to chest, such patient should be discarded for treatment purpose. [20]

Markers of imminent death

ताम्यत्यायच्छते शर्म न किञ्चिदपि विन्दति| क्षीणमांसबलाहारो मुमूर्षुरचिरान्नरः||२१||

विरुद्धयोनयो यस्य विरुद्धोपक्रमा भृशम्| वर्धन्ते दारुणा रोगाः शीघ्रं शीघ्रं स हन्यते||२२||

बलं विजानमारोग्यं ग्रहणी मांसशोणितम् | एतानि यस्य क्षीयन्ते क्षिप्रं क्षिप्रं स हन्यते||२३||

आरोग्यं हीयते यस्य प्रकृतिः परिहीयते| सहसा सहसा तस्य मृत्युर्हरति जीवितम्||२४||

tāmyatyāyacchatē śarma na kiñcidapi vindati| kṣīṇamāṁsabalāhārō
mumūrṣuracirānnarah||21||

viruddhayōnayō yasya viruddhōpakramā bhṛśam| vardhantē dārunā rōgāḥ śīghram
śīghram sa hanyatē||22||

balam vijñānamārōgyam grahaṇī māṁsaśōṇitam | ētāni yasya kṣīyantē kṣipram
kṣipram sa hanyatē||23||

ārōgyam hīyatē yasya prakṛtiḥ parihīyatē| sahasā sahasā tasya mṛtyurharati jīvitam||24||

tAmyatyAyacchate sharma na ki~jcidapi vindati| kShINamAMsabaLAhAro
mumUrShuracirAnnaraH||21||

viruddhayonayo yasya viruddhopakramA bhRusham| vardhantedAruNA rogAH
shlghraM shlghraM sa hanyate||22||

balaM vij~jAnamArogyaM grahaNI mAmsashoNitam | etAni yasya kShlyante kShipraM
kShipraM sa hanyate||23||

ArogyaM hlyate yasya prakRutiH parihlyate| sahasA sahasA tasya mRutyurharati
jlvitam||24||

If an emaciated person with diminished strength presenting lack of digestive power, faints repeatedly, with violent movements of the body and restlessness in any situation, he succumbs to death immediately.

In a person suffering from more than one disease, and if their etiological factors are mutually contradictory and the line of treatments are also contradictory this is indicative of fatal prognosis. If they appear suddenly, the sudden death of the patient is also certain.

Strength against disease is knowledge of Health and health is based on digestive power and power of muscles, and purity of blood. Where all these diminished there is no hope for long life and thus succumb for death.

If there is sudden deterioration of health is extended to the change in basic constitution (prakriti) of a patient then he succumbs for sudden death. [21-24]

Summary

तत्रश्लोकः- इत्येतानि शरीराणि व्याधिमन्ति विवर्जयेत्| न हयेषु धीराः पश्यन्ति सिद्धिं काञ्चिदुपक्रमात्||२५||

tatraślōkah- ityētāni śarīrāṇi vyādhimanti vivarjayēt| na hyēṣu dhīrāḥ paśyanti siddhim kāñcidupakramāt||25||

tatra shlokaH- ityetAni sharIrANi vyAdhimanti vivarjayet| na hyeShu dhIrlAH pashyanti siddhiM kA~jcidupakramAt||25||

Patients with above mentioned diseases should not be taken for treatment. The wise physician should not anticipate success of his treatment in such cases.[25]

Tattva Vimarsha (Fundamental Principles)

- Strength against disease is knowledge of health.
- Health is based on digestive power, power of muscles and purity of blood. Significant decrease of these are the markers of terminal illness.
- Sudden deterioration of health and change in basic constitution (Prakriti) of a patient, is fatal sign.
- In a person suffering from more than one disease, and if their etiological factors are mutually contradictory and the line of treatments are also contradictory, the condition worsens with bad prognosis leading to death. If they appear suddenly, the sudden death of the patient is also certain. [21-24]

Vidhi Vimarsha (Applied Inferences)

Prognosis in respiratory disorders

The conditions related with respiratory disease pathologies are pleural effusion, pneumothorax and pleural tumors and secondary to pulmonary diseases like pneumonia, pulmonary infarction and bronchogenic carcinoma.

Prognosis in digestive disorders

Anna (food) is considered as prana (vital force). Difficulty to intake the food interferes with nutrition and leads to severe disability. It also interferes with the intake of medicines. Dysphagia may be due to mechanical causes or neurological causes seen associated with other serious pathologies. Lack of digestion indicates impairment of digestive system and thus lack of absorption of nutrients and medicines.

Prognosis in trishna

Normal kapha imparts bala (strength) to the body. Sudden depletion of bala indicates impairment of Ojas. Bala is essential for both treatment and for prevention of further progression of disease. Severe kapha kshaya (depletion of kapha) and vata-pitta vitiation is explained as the cause behind the pathogenesis of trishna (morbid thirst). Trishna indicates not merely thirst, but severe depletion of water and electrolytes from the body which may lead to pathology even at the cellular level. [verse 5-6]

Prognosis in hikka

Gambheera Hikka (severe hiccups) is included as one among the terminal illness in Ayurveda. The word *gambheera* indicates either *hikka* originating from deep pathology. *Gambheera hikka* is mentioned as *pranantiki* (Life ending) by Charak in the Chikitsa Sthana. Persistent hiccups are seen in many pathologies both mechanical and neurological like central nervous system lesions and tumors.

Prognosis in diarrhea

Individuals who are very weak due to any illness get afflicted with abdominal distension (*anaha*) and diarrhea simultaneously, it will be very much difficult to prolong his life. Likewise, a debilitated or weak person when afflicted with morbid thirst (*trishna*) and abdominal distension (*anaha*) will soon die.

Depletion of strength

The word *durbala* signifies decreased strength in terms of immune deficiency, decreased quality of dhatu, diminished ability to withstand the strength of medicine and disease itself and decreased ability to recover. Such a person, who is weakened by illness when afflicted by any disease or any super imposed infection, there are less chances of survival.

Role of agni

Agni is considered the principal factor responsible for health and disease. When a condition is mentioned as *nirishmana* (decrease in temperature/warmth), it ascertains to the fact that the dissociative and associative functions that usually happens physiologically in an individual is subnormal. The physiological levels of agni in succeeding hierarchy such as the *dhatwagni* and *bhutagni* will naturally get deranged. Such an individual does not respond to medication and the dhatu formed will be either *saama* or there will be *dhatu sarahinatha*, which by itself forms abasement for ensuing diseases to be strong and with serious complications.

The conditions related to gastrointestinal pathologies include, E.coli infections, Irritable Bowel Syndrome, colitis, lactose intolerance, intestinal obstructions, cystic fibrosis, colon cancer.

Prognosis in edema

The condition presented with edema as feature are Congestive cardiac failure, end stage renal failure, Good Pasteur's syndrome, Hemolytic uremic syndrome, Cardiomyopathy, Ascites, Thrombophlebitis.

Contemporary views

Few diseased conditions mentioned here in this chapter may be in quite manageable stage with the present modern management facilities but at the time of Charak, those were definitely fatal. For example, many of hypovolemic and dehydrated conditions are well treated now. But still it is a challenge to save life in toxic dehydrations. Many such clinical challenges are narrated where patient should not be neglected, rather aggressive care should be provided with informed consent to the relatives about possible fatal outcome.

Comorbid conditions and prognosis

Various comorbid conditions can be listed to differentiate as well as severity of a disease. This assessment is important in prognosis of disease. The conditions described in the chapter and probable relevant comorbid conditions in conventional medical terms are summarized in table 1.³¹ These parameters can be applied for further understanding of relevant disease pathology and prognosis.

Condition listed in the text	Relevant comorbid disease or condition
Poor prognosis of cardiac pain [Cha.Sa.Indriya Sthana 6/5-6]	GERD (Gastro esophageal reflux disease); Barrett's esophagus; Plummer-Vinson syndrome (PVS); Adenocarcinoma of esophagus;
Poor prognosis of hiccups [Cha.Sa.Indriya Sthana 6/7]	Carcinoma of lower gastrointestinal tract; Crohn's disease; Ulcerative colitis; GERD; Cirrhosis of liver;
Poor prognosis of diarrhea [Cha.Sa.Indriya Sthana 6/8]	Malabsorption syndrome; Tropical sprue; Intestinal tuberculosis; SIBO (small intestinal bacterial overgrowth); Crohn's disease; Metastatic carcinoid;
Poor prognosis with distension of abdomen and morbid thirst [Cha.Sa.Indriya Sthana 6/9]	Subacute or chronic perforation of peptic ulcer; Internal hemorrhage in gastrointestinal tract; Carcinoma

³¹ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Condition listed in the text	Relevant comorbid disease or condition
Poor prognosis of fever [Cha.Sa.Indriya Sthana 6/10]	of GI tract; Malabsorption syndrome; Tuberculous peritonitis; Pulmonary mucormycosis in immuno-compromised patients; Acute myelocytic leukemia (AML); Adenocarcinoma of lungs; Mediastinal lymphadenopathy;
Poor prognosis in abdominal diseases [Cha.Sa.Indriya Sthana 6/11]	Chronic obstructive pulmonary disease (COPD) with Cardiovascular disease (CVD); Chronic kidney disease (CKD); Acute glomerulonephritis; ESRD (end stage renal disease);
Poor prognosis with ascites [Cha.Sa.Indriya Sthana 6/12]	ESLD (end stage liver disease); Hepatorenal syndrome (HRS); Cirrhosis of liver; Spontaneous bacterial peritonitis;
Poor prognosis with pedal edema [Cha.Sa.Indriya Sthana 6/13]	Peroneal muscular atrophy; Distal myopathies; Charcot-Marie-Tooth disease (CMT);
Poor prognosis with generalized swelling [Cha.Sa.Indriya Sthana 6/14]	Celiac disease; Inflammatory bowel disease; Malabsorption syndrome; Protein losing enteropathy (PLE); Kwashiorker;
Poor prognosis with respiratory disorders [Cha.Sa.Indriya Sthana 6/15]	Opportunistic lung infections in immuno-compromised patients; COPD; Bronchiectasis; Pulmonary mycosis; Pulmonary tuberculosis; Lung abscesses; Empyema; Lung carcinoma;

Table 1: Comorbid conditions relevant to poor prognosis

Scope of further research

There is a scope for research to study the relation between conditions described in text and relevant disease conditions. Some important points are summarized in table 2.

Verse	Relevant disease or condition
Cha.Sa.Indriya Sthana 6/16	Renal tuberculosis; Acute glomerulonephritis; Chronic kidney disease (CKD); ESRD (end stage renal disease); Nephrotic syndrome;
Cha.Sa.Indriya Sthana 6/17	Delirium; Cardiac or Pulmonary or Cancer Cachexia; Carcinomas; Chronic debilitating conditions;
Cha.Sa.Indriya Sthana 6/18	Gastroenteritis complications; PLE (Protein losing enteropathy); ESRD; ESLD (end stage liver disease); Immunodeficiency disorders; Carcinomas;
Cha.Sa.Indriya Sthana 6/19	Hemorrhagic shock; Hypovolemic shock; Internal haemorrhage; Delirium;
Cha.Sa.Indriya Sthana 6/20	Tetanus;
Cha.Sa.Indriya Sthana 6/21	Hypoglycaemic shock; Delirium; Status epilepticus;
[Cha.Sa.Indriya Sthana 6/22]	Heterotypic comorbidity; Discordant comorbidity; Antagonistic effect on coexisting disease; Various concepts of comorbidity, multimorbidity, morbidity burden and patient complexity
Cha.Sa.Indriya Sthana 6/23	Pulmonary or Cardiac or Cancer cachexia; Delirium; Dementia; Carcinomas;
Cha.Sa.Indriya Sthana 6/24	Dementias; Delirium; Cachexia;

Table 2: Text and probable relevant disease conditions

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Pannarupiyam Indriyam Adhyaya

Indriya Sthana Chapter 7.Fatal signs of changes in shadows, complexion, and luster Abstract

The seventh chapter Pannarupiyam Indriyam Adhyaya deals with the loss of shadow image in eyes, changes in complexion and luster indicative of imminent death.

Difference between shadow and luster is also explained in this chapter with characteristic features of shadows pertaining to each of pancha mahabhuta. The chapter focuses on fatal prognostic features related to complexion and luster.

Keywords: shadow image, complexion, luster, chhaya, varna, prabha, pupillary reaction, signs of death.

Introduction

If there is any distortion in the image of the examiner reflected as a shadow in the pupil of the patient, should be considered as a sign of imminent death of the patient.

Nimittanurupa vikriti (image pertaining to death) will serve as a yard stick to measure the span of life. The chapter deals with clinical observations of changes in skin complexion, pupillary reactions and their relevant prognosis.

The Sanskrit word “panna” means destruction or deterioration. Hence the chapter deals with the deterioration of complexion due to various disease pathologies leading to bad prognosis and death.

Sanskrit text, Transliteration and English Translation

अथातः पन्नरूपीयमिन्द्रियं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātah pannarūpiyamindriyam vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAtaH pannarUplyamindriyaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Pannarupiyam Indriyam” (Fatal signs of changes in shadows, complexion, and luster). Thus said Lord Atreya.[1-2]

Note: The chapter deals with the signs of imminent death as indicated by the distortion of the image reflected in the pupil.

Loss of shadow image in eyes or pupillary reaction

दृष्ट्यां यस्य विजानीयात् पन्नरूपां कुमारिकाम् प्रतिच्छायामयीमक्षणोर्नेनमिच्छेच्चिकित्सितुम्॥३॥

dṛṣṭyāṁ yasya vijānīyāt pannarūpāṁ kumārikām|
praticchāyāmayīmakṣṇornainamicchēccikitsitum||3|| dRuShTyAM yasya vijAnlyAt
pannarUpAM kumArikAm| praticchAyAmayImakShNornainamiccheccikitsitum||3||

The condition in which loss of shadow image is observed in the pupil (eyes) of the patient, should be discarded for treatment.[3]

Features of fatal prognosis based on shadows

ज्योत्स्नायामातपे दीपे सलिलादर्शयोरपि| अङ्गेषु विकृता यस्य च्छाया प्रेतस्तथैव सः॥४॥

jyōtsnāyāmātapi dīpē salilādarśayōrapi| aṅgēṣu vikṛtā yasya cchāyā prētastathaiva
saḥ||4|| jyotsnAyAmAtape dlpe salilAdarshayorapi| a~ggeShu vikRutA yasya cchAyA
pretastathaiva saH||4||

If any sorts of deformity observed in body parts in the shadow of the person in moonlight, sunlight, light of a lamp, water or mirror. He should be considered as dead. [4]

Deformities observed in shadow

छिन्ना भिन्नाऽकुला च्छाया हीना वाऽप्यधिकाऽपि वा| नष्टा तन्वी दविधा च्छिन्ना विकृता विशिरा च
या॥५॥ एताश्चान्याश्च याः काश्चित् प्रतिच्छाया विगर्हिताः| सर्वा मुमूर्षेतां ज्ञेया न
चेल्लक्ष्यनिमित्तजाः॥६॥

chinnā bhinnā”kulā cchāyā hīnā vā’pyadhikā’pi vā| naṣṭā tanvī dvidhā cchinnā vikṛtā
viśirā ca yā||5|| ētāścānyāśca yāḥ kāścit praticchāyā vigarhitāḥ| sarvā mumūrṣatāṁ
jñeyā na cēllakṣyanimittajāḥ||6|| chinnA bhinnA_akulA cchAyA hInA vA_{apyadhikA}api vA|
naShTA tanvl dvidhA cchinnA vikRutA vishirA ca yA||5|| etAshcAnyAshca yAH kAshcit
praticchAyA vigarhitAH| sarvA mumUrShatAM j~jeyA na cellakShyanimittjAH||6||

Observation of shadow of a patient as broken, torn, hazy, devoid of certain organs, seeing excess organs, not conspicuous, bifurcated, deformed and without head, such other similar abnormal shadows if develops without any apparent cause it is considered as severe morbidity.[5-6]

Assessment parameters of shadow

संस्थानेन प्रमाणेन वर्णन प्रभया तथा छाया विवर्तते यस्य स्वस्थोऽपि प्रेत एव सः॥७॥

sarṇsthānēna pramāṇēna varnēna prabhayā tathā| chāyā vivartatē yasya svasthō’pi
prēta ēva saḥ||7|| saMsthAnena pramANena varNena prabhayA tathA| chAyA vivartate
yasya svastho~api preta eva saH||7||

Distortion of shadow in respect of changes in shape, measurement, colour and lustre should be considered as ominous sign even in healthy individual.[7]

संस्थानमाकृतिर्जया सुषमा विषमा च सा| मध्यमल्पं महच्छोक्तं प्रमाणं त्रिविधं नृणाम्||८||
प्रतिप्रमाणसस्थाना जलादर्शातपादिषु| छाया या सा प्रतिच्छाया च्छाया वर्णप्रभाश्रया||९||

samsthānamākṛtirjñeyā suṣamā viṣamā ca sā| madhyamalparṇ mahaccōktarṁ
pramāṇam̄ trividharṁ nṛṇām||८|| pratipramāṇasamsthānā jalādarśātāpādiṣu| chāyā yā sā
praticchāyā cchāyā varṇaprabhāśrayā||९|| saMsthAnamAkRutirj~jeyA suShamA
viShamA ca sA| madhyamalpaM mahaccoktaMpramANaM trividhaM nRuNAm||८||
pratipramANasaMsthAnA jalAdarshAtapAdiShu| chAyA yA sA praticchAyA cchAyA
varNaprabhAshrayA||९||

The term *sansthana* means shape which may be symmetrical or asymmetrical. Measurement is of three kinds namely short, medium, and large. The image reflected in water, mirror, etc., corresponding to the measurement and shape of the body of the individual is known as *praticchhaya* which is nothing but reflected shadow based on the complexion and luster of the individual.[8-9]

Features of Shadow of Pancha Mahabhuta

खादीनां पञ्च पञ्चानां छाया विविधलक्षणाः| नाभसी निर्मला नीला सस्नेहा सप्रभेव च||१०|| रुक्षा
श्यावारुणा या तु वायवी सा हतप्रभा| विशुद्धरक्ता त्वाग्नेयी दीप्ताभा दर्शनप्रिया||११|| शुद्धवैदर्यविमला
सुस्निग्धा चाम्भसी मता| स्थिरा स्निग्धा घना श्लक्षणा श्यामा श्वेता च पार्थिवी||१२|| वायवी गहिता
त्वासां चतस्रः स्युः सुखोदयाः | वायवी तु विनाशाय क्लेशाय महतेऽपि वा||१३||

khādīnāṁ pañca pañcānāṁ chāyā vividhalakṣaṇāḥ| nābhastī nirmalā nīlā sasnēhā
saprabhēva ca||१०|| rūkṣā śyāvārunā yā tu vāyavī sā hataprabhā| viśuddharaktā
tvāgnēyī dīptābhā darśanapriyā||११|| śuddhavaidūryavimalā susnidhā cāmbhasī matā|
sthirā snigdhā ghanā ślakṣṇā śyāmā śvētā ca pārthivī||१२|| vāyavī garhitā tvāsāṁ
catasraḥ syuḥ sukhōdayāḥ | vāyavī tu vināśāya klēśāya mahatē'pi vā||१३|| khAdInAM
pa~jca pa~jcAnAM chAyA vividhalakShaNAH| nAbhasI nirmalA nIIA sasnehA
saprabheva ca||१०|| rUkShA shyAvAruNA yA tu vAyavl sA hataprabhA| vishuddharaktA
tvAgneyI dlptAbhA darshanapriyA||११|| shuddhavaidUryavimalA susnidhA cAmbhasI
matA| sthirA snigdhAghanA shlakShNA shyAmA shvetA ca pArthivI||१२|| vAyavl garhitA
tvAsAM catasraH syuH sukhodayAH | vAyavl tu vinAshAya kleshAya mahate~api
vA||१३||

The following are the distinctive characteristic features of shadows pertaining to each of the five great elements [table 1].

Table 1: Shadows of Pancha Mahabhuta

S.No	Mahabhuta	Distinctive characteristic features of shadows
1	Akasha mahabhuta	Clear , blue, unctuous and lustrous shadow
2.	Vayu	

S.No	Mahabhuta	Distinctive characteristic features of shadows
mahabhuta	Dry, brown, and reddish	
3.	Agni	
mahabhuta	Bright red, brilliant and pleasing to the eyes	
4.	Jala	
mahabhuta	Clear like cat's eye, and excessive unctuous	
5.	Prithvi mahabhuta	Stable, unctuous, compact, smooth, black and white

The shadow pertaining to vayu mahabhuta is of inferior in nature whereas the remaining four are indicative of pleasure and happiness. Vayu mahabhuta shadows indicative of great calamities and miseries.[10-13]

Types of prabha (luster)

स्यातैजसी प्रभा सर्वा सा तु सप्तविधा स्मृता। रक्ता पीता सिता श्यावा हरिता पाण्डुरात्सिता॥१४॥ तासां याः स्युर्विकासिन्यः स्निग्धाश्च विपुलाश्च याः। ताः शुभा रुक्षमलिनाः सङ्क्षिप्ताश्चाशुभोदयाः॥१५॥

syāttaijasī prabhā sarvā sā tu saptavidhā smṛtā| raktā pītā sitā śyāvā haritā
pāṇḍurā'sitā||14|| tāsām yāḥ syurvikkāsinyāḥ snigdhāśca vipulāśca yāḥ| tāḥ śubhā
rūkṣamalināḥ saṅkṣiptāścāśubhōdayāḥ ||15|| syAttaijasI prabhA sarvA sA tu saptavidhA
smRutA| raktA pltA sitA shyAvA haritA pANDurA~asitA||14|| tAsAM yAH syurvikkAsinyaH
snigdhAshca vipulAshca yAH| tAH shubhA rUkShamalinAH
sa~gkShiptAshcAshubhodayAH||15||

All varieties of luster are constituted of tejas mahabhuta. They are classified as seven type's namely red, yellow, white, brown, green, pale yellowish 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]

Difference between Chhaya (shadow) and Prabha(luster)

वर्णमाक्रामति च्छाया भास्तु वर्णप्रकाशिनी। आसन्ना लक्ष्यते च्छाया भा: प्रकृष्टा प्रकाशते॥१६॥ नाच्छायो नाप्रभः कश्चिद् विशेषाश्चिह्नयन्ति तु। नृणां शुभाशुभोत्पत्तिं काले छायाप्रभाश्रयाः॥१७॥

varṇamākrāmati cchāyā bhāstu varṇaprkāśinī| āsannā lakṣyatē cchāyā bhāḥ prakṛṣṭā
prakāśatē॥१६॥ nācchāyō nāprabhaḥ kaścidviśeṣāścihnayanti tu| nṛṇāṁ

śubhāśubhōtpattim kālē chāyāprabhāśrayāḥ||17|| varNamAkrAmati cchAyA bhAstu
varNaprakAshinI| AsannA lakShyate cchAyA bhAH prakRuShTA prakAshate||16||
nAcchAyo nAprabhaH kashcidvisheShAshcihnayanti tu| nRuNAM shubhAshubhotpattiM
kAle chAyAprabhAshrayAH||17||

The shadow decreases the complexion of the body whereas the luster illuminates. The shadow can be observed from nearby whereas luster illuminates from a distance. There is nothing devoid of luster or shadow. Certain distinctive features of the shadow and the luster when mature indicates emergence of inauspicious or auspicious results in relation to human beings. [16-17]

Bad prognostic signs in various diseases

कामलाऽक्षणोर्मुखं पूर्णं शङ्खयोर्मक्तमांसता। सन्त्रासश्चोष्णगात्रत्वं यस्य तं परिवर्जयेत्॥१८॥
उत्थाप्यमानः शयनात् प्रमोहं याति यो नरः। मुहर्मुहूर्नं सप्ताहं स जीवति विकृत्थनः ॥१९॥ संसृष्टा
व्याधयो यस्य प्रतिलोमानुलोमगाः। व्यापन्ना ग्रहणौ प्रायः सोऽर्धमासं न जीवति॥२०॥

kāmalā'kṣṇōrṇukham pūrṇam śaṅkhayōrṇuktamāṁsatā| santrāsaścōṣṇagātratvam
yasya tam parivarjayet||18|| utthāpyamānah śayanāt pramōham yāti yō narah|
muhurmuhurna saptāham sa jīvati vikatthanaḥ ||19|| saṁśṛṣṭā vyādhayō yasya
pratilōmānulōmagāḥ| vyāpannā grahanī prāyah sō'rdhamāsaṁ na jīvati||20||
kAmalA~akShNormukhaM pUrNaM sha~gkhayormuktamAMsatA|
santrAsashcoShNagAtratvaM yasya taM parivarjayet||18|| utthApyamAnaH shayanAt
pramohaM yAti yo naraH| muhurmuhurna saptAhaM sa jlvati vikatthanaH ||19||
saMsRuShTA vyAdhayo yasya pratilomAnulomagAH| vyApnnA grahaNI prAyaH
so~ardhamAsaM na jlvati||20||

Patient who is suffering from kamala, swelling of face, wasting in temples and terrifying appearance with high fever such patient should be discarded for management.

Patient who faints again and again while being lifted from bed cannot survive for a week. The patient afflicted with multiple *doshas* having movements in upward, downward both directions along with disordered grahani(Duodenum and Small intestine) cannot survive for longer than for a fortnight.[18-20]

उपरुदधस्य रोगेण कर्शितस्याल्पमश्नतः। बहु मूत्रपरीषं स्याद्यस्य तं परिवर्जयेत्॥२१॥ दुर्बलो बहु भुइक्ते
यः प्राग्भुक्तादन्नमातुरः। अल्पमूत्रपुरीषश्च यथा प्रेतस्तथैव सः॥२२॥ इष्टं च गणस्मैनमन्नमश्नाति
यो नरः। शश्वच्च बलवर्णाभ्यां हीयते न स जीवति॥२३॥ प्रकजति प्रश्वसिति शीथिलं चातिसार्यते।
बलहीनः पिपासार्तः। शुष्कास्यो न स जीवति॥२४॥ हस्वं च यः। प्रश्वसिति व्याविदधं स्पन्दते च यः। मृतमेव
तमात्रेयो व्याचचक्षे पुनर्वसुः॥२५॥ ऊर्ध्वं च यः। प्रश्वसिति श्लेष्मणा चाभिभूयते। हौनवर्णबलाहारो यो नरो
न स जीवति॥२६॥

uparuddhasya rōgēṇa karśitasyālpamaśnataḥ। bahu mūtrapurīṣam syādyasya tam
parivarjayet||21|| durbalō bahu bhuṇktē yaḥ prāgbhuktādannamāturaḥ |
alpamūtrapurīṣaśca yathā prētastathaiva saḥ||22|| iṣṭam ca
guṇasampannamannaśnāti yō narah। śāsvacca balavarṇābhyaṁ hīyatē na sa
jīvati||23|| prakūjati praśvasiti śithilam cātisāryatē। balahīnah pipāsārtah śuṣkāsyō na sa

jīvati||24|| hrasvarṁ ca yaḥ praśvasiti vyāviddharm spandatē ca yaḥ|mṛtamēva tamātrēyō
vyācacakṣē punarvasuh||25|| ūrdhvaram ca yaḥ praśvasiti ślēṣmaṇā cābhībhūyatē|
hīnavarnabalāhārō yō narō na sa jīvati||26|| uparuddhasya rogeNa
karshitasyAlpamashnataH| bahu mUtrapuriShaM syAdyasya taM parivarjayet||21||
durbalo bahu bhu~gkte yaH prAgbhuktAdannamAturaH | alpamUtrapuriShashca yathA
pretastathaiva saH||22|| iShTaM ca guNasampannamannamashnAti yo naraH|
shashvacca balavarNAbhyAM hlyate na sa jlvali||23|| prakUjati prashvasiti shithilaM
cAtisAryate| balahInaH pipAsArtaH shuShkAsyo na sa jlvali||24|| hrasvaM ca yaH
prashvasiti vyAviddhaM spandate ca yaH|mṛutameva tamAtreyo vyAcacakShe
punarvasuH||25|| UrdhvaM ca yaH prashvasiti shleShmaNA cAbhibhUyate|
hInavarNabalAhAro yo naro na sa jlvali||26||

Consumption of little quantity of food by emaciated person but excretes large amount of urine and stool should be discarded for management.

Consumption of excess quantity of food by weak patient but passes scanty urine and stool should be considered as ghost or almost dead. In spite of taking suitable diet if person constantly loose strength and complexion indicates bad prognosis. If a person who is weak, thirsty and having dryness of mouth, if suffers from groaning, dyspnea and diarrhea, then it should not be treated because he will not survive.

If patient is suffering from shallow respiration with irregular twitching in the body is said to be severe fatal condition like almost dead. Person who is suffering from respiratory distress with abundance of kapha along with diminution of complexion, strength and less intake of food will not survive for longer.[21-26]

ऊर्ध्वाग्रे नयने यस्य मन्ये चारतकम्पने| बलहीनः पिपासार्तः शष्कास्यो न स जीवति||२७|| यस्य
गण्डावुपचितौ ज्वरकासौ च दारुणौ| शली प्रद्वेष्टि चाप्यन्नं तस्मिन् कर्म न सिध्यति||२८||
व्यावृत्तमर्धजिह्वास्यो भ्रवौ यस्य च विच्युते| कण्टकैश्चाचिता जिह्वा यथा प्रेतस्तथैव सः||२९||
शेफश्चात्यर्थमुत्सिकतं निःसृतौ वृषणौ भृशम्| अतश्चैव विपर्यासो विकृत्या प्रेतलक्षणम्||३०|| निचितं
यस्य मांसं स्यात्वगस्थिष्वेव दृश्यते| क्षीणस्यानशनतस्तस्य मासमार्युः परं भवेत्||३१||

ūrdhvāgrē nayanē yasya manyē cāratakampanē| balahInaH pipāsārtah śuṣkāsyō na sa
jīvati||27|| yasya gaṇḍāvupacitau jvarakāsau ca dāruṇau| śūlī pradvēṣṭi cāpyannam
tasmin karma na sidhyati||28|| vyāvṛttamūrdhajihvāsyō bhruvau yasya ca vicyutē|
kanṭakaiścācītā jihvā yathā prētastathaiva sah||29|| śēphaścātyarthamutsiktaṁ niḥsṛtau
vr̥ṣaṇau bhṛśam| ataścaiva viparyāsō vikṛtyā prētalakṣaṇam||30|| nicitaṁ yasya
māṁsaṁ syāttvagastiṣvēva dṛṣyatē| kṣīṇasyānaśnatastasya māsamāyuh param
bhavēt||31|| UrdhvAgre nayane yasya manye cAratakampane| balahInaH pipAsArtaH
shuShkAsyo na sa jlvali||27|| yasya gaNDAvupacitau jvarakAsau ca dAruNau| shUll
pradveShTi cApyannaM tasmin karma na sidhyati||28|| vyAvRuttamUrdhajihvAsyo
bhruvau yasya ca vicyute| kaNTakaishcAcitA jihvA yathA pretastathaiva saH||29||
shephashcAtyarthamutsiktaM niHsRutau vRuShaNau bhRusham| atashcaiva viparyAso
vikRutyA pretalakShaNam||30|| nicitaM yasya mAmsaM syAttvagastiShveva
dRushyate| kShINasyAnashnatastasya mAsamAyuH paraM bhavet||31||

A weak, thirsty and dryness of mouth suffers from rigid and upward look of the eyes and persistent throbbing of the carotid region of the neck, will not survive for long.

If an emaciated person having prominent cheeks along with high fever, severe cough, colic and dislike for food will not cure from his ailments because no treatment suits him.

If there is a distortion of the head, tongue and face, drooping of eye brows and appearance of thorny coat over tongue, don't treat such patients due to its ominous nature.

Whose penis is excessively long along with pendulous testicles or vice versa, such signs are indicative of death of a patient immediately. In emaciated individual whose muscles are excessively undergone wasting with remnants of skin and bone does not survive more than one month.[27-31]

Summary

तत्र श्लोकः- इदं लिङ्गमरिष्टाख्यमनेकमभिजज्ञिवान्| आयुर्वेदविदित्याख्यां लभते कुशलो जनः||३२॥

tatra ślōkaḥ- idam liṅgamariṣṭākhyamanēkamabhijajñivān| āyurvēdavidityākhyāṁ labhatē kuśalō janah||३२|| tatra shlokaH- idaM liṅgamariShTākhyamanekamabhijajjivAn| AyurvedavidityAkhyAM labhate kushalo janaH||३२||

To summarize:

Who is well versed with the observation of above signs and symptoms which indicates imminent death, is entitled to be known as intelligent physician. [32]

Tattva Vimarsha (Fundamental Principles)

- Shadow image in pupils, changes in complexion and luster should be examined to assess prognosis.
- Perception of distorted images of body parts or their absence are ominous signs.

Vidhi

Vimarsha (Applied Inferences)

The Sanskrit word *Pannarupi* implies something whose form or aspect has disappeared. *Pannarupam*, the word, has been derived from *apannarupam*, implies ill-formed or confused in respect of shape. Any alterations in chhaya (complexion) and prabha (luster) denotes the ominous sign for the patient.

Role of Pancha mahabhuta in complexion and luster

Following cross references are important to be re-visited to assess the role of pancha mahabhuta, especially tejas mahabhuta in complexion and luster.

- Qualities of Pancha mahabhuta are:

- Qualities of Akasha are sound, auditory organ, all orifices and distinctness.
- Qualities of Vayu are touch tactile organ, all activities, movements in all body parts and lightness.
- Qualities of Tejas are vision, visual organ, complexion, heat, splendor, digestion, intolerance, sharpness and valor.
- Qualities of Apa are taste, gustatory organ, all liquidity, heaviness, coldness, unctuousness and semen and
- Qualities of Prithvi (i.e., those that have qualities of the prithvi element) are- smell, olfactory organ, hardness and heaviness. [Su. Sa. Sharira Sthana 1/19]³²

Role of tejas and agni in luster

- Tejas mahabhuta promote luster complexion, strength, energy, power, digestive fire, and vitality. It also alleviates all vata dosha dominant diseases and sustains youthful age. [Su. Sa. Chikitsa Sthana 38/50]³³ The normal rasa dhatu converted to reddish color by pitta is rakta dhatu and its equilibrium brings health. [Su.Sa. Sutra Sthana 14/5]³⁴

Tejas element is the causative factor of complexion when at the time of conception, it is predominantly associated with apa element, it makes the fetus fair- complexioned, predominance in prithvi elements causes black one. That in prithvi and akasha elements gives to black- sky complexion while predominance in apa and akasha elements makes fair-sky complexion of fetus. If tejas does not reach the visual organ, it makes the fetus born blind, the same associated with blood makes red eyed, that associated with pitta and kapha makes yellow- eyed and white-eyed respectively, if associated with vata it causes deformity in eyes.

Agni is the primary factor for sustenance of life, color, strength, health, enthusiasm, plumpness, complexion, ojas, tejas, and prana.

³² Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

³³ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

³⁴ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

Assessment of complexion and shadows and their relation with pancha mahabhuta

The changes in complexion and shadows can be assessed upon various parameters. This can indicate the dominance of specific mahabhuta. The characteristics are as shown in table 2 below.

Parameter | [Akasha mahabhuta](/Akasha_mahabhuta)

title="Akasha mahabhuta">Akasha mahabhuta | Vayu mahabhuta | Agni mahabhuta |
Jala mahabhuta | Prithvi mahabhuta | —|—|—|—|—|—|—| Color | Neela (blue) |
Shyava-aruna (grayish red) | Rakta (red) | Vaidurya(cat's eye) | Shyama Shweta (Shy
colour or white) | Luminosity | Saprabha (lustrous) | Hataprabha(Lustreless) |
Diptabha (illuminating) | —|—| Brightness | Pure ||—||—| Like pure vaidurya(cat's eye)
| Unctuous | Transparency | —|—| Vishudhdha (purely transparent) |
Shuddha(Transparent) ||—|| Hydration & Elasticity | Slightly unctuous | Dried ||—|
Good unction | Unctuous | Homogeneity ||—||—| Darshanapriya (charming) ||—|
Shlakshna (smooth) | Firmness ||—||—||—| Sthira (stable) and ghana(solid) |||||
|||||

Table 2: Mahabhuta and their characteristics related to chhaya (skin complexions)

Difference in Chhaya (complexion) and Prabha (luster)

The following table 3 depicts difference between complexion and luster. This is helpful for assessment of disease pathologies and prognosis.

Chhaya	Prabha
Dependent on Varna and Prabha	Illuminates Varna and it is independent
Easily detectable when the person is nearer	Illuminates from a distance
Five types based on mahabhuta	Seven types based upon color
Originates from any mahabhuta	Originates from 'tejas' only
Denotes skin complexion	Denotes skin radiance or luminance or AURA
Can be measured or differentiated by using various scales like 'Fitzpatrick skin type scale', 'Luschan's chromatic scale', C.L.B.T (skin colour, luminance, brightness and transparency) etc;	Can be measured by using 'Optical method having three parameters like Complexion / diffusion' (Cd), Complexion / reflection (Cr), Complexion / specular position (Csp), and C.L.B.T etc;

Table 3: Difference between Chhaya and Prabha

Signs of bad prognosis

To see things devoid of their real characteristics - e.g., bright things looking dull and lusterless - indicates impending death of the patient. The process of dying usually begins well before death actually occurs. Death is a personal journey that each individual approaches in their own unique way. Nothing is concrete, nothing is set in stone. There are many paths one can take on this journey but all lead to the same destination. As one comes close to death, a process begins; a journey from the known life of this world to the unknown of what lies ahead. As that process begins, a person starts on a mental path of discovery, comprehending that death will indeed occur and believing in their own mortality. The journey ultimately leads to the physical departure from the body.

Sign of imminent death

1. Patient who is suffering from kamala, swelling in face, wasting in temples, and terrifying appearance with high fever has grave prognosis.
2. Patient who faints again and again while being lifted from bed may not survive for a week. This is the time during the journey that one begins to sleep most of the time. Disorientation is common and altered senses of perception can be expected. One may experience delusions, such as fearing hidden enemies or feeling invincible. The dying person may also experience hallucinations, sometimes seeing or speaking to people that are not there or died in the past. Some may see this as the veil being lifted between this life and the next. The person may pick at their sheets and clothing in a state of agitation. Movements and actions may seem aimless and make no sense to others. They are moving further away from life to this earth.
3. At the end of life, patients often lose interest in eating and drinking because the body is conserving its energy and no longer requires the same level of nourishment. It is important to let each individual decide how much, even if it is little or nothing, that he or she wishes to eat or drink. Family members should not force food or drink, as it will only make their loved one feel uncomfortable or upset. Near the end of life, patients no longer feel hunger pangs and forcing them to eat may actually cause nausea and abdominal pain. Eventually, the patient may become entirely unable to swallow food and fluids. Frequent mouth care will be given to help prevent dry mouth.
4. When the body prepares to die, a decrease in urine production and loss of bladder and bowel control are noted. The urine may appear dark because the patient is not as hydrated and there is less circulation in the kidneys.
5. Fluids may collect in a dying person's throat and lungs. Because he or she is unable to swallow or cough up this fluid, he or she may make a gurgling noise. The noise may be worrisome to family members, but it is common and rarely uncomfortable for the patient. Elevating and repositioning the head may help to relieve some of the congestion.

- As cardiac output and intravascular volume decrease at the end of life, there will be evidence of diminished peripheral blood perfusion. Tachycardia, hypotension, peripheral cooling, peripheral and central cyanosis, and mottling of the skin (livedo reticularis) are expected. Venous blood may pool along dependent skin surfaces. Urine output falls as perfusion of the kidneys diminishes.

Poor prognostic features and relevant disease pathologies

The prognostic features described in this chapter can be observed in various disease pathologies as shown in table 4.³⁵ There is a wide scope of research to study the exact clinical correlation of the features and underlying disease pathologies.

Reference verse	Relevant disease or pathology
Cha.Sa.Indriya Sthana 7/18	Hepatic encephalopathy; Cirrhosis of liver; Infective hepatitis; Hepatocellular carcinoma; Hepatoblastoma;
Cha.Sa.Indriya Sthana 7/19	Central vertigo; Vertebro basilar insufficiency; Cerebrovascular accidents; Carotid artery stenosis;
Cha.Sa.Indriya Sthana 7/20	Carcinomas with secondary or distal metastases; Various autoimmune, neuromuscular, muscular dystrophies; Bleeding disorders; Malabsorption syndromes; Small intestinal bacterial overgrowth (SIBO)
Cha.Sa.Indriya Sthana 7/21-22	End stage renal disease (ESRD); Acute kidney injury (AKI); Carcinomas; Malabsorption syndrome; Thyrotoxicosis; Fecal impaction; Intestinal (complete or partial) obstruction; Pelvic neoplasms; End stage liver disease (ESLD); Hypercatabolic syndrome;
Cha.Sa.Indriya Sthana 7/23	Hypercatabolic syndrome; Thyrotoxicosis; Carcinomas; Cachexia; Sarcopenia;

³⁵ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

Reference verse	Relevant disease or pathology
Cha.Sa.Indriya Sthana 7/24	Hypovolemic shock; Metabolic acidosis; Diabetic ketoacidosis; Fluid and electrolyte imbalance in hypovolemia; Cerebral hypoperfusion;
Cha.Sa.Indriya Sthana 7/25	Delirium (increased psychomotor activity subtype or hyperactive); Status epilepticus; Cerebral hypoperfusion;
Cha.Sa.Indriya Sthana 7/26	Pulmonary edema; Lung cancer; Pulmonary embolism; Pulmonary cachexia; Pulmonary tuberculosis;
Cha.Sa.Indriya Sthana 7/27	Cerebral hypo perfusion; Cerebral ischemia; Perinaud's syndrome; Oculogyric crisis; Stenosis or aneurysm or kinking or atherosclerosis or dissection of carotid artery;
Cha.Sa.Indriya Sthana 7/28	Mumps; Diphtheria; Bilateral parotid tuberculosis; Other neoplastic or infectious diseases of salivary glands;
Cha.Sa.Indriya Sthana 7/29	Idiopathic facial paresis; Bell's palsy;
Cha.Sa.Indriya Sthana 7/30	Acquired cryptorchidism; Testicular atrophy in carcinoma; Buried penis; Penile carcinoma;
Cha.Sa.Indriya Sthana 7/31	Cancer cachexia; Sarcopenia; Muscular dystrophies or hypertrophies

Table 4:Reference verse and probable relevant pathology

Parapsychological approach

In parapsychology and many forms of spiritual practice, an aura is a field of subtle, luminous radiation surrounding a person or object (like the halo or aureola in religious art). ³⁶, ³⁷

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³⁶ Sushruta. Sutra Sthana, Cha.17 Amapkveshaneeya Adhyaya verse 3 In: Jadavaji Trikamji Acharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

³⁷ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 21-42. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Avakshiraseeyam Indriyam Adhyaya

Indriya Sthana Chapter 8. Fatal signs like inverted shadow of dying person

Abstract

In this chapter, thirty six moribund signs starting with *avakshira*, i.e. inverted shadow of the dying person are described. These moribund signs mentioned in this chapter can be classified into:

1. whose causative factors are pre-determined by destiny(*lakshananimitta*),
2. based on etio-pathological factors(*lakshyanimitta*) and
3. resembling with etiological factors(*nimittaanurupa*).

The changes in eyelids, eyebrows, face, scalp, nose, tongue, ears, and in abnormal movements of body are described to indicate declining lifespan and death. An individual is a union of five elements and consciousness. The union is by no means permanent with the possibility of dissolution (i.e. death) lingers on throughout life. Even though all symptoms mentioned in this chapter cannot be explained by rational scientific parameters, some particular symptoms are experienced and documented by people worldwide. At the end of the chapter the physicians are advised to carefully look for the moribund signs so the therapeutic treatment is stopped at appropriate time.

Keywords: *avakshira*, *Avakshiraseeyamindriyam*, inverted shadow of the dying person, moribund signs, dissolution.

Introduction

The name given to this chapter, *Avakshiraseeyam Indriyam* (or Avakshiraseeyam Indriyam Adhyaya) may be because of the significance of the particular symptom, *avakshira*, which means inverted shadow of the dying person.

These moribund signs mentioned in this chapter can be classified into following types:

Classifications

Three fold	Lakshananimitta	Lakshyanimitta	Nimittanurupa
Two fold	Physical	Emotional-spirit ual-psychologic al.	
Two fold	Featuring in Healthy	Appearing on unhealthy person.	

Table 1: Classification of features

When a person enters the final stage of the dying process, two different dynamics are at work and are closely interrelated and interdependent. On the physical plane, the body begins the final process of shutting down, which will end when all the physical systems cease to function. Usually this is an orderly and undramatic progressive series of physical changes which are not medical emergencies requiring invasive interventions. These physical changes are a normal, natural way in which the body prepares itself for death.

The other dynamic of the dying process at work is on the emotional-spiritual psychological plane, and is a different kind of process. The spirit of the dying person begins the final process of release from the body, its immediate environment, and all attachments. This release also tends to follow its own priorities, which may include the resolution of whatever is unfinished of a practical nature and reception of permission to "let go" from family members. These events are the normal, natural way in which the spirit prepares to move from this existence into the next dimension of life. The most appropriate kinds of responses to the emotional-spiritual-psychological changes are those which support and encourage this release and transition. Some specific symptoms mentioned in this chapter are experienced and documented by people worldwide. The physician is advised to assess the moribund signs in order to stop treatment.

Sanskrit text, Transliteration and English Translation

अथातोऽवाक्षिरसीयमिन्द्रियं व्याख्यास्यामः||१||

इति ह स्माह भगवनात्रेयः||२||

athātō'vākśirasīyamindriyam vyākhyāsyāmāḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAto~avAkshiraslyamindriyaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

We shall now expound the chapter "Avakshiraseeyam Indriyam" (Fatal signs like inverted shadow of dying person). Thus said Lord Atreya. [1-2]

Note: The chapter deals with moribund signs like inverted shadow (of a physical being).

Moribund feature of shadow

अवाक्षिरा वा जिह्मा वा यस्य वा विशिरा भवेत् जन्तो रूपप्रतिच्छाया नैनमिच्छेच्चिकित्सितुम्||३||

avākśirā vā jihmā vā yasya vā viśirā bhavēt| jantō rūpapraticchāyā
nainamicchēccikitsitum||3|| avAkshirA vA jihmA vA yasya vA vishirA bhavet| janto
rUpapraticchAyA nainamiccheccikitsitum||3||

If the physical shadow of the individual is found to be inverted (head downwards and legs upwards), irregular or without the head, he must not be treated. [3]

Moribund feature on eyelids

जटीभूतानि पक्षमाणि दृष्टिश्चापि निगृह्यते । यस्य जन्तोर्न तं धीरो भेषजेनोपपादयेत्॥४॥

jaṭībhūtāni pakṣmāṇi dṛṣṭiścāpi nigrhyatē । yasya jantōrṇa tam dhīrō
bhēṣajēnōpapādayēt||4|| jaTlbhUtAni pakShmANi dRuShTishcApi nigRuhyaTe [1] yasya
jantorna taM dhlro bheShajenopapAdayet||4||

A person, having complete matting of eye-lashes resulting in absence of vision should not be treated.[4]

यस्य शूनानि वर्त्मानि न समायान्ति शुष्यतः । चक्षुषी चोपदिह्येते यथा प्रेतस्तथैव सः॥५॥

yasya śūnāni vartmāni na samāyānti śuṣyataḥ| cakṣuṣī cōpadihyētē yathā
prētastathaiva saḥ||5|| yasya shlUnAni vartmAni na samAyAnti shuShyataH| cakShuShl
copadihyete [2] yathA pretastathaiva saH||5||

An emaciated person who is unable to close his eyes due to swollen eyelids and also accompanied by burning eyes should be considered as good as departed. [5]

Moribund feature on eyebrows and forehead

अङ्गोर्वा यदि वा मूर्ध्नि सीमन्तावर्तकान् बहून् । अपूर्वानकृतान् व्यक्तान् दृष्ट्वा मरणमादिशेत्॥६॥

bhruvōrvā yadi vā mūrdhni sīmantāvartakān bahūn| apūrvānakṛtān vyaktān dṛṣṭvā
maraṇamādiśēt||6|| bhruvorvA yadi vA mUrdhni slmantAvartakAn bahUn|
apUrvAnakRutAn vyaktAn dRuShTvA maraNAMAdishet||6||

A person having appearance of bare lines over the scalp, whirls over eye eyebrows or over scalp which were not present before, will die certainly. [6]

ऋहमेतेन जीवन्ति लक्षणेनातुरा नराः । अरोगाणां पुनस्त्वेतत् षड्ग्रात्रं परमुच्यते ॥७॥

tryahamētēna jīvanti lakṣaṇēnāturā narāḥ| arōgāṇāṁ punastvētat ṣadrātram
paramucyatē ||7|| tryahametena jlventi lakShaNenAturA narAH| arogANAM punastvetat
ShaDrAtraM paramucyate ||7||

These patients (having above mentioned signs), will survive for three days, and healthy individuals (having above mentioned signs) will survive maximum for 6 nights. [7]

Moribund feature of hairs

आयम्योत्पाटितान् केशान् यो नरो नावबुद्ध्यते । अनातुरो वा रोगी वा षड्ग्रात्रं नातिवर्तते॥८॥

āyamyōtpāṭitān kēśān yō narō nāvabudhyatē| anāturō vā rōgī vā ṣadrātrām
nātivartatē||8|| AyamyotpATitAn keshAn yo naro nAvabudhyate| anAturo vA rogl vA
ShaDrAtraM nAtivartate||8||

An ill or healthy individual, who does not respond to pulling or uprooting of hairs, does not survive for more than six nights. [8]

यस्य केशा निरभ्यङ्गा दृश्यन्ते भ्यक्तसन्निभाः | उपरुदधायुषं जात्वा तं धीरः परिवर्जयेत् ||९||

yasya kēśā nirabhyaṅgā dr̥śyantē'bhyaktasannibhāḥ| uparuddhāyuṣam jñātvā tam
dhīraḥ parivarjayet||9|| yasya keshA nirabhya~ggA dRushyante~abhyaktasannibhAH|
uparuddhAyuShaM j~jAtvA taM dhlraH parivarjayet||9||

If the hair of the individual appears to be unreasonably greasy then he should be considered as at the fag-end of his life and should not be treated.[9]

Moribund feature of nose

ग्लायते नासिकावंशः पृथुत्वं यस्य गच्छति | अशूनः शूनसङ्काशः प्रत्याख्येयः स जानता ||१०||

glāyatē nāsikāvarṁśah pṛthutvarṁ yasya gacchatī| aśūnah śūnasaṅkāśah pratyākhyēyah
sa jānatā||10|| glAyate nAsikAvaMshaH pRuthutvaM yasya gacchatī| ashUnaH
shUnasa~gkAshaH pratyAkhyeyah sa jAnatA||10||

A wise (physician) should consider (the patient) with depressed and thickened nasal ridge along with its pseudo – swollen appearance as incurable. [10]

अत्यर्थविवृता यस्य यस्य चात्यर्थसंवृता | जिह्मा वा परिशुष्का वा नासिका न स जीवति ||११||

atyarthavivṛtā yasya yasya cātyarthasamvṛtā| jihmā vā pariśuṣkā vā nāsikā na sa
jīvati||11|| atyarthavivRutA yasya yasya cAtyarthasaMvRutA| jihmA vA parishuShkA vA
nAsikA na sa jlvali||11||

Excessive nasal flaring or constriction, distortion in shape and extreme dryness of the nose indicate that the individual will not survive. [11]

Incurable signs on face, ear and lips

मुखं शब्दश्वावोष्ठौ शुक्लश्यावातिलोहितौ | विकृत्या यस्य वा नीलौ न स रोगाद्विमुच्यते ||१२||

mukham śabdaśravāvōṣṭhau śuklaśyāvātilōhitau| vikṛtyā yasya vā nīlau na sa
rōgādvimucyatē||12|| mukhaM shabdashravAvoShThau [2] shuklashyAvAtilohitau|
vikRutyA yasya vA nllau na sa rogAdvimucyate||12||

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. [12]

Incurable signs on teeth

अस्थिश्वेता द्रविजा यस्य पुष्पिताः पड्कसंवृताः | विकृत्या न स रोगं तं विहायारोग्यमश्नुते ||१३||

asthiśvētā dvijā yasya puṣpitāḥ pañkasamvṛtāḥ| vikṛtyā na sa rōgarṁ tam
vihāyārōgyamaśnutē||13|| asthishvetA dvijA yasya puShpitAH pa~gkasaMvRutAH|
vikRutyA na sa rogaM taM vihAyArogyamashnute||13||

A patient having morbid conditions like appearance of bony white teeth, white flower shaped spots and mud like appearance over teeth cannot recover from the disease. [13]

Fatal signs on tongue

स्तब्धा निश्चेतना गुर्वी कण्टकोपचिता भृशम् ॒ श्यावा शुष्काऽथवा शूना प्रेतजिह्वा विसर्पिणी॥१४॥

stabdhā niścētanā gurvī kaṇṭakōpacitā bhṛśam| śyāvā śuṣkā'thaवā śūnā prētajihvā visarpinī||14|| stabdhA nishcetanA gurvl kaNTakopacitA bhRusham| shyAvA shuShkA~athavA shUnA pretajihvA visarpiNI||14||

If the tongue becomes rigid, senseless, heavy, excessively coated with a thorn like fur, brown in color, dry or swollen and constantly mobile, then the patient having such signs should be considered as good as dead. [14]

Fatal signs of respiration

दीर्घमुच्छवस्य यो हस्वं नरो निःश्वस्य ताम्यति ॒ उपरुद्धायुषं जात्वा तं धीरः परिवर्जयेत्॥१५॥

dīrghamucchvasya yō hrasvam naro niḥsvasya tāmyati| uparuddhāyusam jñātvā tam dhīrah parivarjayet||15|| dīrghamucchvasya yo hrasvaM naro niHshvasya tAmyati| uparuddhAyuShaM j~jAtvA taM dhlraH parivarjayet||15||

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. [15]

Fatal sign of extremities and neck

हस्तौ पादौ च मन्ये च तालु चैवातिशीतलम् भवत्यायुःक्षये क्रूरमथवाऽपि भवेन्मृदु॥१६॥

hastau pādau ca manyē ca tālu caivātiśītalam| bhavatyāyuhkṣayē krūramathavā'pi bhavēnmṛdu||16|| hastau pAdau ca manye ca tAlu caivAtishItalam| bhavatyAyuHkShaye krUramathavA~api bhavenmRudu||16||

Excessive coldness, roughness and softness in hands, legs and neck indicate the end of the life of the person. [16]

Fatal signs of abnormal movements

घट्टयञ्जानुना जानु पादावुद्यम्य पातयन् योऽपास्यति मुहुर्वक्रमातुरो न स जीवति॥१७॥

ghaṭṭayañjānunā jānu pādāvudyamya pātayan| yō'pāsyati muhurvakramāturo na sa jīvati||17|| ghaTTaya~jjAnunA jAnu pAdAvudyamya pAtayan| yo~apAsyati muhurvakramAturo na sa jIvati||17||

The 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. [17]

Fatal signs of abnormal behvior pattern

दन्तैश्चिन्दन्नखाग्राणि नखैच्छिन्दज्जिहरोहान्| काष्ठेन भूमिं विलिखन्न रोगात् परिमुच्यते||१८||

dantaiśchindannakhāgrāṇi nakhaicchindañchirōruhān| kāṣṭhēna bhūmīṁ vilikhanna rōgāt parimucyatē||18|| dantaishchindannakhAgrANi nakhaicchinda~jchiroruhAn| kAShThena bhUmiM vilikhanna rogAt parimucyate||18||

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. [18]

दन्तान् खादति यो जाग्रदसाम्ना विरुदन् हसन्| विजानाति न चेददुःखं न स रोगाद् विमुच्यते||१९||

dantān khādati yō jāgra dasāmnā virudan hasan| vijānāti na cēdduḥkham na sa rōgādvimucyatē||19|| dantAn khAdati yo jAgradasAmnA virudan hasan| vijAnAti na cedduHkhaM na sa rogAdvimucyate||19||

The patient who gnashes teeth while awake, cries and laughs loudly and does not have the pain sensation, does not recover from the disease. [19]

मुहुर्हसन् मुहुः क्वेडन् शर्यां पादेन हन्ति यः| उच्चैश्छिद्राणि विमृशन्नातुरो न स जीवति||२०||

muhurhasan muhuḥ kṣvēdan śayyāṁ pādēna hanti yaḥ| uccaiśchidrāṇi vimṛśannātūro na sa jīvati||20|| muhurhasan muhuH kShveDan shayyAM pAdena hanti yaH| uccaishchidrANi [1] vimRushannAturo na sa jlvti||20||

The patient, who frequently laughs and shouts, strikes the bed by feet and puts finger into the nostrils, ears and eyes does not survive. [20]

Fatal signs of depression

यैर्विन्दति पुरा भावैः समेतैः परमां रतिम्| तैरेवारममाणस्य ग्लास्नोर्मणमादिशेत्||२१||

yairvindati purā bhāvaiḥ samētaiḥ paramāṁ ratim| tairēvāramamāṇasya glāsnōrmaraṇamādiśēt||21|| yairvindati purA bhAvaiH sametaiH paramAM ratim| tairevAramamANasya glAsnormaraNamAdishet||21||

If a debilitated patient develops disliking for such factors which, in the past, made him extremely happy, his death is imminent. [21]

Fatal signs of drooping body posture

न बिभर्ति शिरो ग्रीवा न पृष्ठं भारमात्मनः| न हनू पिण्डमास्यस्थमातुरस्य मुमूर्षतः||२२||

na bibharti śirō grīvā na pṛṣṭham bhāramātmanah| na hanū piṇḍamāsyasthamāturasya mumūrṣataḥ||22|| na bibharti shiro grlvA na pRuShThaM bhAramAtmanaH| na hanU piNDamAsyasthamAturasya mumUrShataH||22||

If the neck of the patient is unable to support the weight of the head, the back, that of the body, the jaw bones, morsel of food in the mouth, this indicates his imminent death. [22]

Fatal signs of acute fever

सहसा ज्वरसन्तापस्तृष्णा मूर्च्छा बलक्षयः| विश्लेषणं च सन्धीनां मुमूर्षुरूपजायते||२३||

sahasā jvarasantāpastrṣṇā mūrcchā balakṣayaḥ| viślēṣaṇaṁ ca sandhīnāṁ
mumūrṣōrupajāyatē||२३|| sahasA jvarasantApastRuShNA mUrcchA balakShayaH|
vishleShaNaM ca sandhInAM mumUrShorupajAyate||२३||

Sudden fever, thirst, fainting, debility and looseness of joints points to death. [23]

गोसर्गं वदनाद्यस्य स्वेदः प्रच्यवते भृशम्| लेपज्वरोपतप्तस्य दुर्लभं तस्य जीवितम्||२४||

gōsargē vadanādyasya svēdaḥ pracyavatē bhṛśam| lēpajvarōpataptasya durlabham
tasya jīvitam||२४|| gosarge vadanAdyasya svedaH pracyavate bhRusham|
lepjvaropataptasya durlabhaM tasya jlvitam||२४||

If a patient suffering from *lepjwara* i.e. a type of fever patient gets profuse perspiration in the face, there is little chance of his survival. [24]

Fatal signs of dysphagia

नोपैति कण्ठमाहारो जिह्वा कण्ठमुपैति च| आयुष्यन्तं गते जन्तोर्बलं च परिहीयते||२५||

nōpaiti kanṭhamāhārō jihvā kanṭhamupaiti ca| āyuṣyantam gatē jantōrbalaṁ ca
parihīyatē||२५|| nopaiti kaNThamAhAro jihvA kaNThamupaiti ca| AyuShyantaM gate
jantorbalaM ca parihlyate||२५||

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. [25]

Fatal signs of movement of head

शिरो विक्षिपते कृच्छान्मुञ्चयित्वा प्रपाणिकौ| ललाटसुप्रतस्वेदो मुमूर्षुश्चयुतबन्धनः ||२६||

śirō vikṣipatē kṛcchrānmuñcayitvā prapāṇikau| lalāṭasrupratasvēdō
mumūrṣuścyutabandhanah ||२६|| shiro vikShipate kRucchrAnmu~jcayitvA prapANikau|
lalATasrupratasvedo mumUrShushcyutabandhanaH [1] ||२६||

If the person moves his head with difficulty with the help of the fore-arms and if there is sweating in the forehead and is a sign of detachment from life, he is moribund. [26]

Summary

तत्र श्लोकः- इमानि लिङ्गानि नरेषु बुद्धिमान् विभावयेतावहितो मुमूर्षुषु| क्षणेन भूत्वा हयुपयान्ति
कानिचिन्नचाफलं लिङ्गमिहास्ति किञ्चन||२७||

tatra ślōkaḥ- imāni liṅgāni narēsu buddhimān vibhāvayētāvahitō mumūrṣuṣu| kṣanēna bhūtvā hyupayānti kānicinnacāphalaṁ liṅgamihāsti kiñcana||27|| tatra shlokaH- imAni li~ggAni nareShu buddhimAn vibhAvayetAvahito mumUrShuShu| kShaNena bhUtvA hyupayAnti kAnicinnacAphalaM li~ggamihAsti ki~jcana||27||

Here is the re-capitulatory verse: 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 certainly indicate imminent death. [27]

Tattva Vimarsha (Fundamental Principles)

- The fatal signs can be observed on eyelids, eyebrows, scalp, nose, face, tongue, teeth, ears, and in abnormal movements of body parts. These signs indicate declining vitality of body.

Vidhi Vimarsha (Applied Inferences)

Importance of moribund signs

The sign of inverted shadow of dying person (avakshirasa lakshanamitta) should be understood. It is a classification and a unique sign which is not mentioned in contemporary science or in other alternative medicines. Naming a chapter in the Charak Samhita after the sign reflects its importance.[verse 3]

Signs on eyelids

Severe blepharitis comprises of matting of eyelids, swollen eyelids, burning vision and may cause death in patients in following conditions:

1. having a neoplasm affecting the eyelid at the time of the clinical onset of blepharitis;
2. or having xerophthalmia at the time of the clinical onset of blepharitis;
3. or having diabetes mellitus at the time of the clinical onset of blepharitis;
4. or being in an immune-compromised state at the time of the clinical onset of blepharitis; [verse 4]

Signs on hairs

A condition of not having pain when uprooting the hairs is found in the end stage of leprosy featuring scalp numbness and alopecia.[verse 5] A condition of unctuous hairs without application of oil is found in the incurable signs of prameha.[verse 9]

Signs on nose

In the Wegener's granulomatosis the bridge of the nose can collapse resulting in a "saddle-nose deformity due to cartilage inflammation. Death occurs due to kidney

failure in such a case. In traditional Chinese medicine a symptom painting (e.g., nasal flaring) is described as a near death sign.[verse 10]

In Tibetan medicine, dryness of nose has been described as near death sign. [citation needed] [verse 11]

In contemporary science, extreme pallor of skin and cyanosis is described as a sign for alertness to identify major cause.[citation needed][verse 12]

Signs on respiration

When death approaches a person his breathing may sound congested; may change in rate, depth and rhythm; there may be periods of breathlessness for 5-30 seconds resulting in Cheyne Stoke breathing.[verse 15]

Signs of abnormal movements

The sign of abnormal movements of knees resembles distressed state of the patient suffering from severe pain which is a common near death symptom wherein patient cannot share his experiences with the other people due to widely compromised ability to communicate-a condition resembles Dysdiadokinesia. [verse 17]

At the end of life, multi organ failure is observed, including the brain. Higher-order consciousness tends to change; the chemical balance of the body becomes completely upset leading to altered sensation.

Saavedra-Aguilar and Gomez-Jeria's (1989) model[citation needed] invokes temporal-lobe dysfunction, hypoxia, psychological stress, and neurotransmitter changes to explain the NDE. According to this model, brain stress caused by traumatic events leads to the release of endogenous neuropeptides, neurotransmitters, or both, producing such effects as analgesia, euphoria, and detachment.

Terminal restlessness is a particularly distressing form of delirium that may occur in dying patients. It is characterized by anguish (spiritual, emotional, or physical), restlessness, anxiety, agitation, and cognitive failure, caused by decrease in oxygen circulation to the brain and by metabolic changes.³⁸ [verse 18-20]

Many NDEs share with dissociation or disconnection of perception, cognition, emotion, and identity from the mainstream of the individual's conscious awareness (Greyson, 1997).³⁹

³⁸ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

³⁹ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Signs of acute fever

Hectic fever is a daily recurring fever with profound sweating, chills, and flushed appearance often associated with pulmonary tuberculosis or septic poisoning.[citation needed] [verse 24]

Signs of deglutition

Inability to swallow the oral food contents, leads to choking or enters the trachea causing fatality.[verse 25]

Chyutabandhanaḥ (Detachment from life) symptom can be interpreted either as release of all bodily sphincters or complete detachment of the bindings of the world, both acknowledged by contemporary science.[citation needed][verse 26]

Similar cross references in other Ayurveda texts

Verse 4 - 7: Su.Sa. Sutra Sthana 31/10. ⁴⁰, A. H. Sharira Sthana 5/17 ⁴¹

Verse 08: Cha.Sa. Anujyotiyam Indriyam Adhyaya verse 17

Verse 09: A. H. Sharira Sthana 5/16,19. ⁴²

Verse 10-12: Su.Sa. Sutra Sthana 31/8. ⁴³

Verse 13: Su.Sa. Sutra Sthana 31/6, ⁴⁴, A. H. Sharira Sthana 5/10. ⁴⁵.

⁴⁰ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁴¹ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁴² Sushruta. Sutra Sthana, Cha.17 Amapkweshaneeya Adhyaya verse 3 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁴³ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 21-42. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

⁴⁴ Madhavakara. Madhava Nidanam (Roga vinischaya). Translated from Sanskrit by K. R. Srikantha Murthy. 8th ed. Varanasi: Chaukhambha orientalia;2007.pp–

⁴⁵ Sushruta. Nidana Sthana, Cha.11 Grandhiapachiarbudagalaganda Nidana Adhyaya verse 13-14 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

Verse 14: Su.Sa. Sutra Sthana 31/7, ⁴⁶, A. H. Sharira Sthana 5/10. ⁴⁷.

Verse 18-19: Su.Sa. Sutra Sthana 31/7, ⁴⁸, A. H. Sharira Sthana 5/10. ⁴⁹.

Verse 22: Su.Sa. Sutra Sthana 31/11, ⁵⁰, A. H. Sharira Sthana 5/11. ⁵¹.

Verse 23: A. H. Sharira Sthana 5/109. ⁵².

Verse 24: A. H. Sharira Sthana 5/110. ⁵³.

Verse 26: A. H. Sharira Sthana 5/57. ⁵⁴.

Note: Thirty six moribund signs are mentioned in section of Sanskrit *shloka* and their translation in English and are not repeated here.

⁴⁶ American Journal of Clinical Nutrition. November 2004; 80(5):1185-93.

⁴⁷ Mahalakshmipuram PS, Ramachandran A, Nishteswar K, Chandola HM. A preface study on exploring the pharmacodynamics of Curcuma neilgherrensis Wight- A folklore medicine. Indian J of Traditional Knowl 2013; 12(2): 288-294

⁴⁸ M Prasad Shyam, Chandola HM, Ravishankar. A clinico- experimental study to evaluate the therapeutic efficacy of Curcuma neilgherrensis Weight in the management of MadhuMeha (Type 2 Diabete Mellitus). PhD thesis. Institute of Post Graduate Teaching and Resaerch in Ayurveda, Gujarat Ayurveda University, Jamnagar, India, 2011

⁴⁹ Leach MJ. Gymnema sylvestre for diabetes mellitus: A systematic review. J Alter Complement Med 2007; 13: 977-983

⁵⁰ Shanmugasundaram ER, Gopinath KL, Radha Shanmugasundaram K, Rajendran VM. Possible regeneration of the islets of Langerhans in streptozocin- diabetic rats given Gymnema sylvestre leaf extracts. J Ethnnopharmacol 1990; 30: 265-279

⁵¹ Leach MJ. Gymnema sylvestre for diabetes mellitus: A systematic review. J Alter Complement Med 2007; 13: 977-983

⁵² Baskaran K, Kizar Ahamath B, Radha Shanmugasundaram K, Shanmugasundaram ER. Antidiabetic effect of a leaf extract from Gymnema sylvestre in non-insulin – dependent diabetes mellitus patients. J Ethnnopharmacol 1990; 30: 295-300

⁵³ Shanmugasundaram ER, Rajeswari G, Baskaran K, et al. Use of Gymnema sylvestre leaf extract in the control of blood glucose in in insulin- dependent diabetes mellitus. J Ethnnopharmacol 1990; 30: 281-294

⁵⁴ Baskaran K, Kizar Ahamath B, Radha Shanmugasundaram K, Shanmugasundaram ER. Antidiabetic effect of a leaf extract from Gymnema sylvestre in non-insulin – dependent diabetes mellitus patients. J Ethnnopharmacol 1990; 30: 295-300.

Contemporary views of prognostic features

The prognostic features described in the text can be observed in various disease conditions in contemporary clinical practice. The probable relevant conditions are summarized in the table 2.⁵⁵

Prognostic feature reference	Contemporary views and relevant disease condition
Inverted Shadow [Cha.Sa.Indriya Sthana 8/3]	Shadow analysis; similar to radio-diagnosis or imaging studies; shadows represents internal body parts;
Signs on eyelashes [Cha.Sa.Indriya Sthana 8/4]	Blepharitis due to parasitic or fungal eye infections with secondary immunosuppression; Autoimmune disease with ocular manifestations;
Signs on eyelids [Cha.Sa.Indriya Sthana 8/5]	Grave's ophthalmopathy;
Signs on eyebrow [Cha.Sa.Indriya Sthana 8/6-7]	Seborrhoea in an immunocompromised patients; Carcinomas with an opportunistic scalp fungal infections or autonomic dysfunctions; Skull base tumours or metastatic skull tumours or brain tumours;
Signs on hair pulling [Cha.Sa.Indriya Sthana 8/8]	Syringomyelia; Pure neuritis form of Leprosy (PNL); DSDP (Diabetic symmetric distal polyneuropathy); Acute sensory polyneuritis in GBS (Guillain-Barre syndrome); Sensory neuropathies;
Signs on hair unctuousness [Cha.Sa.Indriya Sthana 8/9]	Seborrhoea in an immunocompromised patients; Seborheic dermatitis in AIDS (Acquired immuno-deficiency syndrome);
Signs on nasal ridge [Cha.Sa.Indriya Sthana 8/10]	Saddle nose deformity in Leprosy, Syphilis, Wegener's

⁵⁵ Shanmugasundaram ER, Rajeswari G, Baskaran K, et al. Use of Gymnema sylvestre leaf extract in the control of blood glucose in insulin- dependent diabetes mellitus. J Ethnopharmacol 1990; 30: 281-294

Prognostic feature reference	Contemporary views and relevant disease condition granulomatosis; Rhinophyma; Maxillary or occult basal cell carcinomas; Nasal septal deviations; SND (saddle nose deformity); Nasal and paranasal carcinomas and benign tumours; Hemangiomas; Lupus vulgaris; Sarcoidosis; Granulomas;
Signs on nostrils [Cha.Sa.Indriya Sthana 8/11]	Anaemia; Hyperpigmentation; Cutaneous flushing in various neuroendocrine diseases; Cyanosis; Acrocyanosis;
Signs on face [Cha.Sa.Indriya Sthana 8/12]	Dental fluorosis; Periodontitis in oral, lung and pancreatic carcinomas; Hypomeineralization or demineralization of enamel in carcinomas or metastases;
Signs on teeth [Cha.Sa.Indriya Sthana 8/13]	Pseuobulbar palsy; Myotonia; Progressive bulbar palsy; Pathology of cranial nerves V, VII and IX; DMD (Duchenne muscular dystrophy); ALS (Amyotrophic lateral sclerosis); MG (Myasthenia gravis); Macroglossia; Leukemia; Carcinomas; Inflammations; Fissured tongue in vitamin deficiencies; Black hairy tongue; Pathological pigmentation of tongue seen in Addison's disease; Neoplastic causes; Atrophy of the tongue in various LMN (lower motor neuron) syndromes; Pathology of cranial nerves VII & XII; LMN syndromes;
Signs on tongue [Cha.Sa.Indriya Sthana 8/14]	Abnormal breathing patterns like 'Apneustic', 'Cheyne-Stokes', 'Kussmaul' etc seen in cardio-pulmonary conditions, cerebrovascular accidents,
Signs on pattern of respiration [Cha.Sa.Indriya Sthana 8/15]	

Prognostic feature reference	Contemporary views and relevant disease condition metabolic acidosis and diabetic ketoacidosis etc; Hypovolemic shock;
Signs of cold extremities [Cha.Sa.Indriya Sthana 8/16]	Movement disorders seen in brain injuries; Status epilepticus (SE); Hyperactive subtype of Delirium;
Signs on knee movements [Cha.Sa.Indriya Sthana 8/17]	Nail biting, Trichotillomania and stereotypies seen in OCD spectrum disorders; Self injurious behaviours (SIBs) seen in Tourette's syndrome (TS);
Signs of abnormal behavior pattern [Cha.Sa.Indriya Sthana 8/18]	Awake bruxism seen in various neuropsychiatric conditions; TMDs (Temporomandibular disorders) seen in Schizophrenia;
Signs of bruxism [Cha.Sa.Indriya Sthana 8/19]	Movement disorders or dystonia with 'geste antagoniste' or 'sensory trick' or 'alleviating manoeuvre'; Restless legs syndrome (RLS); Neuropsychiatric Lyme borreliosis; Basal ganglia encephalitis;
Signs of abnormal behavior [Cha.Sa.Indriya Sthana 8/20]	Major depressive disorder (MDD); Negative symptoms of Schizophrenia; Cotard syndrome (CS); Catatonia; Bipolar mood disorder; Organic mood disorder;
Signs of depression [Cha.Sa.Indriya Sthana 8/21]	NMDs (Neuromuscular disorders); LMN (lower motor neuron) syndromes;
Signs of drooping body posture [Cha.Sa.Indriya Sthana 8/22]	Acute septic arthritis; Septic shock; SIRS (Systemic inflammatory response syndrome); MODS (Multi organ dysfunction syndrome);
Signs of acute fever [Cha.Sa.Indriya Sthana 8/23]	Fever in neoplastic conditions; Cutaneous flushing in Neuroendocrinial diseases; Pheochromocytoma and Paraganglioma (PPGLs);
Signs of hectic fever [Cha.Sa.Indriya Sthana 8/24]	

Prognostic feature reference	Contemporary views and relevant disease condition
Signs of dysphagia [Cha.Sa.Indriya Sthana 8/25]	Neuromuscular disorders (NMDs); ALS (Amyotrophic lateral sclerosis); Oropharyngeal dysphagia;
Signs of abnormal head movements [Cha.Sa.Indriya Sthana 8/26]	Focal hyperhidrosis (acquired); Vertebral seizures; Frontal and occipital lobe seizures; Spinal cord injury (SCI); Syringomyelia; Intramedullary spinal cord tumours;

Table 2: Contemporary views of prognostic features

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Yasyashyavanimittiyan Indriyam Adhyaya

Indriya Sthana Chapter 9. Signs and Symptoms useful for Palliative Care among Patients approaching Death Abstract

This chapter includes various signs and symptoms related to imminent death that start with changes in color of eyes and identified in a patient as well as in healthy individuals. It has been emphasized that physician should have knowledge of all Arishta Lakshana (near death signs) described in this chapter. Clinically only few of them manifest at a stage in an individual and hence the person must be examined properly. Certain features related with imminent death are described which when associated with any disease indicate grave prognosis. Complications which indicate the incurability of a disease are scientific and are seen till date. Description of eight grave diseases and symptoms of approaching death are other two important topics which add value to this chapter. These signs are important in palliative care. Therefore, knowledge of such predictive signs and symptoms is an integral part of medical science. **Keywords:** Arishta, Vikara, Bala, Marana, Jivita,” change in eye color, grave diseases, death.

Introduction

Yasyashyavanimittiyan Indriyam Adhyaya refers to color changes in eyes. In the first four chapters of Indriya Sthana, conditions related to Indriya or five sense organs have been described. In those chapters, derangement in functional aspects of indriya have been given importance and Atreya told to examine them by the help of logical inference (anumana pramana). In this chapter certain anatomical changes or changes which can be examined by direct observation(pratyaksha pramana) are mentioned which are equally important indicators of life span. Nowadays, importance is given to the identification of approaching death. Educational and training programs are organized to educate family members/relatives/attendants so that patient care is not neglected near death and this specialized field is commonly known as Palliative care. The World Health Organization (WHO) defines palliative care as ‘an approach that improves the quality of life of individuals and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psycho-social and spiritual’.⁵⁶ The aging of the population, with the numerous chronic debilitating and malignant conditions associated with growing older, has focused attention on palliative care. The terminal state is an integral process and a time to reconcile differences so that patient and family may accept death with a minimum of

⁵⁶ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

physical, spiritual, and psycho-social anguish.⁵⁷ Hospice care is a specialized philosophy and system of care for the terminally ill patient that accepts death in an affirmative way and provides palliative care and emotional support to dying patients and their families.⁵⁸ Hospice and palliative care philosophy lays emphasis on relieving suffering and improving quality of life at the end of life in order to permit experiences that will have positive meaning. The role of the physician is central in providing this care.⁵⁹ When recovery is uncertain it is better to discuss this rather than giving false hope to the patient and family. This is generally perceived as a strength in the doctor-patient relationship and helps to build trust.⁶⁰ Charak also supports this view and states that those near death should not be treated. Thus it becomes important that physician should be well trained in identifying features of impending death.

In order to care for dying patients it is essential to “identify dying”. This aim can be attained by applying the knowledge given in this chapter. Presently to predict prognostic value few tools have been designed. Most widely-used prognostic tools is the Palliative Performance Scale (PPS) which has been studied primarily in inpatient settings and in patients with cancer. Few researches are on going to develop tools for prognosis in other diseases also.⁶¹ Research can be done to develop a scale based on parameters described in Ayurvedic Arishta Vigyana and this chapter can also contribute a lot in making such kind of tool.

Sanskrit text, Transliteration and English Translation

यस्यश्यावनिमित्तेन्द्रियोपक्रमः अथातो यस्यश्यावनिमित्तीयमिन्द्रियं व्याख्यास्यामः॥१॥ इति ह स्माह
भगवानात्रेयः॥२॥

⁵⁷ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

⁵⁸ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁵⁹ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁶⁰ Sushruta. Sutra Sthana, Cha.17 Amapkweshaneeya Adhyaya verse 3 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁶¹ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 21-42. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

athātō yasyaśyāvanimittīyamindriyāṁ vyākhyāsyāmāḥ||1|| iti ha smāha
bhagavānātrēyah||2|| athAto yasyashyAvanimittlyamindriyaM vyAkhyAsyAmaH||1|| iti ha
smAha bhagavAnAtreyaH||2||

We shall now expound the chapter “Yasyashyavanimittiyan Indriyam Adhyaya” (Signs and Symptoms useful for Palliative Care among Patients approaching Death). Thus said Lord Atreya. [1-2]

Note: The chapter deals with sensorial prognosis from the observation of the dark brown color of the eye of a man.

Poor prognosis in Pitta disorders

यस्य श्यावे परिद्धवस्ते हरिते चापि दर्शने। आपन्नो व्याधिरन्ताय ज्ञेयस्तस्य विजानता॥३॥ निःसञ्जः
परिशुष्कास्यः समृद्धो व्याधिभिश्च यः। उपरुद्धायुषं जात्वा तं धीरः परिवर्जयेत्॥४॥ हरिताश्च सिरा
यस्य लोमकूपाश्च संवृताः। सोऽम्लाभिलाषी पुरुषः पित्तान्मरणमश्नुते॥५॥

yasya śyāvē paridhvastē haritē cāpi darśanē। āpannō vyādhiraṇtāya jñēyastasya
vijānatā॥३॥ niḥsañjñah pariśuṣkāsyah samṛddhō vyādhibhiśca yah। uparuddhāyuṣam
jñātvā tam dhīrah parivarjayēt॥४॥ haritāscā sirā yasya lōmakūpāscā saṁvṛtāh।
sō’mlābhilāshī puruṣah pittānmarañamaśnutē॥५॥ yasya shyAve paridhvaste harite cApi
darshane। Apanno vyAdhirantAya j~jeyastasya vijAnatA॥३॥ niHsaञjaH
parishuShkAsyaH samRuddho vyAdhibhishca yaH। uparuddhAyuShaM j~jAtvA taM
dhIraH parivarjayet॥४॥ haritAshca sirA yasya lomakUpAshca saMvRutAH।
so~amlAbhilAShi puruShaH pittAnmaraNamashnute॥५॥

If patient eyes are brownish/blackish, distorted or displaced or greenish in color, then such condition indicates impending death. The patient who is unconscious, having dry mouth and is suffering from various diseases should be considered as having short life span and such patient should be discarded by the wise physician.

The man whose veins are green and whose hair follicles are closed and who craves for sour things succumb to death due to pitta disorders. [3-5]

Poor prognosis in Rajayakshma and Shosha

शरीरान्ताश्च शोभन्ते शरीरं चोपशुष्यति। बलं च हीयते यस्य राजयक्षमा हिनस्ति तम्॥६॥ अंसाभितापो
हिक्का च छर्दनं शोषितस्य च। आनाहः पाश्वर्शूलं च भवत्यन्ताय शोषिणः॥७॥

śarīrāntāscā śōbhantē śarīram cōpaśuṣyatil| balam ca hīyatē yasya rājayakṣmā hinasti
tam॥६॥ aṁsābhītāpō hikkā ca chardanam śōṣitasya ca| ānāhaḥ pārśvaśūlam ca
bhavatyantāya śōṣinah॥७॥ sharīrAntAshca shobhante sharīraM copashuShyati| balaM
ca hlyate yasya rAjayakShmA hinasti tam॥६॥ aMsAbhitApo hikkA ca chardanaM
shoNitasya ca| AnAhaH pArshvashUlaM ca bhavatyantAya shoShiNaH॥७॥

In a patient of rajayakshma, waning strength, shining extremities and emaciated body parts denotes that patient will succumb to death soon.

The burning pain in the shoulder region, hiccup, hematemesis, distension of the stomach and pain in the flanks in patient of consumption will end the life of patient. [6-7]

Poor prognosis in grave diseases

वातव्याधिरपस्मारी कष्ठी शोफी तथोदरी| गुल्मी च मधुमेही च राजयक्ष्मी च यो नरः||८|| अचिकित्स्या भवन्त्येते बलमांसक्षयै सति| अन्येष्वपि विकारेषु तान् भिषक् परिवर्जयेत्॥९॥

vātavyādhirapasmārī kuṣṭhī śōphī tathōdarī| gulmī ca madhumēhī ca rājayakṣmī ca yō narah||8|| acikitsyā bhavantyētē balamāṁsakṣayē sati| anyēśvapi vikārēsu tān bhiṣak parivarjayēt||9|| vAtavyAdhirapasmAri kuShThI shophI tathodarI| gulml ca madhumehl ca rAjayakShml ca yo naraH||8|| acikitsyA bhavantyete balamAMsakShaye sati| anyeShvapi vikAreShu tAn bhiShak parivarjayed||9||

When diseases like Vatavyadhi (diseases due to vata), Apasmara (Epilepsy), Kushtha (Skin diseases), Shopha (Swellings), Udara (abdominal diseases including ascitis), Gulma (lumps and tumors), Madhumeha (urinary disorders including Diabetes) and Rajayakshma (Tuberculosis) are associated with loss of strength and muscle wasting then such patient should be discarded by the physician as patient will not recover and will succumb to death.

Patients suffering from other diseases too having above features should be avoided by the physician. [8-9]

Poor prognosis after Virechana (therapeutic purgation)

विरेचनहृतानाहो यस्तृष्णानुगतो नरः| विरिक्तः पुनराध्माति यथा प्रेतस्तथैव सः||१०||

virēcanahṛtānāhō yastr̥ṣṇānugatō narah| viriktaḥ punarādhmāti yathā prētastathaiva saḥ||10|| virecanahRutAnAho yastRuShNAnugato naraH| viriktaH punarAdhmAti yathA pretastathaiva saH||10||

If abdominal distension of a patient is relieved by purgation for short time and then patient develops thirst, distension of abdomen and severe pain again, then such patient should be considered as a ghost i.e. the patients will surely die soon. [10]

Poor prognosis in dysphagia

पेयं पातुं न शक्नोति कण्ठस्य च मुखस्य च| उरसश्च विशुष्कत्वाद्यो नरो न स जीवति ||११||

pēyam pātum na śaknōti kaṇṭhasya ca mukhasya ca| urasaśca viśuṣkatvādyō narō na sa jīvati ||11|| peyaM pAtuM na shaknoti kaNThasya ca mukhasya ca urashashca vishuShkatvAdyo naro na sa jlvali ||11||

One who is unable to drink/swallow anything because of excessive dryness of throat, mouth and chest does not survive.[11]

Poor prognosis with feeble voice

स्वरस्य दुर्बलीभावं हानिं च बलवर्णयोः| रोगवृद्धिमयुक्त्या च दृष्ट्वा मरणमादिशेत्॥१२॥

svarasya durbalibhāvam hānīm ca balavarnayōḥ| rōgavṛddhimayuktyā ca dr̄stvā maraṇamādiśēt||12|| svarasya durbalbhAvAM hAniM ca balavarNayoH| rogaRuddhimayuktyA ca dRuShTvA maraNAMAdishet||12||

If a patient develops weakness of voice, diminution of strength and complexion, and aggravation of disease without an apparent cause then such patient will die soon.[12]

Poor prognosis with shallow breathing and groin pain

ऊर्ध्वश्वासं गतोष्माणं शूलोपहतवङ्क्षणम्| शर्म चानधिगच्छन्तं बुद्धिमान् परिवर्जयेत्॥१३॥

ūrdhvashvāsam gatōṣmāṇam śūlōpahatavaṅkṣanam| śarma cānadhigacchantaṁ buddhimān parivarjayēt||13|| UrdhvashvAsaM gatoShmA NaM shUlopatava~gkShaNaM| sharma cAnadhigacchantaM buddhimAn parivarjayet||13||

The person/ individual whose breathing has been shallow, has subnormal temperature and who feels piercing pains in the groins without experiencing a moment of comfort, should be discarded by the wise physician.[13]

Signs of impending death and ethics in critical care

अपस्वरं भाषमाणं प्राप्तं मरणमात्मनः| श्रोतारं चाप्यशब्दस्य दूरतः परिवर्जयेत्॥१४॥ यं नरं सहसा रोगो दुर्बलं परिमुञ्चति| संशयप्राप्तमात्रेयो जीवितं तस्य मन्यते॥१५॥ अथ चेज्जातयस्तस्य याचेरन् प्रणिपाततः| रसेनादयादिति ब्रयान्नास्मै दद्याद्विशोधनम्॥१६॥ मासेन चेन्न दृश्येत विशेषस्तस्य शोभनः| रसैश्चान्यैबहुविधैर्दुर्लभं तस्य जीवितम्॥१७॥

apasvaram bhāsamāṇam prāptam maraṇamātmanah| śrōtāram cāpyaśabdasya dūrataḥ parivarjayēt||14|| yaṁ naram sahasā rōgō durbalaṁ parimuñcati| saṁśayaprāptamātrēyō jīvitam tasya manyatē||15|| atha cējjñātayastasya yācēran pranipātataḥ| rasēnādyāditi brūyānnāsmai dadyādvīśōdhanam||16|| māsēna cēnna dr̄syēta viśēshastasya śōbhanaḥ| rasaiścānyairbahuvidhairurlabhaṁ tasya jīvitam||17|| apasvaraM bhAShamANaM prAptaM maraNAMAtmaNaH| shrotAraM cApyashabdasya dUrataH parivarjayet||14|| yaM naraM sahasA rogo durbalaM parimu~jcati| saMshayaprAptamAtreyo jlvitam tasya manyate||15|| atha cejj~jAtayastasya yAceran praNipAtataH| rasenAdyAditi brUyAnnAsmai dadyAdvishodhanam||16|| mAseNa cenna dRushyeta visheShastasya shobhanaH| rasaishcAnyairbahuvidhairurlabhaM tasya jlvitam||17||

The man speaking irrelevantly about death or patient suffering from auditory hallucinations should not be treated. If in any disease, patient deteriorates all of a sudden, his survival is doubtful as told by Atreya.

If the relatives of the patient request the physician begging for his life, the physician should prescribe the diet of soup prepared out of meat; but purification therapy (shodhana) should not be done in such patient as it will further deteriorate the condition.

If after one month, no signs of improvement as the result of soup prepared out of meat and varied other nutritive agents are seen, then the patient's survival is rare. [14-17]

Poor prognosis based on sputum, stool and semen test

निष्ठ्यूतं च पुरीषं च रेतश्चाम्भसि मज्जति| यस्य तस्यायुषः प्राप्तमन्तमाहुर्मनीषिणः||१८||

niṣṭhyūtām ca purīṣām ca rētaścāmbhasi majjatiḥ yasya tasyāyuṣah
prāptamantamāhurmanīṣinah||18|| niShThyUtaM ca purIShaM ca retashcAmbhasi
majjatiḥ yasya tasyAyuShaH prAptamantamAhurmanIShiNaH||18||

If a man's sputum, feces and semen sink into water, the wise physicians say that he has come to the end of his life.[18]

Poor prognosis based on discoloration of sputum

निष्ठ्यूते यस्य दृश्यन्ते वर्णा बहुविधाः पृथक्| तच्च सीदत्यपः प्राप्य न स जीवितुमर्हति ||१९||

niṣṭhyūtē yasya dr̥syantē varṇā bahuvidhāḥ pṛthak| tacca sīdatyapah prāpya na sa
jīvitumarhati ||19|| niShThyUte yasya dRushyante varNA bahuvidhAH pRuthak| tacca
sīdatyapah prApya na sa jlvitumarhati ||19||

If the sputum has various color and sinks in water, the patient does not survive.[19]

Poor prognosis in shankhaka

पित्तमूष्मानुगं यस्य शङ्खौ प्राप्य विमूर्च्छति | स रोगः शङ्खको नाम्ना त्रिरात्राद्धन्ति जीवितम्||२०||

pittamūṣmānugam yasya śaṅkhau prāpya vimūrcchati | sa rōgaḥ śaṅkhakō nāmnā
trirātrāddhanti jīvitam||20|| pittamUShmAnugaM yasya sha~gkhau prApya vimUrcchati |
sa rogaH sha~gkhako nAmnA trirAtrAddhanti jlvitam||20||

The morbid condition in which the pitta, reaches up to temporal area and accumulates there, is known by the name of Shankhaka. It kills the patient in three nights. [20]

Poor prognosis based on hemoptysis

सफेनं रुधिरं यस्य मुहुरास्यात् प्रसिच्यते| शूलैश्च तुदयते कुक्षिः प्रत्याख्येयस्तथाविधः||२१||

saphēnam̄ rudhiram̄ yasya muhurāsyāt̄ prasicyatē| śūlaiśca tudyatē kukṣiḥ
pratyākhyēyastathāvidhaḥ||21|| saphenaM rudhiraM yasya muhurAsyAt̄ prasicyate|
shUlaishca tudyate kukShiH pratyAkhyeyastathAvidhaH||21||

The man frequently spitting frothy blood and suffering from piercing pains in the stomach, should be refused for the treatment by the physician.[21]

Poor prognosis with cachexia

बलमांसक्षयस्तीत्रो रोगवृद्धिररोचकः| यस्यातुरस्य लक्ष्यन्ते त्रीन् पक्षान्न स जीवति||२२||

balamāṁsakṣayastīvrō rōgavrddhirarōcakah| yasyāturasya laksyantē trīn paksānna sa jīvati||22|| balamAMsakShayastlvro rogavRuddhirarocakaH| yasyAturasya lakShyante trln pakShAnna sa jlvali||22||

The patient, who suffers from rapid loss of strength and muscle wasting, aggravation of disease symptoms and anorexia, does not survive more than three fortnights. [22]

Summary

तत्र श्लोकौ- विजानानि मनुष्याणां मरणे प्रत्युपस्थिते। भवन्त्येतानि सम्पश्येदन्यान्येवंविधानि च॥२३॥
तानि सर्वाणि लक्ष्यन्ते न तु सर्वाणि मानवम्। विशन्ति विनशिष्यन्तं तस्माद्बोध्यानि सर्वतः॥२४॥

tatra ślōkau- vijñānāni manusyāṇām maraṇe pratypasthitē| bhavantyētāni
sampaśyēdanyānyēvaṁvidhāni ca||23|| tāni sarvāṇi lakṣyantē na tu sarvāṇi mānavam|
viśanti vinaśiyantam tasmādbōdhyāni sarvataḥ||24|| tatra shlokau- vij~jAnAni
manuShyANAM maraNe pratypasthite| bhavantyetAni
sampaśhyedanyAnyevaMvidhAni ca||23|| tAni sarvANI lakShyante na tu sarvANI
mAnavam| vishanti vinashiShyantaM tasmAdbodhyAni sarvataH||24||

These features in human beings denote impending death.

The physician should observe these and other similar features.

It is not necessarily that one finds them collectively in one person who is approaching death. Only few of them may appear in one person. Hence, the physician should know with all the signs and symptoms, prognosticative of death. [23-24]

Tattva Vimarsha (Fundamental Principles)

- Various biomarkers have been developed since the time of Charak and many diseases which were incurable can be controlled. Patient should be evaluated using these biomarkers, before communicating to the patient and family about remaining lifespan of patient.
- The bala (strength and immunity) and mamsa (muscle mass) are important markers for assessment of health and death. Depletion of these two markers indicates near death signs. [8-9]
- Change in eye color, voice, sputum, feces and semen are markers of near death.

Vidhi Vimarsha (Applied Inferences)

Importance of general examination

General examination is important for assessing life span of any individual. Treatment should be planned after complete examination of disease and patient including the biomarkers. Cravings for substances which increases vitiation of causative dosha reflects grave prognosis of the disease. [Verse 3-5]

Patient with poor strength will die with consumption, as the patient will not be able to fight disease and will succumb to death. [Verse 6-7]

Eight grave diseases

Eight grave diseases (Ashta Mahagada) are difficult to treat. They are incurable if associated with loss of strength with muscle wasting.[Verse 8-9]

Medical ethics in critical care

If patient suffers from an incurable disease and shows arishta signs, physician should inform the relatives about the exact condition of the patient and suggest care to keep the patient comfortable. If the legal guardian of the patient requests the physician for treatment then only he should treat the patient. [Verse 14-17]

Contemporary views

The prognostic features described in the text can be observed in various disease conditions in contemporary clinical practice. The probable relevant conditions are summarized in the table 1.⁶²

Prognostic feature	Contemporary views and relevant disease condition
Poor prognosis in Pitta disorders [Cha.Sa.Indriya Sthana 9/3-5]	Alkaptonuria; Nevus of Ota; Jaundice due to various underlying pathological conditions; Acute brain dysfunction; Coma; Delirium; Hypovolemic shock; Caput medusae in portal hypertension due to cirrhosis of liver;
Poor prognosis in Rajayakshma [Cha.Sa.Indriya Sthana 9/6]	Secondary palmar hyperhidrosis in tuberculosis (TB); Peripheral artery disease (PAD) in TB; Terminal cachexia;
Poor prognosis in Shosha [Cha.Sa.Indriya Sthana 9/7]	Cavitating pulmonary TB; Subphrenic abscess; Opportunistic infections in immunocompromised patients; Perforation of peptic ulcer; Carcinoma of chest;
Poor prognosis in grave diseases ashta	

mahagada [Cha.Sa.Indriya Sthana 9/8-9] | Cachexia and sarcopenia in chronic debilitating conditions like CHF (congestive heart failure), COPD (chronic obstructive pulmonary disease), CKD (chronic kidney disease) and AIDS (acquired

⁶² Madhavakara. Madhava Nidanam (Roga vinischaya). Translated from Sanskrit by K. R. Srikantha Murthy. 8th ed. Varanasi: Chaukhamba orientalia;2007.pp–

immunodeficiency syndrome) | | | Poor prognosis after therapeutic purgation (virechana) [Cha.Sa.Indriya Sthana 9/10] | MBO (malignant bowel obstruction); Functional abdominal bloating and distension (FABD); Irritable bowel syndrome (IBS); | | | Poor prognosis with dysphagia [Cha.Sa.Indriya Sthana 9/11] | Liquid dysphagia or Oropharyngeal dysphagia in various neuromuscular or neurodegenerative or neuroinflammatory or infectious conditions; Lower motor neuron syndromes (LMNs); Amyotrophic lateral sclerosis (ALS); Motor neuron disease (MND); Progressive bulbar palsy (PBP); | | | Poor prognosis with feeble voice [Cha.Sa.Indriya Sthana 9/12] | Advanced stages of dementia; Delirium; Lower motor neuron syndromes (LMNs); Amyotrophic lateral sclerosis (ALS); Motor neuron disease (MND); Progressive bulbar palsy (PBP); | | | Poor prognosis with shallow breathing and groin pain [Cha.Sa.Indriya Sthana 9/13] | Acute abdomen; Intra abdominal or intra pelvic hemorrhage; DIC (disseminated intravascular coagulation) in sepsis or septic shock; | | | Poor prognosis with delirium and hallucinations [Cha.Sa.Indriya Sthana 9/14] | Auditory hallucination in Alzheimer's dementia or other types of dementia; Delirium; Organic psychosis etc. | | | Poor prognosis with sudden deterioration [Cha.Sa.Indriya Sthana 9/15-17] | Various demyelinating diseases like Multiple sclerosis (MS); Various autoimmune diseases like Relapsing polychondritis (RP); Opportunistic infections in immunocompromised individuals; Relapsing fevers; Malaria; Leishmaniasis; Viral infections of CNS (central nervous system); Tuberculosis (TB) etc.; Cancer induced cachexia (CIC); | | | Poor prognosis with sputum test [Cha.Sa.Indriya Sthana 9/18] | Chronic airway diseases like chronic bronchitis, cystic fibrosis, Asthma, Bronchiectasis and diffuse panbronchiolitis; Cavitary pulmonary diseases, lung abscesses, TB, and lungs or bronchial carcinomas etc. | | | Poor prognosis with stool test [Cha.Sa.Indriya Sthana 9/18] | Chronic constipation; Partial intestinal obstruction; Megacolon; Ulcerative colitis; Carcinoma's of gastrointestinal tract etc. | | | Poor prognosis with semen test [Cha.Sa.Indriya Sthana 9/18] | Hematospermia; Pyospermia; Prostatitis; Carcinomas; Hemangiomas; varices; Epididymo-orchitis; Lymphoma; Testicular tumours; Condyloma; Leukemia; Sarcoma etc. | | | Poor prognosis with discoloration of sputum [Cha.Sa.Indriya Sthana 9/19] | Bacterial infections; COPD (chronic obstructive pulmonary disease); Tuberculosis (TB); Melanoptysis; Carcinoma of lungs or bronchi; Bronchiectasis; Pulmonary oedema; Pneumonia; Opportunistic lung infections in immunocompromised individuals such as patients suffering with AIDS (acquired immunodeficiency syndrome) etc. | | | Poor prognosis in shankhaka [Cha.Sa. Indriya Sthana 9/20] | Inflammatory pseudo tumour of the temporal bone; Giant cell arteritis (GCA); Cavernous hemangiomas; Cavernous sinus thrombosis; Arterio-venous malformations (AVMs); Malignant lesions like angiosarcoma or liposarcoma; | | | Poor prognosis with hemoptysis [Cha.Sa. Indriya Sthana 9/21] | Hemoptysis seen in lungs or bronchial carcinoma's, bronchitis, pneumonia, tuberculosis, congestive heart failure and lung abscesses etc.; Pseudo hemoptysis (bleeding originating from upper gastrointestinal tract or upper respiratory tract pathologies); | | | Poor prognosis with cachexia [Cha.Sa. Indriya Sthana 9/22] | Anorexia-Cachexia in lung cancers or AIDS or in chronic debilitating conditions; CIC etc. | | |

Table 1: Contemporary views of prognostic features

Acknowledgement: The contributors acknowledge support of Dr. M. Prasad and Dr.G.Kshama for providing table 1 from their published article referred in this chapter.

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Sadyomaraneeyam Indriyam Adhyaya

Indriya Sthana Chapter 10. Signs of instant death and incurable complications of several diseases Abstract

This chapter deals with incurable complications of several diseases which can lead to a patient to an instantaneous death. It enlists some emergency conditions for intensive care. However the many signs and symptoms listed in this chapter are manageable now by advanced medical and surgical techniques. In ancient period of Charaka Samhita, the conditions were not treatable and fatal.

Keywords: Instantaneous death, fatal signs.

Introduction

Symptoms and signs which indicate the definite death of the patient is called arishta. By seeing flower, smoke and cloudy weather one can expect fruit, fire and rain respectively. In the same way certain symptoms which appear before the death of the person are called arishta.[Su. Sa. Sutra Sthana 28/3]⁶³ Sometimes arishta are not recognized by ignorant vaidya due to their minuscule nature or misunderstanding or by carelessness because arishta develops instantaneously before the death of an individual. Once the symptoms developed death is certain.

The dying process usually begins well before death. As that process begins, person starts on a mental path of discovery, comprehending that death will indeed occur and believing in their own mortality. Death is a personal journey that each individual approaches in their own unique way. Nothing is concrete, nothing is set in stone. There are many paths one can take on this journey but all lead to the same destination. The journey ultimately leads to the physical departure from the body. There are milestones along this journey. Some may hit only a few while another may stop at each one, taking their time along the way. Some may take months to reach their destination, others will take only days. This chapter discusses what has been observed in research by ancient scientists which predicts the impending death. The patient afflicted with these signs and symptoms does not survive more than 3 days or 7 days. A variety of physiological changes occur in the last day and hours of life.

Sanskrit text, Transliteration and English Translation

अथातः सद्योमरणीयमिन्द्रियं व्याख्यास्यामः॥१॥

इति ह स्माह भगवानात्रेयः॥२॥

⁶³ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

athātah sadyōmaraṇīyamindriyam vyākhyāsyāmah||1||

iti ha smāha bhagavānātrēyah||2||

athAtaH sadyomaraNlyamindriyaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

We shall now expound the chapter “Sadyomaraneeyam Indriyam Adhyaya” (Signs of instant death and incurable complications of several diseases). Thus said Lord Atreya.
[1-2]

सद्यस्तितिक्षतः प्राणॉल्लक्षणानि पृथक् पृथक्।

अग्निवेश! प्रवक्ष्यामि संस्पृष्टो यैर्न जीवति॥३॥

sadyastitikṣataḥ prāṇāṁllakṣaṇāni pṛthak pṛthak|

agnivēśa! pravakṣyāmi saṁspr̥ṣṭo yairna jīvati॥३॥

sadyastitikShataH prANA@mllakShaNAni pRuthak pRuthak|

agnivesha! pravakShyAmi saMspRuShTo yairna jlvati॥३॥

Oh Agnivesha! I shall describe separately the “signs and symptoms indicative of impending instantaneous death”. The patient afflicted with these signs and symptoms does not survive. [3]

List of signs of instantaneous death

वाताष्ठीला सुसंवृद्धा तिष्ठन्ती दारुणा हृदि।

तृष्णयाऽभिपरीतस्य सद्यो मुष्णाति जीवितम्॥४॥

पिण्डिके शिथिलीकृत्य जिह्मीकृत्य च नासिकाम्।

वायुः शरीरे विचरन् सद्यो मुष्णाति जीवितम्॥५॥

भ्रुवौ यस्य च्युते स्थानादन्तर्दाहश्च 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 वड्क्षणौ गृहणन् सद्यो मुष्णाति जीवितम्॥८॥

वितत्य पर्शुकाग्राणि गृहीत्वोरश्च मारुतः।

स्तिमितस्यायताक्षस्य सद्यो मुष्णाति जीवितम्॥९॥

हृदयं च गुदं चोभे गृहीत्वा मारुतो बली।
दुर्बलस्य विशेषेण सद्यो मुष्णाति जीवितम्॥१०॥

वडक्षणं च गुदं चोभे गृहीत्वा मारुतो बली।
श्वासं सञ्जनयञ्जन्तोः सद्यो मुष्णाति जीवितम्॥११॥

नाभिं मूत्रं बस्तिशीर्षं पुरीषं चापि मारुतः।
प्रच्छिन्नं जनयञ्छूलं सद्यो मुष्णाति जीवितम्॥१२॥

भिन्दयेते वडक्षणौ यस्य वातशूलैः समन्ततः।
भिन्नं पुरीषं तृष्णा च सद्यः प्राणाञ्जहाति सः॥१३॥

आप्लुतं मारुतेनेह शरीरं यस्य केवलम्।
भिन्नं पुरीषं तृष्णा च सद्यो जह्यात् स जीवितम्॥१४॥

शरीरं शोफितं यस्य वाताशोफेन देहिनः।
भिन्नं पुरीषं तृष्णा च सद्यो जह्यात् स जीवितम्॥१५॥

आमाशयसमुत्थाना यस्य स्यात् परिकर्तिका।
भिन्नं पुरीषं तृष्णा च सद्यः प्राणाञ्जहाति सः॥१६॥

पक्वाशयसमुत्थाना यस्य स्यात् परिकर्तिका।
तृष्णा गुदग्रहश्चोगः सद्यो जह्यात् स जीवितम्॥१७॥

पक्वाशयमधिष्ठाय हत्वा सञ्जां च मारुतः।
कण्ठे घुर्धुरकं कृत्वा सद्यो हरति जीवितम्॥१८॥

दन्ताः कर्दमदिग्धाभा मुखं चूर्णकसन्निभम्।
सिप्रायन्ते च गात्राणि लिङ्गं सद्यो मरिष्यतः॥१९॥

तृष्णाश्वासशिरोरोगमोहटौर्बल्यकूजनैः।
स्पृष्टः प्राणाञ्जहात्याशु शकृदभेदेन चातुरः॥२०॥

vātāśṭhilā susamvṛddhā tiṣṭhantī dāruṇā hṛdi|
trṣṇayā'bhiparītasya sadyō muṣṇāti jīvitam||4||

piṇḍikē śithilīkṛtya jihmīkṛtya ca nāsikām|
vāyuḥ śarīrē vicaran sadyō muṣṇāti jīvitam||5||

bhruvau yasya cyutē sthānādantardāhaśca dāruṇah|
tasya hikkākarō rōgah sadyō muṣṇāti jīvitam||6||

ksīṇaśōṇitamāṁsasya vāyurūrdhvagatiścaran|
ubhē manyē samē yasya sadyō muṣṇāti jīvitam||7||
antarēṇa gudam̄ gacchan nābhīm̄ ca sahasā'nilah̄|
kr̄śasya vaṅkṣaṇau gṛhṇan̄ sadyō muṣṇāti jīvitam||8||
vitatya parśukāgrāṇi gṛhītvōraśca mārutah̄|
stimitasyāyatākṣasya sadyō muṣṇāti jīvitam||9||
hṛdayam̄ ca gudam̄ cōbhē gṛhītvā māruto balī|
durbalasya viśeṣēṇa sadyō muṣṇāti jīvitam||10||
vaṅkṣaṇam̄ ca gudam̄ cōbhē gṛhītvā māruto balī|
śvāsam̄ sañjanayañjantōḥ̄ sadyō muṣṇāti jīvitam||11||
nābhīm̄ mūtram̄ bastiśīrṣam̄ purīṣam̄ cāpi mārutah̄|
pracchinnam̄ janayañchūlam̄ sadyō muṣṇāti jīvitam||12||
bhidyētē vaṅkṣaṇau yasya vātaśūlaiḥ̄ samantataḥ|
bhinnam̄ purīṣam̄ tṛṣṇā ca sadyah̄ prāṇāñjahāti saḥ||13||
āplutam̄ mārutēnēha śarīram̄ yasya kēvalam|
bhinnam̄ purīṣam̄ tṛṣṇā ca sadyō jahyāt sa jīvitam||14||
śarīram̄ śōphitar̄ yasya vātāśōphēna dēhinah̄|
bhinnam̄ purīṣam̄ tṛṣṇā ca sadyō jahyāt sa jīvitam||15||
āmāśayasamutthānā yasya syāt parikartikā|
bhinnam̄ purīṣam̄ tṛṣṇā ca sadyah̄ prāṇāñjahāti saḥ||16||
pakvāśayasamutthānā yasya syāt parikartikā|
tṛṣṇā gudagrahaścōgraḥ̄ sadyō jahyāt sa jīvitam||17||
pakvāśayamadhiṣṭhāya hatvā sañjñām̄ ca mārutah̄|
kaṇṭhē ghurghurakam̄ kṛtvā sadyō harati jīvitam||18||
dantāḥ̄ kardamadigdhābhā mukham̄ cūrṇakasannibham|
siprāyantē ca gātrāṇi liṅgam̄ sadyō mariṣyataḥ||19||
tṛṣṇāśvāsaśirōrōgamōhadurbalyakūjanaiḥ|
spr̄ṣṭah̄ prāṇāñjahātyāśu śakṛdbhēdēna cāturah̄||20||

vAtAShThI A susaMvRuddhA tiShThantl dAruNA hRudi|
tRuShNayA~abhiparlasya sadyo muShNAti jlvitam||4||
piNDike shithillkRutya jihmlkRutya ca nAsikAm|
vAyuH sharlre vicaran sadyo muShNAti jlvitam||5||
bhruvau yasya cyute sthAnAdantardAhashca dAruNaH|
tasya hikkAkaro rogaH sadyo muShNAti jlvitam||6||
kShINashoNitamAMsasya vAyurUrdhvagatishcaran|
ubhe manye same yasya sadyo muShNAti jlvitam||7||
antareNa [1] gudaM gacchan nAbhiM ca sahasA~anilaH|
kRushasya va~gkShaNau gRuhNan sadyo muShNAti jlvitam||8||
vitatya parshukAgrANi gRuhltvorashca mArutaH|
stimitasyAyatAkShasya sadyo muShNAti jlvitam||9||
hRudayaM ca gudaM cobhe gRuhltvA [2] mAruto ball|
durbalasya visheSheNa sadyo muShNAti jlvitam||10||
va~gkShaNaM ca gudaM cobhe gRuhltvA mAruto ball|
shvAsaM sa_{janaya}jjantoH sadyo muShNAti jlvitam||11||
nAbhiM mUtraM bastishIrShaM [3] purlShaM cApi mArutaH|
pracchinnaM [4] janaya~jchUlaM sadyo muShNAti jlvitam||12||
bhidyete va~gkShaNau yasya vAtashUlaiH samantataH|
bhinnaM purlShaM tRuShNA ca sadyaH prANA~jjahAti saH||13||
AplutaM mAruteneha sharlraM yasya kevalam|
bhinnaM purlShaM tRuShNA ca sadyo jahyAt sa jlvitam||14||
sharlraM shophitaM yasya vAtAshophena dehinaH| bhinnaM purlShaM tRuShNA ca
sadyo jahyAt sa jlvitam||15||
AmAshayasamutthAnA yasya syAt parikartikA| bhinnaM purlShaM tRuShNA ca sadyaH
prANA~jjahAti saH||16||
pakvAshayasamutthAnA yasya syAt parikartikA| tRuShNA gudagrahashcograH sadyo
jahyAt sa jlvitam||17||

pakvAshayamadhiShThAya [5] hatvA sajjAM ca mArutaH| kaNTThe ghurghurakaM
kRutvA sadyo harati jlvitam||18||

dantAH kardamadigdhAbhA mukhaM cUrNakasannibham| siprAyante ca gAtrANI
li~ggaM sadyo mariShyataH||19||

tRuShNAshvAsashirorogamohadaurbalyakUjanaiH| spRuShTaH prANA~jjahAtyAshu
shakRudbhedenA cAturaH||20||

The patient of painful and fully manifested vatashtila (hard tumor caused by vitiated vata) in the cardiac region if, suffers from intense thirst, then he instantly dies.[4]

If patient develops laxity in the calf muscles and irregularity in the structure of the nose due to the movement of abnormal vata all over the body, then he instantly dies. [5]

If the eye brows of patient are dislocated (drooped) and severe burning sensation in the body develops, and patient suffers from hiccup, he instantly dies.[6].

Diminution of blood and flesh in a patient, who is suffering from distension of both the *manya* (carotid regions of the neck) by the abnormal vata moving upwards leads to death. [7]

If a weak patient develops suffering in the groin region due to sudden aggravation of vata between the anus and the umbilicus, then he instantly dies. [8]

Stretching of the tip of ribs by the aggravated vata afflicting the chest of a patient, whose eyes are dilated and who feels *staimitya* (as if covered with a wet cloth) leads to instant death. [9]

Congestion/constriction of both heart and anus by strongly aggravated vata in a weak patient leads to instant death. [10]

If a patient develops severe dyspnea due to congestion/constriction of both groins and anus by strongly aggravated vata , he dies instantly. [11]

If a patient develops severe cutting pain in umbilicus, urination, top of urinary bladder, defecation caused by strongly aggravated vata , he dies instantly. [12]

If a patient suffering from pricking pain in the groin region caused by the vitiated vata develops diarrhea and thirst, he dies instantly. [13]

The patient whose entire body is already pervaded by aggravated vata , if suffers from diarrhea and thirst, dies instantly. [14]

The patient whose body is swollen because of vata dominant shotha and suffers from diarrhea and thirst, dies instantly [15]

The patient having cutting pain originated from amashaya (stomach including the small-intestine) suffers from diarrhea and thirst, dies instantly. [16]

The patient having cutting pain originated from pakvashaya (large intestine) suffers from thirst and severe anal spasm, dies instantly. [17]

If abnormal vata having its site of manifestation in pakvashaya (large intestine) causes unconsciousness and develops stertorous breathing (obstruction of breathing by kapha) in the throat, the patient dies instantly. [18]

Appearance of teeth as if adhered with mud, face as if covered with ashes and excessive perspiration, are signs of the patient who will die soon. [19]

Appearance of diarrhea in a patient having thirst, dyspnea, shiroroga (headache), unconsciousness, debility and groaning sound from the throat are signs of the patient who will die soon. [20]

Summary

तत्र श्लोकः- एतानि खलु लिङ्गानि यः सम्यगवबुध्यते| स जीवितं च मर्त्यानां मरणं चावबुध्यते||२१||

tatra ślōkaḥ- ētāni khalu liṅgāni yaḥ samyagavabudhyatē| sa jīvitam ca martyānām maraṇam cāvabudhyatē||21|| tatra shlokaH- etAni khalu li~ggAni yaH samyagavabudhyate| sa jlvitam ca martyAnAM maraNaM cAvabudhyate||21||

The physician who perfectly comprehends these signs can very well anticipate the survival or death of the patient. [21]

Tattva Vimarsha (Fundamental Principles)

- Excessively vitiated vata can cause immediate death.
- Disorders associated with excessive thirst and diarrhea indicating severe dehydration can cause immediate death.

Vidhi Vimarsha (Applied Inferences)

Fundamental to ensuring quality palliative and end-of-life care is a focus on four broad domains:

1. physical symptoms;
2. psychological symptoms;
3. social needs that include interpersonal relationships, care giving, and economic concerns; and
4. spiritual needs

Standardized methods for conducting a comprehensive assessment focus on evaluating the patient's condition in all four domains affected by illness: physical, psychological, social, and spiritual.

Regarding social needs, health care providers should assess the status of important relationships, financial burdens, care giving needs, and access to medical care.

Especially when an illness is life-threatening, there are many emotionally charged and potentially conflict-creating moments, collectively called “bad news” situations, in which empathic and effective communication skills are essential.

Physical Symptoms and Their Management- Great emphasis has been placed on addressing dying patient’s pain. Some institutions have made pain assessment a fifth vital sign to emphasize its importance. The most common physical and psychological symptoms among all terminally ill patients include pain, fatigue, insomnia, anorexia, dyspnea, depression, anxiety, and nausea and vomiting. In the last days of life, terminal delirium is also common. Assessment of patients with advanced cancer has shown that patients experienced different physical and psychological symptoms.

Signs of impending death and interventions

The following signs [table 1] are observed contemporarily⁶⁴ and can be related with signs enlisted in this chapter. Accordingly suitable interventions can be done in critical conditions.

Physiologic Changes	Signs/Symptoms	Intervention
Cardiac and Circulation Changes		
Decreased blood perfusion	Skin may become mottled and discolored. Mottling and cyanosis of the upper extremities appear to indicate impending death versus such changes in the lower extremities.	Provide good skin care. Turn patient every 2-3 hours if this does not cause discomfort. Lotion to back and extremities. Support extremities with soft pillows.
Decreased cerebral perfusion	Decreased level of consciousness or terminal delirium. Drowsiness/disorientation	Orient patient gently if tolerated and this is not upsetting. Allow pt. to rest.
Decrease in cardiac output and intravascular volume	Tachycardia Hypotension Central and peripheral	Comfort measures. Space out activities.

⁶⁴ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Physiologic Changes	Signs/Symptoms	Intervention
	cyanosis and peripheral cooling.	
Urinary function		
Decreased urinary output	Possible urinary incontinence, Concentrated urine.	Keep patient clean and dry. Place a catheter if skin starts to break down or if patient is large and difficult to change diapers and linen.
Food and Fluids		
Decreased interest in food and fluid.	Weight loss/dehydration	Do not force fluid or foods. Provide excellent mouth care.
Swallowing difficulties	Food pocketed in cheeks or mouth/choking with eating/coughing after eating	Soft foods and thickened fluids (e.g. nectar) as tolerated. Stop feeding patient if choking or pocketing food.
Skin		
Skin may become mottled or discolored.	Patches of purplish or dark pinkish color can be noted on back and posterior arms/legs.	Keep sheets clean and dry-avoid paper directly to skin. Apply lotion as tolerated.
Decubitus ulcers may develop from pressure of being bedbound, decreased nutritional status.	Red spots to bony prominences are first signs of Stage I decubiti and open sores may develop.	Relieve pressure to bony prominences or other areas of breakdown with turning and positioning Q2 hrs if tolerated. If patient has increased pain or discomfort with position changes, decrease the frequency. Special mattress as needed. Duoderm or specialized skin patch to Stage I-II ulcers. Change Q5-7 days or

Physiologic Changes	Signs/Symptoms	Intervention
		as needed. Goals of wound care for Stage III and IV decubiti should be to promote comfort and prevent worsening rather than healing since healing most likely will not occur. Consider application of specialized products such as charcoal or metronidazole paste (compounded) if odor present.
Respiratory		
Retention of secretions in the pharynx and the upper respiratory tract.	Noisy respirations - usually no cough or weak cough.	Head of bed up at 45 degrees. Can fold small soft pillow or towel behind neck for extra support.
Dyspnea	Shortness of breath	Oxygen at 2-3 liters may help for some patients and often helps families to feel better. Link to Dyspnea module
Cheyne-Stokes respirations	Notable changes in breathing.	A gentle fan blowing toward the patient may provide relief. Educate families that this is normal as the patient is dying.
General changes		
Profound weakness and fatigue.	Drowsy for extended periods. Sleeping more.	This is normal. Educate family.
Disoriented with respect to time and a severely limited attention span.	More withdrawn and detached from surroundings. May	This is normal. Educate family.

Physiologic Changes	Signs/Symptoms	Intervention
Patient may speak to persons who have already died or see places others cannot see.	Signs/Symptoms appear to be in a comatose-like state. Family may think these are hallucinations or a drug reaction.	If patient appears frightened may need to treat with medication. Otherwise, educate family that this is normal and common

Table 1: Signs of impending death

Bad prognostic features and relevant disease pathologies

The prognostic features described in this chapter can be observed in various disease pathologies as shown in table 2.⁶⁵ There is a wide scope of research to study the exact clinical correlation of the features and underlying disease pathologies.

Reference verse	Probable relevant disease or pathology
Cha.Sa.Indriya Sthana 10/4	Metastatic papillary serous adenocarcinoma from ovarian primary; Thoracic malignancies; PNS (paraneoplastic syndrome); Massive aortic aneurysm; Chest metastases; Mediastinal tumors;
Cha.Sa.Indriya Sthana 10/5	Neuro syphilis with saddle nose; Distal myopathies; Neuromuscular conditions; Neurodegenerative and demyelinating conditions; Muscle wasting in HIV patients;
Cha.Sa.Indriya Sthana 10/6	Bilateral facial palsy; GBS (Guillain-Barre syndrome); Cheiro-oral syndrome (COS); Vascular brain stem lesions;

⁶⁵ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

Reference verse	Probable relevant disease or pathology
Cha.Sa.Indriya Sthana 10/7	CCAO (common carotid artery occlusion) due to various underlying conditions;
Cha.Sa.Indriya Sthana 10/8	Pelvic appendicitis; Strangulated inguinal hernia; Fatal Fournier's gangrene; Pelvic carcinomas;
Cha.Sa.Indriya Sthana 10/9	Acute abdomen; Pelvic osteomyelitis; Osteitis pubis;
Cha.Sa.Indriya Sthana 10/10	Ross syndrome; FDPs (fixed bilateral dilated pupils) due to various underlying conditions;
Cha.Sa.Indriya Sthana 10/11	Hemothorax; Pneumothorax; Brain stem lesions;
Cha.Sa.Indriya Sthana 10/12	Advanced lung cancer with pelvic bone metastasis; Aortic dissection and aneurysm;
Cha.Sa.Indriya Sthana 10/13	Strangulated inguinal hernia; Testicular torsion; Pelvic inflammatory or infectious or neoplastic conditions; Rectal adenocarcinoma with inguinal lymph node metastasis (ILNM); ACS (abdominal compartment syndrome); Acute abdomen; Ruptured AAA (abdominal aortic aneurysm);
Cha.Sa.Indriya Sthana 10/14	Renal colic; Ureteric colic; Pelvic appendicitis; Pyelonephritis; Cystitis; UTI (urinary tract infections); Carcinomas;
	Hemoperitoneum causing hypovolemic shock; Ruptured aortic aneurysm; Acute abdomen; DRAP (dehydration related abdominal pain); Mesenteric ischemia; Colonic obstruction; Highly vascular neoplasms;
	Acute infectious (bacterial or viral) gastro enteritis; IBS (irritable bowel syndrome); IBD (inflammatory

Reference verse	Probable relevant disease or pathology
Cha.Sa.Indriya Sthana 10/15	bowel disease); SIBO (small intestinal bacterial overgrowth);
Cha.Sa.Indriya Sthana 10/16	Kwashiorkor with diarrhea; GDPU (gastroduodenal perforation or ulcer); PPU (perforated peptic ulcer); Acute abdomen; Acute pancreatitis;
Cha.Sa.Indriya Sthana 10/17	Proctalgia fugax; IBD; Ulcerative colitis; Crohn's disease; Toxic megacolon; Colorectal carcinoma; Colonic perforation; Peritonitis; Septic shock;
Cha.Sa.Indriya Sthana 10/18	Metastatic pulmonary lymphangitic carcinomatosis with primary colorectal cancer; Lung cancer with secondary metastasis to colon; Myopericarditis of IBD;
Cha.Sa.Indriya Sthana 10/19	Uremic frost; Uremic stomatitis or periodontitis; ESRD (end stage renal disease); CRF (chronic renal failure); CKD (chronic kidney disease); Rhabdomyolysis in acute kidney injury; Carcinomas;
Cha.Sa.Indriya Sthana 10/20	Hypovolemic shock; Delirium; Advanced stages of carcinoma;

Table 2:Reference verse and probable relevant pathology

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Anujyotiyam Indriyam Adhyaya

Indriya Sthana Chapter 11. Signs and Symptoms of Imminent Death caused due to diminution of Agni Abstract

This chapter explicates the signs and symptoms of imminent death due to diminution of Agni (factor responsible for digestion and metabolism). The components of life like lifespan, strength, complexion, enthusiasm, health, growth, luster, and immunity are dependent upon the status of agni. Diminution of its power causes generalized symptoms indicative of imminent death. Declaration of the estimated time for death might be based on experience of many experts of that time, which can now be reestablished in light of present scientific developments. The clinical signs and symptoms given in this chapter are useful as an additional information for assessment of prognosis.

Keywords: *Anujyoti, Arishta, Bali, Agni, digestion.*

Introduction

The present chapter deals with near death signs that arise due to decrease in digestive capacity of a person i.e. agni. The chapter indicates importance of digestive and metabolic functions of agni. The ingested food is helpful and nutritive to body only if, it passes through various digestive and metabolic processes successfully. This food nourishes the body at cellular level and it reflects in the form of good complexion, strength, good health, enthusiasm, and nourishment to formation of ojas. Some part of food digested with the help of agni nourishes sensory organs along with mana (mind) too. Ayurveda has emphasized the importance of quality and quantity of Agni for metabolic activity of the body, that if the agni works well, the person lives long and if it ceases; the person is going to die.[Charak Samhita Chikitsa Sthana 15/4]

Some signs seen in diseased or in healthy person, with or without any significant/visible pathology leading to death, are mentioned. These signs occurs due to initiation of some life threatening disease with poor prognosis even in initial stage.

It is emphasized that any extreme alteration in body physiology or psychology, person's own behavior, mental functions, etc. without any significant reason; is also one of the sign for death.

Mind supremacy is also highlighted, as the mental strength of a person declines due to advancement of disease; then the person is likely to die. Composition of physical body (sharira), sensoria (indriya), mind (sattva) and soul (atma) is called life (ayu). With advanced stage of disease, physical body gets damaged, sensoria may also get affected and soul becomes ready to leave the diseased body; in such situation only strong mind power can sustain life as physical body follows mind and vice versa.[Charak Samhita Sharia Sthana 1/155]

It is elucidated that if person's life span has ended; even good quality of physician, medicine or care taker are helpless. In a nutshell person's life span is fixed and when it is gets finished, some signs are manifested called arishta.

Further, status of dying person is described briefly that, he may develop aversion to all loving and respectful persons, friends, food (and other basic essentials for surviving) etc. as his soul is almost in position to detach this body and preparing self to travel to other world. The chapter defines arishta with a new dimension. The concomitant aggravation of dosha (either qualitative or quantitative) with life-threatening diminution of dhatus is significant in the prediction of death.

Sanskrit text, Transliteration and English Translation

अथातोऽणुज्योतीयमिन्द्रियं व्याख्यास्यामः॥१॥

इति ह स्माह भगवानात्रेयः॥२॥

athātō'ṇujyōtīyamindriyar̥ vyākhyāsyāmah॥1॥

iti ha smāha bhagavānātrēyah॥2॥

athAto~aNujyotlyamindriyaM vyAkhyAsyAmaH॥1॥

iti ha smAha bhagavAnAtreyaH॥2॥

Now we shall expound the chapter “Anujyotiyam Indriyam” (Signs and Symptoms of Imminent Death caused due to diminution of Agni). Thus said Lord Atreya. [1-2]

Prognostic features of impending death and declining lifespan within a year

अणुज्योतिरनेकाग्रो दुश्छायो दुर्मनाः सदा। रतिं न लभते याति परलोकं समान्तरम्॥३॥

anujyōtiranēkāgrō duśchāyō durmanāḥ sadā| ratim na labhatē yāti paralōkam
samāntaram॥३॥ aNujyotiranekAgro dushchAyo durmanAH sadA| ratiM na labhate yAti
[1] paralokaM samAntaram॥३॥

The person always (suffering from) with poor digestion, unstable or agitated mind, diminished luster, weak mental strength and restlessness goes to other world [dies] within a year. [3]

बलिं बलिभृतो यस्य प्रणीतं नोपभुञ्जते। लोकान्तरगतः पिण्डं भुइक्ते संवत्सरेण सः॥४॥ सप्तर्षीणां
समीपस्थां यो न पश्यत्यरुन्धतीम् संवत्सरान्ते जन्तुः स सम्पश्यति महत्तमः॥५॥ विकृत्या विनिमित्तं यः
शोभामुपचयं धनम् प्राप्नोत्यतो वा विभ्रंशं समान्तं तस्य जीवितम्॥६॥

balim balibhṛtō yasya prañītaṁ nōpabhuñjatē lōkāntaragataḥ piṇḍaṁ bhūnktē
saṁvatsarēṇa sah॥४॥ saptarṣīnāṁ samīpasthām yō na paśyatyarundhatīm|
saṁvatsarāntē jantuḥ sa sampaśyati mahattamah॥५॥ vikṛtyā vinimittam yaḥ
śōbhāmupacayaṁ dhanam| prāpnōtyatō vā vibhramśaṁ samāntaṁ tasya jīvitam॥६॥
baliM balibhRuto yasya praNItaM nopabhu~jjate| lokAntaragataH piNDaM bhu~gkte
saMvatsareNa saH॥४॥ saptarShINAM samIpasthAM yo na pashyatyarundhatIm|

saMvatsarAnte jantuH sa sampashyati mahattamaH||5|| vikRutyA vinimittaM yaH
shobhAmupacayaM dhanam| prApnotyato vA vibhraMshaM samAntaM tasya jlvitam||6||

When a person offers *bali* (an offering a piece of daily meal) to crow and it does not accept it this indicates of death within a year for the offering person.[4]

If a person is not able to see the star *Arundhati* situated adjacent to the constellation of *Saptarshi* (The Great Bear), he succumbs to death one year thereafter. [5]

Sudden gain or loss of luster, body weight, or wealth without any reasons indicates death of the person within one year thereafter. [6]

Prognostic features of impending death and declining lifespan within six months

भक्तिः शीलं स्मृतिस्त्यागो बुद्धिर्बलमहेतुकम्| षडेतानि निवर्तन्ते षड्भिर्मासैर्मिष्यतः||७||
bhaktih śīlam smṛtistyāgō buddhirbalamahētukam| ṣadētāni nivartantē
ṣaḍbhirmāsairmariṣyataḥ||७|| bhaktiH shllam smRutistyAgo buddhirbalamahetukam|
ShaDetAni nivartante ShaDhirmAsairmariShyataH||७||

Sudden changes in likings, gentleness, memory, sacrifices, intellect and strength these six attributes in a person indicate the death within a time of six months. [7]

धमनीनामपर्वाणां जालमत्यर्थशोभनम्| ललाटे दृश्यते यस्य षण्मासान्न स जीवति||८||
लेखाभिश्चन्द्रवक्राभिर्लाटमुपचीयते| यस्य तस्यायुषः षड्भिर्मासैरन्तं समादिशेत्||९||

dhamanīnāmapūrvāṇāṁ jālamatyarthaśobhanam| lalāṭē dṛśyatē yasya ṣaṁmāsānna sa
jīvati||८|| lēkhābhīścandravakrābhirlalāṭamupacīyatē| yasya tasyāyuṣah
ṣaḍbhirmāsairantam samādiśēt||९|| dhamanInAmapUrvANAM
jAlamatyarthashobhanam| lalATe dRushyate yasya ShaNmAsAnna sa jlvti||८||
lekhAbhishcandravakrAbhirlalATamupacyate| yasya tasyAyuShaH
ShaDhirmAsairantaM samAdishet||९||

Sudden appearance of extremely shiny and prominent vasculature on fore head of an individual indicates that maximum life span of less than six months. [8]

A person, on whose forehead crescent shaped grooves develop, is supposed to die after six months. [9]

Prognostic features of impending death and declining lifespan within one month

शरीरकम्पः सम्मोहो गतिर्वचनमेव च| मत्तस्येवोपलभ्यन्ते यस्य मासं न जीवति||१०|| रेतोमूत्रपुरीषाणि
यस्य मज्जन्ति चाम्भसि| स मासात् स्वजनद्वेष्टा मृत्युवारिणि मज्जति||११|| हस्तपादं मुखं चोभे
विशेषाद्यस्य शुष्यतः| शूयेते वा विना देहात् स च मासं न जीवति||१२||

śarīrakampah sammōhō gatirvacanamēva ca| mattasyēvopalabhyantē yasya māsam na
jīvati||१०|| rētōmūtrapurīṣāṇi yasya majjanti cāmbhasi| sa māsāt svajanadvēṣṭā

mṛtyuvārinī majjati||11|| hastapādāṁ mukhaṁ cōbhē viśēśādyasya śusyataḥ| śūyētē vā
vinā dēhāt sa ca māsaṁ na jīvati||12|| sharIrakampaH sammoho gatirvacanameva ca|
mattasyevopalabhyante yasya mAsaM na jlvati||10|| retomUtrapuriShANi yasya majjanti
cAmbhasi] sa mAsAt svajanadveShTA mRutyuvAriNi majjati||11|| hastapAdaM mukhaM
cobhe visheShAdyasya shuShyataH| shUyete vA vinA dehAt sa ca mAsaM na
jlvati||12||

Sudden appearance of tremors on body, drowsiness along with altered gait and speech resembling of an insane person cannot survive even for a month. [10]

If semen, urine and feces of an individual sink in water as well as have aversion from own relatives, will sink in the water of death within one month. [11]

If there is noticeable emaciation or swelling of hands and feet along with face and without body (trunk) involvement, he will not survive for more than a month.[12]

Prognostic features of impending death and declining lifespan

ललाटे मृद्धिर्बस्तौ वा नीला यस्य प्रकाशते। राजी बालेन्दुकुटिला न स जीवितमर्हति॥१३॥
प्रवालगैकाभासा यस्य गात्रे मसूरिकाः। उत्पद्याशु विनश्यन्ति न चिरात् स वैनश्यति॥१४॥ ग्रीवावमर्दे
बलवाञ्जिज्वाश्वयथरेव च। ब्रह्मानास्यगलपाकश्च यस्य पक्वं तमादिशेत्॥१५॥
सम्भ्रमोऽतिप्रलापोऽतिभेदोऽस्थ्नामतिदारुणः। कालपाशपरीतस्य त्रयमेतत् प्रवर्तते॥१६॥ प्रमुह्य
लुञ्चयेत् केशान् परिगृहणात्यतीव च। नरः स्वस्थवदाहरमबलः कालचोदितः॥१७॥

lalāṭē mūrdhni bastau vā nīlā yasya prakāśatē| rājī bālēndukuṭilā na sa jīvitumarhati||13||
pravālaguṭikābhāsā yasya gātrē masūrikāḥ| utpadyāśu vinaśyanti na cirāt sa
vinaśyati||14|| grīvāvamardō balavāñjihvāśvayathurēva ca| bradhnāsyagalapākaśca
yasya pakvaṁ tamādiśēt||15|| sambhramōtipralāpō'tibhēdō'sthnāmatidāruṇah |
kālapāśaparītasya trayamētat pravartatē||16|| pramuhyā luñcayēt kēśān
parigṛhṇātyatīva ca| naraḥ svasthavadāhāramabalaḥ kālacōditaḥ||17|| lalATe mUrdhni
bastau vA nīlā yasya prakAshate| rAjl bAlendukuTilA na sa jlvitumarhati||13||
pravAlaguTikAbhAsA yasya gAtre masUrikAH| utpadyAshu vinashyanti [2] na cirAt sa
vinashyati||14|| grlvAvamardo balavA~jjihvAshvayathureva ca|
bradhnAsyagalapAkashca yasya pakvaM tamAdishet||15||
sambhramo_{atipralApo}atibhedo~asthnAmatidAruNaH [3] | kAlapAshaparītasya trayamētat
pravartate||16|| pramuhyā lu~jcayet keshAn parigRuhNAtylva [4] ca| naraH
svasthavadAhAramabalaH [5] kAlacoditaH||17||

Appearance of crescent shaped blue lines on fore head, face and pelvic region indicates that the person will not survive. [13]

If eruption of masurika (small pox like lesions) on body, having appearance of coral beds (bright red), subsides immediately after its manifestation, the person will die immediately. [14]

A person having acute and severe squeezing type of pain in neck, swelling of tongue along with inflammation of scrotum, throat and mouth should be considered as ripe (for death). [15]

Excessive giddiness, extreme delirium and severe piercing type of pain in bones, manifestation of these three symptoms together indicates that the person is captured by death. [16]

A person, who pulls out his hair in fainting state, eats food like healthy person and still remains weak should be considered as captured by death. [17]

समीपे चक्षुषोः कृत्वा मृगयेताइगुलीकरम्| स्मयतेऽपि च कालान्ध ऊर्ध्वगानिमिषेक्षणः ||१८||
शयनादासनाद्गात् काष्ठात् कुड्यादथापि वा| असन्मृगयते किञ्चित् स मुहयन् कालचोदितः||१९||

samīpē cakṣuṣoḥ kṛtvā mrgayētāṅgulīkaram| smayatē'pi ca kālāndha
ūrdhvagānimisēkṣanah ||18|| śayanādāsanāngāt kāṣṭhāt kuḍyādathāpi vā|
asanmrgayatē kiñcit sa muhyan kālacōditah||19|| samlpe cakShuShoH kRutvA
mRugayetA~ggullkaram| smayate~api ca kAlAndha UrdhvagAnimiShekShaNaH [1]
||18|| shayanAdAsanAda~ggAt kAShThAt kuDyAdathApi vA| asanmRugayate ki~jcit sa
muhyan kAlacoditaH||19||

The person who searches for his own fingers and hands putting them before his eyes and smiles with upward gaze and unblinking should be considered as blinded by approaching death. [18]

A person who is lying on his bed but is searching for his bed continuously, sitting on chair and searching his own seat, searching his own organs, walking with the stick and searching the same, and searching the walls of his own room, or while working with something and searching the same, are the symptoms of the imminent death of that person. [19]

अहास्यहासी सम्मुहयन् प्रलेडि दशनच्छदौ| शीतपादकरोच्छवासो यो नरो न स जीवति||२०|| आहवयंस्तं
समीपस्थं स्वजनं जनमेव वा| महामोहावृतमनाः पश्यन्नपि न पश्यति||२१||

ahāsyahāsī sammuhyan pralēḍhi daśanacchadau| śītapādakarōcchvāsō yō narō na sa
jīvati||20|| āhvayaṁstarān samīpastham svajanām janamēva vā| mahāmōhāvṛtamānāḥ
paśyannapi na paśyati||21|| ahAsyahAsI sammuhyan praleDhi dashanacchadau|
shItapAdakarocchvAso yo naro na sa jlvati||20|| AhvayaMstaM samlpasthaM svajanaM
janameva vA| mahAmohAvRutamanAH pashyannapi na pashyati||21||

Person who laughs without any reason, acts stupid, teeth and gums are covered with dirt, biting his lips and whose feet, arms are too cold and disappointingly takes long breaths will not survive for long. [20]

Loud shout to call relatives and other people sitting nearby, severe visual hallucinations for non-existing things, observed in the person whose mind is covered by severe delusion [of death].[21]

Physician's ethical code to abstain from prescription

अयोगमतियोगं वा शरीरे मतिमान् भिषक् खादीनां युगपद्वृष्ट्वा भेषजं नावचारयेत्||२२||

ayoga^matiyoga^m vā śarīrē matimān bhiṣak| khādīnāṁ yugapaddr̄stvā bhēṣajam
nāvacārayēt||22|| ayoga^matiyoga^m vA sharlre matimAn bhiShak| khAdInAM
yugapaddRuShTvA bheShajaM nAvacArayet||22||

A wise physician should abstain from treating a patient when he observes that the patient's body is simultaneously responding both excessively and deficiently to sensory stimuli. [22]

Near death signs

अतिप्रवृद्ध्या रोगाणां मनसश्च बलक्षयात् वासमुत्सृजति क्षिप्रं शरीरी देहसञ्जकम्॥२३॥
वर्णस्वरावग्निबलं वागिन्द्रियमनोबलम् हीयतेऽसुक्षये निद्रा नित्या भवति वा न वा॥२४॥

atipravṛddhyā rōgāṇāṁ manasaśca balakṣayāt| vāsamutsrjati kṣipram śarīrī
dēhasañjñakam||23|| varṇasvarāvAgnibalam vāgindriyamanobalam| hīyatē’sukṣayē
nidrā nityā bhavati vā na vā||24|| atipravRuddhyA rogANAM manashca balakShayAt|
vAsamutsRujati kShipraM sharIrl dehas,jjakam||23|| varNasvarAvagnibalaM
vAgindriyamanobalam| hlyate~asukShaye nidrA nityA bhavati vA na vA||24||

In case of extreme advancement of the disease and weaker psychological strength, the soul immediately leaves the body. [23]

Near the end of life there is general decline in complexion, voice, agni, speech and state of mind, as well as sleep pattern alters. [24]

Features and fate of unfaithful patients

भिषग्भेषजपानान्नगरुमित्रद्विषश्च ये| वशगाः सर्व एवैते बोद्धव्याः समवर्त्तिनः॥२५॥ एतेषु रोगः क्रमते
भेषजं प्रतिहन्यते| नैषामन्नानि भुञ्जीत न चोदकमपि स्पृशेत्॥२६॥

bhiṣagbhēṣajapānānnagurumitradviṣaśca yē| vaśagāḥ sarva ēvaitē bōddhavyāḥ
samavartinah||25|| ētēṣu rōgaḥ kramatē bhēṣajam pratihanyatē| naiṣāmannāni bhuñjīta
na cōdakamapi sprśēt||26|| bhiShagbheShajapAnAnnagurumitradviShashca ye|
vashagAH sarva evaite boddhavyAH samavartinah||25|| eteShu rogaH kramate
bheShajaM pratihanyate| naiShAmannAni bhu~jjita na codakamapi spRushet||26||

Those who hate physician, medicine, food (and drink), teacher (spiritual teacher), and friends; are considered to be already under the grip of God of death. [25]

In such people, the disease progress occurs unrestricted and the medicine remains ineffective. The wise physician should not take his offerings in any form, even in form of food and drinks. [26]

Limitation of healthcare systems

पादा: समेताश्चत्वारः सम्पन्नाः साधकैर्गुणैः| व्यर्था गतायुषो द्रव्यं विना नास्ति गुणोदयः॥२७॥

pādāḥ samētāścatvārah sampannāḥ sādhakairgunaiḥ| vyarthā gatāyuṣo dravyaṁ vinā
nāsti guṇodayaḥ||27|| pAdAH sametAshcatvAraH sampannAH sAadhakairguNaiH|
vyarthA gatAyuSho dravyaM vinA nAsti guNodayaH||27||

Availability of all four basic components of treatment i.e. doctor, medicament, care taker and patient with their desirable quality are of no value in regard to the person who is at the end of his life and there is no response to treatment.[27]

Importance of knowledge of prognosis

परीक्ष्यमायुर्भिषजा नीरुजस्यातुरस्य च। आयुर्ज्ञनफलं कृत्स्नमायुर्ज्ञं हयनुवर्तते॥२८॥

parīkṣyamāyurbhiṣajā nīrujasyāturasya ca] āyurjñānaphalaṁ kṛtsnamāyurjñē
hyanuvartatē||28|| parIkShyamAyurbhiShajA nlrujasyAturasya ca] Ayurj~jAnaphalaM
kRutsnamAyur~je hyanuvartate||28||

The physician should always assess the prognostic signs of life in diseased as well as in healthy person. Because the knowledge of prognostic signs of life and diseases helps to decide remaining lifespan and hence treatment can be planned accordingly. [28]

Summary

तत्र श्लोकः- क्रियापथमतिक्रान्ता: केवलं देहमाप्लुताः। चिह्नं कुर्वन्ति यद्दोषास्तदरिष्टं निरुच्यते॥२९॥

tatra ślōkaḥ- kriyāpathamatikrāntāḥ kēvalaṁ dēhamāplutāḥ| cihnaṁ kurvanti
yaddōṣāstadarisṭāḥ nirucyatē||29|| tatra shlokaH- kriyApathamatikrAntAH kevalaM
dehamAplutAH| cihnaM kurvanti yaddoShAstadarishtAM nirucyate||29||

Here is the re capitulatory verse: The signs originated due to extensively vitiated and pervaded dosha throughout the body, and already transcended the stage of the treatment are called arishta (signs of death). [29]

Tattva Vimarsha (Fundamental Principles)

- Optimum quality and quantity of *agni* is necessary for sustenance of life.
- Stable mental status, complexion and mental strength are markers to predict lifespan of patient.
- Sudden changes in likings, gentleness, memory, sacrifices, intellect and strength in a person are pre-indications of death.
- Altered sensorium and psychological status leading to various delusions and hallucinations are pre-indicators of death.
- Near the end of life there is general decline in complexion, voice, agni, speech and state of mind, as well as sleep pattern alters.
- The prognostic signs of life in diseased as well as in healthy person shall always be assessed. This helps to decide remaining lifespan and planning treatment.
- The signs originated due to extensively vitiated and pervaded dosha throughout the body, and already transcended the stage of the treatment are called arishta (signs of death).

Vidhi Vimarsha (Applied Inferences)

Role of agni in near death signs

Metabolic process and thermoregulatory center situated in hypothalamus play key role to generate and maintain body temperature respectively. Reduced temperature shows slow metabolic process and gradually it ceases completely, causing death. With the help of healthy digestive power and proper metabolic activity; food nourishes the body and provide macro and micronutrients to the body.[Charak Samhita Chikitsa Sthana 15/3] [verse 3]

Psychological and age related changes in near death signs

In any manner, hampered blood or oxygen supply to the brain leads to lack of concentration, weakness of mental functions or agitation. Deposition of any toxic substance or progressive degenerative changes of mind also leads to such symptoms. Ageing and death are considered as natural process with passage of time.[Charak Samhita Sharira Sthana 4/36] With declining phase of life, ageing symptoms start to appear, as new cell production is almost stops and older cell destruction continues. With the passage of senescence; weakness, decreasing appetite, muscular wasting, decreased fluid intake, neurological dysfunctions, decreasing level of consciousness etc. are common symptoms manifest and gradually leads to cessation of life. [verse 3]

Every individual has good appetite and capability of digesting foods he regularly ingests. *Ksheerada*(only on milk), *ksheera-anna*(milk and rice products), *annada* (staple foods), are three basic stages of life. During ageing process, gradual reduction in both qualitative consumption and digestive abilities are observed. This in turn influences the individual's physical and mental wellbeing leading to reduction in life span ending in death.[verse 3]

Meta-physical observations near death

As per the principle of *Yatha Brahmande Tatha Pinde*, whatever is present in the universe, that is present in the human body. Hence there should be some connections between human body and the universe. When the soul is preparing for detachment from the body to start its journey to other world, there should be some indications from the universe as indicator of impending death. As per Indian tradition, offerings of food to birds specially to crow and non-acceptance of offering by crow may indicate the preparation of soul for detachment from living body. Inability to see *Arundhati* in the sky is another indication of the same. [verse 4–5]

Clinical observations in near death signs

Acute loss or gain of luster or body weight can be the result of carcinogenic condition or severe catabolic changes taking place in the body that can be fatal for the person. [verse 6]

Brain regulates multiple functions related to sensory, motor and autonomous nervous system like emotions, intellect and many other activities. Amygdala, and physiological functioning of limbic system of brain, are responsible for proper emotions and its expression. If these are deviated grossly, it shows involvement of higher center in pathogenesis and poor prognosis.

Gradual cessation of the functions is a clear indication of either degenerative changes or space occupying lesion (SOL) in the specific area. Acute toxicity of brain also leads to acute degeneration of brain cells or infarction that leads to hampering of function. [verse 7]

Sudden appearance of crescent shaped streaks or blood vessel network on forehead may relate with Amyloidosis. It is a rare disease that occurs when a protein (albumoid) substance gets deposited in person's organ. This abnormal protein is usually produced in bone marrow and can be deposited in any tissue or organ. The prognosis is poor.

[verse 8-9]⁶⁶

If person having combination of dual type of activity of mind i.e. exaggerated (in form of tremor), and diminished activity (in form of stupor), simultaneously; is supposed to die within a month. These dual types of signs may indicate increased intracranial pressure (ICP) due to localized mass like hematoma, neoplasm, abscess, edema, infarction, obstruction in CSF circulation, diffuse brain edema (like encephalitis, meningitis, or diffuse head injury), thrombosis, or idiopathic intracranial hypertension.

Symptoms of raised ICP are altered mental state, lethargy, irritability, slow decision making and abnormal social behavior. Ultimate result of the pathophysiology of such condition is stupor, coma and death. Rapidly rising ICP leads to syncope, seizures. These neurologic changes seen in increased ICP are mostly due to hypoxia and hyper apnea. [verse 10]

If fecal matter or other excreta are mixed with ama, it sinks straight in water due to its heaviness. Same concept is applied to other body discharge or dhatu too. Fecal matter is the end product of digestion. Hence, if it sinks in water it shows incomplete or improper digestion of food. Shukra is the last dhatu and hence all subtle tissue metabolic processes (dhatvagni) contribute (directly or indirectly) in its formation. To sink shukra in water is indicative that the ama associated state of dhatu. To get dipped all the three i.e. feces, urine and semen shows impairment of *jatharagni* along with *dhatvagni* functions leading to qualitative mal-formation of all dhatu. Such situation has been considered as fatal. [verse 11]

Muscular wasting of hands and feet is a type of neurogenic muscular atrophy with poor prognosis.

⁶⁶ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Swelling over both extremities along with face is an indication of damage of two vital organ simultaneously i.e. heart and kidney and hence survival of patient is difficult.[verse 12]

Appearance of blue lines occurs in various conditions. This may be indication of venous congestion due to heart, lungs and liver diseases, requiring attention while scaling the span of life. [verse 13]

Immediate disappearance of manifested small pox subsequently develops acute toxemia and hence leads to death. [verse 14]

Combined manifestation of stiff neck along with inflamed throat and scrotum and swollen tongue is the condition of tertiary stage of syphilis when the person develops syphilitic meningitis (complication of untreated syphilis), is a life threatening condition. [verse 15]

Hallucinations in near death signs

Visual (or even other sensorial) hallucinations are often part of the dying experience. Person may unknowingly involve in such activities with such illusions. This is the phase when the soul is getting ready to detach from the body and to travel for another world. The dying may turn their focus to “another world”, and thus may see (or feel other sensorial hallucination of) some unusual things, he may see or talk to such people who are already died. [verse 18-19]

Various kinds of hallucinations are indications of altered psychological state of dying person, and to have laughter without any specific cause is also result of such hallucinations. To lick own lips is the sign of dehydration and coldness of breath and extremity are the indication of almost reducing function of heart and hence, stoppage of blood flow to concerned area. [verse 20] Delusions along with altered sensorial organ is the sign of death. [verse 21]

Days or hours before death, the dying person becomes less and less responsive to voice and touch and may not awaken. (Sometimes, quite unexpectedly, the person may appear well and even look as if he/she is going to recover. The person may be alert and talkative. But it does not mean that he is getting well; of course the time may be used as a “window of opportunity” to say what you need to say and have closure).⁶⁷ [verse 8] These all of sudden recovery changes also denote signs of near death. [verse 25]

As per ancient classical texts, life span of everyone is fixed and pre-ordained. No one can add years to the life only quality of life can be improved with medications. The same thing is meant here when it is said that death is the destiny of patient and that desirable

⁶⁷ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

quality of medicine, human resource and all other things cannot make the person outlive his destined lifespan.[verse 27]

Bad prognostic features and relevant disease pathologies

Prognostic features described in this chapter can be observed in various disease pathologies as shown in table 1.⁶⁸ There is a wide scope of research to study the exact clinical correlation of the features, underlying disease pathologies and prognosis of impending death in prescribed time. This can open a new window in critical care management systems.

Reference verse	Probable relevant disease condition
Cha.Sa.Indriya Sthana 11/3	BPSD (behavioural and psychological symptoms of dementia); Delirium;
Cha.Sa.Indriya Sthana 11/7	Frontotemporal dementia; Vascular dementia; Alzheimer's dementia; BPSD; Major neurocognitive disorders (NCDs);
Cha.Sa.Indriya Sthana 11/8	Arterial tortuosity syndrome (ATS); Temporal arteritis; Malignant hypertension; Telangiectasia;
Cha.Sa.Indriya Sthana 11/10	Wernicke-Korsakoff syndrome; Ataxia; Parkinson disease (PD); Dementia with Lewy bodies (DLB); Demyelinating diseases;
Cha.Sa.Indriya Sthana 11/11	Various infectious, neoplastic pathologies of male genital, urinary and gastrointestinal tracts;
Cha.Sa.Indriya Sthana 11/12	Progressive, acquired neuromuscular diseases (NMDs); Myopathies; Neuropathies; Angioedema; Erythropoietic protoporphria (EPP); Hepatic, cardiac and renal edema;
Cha.Sa.Indriya Sthana 11/14	Petechial or purpuric rash; Viral infections;

⁶⁸ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

Reference verse	Probable relevant disease condition
Cha.Sa.Indriya Sthana 11/15	Mumps orchitis; Lymphadenopathy; Epstein-Barr virus (EBV); Autoimmune diseases;
Cha.Sa.Indriya Sthana 11/16	Delirium; Bone metastasis; Acute myeloid leukemia (AML);
Cha.Sa.Indriya Sthana 11/17	Trichotillomania; Frontotemporal dementia; Vascular dementia; Lewy body disease; Delirium; Major neurocognitive disorders (NCDs);
Cha.Sa.Indriya Sthana 11/18-19	Asomatognosia; Autopagnosia; Motor apraxia; Finger agnosia; Exploratory procedures (EPs); Brain stem vascular lesions; ABS (Anton-Babinski syndrome); Delirium;
Cha.Sa.Indriya Sthana 11/20	Delirium; Hemorrhagic shock; Cardiogenic shock;
Cha.Sa.Indriya Sthana 11/21	Prosopagnosia; Visual agnosia; Dementia; Delirium;
Cha.Sa.Indriya Sthana 11/22	Age related sensory impairment or decline; Hallucinations;
Cha.Sa.Indriya Sthana 11/23	Delirium; Dementia;
Cha.Sa.Indriya Sthana 11/24	Delirium; Dementia; End of life stages;
Cha.Sa.Indriya Sthana 11/25	'Anger' in second stage of a dying process; Projection of anger in a dying patient;

Table 1: Disease or pathologies related to prognostic feature

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Gomayachurniyam Indriyam Adhyaya

Indriya Sthana Chapter 12.Auspicious and Inauspicious Characteristics of the messenger Abstract

The concluding chapter is about auspicious and inauspicious features of the informer, or the person who wants to take the physician to the house of the patient. There is a description of his physical appearance, mental status, behavior, time of calling, the circumstances while on the way to the patient's house, condition of patient's house, surroundings, family members, availability of requirements for a treatment. Along with medical ethics about informing patient, circumstances which indicate good prognosis and poor prognosis are discussed in this chapter. Finally, a nice briefing of all eleven chapters is provided for quick revision of this section.

Keywords: Gomaya Churniya, doota, arishta, asanna mrityu Lakshana, messenger, near death signs, fatal signs, moribund signs.

Introduction

In the earlier chapters, various signs of immediate death are described. In this chapter, good or bad omens as signs for good or bad prognosis in a patient or even healthy person, sometimes observed are mentioned.

The term 'gomaya churna' means "fine powder that resembles cowdung". If the physician sees fine powder resembling cowdung falling from patient's scalp, it indicates the life span of individual is less than a month. The chapter also covers details about the messenger who comes to the physician with the news about the patient. In ancient days, the communication media was manual messaging system only. The person, called doota (or messenger) was assigned the duty to convey messages from one place to another. It is interesting to know that various signs seen in this messenger, his dressing, behavior, time of messaging, his mental state, and the circumstances also are significantly observed to assess the prognosis of a remote unseen patient. However, due to advancement in communication technology, there ample ways of messaging are available. The remote physician is easily accessible through internet media also. Therefore actual examination of the patient is possible in various ways and the significance of old messaging system through doota is reduced. Still, in order to avail of the advantages of this very personalized process, the literature in this chapter is important. The signs of good and bad prognosis and importance of their explanation to the patient and his relatives before starting the treatment is also described in this chapter.

Sanskrit text, Transliteration and English Translation

गोमयचूर्णीयेन्द्रियोपक्रमः अथातो गोमयचूर्णीयमिन्द्रियं व्याख्यास्यामः॥१॥ इति ह स्माह
भगवानात्रेयः॥२॥

athātō gōmayacūrnīyamindriyam vyākhyāsyāmāḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAto gomayacUrNiyamindriyaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Gomayachurniyam Indriyam” (Auspicious and Inauspicious Characteristics of the messenger). Thus said Lord Atreya. [1-2]

Moribund signs related to external appearance, efficacy of proven drug, diet

यस्य गोमयचूर्णाभं चूर्णं मर्धनि जायते। सस्नेहं अश्यते चैव मासान्तं तस्य जीवितम्॥३॥ निकषन्निव यः पादौ च्युतांसः परिधारेति विकृत्या न स लोकेऽस्मिंश्चिरं वसति मानवः॥४॥ यस्य स्नातानुलिप्तस्य पर्वं शुष्यत्यरो भृशम्। आर्द्रेषु सर्वगात्रेषु सोऽर्धमासं न जीवति॥५॥ यमदिश्यातरं वैद्यः संवर्तयितुमौषधम्। यतमानो न शक्नोति दुर्लभं तस्य जीवितम्॥६॥ विज्ञातं बहशः सिद्धं विधिवच्चावचारितम्। न सिद्धयत्यौषधं यस्य नास्ति तस्य चिकित्सितम्॥७॥ आहारमुपयुज्जानो भिषजा सूपकल्पितम्। यः फलं तस्य नाप्नोति दुर्लभं तस्य जीवितम्॥८॥

yasya gōmayacūrnābhāṁ cūrṇam mūrdhani jāyatē| sasnēhāṁ bhraśyatē caiva
māsāntam tasya jīvitam||3|| nikaśanniva yaḥ pādau cyutāṁsaḥ paridhāvatī| vikṛtyā na
sa lōkē'smirṁscirāṁ vasati mānavah||4|| yasya snātānuliptasya pūrvam śuṣyatyurō
bhrśam| ādrēṣu sarvagātrēṣu sō'rdhamāsaṁ na jīvati||5|| yamuddiśyāturaṁ vaidyaḥ
saṁvartayitumauṣadham | yataṁānō na śaknōti durlabhaṁ tasya jīvitam||6|| vijñātaṁ
bahuśaḥ siddhaṁ vidhivaccāvacāritam| na sidhyatyauṣadhaṁ yasya nāsti tasya
cikitsitam||7|| āhāramupayuñjānō bhiṣajā sūpakalpitam| yaḥ phalaṁ tasya nāpnōti
durlabhaṁ tasya jīvitam||8|| yasya gomayacUrNAbhaM cUrNaM mUrdhani jAyate|
sasnehaM bhrashyate caiva mAsAntaM tasya jlvitam||3|| nikaShanniva [1] yaH pAdau
cyutAMsaH paridhAvatī vikRutyA na sa loke~asmīMshciraM vasati mAnavaH||4|| yasya
snAtAnuliptasya pUrvaM shuShyatuRo bhRusham| ArdreShu sarvagAtreShu
so~ardhamAsaM na jlvti||5|| yamuddishyAturaM vaidyaH saMvartayitumauShadham
[2] | yataṁAno na shaknoti durlabhaM tasya jlvitam||6|| vij~jAtaM bahushaH siddhaM
vidhivaccAvacAritam| na sidhyatyauShadhaM yasya nAsti tasya cikitsitam||7||
AhAramupayu~jjAno [3] bhiShajA sUpakalpitam| yaH phalaM tasya nApnoti durlabhaM
tasya jlvitam||8||

If a person complains that, an unctuous powder like cow dung powder falls on his scalp, the person may live for one month thereafter. [3]

A person is complaining of his feet rubbing against another like friction for braking, and his shoulder dislocate while running, does not remain alive in this world. [4]

If a person feels that, after taking bath or after applying *Lepa* (any fragrant liniment or herbal paste), his chest gets dried first, and rest of body remains wet, the person does not live even for a fortnight. [5]

If a physician is keenly providing medicine or therapy to a patient but not getting result for the same, the patient survives hardly. [6]

The drug which is well known, tried in many cases successfully, prepared and administered as per classical procedure, fails to get desired effect in an individual, should be considered beyond treatment. [7]

If a diet prepared and administered as per advice of physician, not giving desired effect, the patient hardly survives. [8]

Attributes of a messenger (doota)

दूताधिकारे वक्ष्यामो लक्षणानि ममर्षताम् यानि दृष्ट्वा भिषक् प्राजः प्रत्याख्यायादसंयमम्॥९॥
मुक्तकेशोऽथवा नग्ने रुदत्यप्रयत्नेऽथेवा भिषगभ्यागतं दृष्ट्वा दूतं मरणमादिशेत्॥१०॥ सुप्ते भिषजि ये
दूताश्छिन्दत्यपि च भिन्दति आगच्छन्ति भिषक् तेषां न भर्तारमनुव्रजेत्॥११॥ जुहवत्यौगिनं तथा पिण्डान्
पितृभ्यो निर्वपत्यपि वैदये दूता य आयान्ति ते घनन्ति प्रजिघांसवः॥१२॥ कथयत्यप्रशस्तानि
चिन्तयत्यथवा पुनः वैदये दूता मनुष्याणामागच्छन्ति ममर्षताम्॥१३॥ मृतदग्धविनष्टानि भजति
व्याहरत्यपि अप्रशस्तानि चान्यानि वैदये दूता मुमर्षताम्॥१४॥ विकारसामान्यगुणे देशे कालेऽथवा
भिषक् दूतमभ्यागतं दृष्ट्वा नातुरं तमुपाचरत्॥१५॥ दीनभीतद्रुतत्रस्तमलिनामसतीं स्त्रियम् त्रीन्
व्याकर्तीश्च षण्डांश्च दूतान् विद्यान्ममर्षताम्॥१६॥ अङगव्यसनिनं दूतं लिङ्गिनं व्याधितं तथा।
सम्प्रेक्ष्य चोग्रकर्माणं न वैद्यो गन्तुमहेति॥१७॥ आतुरार्थेमनुप्राप्तं खरोष्ट्रथवाहनम् दूतं दृष्ट्वा
भिषग्विद्यादातुरस्य पराभवम्॥१८॥ पलालबुसमांसास्थिकेशलोमनखद्विजान् मार्जनीं मसलं
शूर्पमुपानच्चर्म विच्युतम् [१] ॥१९॥ तृणकाष्ठतुषाङ्गारं स्पृशन्तो लोष्टमश्म च। तत्पूर्वदेशेने दूता
व्याहरन्ति ममर्षताम्॥२०॥ यस्मिंश्च दृते ब्रवति वाक्यमातुरसंश्रयम्। पश्येन्निमित्तमशुभं तं च
नानुव्रजेदभिषक्॥२१॥ तथा व्यसनिनं प्रैतं प्रैतालङ्कारमेव वा। भिन्नं दग्धं विनष्टं वा तदवादीनि वचांसि
वा॥२२॥ रसो वा कटुकस्तीव्रो गन्धो वा कौणपो महान् स्पर्शो वा विपुलः क्रूरो यदवाऽन्यदशुभं भवेत्॥२३॥
तत्पूर्वमभितो वाक्यं वाक्यकालेऽथवा पुनः। दूतानां व्याहतं श्रुत्वा धीरो मरणमादिशेत्॥२४॥ इति
दूताधिकारोऽयमुक्तः कृत्स्नो मुमर्षताम्॥२५॥

dūtādhikārē vakṣyāmō lakṣaṇāni mumūrṣatām| yāni dṛṣṭvā bhiṣak prājñah
pratyākhyāyādaśaṁyamam||९|| muktakēśe'thaवā nagnē rudatyaprayatē'thaवā|
bhiṣagabhyāgataṁ dṛṣṭvā dūtaṁ maraṇamādiśet||१०|| suptē bhiṣaji yē dūtāśchindatyapi
ca bhindati| āgacchanti bhiṣak tēśāṁ na bhartāramanuvrajēt||११|| juhvatyagnim tathā
piṇḍān pitrbhyō nirvapatyapi| vaidyē dūtā ya āyānti tē ghnanti prajighāṁsavah||१२||
kathayatyapraśastāni cintayatyathavā punah| vaidyē dūtā manusyāñāmāgacchanti
mumūrṣatām||१३|| mṛtagdhavinaśtāni bhajati vyāharatyapi| apraśastāni cānyāni
vaidyē dūtā mumūrṣatām||१४|| vikārasāmānyaguṇē dēsē kālē'thaवā bhiṣak|
dūtamabhyāgataṁ dṛṣṭvā nāturaṁ tamupācarēt||१५||
dīnabhītadrutatramalānāmasatīṁ striyam| trīn vyākṛtīṁśca ṣaṇḍāṁśca dūtān
vidyānmuṁmūrṣatām||१६|| aṅgavyasanināṁ dūtaṁ liṅgināṁ vyādhitarāṁ tathā|
samprēkṣya cōgrakarmāṇāṁ na vaidyō gantumarhati||१७|| āturārthamanuprāptaṁ
kharōṣṭrarathavāhanam| dūtaṁ dṛṣṭvā bhiṣagvidyādāturasya parābhavam||१८||
palālabusamāṁśāsthiķēśalōmanakhadvijān| mārjanīṁ musalaṁ śūrpamupānaccarma
vicyutam [१] ||१९|| tṛṇakāṣṭhatuśāṅgāraṁ spr̄śantō lōṣṭamaśma ca! tatpūrvadarśanē
dūtā vyāharanti mumūrṣatām||२०|| yasmiṁśca dūtē bruvati vākyamāturasāṁśrayam|
paśyēnnimittamaśubhaṁ tam ca nānuvrajēdbhiṣak||२१|| tathā vyasanināṁ prētarāṁ

prētālaṅkāramēva vā| bhinnam̄ dagdharṇ vinaṣṭam̄ vā tadvādīni vacāṁsi vā||22|| rasō
 vā kaṭukastīvrō gandhō vā kauṇapō mahān̄ sparśō vā vipulaḥ krūrō
 yadvā'nyadaśubham̄ bhavēt||23|| tatpūrvamabhitō vākyam̄ vākyakālē'thavā punah̄|
 dūtānām̄ vyāhṛtam̄ śrutvā dhīrō maraṇamādiśēt||24|| iti dūtādhikārō'yamuktaḥ kṛtsnō
 mumūrṣatām||25| UtAdhikAre vakShyAmo IakShaNAni mumUrShatAm| yAni dRuShTvA
 bhiShak prAj~jaH pratyAkhyAyAdasaMyamam||9|| muktakeshe~athavA nagine
 rudatyaprayate~athavA| bhiShagabhyAgataM dRuShTvA dUtaM maraNamAdishet||10||
 supte bhiShaji ye dUtAshchindatyapi ca bhindati| Agacchanti bhiShak teShAM na
 bhartAramanuvrajet||11|| juhvatyagniM tathA piNDAn pitRubhyo nirvapatyapi| vaidye
 dUtA ya AyAnti te ghnanti prajighAMsavaH||12|| kathayatyaprashastAni cintayatyathavA
 punaH| vaidye dUtA manuShyANAmAgacchanti mumUrShatAm||13||
 mRutadaghavinaShTANi bhajati vyAharatyapi| aprashastAni cAnyAni vaidye dUtA
 mumUrShatAm||14|| vikArasAmAnyaguNe deshe kAle~athavA bhiShak|
 dUtamabhyAgataM dRuShTvA nAturaM tamupAcaret||15||
 dInabhItadrutatrasṭamalinAmasatiM striyam| trIn vyAkRutIMshca ShaNDAMshca dUtAn
 vidyAnnumUrShatAm||16|| a~ggavyasaninaM dUtAM li~gginaM vyAdhitaM tathA|
 samprekShya cograkarmANaM na vaidyo gantumarhati||17|| AturArthamanuprAptaM
 kharoShTrarathavAhanam| dUtAM dRuShTvA bhiShagvidyAdAturasya
 parAbhavam||18|| palAlabusamAMsAstikeshalomanakhadvijAn| mArjanIM musalaM
 shUrpamupAnaccarma vicyutam [1] ||19|| tRuNakAShThatuShA~ggAraM spRushanto
 loShTamašma ca| tatpUrvadarshane dUtA vyAharanti mumUrShatAm||20||
 yasmiMshca dUte bruvati vAkyamAturasamshrayam| pashyennimittamashubhaM taM
 ca nAnuvrajedbhiShak||21|| tathA vyasaninaM pretaM pretAla~gkArameva vA| bhinnaM
 dagdhaM vinaShTaM vA tadvAdIni vacAMsi vA||22|| raso vA kaTukastivro gandho vA
 kauNapo mahAn| sparsho vA vipulaH krUro yadvA~anyadashubhaM bhavet||23||
 tatpUrvamabhitō vAkyam vAkyakAle~athavA punaH| dUtAnAM vyAhRutaM shrutvA
 dhlro maraNamAdishet||24|| iti dUtAdhikAro~ayamuktaH kRutsno mumUrShatAm||25|

Now we explain sign and symptoms of impending death of a person, pertaining to the characteristic features of *doota* (informer/messanger - who comes to call a physician to treat his patient). If a physician observes following signs in the informer, a physician is advised to gently avoid accepting the patient because the patient seems incurable. [9]

If an informer arrives to a physician with uncombed hair, naked, crying or unclean, then his related patient should be considered dead. [10]

When an informer comes at late night when physician was asleep or in lunch time when he is cutting or spitting something, this untimely arrival of an informer is inauspicious sign for the patient's life. [11]

An informer arrives when, the physician is engaged in *yajna* (offering to holy fire with chanting of *mantras*) or offering *pinda* (offering for his late ancestors), this untimely call is also inauspicious for the patient's life. [12]

An informer arrives when, the physician is engaged in discussion about some inauspicious matter which required to think seriously, this untimely call of informer is an inauspicious to patient's life. [13]

An informer arrives when, the physician is engaged in discussion for any one died or burnt or anything destroyed or lost or any other inauspicious thing, this is an inauspicious consequence too for patient's life. [14]

An informer explains the same symptoms in his patient, as seen in epidemic in that area, then the physician should avoid to treat such incurable diseases. [15]

If a lady informer who is miserably frightened, hurried, upset, dirty, disreputable and without her chastity, with disfigured body, three in numbers or an informer is eunuch person than, the physician should consider their concerned patient is surely near death. [16]

An informer with disfigured body, ill himself, heavily intoxicated, occupied in cruel activities, physician should avoid to go with him to treat his concerned patient. [17]

An informer comes with vehicle like cart pulled by donkey or by camel, the physician should know that his concerned patient has been defeated in life against death. [18]

When the physician enters a patient's house, on call of an informer and finds that, informer is still preparing the house for physician visit-by removing dust, husk, flesh, bones, hair, nails, teeth, broom, ponding stick, winnowing basket cinders, loosened bits of leather from shoes, straw, ash of half burnt sticks, loaf of a mud and pebbles of stones -is seriously inauspicious sign for concerned patient's life [19-20]

While the messenger is narrating about his patient and physician notices the following inauspicious signs in the messenger:

- heavily drunken with ghostly appearance,
- wearing adornments like a ghost such as – broken, half burnt, destroyed things,
- speaking loudly abusive words,
- smelling like a cadaver
- thorny to touch,
- and looking cruel in appearance

Above signs are highly inauspicious for patient's life, and a wise physician should avoid further proceedings for treatment. [21-24]

Signs indicating imminent death observed on the way to patient's house

पथ्यात्रकलानां च वक्ष्याम्यौत्पातिकं पनः॥२५॥ अवक्षुतमथोत्क्रष्टं स्खलनं पतनं तथा| आक्रोशः
सम्प्रहारो वा प्रतिषेधो विगर्हणम्॥२६॥ वैस्त्रोष्णीषोत्तरासङ्गश्छत्रोपानदयगश्रयम्| व्यसनं दर्शनं चापि
मृतव्यसनिनां तथा॥२७॥ चैत्यर्थवजपताकानां पूर्णानां पतनानि च| हतानेष्टप्रवादाश्च दृष्टं
भस्मपांशभिः॥२८॥ पथच्छेदो बिडालेन शुना सर्पेण वा पुनः| मृगद्विजानां क्रूराणां गिरो दौप्तां दिशं
प्रति॥२९॥ शयनासनयानानामुतानानां च दर्शनम्| इत्येतान्यप्रशस्तानि सर्वाण्याहुर्मनीषिणः॥३०॥ एतानि

पथि वैद्येन पश्यताऽनुरवेशमनि| शृणवता च न गन्तव्यं तदागारं विपश्चिता॥३१॥ इत्यौत्पातिकमाख्यातं
पथि वैद्यविगर्हितम्॥३२॥

pathyāturakulānāṁ ca vakṣyāmyautpātikarṁ punah॥२५॥ avakṣutamathōtkruṣṭam
skhalanāṁ patanaṁ tathā ākrōśah samprahārō vā pratiṣēdhō vigarhaṇam॥२६॥
vastrōṣṇīśottarāsaṅgaśchatrōpānadyugāśrayam| vyasanāṁ darśanāṁ cāpi
mṛtavyasanināṁ tathā॥२७॥ caityadhvajapatākānāṁ pūrṇānāṁ patanāni ca|
hatāniṣṭapravādāśca dūṣaṇāṁ bhasmapāṁśubhiḥ॥२८॥ pathacchēdō biḍālēna śunā
sarpeṇa vā punah| mṛgadvijānāṁ krūrānāṁ girō dīptāṁ diśāṁ prati॥२९॥
śayanāsanayānānāmuttānānāṁ ca darśanam| ityētānyapraśastāni
sarvāṇyāhurmanīṣṇah॥३०॥ ētāni pathi vaidyēna paśyatā”turavēśmani| śṛṇvatā ca na
gantavyām tadāgārāṁ vipaścītā॥३१॥ ityautpātikamākhyātāṁ pathi vaidyavigarhitam॥३२॥
pathyāturakulānāM ca vakShyAmyautpAtikaM punaH॥२५॥ avakShutamathotkruShTaM
skhalanaM patanaM tathA| AkroshaH samprahAro vA pratiShedho vigarhaNam॥२६॥
vastroShNIshottarAsa~ggashchatropAnadyugAshrayam| vyasanaM darshanaM cApi
mRutavyasaninAM tathA॥२७॥ caityadhvajapatAkAnAM pUrNAnAM patanAni ca|
hatAniShTapravAdAshca dUShaNaM bhasmapAMshubhiH॥२८॥ pathacchedo biDAlena
shunA sarpeNa vA punaH| mRugadvijAnAM krUrANAM giro dIptAM dishaM prati॥२९॥
shayanAsanayAnAnAmuttAnAnAM ca darshanam| ityetAnyaprashastAni
sarvANyAhurmanIShiNaH॥३०॥ etAni pathi vaidyena pashyatA_aturaveshmani|
shRuNvatA ca na gantavyāM tadAgAraM vipashcitA॥३१॥ ityautpAtikamAkhyAtaM pathi
vaidyavigarhitam॥३२॥

Now we shall narrate the signs indicating imminent death seen by physician on the way he proceeds for patient's house on a call by informer. Followings are inauspicious for life of a patient because in such an emergent conditions the time and mind set of a physician is very important, and these signs are obstructing, time consuming, and concentration diverting factors for a physician.[25]

When physician is going to patients house and sees, someone is sneezing, someone got pushed and fell down, had a trauma, crying miserably, beating someone, or the way has been suddenly obstructed, diverted in a long way or commendation by shouting.[26]

While walking (it was general practice those days) wearing garments torn by thorns, cape falls down, umbrella or shoe need repair, seeing dead person, quarrelling persons, to see the big and respectable trees and flag fell down, filled water container broke down, to have news regarding death of his near and dear, or some other inauspicious matter, dirt of dust or ash covers body, the way crossed by cat, snake, to hear the sound of dangerous animals, vehicle turns upside down in an accident are distracting causes on the way to patient's house, are certainly inauspicious for the life of patient. [25 -31 1/2]

Signs at the patient's home

इमामपि च बुद्ध्येत ग्रहावस्थां ममर्षताम्॥३२॥ प्रवेशे पर्णकम्भाग्निमद्बीजफलसर्पिषाम्|
वृषब्राह्मणरत्नान्नदेवतानां च नैर्गेतिम्॥३३॥ अग्निपौर्णानि पात्राणि भैन्नानि विशिखानि च| भिषड्
मुमूर्षतां वेशम प्रविशन्नेव पश्यति॥३४॥ छिन्नभिन्नानि दग्धानि भग्नानि मृदितानि च| दुर्बलानि च

सेवन्ते ममर्षवैशिमका जनाः॥३७॥ शयनं वसनं यानं गमनं भोजनं रुतम् श्रूयतेऽमङ्गलं यस्य नास्ति तस्य चिकित्सितम्॥३८॥ शयनं वसनं यानमन्यं वाऽपि परिच्छदम् प्रेतवद्यस्य कुर्वन्ति सुहृदः प्रेत एव सः॥३९॥ अनन्तं व्यापद्यतेऽत्यर्थं ज्योतिशैवोपशाम्यति निवाते सेन्धनं यस्य तस्य नास्ति चिकित्सितम्॥३८॥ आतुरस्य गृहे यस्य भिद्यन्ते वा पतन्ति वा अतिमात्रममत्राणि दुलभं तस्य जीवितम्॥३९॥

imāmapi ca budhyēta gṛhāvasthāṁ mumūrṣatāṁ॥३२॥ pravēśē pūrṇakumbhāgnimṛdbījaphalasarpiṣāṁ vṛṣabhrāhmaṇaratnānnadēvatānāṁ ca nirgatim॥३३॥ agnipūrṇāni pātrāṇi bhinnāni viśikhāni ca bhiṣāṇi mumūrṣatāṁ vēśma praviśannēva paśyati॥३४॥ chinnabhinnāni dagdhāni bhagnāni mṛditāni ca durlabāni ca sēvantē mumūrṣōrvaiśmikā janāḥ॥३५॥ śayanāṁ vasanāṁ yānam gamanāṁ bhōjanāṁ rutam् śrūyatē'maṅgalaṁ yasya nāsti tasya cikitsitam॥३६॥ śayanāṁ vasanāṁ yānamanyāṁ vā'pi paricchadam् prētavadyasya kurvanti suhṛdaḥ prēta ēva sah॥३७॥ annām vyāpadyatē'tyartham् jyōtiścaivōpaśāmyati nivātē sēndhanāṁ yasya tasya nāsti cikitsitam॥३८॥ āturasya gṛhē yasya bhidyantē vā patanti vā' atimātramamatrāṇi durlabhaṁ tasya jīvitam॥३९॥ imAmapi ca budhyeta gRuhAvasthAM
mumUrShatAm॥३२॥ praveshe pUrNakumbhAgnimRudbljaphalasarpiShAm|
vRuShabrhAmaNarAtnAnnadevatAnAM ca nirgatim॥३३॥ agnipUrNAni pAtrANi bhinnAni
vishikhAni ca bhiSha~g mumUrShatAM veshma pravishanneva pashyati॥३४॥
chinnabhinnAni dagdhAni bhagnAni mRuditAni ca durlabAni ca sevante
mumUrShorvaishmikA janAH॥३५॥ shayanaM vasanaM yAnaM gamanaM bhojanaM
rutam् shrUyate_{ama}ggalaM yasya nAsti tasya cikitsitam॥३६॥ shayanaM vasanaM
yAnamanyaM vA~api paricchadam् pretavadyasya kurvanti suhRudaH preta eva
saH॥३७॥ annaM vyApadyate~atyartham् jyotishcaivopashAmyati nivAte sendhanaM
yasya tasya nAsti cikitsitam॥३८॥ Aturasya gRuhe yasya bhidyante vA patanti vA|
atimAtramamatrANi durlabhaM tasya jlvitam॥३९॥

Now the inauspicious signs observed by a physician while entering the house of a patient - As the physician enters the house and sees the auspicious things are departing from house like- A filled earthen pot of water, a pot containing fire, sand, ghee, seeds, bullocks, brahmins, gems stones, and idols of deities, and fire pots with flames in many directions, Departing these auspicious articles are indicative of departing life of a patient. [32-34]

The things used by people living in the house are split, cracked, burnt, broken or crushed. [35]

The patient whose bed, cloths, vehicle, gait, food and voice bears inauspicious should not be treated. [36]

If arrangement of bed, cloth, vehicle and other apparel which are befitting for a dead body, the patient should be considered as already dead. [37]

If food for a patient get extremely nasty and fire (for prepare new food) is extinguished even it is supplied proper fuel in a wind free place, (in that house) then the patient should not be treated. [38]

If plates or saucers often fall down and get broken in the patient's house, then he (the patient) hardly survives. [39]

भवन्ति चात्र- यद्दवादशभिरैयायैर्यासतः परिकीर्तिम्| ममुष्टां मनुष्याणां लक्षणं
जीवितान्तकृत्॥४०॥ तत् समासेन वक्ष्यामः पर्यायान्तरमाश्रितम्| पर्योयवचनं
हयर्थविजानायोपपद्यते॥४१॥ अत्यर्थं पुनरेवेयं विवक्षा नो विधीयते| तस्मिन्नेवाधिकरणे यत्
पूर्वमभिशब्दितम्॥४२॥

bhavanti cātra- yaddvādaśabhiradhyāyairvyāsataḥ parikīrtitam| mumūrṣatāṁ
manuṣyānāṁ lakṣaṇām jīvitāntakṛt||40|| tat samāsēna vakṣyāmaḥ
paryāyāntaramāśritam| paryāyavacanām hyarthavijñānāyōpapadyatē||41|| atyartham
punarevēyaṁ vivakṣā nō vidhīyatē| tasminnēvādhikaraṇē yat pūrvamabhiśabdītam||42||
bhavanti cAtra- yaddvAdashabhiradhyAyairvyAsataH parikīrtitam| mumUrShatAM
manuShyANAM lakShaNaM jIvitAntakRut||40|| tat samAsena vakShyAmaH
paryAyAntaramAshritam| paryAyavacanaM hyarthavij~jAnAyopapadyate||41|| atyartham
punareveyaM vivakShA no vidhlyate| tasminnevAdhikaraNe yat
pUrvamabhisabdītam||42||

Thus it is said: Whatever sign and symptoms described in above twelve chapters regarding impending death of person, now we shall sum up in few stanzas as this is a concluding chapter of this section called Indriya Sthana

Of course there is no intension to repeat all as those are already explained but just to have a quick revision and for more clear understanding these are explained here. [40-42].

Summary of all moribund signs

वसतां चरमं कालं शरीरेषु शरीरिणाम्| अभ्युग्राणां विनाशाय देहेभ्यः प्रविवत्सताम्॥४३॥ इष्टांस्तितिक्षतां
प्राणान् कान्तं वासं जिहासताम्| तन्त्रयन्त्रेषु भिन्नेषु तमोऽन्त्यं प्रविविक्षताम्॥४४॥ विनाशायेह रूपाणि
यान्यवस्थान्तराणि च| भवन्ति तानि वक्ष्यामि यथोददेशं यथागमम्॥४५॥ प्राणः समपतप्यन्ते
विजानमुपरूप्यते| वमन्ति बलमङ्गानि चेष्टा व्यपरमन्ति च॥४६॥ इन्द्रियाणि विनश्यन्ति खिलीभवति
चेतना | औत्सुक्यं भजते सत्त्वं चेतो भीराविशत्यापै॥४७॥ स्मृतिस्त्यजति मेधा च हीश्रियौ चापसर्पतः|
उपप्लवन्ते पाप्मान ओजस्तेजश्च नशयति॥४८॥ शीलं व्यावर्ततेऽत्यर्थं भक्तिश्च परिवर्तते| विक्रियन्ते
प्रतिच्छायाश्छायाश्च विकृतिं प्रति॥४९॥ शुक्रं प्रच्यवते स्थानादन्मार्गं भजतेऽनिलः| क्षयं मांसानि
गच्छन्ति गच्छत्यसृगपि क्षयम्॥५०॥ ऊर्घाणः प्रलयं यान्ति वैश्लेषं यान्ति सन्धयः| गन्धा
विकतिमायान्ति भेदं वर्णस्वरौ तथा॥५१॥ वैवर्ण्यं भजते कायः कायच्छिद्रं विशष्यति| धूमः सञ्जायते
मूर्धिन् दारुणाख्यश्च चूर्णकः॥५२॥ सततस्पन्दना देशाः शरीरे येऽभिलक्षिताः| तै स्तम्भानगताः सर्वे न
चलन्ति कथञ्चन॥५३॥ गुणाः शरीरदेशानां शीतोष्णमदूदारुणाः| विपर्यासेन वर्तन्ते स्थानेष्वन्येषु
तदविधाः॥५४॥ नखेषु जायते पष्पं पड़को दन्तेषु जायते जटाः पक्षमसु जायन्ते सीमन्ताश्चापि
मूर्धनि॥५५॥ भेषजानि न संवर्ति प्राप्नवन्ति यथारुचि| यानि चाप्युपपद्यन्ते तेषां वीर्यं न सिद्धयति॥५६॥
नानाप्रकृतयः क्रूरा विकारा विविधौषधाः| क्षिप्रं समभिर्वर्तन्ते प्रतिहत्यं बलौजसी॥५७॥ शब्दः स्पर्शो रसो
रूपं गन्धश्चेष्टा विचिन्तितम्| उत्पद्यन्तेऽशुभान्येव प्रतिकर्मप्रवृत्तिषु॥५८॥ दृश्यन्ते दारुणाः स्वप्ना
दौरात्म्यमुपजायते| प्रेष्याः प्रतीपतां यान्ति प्रेताकृतिरुदीर्यते॥५९॥ प्रकृतिर्हीयतेऽत्यर्थं विकृतिश्चाभिवर्धते|
कृत्स्नमौत्पातिकं घोरमरि(नि)ष्टमपलक्ष्यते॥६०॥ इत्येतानि मनुष्याणां भवन्ति विनशिष्यताम्|
लक्षणानि यथोददेशं यान्युक्तानि यथागमम्॥६१॥

vasatāṁ caramaṁ kālaṁ śarīrēsu śarīriṇāṁ abhyugrāṇāṁ vināśāya dēhēbhyaḥ pravivatsatām||43|| iṣṭāṁstistikṣatāṁ prāṇān kāntaṁ vāsaṁ jihāsatām| tantrayantrēsu bhinnēsu tamō'ntyam pravivikṣatām||44|| vināśāyēha rūpāṇi yānyavasthāntarāṇi ca| bhavanti tāni vakṣyāmi yathōddēśaṁ yathāgamam||45|| prāṇāḥ samupatapyantē vijñānamuparudhyatē| vamanti balamaṅgāni cēṣṭā vyuparamanti ca||46|| indriyāṇi vinaśyanti khilībhavati cētanā autsukyaṁ bhajatē sattvaṁ cētō bhīrāviśatyapi||47|| smṛtisṭyajati mēdhā ca hrīṣiyau cāpasarpataḥ| upaplavantē pāpmāna ḥojastējaśca naśyati||48|| śīlaṁ vyāvartatētyartham bhaktiśca parivartatē| vikriyantē praticchāyāśchāyāśca vikṛtiṁ prati||49|| śukraṁ pracyavatē sthānādunmārgaṁ bhajatē'nilah| kṣayam māṁsāni gacchanti gacchatyasyṛgapi kṣayam||50|| ūsmāṇah pralayaṁ yānti viślēśaṁ yānti sandhayah| gandhā vikṛtimāyānti bhēdaṁ varṇasvarau tathā||51|| vaivarṇyaṁ bhajatē kāyah kāyacchidram viśuṣyati| dhūmaḥ sañjāyatē mūrdhni dāruṇākhyāśca cūrṇakah||52|| satataspandanā dēśāḥ śarīrē yē'bhilakṣitāḥ| tē stambhānugatāḥ sarvē na calanti kathañcana||53|| guṇāḥ śarīradēśānāṁ śītōṣṇamṛdudaruṇāḥ| viparyāsēna vartantē sthānēśvanyēsu tadvidhāḥ||54|| nakhēsu jāyatē puṣpaṁ pañkō dantēsu jāyatē| jaṭāḥ pakṣmasu jāyantē sīmantāścāpi mūrdhani||55|| bhēṣajāni na saṁvṛttiṁ prāpnuvanti yathārucī| yāni cāpyupapadyantē tēśāṁ vīryam na sidhyati||56|| nānāprakṛtayāḥ krūrā vīkārā vividhauṣadhaḥ| kṣipram samabhivartantē pratihatya balaujasī||57|| śabdaḥ sparśo rasō rūpaṁ gandhaścēṣṭā vicintitam | utpadyantēśubhānyēva pratikarmapravṛttiṣu||58|| dr̄syantē dāruṇāḥ svapnā daurātmyamupajāyatē| prēṣyāḥ pratīpatām yānti prētākṛtirudīryatē||59|| prakṛtirhīyatētyartham vikṛtiścābhivardhatē| kṛtsnamautpātikam ghōramari(ni)ṣṭamupalakṣyatē||60|| ityētāni manusyāṇāṁ bhavanti vinaśiyatām| lakṣaṇāni yathōddēśaṁ yānyuktāni yathāgamam||61|| vasatAM caramaM kAlaM sharIreShu sharIriNAm| abhyugrANAM vinAshAya dehebhyaH pravivatsatAm||43|| iShTAMstitikShatAM prANAn kAntaM vAsaM jihAsatAm| tantrayantreShu bhinneShu tamo~antyaM pravivikShatAm||44|| vinAshAyeha rUpANI yAnyavasthAntarANI ca| bhavanti tAni vakShyAmi yathoddeshaM yathAgamam||45|| prANAḥ samupatapyante [1] vīj~jAnamuparudhyate| vamanti balama~ggAni ceShTA vyuparamanti ca||46|| indriyANI vinashyanti khillbhavati cetanA [2] | autsukyaM bhajate sattvaM ceto bhIlrAvishatyapi||47|| smRutisṭyajati medhA ca hrIshriyau cApasarpataḥ| upaplavante pApmana ojastejashca [3] nashyati||48|| shllaM vyAvartate~atyartham bhaktishca parivartate| vikriyante praticchAyAshchAyAshca vikRutiM prati||49|| shukraM pracyavate sthAnAdunmArgaM bhajate~anilaḥ| kShayaM mAMsAni gacchanti gacchatyasyṛgapi kShayam||50|| UShmAñNaH pralayaM yAnti vishleShaM yAnti sandhayaH| gandhA vikRutimAyAnti bhedaM varNasvarau tathA||51|| vaivarNyaM bhajate kAyaH kAyaCchidraM vishuShyati| dhUmaH sa~jjAyate mUrdhni dAruNAkhyashca cUrNakaH||52|| satataspandanA deshAH sharIre ye~abhilakShitAH| te stambhAnugatAH sarve na calanti katha~jcana||53|| guNAH sharIradeshAnAM shItoshNamRududAruNAH| viparyAsena vartante sthAneShvanyeShu tadvidhAH||54|| nakheShu jAyate puShpaM pa~gko danteShu jAyate| jaTAH pakShmasu jAyante sImantAshcApi mUrdhani||55|| bheShajAni na saMvRuttiM prApnuvanti yathAruci| yAni cApyupapadyante teShAM vIryaM [4] na sidhyati||56|| nAnAprakRutayaH krUrA vikArA vividhauShadhAH| kShipraM samabhivartante pratihatya balaujasī||57|| shabdaH

sparsho raso rUpaM gandhashceShTA vicintitam [5] | utpadyante~ashubhAnyeva
pratikarmapravRuttiShu||58|| dRushyante dAruNAH svapnA daurAtmyamupajAyate|
preShyAH pratIpatAM yAnti pretAkRutirudIryate||59|| prakRutirhlyate~atyartham
vikRutishcAbhivardhate| kRutsnamautpAtikaM ghoramari(ni)ShTamupalakShyate||60||
ityetAni manuShyANAM bhavanti vinashiShyatAm| lakShaNAni yathoddishaM
yAnyuktAni yathAgamam||61||

Now the signs and change in condition, as proposed and accepted by scriptural authority, will be described. This indicate departure of the soul having lived in the body for maximum period prepares to migrate out of the body after relinquishing the beloved prana (vital breath), giving up the beautiful abode and entering into the final darkness when all the systems and organs are disintegrated. [43-45]

These are as follows:

1. Infirmity of prana (vital breath); cloudiness of understanding;
2. Strength drains from body organs;
3. Cessation of movement;
4. Sensory abilities gets destroyed; impairment of conscious;
5. Curiosity makes mind restless,
6. Mind infirmed with fear;
7. Distraction of memory, medha (intellect), *hri* (natural shy), *sri* (luster of the body);
8. Aggravation of symptoms of the disease;
9. Destruction of Ojas (Immune System) and Teja (radiance);
10. Radical changes in the conduct;
11. Changes in likings (and disliking);
12. Distortion in reflected image and apparition of an individual
13. Ejection of semen (or even feces or urine) from its own place;
14. Upward movement of vayu;
15. Wasting of muscle tissue and loss of blood;
16. Attenuation of ushma(the component responsible for producing heat in body, maintained by proper digestion and metabolism);
17. Dislocation or laxity of joints;
18. Morbid changes in body odor, hoarseness of voice and alteration in complexion;
19. Discoloration of the body;
20. Dryness in the body orifices;
21. Appearance of excessive smoke in the head;
22. Appearance of powder like cow dung in the head;
23. Complete cessation of pulsation in the body area which pulsate constantly in normal course;
24. Attributes manifestation of opposite property like cold, hot, soft, hard and similar other in various area of the body.

25. Pushpa— flower spots appearance in nail (while pressure given to nail and do not disappear even release of pressure) and mud like adherence in teeth.
26. Matting of eye lashes and appearance of hair partitions in head.
27. Difficulty to obtain results even after taking desired quality medicines.
28. Manifestation of various types of disease which destroys body strength and Ojas and needs multiple drugs for the same.
29. Manifestation of inauspicious sound, touch, taste, vision, smell, action and thoughts occurs while physician thinking about treatment (of the patient)
30. To see cruel dreams.
31. Hostile efforts of informer and change in body constitution like a ghost.
32. Diminution of normal characteristic features and excessive aggravation of morbid condition
33. Manifestation of majority of cruel signs of immediate death. [46-60]

As asked earlier, the signs of immediate death told by authority are described. [61]

Medical ethics for conveying death signs

मरणायेह रूपाणि पश्यताऽपि भिषग्विदा| अपृष्टेन न वक्तव्यं मरणं प्रत्युपस्थितम्||६२|| पृष्टेनापि न वक्तव्यं तत्र यत्रोपघातकम्| आतुरस्य भवेददुःखमथवाऽन्यस्य कस्यचित्||६३|| अब्रुवन्मरणं तस्य नैनमिच्छेच्चिकित्सितुम्| यस्य पश्येदविनाशय लिङ्गानि कुशलो भिषक्||६४||

maraṇāyēha rūpāṇi paśyatā'pi bhiṣagvidā| apr̄ṣṭēna na vaktavyam maraṇam
pratyupasthitam||62|| pr̄ṣṭēnāpi na vaktavyam tatra yatrōpaghātakam| āturasya
bhavēdduhkhamathavā'nyasya kasyacit||63|| abruvanmaraṇam tasya
nainamicchēccikitsitum| yasya paśyēdvināśaya liṅgāni kuśalō bhiṣak||64|| maraNAYeha
rUpANI pashyatA~api bhiShagvidA| apRuShTena na vaktavyaM maraNaM
pratyupasthitam||62|| pRuShTenApi na vaktavyaM tatra yatropaghAtakam| Aturasya
bhavedduHkhamathavA~anyasya kasyacit||63|| abruvanmaraNaM tasya
nainamiccheccikitsitum| yasya pashyedvinAshAya li~ggAni kushalo bhiShak||64||

In spite of seeing signs of imminent death, the physician should not announce (about the patient) until unless he is specially requested for so. Even on request, it should not be announced if it is likely to result in collapse of the patient or to distress others.
[62-63] After seeing such signs of imminent death a wise physician should not demand to treat the patient without announcing about his death. [64]

लिङ्गेभ्यो मरणाख्येभ्यो विपरीतानि पश्यता| लिङ्गान्यारोग्यमागन्तु वक्तव्यं भिषजा ध्रुवम्||६५||
दूतौरौत्पातिकैर्भवैः पश्यातुरकुलाश्रयैः| आतुराचारशीलेष्टद्रव्यसम्पत्तिलक्षणैः||६६||

liṅgēbhyō maraṇākhyēbhyō viparītāni paśyatā| liṅgānyārōgyamāgantu vaktavyam
bhiṣajā dhruvam||65|| dūtaɪrautpātikairbhāvaiḥ pathyāturakulāśrayaiḥ|
āturačāraśīlēṣṭadravyasampattilakṣaṇaiḥ||66|| li~ggebhyo maraNAYebhyo viparītAni
pashyatA| li~ggAnyArogyamAgantu vaktavyaM bhiShajA dhruvam||65||
dUtaɪrautpAtikairbhAvaiH pathyAturakulAshrayaiH|
AturAcArashIleShTadravyasampattilakShaNaiH||66||

If physician come across the positive signs (opposite of imminent death signs) of recovery, like the positive signs seen in an informer, or manifestation of some of auspicious signs appears in the way of patient's home, good feature at the patient's home, good manners and conducts of the patient and availability of quality drug, the physician certainly announce it positively. [65-66].

Auspicious positive signs of messenger

स्वाचारं हृष्टमव्यङ्गं यशस्यं शुक्लवाससम्| अमुण्डमजटं दूतं जातिवेशक्रियासमम्||६७||
 अनुष्ट्रखरयानस्थमसन्द्यास्वग्रहेषु च अदारुणोषु नक्षत्रेष्वनग्रेषु ध्रुवेषु च||६८|| विना चतुर्थीं नवमीं विना
 रिक्तों चतुर्दशीम् मध्याहनमर्धरात्रे च भूकम्पं राहदर्शनम्||६९|| विना देशमशस्तं
 चाशस्तौत्पातिकलक्षणम्| दूतं प्रशस्तमव्यग्रं निर्देशोदागतं भिषक्||७०||

svācāram hṛṣṭamavyaṅgam yaśasyaṁ śuklavāsasam| amuṇḍamajatam dūtam
 jātivēśakriyāsamam||67|| anuṣṭrakharayānasthamasandhyāsvagrahēṣu ca| adārunēṣu
 nakṣatrēṣvanugrēṣu dhruvēṣu ca||68|| vinā caturthīṁ navamīṁ vinā riktāṁ caturdaśīṁ|
 madhyāhnāmardharātrām ca bhūkampaṁ rāhudarśanam||69|| vinā dēśamaśastam
 cāśastautpātikalakṣaṇam| dūtam praśastamavyagram nirdiśēdāgataṁ bhiṣak||70||
 svAcAraM hRuShTamavya~ggaM yashasyaM shuklavAsasam| amuNDamajaTaM
 dUtaM jAtiveshakriyAsamam||67|| anuShTrakharayAnasthamasandhyAsvagraheShu
 ca| adAruNeShu nakShatreShvanugreShu dhruveShu [1] ca||68|| vinA caturthIM
 navamIM vinA riktAM caturdashIM| madhyAhnamardharAtraM ca bhUkampaM
 rAhudarshanam||69|| vinA deshamashastaM cAshastautpAtikalakShaNam| dUtaM
 prashastamavyagraM nirdishedAgataM bhiShak||70||

If an informer comes with following characteristics, should be considered auspicious and it is the sign of good / favorable prognosis:

1. The informer who is with good conduct and behavior
2. He is reputed, well dressed in white and clean cloths.
3. Well shaved or whose hair well combed
4. His dress and actions are analogous to his cast.
5. Has not come on a vehicle carried by camel or donkey
6. He has not come at the time of *Sandhya* (junction of evening and night time)
7. He has not come at the time when cruel planet are situated in some inauspicious place
8. Has arrived at a time when the *Nakshatra* is not appropriate or auspicious.
9. Has arrived on other than 4th, 9th and 14th lunar day.
10. Has come at the time other than noon or midnight, no earthquake and eclipse.
11. Come from auspicious place and no manifestation of any sign of impending death.
12. He is not anxious.

Such informers are told of having good prognostic for the patient. [67-70]

Positive signs on the way to patient's house

दृध्यक्षतद्विजातीनां वृषभाणां नृपस्य च||७१|| रत्नानां पूर्णकुम्भानां सितस्य तुरगस्य च।
सुरध्वजपताकानां फलानां यावकस्य च||७२|| कन्यापुवर्धमानानां बदधस्यैकपशोस्तस्था। पृथिव्या
उद्धृतायाश्च वहने: प्रज्वलितस्य च||७३|| मोदकानां समनसां शुक्लानां चन्दनस्य च।
मनोजस्यान्नपानस्य पर्णस्य शकटस्य च||७४|| नृभिर्धैन्वाः सवत्साया वडवायाः स्त्रियास्तथा।
जीवञ्जीवकसिद्धार्थसारसप्रियवादिनाम्||७५|| हंसानां शतपत्राणां चाषाणां शिखिनां तथा।
मत्स्याजद्विजशङ्खानां प्रियङ्गूनां घृतस्य च||७६|| रुचकादर्शसिद्धार्थरोचनानां च दर्शनम् गन्धः।
सुरभिर्वर्णश्च सुशुक्लो मध्यरो रसः||७७|| मृगपक्षिमनुष्याणां प्रशस्ताश्च गिरः शभाः।
छत्रध्वजपताकानामुक्त्वेष्टपणमभिष्टुतिः||७८|| भेरीमदेङ्गशङ्खानां शब्दाः पुण्याहनिस्वनाः।
वेदाध्ययनशब्दाश्च सुखो वायुः प्रदक्षिणः||७९|| पर्थि वैशमप्रवेशे तु विद्यादारोग्यलक्षणम्||८०।

dadhyakṣatadvijātīnāṁ vṛśabhāṇāṁ nṛpasya ca||71|| ratnānāṁ pūrṇakumbhānāṁ
sitasya turagasya ca| suradhvajapatākānāṁ phalānāṁ yāvakasya ca||72||
kanyāpuṁvardhamānānāṁ baddhasyaikapaśōstasthāḥ pṛthivyā uddhṛtāyāśca vahnēḥ
prajvalitasya ca||73|| mōdakānāṁ sumanasām śuklānāṁ candanasya ca|
manojñasyānnapānasya pūrṇasya śakaṭasya ca||74|| nṛbhirdhēnvāḥ savatsāyā
vaḍavāyāḥ striyāstathāḥ jīvañjīvakasiddhārthasārasapriyavādinām||75|| haṁsānāṁ
śatapatrānāṁ cāṣāṇāṁ śikhināṁ tathāḥ matsyājadvijaśāṅkhānāṁ priyaṅgūnāṁ
ghṛtasya ca||76|| rucakādarśasiddhārtharōcanānāṁ ca darśanam| gandhaḥ
surabhirvarṇaśca sušuklō madhuro rasaḥ||77|| mṛgapakṣimānuṣyāṇāṁ praśastāśca
girah śubhāḥ| chatradhvajapatākānāmutkṣēpanamabhiṣṭutih||78||
bhērīmr̥daṅgaśāṅkhānāṁ śabdāḥ puṇyāhanisvanāḥ| vēdādhayayanaśabdāśca sukhō
vāyuḥ pradakṣiṇāḥ||79|| pathi vēśmapravēśē tu vidyādārōgyalakṣaṇam|80|
dadhyakShatadvijAtInAM vRuShabhANAM nRupasya ca||71|| ratnAnAM
pUrNakumbhAnAM sitasya turagasya ca| suradhvajapatAkAnAM phalAnAM yAvakasya
[1] ca||72|| kanyApuMvardhamAnAnAM baddhasyaikapashostasthA| pRuthivyA
uddhRutAyAshca vahneH prajvalitasya ca||73|| modakAnAM sumanasAM shuklAnAM
candanasya ca| manoj~jasyAnnapAnasya pUrNasya shakaTasya ca||74||
nRubhirdhenvAH savatsAyA vaDavAyAH striyAstathA|
jlva~jjlvakasiddhArthasArasapriyavAdinAm||75|| haMsAnAM shatapatrANAM
cAShANAM shikhinAM tathA| matsyAjadvijasha~gkhAnAM priya~ggUnAM [2]
ghRutasya ca||76|| rucakAdarshasiddhArtharocanAnAM ca darshanam| gandhaH
surabhirvarNashca sushuklo madhuro rasaH||77|| mRugapakShimanuShyANAM
prashastAshca giraH shubhAH|
chatradhvajapatAkAnAmutkShepaNamabhiShTutiH||78|| bherImRuda_{ggashagkhAnAM}
shabdAH puNyAhanisvanAH| vedAdhyayanashabdAshca sukho vAyuH
pradakShiNaH||79|| pathi veshmapraveshe tu vidyAdArogoyalakShaNam|80|

During entering or on the way of patient's house, the physician come across to the following, good signs which indicate good recovery and prognosis of the patient.

Curd, intact rice, *Brahmin*, king's bullocks, gems, water filled pot, white horse, flag and banners of Lord Indra, fruits, barley, boy and girl seated in the elders lap, upturned land, blazing fire, sweets, white colored flower, sandal paste, delicious food articles, and drinks, fully loaded cart with its driver, cows with calves, mare with her calf, woman with

her child, birds like mynah, water bird, sparrow, swan bird of paradise, blue jay and the peacock, fish, goat, elephant, ghee, necklace like ornaments, mirror, white mustered, bile of cow, to have good fragrance, white colored, sweet taste, sweets and auspicious voice of animal, birds, and human, unfolding of umbrella, flag and banners, prayer, sound of cattle drums, and conches, auspicious sounds of Vedic hymns recitation, and soothing wind from south direction. [71-80]

Positive signs in patient's house

मङ्गलाचारसम्पन्नः सातुरो वैशिमिको जनः||८०|| श्रद्धानोऽनुकूलश्च प्रभूतद्रव्यसङ्ग्रहः।
धनैश्वर्यसुखावाप्तिरिष्टलाभः सुखेन च||८१॥ द्रव्याणा तत्र योग्यानां योजना सिद्धिरेव च।
गृहप्रासादशैलानां नागानामृषभस्य च||८२॥ हयानां पूरुषाणां च स्वप्ने समधिरोहणम्।
सीमार्काग्निद्विजातीनां गवां नूणां पयस्त्विनाम्||८३॥ अर्णवानां प्रतरणं वद्धिः सम्बाधनिःसृतिः। स्वप्ने
देवैः सपितृभिः प्रसन्नैश्चाभिर्भाषणम्||८४॥ दर्शनं शुक्लवस्त्राणां हृदस्य विमलस्य च।
मांसमत्स्यविषामेद्यच्छत्रादर्शपरिग्रहः||८५॥ स्वप्ने सुमनसां चैव शुक्लानां दर्शनं शुभम्। अश्वगोरथयानं
च यानं पूर्वतरेण च। रोदनं पतितोथानं द्विषतां चावर्मदनम्||८६॥

maṅgalācārasampannaḥ sātūrō vaiśmikō janah||80|| śraddadhānō’nukülaśca
prabhūtadravyasaṅgrahah| dhanaīsvaryasukhāvptiśṭalābhah sukhēna ca||81||
dravyāñāṁ tatra yōgyāñāṁ yōjanā siddhireva ca| gr̥haprāśādaśailāñāṁ
nāgāñāmṛṣabhasya ca||82|| hayāñāṁ puruṣāñāṁ ca svapnē samadhirōhaṇam|
sōmārkāgnidvijātīñāṁ gavāñāṁ nṛñāṁ payasvinām||83|| arṇavāñāṁ prataranām vṛddhiḥ
sambādhaniḥsṛtiḥ| svapnē dēvaiḥ sapitṛbhīḥ prasannaiścābhībhāṣanam||84|| darśanām
śuklavastrāñāṁ hradasya vimalasya ca|
māṁsamatsyaviśāmēdhyacchatrādarśaparigrahah||85|| svapnē sumanasām caiva
śuklāñām darśanām śubham| aśvagōrathayāñām ca yāñām pūrvōttarēṇa ca| rōdanām
patitōtthāñām dviśatām cāvamardanam||86|| ma~ggalAcArasampannaH sAturo
vaishmiko janaH||80|| shraddadhAно~anukUlashca prabhUtadravyasa~ggraHaH|
dhanaishvaryasukhAvAptiriShTalAbhaH sukhena ca||81|| dravyANAM tatra yogyAnAM
yojanA siddhireva ca| gRuhaprAsAdashailAnAM nAgAnAmRuShabhasya ca||82||
hayAnAM puruShANAM ca svapne samadhirohaNam| somArkAgnidvijAtInAM gavAM
nRUNAM payasvinAm||83|| arNavAnAM prataraNaM vRuddhiH sambAdhaniHsRutiH|
svapne devaiH sapitRubhiH prasannaishcAbhibhAShaNam||84|| darshanaM
shuklavastrANAM hradasya vimalasya ca|
mAMsamatsyaviShAmedhyacchatrAdarshaparigrahaH||85|| svapne sumanasAM caiva
shuklAnAM darshanaM shubham| ashvagorathayAnAM ca yAnAM pUrvottareNa ca|
rodanaM patitothAnaM dviShatAM cAvamardanam||86||

Some more auspicious signs indicative of good prognosis:

Patient and his family member involved in auspicious acts, looks faithful and favorable in nature. Collection of adequate funds and required materials, attainment of wealth, power and happiness, easy access of desirable objects, easy availability of required drug, favorable effect of the drug when administered (in the patient).

Dreams like climbing on house, palace, hill, elephant, bullock, horse and human. Vision of the moon, the sun, fire, *Brahmin*, cow and man carrying milk, swimming in the ocean

/ crossing the seas, improvement from bad situation/ end of problems of suffering. See in the dream to have talk with the gods and forefathers in their joyful mood, to see white clothes, to have meat, fish, poison, keeps himself away from *amedhya* (substances which are not good for mind) and using umbrella and mirror, seeing of white flower, riding on horses, bulls, and chariots and moving towards north east, rising after falling, defeat of enemies. These all are considered as signs of good prognosis. [80-86]

Auspicious signs of health

सत्वलक्षणसंयोगो भक्तिर्वैद्यद्विजातिषु। साध्यत्वं न च निर्वेदस्तदारोग्यस्य लक्षणम्॥८७॥
आरोग्यादबलमायुश्च सुखं च लभते महत्। इष्टांश्चाप्यपरान् भावान् पुरुषः शुभलक्षणः॥८८॥

sattvalakṣaṇasāraṁyōgō bhaktirvaidyadvijātiṣu| sādhyatvam na ca nirvēdastadārōgyasya
lakṣaṇam||87|| ārōgyādbalamāyuśca sukham ca labhatē mahat| iṣṭāṁścāpyaparān
bhāvān puruṣah śubhalakṣaṇah||88|| sattvalakShaNasaMyogo bhaktirvaidyadvijAtiShu|
sAdhyatvaM na ca nirvedastadArogyasya IakShaNaM||87|| ArogyAdbalamAyushca
sukhaM ca labhate mahat| iShTAMshcApyaparAn bhAvAn puruShaH
shubhalakShaNaH||88||

Person with good and Noble quality, faith and devotion towards the physician and *Brahmin*, not having negative feeling regarding his health is the sign of quick recovery from the disease. He attains health, strength, longevity, happiness, and other benefits by these good qualities. [87-88]

Summary

तत्र ६लोकौ- उक्तं गोमयचूर्णीये मरणारोग्यलक्षणम्। दूतस्वप्नातुरोत्पातयुक्तिसिद्धिव्यपाश्रयम्॥८९॥

tatra ślōkau- uktam gōmayacūrṇīyē maraṇārōgyalakṣaṇam|
dūtasvapnātūrōtpātayuktisiddhivyapāśrayam||89|| tatra shlokau- uktaM gomayacUrNlye
maraNArogyalakShaNaM| dUtasvapnAturotpAtayuktisiddhivyapAshrayam||89||

To sum up:

In these chapters signs of imminent death as indicated by appearance of substance resembling cow dung powder on his head, signs and symptoms of imminent death, quick recovery, informers, dreams, patient situation, and accomplishment are described. [89]

इतीदमुक्तं प्रकृतं यथातथं तदन्ववेक्ष्यं सततं भिषग्विदा। तथा हि सिद्धिं च यशश्च शाश्वतं स
सिद्धकर्मा लभते धनानि च॥९०॥

itīdamuktam prakṛtam yathātatham tadanvavēkṣyam satataṁ bhiṣagvidā| tathā hi
siddhim ca yaśaśca sāśvataṁ sa siddhakarmā labhatē dhanāni ca||90|| itldamuktaM
prakRutaM yathAtathaM tadanvavekShyaM satataM bhiShagvidA| tathA hi siddhiM ca
yashashca shAshvataM sa siddhakarmA labhate dhanAni ca||90||

Signs and symptoms mentioned here should always be observed and studied well by physician. Then only a physician can attain success, fame, and wealth.[90]

Tattva Vimarsha (Fundamental Principles)

- The state of messenger informing physician about the patient, circumstances on the way to patient's house, and condition of patient's house can give important clues about the probable prognosis of patient's disease. Hence the physician shall observe this keenly.
- Person with good and noble quality, faith and devotion towards the physician, Anirveda (not having negative feeling regarding his health) is the sign of quick recovery from the disease. These are necessary qualities to attain health, strength, longevity, happiness, and other benefits.

Vidhi Vimarsha (Applied Inferences)

Poor prognostic features

The features described in text can be categorized under different groups as shown in table 1. These can be observed on a patient with poor prognosis. The underlying reasons or pathologies behind these pathologies can be studied.

Factors	Related to visiting physician	Related to messenger
Dressing	—	Uncombed hair, improper clothing, looking unclean
Activities	Sleeping. Cutting or spitting something, offering food to his ancestors or fire	(When physician see Duta) touching straw, husk, flesh, bones, hair, nails, teeth broom, pounding stick, winnowing basket cinders, loosened bits of leather from a shoe, straw stick, dry lump of earth, or stone,
Behavior		Crying, looking miserable, feared, hassled, upset, groggy,
Thinking about	Discouraging matter, dead person or burnt / destroyed thing	
Surroundings	(at time of narration about patient – observed by physician) bad omens,	(@ physician house – observed by messenger) is of

Factors	Related to visiting physician ornaments of dead person or dead body	Related to messenger similar property that of patient suffering
Vehicle		Arrived on vehicle pulled by camel or donkey
Observed by Physician(by five sensory organs)	Broken / destroyed / burnt thing, hear some sound denoting destruction, having pungent or very strong taste, touching harsh feeling substance, having some inauspicious sensation	
Miscellaneous		Messenger is of trans gender, three in number, diseased, addicted, having cruel occupation

Table 1: Conditions denoting poor prognosis

Observations during medical examination and visit to patient

In ancient times, when the hospital management sector was not well developed, the messenger used to call the physician to see patients at home. During the visit to patient, some observations were noted which indicate poor prognosis of patient. The observations need to be studied to check their applicability in present era. These are summarized and grouped in table 2 below.

Location	Situation observed by physician
While entering in patient's house	filled clay pot, fire, seeds, fruit, ghee, bullock, a Brahmin, precious stone, idle food especially prepared for the Gods
Inside the house	full of fire, with extinguished flame
Status of things being used by other member of the family	split, cracked, brunt, broken or crushed
Status of patient and its surroundings	bed, cloths, vehicle, gait, food and voice bears inauspicious,

Location	Situation observed by physician arrangement of bed, cloth, vehicle and other apparel which are befitting a dead body
Status of patient's food	Gets extremely nasty and fire (to prepare new food) is extinguished even with proper fuel and wind free area
Status of crockery	often fall down and get broken

Table 2: Bad omens observed inside the patient's house denoting poor prognosis

Contemporary views

The prognostic features described in the text can be observed in various disease conditions in contemporary clinical practice. The probable relevant conditions are summarized in the table 3 and 4.⁶⁹

Factor [Reference verse]	Contemporary understanding or concept or relevant disease
Response to treatment [Cha.Sa.Indriya Sthana 12/6-8]	Not responding to aggressive treatment and progressive deterioration of health indicates end of life stages; Cachexia (cancer induced);
Social prevalence of disease [Cha.Sa.Indriya Sthana 12/15]	Endemic or epidemic diseases; Contagious, infectious diseases;
Signs of good prognosis [Cha.Sa.Indriya Sthana 12/87-88]	Positive psychology; Health psychology; Psychoneuroimmunology;
Importance of knowledge of prognosis [Cha.Sa.Indriya Sthana 12/90]	Benefits of prognostication of life expectancy; Proper identification of red flag signs & symptoms;

Table 3: Concepts and probable pathologies behind prognostic features

⁶⁹ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

The prognositc features can be observed in various diseases or pathologies as described below in table 4.

Prognositc feature	Probable relevant disease or pathology
Signs of skin lesions [Cha.Sa.Indriya Sthana 12/3]	Seborrheic dermatitis (SD) & Malassezia infections (dandruff) in immunocompromised patients;
Signs of abnormal gait [Cha.Sa.Indriya Sthana 12/4]	Parkinson's disease (PD);
Signs of abnormal body temperature [Cha.Sa.Indriya Sthana 12/5]	Localized hyperthermia or hypermetabolism or hypervascularization or hyperperfusions due to an underlying inflammation or neoplastic conditions;
Decline in vital function [Cha.Sa.Indriya Sthana 12/46]	Death rattle; Dyspnea; Agitation or restlessness seen in Delirium;
Decline in cognition [Cha.Sa.Indriya Sthana 12/46]	Cognitive decline or impairment seen in Dementia, Delirium and other neurodegenerative diseases;
Decline in motor function [Cha.Sa.Indriya Sthana 12/46]	Functional decline; Frailty; Slowed psychomotor functions; Fatigue;
Decline in psychomotor function [Cha.Sa.Indriya Sthana 12/46]	Hypoactive subtype of delirium; Reduced psychomotor activity; Lethargy;
Decline in sensory function [Cha.Sa.Indriya Sthana 12/47]	Sensory impairment; Cognitive impairment;
Decline in consciousness level [Cha.Sa.Indriya Sthana 12/46]	Clouding or disturbance or of consciousness seen in delirium;
Decline in orientation [Cha.Sa.Indriya Sthana 12/47]	Restlessness or agitation or anxiety seen in delirium; Dying process; End of life processes; Fear of death; Depression; Terminal drop;
Decline in memory and cognition [Cha.Sa.Indriya Sthana 12/48]	Memory and cognitive impairments seen in Dementias;
Change in behavior pattern [Cha.Sa.Indriya Sthana 12/48]	Disinhibition; Behavioural and personality changes seen in FTD (frontotemporal dementia); Neurodegenerative diseases;

Prognostic feature	Probable relevant disease or pathology
Decline in immunity [Cha.Sa.Indriya Sthana 12/48]	Immunosenescence; Immunocompromised states; Hypometabolism or hypoperfusion;
Change in behavior and personality [Cha.Sa.Indriya Sthana 12/49]	Personality changes in FTD; BPSD (behavioural and psychological symptoms of dementia); Anhedonia; Depression;
Change in complexion and lustre [Cha.Sa.Indriya Sthana 12/49]	Pathological changes seen in reflections and shadows; Abnormalities of complexion;
Improper ejaculation [Cha.Sa.Indriya Sthana 12/50]	Incontinence; Dribbling ejaculation in spinal cord injury or pathology; Hypotonia or Atonia;
Signs of critical medical emergency [Cha.Sa.Indriya Sthana 12/50]	Acute painful emergency conditions; Acute abdomen; Cerebrovascular accidents; Cardiovascular pathologies;
Depletion of body tissues [Cha.Sa.Indriya Sthana 12/50]	Sarcopenia; Cachexia; Anaemia; Malnutrition;
Decrease in body temperature [Cha.Sa.Indriya Sthana 12/51]	Hypothermia; Cold clammy skin in hypovolemic or hemorrhagic shock;
Laxity of joints [Cha.Sa.Indriya Sthana 12/51]	Generalized joint hyperlaxity; Multidirectional instability of joints (MDI);
Abnormal olfaction [Cha.Sa.Indriya Sthana 12/51]	VOC (volatile organic compounds) specific to particular diseases;
Abnormal complexion [Cha.Sa.Indriya Sthana 12/51]	Deterioration of complexion; Cyanosis; Pallor; Hyper or hypo pigmentation;
Abnormal voice [Cha.Sa.Indriya Sthana 12/51]	Dysphonia; Aphonia; Hypophonia;
Abnormal discoloration or pigmentation of skin [Cha.Sa.Indriya Sthana 12/52]	Changes in skin colour is one of the signs and symptoms of impending death in end-of-life senile dementia;
Abnormal dryness of mucosa [Cha.Sa.Indriya Sthana 12/52]	Dehydration; Hypovolemia;

Prognostic feature	Probable relevant disease or pathology
Abnormal hot flushing and heat sensation [Cha.Sa.Indriya Sthana 12/52]	Dyspnoea or breathlessness seen in life threatening conditions;
Abnormal dryness of scalp [Cha.Sa.Indriya Sthana 12/52]	Malassezia infection (dandruff) in immunocompromised patients;
Abnormal pulsation [Cha.Sa.Indriya Sthana 12/53]	Diminished or absent peripheral pulses; Takayasu's arteritis; Atherosclerosis; Thrombosis
Abnormal alternate hot and cold sensation [Cha.Sa.Indriya Sthana 12/54]	Hypothermia; Hyperthermia;
Abnormal alternated rough and unctuous touch [Cha.Sa.Indriya Sthana 12/54]	Stony hardness in carcinoma; Flaccidity in lower motor neuron diseases; Malacia; Neuromuscular conditions;
Abnormal discoloration of nails [Cha.Sa.Indriya Sthana 12/55]	Leukonychia; Melanonychia; Splinter haemorrhages;
Abnormal discoloration of teeth [Cha.Sa.Indriya Sthana 12/55]	Periodontitis;
Abnormal eye lashes [Cha.Sa.Indriya Sthana 12/55]	Blepharitis; Malassezia infections in immunocompromised patients;
Abnormal scalp hair lines [Cha.Sa.Indriya Sthana 12/55]	Excessive sebum production in Seborrheic dermatitis (SD) associated with AIDS;
Non response to medicines [Cha.Sa.Indriya Sthana 12/56]	Terminal illness which doesn't respond to aggressive treatment and requires palliative or hospice care;
Abnormal depletion of ojas [Cha.Sa.Indriya Sthana 12/57]	Functional decline; Immunosenescence;
Abnormal sensorium [Cha.Sa.Indriya Sthana 12/58]	Sensory impairment; Agnosias; Hallucinations; Abnormal psychomotor activity seen in delirium; various neurodegenerative conditions;
Abnormal dreams [Cha.Sa.Indriya Sthana 12/59]	Nightmares found in ICU (intensive care unit) patients;

Table 4: Concepts and probable pathologies behind prognostic features

Acknowledgement: The contributors acknowledge support of Dr. M. Prasad and Dr.G.Kshama for providing table 3 and 4 from their published article referred in this chapter.

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Chikitsa Sthana

Preamble of Chikitsa Sthana

Chikitsa Sthana deals with the study of preservation of health, prevention and management of various diseases.

Fundamental principles

The term *Chikitsa* means treatment or therapy.⁷⁰ . It is important to note that the status of health and etio-pathogenesis of disease depends upon status of Agni (digestion and metabolism). [Cha.Sa.Chikitsa Sthana 15/4] Therefore, the treatment is based upon correcting the digestion and metabolism.

Literally, the term Kaya comprehends entire process of metabolism, rather than either anabolism as denoted by Deha or catabolism denoted by Sharira. Therefore, the word “Kaya-chikitsa” indicates medical management of diseases caused by impaired “Agni”. The medical practice of Kayachikitsa is based upon an intimate understanding of nutrition and the factors responsible for digestion, absorption and metabolism.⁷¹ Chikitsa Sthana is the most important section focusing on objectives of Ayurveda for preservation of health and treatment of diseased[Cha.Sa.Sutra Sthana 30/25]

Structural dimensions of the section

This section relates mainly to therapeutics. However each chapter in this section starts with comprehensive information about etio-pathogenesis along with symptomatology, prognosis and classification of diseases before delving into detailed treatment. In therapeutic section of chapters, a general pattern is adopted to describe the management: The first principle of treatment (*chikitsa sutra*) of that particular disease is given in terms of *langhana* or *brimhana*, *snehana* or *rukshana*, *swedana* or *stambhana* and related measures of *shodhana* followed by their judicious use in particular state and stage of the disease. It is followed by description of single or compound preparations along with their constituents, method of preparation and indications. The drugs are mentioned in the form of fresh juice and paste, powder, tablet, decoctions, *avaleha*

⁷⁰ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

⁷¹ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

(jam), *asava* (fermented preparations mainly from juices), *arishta* (fermented preparations mainly from decoctions), medicated ghee and oil etc.

Specialties of Ayurveda therapeutics

The medical therapeutics today has been classified into many branches focused on a defined group of patients, diseases, skills, or philosophy.⁷² Each chapter in this section deals with a separate specialty. Being primarily a treatise of *kayachikitsa* (medicine), twenty three chapters in the Chikitsa Sthana deal with medical therapeutics. Other aspects of therapeutics like preservation and promotion of physical, mental, spiritual and sexual health is dealt in the first two chapters of Rasayana Chikitsa and Vajikarana Chikitsa. The chapter Dwivraniya Chikitsa pertains to wound management and briefs about surgical procedures (*shalya*). The chapter Visha Chikitsa on the management of poisoning (*visha*) deals with *agada-tantra* (toxicology). In Ayurveda, psychiatry is dealt with under the heading of *bhuta-vidya* and two chapters viz. Unmada Chikitsa and Apasmara Chikitsa focus on this aspect of medicine. The last chapter Yonivyapati Chikitsa describes disorders of male and female infertility, gynecological disorders with paediatrics diseases. The chapter also mentions important principles of time of administration of medicine i.e. chrono-pharmacology and factors for deciding dose i.e. posology.

Glimpses of chapters

Eight groups of major diseases were described in Nidana Sthana, each representing one specific clinical feature from diagnostic point of view. Management of those eight diseases is explained in detail from the third to the tenth chapter.

In all, There are thirty chapters in Chikitsa Sthana.

- The first chapter is on Rasayana Chikitsa (rejuvenation therapy) , further divided into four sections (or sub-chapters). The chapter describes a number of medicine preparations by means of which one can prevent and retard aging and live a longer, happier life. Rasayana measures promote physical and mental health and provide general immunity to prevent diseases as well as strength to the tissues to be able to fight diseases effectively. Thus this chapter highlights principles of geriatrics and old age care as well as prevention of aging process.
- The second chapter, on Vajikarana Chikitsa, also comprises of four sub-chapters and deals with enhancing sexual health in healthy persons, consequently leading to healthy progeny. The chapter reveals principles of aphrodisiac medicines.
- The management of *Jwara* (fever) associated diseases are described in the 3rd chapter, Jwara Chikitsa. It includes therapeutic measures for acute and chronic

⁷² Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

fever, continuous, intermittent, malarial and seasonal fevers, mild, moderate and severe fevers, fever with or without ama, fevers occurring from one, two or three combination of dosha, fever occurring in dhatu and so on. All the aspects affecting treatment and prognosis of various types of fever are also described. This chapter describes principles related with thermo-regulatory mechanisms in the body.

- The fourth chapter deals with the management of bleeding disorders under the heading of Raktapitta Chikitsa, which is of two types i.e. bleeding from the upper and lower channels. Management principles of bleeding disorders are mentioned in this chapter.
- The fifth chapter, Gulma Chikitsa describes protuberance of abdomen under two headings, local and generalized. Local lump in abdominal cavity is termed as *gulma* and is of five types which includes simple gas phantom to new growth and their treatment.
- Urinary diseases are described according to the presenting symptoms of excessive urine or scanty urine with difficulty/pain. This chapter deals with the treatment of urinary problems with presenting sign of excessive urine under the heading of Prameha Chikitsa which is of twenty types and includes *madhumeha* (diabetes mellitus). Principles of treatment for disorders due to impaired fat metabolism are also described.
- The management of eighteen types of *Kushtha* (skin diseases including leprosy) is described in the seventh chapter entitled Kushtha Chikitsa. Chronic non-purulent bacterial, fungal and allergic skin disorders are described under this heading. These disorders are further divided into two groups viz. 11 types of *kshudra kushtha* (minor skin diseases) and 7 types of *mahakushtha* (major skin disorders). The chapter describes principles of dermatology specialty.
- *Rajayakshma* (Syndrome like Tuberculosis) has been a problem since time immemorial. It is described in the chapter entitled Rajayakshma Chikitsa. According to its etio-pathogenesis, it is classified into four types and its detailed treatment is described. The chapter deals with treatment of various diseases due to impaired immunity.
- *Bhuta-vidya* (psychiatric disorders) are described in two chapters. The ninth chapter entitled Unmada Chikitsa describes the management of insanity and various other psychotic disorders.
- The tenth chapter entitled Apasmara Chikitsa deals with the management of epilepsy, seizures and memory disorders. Both chapters describe management principles of psychiatric disorders.
- *Kshata-kshina* occurs by indulgence in activities beyond one's strength or cruel activities such as bull fighting leading to chest injuries, bleeding and cachexia. The management is described in eleventh chapter entitled Kshatakshina Chikitsa. This chapter mentions principles of management of chest injuries and occupational health hazards.

- Three groups of diseases with swelling (*utsedha*), edema and inflammation at various sites are described in the twelfth chapter entitled Shvayathu Chikitsa.
- The conditions leading to generalized enlargement of abdomen such as ascites, hepatomegaly and splenomegaly are described in thirteenth chapter entitled Udara Chikitsa.

Both chapters describe management principles of disorders due to impaired fluid and osmotic balance in body.

- Types of hemorrhoids and warts etc. are described along with their treatment in the next chapter entitled Arsha Chikitsa. The chapter describes medical or conservative management of haemorrhoids.
- Grahani Chikitsa, the fifteenth chapter elaborates physiological principles of Agni (digestion and metabolism) at various levels and its importance in clinical practice. Various processes of digestion, metabolism leading to the formation of *dhatu* (body tissues) and *mala* (metabolic wastes) are also described. The comprehensive management of disorders of gastrointestinal tract is described.
- Two diseases caused mainly by vitiation of *rakta* (blood tissue) viz. *pandu roga* (anemia and blood deficiency disorders) and *kamala* (jaundice and hepatic disorders) are described in sixteenth chapter entitled Pandu Chikitsa. Thus management principles of haematological disorders are described in this chapter.
- The seventeenth chapter, entitled Hikka Shwasa Chikitsa deals with disorders of respiratory system. Clinical presentations and management of five types of hiccups and dyspnoea are described.
- Kasa Chikitsa, the eighteenth chapter deals with cough of various origin and its management.
- The management principles of various types of diarrhea and irritable bowel syndrome are described in nineteenth chapter entitled Atisara Chikitsa.
- The next chapter Chhardi Chikitsa describes management of Vomiting (*chhardi*) due to various somatic and psychological origin.
- Types of acute inflammatory dermatological conditions such as erysipelas are described under the heading of *visarpa* in twenty-first chapter entitled Visarpa Chikitsa.
- The conditions manifested in the form of excessive thirst (*trishna*) are described in chapter entitled Trishna Chikitsa.
- The next chapter, Visha Chikitsa deals with the management of acute and slow poisoning (*visha*) relating with *agada-tantra* (toxicology).
- The management of its various acute and chronic stages of alcoholic intoxication and its complications are tackled in twenty fourth chapter entitled Madatyaya Chikitsa. The management principles for substance abuse and addiction can be referred in this chapter.
- Wound management and surgical procedures (*shalya*) are described in twenty fifth chapter entitled Dwivraniya Chikitsa.

- The next chapter, Trimarmiya Chikitsa describes disorders due to obstruction to free movement of vata dosha. The gastrointestinal diseases such as *udavarta*(reverse movement of vata), *anaha* (distension of abdomen), *aruchi* (anorexia) etc. are described. Disorders of three vital organs like heart, brain and kidney are described as main context of chapter. Thus this chapter describes management principles of disorders in cardiac region, head region and urinary system. Brief description of management of diseases pertaining to hair, ear, nose and throat with passing reference to eye diseases is also dealt in this chapter.
- Disorders of spinal- neuro- muscular degeneration in thigh and hip joint are described in twenty seventh chapter entitled Urustambha Chikitsa.
- Vata dosha is the key initiating factor responsible for all physiological and psychological mechanisms in the body. The types of vata dosha, their functions and disorders are described in Vatavyadhi Chikitsa. Disorders caused by Vata dosha in body, like digestive system, nervous system, musculo-skeletal system and their managements are described in this chapter.
- The next chapter, Vatarakta Chikitsa specifically describes disorders due to vitiation of vata dosha and rakta dhatus. The conditions involving deformities in small joints, those of vascular system involving blood vessels are highlighted in this chapter with their management.
- The last chapter, entitled Yonivyapati Chikitsa) describes disorders related to male and female reproductive system, infertility and other gynecological disorders. The diseases in children (*kaumarabhritya*) are mentioned as well. The principles related to time of administration of medicine and dose is also highlighted.

Importance

The section is a quick reference manual for therapeutics. This section provides comprehensive information about all aspects of clinical practice including etio-pathogenesis, management and drug formulary. It is obvious from the foregoing that Chikitsa Sthana is a treasure of therapeutic knowledge and by mastering this part one can become expert physician who can tackle all types of acute and chronic disease successfully.

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Category: Ayurveda therapeutics

External links

- Case reports on various conditions are available on this blog.

References

Rasayana Chikitsa

1. Rasayana Adhyaya

Vajikarana Chikitsa

1. Vajikarana Adhyaya

Jwara Chikitsa

Chikitsa Sthana Chapter 3. Management of Jwara (different types of fever)

Abstract

This chapter on *jwara* is specially important from the standpoint of its management. It covers various endogenous and exogenous causes of *jwara* with its management principles. It encompasses a wide set of concepts related to diversified pathogenesis of diseases, including variations in *dosha* states, their degrees in less or severe form, clinical features and their management. The stages of disease and change in treatments need special attention. The important concept of functional aspects of disease involving psychogenic factors and affliction of unknown factors causing *jwara* are described in detail with their psycho-spiritual therapies. Do's and don'ts during *jwara* and after its remission are applicable in every disease. The etio-pathogenesis and management of recurrence of *jwara* denotes importance of observing prescribed codes even after being free from disease. Due to the cardinal feature of raised body temperature or a perception of it, *jwara* is often considered synonymous with fever. However, it is not always necessary to consider *jwara* disease as fever, because it covers many other principles of management of disease. Modern medicine literature describes two components of fever, one where the cause or etiology is known and the other where it is unknown and is described as FUO (Fever of Unknown Origin). Thus, there is no curative treatment of FUO is available in modern medicine. On the other hand, this chapter describes important Ayurvedic concepts of *jwara* or fever which are important to understand the etiology of fever and thus the management.

Keywords: *Jwara roga, Santapa, pitta* fever, *ushma*, heat regulation.

Introduction

The first two chapters of Chikitsa Sthana describe *rasayana* and *vajikarana* to serve the first purpose of preservation, promotion, and rejuvenation of health. The second purpose – the treatment of disease - is dealt in subsequent chapters of this *sthana*. Jwara Chikitsa has been dealt first because Ayurveda holds that *jwara* is not merely the increase in body temperature (fever) but also a feeling of malaise, unease and discomfort, and involves the *deha, indriya*, and *mana* (physical body, sensory organs, and mind). While the balanced state of *vata, pitta*, and *kapha* manifest health by rhythmic circulation of fluids, digestion, metabolism, and nutrition respectively, their imbalance manifest as pain, increase in body heat, and inflammations. *Jwara* is an imbalanced state of *pitta*, which damages the physiology of digestion and metabolism. Inappropriately digested food transforms into a substance called *amavisha* which is a predisposing cause of many diseases. The initial manifestation of stagnated *amavisha* in *rasa dhatu* (plasma) is *jwara*. Thus, *jwara* is an important indication for the circulating *amavisha* and requires early treatment before its progression.

This chapter of Jwara Chikitsa establishes many guiding principles for treatment of various diseases described later in this section. These are classification, types, association with body tissues, and identification of progression, precautions and specific order of treatment. Causes and symptoms of recurrence and their remedies are widely described in this chapter.

Sanskrit text, Transliteration and English Translation

अथातो ज्वरचिकित्सितं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātō jwaracikitsitam vyākhyāsyāmah||1||

iti ha smāha bhagavānātrēyah||2||

athAto jwaracikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Jwara Chikitsa” (Management of different types of fever). Thus said lord Atreya.[1-2]

Queries of Agnivesha

विज्वरं ज्वरसन्देहं पर्यपृच्छत् पुनर्वसुम्।

विविक्ते शान्तमासीनमग्निवेशः कृताञ्जलिः||३||

देहेन्द्रियमनस्तापी सर्वरोगाग्रजो बली।

ज्वरः प्रधानो रोगाणामुक्तो भगवता पुरा॥४॥

तस्य प्राणिसप्तनस्य ध्रुवस्य प्रलयोदये।

प्रकृतिं च प्रवृत्तिं च प्रभावं कारणानि च॥५॥

पूर्वरूपमधिष्ठानं बलकालात्मलक्षणम्।

व्यासतो विधिभेदाच्च पृथग्भिन्नस्य चाकृतिम्॥६॥

लिङ्गमामस्य जीर्णस्य सौषधं च क्रियाक्रमम्।

विमुञ्चतः प्रशान्तस्य चिह्नं यच्च पृथक् पृथक्॥७॥

ज्वरावसृष्टो रक्ष्यश्च यावत्कालं यतो यतः।

प्रशान्तः कारणैर्येश्च पुनरावर्तते ज्वरः॥८॥

याश्चापि पुनरावृतं क्रियाः प्रशमयन्ति तम्।

जगद्धितार्थं तत् सर्वं भगवन्! वक्तुमर्हसि॥९॥

तदग्निवेशस्य वचो निशम्य गुरुरब्रवीत्।
ज्वराधिकारे यद्वाच्यं तत् सौम्य! निखिलं शृणु॥१०॥

vijwaram jwarasandeham paryaprcchat punarvasum|
vivikte shAntamAsInamagniveshaH kRutA~jjaliH||3||

dēhēndriyamanastāpī sarvarōgāgraJō balī|
jwaraḥ pradhānō rōgāñāmuktō bhagavatā purā||4||

tasya prāṇisapatnasya dhruvasya pralayōdayē|
prakṛtim ca pravṛttim ca prabhāvarṁ kāraṇāni ca||5||

pūrvarūpamadhiṣṭhānam balakālātmalakṣaṇam|
vyāsatō vidhibhēdācca [2] pṛthagbhinnasya cākṛtim||6||

liṅgamāmasya jīrnasya sauṣadham ca kriyākramam|
vimuñcataḥ praśāntasya cihnaṁ yacca pṛthak pṛthak||7||

jvarāvasṛṣṭo rakṣyaśca yāvatkālaṁ yatō yataḥ|
praśāntaḥ kāraṇairyaśca punarāvartatē jwaraḥ||8||

yāścāpi punarāvṛttam kriyāḥ praśamayanti tam|
jagaddhitārtham tat sarvam bhagavan! vaktumarhasi||9||

tadagnivēśasya vacō niśamya gururabrvīt|
jvarādhikārē yadvācyam tat saumya! nikhilam śṛṇu||10||

vijwaraM jwarasandeHaM paryapRucchat punarvasum|
vivikte shAntamAsInamagniveshaH kRutA~jjaliH||3||

dehendriyamanastApl sarvarogAgraJo ball||
jwaraH pradhAno rogANAmukto bhagavatA purA||4||

tasya prANisapatnasya dhruvasya pralayodaye|
prakRutiM ca pravRuttiM ca prabhAvaM kAraNAni ca||5||

pUrvarUpamadhiShThAnaM balakAlAtmalakShaNam|
vyAsato vidhibhedAcca pRuthagbhinnasya cAkRutim||6||

li~ggamAmasya jlRNasya sauShadhaM ca kriyAkramam|
vimu~jcataH prashAntasya cihnaM yacca pRuthak pRuthak||7||

jwaravasRuShTo rakShyashca yAvatkAlaM yato yataH|
 prashAntaH kAraNairyaisca punarAvartate jwaraH||8||
 yAshcApi punarAvRuttaM kriyAH prashamayanti tam|
 jagaddhitArthaM tat sarvaM bhagavan! vaktumarhasi||9||
 tadagniveshasya vaco nishamya gururabrvIt|
 jwaradhikAre yadvAcyAM tat saumya! nikhilaM shRuNu||10||

Punarvasu, who was free from all types of diseases (*jwara*) and was having complete peace of mind, was sitting in a lonely place; where Agnivesha approached him and asked his queries about *jwara* with a modest *namaskar* (greeting, with hands folded).

Oh lord! You have already stated earlier that (in Nidana Sthana) “*jwara* afflicts the body, senses and the mind, is the first disease to be manifested, and is the principal and the most powerful disease.” This enemy of human beings is invariably associated with the birth and death of creatures. Therefore, kindly elucidate the following points for the benefit of the humanity –

- *Prakriti* or the nature of the disease
- *Pravritti* or origin of the disease
- *Prabhava*, the sequels of the disease
- *Karana* or the causative factors
- *Purvarupa* or the premonitory signs and symptoms
- *Adhisthana* or place of manifestation
- *Bala kala* or its severity and the time of manifestation
- *Atma lakshana* or cardinal features which are invariably associated with this disease
- Details of classification (*vidhi bheda*)
- Signs and symptoms of each type of the disease
- Sign and symptoms of *ama jwara* i.e. primary stage of the disease
- Sign and symptoms of *jirna jwaraa* i.e. chronic stage
- Drugs for the treatment of the disease
- Various therapeutic procedures
- Signs and symptoms that are manifested when the fever is getting cured, or when it is alleviated – both separately
- The duration for which the patient who has become free from a disease has to avoid certain regimens and the reasons for that
- The reasons for the reattack of the fever after it has subsided
- The therapies which should be administered in order to alleviate this reattack of this fever;

After hearing this statement of Agnivesha, the preceptor (Atreya) replied: “all these will be explained in this chapter on the description of fever. Oh benevolent one, listen to the details.”[3-10]

Synonyms of *jwara*

ज्वरो विकारो रोगश्च व्याधिरातङ्क एव च।
एकोऽर्थे नामपर्यायैर्विविधैरभिधीयते॥११॥

jvarō vikārō rōgaśca vyādhiraatānka ēva ca|
ēkō'rthō nāmaparyāyairvividhairabhidhīyatē||11||

jvaro vikAro rogashca vyAdhirAta~gka eva ca|
eko~artho nAmaparyAyairvividhairabhidhlyate||11||

Jwara, vikara, roga, vyadhi and *atanka* – these terms are synonymous and used to indicate this condition. [11]

Prakriti or nature of jwara

तस्य प्रकृतिरुद्दिष्टा दोषाः शारीरमानसाः।
देहिनं न हि निर्देषं ज्वरः समुपसेवते॥१२॥

क्षयस्तमो ज्वरः पाप्मा मृत्युश्चोक्ता यमात्मकाः।
पञ्चत्वप्रत्ययान्ननृणां क्लिश्यतां स्वेन कर्मणा॥१३॥

इत्यस्य प्रकृतिः प्रोक्ता, ...॥१४॥

tasya prakṛtiruddiṣṭā dōṣāḥ śārīramānasāḥ|
dēhinam na hi nirdōṣarāj jwaraḥ samupasēvatē||12||

kṣayastamō jwaraḥ pāpmā mṛtyuścōktā yamātmakāḥ|
pañcatvapratyayānnnṛṇāṁ kliśyatāṁ svēna karmaṇā||13||

ityasya prakṛtiḥ prōktā, ...|14|

tasya prakRutiRuddiShTA doShAH shArIramAnasAH|
dehinaM na hi nirdoShaM jwaraH samupasevate||12||

kShayastamo jwaraH pApmA mRutyushcoktA yamAtmakAH|
pa~jcatvapratyayAnnRUNAM klishyatAM svena karmaNA||13||

ityasya prakRutiH proktA, ...|14|

The three physical *doshas* and the two *manasika doshas* are the natural factors responsible for *jwara* (*prakriti*) as *jwara* cannot originate in a person having the balance of these three *dosha* (*nirdosha* – in the state of homeostasis). Therefore, these *sharirika* and *manasika doshas* are the *prakriti* of *jwara*.

Kshaya (emaciation), *tama* (feeling of entering into darkness), *jwara*, *papma* (manifestations of the sinful acts) and *mrityu* (death) are all the various presentations of Yamaraja (lord of deaths). These are the causes of death (*panchatva*) in individuals suffering from various grievances, due to their own deeds and hence have been accepted as equivalent to Yama (lord of death). In this way the *prakriti* (basic nature) of *jwara* has been described. [12-13]

Pravritti (origin of the disease)

... प्रवृत्तिस्तु परिग्रहात्।
निदाने पूर्वमुद्दिष्टा रुद्रकोपाच्य दारुणात्॥१४॥
द्वितीये हि युगे शर्वमक्रोधव्रतमास्थितम्।
दिव्यं सहस्रं वर्षाणामसुरा अभिदुद्रुतः॥१५॥
तपोविघ्नाशनाः कर्तुं तपोविघ्नं महात्मनः।
पश्यन् समर्थश्चोपेक्षां चक्रे दक्षः प्रजापतिः॥१६॥
पुनर्महेश्वरं भागं धुवं दक्षः प्रजापतिः।
यज्ञे न कल्पयामास प्रोच्यमानः सुरैरपि॥१७॥
ऋचः पशुपतेर्याश्च शैव्य आहतयश्च याः।
यज्ञसिद्धिप्रदास्ताभिर्हीनं चैव स इष्टवान्॥१८॥
अथोतीर्णव्रतो देवो ब्रुद्ध्वा दक्षव्यतिक्रमम्।
रुद्रो रौद्रं पुरस्कृत्य भावमात्मविदात्मनः॥१९॥
सृष्ट्वा ललाटे चक्षुर्वै दग्ध्वा तानसुरान् प्रभुः।
बालं क्रोधाग्निसन्तप्तमसृजत् सत्रनाशनम्॥२०॥
ततो यज्ञः स विद्वस्तो व्यथिताश्च दिवौकसः।
दाहव्यथापरीताश्च भान्ता भूतगणा दिशः॥२१॥
अथेश्वरं देवगणः सह सप्तर्षिभिर्विभुम्।
तमृग्निभरस्तुवन् यावच्छैवे भावे शिवः स्थितः॥२२॥
शिवं शिवाय भूतानां स्थितं जात्वा कृताञ्जलिः।
भिया भस्मप्रहरणस्त्रिशिरा नवलोचनः॥२३॥

ज्वालामालाकुलो रौद्रो हस्वजङ्घोदरः क्रमात्।
क्रोधाग्निरुक्तवान् देवमहं किं करवाणि ते॥२४॥

तमुवाचेश्वरः क्रोधं ज्वरो लोके भविष्यसि।
जन्मादौ निधने च त्वमपचारान्तरेषु च॥२५॥

... pravṛttistu parigraphāt|

nidānē pūrvamuddiṣṭā rudrakōpācca dāruṇāt||14||

dvitīyē hi yugē śarvamakrōdhavrataṁsthitaṁ|

divyaṁ sahasraṁ varṣāṇāmaśurā abhidudruvuḥ||15||

tapōvighnāśanāḥ kartuṁ tapōvighnaṁ mahātmanāḥ|

paśyan samarthaścōpēkṣāṁ cakrē dakṣaḥ prajāpatih||16||

punarmāhēśvaraṁ bhāgaṁ dhruvaṁ dakṣaḥ prajāpatih|

yajñē na kalpayāmāsa prōcyamānaḥ surairapi||17||

ṛcaḥ paśupatēryāśca śaivya āhatayaśca yāḥ|

yajñasiddhipradāstābhīrhīnaṁ caiva sa iṣṭavān||18||

athōttīrṇavratō dēvō buddhvā dakṣavyatikramam|

rudrō raudraṁ puraskṛtya bhāvamātmavidātmanāḥ||19||

sṛṣṭvā lalāṭē cakṣurvai dagdhvā tānasurān prabhuḥ|

bālaṁ krōdhāgnisantaptamasṛjat satranāśanam||20||

tatō yajñāḥ sa vidhvastō vyathitāśca divaukasāḥ|

dāhavyathāparītāśca bhrāntā bhūtagaṇā diśaḥ||21||

athēśvaraṁ dēvagaṇāḥ saha saptarśibhirvibhum|

tamṛgbhirastuvan yāvacchaivē bhāvē śivah sthitah||22||

śivāṁ śivāya bhūtānāṁ sthitāṁ jñātvā kṛtāñjalih|

bhiyā bhasmapraharaṇastriśirā navalōcanāḥ||23||

jvālāmālākulō raudrō hrasvajaṅghōdaraḥ kramāt|

krōdhāgniruktavān dēvamahāraṁ kiṁ karavāṇi tē||24||

tamuvačēśvaraḥ krōdharā jvarō lōkē bhaviṣyasi|

janmādau nidhanē ca tvamapacārāntarēṣu ca||25||

... pravRuttistu parigrahAt|
 nidAne pUrvamuddiShTA rudrakopAcca dAruNAt||14||
 dvitlye hi yuge sharvamakrodhavratamAsthitaM|
 divyaM sahasraM varShANAmasurA abhidudruvuH||15||
 tapovighnAshanAH kartuM tapovighnaM mahAtmanaH|
 pashyan samarthaShcopekShAM cakre dakShaH prajApatiH||16||
 punarmAheshvaraM bhAgaM dhruvaM dakShaH prajApatiH|
 yaj~je na kalpayAmAsa procyamAnaH surairapi||17||
 RucaH pashupateryAshca shaivya Ahatayashca yAH|
 yaj~jasiddhipradAstAbhirhInaM caiva sa iShTavAn||18||
 athottIrNavrato devo buddhvA dakShavyatikramam|
 rudro raudraM puraskRutya bhAvamAtmavidAtmanaH||19||
 sRuShTvA laIATe cakShurvai dagdhvA tAnasurAn prabhuH|
 bAlaM krodhAgnisantaptamasRujat satranAshanam||20||
 tato yaj~jaH sa vidhvasto vyathitAshca divaukasaH|
 dAhavyathAparItAshca bhrAntA bhUtagaNA dishaH||21||
 atheshvaraM devagaNaH saha saptarShibhirvibhum|
 tamRugbhiraStuvan yAvacchaive bhAve shivaH sthitaH||22||
 shivaM shivAya bhUtAnAM sthitaM j~jAtvA kRutA~jjaliH|
 bhiyA bhasmapraharaNastrishirA navalocanaH||23||
 jvAIAmAIAkulo raudro hrasvaja~gghodaraH kramAt|
 krodhAgnirktaVAn devamahaM kiM karavANi te||24||
 tamuvAcshvaraH krodhaM jvaro loke bhaviShyasi|
 janmAdau nidhane ca tvamapacArAntareShu ca||25||

The origin of *jwara* is because of the tendency for greed or attachment (*parigraha*). It has been described earlier in the Nidana Sthana that the origin of *jwara* resulted from the ferocious wrath of Rudra (Lord Shiva).

During the *Treta Yuga* (second age) Lord Shiva took a vow of not manifesting anger or wrath for one thousand celestial years. During this time the *asuras* (the demons)

indulged in the creating obstruction, playing mischiefs and destroying the sacrament and the meditation of the *rishis* (sages). Daksha Prajapati was capable of combating these demons but he ignored his duties of opposing those demons and further organized a *yajna* (ritual of sacrifice) in which he did not offer any share to Lord Shiva in spite of being told to do so by the other lords. He even did not chant the hymns (*richa*) described in the *veda* of lord Shiva which provide fulfilment to the desired objective of *yajna* and even did not offer *ahuti* (pouring of ghee in the sacrificial fire) to Lord Shiva. Lord Shiva perceived whole of this situation regarding Daksha Prajapati's non observance of rules and became angry. He then brought forward his *Raudra* (wrathful) *bhava* (nature) and opened his third eye, destroying all those demons by burning them and further gave rise to a child like form named *Virabhadra* to his wrath, who was stuffed with his anger and was capable of destroying the *yajna* of Daksha. That child demolished the *yajna* of Daksha Prajapati as a result of which the gods got afflicted with burning sensation and pain and started running in different directions and became afflicted. Then the gods along with the seven rishis offered those substantial hymns to Lord Shiva till he became pleased and switched over to his Shiva (the compassionate or benevolent and auspicious) form. When it was known that Lord Shiva is returned to his auspicious disposition, then Virabhadra who was produced from the wrathful fire of Lord Shiva, who had three heads and nine eyes, used ash as his weapon, had the flame of his fire as his garland, was wrathful, had frightful and small thighs and stomach approached lord Shiva with folded hands and enquired about his future work. Lord Shiva replied to him that "you will become *jwara* in this world and afflict people in the beginning of life – at birth and at the time of death and will also afflict those who will resort to erratic regimen." [14-25]

Prabhava, the sequels of the disease

सन्तापः सारुचिस्तृष्णा साङ्गमर्दो हृदि व्यथा।

ज्वरप्रभावो, जन्मादौ निधने च महत्तमः॥२६॥

प्रकृतिश्च प्रवृत्तिश्च प्रभावश्च प्रदर्शितः॥२७॥

santāpaḥ sārucistṛṣṇā sāṅgamardō hṛdi vyathā|

jwaraprabhāvō, janmādau nidhanē ca mahattamah॥२६॥

prakṛtiśca pravṛttiśca prabhāvaśca pradarśitah॥२७॥

santApaH sArucistRuShNA sA~ggamardo hRudi vyathA|

jwaraprabhAvo, janmAdau nidhane ca mahattamaH॥२६॥

prakRutishca pravRuttishca prabhAvashca pradarshitaH॥२७॥

Santapa (feeling of heat or raised temperature), *aruchi* (anorexia), *trishna* (morbid thirst), *angamarda* (body ache), *hrid vyatha* (pain in the cardiac region) – these are the invariable manifestations of *jwara*. At the time of birth and death, *jwara* is manifested in

the form of tamas (*moha*- altered state of consciousness). In this way the *prakriti* (nature), *pravritti* (origin) and the *prabhava* (invariable manifestations) of *jwara* are described. [26-27]

निदाने कारणान्यष्टौ पूर्वोक्तानि विभागशः||२७||

nidānē kāraṇānyāṣṭau pūrvōktāni vibhāgaśah||27||

nidAne kAraNAnyaShTau pUrvoktAni vibhAgashaH||27||

Earlier in the Nidana Sthana the etiological factors for each of the eight varieties of *jwara* have been described separately. [27]

Premonitory symptoms of *jwara*

आलस्यं नयने सासे जुम्भणं गौरवं क्रमः।

ज्वलनातपवाय्वम्बुभक्तिद्वेषावनिश्चितौ॥२८॥

अविपाकास्यवैरस्ये हानिश्च बलवर्णयोः।

शीलवैकृतमल्पं च ज्वरलक्षणमग्रजम्॥२९॥

ālasyaṁ nayanē sāsrē jṛmbhaṇaṁ gauravaṁ kramah|

jvalanātapaवायvambubhaktidvēśāvaniścita॒॥२८॥

avipākāsyavairasyē hāniśca balavarṇayōḥ|

śīlavaikṛtamalpaṁ ca jwaralakṣaṇamagrajam॥२९॥

AlasyaM nayane sAsre jRumbhaNaM gauravaM kramaH|

jvalanAtapavAyvambubhaktidveShAvanishcita॒॥२८॥

avipAkAsyavairasye hAnishca balavarNayoH|

shI lavaikRutamalpaM ca jwaralakShaNamagrajam॥२९॥

Laziness, lacrimation, yawning, heaviness, mental fatigue, uncertainty and intolerance about the liking and disliking for the heat, sun, wind and water; indigestion, anorexia, depletion in strength, complexion, and slight change in conduct, are the premonitory signs and symptoms of *jwara*.[28-29]

Sites of *jwara*

केवलं समनस्कं च ज्वराधिष्ठानमुच्यते।

शरीरं, बलकालस्तु निदाने सम्प्रदर्शितः॥३०॥

kēvalaṁ samanaskam ca jvarādhiṣṭhānamucyatē|

śarīram, balakālastu nidānē sampradarśitah॥३०॥

kevalaM samanaskaM ca jwaradhiShThAnamucyate|
sharIraM, balakAlastu nidAne sampradarshitaH||30||

The whole body and the mind are the sites of manifestation of *jwara*. The severity and the time of manifestation of *jwara* have been described in Nidana Sthana.[30]

Cardinal feature

ज्वरप्रत्यात्मिकं लिङ्गं सन्तापो देहमानसः।
ज्वरेणाविशता भूतं न हि किञ्चिन्न तप्यते॥३१॥
jwarapratyātmikam liṅgam santāpō dēhamānasah|
jvarēṇāviśatā bhūtam na hi kiñcinna tapyatē||31||
jwarapratyAtmikaM li~ggaM santApo dehamAnasaH|
jvareNAvishatA bhUtaM na hi ki~jcinna tapyate||31||

The clinical features invariably associated with *jwara* are the feeling of heat or increased body temperature and discomfort in body and mind. *Jwara* afflicts the whole body including mind and sensory organs in all living beings. [31]

Classification

द्रविविधो विधिभेदेन ज्वरः शारीरमानसः।
पुनश्च द्रविविधो दृष्टः सौम्यश्चाग्नेय एव वा॥३२॥
अन्तर्वेगो बहिर्वेगो द्रविविधः पुनरुच्यते।
प्राकृतो वैकृतश्चैव साध्यश्चासाध्य एव च॥३३॥
पुनः पञ्चविधो दृष्टो दोषकालबलाबलात्।
सन्ततः सततोऽन्येदयुस्तृतीयकचतुर्थकौ॥३४॥
पुनराश्रयभेदेन धातूनां सप्तधा मतः।
भिन्नः कारणभेदेन पुनरष्टविधो ज्वरः॥३५॥
dvividhō vidhibhēdēna jwarah śārīramānasah|
punaśca dvividhō dr̥ṣṭah saumyaścāgnēya ēva vā||32||
antarvēgō bahirvēgō dvividhaḥ punarucyatē|
prākṛtō vaikṛtaścaiva sādhyaścāsādhya ēva ca||33||
punah pañcavidhō dr̥ṣṭō dōṣakālabalābalāt|
santataḥ satatō'nyēdyuṣṭīyakacaturthakau||34||

punarāśrayabhēdēna dhātūnām saptadhā mataḥ|
 bhinnaḥ kāraṇabhbēdēna punaraṣṭavidhō jwarah||35||
 dvividho vidhibhedena jwaraH shArIramAnasaH|
 punashca dvividho dRuShTaH saumyashcAgneya eva vA||32||
 antarvego bahirvego dvividhaH punarucyate|
 prAkRuto vaikRutashcaiva sAdhyashcAsAdhya eva ca||33||
 punaH pa~jcavidho dRuShTo doShakAlabalAbalAt|
 santataH satato~anyedyustRutlyakacaturthakau||34||
 punarAshrayabhedena dhAtUnAM saptadhA mataH|
 bhinnaH kAraNabhedena punaShTavidho jwaraH||35||

Jwara is classified into two types each on the basis of the following criteria –

- *Sharira* (physical) and *manasa* (mental)
- *Saumya* (predominated by cold) and *agneya* (predominated by heat)
- *Antarvega* (internal) and *bahirvega* (external)
- *prakrita* (according to seasons) and *vaikrita* (unseasonal)
- *sadhya* (curable) and *asadhya* (incurable)

Jwara is again classified into five categories depending upon the strength and weakness of dosha and the time. These are intermittent in nature:

1. *Santata*
2. *Satata*
3. *Anyedushka*
4. *Tritiyaka*
5. *Chaturthaka*.

Depending upon the *ashraya* (site of manifestation in the body) among the seven *dhatus* (body tissues) *jwara* is again classified into seven categories.

Jwara is classified into eight types on the basis of eight causes of *jwara* (*dosha* predominance). [32-35]

Clinical features of somatic and psychic *jwara*

शारीरो जायते पूर्वं देहे, मनसि मानसः।
 वैचित्यमरतिगर्लानिर्मनसस्तापलक्षणम्॥३६॥
 इन्द्रियाणां च वैकृत्यं जेयं सन्तापलक्षणम्॥३७॥

śārīrō jāyatē pūrvam dēhē, manasi mānasah|
 vaicityamaratirglānirmanasastāpalakṣaṇam||36||
 indriyāñām ca vaikṛtyam jñēyam santāpalakṣaṇam|37|
 shArIro jAyate pUrvaM dehe, manasi mAnasaH|
 vaicityamaratirglAnirmanasastApalakShaNam||36||
 indriyANAM ca vaikRutyam j~jeyaM santApalakShaNam|37|

The *sharira* type of *jwara* first appears in the body and the *manasa* type, first appears in the mind. *Vaichitya* (mental instability), *arati* (disliking for everything) and *glini* (feeling of weakness in the body) are the signs and symptoms of the *manas tapa* (mental affliction of *jwara*). The loss of ease in sensing the objects is the feature of the *santapa* of the *indriya*. [36-37]

Desires of patient to diagnose *dosha* dominance

वातपित्तात्मकः शीतमुष्णं वातकफात्मकः||३७||
 इच्छत्युभयमेतत् ज्वरो व्यामिश्रलक्षणः|३८|
 vātapiṭṭātmakah śītamuṣṇam vātakaphātmakah||37||
 icchatyubhayamētattu jvaro vyāmiśralakṣaṇah|38|
 vAtapittAtmakaH shltamuShNaM vAtakaphAtmakaH||37||
 icchatyubhayametattu jvaro vyAmishralakShaNaH|38|

A patient suffering from *vata**pitta* variety of *jwara* desires for cold things, while, a patient suffering from *jwara* caused by *vata* and *kapha dosha* longs for hot things. However, when both of these types of *doshas* get mixed then such patient manifests both the kinds of symptoms. [37-38]

Attenuating nature of *vata dosha*

योगवाहः परं वायुः संयोगादुभयार्थकृत्||३८||
 दाहकृतेजसा युक्तः, शीतकृत् सोमसंश्रयात्|३९|
 yōgavāhah param vāyuh saMyōgādubhayārthakṛt||38||
 dāhakṛttējasā yuktaḥ, śītakṛt sōmasaṁśrayāt|39|
 yogavAhaH paraM vAyuH saMyogAdubhayArthakRut||38||
 dAhakRuttejasA yuktaH, shltakRut somasaMshrayAt|39|

Vata dosha is exceedingly *yogavahi* (which accentuates the properties of others) in nature. It produces both type of effects on combination with the two *doshas*. On combining with *tejas* it produces burning sensation while in combination with *soma* it produces cooling effect. [38-39]

Features of internal and external *jwara*

अन्तर्दाहोऽधिकस्तृष्णा प्रलापः श्वसनं भ्रमः||३९||

सन्ध्यस्थिशूलमस्वेदो दोषवर्चीविनिग्रहः।

अन्तर्वगस्य लिङ्गानि ज्वरस्यैतानि लक्षयेत्॥४०॥

सन्तापोऽभ्यधिको बाह्यस्तृष्णादीनां च मार्दवम्।

बहिर्वेगस्य लिङ्गानि सुखसाध्यत्वमेव च॥४१॥

antardāhō’dhikastṛṣṇā pralāpah śvasanam bhramah||39||

sandhyasthiśūlamasvēdō dōṣavarcōvinigrahah|

antarvēgasya liṅgāni jwarasyaitāni lakṣayēt||40||

santāpō’bhyadhikō bāhyastrṛṣṇādīnām ca mārdavam|

bahirvēgasya liṅgāni sukhasādhyatvamēva ca||41||

antardAho~adhikastRuShNA pralApaH shvasanaM bhramaH||39||

sandhyasthishUlamasvedo doShavarcovinigrahaH|

antarvegasya li~ggAni jwarasyaitAni lakShayet||40||

santApo~abhyadhiko bAhyastRuShNAdInAM ca mArdaVam|

bahirvegasya li~ggAni sukhasAdhyatvameva ca||41||

Excessive burning sensation inside the body, morbid thirst, delirium, dyspnea, giddiness, pain in bones and joints, absence of sweating, non-excretion of *doshas* and the feces – are the clinical features of *antarvegi jwara* (internal manifestation of *jwara*).

Excessive rise in the body temperature and above features in mild form are the features of *bahirvegi* (external type of *jwara*) and this type of *jwara* is easily curable. [39-41]

Prakrita jwara(seasonal *jwara*)

प्राकृतः सुखसाध्यस्तु वसन्तशरदुद्भवः।

उष्णमुष्णेन संवृद्धं पितं शरदि कुप्यति॥४२॥

चितः शीते कफश्चैवं वसन्ते समुदीर्यते।

वर्षास्वम्लविपाकाभिरदभिरोषधिभिस्तथा॥४३॥

सञ्चितं पितमुद्रिक्तं शरद्यादित्यतेजसा।
ज्वरं सञ्जनयत्याशु तस्य चानुबलः कफः॥४४॥

प्रकृत्यैव विसर्गस्य तत्र नानशनादभयम्।
अद्भिरोषधिभिश्चैव मधुराभिश्चितः कफः॥४५॥

हेमन्ते, सूर्यसन्तप्तः स वसन्ते प्रकुप्यति।
वसन्ते श्लेष्मणा तस्माज्ज्वरः समुपजायते॥४६॥

आदानमध्ये तस्यापि वातपितं भवेदनु।
आदावन्ते च मध्ये च बुद्ध्वा दोषबलाबलम्॥४७॥

शरद्वसन्तयोर्विद्वाज्ज्वरस्य प्रतिकारयेत्।
कालप्रकृतिमुद्दिश्य निर्दिष्टः प्राकृतो ज्वरः॥४८॥

प्रायेणानिलजो दुःखः कालेष्वन्येषु वैकृतः।
हेतवो विविधास्तस्य निदाने सम्प्रदर्शिताः॥४९॥

prākṛtaḥ sukhasādhyastu vasantaśaradudbhavaḥ।
uṣṇamuṣṇēna saṁvṛddham pittam śaradi kupyati॥४२॥

citaḥ sītē kaphaścaivam vasantē samudīryatē।
varṣāsvamlavipākābhiraadbhirōṣadhibhistathā॥४३॥

sañcitarām pittamudriktam śaradyādityatējasā।
jwarām sañjanayatyāśu tasya cānubalaḥ kaphah॥४४॥

prakṛtyaiva visargasya tatra nānaśanādbhayam।
adbhirōṣadhibhiścaiva madhurābhiścitaḥ kaphah॥४५॥

hēmantē, sūryasantaptaḥ sa vasantē prakupyati।
vasantē ślēṣmaṇā tasmājjwaraḥ samupajāyatē॥४६॥

ādānamadhyē tasyāpi vātapittam bhavēdanu।
ādāvantē ca madhyē ca buddhvā dōśabalābalam॥४७॥

śaradvasantayōrvidvāñjwarasya pratikārayēt।
kālaprakṛtimuddiśya nirdiṣṭaḥ prākṛtō jwarah॥४८॥

prāyēṇānilajō duḥkhaḥ kālēṣvanyēṣu vaikṛtaḥ।
hētavō vividhāstasya nidānē sampradarśitāḥ॥४९॥

prAkRutaH sukhAsAdhyastu vasantasharadudbhavaH|
 uShNamuShNena saMvRuddhaM pittaM sharadi kupyati||42||
 citaH shlte kaphashcaivaM vasante samudIryate|
 varShAsvamlavipAkAbhiradbhiroShadhibhistathA||43||
 sa~jcitaM pittamudriktaM sharadyAdityatejasA|
 jwaraM sa~jjanayatyAshu tasya cAnubalaH kaphaH||44||
 prakRutyava visargasya tatra nAnashanAdbhayam|
 adbhiroShadhibhishcaiva madhurAbhishcitaH kaphaH||45||
 hemante, sUryasantaptaH sa vasante prakupyati|
 vasante shleShmaNA tasmAjwaraH samupajAyate||46||
 AdAnamadhye tasyApi vAtapittaM bhavedanu|
 AdAvante ca madhye ca buddhvA doShabalAbalam||47||
 sharadvasantayorvidvA~jjwarasya pratikArayet|
 kAlaprakRutimuddishya nirdiShTaH prAkRuto jwaraH||48||
 prAyeNAnilajo duHkhaH kAleShvanyeShu vaikRutaH|
 hetavo vividhAstasya nidAne sampradarshitAH||49||

Jwara manifesting in the *vasanta* or spring season and *sharada* or autumn season is called *prakrita* (seasonal) *jwara* and is easily curable.

Pitta gets aggravated during autumn season because of its inherent hot properties and hot environment. *Kapha* gets accumulated in winters and gets aggravated during spring season.

The water and drugs (including the eatables) become sour in *vipaka* (taste that emerges after digestion) during the rainy season, which results in the accumulation of *pitta*. This accumulated *pitta* gets aggravated or excited (by the hot sunrays) during the autumn season. This can immediately produce *jwara* in which *kapha dosha* is secondarily associated. As *vasanta* is the part of *visarga kala* (the time of year when, body has good strength imparted by nature), no problem is created by fasting.

During *hemanta* (early winter) the water and drugs (including eatables) become sweet in taste, which helps in accumulation of *kapha*. This *kapha* gets aggravated during the subsequent spring season due to the strong sunrays (which melt this *kapha*). Therefore, *jwara* caused by *kapha* is manifested during the spring season. The spring is the part of the *adana kala* (the time when the strength of the creatures is the least as the nature

withdraws the strength) and in the *jwara* caused in this period *vata* and *pitta dosha* constitute the secondary associates.

A patient of *jwara* should be treated keeping in view the strength of the *doshas* in the beginning, middle and the end of the spring and autumn seasons. This way, depending upon the nature of the seasons, the seasonal types of *jwara* are described.

Vaikrita jwara

Generally, the *jwara* caused by *vata dosha* is difficult to treat in every season. The other types of *jwara*, get their initial strength from the predominant season, those are (*Vaikrita jwara*) difficult to treat are:

- *vatika jwara* irrespective of its season of occurrence
- *paitika jwara* occurring in seasons other than autumn and
- *kaphaja jwara* occurring in seasons other than spring.

The causative factors of the different types of *jwara* have been described in Nidana Sthana (in *jwara*). [42-49]

Prognosis of jwara

बलवत्स्वल्पदोषेषु ज्वरः साध्योऽनुपद्रवः।
हेतुभिर्बहुभिर्जातो बलिभिर्बहुलक्षणः॥५०॥
ज्वरः प्राणान्तकृद्यश्च शीघ्रमिन्द्रियनाशनः।
सप्ताहाद् वा दशाहाद् वा द्वादशाहातथैव च॥५१॥
सप्रलापभ्रमश्वासस्तीक्ष्णो हन्याज्ज्वरो नरम्।
ज्वरः क्षीणस्य शूनस्य गम्भीरो दैर्घरात्रिकः॥५२॥
असाध्यो बलवान् यश्च केशसीमन्तकृज्ज्वरः॥५३॥
balavatsvalpadōṣeṣu jwaraḥ sādhyo'nuपadravaḥ|
hētubhirbahubhirjātō balibhirbahulakṣaṇah||50||
jwaraḥ prāṇāntakṛdyaśca śīghramindriyanāśanaḥ|
saptāhādvā daśāhādvā dvādaśāhāttathaiva ca||51||
sapralāpabhramaśvāsastīkṣṇō hanyājjvarō naram|
jwaraḥ kṣīṇasya śūnasya gambhīrō dairgharātrikah||52||
asādhyo balavān yaśca kēśasīmantakṛjjwarah||53||
balavatsvalpadoSheShu jwaraH sAdhyo~anupadravaH|

hetubhirbahubhirjAto balibhirbahulakShaNaH||50||
 jwaraH prANAntakRudyashca shIghramindriyanAshanaH|
 saptAhAdvA dashAhAdvA dvAdashAhAttathaiva ca||51||
 sapralApabhraramashvAsastIkShNo hanyAjvaro naram|
 jwaraH kShINasya shUnasya gambhIro dairgharAtrikaH||52||
 asAdhyo balavAn yashca keshasImantakRujjwaraH||53|

Sadhyā (curable) jwara

Jwara is easily curable if it occurs in a person with strong physique, or if it is caused by the vitiation of lesser amount of *dosha* and if there are no complications.

Asadhyā (incurable) jwara

Jwara having the following characteristics are incurable and lead to death –

- Which is caused by either greater amount of / strong etiological factors
- Which manifests with many clinical features
- Which destroys the sense organs immediately.

Bad prognosis:

Tikshna jwara (severe, associated with delirium, giddiness and breathlessness causes death of the patient either on the seventh, tenth or twelfth day.

Jwara occurring in a weak and emaciated person (*kshina*), associated with edema (*shunasya*), seated in deeper body tissues (*gambhira*), severe (*balvan*) and that occurring for very long durations (*dirgha ratrika*) are incurable ones. The *jwara* in which, the mid hair part of scalp becomes visible, is also considered incurable (*kesha simanta krita*).[49-53]

Five types of *jwara* as per frequency

Santata jwara

स्रोतोभिर्विसृता दोषा गुरवो रसवाहिभिः॥५३॥
 सर्वदेहानुगाः स्तब्धा ज्वरं कुर्वन्ति सन्ततम्।
 दशाहं द्वादशाहं वा सप्ताहं वा सुदुःसहः॥५४॥
 स शीघ्रं शीघ्रकारित्वात् प्रशमं याति हन्ति वा।
 कालदूष्यप्रकृतिभिर्दोषस्तुल्यो हि सन्ततम्॥५५॥
 निष्प्रत्यनीकः कुरुते तस्माज्जेयः सुदुःसहः।
 यथा धातूस्तथा मूत्रं पुरीषं चानिलादयः॥५६॥

युगपच्चानुपद्यन्ते नियमात् सन्तते ज्वरे।
स शुद्ध्या वाऽप्यशुद्ध्या वा रसादीनामशेषतः॥५७॥

सप्ताहादिषु कालेषु प्रशमं याति हन्ति वा।
यदा तु नातिशुद्ध्यन्ति न वा शुद्ध्यन्ति सर्वशः॥५८॥

द्वादशैते समुद्दिष्टाः सन्ततस्याश्रयास्तदा।
विसर्गं द्वादशे कृत्वा दिवसेऽव्यक्तलक्षणम्॥५९॥

दुर्लभोपशमः कालं दीर्घमप्यनुवर्तते।
इति बुद्ध्वा ज्वरं वैद्य उपक्रामेत् सन्ततम्॥६०॥

क्रियाक्रमविधौ युक्तः प्रायः प्रागपतर्पणौः॥६१॥

srōtōbhīrvisṛtā dōṣā guravō rasavāhibhiḥ॥५३॥

sarvadēhānugāḥ stabdhā jwaram kurvanti santatam|
daśāham dvādaśāham vā saptāham vā suduḥsahah॥५४॥

sa śīghram śīghrakāritvāt praśamam yāti hanti vā|
kāladūṣyaprakṛtibhīrdōṣastulyō hi santatam॥५५॥

niśpratyānīkaḥ kurutē tasmājjñēyah suduḥsahah|
yathā dhātūmstathā mūtram purīṣam cānilādayah॥५६॥

yugapaccānupadyantē niyamāt santatē jvarē|
sa śuddhyā vā'pyaśuddhyā vā rasādīnāmaśēṣataḥ॥५७॥

saptāhādiṣu kālēṣu praśamam yāti hanti vā|
yadā tu nātiśudhyanti na vā śudhyanti sarvaśah॥५८॥

dvādaśaitē samuddiṣṭāḥ santasyāśrayāstadā|
visargam dvādaśē kṛtvā divasē'vyaktalakṣaṇam॥५९॥

durlabhōpaśamaḥ kālam dīrghamapyanuvartatē|
iti buddhvā jwaram vaidya upakrāmēttu santatam ||६०||

kriyākramavidhau yuktaḥ prāyāḥ prāgapatarpaṇaiḥ॥६१॥

srotobhirvisRutA doShA guravo rasavAhībhiH॥५३॥

sarvadehAnugAH stabdhA jwaraM kurvanti santatam|
dashAhaM dvAdashAhaM vA saptAhaM vA suduHsahaH॥५४॥

sa shlghraM shlghrakArityAt prashamaM yAti hanti vA|
 kAladUShyaprakRutibhirdoShastulyo hi santatam||55||
 niShpratyanikaH kurute tasmAjj~jeyaH suduHsahaH|
 yathA dhAtUMstathA mUtraM purIshaM cAnilAdayaH||56||
 yugapaccAnupadyante niyamAt santate jvare|
 sa shuddhyA vA~apyashuddhyA vA rasAdInAmasheShataH||57||
 saptAhAdiShu kAleShu prashamaM yAti hanti vA|
 yadA tu nAtishudhyanti na vA shudhyanti sarvashaH||58||
 dvAdashaite samuddiShTAH santatasyAshrayAstadA|
 visargaM dvAdashe kRutvA divase~avyaktalakShaNam||59||
 durlabhopashamaH kAlaM dlrghamapyanuvartate|
 iti buddhvA jwaraM vaidya upakrAmettu santatam ||60||
 kriyAkramavidhau yuktaH prAyaH prAgapatarpaNaiH|61|

The aggravated *dosha* circulate through the channels carrying *rasa* (the first nutritional *dhatu* equivalent to plasma) and spread all over the body and gets stagnated, causes *santata jwara*. This *santata jwara* is extremely difficult to treat and manifests its symptoms very quickly. In this type the patient either gets cured (on the pacification of *dosha*) or killed (on the further aggravation of *dosha*) on the 10th, 12th or 7th day.

The *dosha* involved in the manifestation of *santata jwara* is in accordance with season (*kala*), vitiated factors (*dushya*), and the physical constitution of the patient (*prakriti*) due to which it is *nispratyanika* (having no opponent / which cannot be inhibited). Thus, it is known to be unbearable.

Additionally, the other *dhatu*, urine, stool and *vata* etc. *dosha*, also get affected simultaneously in this fever. If the involved factors like *rasa* are purified optimally the fever gets subsided in either 7 or 10 or 12 days, otherwise, the fever kills the patient within that period.

If, some of the 12 constituents of this fever get purified, while some others remain unpurified, then the fever goes in latent stage on the 12th day and reappears on the 13th day and may persist for longer duration. In this way, a physician should understand the causes and features of this type of fever and should initiate the treatment only after a proper understanding of these factors, mostly by the methods beginning with *apatarpana*. [53-61]

Satata jwara

रक्तधात्वाश्रयः प्रायो दोषः सततकं ज्वरम्||६१||
सप्रत्यनीकः कुरुते कालवृद्धिक्षयात्मकम्।
अहोरात्रे सततको द्वौ कालावनुवर्तते॥६२॥
raktadhātvāśrayah prāyō dōṣah satatakam jwaram||61||
sapratyanīkaḥ kurutē kālavṛddhikṣayātmakam|
ahōrātrē satatakō dvau kālāvanuvartatē||62||
raktadhAtvAshrayaH prAyo doShaH satatakaM jwaram||61||
sapratyanIkaH kurute kAlavRuddhikShayAtmakam|
ahorAtre satatako dvau kAlAvanuvartate||62||

The aggravated *dosha* when generally lodges in the *rakta dhatu*, then they manifest with fever twice in 24 hours (Nycthemeron) depending on the time of *dosha* aggravation or subsidence. The *dosha* in this type of *jwara* can be counteracted. [61-62]

Anyedyushka jwara

कालप्रकृतिदूष्याणां प्राप्यैवान्यतमाद्बलम्।
अन्येद्युष्कं ज्वरं दोषो रुद्ध्वा मेदोवहा: सिराः॥६३॥
सप्रत्यनीको जनयत्येककालमहर्निशि।
kālaprakṛtidūṣyāṇāṁ prāpyaivānyatamādbalam|
anyēdyuṣkam jwaram dōṣo ruddhvā mēdōvahāḥ sirāḥ||63||
sapratyanīkō janayatyēkakālamaharniśi|
kAlaprakRutidUShyANAM prApyaivAnyatamAdbalam|
anyedyuShkaM jwaraM doSho ruddhvA medovahAH sirAH||63||
sapratyanIko janayatyekAlamaharnishi|

Vitiated *dosha* produce *anyedushka* type of *jwara* with the support of any one factor amongst the *kala* (time), *prakriti* (physical constitution) and *dushya* (vitiated factors) leading to obstruction in *medo vaha sira* (the channel of circulation of *medasa* (fat)). It can be counteracted. This *jwara* occurs only once during day and night. [63-64]

Tritiyaka and chaturthaka jwara

दोषोऽस्थिमज्जगः कुर्यात्तीयकचतुर्थकौ॥६४॥

गतिर्द्वयेकान्तराऽन्येदयुर्दोषस्योक्ताऽन्यथा परैः।
 अन्येदयुष्कं ज्वरं कुर्यादपि संश्रित्य शोणितम्॥६७॥
 मांसस्रोतांस्यनुगतो जनयेतु तृतीयकम्।
 संश्रितो मेदसो मार्गं दोषश्चापि चतुर्थकम् ॥६६॥
 अन्येदयुष्कः प्रतिदिनं दिनं हित्वा तृतीयकः।
 दिनद्वयं यो विश्रम्य प्रत्येति स चतुर्थकः॥६७॥
 dōṣō'sthimajjagah kuryāttṛtīyakacaturthakau||64||
 gatirdvyēkāntarā'nyēdyurdōṣasyōktā'nyathā paraiḥ|
 anyēdyuṣkam jwaram kuryādapi saṁśritya śōṇitam||65||
 māṁsasrōtāṁsyanugatō janayēttu tṛtīyakam|
 saṁśritō mēdasō mārgam dōṣaścāpi caturthakam ||66||
 anyēdyuṣkah pratidinam dinam hitvā tṛtīyakah|
 dinadvayam yō viśramya pratyēti sa caturthakah||67||
 doSho~asthimajjagaH kuryAttRutlyakacaturthakau||64||
 gatirdvyekAntarA_{anyedyurdoShasyoktA} anyathA paraiH|
 anyeduShkaM jwaraM kuryAdapi saMshritya shoNitam||65||
 mAMsasrotAMsyanugato janayettu tRutlyakam|
 saMshrito medaso mArgaM doShashcApi caturthakam ||66||
 anyeduShkaH pratidinaM dinaM hitvA tRutlyakaH|
 dinadvayaM yo vishramya pratyeti sa caturthakaH||67||

When the *dosha* afflict the *asthi dhatu* (bone tissue) and *maja dhatu* (bone marrow), they cause the *tritiyaka* and *chaturthaka jwara* respectively.

Some scholars opine that the different types of *jwara* viz the *anyedushaka*, *tritiyaka* and *chaturthaka jwara* manifest because of the affliction of the some alternate *dhatu* by the *dosha*. *Anyedushyaka jwara* is caused by the affliction of *rakta dhatu* (blood) also. *Tritiyaka jwara* manifests when the *dosha* afflict the *mamsa dhatu* (muscular tissues). *Dosha* lodging in the channels of circulation of *medo dhatu* cause *chaturthaka jwara*.

Anyedushka jwara occurs every day, while *tritiyaka jwara* occurs after a gap of one day and *chaurthaka* occurs after two days gap. [64-67]

Cause of alterations in *jwara* episodes

अधिशेते यथा भूमि बीजं काले च रोहति।
अधिशेते तथा धातुं दोषः काले च कुप्यति॥६८॥
स वृद्धिं बलकालं च प्राप्य दोषस्तृतीयकम्।
चतुर्थकं च कुरुते प्रत्यनीकबलक्षयात्॥६९॥
कृत्वा वेगं गतबलाः स्वे स्वे स्थाने व्यवस्थिताः।
पुनर्विवृद्धा: स्वे काले ज्वरयन्ति नरं मलाः॥७०॥
कफपित्तात्त्रिकग्राही पृष्ठाद्वातकफात्मकः।
वातपित्ताच्छरोग्राही त्रिविधः स्यात्तृतीयकः॥७१॥
चतुर्थको दर्शयति प्रभावं द्विविधं ज्वरः।
जडघाभ्यां श्लैष्मिकः पूर्व शिरस्तोऽनिलसम्भवः॥७२॥
adhiśētē yathā bhūmir̥ bījāṁ kālē ca rōhati|
adhiśētē tathā dhātum̥ dōṣah̥ kālē ca kupyati||68||
sa vṛddhir̥ balakālāṁ ca prāpya dōṣastr̥tyakam|
caturthakāṁ ca kurutē pratyanīkabalakṣayāt||69||
kṛtvā vēgarāṁ gatabalāḥ svē svē sthānē vyavasthitāḥ|
punarvivṛddhāḥ svē kālē jwarayanti naram̥ malāḥ||70||
kaphapittāttrikagrāhī pr̥ṣṭhādvātakaphātmakah|
vātāpittāccchirōgrāhī trividhāḥ syātt̥tyakah||71||
caturthakō darśayati prabhāvāṁ dvividhāṁ jwarah|
jaṅghābhyaṁ ślaiśmikah̥ pūrvāṁ śirastō'nilasambhavah||72||
adhishete yathA bhUmiM bljaM kAle ca rohati|
adhishete tathA dhAtuM doShaH kAle ca kupyati||68||
sa vRuddhiM balakAlaM ca prApya doShastRutlyakam|
caturthakaM ca kurute pratyanlkabalakShayAt||69||
kRutvA vegaM gatabalAH sve sve sthAne vyavasthitAH|
punarvivRuddhAH sve kAle jwarayanti naraM malAH||70||

kaphapittAttrikagrAhI pRuShThAdvAtakaphAtmakaH|
 vAtapittAcchirogrAhI trividhaH syAttRutlyakaH||71||
 caturthako darshayati prabhAvaM dvividhaM jwaraH|
 ja~gghAbhyAM shlaiShmikaH pUrvaM shirasto~anilasambhavaH||72||

As a seed remains dormant in the soil and germinates at a favorable time, similarly the *doshas* remain in dormant condition in the *dhatus* and get aggravated at a favorable time. These *dosha* gain strength at an appropriate time and when the power of the inhibiting (disease preventing) factors has subsided, then the *tritiyaka* and *chaturthaka jwara* manifest.

The *dosha* lose their strength after manifesting their signs and symptoms of aggravation and get lodged in their respective places. They again get aggravated and afflict the person with *jwara*.

The *tritiyaka jwara* manifests in three types –

- When the *kapha* and *pitta dosha* are aggravated then it afflicts the *trika pradesha* (sacral region)
- When the *vata* and *kapha dosha* are aggravated then the back (*prishtha*) region are affected
- The head region is affected in the case of aggravation of *vata* and *pitta dosha*.

Similarly *chaturthaka jwara* is also of two types –

- Calf region is afflicted in the beginning by the vitiation of *kapha*
- Head region is afflicted in the beginning by the vitiation of *vata*. [70-72]

विषमज्वर एवान्यश्चतुर्थकविपर्ययः।
 त्रिविधो धातुरेकैको द्विधातुस्थः करोति यम्॥७३॥
 viṣamajwara ēvānyaścaturthakaviparyayah|
 trividhō dhātūrekaikō dvividhātusthah karōti yam||73||
 viShamajwara evAnyashcaturthakaviparyayaH|
 trividho dhAturekaiko dvividhAtusthaH karoti yam||73||

Chaturthaka viparyaya jwara is another variety of *vishama jwara*. Each of the three *dosha* i.e. *vata*, *pitta* and *kapha* cause this disease by afflicting the two *dhatus* viz *asthi* (bone) and *maja* (bone marrow). [73]

प्रायशः सन्निपातेन दृष्टः पञ्चविधो ज्वरः।
 सन्निपाते तु यो भूयान् स दोषः परिकीर्तिः॥७४॥

prāyaśah sannipātēna dṛṣṭah pañcavidhō jwarah|
 sannipātē tu yō bhūyān sa dōṣah parikīrtitah||74||
 prAyashaH sannipAteNa dRuShTaH pa~jcavidho jwaraH|
 sannipAte tu yo bhUyAn sa doShaH parikIrtitaH||74||

These five types of *jwara* are mostly caused by *sannipata* (simultaneous vitiation of the three *dosha*), however, the *dosha*, which is predominant among the three *doshas* is generally attributed as the causative factors. [74]

Dhatugata jwara

ऋत्वहोरात्रदोषाणां मनसश्च बलाबलात्।
 कालमर्थवशाच्चैव ज्वरस्तं तं प्रपद्यते॥७५॥
 गुरुत्वं दैन्यमुद्वेगः सदनं छर्द्यरोचकौ।
 रसस्थिते बहिस्तापः साङ्गमर्दो विजृम्भणम्॥७६॥
 रक्तोष्णाः पिडकास्तृष्णा सरक्तं ष्ठीवनं मुहुः।
 दाहरागभ्रममदप्रलापा रक्तसंस्थिते॥७७॥
 अन्तर्दोहः सतृण्मोहः सग्लानिः सृष्टविट्कता।
 दौर्गन्धं गात्रविक्षेपो ज्वरे मांसस्थिते भवेत्॥७८॥
 स्वेदस्तीव्रा पिपासा च प्रलापो वम्यभीक्षणशः।
 स्वगन्धस्यासहत्वं च मेदःस्थे ग्लान्यरोचकौ॥७९॥
 विरेकवमने चोभे सास्थिभेदं प्रकूजनम्।
 विक्षेपणं च गात्राणां श्वासश्चास्थिगते ज्वरे॥८०॥
 हिक्का श्वासस्तथा कासस्तमसश्चातिदर्शनम्।
 मर्मच्छेदो बहिः शैत्यं दाहोऽन्तश्चैव मज्जगे॥८१॥
 शुक्रस्थानगतः शुक्रमोक्षं कृत्वा विनाश्य च।
 प्राणं वायवग्निसोमैश्च सार्धं गच्छत्यसौ विभुः॥८२॥
 रसरक्ताश्रितः साध्यो मेदोमांसगतश्च यः।
 अस्थिमज्जगतः कृच्छ्रः शुक्रस्थो नैव सिद्ध्यति॥८३॥
 ḍtvahōrātradōṣāṇāṁ manasaśca balābalāt।
 kālamarthavaśāccaiva jwarastam tam prapadyatē॥८४॥

gurutvarṁ dainyamudvēgah sadanāṁ chardyarōcakau|
rasasthitē bahistāpah sāṅgamardō vijrmbhaṇam||76||
raktōṣṇāḥ piḍakāṣṭṛṣṇā saraktam̄ ṣṭhīvanam̄ muhuḥ|
dāharāgbrahramadapralāpā raktasam̄sthitē||77||
antardāhah satṛṇmōhaḥ saglāniḥ sṛṣṭaviṭkatā|
daurgandhyam̄ gātravikṣēpō jvarē māṁsasthitē bhavēt||78||
svēdastīvrā pipāsā ca pralāpō vamyabhīkṣṇaśah|
svagandhasyāsaḥatvarṁ ca mēdahsthe glānyarōcakau||79||
virēkavamanē cōbhē sāsthībhēdām̄ prakūjanam|
vikṣēpaṇam̄ ca gātrāṇāṁ śvāsaścāsthigatē jvarē||80||
hikkā śvāsastathā kāsastamasaścātidarśanam|
marmacchēdō bahiḥ śaityam̄ dāhō’ntaścaiva majjagē||81||
śukrasthānagataḥ śukramōkṣam̄ kṛtvā vināśya ca|
prāṇam̄ vāyvagnisōmaiśca sārdham̄ gacchatyasaу vibhuḥ||82||
rasaraktāśritah sādhyō mēdōmāṁsagataśca yaḥ|
asthimajjagataḥ kṛccraḥ śukrasthō naiva siddhyati||83||
RutvahorAtradoShANAM manashca balAbalAt|
kAlamarthavashAccaiva jwarastaM taM prapadyate||75||
gurutvaM dainyamudvegaH sadanaM chardyarocakau|
rasasthite bahistApaH sA~ggamardo vijRumbhaNam||76||
raktoShNAH piDakAstRuShNA saraktaM ShThlvanaM muhuH|
dAharAgabrahramadapralApA raktasam̄sthite||77||
antardAhaH satRuNmohah saglAniH sRuShTaviTkatA|
daurgandhyaM gAtravikShepo jvare mAMsasthite bhavet||78||
svedastIvrA pipAsA ca pralApo vamyabhIkShNashaH|
svagandhasyAsaḥatvaM ca medaHsthe glAnyarocakau||79||
virekavamane cobhe sAsthībhedaM prakUjanam|
vikShepaNaM ca gAtrANAM shvAsashcAsthigate jvare||80||

hikkA shvAsastathA kAsastamasashcAtidarshanam|
 marmacchedo bahiH shaityaM dAho~antashcaiva majjage||81||
 shukrasthAnagataH shukramokShaM kRutvA vinAshya ca|
 prANaM vAyvagnisomaishca sArdhaM gacchatyasau vibhuH||82||
 rasaraktAshritaH sAdhyo medomAMsagatashca yaH|
 asthimajjagataH kRucchraH shukrasto naiva siddhyati||83||

Manifestation of *jwara* at a particular time or a change in the time of manifestation takes place due to following factors:

Jwara occurs according to the strength or weakness of factors like *dosha*, seasons, day, night, mental status and *artha* (deeds of previous life).

Manifestation of *jwara* in the different *dhatu* (body tissues):

1. When the vitiated *dosha* are located in the *rasa dhatu*, the clinical features manifesting are – heaviness, miserable feeling, anxiety, exhaustion, vomiting, anorexia, increase in external temperature, body ache and yawning.
2. The vitiated *doshas* causing *jwara* are located in the *rakta dhatu*, the clinical features are – Increase in body temperature, eruptions, thirst, frequent spitting mixed with blood burning sensation, discoloration, giddiness, intoxication and incoherent speech.
3. Burning sensation inside the body, thirst, unconsciousness, weakness, diarrhea, foul smell from the body and throwing movement of the limbs are the features manifesting when the *doshas* causing *jwara* are lodged in the *mamsa dhatu*.
4. Vitiated *dosha* located in the *meda dhatu* present with the following clinical features – excessive sweating, thirst, incoherent speech, frequent emesis, inability to tolerate the smell of one's own body, wet feeling in the body and anorexia.
5. Vitiated *dosha* located in the *asthi dhatu* cause the following clinical features – diarrhea, emesis, pain in the bones, production of *kujana* (a sort of cooing sound) convulsive movements of the body and limbs.
6. When the vitiated *dosha* are located in the *maja dhatu* then the following signs and symptoms appear – hiccup, bronchitis, cough, feeling of entering into darkness frequently, cutting pain in the vital organs (*marmas*), feeling of cold externally and internal burning sensation.
7. Vitiated *dosha* causing *jwara* located in the *sukra dhatu* cause ejaculation and destruction of *shukra* resulting in the extinction of life along with *vayu*, *agni* and *soma* of the subtle body (*sukshma sharira*).

The *jwara* in which *doshas* are located in the *rasa*, *rakta*, *mamsa* and *meda dhatu* are curable, while those in which the location is in the *asthi* and *maja dhatu* are difficult to

treat. The *jwara* in which the vitiated *dosha* are located in *shukra dhatu* is incurable. [75-83]

Clinical features of *jwara* due to combination of two *dosha*

हेतुभिर्लक्षणैश्चोक्तः पूर्वमष्टविधो ज्वरः।
समासेनोपदिष्टस्य व्यासतः शृणु लक्षणम्॥८४॥
शिरोरुक् पर्वणां भेदो दाहो रोम्णां प्रहर्षणम्।
कण्ठास्यशोषो वमथुस्तृष्णा मूर्छा अमोऽरुचिः॥८५॥
स्वप्ननाशोऽतिवारजृम्भा वातपित्तज्वराकृतिः।
शीतको गौरवं तन्द्रा स्तैमित्यं पर्वणां च रुक्॥८६॥
शिरोग्रहः प्रतिश्यायः कासः स्वेदाप्रवर्तनम्।
सन्तापो मध्यवेगश्च वातश्लेष्मज्वराकृतिः॥८७॥
मुहुर्दाहो मुहुः शीतं स्वेदस्तम्भो मुहुर्मुहुः।
मोहः कासोऽरुचिस्तृष्णा श्लेष्मपित्तप्रवर्तनम्॥८८॥
लिप्ततिक्तास्यता तन्द्रा श्लेष्मपित्तज्वराकृतिः।
इत्येते द्वन्द्वजाः प्रोक्ताः ...॥८९॥
hētubhirlakṣaṇaiścōktah pūrvamaṣṭavidhō jwarah|
samāsēnōpadīṣṭasya vyāsatah śr̄nu lakṣaṇam||84||
śirōruk [1] parvaṇāṁ bhēdō dāhō rōmñāṁ praharṣaṇam|
kaṇṭhāsyasōśō vamathustṛṣṇā mūrcchā bhramō'ruciḥ||85||
svapnanāśō'tivāgjīmbhā vātapiṭṭajvarākṛtiḥ|
śītakō gauravaṁ tandrā staimityaṁ parvaṇāṁ ca ruk||86||
śirōgrahaḥ pratiśyāyah kāsaḥ svēdāpravartanam|
santāpō madhyavēgaśca vātaślēṣmajvarākṛtiḥ||87||
muhurdāhō muhuḥ śītam̄ svēdastambhō [2] muhurmuhuḥ|
mōhah kāsō'ruciṣṭṛṣṇā ślēṣmapiṭṭapratvartanam||88||
liptatiktāsyatā tandrā ślēṣmapiṭṭajvarākṛtiḥ|
ityētē dvandvajāḥ prōktāḥ ...||89||
hetubhirlakṣaṇaishcoktaḥ pUrvamaṣṭavidho jwarah|

samAsenopadiShTasya vyAsataH shRuNu lakShaNam||84||
shiroruk parvaNAM bhedo dAho romNAM praharShaNam|
kaNThAsyashoSho vamathustRuShNA mUrcchA bhramo~aruciH||85||
svapnanAsho~ativAgjRumbhA vAtapittajwarakRutiH|
shItako gauravaM tandrA staimityaM parvaNAM ca ruk||86||
shirograhaH pratishyAyaH kAsaH svedApravartanam|
santApo madhyavegashca vAtashleShmajwarakRutiH||87||
muhurdAho muhuH shItaM svedastambho muhurmuhuH|
mohaH kAso~arucistRuShNA shleShmapittapravartanam||88||
liptatiktAsyatA tandrA shleShmapittajwarakRutiH|
ityete dvandvajAH proktAH ...|89|

Signs and symptoms of *jwara* by combination of *vata* and *pitta*:

In Nidana Sthana the eight varieties of *jwara* along with their causative factors, signs and symptoms have been described in brief. Now their signs and symptoms will be described in detail:

Headache, breaking pain in joints, burning sensation, horripilation, dryness of throat and mouth, nausea, thirst, fainting, giddiness, anorexia, sleeplessness, talkativeness and yawning – all these are the signs and symptoms of *jwara* by combination of *vata* and *pitta*.

Signs and symptoms of *jwara* by combination of *vata* and *kapha*:

Feeling cold, heaviness, drowsiness, timidity, pain in joints, feeling of stiffness of head (*sirograha*), coryza, cough, impaired sweating and moderate rise in temperature are the signs and symptoms of *jwara* caused by *vata* and *kapha*.

Signs and symptoms of *jwara* by combination of *kapha* and *pitta*:

Frequently changing sensation of hot and cold, frequent increased or decreased sweating, delusions, cough, anorexia, thirst, elimination of phlegm and bile, coating and bitterness in the mouth and drowsiness – all are the clinical features of *jwara* caused by *kapha* and *pitta*.

Thus, here the features of different types of *jwara* caused by the simultaneous vitiation of two *dosha* have been described. [84-89]

Sannipataja jwara

... सन्निपातज उच्यते॥८९॥

सन्निपातजवरस्योर्ध्वं त्रयोदशविधस्य हि।
प्राक्सूत्रितस्य वक्ष्यामि लक्षणं वै पृथक् पृथक्॥१०॥

भ्रमः पिपासा दाहश्च गौरवं शिरसोऽतिरुक्।
वातपितोल्बणे विद्यालिङ्गं मन्दकफे ज्वरे॥११॥

शैत्यं कासोऽरुचिस्तन्द्रापिपासादाहरुग्व्यथाः।
वातश्लेष्मोल्बणे व्याधौ लिङ्गं पितावरे विदुः॥१२॥

छर्दिः शैत्यं मुहुर्दाहस्तृष्णा मोहोऽस्थिवेदना।
मन्दवाते व्यवस्यन्ति लिङ्गं पितकफोल्बणे॥१३॥

सन्ध्यस्थिशिरसः शूलं प्रलापो गौरवं भ्रमः।
वातोल्बणे स्याद् दव्यनुगे तृष्णा कण्ठास्यशुष्कता॥१४॥

रक्तविण्मूत्रता दाहः स्वेदस्तृड् बलसङ्क्षयः।
मूर्छा चेति त्रिदोषे स्यालिङ्गं पिते गरीयसि॥१५॥

आलस्यारुचिह्लासदाहवम्यरतिभ्रमैः।
कफोल्बणं सन्निपातं तन्द्राकासेन चादिशेत्॥१६॥

प्रतिश्या छर्दिरालस्यं तन्द्राऽरुचयग्निमार्दवम्।
हीनवाते पितमध्ये लिङ्गं श्लेष्माधिके मतम्॥१७॥

हारिद्रमूत्रनेत्रत्वं दाहस्तृष्णा भ्रमोऽरुचिः।
हीनवाते मध्यकफे लिङ्गं पिताधिके मतम्॥१८॥

शिरोरुग्वेपथुः श्वासः प्रलापश्छर्दयरोचकौ।
हीनपिते मध्यकफे लिङ्गं स्यान्मारुताधिके॥१९॥

शीतको गौरवं तन्द्रा प्रलापोऽस्थिशिरोऽतिरुक्।
हीनपिते वातमध्ये लिङ्गं श्लेष्माधिके विदुः॥२०॥

श्वासः कासः प्रतिश्यायो मुखशोषोऽतिपाश्वरुक्।
कफहीने पितमध्ये लिङ्गं वाताधिके मतम्॥२१॥

वर्चोभेदोऽग्निदौर्बल्यं [३] तृष्णा दाहोऽरुचिर्भ्रमः।
कफहीने वातमध्ये लिङ्गं पिताधिके विदुः॥२२॥

सन्निपातजवरस्योर्ध्वमतो वक्ष्यामि लक्षणम्।
क्षणे दाहः क्षणे शीतमस्थिसन्धिशिरोरुजा॥२३॥

सासावे कलुषे रक्ते निर्भुग्ने चापि दर्शने [४] |
सस्वनौ सरुजौ कर्णा कण्ठः शूकैरिवावृतः||१०४||
तन्द्रा मोहः प्रलापश्च कासः १वासोऽरुचिर्भ्रमः।
परिदग्धा खरस्पर्शा जिह्वा स्स्ताङ्गता परम्॥१०५॥
ष्ठीवनं रक्तपित्तस्य कफेनोन्मिश्रितस्य च।
शिरसो लोठनं तृष्णा निद्रानाशो हृदि व्यथा॥१०६॥
स्वेदमूत्रपुरीषाणां चिराददर्शनमल्पशः।
कृशत्वं नातिगात्राणां प्रततं कण्ठकूजनम्॥१०७॥
कोठानां श्यावरक्तानां मण्डलानां च दर्शनम्।
मूकत्वं सोतसां पाको गुरुत्वमुदरस्य च॥१०८॥
चिरात् पाकश्च दोषाणां सन्निपातज्वराकृतिः॥१०९॥
... sannipātaja ucyatē||89||

sannipātajwarasyōrdhvam trayōdaśavidhasya hi|
prāksūtritasya vakṣyāmi lakṣaṇam vai pṛthak pṛthak||90||
bhramah pipāsā dāhaśca gauravam śirasō'tiruk|
vātapittōlbañē vidyālliṅgam mandakaphē jvarē||91||
śaityam kāsō'ruciṣtandrāpi pāsādāharugvyathāḥ|
vātaślēśmōlbañē vyādhau liṅgam pittāvarē viduh||92||
chardiḥ śaityam muhurdāhastrṣṇā mōhō'sthivēdanā|
mandavātē vyavasyanti liṅgam pittakaphōlbañē||93||
sandhyasthiśirasāḥ śūlam pralāpō gauravam bhramah|
vātōlbañē syād dvyanugē tṛṣṇā kaṇṭhāsyasūṣkataḥ||94||
raktaviṇmūtratā dāhah svēdaṣṭraḥ balasaṅkṣayah|
mūrcchā cēti tridōṣē syālliṅgam pittē garīyasi||95||
ālasyāruciḥ llāsādāhavamyaratibhramaiḥ|
kaphōlbañam sannipātam tandrākāsēna cādiśet||96||
pratiśyā chardirālasyam tandrā'rucyagnimārdavam|
hīnavātē pittamadhyē liṅgam ślēśmādhikē matam||97||

hāridramūtranētratvarṁ dāhastrṣṇā bhramō'ruciḥ|
hīnavātē madhyakaphē liṅgam pittādhikē matam||98||
śirōrugvēpathuh śvāsaḥ pralāpaśchardyarōcakau|
hīnapittē madhyakaphē liṅgam syānmārutādhikē||99||
śitakō gauravaṁ tandrā pralāpō'sthiśirō'tiruk|
hīnapittē vātamadhyē liṅgam ślēśmādhikē viduh||100||
śvāsaḥ kāsaḥ pratiśyāyō mukhaśōṣō'tipārśvaruk|
kaphahīnē pittamadhyē liṅgam vātādhikē matam||101||
varcōbhēdō'gnidaurbalyam ṭṛṣṇā dāhō'rucirbhramah|
kaphahīnē vātamadhyē liṅgam pittādhikē viduh||102||
sannipātajwarasyōrdhvamatō vakṣyāmi lakṣaṇam|
kṣaṇē dāhah kṣaṇē śītamasthisandhiśirōrujā||103||
sāsrāvē kaluṣē raktē nirbhugnē cāpi darśanē |
sasvanau sarujau karṇau kaṇṭhaḥ śūkairivāvṛtaḥ||104||
tandrā mōhaḥ pralāpaśca kāsaḥ śvāsō'rucirbhramah|
paridagdhā kharasparśā jihvā srastāṅgatā param||105||
śṭhīvanam raktapittasya kaphēnōnmiśritasya ca|
śirasō lōṭhanam ṭṛṣṇā nidrānāśō hṛdi vyathā||106||
svēdamūtrapurīṣāṇam cirāddarśanamalpaśah|
kr̄śatvarṁ nātigātrāṇāṁ pratataṁ kaṇṭhakūjanam||107||
kōṭhānāṁ śyāvaraktānāṁ maṇḍalānāṁ ca darśanam|
mūkatvarṁ srōtasāṁ pākō gurutvamudarasya ca||108||
cirāt pākaśca dōṣāṇāṁ sannipātajvarākṛtiḥ||109||
... sannipAtaja ucyate||89||
sannipAtajwarasyordhvaM trayodashavidhasya hi|
prAksUtritasya vakShyAmi lakShaNaM vai pRuthak pRuthak||90||
bhramaH pipAsA dAhashca gauravaM shiraso~atiruk|
vAtapittolbaNe vidyAlli~ggaM mandakaphe jvare||91||

shaityaM kAso~arucistandrApipAsAdAharugvyathAH|
vAtashleShmolbaNe vyAdhau li~ggaM pittAvare viduH||92||
chardiH shaityaM muhurdAhastRuShNA moho~asthivedanA|
mandavAte vyavasyanti li~ggaM pittakapholbaNe||93||
sandhyasthishirasaH shUlaM pralApo gauravaM bhramaH|
vAtolbaNe syAd dvyanuge tRuShNA kaNThAsyashuShkatA||94||
raktaviNmUtratA dAhaH svedastRuD balasa~gkShayaH|
mUrcchA ceti tridoShe syAlli~ggaM pitte garlyasi||95||
AlasyAruchRullAsadAhavamyaratibhramaiH|
kapholbaNaM sannipAtaM tandrAkAsena cAdishet||96||
pratishyA chardirAlasyaM tandrA~arucyagnimArdavam|
hInavAte pittamadhye li~ggaM shleShmAdhike matam||97||
hAridramUtranetratvaM dAhastRuShNA bhramo~aruciH|
hInavAte madhyakaphe li~ggaM pittAdhike matam||98||
shirorugvepathuH shvAsaH pralApashchardyarocakau|
hInapitte madhyakaphe li~ggaM syAnmArutAdhike||99||
shItako gauravaM tandrA pralApo_{asthishiro}atiruk|
hInapitte vAtamadhye li~ggaM shleShmAdhike viduH||100||
shvAsaH kAsaH pratishyAyo mukhashoSho~atipArshvaruk|
kaphahIne pittamadhye li~ggaM vAtAdhike matam||101||
varcobhedo~agnidaurbalyaM tRuShNA dAho~arucirbhramaH|
kaphahIne vAtamadhye li~ggaM pittAdhike viduH||102||
sannipAtajwarasyordhvamato vakShyAmi lakShaNam|
kShaNe dAhaH kShaNe shItamasthisandhishirorujA||103||
sAsrAve kaluShe rakte nirbhugne cApi darshane |
sasvanau sarujau karNau kaNThaH shUkairivAvRutaH||104||
tandrA mohaH pralApashca kAsaH shvAso~arucirbhramaH|
paridagdhA kharasparshA jihvA srastA~ggatA param||105||

ShThlvanaM raktapittasya kaphenonmishritasya ca|
 shiraso loThanaM tRuShNA nidrAnAsho hRudi vyathA||106||
 svedamUtrapurlShANAM cirAddarshanamalpashaH|
 kRushatvaM nAtigAtrANAM pratataM kaNThakUjanam||107||
 koThAnAM shyAvaraktAnAM maNDalAnAM ca darshanam|
 mUkatvaM srotasAM pAko gurutvamudarasya ca||108||
 cirAt pAkashca doShANAM sannipAtajwarakRutiH|109|

Description of *sannipataja jwara* (caused by combined *tridosha*):

The *sannipataja* variety of *jwara*, has thirteen sub types have been described in Nidana Sthana. Now the clinical features of each type will be described separately:

- *Sannipataja jwara* in which *vata* and *pitta* are codominant while *kapha* is recessive has the following clinical features – giddiness, thirst, burning sensation, heaviness and excessive headache. [91]
- *Sannipataja jwara* in which *vata* and *kapha* are codominant while *pitta* is recessive has the following clinical features – Coldness, cough, anorexia, drowsiness, thirst, burning sensation and pain. [92]
- *Sannipataja jwara* in which *pitta* and *kapha* are codominant while *vata* is recessive has the following clinical features – Emesis, coldness, frequent burning sensation, thirst, unconsciousness and pain in the bones. [93]
- *Sannipataja jwara* in which vitiated *vata* predominates over the other two *doshas* presents with the following signs and symptoms **pain in the joints, bones and head; delirium, heaviness, giddiness, thirst and dryness of the throat as well as the mouth [94]
- *Sannipataja jwara* in which vitiated *pitta* predominates over the other two *doshas* presents with the following signs and symptoms – blood in stool and urine, burning sensation, vomiting, *arati* (disliking for doing any work), giddiness, drowsiness and cough. [95]
- *Sannipataja jwara* in which vitiated *kapha* predominates over the other two *doshas* presents with the following signs and symptoms – laziness, anorexia, nausea, burning sensation, vomiting, *arati* (restlessness), giddiness, drowsiness and cough. [96]
- *Sannipataja jwara* in which vitiated *kapha* is excessively vitiated, *pitta* moderately vitiated and *vata* is less vitiated presents with the following clinical features – coryza, vomiting, laziness, drowsiness, anorexia and weak digestion. [97]
- *Sannipataja jwara* in which vitiated *pitta* is excessively vitiated, *kapha* moderately vitiated and *vata* is less vitiated presents with the following clinical features – yellowish discoloration of urine and eyes, burning sensation, thirst, giddiness and anorexia. [98]

- *Sannipataja jwara* in which vitiated *vata* is excessively vitiated, *kapha* moderately vitiated and *pitta* is less vitiated presents with the following clinical features – headache, trembling, breathlessness, delirium, vomiting and anorexia. [99]
- *Sannipataja jwara* in which vitiated *kapha* is excessively vitiated, *vata* moderately vitiated and *pitta* is less vitiated presents with the following clinical features – coldness, heaviness, drowsiness, delirium and excessive pain in bones as well as head. [100]
- *Sannipataja jwara* in which vitiated *vata* is excessively vitiated, *pitta* moderately vitiated and *kapha* is less vitiated presents with the following clinical features – dyspnoea, cough, coryza, dryness of the mouth and excessive pain in the flanks. [101]
- *Sannipataja jwara* in which vitiated *pitta* is excessively vitiated, *vata* moderately vitiated and *kapha* is less vitiated presents with the following clinical features – diarrhea, weak digestion, thirst, burning sensation, anorexia and giddiness. [102]
- In *sannipataja jwara* with all the three *doshas* vitiated to the same extent, following signs and symptoms are observed:
 - Patient has feeling of burning sensation sometimes and sometimes feeling of cold
 - Pain in the bones, joints and head
 - Eyes are with excessive lacrimation, dull, reddish with eyeballs protruded out.
 - Ringing sound and pain in the ears
 - Pricking pain in throat like thorn of grain
 - Drowsiness, delusion, delirium, cough, breathlessness, anorexia and giddiness
 - Burning sensation of tongue, and turns rough to touch
 - Excessive fatigue
 - Spitting of blood and bile mixed with phlegm (sputum)
 - Swaying movements of head, thirst, sleeplessness and pain in the cardiac region
 - Sweat, urine and stool reduced in amount with delayed evacuation.
 - Body is not excessively emaciated (due to accumulated *dosha*)
 - Constant *kujana* (cooing sound)
 - Urticaria and bluish – black or reddish circular patches appear on the skin
 - Patient speaks less or unable to speak
 - Inflammation of *srotasa*
 - Heaviness in the abdomen
 - The *doshas* undergo *paka* after a very long time (conversion into the healthy state of the *doshas* do not occur early). [103-109]

Prognosis of sannipata jwara

दोषे विबद्धे नष्टेऽग्नौ सर्वसम्पूर्णलक्षणः||१०९||
सन्निपातज्वरोऽसाध्यः कृच्छ्रसाध्यस्त्वतोऽन्यथा।
निदाने त्रिविधा प्रोक्ता या पृथग्ज्वराकृतिः||११०||
संसर्गसन्निपातानां तया चोक्तं स्वलक्षणम्॥१११॥
dōshē vibaddhē naṣṭē'gnau sarvasampūrṇalakṣaṇah||109||
sannipātajvaro'sādhyah kṛcchrasādhyastvatō'nyathā|
nidānē trividhā prōktā yā pṛthagjajvarākṛtih||110||
saṁsargasannipātānāṁ tayā cōktam svalakṣaṇam|111|
doShe vibaddhe naShTe~agnau sarvasampUrNalakShaNaH||109||
sannipAtajvaro~asAdhyaH kRucchrasAdhyastvato~anyathA|
nidAne trividhA proktA yA pRuthagjajvarAkRutiH||110||
saMsargasannipAtAnAM tayA coktaM svalakShaNam|111|

If there is obstruction (or non – elimination) of the *dosha*, the *agnis* are completely destroyed and if all the signs and symptoms are fully manifested, then *sannipata jwara* is incurable; otherwise it is treatable with difficulty.

The clinical features of *jwaras* caused by the individual *doshas vata, pitta* and *kapha* have been described separately in the Nidana Sthana. From these sign and symptoms, the features of *dwandaja* types and the *sannipataja* types can be known and decided. [109-110]

Classification of agantuja jwara

आगन्तुरष्टमो यस्तु स निर्दिष्टश्चतुर्विधः||१११||
अभिघाताभिषङ्गाभ्यामभिचाराभिशापतः।
āganturaṣṭamō yastu sa nirdiṣṭāscaturvidhah||111||
abhighātābhiṣaṅgābhyaṁmabhicārābhiśāpataḥ|
AganturaShTamo yastu sa nirdiShTashcaturvidhaH||111||
abhighAtAbhiSha~ggAbhyAmabhicArAbhishApataH|

The eighth type of *jwara* i.e. *agantuja* type (that caused due to external/exogenous factors) is of four types, viz: *abhihataja*, *abhishangaja*, *abhicharaja* and *abhisapaja*.[111]

Abhighataja jwara (due to injury or trauma)

शस्त्रलोष्टकशाकाष्ठमुष्ट्यरत्नितलद्विजैः॥११२॥
तद्विधैश्च हते गात्रे ज्वरः स्यादभिघातजः।
तत्राभिघातजे वायुः प्रायो रक्तं प्रदूषयन्॥११३॥
सव्यथाशोफरैवर्ण्य करोति सरुजं ज्वरम्॥११४॥
śastralōṣṭakāśākāṣṭhamuṣṭyaratnitaladvijaiḥ॥112॥
tadvidhaiśca hatē gātrē jvaraḥ syādabhighātajah|
tatrābhighātajē vāyuḥ prāyō raktam̄ pradūṣayan॥113॥
savyathāśōphavaivaran्यam̄ karōti sarujam̄ jvaram|114|
shastralōShTakashAkAShThamuShTyaratnitaladvijaiH॥112॥
tadvidhaishca hate gAtre jvaraH syAdabhighAtajaH|
tatrAbhighAtaje vAyuH prAyo raktaM pradUShayan॥113॥
savyathAshophavaivarNyaM karoti sarujaM jvaram|114|

The *jwara* caused by the injury from weapons, stones, hunters, wood, fist, palm of the sole, teeth and such other things is called *abhighataja*. In this type, vitiated *vata* affects predominantly *rakta* (blood) to resulting in *jwara* with discomfort, swelling, discoloration and pain.[112-114]

Abhishangaja, abhishapaja and abhicharaja jwara

कामशोकभयक्रोधैरभिषक्तस्य यो ज्वरः॥११४॥
सोऽभिषङ्गाज्वरो ज्ञेयो यश्च भूताभिषङ्गजः।
कामशोकभयाद्वायुः, क्रोधात् पित्तं, त्रयो मलाः॥११५॥
भूताभिषङ्गात् कुप्यन्ति भूतसामान्यलक्षणाः।
भूताधिकारे व्याख्यातं तदष्टविधलक्षणम्॥११६॥
विषवृक्षानिलस्पर्शात्थाऽन्यैर्विषसम्भवैः।
अभिषक्तस्य चाप्याहुर्ज्वरमेकेऽभिषङ्गजम्॥११७॥
चिकित्सया विषद्यैव स शमं लभते नरः।
अभिचाराभिशापाभ्यां सिद्धानां यः प्रवर्तते॥११८॥
सन्निपातज्वरो घोरः स विज्ञेयः सुदुःसहः।
सन्निपातज्वरस्योक्तं लिङ्गं यत्स्य तत् स्मृतम्॥११९॥

चितोन्द्रियशरीराणामर्तयोऽन्याश्च नैकशः।
 प्रयोगं त्वभिचारस्य दृष्ट्वा शापस्य चैव हि॥१२०॥
 स्वयं श्रुत्वाऽनुमानेन लक्ष्यते प्रशमेन वा।
 वैविद्यादभिचारस्य शापस्य च तदात्मके॥१२१॥
 यथाकर्मप्रयोगेण लक्षणं स्यात् पृथग्विद्म्।
 ध्याननिःश्वासबहुलं लिङ्गं कामज्वरे स्मृतम्॥१२२॥
 शोकजे बाष्पबहुलं त्रासप्रायं भयज्वरे।
 क्रोधजे बहुसंरम्भं भूतावेशं त्वमानुषम्॥१२३॥
 मूर्च्छामोहमदग्लानिभूयिष्ठं विषसम्भवे।
 केषाञ्चिदेषां लिङ्गानां सन्तापो जायते पुरः॥१२४॥
 पश्चात्तुल्यं तु केषाञ्चिदेषु कामज्वरादिषु।
 कामादिजानामुद्दिष्टं ज्वराणां यद्विशेषणम्॥१२५॥
 कामादिजानां रोगाणामन्येषामपि तत् स्मृतम्।
 मनस्यभिहते पूर्वं कामाद्यैर्न तथा बलम्॥१२६॥
 ज्वरः प्राप्नोति वाताद्यैर्देहो यावन्न दूष्यति।
 देहे चाभिह(द्रु)ते पूर्वं वाताद्यैर्न तथा बलम्॥१२७॥
 ज्वरः प्राप्नोति कामाद्यैर्मनो यावन्न दूष्यति।
 ते पूर्वं केवलाः पश्चान्निजैव्यामिश्रलक्षणाः॥१२८॥
 हेत्वौषधविशिष्टाश्च भवन्त्यागन्तवो ज्वराः॥१२९॥
 kāmaśōkabhayakrōdhairabhiṣaktasya yō jvarah॥114॥
 sō'bhiṣaṅgājvarō jñēyō yaśca bhūtābhiṣaṅgajah॥
 kāmaśōkabhayādvāyuḥ, krōdhāt pittarṁ, trayō malāḥ॥115॥
 bhūtābhiṣaṅgāt kupyanti bhūtasāmānyalakṣaṇāḥ॥
 bhūtādhikārē vyākhyātarṁ tadaṣṭavidhalakṣaṇam॥116॥
 viṣavṛkṣānilasparśāttathā'nyairviṣasambhavaiḥ॥
 abhiṣaktasya cāpyāhurjvaramēkē'bhiṣaṅgajam॥117॥
 cikitsayā viṣaghnyaiva sa śamarṁ labhatē narah॥
 abhicārābhiśāpābhyaṁ siddhānāṁ yaḥ pravartatē॥118॥

sannipātajyarō ghōrah sa vijñēyah suduḥsahah|
sannipātajvarasyōktam liṅgam yattasya tat smṛtam||119||

cittōndriyaśarīrāṇāmartayō’nyāśca naikaśah|
prayōgarṁ tvabhicārasya dṛṣṭvā śāpasya caiva hi||120||

svayaṁ śrutvā’numānēna lakṣyatē praśamēna vā|
vaividhyādabhicārasya śāpasya ca tadātmakē||121||

yathākarmaprayōgēṇa lakṣaṇam syāt pṛthagvidham|
dhyānaniḥsvāsabahularṁ liṅgam kāmajvarē smṛtam||122||

śokajē bāśpabahularṁ trāsaprāyam bhajvarē|
krōdhajē bahusāṁrambharṁ bhūtāvēśē tvamānuṣam||123||

mūrcchāmōhamadaglānibhūyışṭham viṣasambhavē|
kēśāñcidēśāṁ liṅgānāṁ santāpō jāyatē purah||124||

paścāttulyam tu kēśāñcidēṣu kāmajvarādiṣu|
kāmādijānāmuḍiṣṭam jvarānāṁ yadvīśeṣaṇam||125||

kāmādijānāṁ rōgānāmanyēṣāmapi tat smṛtam|
manasyabhihatē pūrvam kāmādyairna tathā balam||126||

jvaraḥ prāpnōti vātādyairdēhō yāvanna dūṣyati|
dēhē cābhīha(dru)tē pūrvam vātādyairna tathā balam||127||

jvaraḥ prāpnōti kāmādyairmanō yāvanna dūṣyati||128||

kAmashokabhayakrodhairabhiShaktasya yo jvaraH||114||

so_{abhiSha}ggAjvaro j~jeyo yashca bhUtaBhiSha~ggajaH|

kAmashokabhayAdvAyuH, krodhAt pittaM, trayo malAH||115||

bhUtaBhiSha~ggAt kupyanti bhUtasAmAnyalakShaNAH|

bhUtaAdhikAre vyAkhyAtaM tadaShTavidhalakShaNam||116||

viShavRukShAnilasparshAttathA~anyairviShasambhavaiH|

abhiShaktasya cApyAhurjvarameke_{abhiSha}ggajam||117||

cikitsayA viShaghnyaiva sa shamaM labhate naraH|

abhicArAbhishApAbhyAM siddhAnAM yaH pravartate||118||

sannipAtajvaro ghorāH sa vij~jeyaH suduHsahaH|
 sannipAtajvarasyoktaM li~ggaM yattasya tat smRutam||119||
 cittondriyasharIrANAmartayo~anyAshca naikashaH|
 prayogaM tvabhicArasya dRuShTvA shApasya caiva hi||120||
 svayaM shrutvA~anumAnena lakShyate prashamena vA|
 vaividhyAdab hicArasya shApasya ca tadAtmake||121||
 yathAkarmaprayogeNa lakShaNaM syAt pRuthagvidham|
 dhyAnaniHshvAsabahulaM li~ggaM kAmajvare smRutam||122||
 shokaje bAShpabahulaM trAsaprAyaM bhayajvare|
 kro dhaje bahusaMrambhaM bhUtAveshe tvamAnuSham||123||
 mUrcchAmohamadaglAnibhUyiShThaM viShasambhave|
 keShA~jcideShAM li~ggAnAM santApo jAyate puraH||124||
 pashcAttulyaM tu keShA~jcideShu kAmajvarAdiShu|
 kAmAdijAnAmuddiShTaM jvarANAM yadvisheShaNam||125||
 kAmAdijAnAM rogANAmanyeshAmapi tat smRutam|
 manasyabhihate pUrvaM kAmAdyairna tathA balam||126||
 jvaraH prApnoti vAtAdyairdeho yAvanna dUShyati|
 dehe cAbhiha(dru)te pUrvaM vAtAdyairna tathA balam||127||
 jvaraH prApnoti kAmAdyairmano yAvanna dUShyati|
 tē pūrvvarṇ kēvalāḥ paścānnijairvyāmiśralakṣaṇāḥ||128||
 hētvauṣadhaviśiṣṭāśca bhavantyāgantavō jvarāḥ||129|

Abhishangaja jwara: *Jwara* caused by the affliction of passion, grief, fear, anger and evil spirits including germs is called *abhishangaja jwara*. *Vata* gets aggravated by passion, grief and fear, while *pitta* is aggravated by anger and all the three *doshas* are afflicted by *bhootas* (evil spirits or germs). Simultaneously, the signs and symptoms of the respective type of *bhoota* are described here. In the *bhutadhidhikara* section, the characteristic features of eight types of *bhoota* are described. Some *acharyas* opine that the *jwara* caused by the contact of the poisonous air of the toxic plants and other such toxins is called *abhishangaja jwara*. This type of *jwara* gets cured by the administration of antidotes of this poison.

Abhicharaja jwara: The activities such as abhichara (evil *tantrik* rituals) and *abhishapa* of *siddhas* (curse by saints who have attained spiritual perfection) results in the manifestation of *sannipataja jwara*, which are respectively called *abhicharaja* and *abhishapaja jwara* respectively. These types of *jwara* are intolerable and the clinical features of *sannipata jwara* manifest in them accompanied by other clinical features of the mind, sense organs and body due to the cause afflicting.

Abhishapaja jwara, *abhicharaja* and *abhishapdaja jwara* can be ascertained from the following clinical features –

- Either by the direct observation of the performance of the *tantric* rituals and *shapa* (curse)
- By hearing from others about it
- By inference (*anumana*) about it from some feature and
- By the alleviation of *jwara* after counteracting their effects.

Depending upon the varieties of *abhichara* and *abhishapa*, tantric and disease occurred by curse are there, clinical features also vary. A thorough understanding is essential for the diagnosis of such varieties of diseases.

Jwara of psychological origin are further described as:-

- *Kamaja jwara* - *Dhyana* (constantly thinking of same object), frequent sighs of lament are the clinical features of *jwara* caused by *kama* (passion)
- *Shokaja jwara* - Excessive crying is the clinical presentation of *jwara* caused by grief.
- *Bhayaja jwara* - Patient generally feels himself threatened in the *jwara* caused by fear.
- *Krodhaj jwara* - Patient is agitated excessively in the *jwara* caused by anger.

Para psychic manifestations are also presented in the *jwara* due to affliction by the *bhootas* (evil spirits).

Jwara caused by *visha* (intoxications) is associated with the features of fainting, unconsciousness, intoxication and fatigue.

In some *jwara*, fever appears first and then the signs and symptoms of *kama* etc. as described above are manifested, and it may happen the other way also.

The specific features of *kama* etc. as described in the context of *jwara* are also applicable to other diseases caused by these factors (as *unmada* etc.).

In *kama jwara* etc. the mind is first afflicted by passion etc. but the *jwara* does not manifest until the *doshas* as *vata*, *pitta*, *kapha* of the body are not vitiated. Similarly, the vitiation of the *doshas* in the body also does not gain enough strength to produce *jwara* unless the mind is afflicted by these factors (*kama*, *chinta* etc.)

The *jwara* caused by external causes are at first independent but later they get mixed up with the signs and symptoms of *nija jwara* (endogenous fevers). However, these *agantuja jwaras* have their own etiological factors and treatments. [114-129]

General patho-physiology of *jwara*

संसृष्टाः सन्निपतिताः पृथग्वा कुपिता मलाः||१२९||
रसाख्यं धातुमन्वेत्य पक्तिं स्थानान्निरस्य च।
स्वेन तेनोष्मण चैव कृत्वा देहोष्मणो बलम्||१३०||
स्रोतांसि रुद्ध्वा सम्प्राप्ताः केवलं देहमुल्बणाः।
सन्तापमधिकं देहे जनयन्ति नरस्तदा॥१३१॥
अवत्यत्युष्णसर्वाङ्गो ज्वरितस्तेन चोच्यते॥१३२॥
samśrṣṭāḥ sannipatitāḥ pṛthagvā kūpitā malāḥ||129||
rasākhyam dhātumanvētya paktim̄ sthānānnirasya ca|
svēna tēnōśmaṇa caiva kṛtvā dēhōśmaṇō balam||130||
srōtāṁsi ruddhvā samprāptāḥ kēvalam̄ dēhamulbaṇāḥ|
santāpamadhikam̄ dēhē janayanti narastadā||131||
bhavatyatyuṣṇasarvāṅgō jvaritastēna cōcyatē||132||
te pUrvaM kevalAH pashcAnnijairvyAmishralakShaNAH||128||
hetvauShadhavishiShTAshca bhavantyAgantavo jvarAH|
saMsRuShTAH sannipatitAH pRuthagvA kūpitA malAH||129||
rasAkhyam dhAtumanvetya paktiM sthAnAnnirasya ca|
svena tenoShmaNa caiva kRutvA dehoShmaNo balam||130||
srotAMsi ruddhvA samprAptAH kevalaM dehamulbaNAH|
santApamadhikaM dehe janayanti narastadA||131||
bhavatyatyuShNasarvA~ggo jvaritastena cocyate||132||

These aggravated *dosha* either alone or in the combination of two or three, spread along with the *rasa dhatu* (the first *dhatu* responsible for nourishment of the body) and displace the *jatharagni* from its own place. Supplemented by the *dosha*'s own heat and the heat of the *jatharagni*, the heat of the body gets accentuated and they are further aggravated by the blockage of the circulatory channels. It then pervades the entire body to produce excessive heat. Therefore, the temperature increases all over the body and this condition is called *jwara*.[129-132]

Cause of lack of sweating

स्रोतसां सन्निरुद्धत्वात् स्वेदं ना नाधिगच्छति॥१३२॥

स्वस्थानात् प्रच्युते चाग्नौ प्रायशस्तरुणेज्वरे॥१३३॥

srōtasāṁ sanniruddhatvāt svēdaṁ nā nādhigacchatī||132||

svasthānāt pracyutē cāgnau prāyaśastaruṇējvarē||133||

srotasAM sanniruddhatvAt svedaM nA nAdhigacchatī||132||

svasthAnAt pracyute cAgnau prAyashastaruNejvare||133||

A person suffering from *taruna jwara* (the initial stage of *jwara*) does not sweat because of the obstruction of the channels of circulation and the displacement of *agni*. [132-133]

Clinical features of *Ama Jwara* (first stage of *jwara*)

अरुचिश्चाविपाकश्च गुरुत्वमुदरस्य च॥१३३॥

हृदयस्याविशुद्धिश्च तन्द्रा चालस्यमेव च।

ज्वरोऽविसर्गी बलवान् दोषाणामप्रवर्तनम्॥१३४॥

लालाप्रसेको हल्लासः क्षुन्नाशो विरसं मुखम्।

स्तब्धसुप्तगुरुवं च गात्राणां बहुमूत्रता॥१३५॥

न विडं जीर्णा न च ग्लानिज्वरस्यामस्य लक्षणम्।

aruciścāvipākaśca gurutvamudarasya ca||133||

hṛdayasyāviśuddhiśca tandrā cālasyamēva ca|

jvaro'visargī balavān dōṣāṇāmapravartanam||134||

lālāprasēkō hṛllāsaḥ kṣunnāśō virasaṁ mukham|

stabdhasuptaguruvaṁ ca gātrāṇāṁ bahumūtratā||135||

na viḍ jīrṇā na ca glānirjvarasyāmasya lakṣaṇam|

arucishcAvipAkashca gurutvamudarasya ca||133||

hRudayasyAvishuddhishca tandrA cAlasyameva ca|

jvaro~avisargI balavAn doShANAmpravartanam||134||

IAIApraseko hRullAsaH kShunnAsho virasaM mukham|

stabdhasuptaguruvaM ca gAtrANAM bahumUtratA||135||

na viD jlRNA na ca glAnirjvarasyAmasya lakShaNam|

The *ama jwara* (first stage of *jwara*) presents with the following clinical features –

- Anorexia, indigestion, heaviness in the stomach
- Feeling of heaviness and accumulation of impurities in cardiac region, drowsiness and laziness
- Continuous, fever with acute onset.
- Non-elimination of the dosha along with mala or waste products
- Excess salivation, nausea, loss of appetite, and tastelessness in the mouth
- Rigidity, numbness and heaviness of the body
- Excessive urination
- Improper formation of stool
- Absence of muscle emaciation [133-136]

Clinical features of *pachyamana jwara* (second stage of *jwara*)

ज्वरवेगोऽधिकस्तृष्णा प्रलापः १८सनं भ्रमः||१३६||

मलप्रवृत्तिरुत्क्लेशः पच्यमानस्य लक्षणम्|१३७|

jvaravēgō'adhikastṛṣṇā pralāpaḥ śvasanāṁ bhramah|136||

malapravṛttirutklesah pacyamānasya lakṣaṇam|137|

jvaravego~adhikastRuShNA pralApaH shvasanaM bhramaH|136||

malaprvRuttirkleshaH pacyamAnasya lakShaNam|137|

The features of *pachyamana jwara* (second stage of fever) are as follows – high grade fever and excess thirst, delirium, dyspnea, giddiness and excess evacuation of wastes [136]

Clinical features of *nirama jwara* (third stage of *jwara*)

क्षुत् क्षामता लघुत्वं च गात्राणां ज्वरमादवम्||१३७||

दोषप्रवृत्तिरष्टाहो निरामज्वरलक्षणम्|१३८|

kṣut kṣāmatā laghutvam ca gātrāṇāṁ jvaramārdavam|137||

dōṣapravṛttiraṣṭāhō nirāmajvaralakṣaṇam|138|

kShut kShAmatA laghutvaM ca gAtrANAM jvaramArdavam|137||

doShapravRuttiraShTAho nirAmajvaralakShaNam|138|

Restoration of hunger, debility, lightness in the body, reduced fever, elimination of the *dosha* along with the waste products from the body – are all the clinical features of *nirama jwara* (condition when the patient's body becomes free from the *ama*). These features generally appear on the 8th day. [137-138]

Precaution at initial stage of *jwara*

नवज्वरे दिवास्वप्नस्नानाभ्यङ्गान्नमैथुनम्॥१३८॥

क्रोधप्रवातव्यायामान् कषायांश्च विवर्जयेत्॥१३९॥

navajvarē divāsvapnasnānābhyaṅgānnamaithunam||138||

krōdhapravātavyāyāmān kaśāyāṁśca vivarjayēt|139|

navajvare divAsvapnasnAnAbhya~ggAnnamaithunam||138||

krodhapravAtavyAyAmAn kaShAyAMshca vivarjayet|139|

The patient, in the state of *nava jwara* (first stage fever) should avoid certain things as – daytime sleep, bath, massage, heavy to digest food, sexual intercourse, anger, direct exposure to wind, exercise, and *kashaya* (astringent foods). [138-139]

Contra-indications of *langhana* (fasting)

ज्वरे लङ्घनमेवादावुपदिष्टमृते ज्वरात्॥१३९॥

क्षयानिलभयक्रोधकामशोकश्रमोद्भवात् |१४०|

jvarē laṅghanamēvādāvupadīṣṭamṛtē jvarāt||139||

kṣayānilabhayakrōdhakāmaśōkaśramōdbhavāt |140|

javare la~gghanamevAdAvupadiShTamRute jvarAt||139||

kShayAnilabhayakrodhakAmashokashramodbhavAt |140|

Langhana or fasting is prescribed in the initial stage of *jwara* except those caused by *kshaya* (consumption), *vata* dominant *jwara*, fear, anger, passion, grief and physical exertion.[139-140]

Benefits of *langhana* (fasting) in *jwara*

लङ्घनेन क्षयं नीते दोषे सन्धुक्षितेऽनले॥१४०॥

विज्वरत्वं लघुत्वं च क्षुच्चैवास्योपजायते |

प्राणाविरोधिना चैनं लङ्घनेनोपपादयेत्॥१४१॥

बलाधिष्ठानमारोग्यं यदर्थोऽयं क्रियाक्रमः॥१४२॥

laṅghanēna kṣayam nītē dōṣē sandhukṣitē'nalē||140||

vijvaratvam laghutvam ca kṣuccaivāsyōpajāyatē |

prāṇāvirōdhinā cainam laṅghanēnōpapādayēt||141||

balādhiṣṭhānamārōgyam yadarthō'yam kriyākramah|142|

la~gghanena kShayaM nite doShe sandhukShite~anale||140||

vijvaratvaM laghutvaM ca kShuccaivAsyopajAyate |

prANAvirodhinA cainaM la~gghanenopapAdayet||141||

balAdjhiShThAnamArogyaM yadartho~ayaM kriyAkramaH|142|

Langhana reduces the aggravated *dosha* and stimulates the *agni*, as a result of which *jwara* subsides and the body becomes light and the person's appetite is restored.

Langhana should be performed to the extent that it does not hamper the vitality or strength of the individual. The aim of all these measures is to regain the health which also depends on the physical, mental and spiritual strength. [140-142]

Management principle of *jwara*

लङ्घनं स्वेदनं कालो यवाग्वस्तिक्तको रसः||१४२||

पाचनान्यविपक्वानां दोषाणां तरुणे ज्वरे|१४३|

lañghanam svēdanam kālō yavāgvastiktakō rasah||142||

pācanānyavipakvānām dōṣānām taruṇē jvarē|143|

la~gghanam svedanaM kAlo yavAgvastiktako rasaH||142||

pAcanAnyavipakvAnAM doShANAM taruNe jvare|143|

Langhana (fasting), *swedana* (fomentation), *kala* (waiting period of eight days), *yavagu* (medicated gruels) and *tikta rasa* drugs (drugs having bitter taste) and all digestive enhancers of *avipakva dosha* (untransformed) are prescribed in the *taruna jwara* (the initial stage of *jwara*).[142]

Various drinks for management of thirst

तृष्णते सलिलं चोष्णं दद्याद् वातकफज्वरे ||१४३||

मद्योत्थे पैतिके चाथ शीतलं तिक्तकैः शृतम्|

दीपनं पाचनं चैव ज्वरधनमुभयं हि तत्|१४४||

स्रोतसां शोधनं बल्यं रुचिस्वेदकरं शिवम्|१४५|

trsyatē salilam cōṣṇam dadyādvātakaphajvarē ||143||

madyōtthē paittikē cātha śītalām tiktakaiḥ śṛtam|

dīpanam pācanam caiva jvaraghnamubhayam hi tat||144||

srōtasām śōdhanam balyam rucisvēdakaram śivam|145|

tRuShyate salilaM coShNaM dadyAdvAtakaphajvare ||143||

madyotthe paittike cAtha shItalaM tiktakaiH shRutam|
dipanaM pAcanaM caiva jvaraghnamubhayaM hi tat||144||
srotasAM shodhanaM balyaM rucisvedakaraM shivam|145|

If the patient of *jwara* feels thirsty, he should be given :

Hot water to drink if the *jwara* caused by aggravation of *vata* and *kapha*;

If the *jwara* is *pitta* dominant or if it occurs as a result of intake of alcohol, water boiled with bitter drugs and then cooled, is given.

Both of these are *dipana*, (digestive stimulant), *pachana* (enhancing digestion), and *jwaraghna* (alleviators of *jwara*). They help in cleansing the channels of circulation and promote strength, appetite, sweating and auspiciousness. [143-145]

Shadanga paniya

मुस्तपर्पटकोशीरचन्दनोदीच्यनागरैः॥१४५॥
शृतशीतं जलं दद्यात् पिपासाज्वरशान्तये॥१४६॥
mustaparpaṭakōśīracandanōdīcyanāgaraiḥ||145||
śṛtaśītam jalam dadyāt pipāsājvaraśāntayē||146||
mustaparpaṭakoshīracandanodīcyanAgaraiḥ||145||
shRutashltaM jalAM dadyAt pipAsAjvarashAntaye||146||

Patient should be given water cooled after boiling it with *musta*, *parpataka*, *ushira*, *chandana*, *udichya* and *nagara* for the alleviation of thirst and *jwara*. [145]

Indication of *vamana* (therapeutic emesis)

कफप्रधानानुत्क्लिष्टान् दोषानामाशयस्थितान्॥१४६॥
बुद्ध्वा ज्वरकरान् काले वम्यानां वमनैहरेत्॥१४७॥
kaphapradhānānutkliṣṭān dōṣānāmāśayasthitān||146||
buddhvā jvarakarān kālē vamyānāṁ vamanairharēt||147||
kaphapradhAnAnutkliShTAn doShAnAmAshayasthitAn||146||
buddhvA jvarakarAn kAle vamyAnAM vamanairharet||147||

If the *jwara* is predominantly caused by vitiated *kapha dosha*, located in the *amashaya* (stomach) and is in a stage of *utklesha* (in a stage of being on the verge of coming out of its place), then it should be eliminated by the administration of emetics.

Note: The status of *kapha* should be ascertained clearly before the administration of drug and emetics should be given only to those patients who are found suitable for emesis.[147]

Hazards of improper *vamana* (therapeutic emesis)

अनुपस्थितदोषाणां वमनं तरुणेज्वरे||१४७||

हृद्रोगं श्वासमानाहं मोहं च जनयेद्भृशम्।

सर्वदेहानुगाः सामा धातुस्था असुनिर्हराः ||१४८||

दोषाः फलानामामानां स्वरसा इव सात्ययाः॥१४९॥

anupasthitadōṣānāṁ vamanam̄ taruṇējvarē||147||

hṛdrōgam̄ śvāsamānāhaṁ mōhaṁ ca janayēdbhṛśam|

sarvadēhānugāḥ sāmā dhātusthā asunirharāḥ ||148||

dōṣāḥ phalānāmāmānāṁ svarasā iva sātyayāḥ||149|

anupasthitadoShANAM vamanaM taruNejvare||147||

hRudrogaM shvAsamAnAhaM mohaM ca janayedbhRusham|

sarvadehAnugAH sAmA dhAtusthA asunirharAH ||148||

doShAH phalAnAmAmAnAM svarasA iva sAtiyAH||149|

If *vamana* (emesis) is administered to a *jwara* patient in whom the *dosha* have not attained the stage of *utklesha* (verge of coming out), then they may cause acute form of heart disease, dyspnea, *anaha* (obstruction to the movement of flatus and feces) and illusion. Attempting to take out the *anupasthita dosha* (unprepared to be eliminated) from the body of a person bring complications for the person and is just like attempting to take out juice from a raw fruit which creates complications (destroys the fruit). [147-149]

Post *vamana* protocol

वमितं लङ्घितं काले यवागूभिरुपाचरेत्॥१४९॥

यथास्वौषधसिद्धाभिर्मण्डपूर्वभिरादितः।

यावज्ज्वरमृदूभावात् षडहं वा विचक्षणः॥१५०॥

तस्याग्निर्दीप्यते ताभिः समिदभिरिव पावकः।

ताश्च भेषजसंयोगाल्लघुत्वाच्चाग्निर्दीपनाः॥१५१॥

वातमूत्रपुरीषाणां दोषाणां चानुलोमनाः।

स्वेदनाय द्रवोष्णत्वाद्द्रवत्वात्तप्रशान्तये॥१५२॥

आहारभावात् प्राणाय सरत्वाल्लाघवाय च।

ज्वरधन्यो ज्वरसात्म्यत्वात्स्मात् पेयाभिरादितः॥१५३॥

vamitam laṅghitam kālē yavāgūbhīrupācarēt||149||

yathāsvauṣadhasiddhābhīrmaṇḍapūrvābhīrādītaḥ।

yāvajjvaramṛḍūbhāvāt ṣaḍahām vā vicakṣaṇāḥ॥150॥

tasyāgnirdīpyatē tābhiḥ samidbhīrīva pāvakāḥ।

tāśca bhēṣaṣasāmyōgāllaghutvāccāgnidīpanāḥ॥151॥

vātamūtrapurīṣāṇāṁ dōṣāṇāṁ cānulōmanāḥ।

svēdanāya dravōṣṇatvāddravatvāttṛtpraśāntayē॥152॥

āhārabhāvāt prāṇāya saratvāllāghavāya ca।

jvaraghnyō jvarasātmyatvāttasmāt pēyābhīrādītaḥ॥153॥

vamitaM la~gghitaM kAle yavAgUbhirupAcaret||149||

yathAsvauShadhasiddhAbhirmaNDapUrvAbhirAditaH|

yAvajjvaramRudUbhAvAt ShaDahaM vA vicakShaNaH||150||

tasyAgnirdIpyate tAbhiH samidbhīrīva pAvakaH|

tAshca bheShajasaMyogAllaghutvAccAgnidIpAnAH||151||

vAtamUtrapuriShANAM doShANAM cAnulomanAH|

svēdanAya dravoShNatvAddravatvAttRuTprashAntaye||152||

AhArabhAvAt prANAYa saratvAllAghavAya ca|

jvaraghnyo jvarasAtmyatvAttasmAt peyAbhirAditaH||153||

The patient after being given emesis and kept on fasting should be administered *yavagu* (a gruel preparation) prepared by boiling with the drugs mentioned further, in appropriate time. Before administering *yavagu*, the patient should be given *manda* (extremely thin gruel). This should be continued by the wise for either six days or till the *jwara* becomes mild.

As the addition of *samidha* (fuel) accelerates the fire, similarly the digestive fire also becomes stimulated by the consumption of gruels. These gruels are inherently light for digestion and they further stimulate the *agni* due to the addition of drugs to it.

These help in *anulomana* (elimination through the downward movement) of flatus, urine, feces and *doshas*. Being liquid and hot they also cause sweating. Being watery in nature they also alleviate thirst. Due to their nourishing property as a diet, they sustain the *prana* (vitality) and cause lightness of the body because of their laxative property. They bring down the *jwara* and are also wholesome for the *jwara* patients.

In view of above, a *jwara* patient should in the beginning be administered with different types of *peya* (thin gruels). [149-153]

Contra-indications of *yavagu*

ज्वरानुपचरेद्धीमानृते मद्यसमुत्थितात्।
मदात्यये मद्यनित्ये ग्रीष्मे पित्तकफाधिके॥१५४॥
ऊर्ध्वगे रक्तपित्ते च यवागूर्न हिता ज्वरे॥१५५॥
jvarānupacarēddhīmānṛtē madyasamutthitāt|
madātyayē madyanityē grīṣmē pittakaphādhikē||154||
ūrdhvagē raktapittē ca yavāgūrṇa hitā jvare||155|
jvarAnupacareddhImAnRute madyasamuthhitAt|
madAtyaye madyanitye grIshme pittakaphAdhike||154||
Urdhvage raktapitte ca yavAgUrna hitA jvare||155|

However, these gruels are contraindicated in the fevers caused by intake of alcohol, in alcoholism, for persons addicted to alcohol, in summer seasons, when there is predominance of *pitta* and *kapha* and in *urdhwaga rakta-pitta* (a disease characterized by bleeding from the different upper channels of the body).[154]

तत्र तर्पणमेवाग्रे प्रयोज्यं लाजसक्तुभिः॥१५५॥
ज्वरापहैः फलरसैर्युक्तं समधुशर्करम्॥१५६॥
tatra tarpaṇamēvāgrē prayōjyaṁ lājasaktubhiḥ||155||
jvarāpahaiḥ phalarasairyuktam̄ samadhuśarkaram|156|
tatra tarpaNamevAgre prayojyaM |AjasaktubhiH||155||
jvarApahaiH phalarasairyuktaM samadhusharkaram|156|

In cases where *yavagu* administration is prohibited, the physician should administer in the beginning *tarpana* (nutritional diet) prepared from *laja saktu* (powder of roasted grains) mixed with honey, sugar and fruit juices, which have *jwara* alleviating properties.[155]

Guidelines for diet, mouth cleansing and tooth brush

ततः सात्म्यबलापेक्षी भोजयेज्जीर्णतर्पणम्॥१५६॥

तनुना मुद्गयूषेण जाङ्गलानां रसेन वा।

अन्नकालेषु चाप्यस्मै विधेयं दन्तधावनम्॥१५७॥

योऽस्य वक्त्ररसस्तस्मादविपरीतं प्रियं च यत्।

तदस्य मुखवैशद्यं प्रकाङ्क्षां चान्नपानयोः॥१५८॥

धते रसविशेषाणामभिज्ञत्वं करोति यत्।

विशेष्य द्रुमशाखागैरास्यं प्रक्षाल्य चासकृत्॥१५९॥

मस्त्वक्षुरसमद्याद्यैर्यथाहरमवाप्नुयात्॥१६०॥

tataḥ sātmyabalāpēkṣī bhōjayējjīrnatarpaṇam||156||

tanunā mudgayūṣēṇa jāṅgalānāṁ rasēna vā|

annakālēṣu cāpyasmai vidhēyarāṁ dantadhāvanam||157||

yō'sya vaktrarasastasmādviparītaṁ priyam ca yat|

tadasya mukhavaiśadyāṁ prakāṅksāṁ cānnapānayōḥ||158||

dhattē rasaviśēṣāñāmabhijñatvāṁ karōti yat|

viśōdhyā drumaśākhāgrairāsyāṁ prakṣālyā cāsakṛt||159||

mastvikśurasamadyādyairyathāhāramavāpnuyāt||160||

tataH sAtmyabalApekShI bhojayejjIrnarpaNaM||156||

tanunA mudgayUSheNa jA~ggalAnAM rasena vA|

annakAleShu cApyasmai vidheyaM dantadhAvanam||157||

yo~asya vaktrarasastasmAdviparItaM priyaM ca yat|

tadasya mukhavaishadyaM prakA~gkShAM cAnnapAnayoH||158||

dhatte rasavisheShANAmabhij~jatvaM karoti yat|

vishodhya drumashAkhAgrairAsyaM prakShAlya cAsakRut||159||

mastvikShurasamadyAdyairyathAhAramavApnuyAt||160||

Depending upon the habituation (*satmya*) and the strength of the patient, after digestion of the *tarpana*, patient is administered thin soup of *mudga* (green gram) or meat of wild animals. During food time, the patient's teeth should be cleaned with the twig of plants, which should be such that their taste can counteract the taste of the patient's mouth and

is relishing to the patient. Such kind of cleaning of teeth makes the patient feel freshness in his mouth, develops appetite for food and drinks and becomes capable of appreciating the taste of food to be taken. The mouth should be cleaned several times with water after cleaning with twigs. Thereafter the patient should be given *mastu* (thin butter milk), sugarcane juice, alcoholic drinks etc. with suitable and appropriate diet.[156-159]

पाचनं शमनीयं वा कषायं पाययेद्भिषक्॥१६०॥

ज्वरितं षडहेऽतीते लघ्वन्नप्रतिभोजितम्॥१६१॥

pācanarṁ śamanīyam vā kaśāyam pāyayēdbhiṣak||160||

jvaritam ṣadahē'tītē laghvannapratibhōjitaṁ|161|

pAcanam shamanlyaM vA kaShAyaM pAyayedbhiShak||160||

jvaritaM ShaDahe~atlte laghvannapratibhojitam|161|

The *jwara* patient, after six days and having been given light diet to eat, should be administered decoctions, which are either *pachana* (stimulant of digestion) or *shamana* (alleviator of *doshas*). [160-161]

Contra-indications of *kashaya* (astringents)

स्तभ्यन्ते न विपच्यन्ते कुर्वन्ति विषमज्वरम्॥१६१॥

दोषा बद्धाः कषायेण स्तम्भित्वात्तरुणे ज्वरे।

न तु कल्पनमुद्दिश्य कषायः प्रतिषिद्धयते॥१६२॥

यः कषायकषायः स्यात् स वर्ज्यस्तरुणज्वरे॥१६३॥

stabhyantē na vipacyantē kurvanti viṣamajvaram||161||

dōṣā baddhāḥ kaśāyēṇa stambhitvāttaruṇē jvarē|

na tu kalpanamuddiśya kaśāyah pratiṣidhyatē||162||

yah kaśāyakaśāyah syāt sa varjyastaruṇajvarē|163|

stabhyante na vipacyante kurvanti viShamajvaram||161||

doShA baddhAH kaShAyeNa stambhitvAttaruNe jvare|

na tu kalpanamuddishya kaShAyaH pratiShidhyate||162||

yaH kaShAyakaShAyaH syAt sa varjyastaruNajvare|163|

If, decoctions of astringent drugs are administered to the patient in *taruna jwara* (first stage of *jwara*) stage, then the *doshas* do not undergo *paka* (digested) and get adhered due to stickiness. This leads to the onset of *vishama jwara* (irregular fevers). The term

kashaya has two meanings i.e. the decoction prepared by boiling the drugs and astringent taste. In the first stage of *jwara* (*taruna jwara*), the astringent tasted drugs are prohibited. [161-163]

Yusha (soup) indications

यूषैरम्लैरनम्लैर्वा जाङ्गलैर्वा रसैर्हितैः||१६३||

दशाहं यावदश्नीयाल्लघवन्नं ज्वरशान्तये|१६४|

yūṣairamlairanamlairvā jāṅgalairvā rasairhitaiḥ||163||

daśāhaṁ yāvadaśnīyāllaghvannam jvaraśāntayē|164|

yUShairamlairanamlairvA jA~ggalairvA rasairhitaiH||163||

dashAhaM yAvadashnlyAllaghvannaM jvarashAntaye|164|

The patient should be given light diet along with *yusha* (soup) prepared from vegetables and pulses and *rasa* (soup) of the meat of animals inhabiting arid regions, for the alleviation of *jwara*, up to the tenth day. *Amla* (sour) things may or may not be added to these *yusha*. [163-164]

Indications and contra-indications of *ghrita*

अत ऊर्ध्वं कफे मन्दे वातपितोत्तरे ज्वरे||१६४||

परिपक्वेषु दोषेषु सर्पिष्पानं यथाऽमृतम्।

निर्दशाहमपि जात्वा कफोत्तरमलङ्घितम्||१६५||

न सर्पिः पाययेद्वैद्यः कषायैस्तमुपाचरेत्।

यावल्लघुत्वादशनं दद्यान्मांसरसेन च||१६६||

बलं हयलं निग्रहाय दोषाणां, बलकृच्च तत् |१६७|

ata ūrdhvam kaphē mandē vātapittōttarē jvarē||164||

paripakvēṣu dōṣēṣu sarpiṣpānaṁ yathā'mṛtam|

nirdaśāhamapi jñātvā kaphōttaramalaṅghitam||165||

na sarpiḥ pāyayēdvaidyah kaśāyaistamupācarēt |

yāvallaghutvādaśanaṁ dadyānmāṁsaraseṇa ca||166||

balam hyalam nigrähāya dōṣāṇām, balakrc̄ca tat |167|

ata UrdhvaM kaphe mande vAtapittottare jvare||164||

paripakveShu doSheShu sarpiShpAnaM yathA~amRutam|

nirdashAhamapi j~jAtvA kaphottaramala~gghitam||165||
na sarpiH pAyayedvaidyaH kaShAyaistamupAcaret |
yAvallaghutvAdashanaM dadyAnmAMsaraseNa ca||166||
balaM hyalaM nigrahAya doShANAM, balakRucca tat |167|

Thereafter, in case of less aggravation of *kapha dosha* and excess aggravation of *vata* and *pitta dosha*, and in whom the *dosha* have reached the *pakva* stage (having no *ama ansha*), ghee should be given to the patients. It is like *amrita* (nectar) for them.

Ghee should not be given to *jwara* patient even after the tenth day, if the *kapha dosha* still predominates and if the signs and symptoms of well accomplished *langhana* have not appeared. In such case *kashaya* should be administered to the patient till the body becomes light.

Till the features of *langhana* appear in the body, the patient should be given light to digest food along with the meat soup of wild animals and birds. This destroys the strength of the *doshas* and promotes the strength of the body. [164-167]

Indication of milk

दाहतृष्णापरीतस्य वातपितोत्तरं ज्वरम्॥१६७॥
बद्धप्रच्युतदोषं वा निरामं पयसा जयेत्॥१६८॥
dāhatr̥ṣṇāparītasya vātapittottaram jvaram||167||
baddhapracyutadōṣam vā nirāmam payasā jayēt||168||
dAhatRuShNAparltasya vAtapittottaraM jvaram||167||
baddhapracyutadoShaM vA nirAmaM payasA jayet||168||

A patient with the following conditions should be given milk in *nirama* stage in the body

- When the patient has excessive burning sensation and thirst
- If *vata* and *pitta dosha* predominate the patient is suffering from *jwara*
- If the dosha are either *baddha* (static), or *prachyuta* (slightly dislodged). [167]

Indication of *virechana*

क्रियाभिराभिः प्रशमं न प्रयाति यदा ज्वरः॥१६८॥
अक्षीणबलमांसाग्ने: शमयेत्विरेचनैः॥१६९॥
kriyābhīrabhiḥ praśamam na prayāti yadā jvarah||168||
akṣīṇabalamāṁsāgnēḥ śamayēttam virēcanaiḥ||169||

kriyAbhirAbhiH prashamaM na prayAti yadA jvaraH||168||

akShINabalamAMsAgneH shamayettaM virecanaiH||169|

If the *jwara* does not subside by the therapies described before, then *virechana* (purgation) should be given for its alleviation provided, the patient is neither emaciated, weak, depleted of muscle tissue nor has reduced digestive power. [168-169]

Indications of *niruha* (enema with decoction)

ज्वरक्षीणस्य न हितं वमनं न विरेचनम्॥१६९॥

कामं तु पयसा तस्य निरुहैर्वा हरेन्मलान्।

निरुहो बलमग्निं च विज्वरत्वं मुदं रुचिम्॥१७०॥

परिपक्वेषु दोषेषु प्रयुक्तः शीघ्रमावहेत्।

पितं वा कफपितं वा पित्ताशयगतं हरेत्॥१७१॥

स्रंसनं त्रीन्मलान् बस्तिर्हरेत् पक्वाशयस्थितान्॥१७२॥

jvarakṣīṇasya na hitam vamanam na virēcanam||169||

kāmam tu payasā tasya nirūhairvā harēnmalān|

nirūhō balamagnim ca vijvaratvam mudam rucim||170||

paripakvēṣu dōṣēṣu prayuktaḥ śīghramāvahēt|

pittam vā kaphapittam vā pittāśayagataṁ harēt||171||

sraṁsanam trīnmalān bastirharēt pakvāśayasthitān||172||

jvarakShINasya na hitam vamanam na virecanam||169||

kAmam tu payasa tasya nirUhairvA harenmalAn|

nirUho balamagniM ca vijvaratvaM mudaM rucim||170||

paripakveShu doSheShu prayuktaH shlghramAvahet|

pittaM vA kaphapittaM vA pittAshayagataM haret||171||

sraMsanam trInmalAn bastirharet pakvAshayasthitAn||172||

Neither *vamana* (emesis) nor *virechana* (purgation) is useful for patients emaciated by fever. It is thus desirable to remove their malas by the administration of milk or *niruha* (ununctuous type of medicated enema prepared by decoctions etc.)

Niruha basti administered when the dosha are in *paripakva* stage immediately promotes the strength and the power of digestion, alleviates fever and causes happiness and brings relish for food.

Purgation (*stransana*) eliminates *kapha* or *kapha pitta dosha* from the *pittashaya* (lower portion of the stomach and small intestine). *Basti* eliminates all the three *dosha* lodged in the *pakwashaya*. [169-170]

Indication of *anuvasana* (unctuous enema)

ज्वरे पुराणे सङ्क्षीणे कफपिते दृढाग्नये॥१७२॥

रुक्षबद्धपुरीषाय प्रदद्यादनुवासनम्॥१७३॥

jvarē purāṇē saṅkṣīṇē kaphapittē dṛḍhāgnayē॥172॥

rūkṣabaddhapurīṣāya pradadyādanuvāsanam॥173॥

jvare purAne sa~gkShINe kaphapitte dRuDhAgnaye॥172॥

rUkShabaddhapurIShAya pradadyAdanuvAsanam॥173॥

In chronic types of fever (*jirna jwara*) *anuvasana* type of *basti* (medicated enema with oils) should be given in the following conditions –

- When *kapha* and *pitta* are alleviated
- When there is strong power of digestion
- When there is ununctuousness (*rukshata*) and *bandhatwa* (obstruction, compactness) in the feces. [172-173]

Indications of *murdha-virechana* (nasal errhines)

गौरवे शिरसः शूले विबद्धेष्विन्द्रियेषु च॥१७३॥

जीर्णज्वरे रुचिकरं कुर्यान्मूर्धविरेचनम्॥१७४॥

gauravē śirasah śūlē vibaddhēśvindriyēṣu ca॥173॥

jīrnajvarē rucikaram kuryānmūrdhavirēcanam॥174॥

gaurave shirasaH shUle vibaddheShvindriyeShu ca॥173॥

jIrnajvare rucikaraM kuryAnmUrdhavirecanam॥174॥

Murdha virechana should be done in patients suffering from chronic type of fevers who have heaviness and pain in head, impaired sensoria. This develops relish for food and also the objects. [173-174]

Various external procedures

अभ्यङ्गांश्च प्रदेहांश्च परिषेकावगाहने॥१७४॥

विभज्य शीतोष्णकृतं कुर्याज्जीर्णं ज्वरे भिषक्।

तैराशु प्रशमं याति बहिर्मार्गगतो ज्वरः॥१७५॥

लभन्ते सुखमङ्गानि बलं वर्णश्च वर्धते॥१७६॥

धूपनाञ्जनयोगैश्च यान्ति जीर्णज्वराः शमम्॥१७६॥

त्वङ्मात्रशेषा येषां च भवत्यागन्तुरन्वयः॥१७७॥

abhyāṅgāṁśca pradēhāṁśca pariṣekāvagāhanē॥174॥

vibhajya śītōṣṇakṛtam kuryājjīrnē jvarē bhiṣak|

tairāśu praśamaṁ yāti bahirmārgagatō jvarah॥175॥

labhantē sukhamaṅgāni balam varṇaśca vardhatē|

dhūpanāñjanayogaṁśca yānti jīrnajvarāḥ śamam॥176॥

tvaṁmātraśēṣā yēśāṁ ca bhavatyāganturanvayaḥ॥177॥

abhyā~ggAMshca pradehAMshca pariShekAvagAhane॥174॥

vibhajya shltoShNakRutaM kuryAjjlrNe jvare bhiShak|

tairAshu prashamaM yAti bahirmArgagato jvaraH॥175॥

labhante sukhama~ggAni balaM varNashca vardhate|

dhUpanA~jjanayogaishca yAnti jlNrNajvarAH shamam॥176॥

tva~gmAtrasheShA yeShAM ca bhavatyAganturanvayaH॥177॥

Abhyanga (massage), *pradeha* (unguentum), *parisheka* (sprinkling of water), and *avagahana* (bathing) should be done in patients of *jirna jwara* (chronic fevers) considering the types of *jwara* with their hot and cold types. By these measures the *bahirmargagata* (located in the external tissues) *jwara* gets alleviated instantaneously. There is a feeling of ease in the body along with the promotion of strength and complexion.

Jirna jwara (chronic stage) also gets alleviated by the administration of *dhupana* (fumigation) and *anjana* (collyrium).

Jwara located in skin and of exogenous nature or types can be treated with same. [174-177]

Various dietary articles used in treatment

इति क्रियाक्रमः सिद्धो ज्वरधनः सम्प्रकाशितः॥१७७॥

येषां त्वेष क्रमस्तानि द्रव्याण्यूर्ध्वमतः शृणु।

रक्तशाल्यादयः शस्ता: पुराणाः षष्ठिकैः सह॥१७८॥

यवाग्वोदनलाजार्थं ज्वरितानां ज्वरापहाः॥१७९॥

iti kriyākramah siddhō jvaraghnah samprakāśitah||177||
 yēśāṁ tvēśa kramastāni dravyāṇyūrdhvamataḥ śṛṇu|
 raktaśālyādayah śastāḥ purāṇāḥ śaṣṭikaiḥ saha||178||
 yavāgvōdanalājārthē jvaritānāṁ jvarāpahāḥ||179||
 iti kriyAkramaH siddho jvaraghnaH samprakAshitaH||177||
 yeShAM tveSha kramastAni dravyANyUrdhvamataH shRuNu|
 raktashAlyAdayaH shastAH purANAH ShaShTikaiH saha||178||
 yavAgvodanalAjArthe jvaritAnAM jvarApahAH||179|

Proper line of treatment for the alleviation of *jwara* has been described above, the ingredients used for therapies in accordance to the above stated line of treatment has been described further.

For this purpose, *rakta shali*, *shashtika* type of *purana* (preserved for over an year) rice are the best and should be given in the form of *yavagu* (gruel), *odana* (boiled rice), *laja* (fried paddy) as these mitigate *jwara* of the patient. [177-179]

Ten types of *yavagu* (gruel) in *jwara*

लाजपेयां सुखजरां पिप्पलीनागरैः शृताम्॥१७९॥
 पिबेऽज्जवरी ज्वरहरां क्षुद्रवानल्पाग्निरादितः।
 अम्लाभिलाषी तामेव दाडिमाम्लां सनागराम्॥१८०॥
 सृष्टविट् पैतिको वाऽथ शीतां मधुयुतां पिबेत्।
 पेयां वा रक्तशालीनां पाश्वर्बस्तिशिरोरुजि॥१८१॥
 श्वदंष्ट्राकण्टकारिभ्यां सिद्धां ज्वरहरां पिबेत्।
 ज्वरातिसारी पेयां वा पिबेत् साम्लां शृतां नरः॥१८२॥
 पृश्नपर्णीबलाबिल्वनागरोत्पलधान्यकैः।
 शृतां विदारीगन्धाद्यैर्दीपनीं स्वेदनीं नरः॥१८३॥
 कासी श्वासी च हिक्की च यवागूं ज्वरितः पिबेत्।
 विबद्धवर्चाः सयवां पिप्पल्यामलकैः शृताम्॥१८४॥
 सर्पिष्मतीं पिबेत् पेयां ज्वरी दोषानुलोमनीम्।
 कोष्ठे विबद्धे सरुजि पिबेत् पेयां शृतां ज्वरी॥१८५॥
 मृद्वीकापिप्पलीमूलचव्यामलकनागरैः।

पिबेत् सबिल्वां पेयां वा ज्वरे सपरिकर्तिके॥१८६॥
बलावृक्षाम्लकोलाम्लकलशीधावनीशृताम्।
अस्वेदनिद्रस्तुष्णार्तः पिबेत् पेयां सशर्कराम्॥१८७॥
नागरामलकैः सिद्धां घृतभृष्टां ज्वरापहाम्॥१८८॥

lājapēyāṁ sukhajarāṁ pippalīnāgaraiḥ śṛtām||179||
pibējjvarī jvaraharāṁ kṣudvānalpāgnirāditahī|
amlābhilāśī tāmēva dāḍimāmlāṁ sanāgarām||180||
śrṣṭavīt paittikō vā'tha śītām madhuyutāṁ pibēt|
pēyām vā raktaśālīnām pārśvabastiśirōruji||181||
śvadarāṁśtrākanṭakāribhyām siddhām jvaraharām pibēt|
jvarātisārī pēyām vā pibēt sāmlām śṛtām narahī||182||
pr̥śniparṇībalābilvanāgarōtpaladhānyakaiḥ|
śṛtām vidārīgandhādyairdīpanīm svēdanīm narahī||183||
kāśī śvāsī ca hikkī ca yavāgūm jvaritahī pibēt|
vibaddhavarcāḥ sayavām pippalyāmalakaiḥ śṛtām||184||
sarpişmatīm pibēt pēyām jvarī dōśānulōmanīm|
kōṣṭhē vibaddhē saruji pibēt pēyām śṛtām jvarī||185||
mr̥dvīkāpippalīmūlacavyāmalakanāgaraiḥ|
pibēt sabilvām pēyām vā jvarē saparikartikē||186||
balāvṛkṣāmlakōlāmlakalaśīdhāvanīśṛtām|
asvēdanidrastṛṣṇārtahī pibēt pēyām saśarkarām||187||
nāgarāmalakaiḥ siddhām ghṛtabhṛṣṭām jvarāpahām||188||
IAjapeyAM sukhajarAM pippallInAgaraiH shRutAmI||179||
pibejjvarl jvaraharAM kShudvAnalpAgnirAditaH|
amlAbhilAShI tAmeva dADimAmlAM sanAgarAmI||180||
sRuShTaviT paittiko vA~atha shItAM madhuyutAM pibet|
peyAM vA raktashAllnAM pArshvabastishiroraji||181||
shvadaMShTrAkaNTakAribhyAM siddhAM jvaraharAM pibet|

jvarAtisArl peyAM vA pibet sAmI AM shRutAM naraH||182||
 pRushniparNIbalAbilvanAgarotpaladhAnyakaiH|
 shRutAM vidArlgandhAdyairdlpanIM svedanIM naraH||183||
 kAsI shvAsI ca hikkl ca yavAgUM jvaritaH pibet|
 vibaddhavarcAH sayavAM pippalyAmalakaiH shRutAm||184||
 sarpiShmatIM pibet peyAM jvarl doShAnulomanIm|
 koShThe vibaddhe saruji pibet peyAM shRutAM jvarl||185||
 mRudvlkApippallmUlacavyAmalakanAgaraiH|
 pibet sabilvAM peyAM vA jvare saparikartike||186||
 balAvRukShAmlakolAmlakalashldhAvanlshRutAm|
 asvedanidrastRuShNArtaH pibet peyAM sasharkarAm||187||
 nAgarAmalakaiH siddhAM ghRutabhRuShTAM jvarApahAm|188|

- The *peya* prepared with *laja* (fried paddy) and boiled with *pippali* and *nagara* is light to digest and should be given to the patient in the beginning of the *jwara* when the digestive power is reduced. However, it should be ascertained before administration that the patient is desirous for food before administration.
- If there is movement of bowel and the patient is desirous of sour things, then the *peya* described above should be made sour by adding *dadima* and should be given along with *nagara*.
- The above mentioned *peya* should be cooled and added with honey before administration in *paittika* type of patient.
- A patient suffering from *shoola* (pain) in the *parshva* (flanks), *basti* (urinary bladder) and *shira* (head) regions should be given *peya* prepared from red variety of *shali* rice and boiled with *shvadashtra* and *kantakari* as this alleviates *jwara*.
- A person suffering from *jwaratisara* (fever associated with diarrhea) should be given *peya* which is sour and is boiled with *prishniparni*, *bala*, *bilva*, *nagara*, *utpala* and *dhanyaka*.
- Patients suffering from *jwara* associated with *kasa* (bronchitis), *shwasa* (difficulty in breathing) and *hikka* (hiccups) should be given *yavagu* prepared by boiling with the group of drugs belonging to *vidarigandhadi gana*, which acts as a stimulant of digestion and promotes sweating.
- *Peya* prepared of *yava* (barley) boiled with *pippali* and *amalaki* should be given to a patient suffering from *jwara* associated with *koshthabaddha*(constipation). It causes *anulomana* (downward movement) of *dosha*. This *peya* mixed with ghee should be taken by the patient suffering from *jwara* associated with constipation.

- The *peya* prepared by boiling with *mridvika*, *pippali mula*, *chavya*, *amalaka* and *nagara* should be taken by the patient suffering from *jwara* associated with constipation and pain.
- *Peya* boiled with *bala*, *vrikshamla*, *kolamla*, *kalashi* (*simha pucchi*), *dhavani* (*kantakari*) and *bilva* should be given to a patient suffering from *jwara* associated with sawing pain. (cutting pain).
- *Peya* prepared by boiling with *nagara* and *amalaka* fried with ghee and mixed with sugar is *jwaraghna* (alleviates *jwara*). It should be given to a patient suffering from *asweda* (absence of sweating), *anidra* (sleeplessness) and *trishna* (morbid thirst). [179-188]

Indications of soup

मुद्गान्मसूरांश्चणकान् कुलत्थान् समकुष्टकान्॥१८८॥

यूषार्थं यूषसात्म्यानां ज्वरितानां प्रदापयेत्॥१८९॥

mudgānmasūrāṁścaṇakān kulatthān samakuṣṭakān||188||

yūṣārthē yūṣasātmyānāṁ jvaritānāṁ pradāpayēt|189|

mudgAnmasUrAMshcaNakAn kulatthAn samakuShTakAn||188||

yUShArthe yUShasAtmyAnAM jvaritAnAM pradApayet|189|

Yusha is wholesome for some patients of *jwara*. This *yusha* may be prepared from *mudga*, *masura*, *chanaka*, *kulattha* and *makushtha*.[188-189]

Indications of vegetables

पटोलपत्रं सफलं कुलकं पापचेलिकम्॥१८९॥

कर्कोटकं कठिल्लं च विद्याच्छाकं ज्वरे हितम्॥१९०॥

paṭōlapatraṁ saphalaṁ kulakarṁ pāpacēlikam||189||

karkōṭakarṁ kaṭhillarṁ ca vidyācchākarṁ jvarē hitam|190|

paTolapatraM saphalaM kulakaM pApacelikam||189||

karkoTakaM kaThillaM ca vidyAcchAkaM jvare hitam|190|

The leaves and fruits of *patola*, *kulaka* (*karvellaka*), *papachelika* (*patha*), *karkotaka*, *kathilla* (red variety of *punarnava*) *shakas* are useful in the patients of *jwara*. [189-190]

Indication of animal meat soups

लावान् कपिञ्जलानेणांश्चकोरानुपचक्रकान्॥१९०॥

कुरङ्गान् कालपुच्छांश्च हरिणान् पृष्ठताञ्छशान्॥

प्रदद्यान्मांससात्म्याय ज्वरिताय ज्वरापहान्॥१९१॥
 ईषदम्लाननम्लान् वा रसान् काले विचक्षणः।
 कुक्कुटांश्च मयूरांश्च तितिरिक्रौञ्चवर्तकान्॥१९२॥
 गुरुष्णत्वान्न शंसन्ति ज्वरे केचिच्चिकित्सकाः।
 लङ्घनेनानिलबलं ज्वरे यद्यथिकं भवेत्॥१९३॥
 भिषड्मात्राविकल्पजो दद्यातानपि कालवित्॥१९४॥
 lāvān kapiñjalānēnāṁścakōrānupacakrakān॥190॥
 kuraṅgān kālapucchāṁśca hariṇān pṛṣatāñchaśān।
 pradadyānmāṁsasātmyāya jvaritāya jvarāpahān॥191॥
 Ṭsadamlānanamlān vā rasān kālē vicakṣanah।
 kukkuṭāṁśca mayūrāṁśca tittirikrauñcavartakān॥192॥
 gurūṣṇatvānna śāṁsanti jvarē kēciccikitsakāh।
 laṅghanēnānilabalam jvarē yadyadhikarā bhavēt॥193॥
 bhiṣāṁmātrāvikalpajñō dadyāttānapi kālavit॥194॥
 IAvAn kapi~jalAneNAMshcakorAnupacakrAn॥190॥
 kura~ggAn kAlapucchAMshca hariNAn pRuShatA~jchashAn|
 pradadyAnmAMsasAtmyAya jvaritAya jvarApahAn॥191॥
 IShadamIAnanamlAn vA rasAn kAle vicakShaNaH|
 kukkuTAMshca mayUrAMshca tittirikrau~jcavartakAn॥192॥
 gurUShNatvAnna shaMsanti jvare keciccikitsakAH|
 la~gghanenAnilabalaM jvare yadyadhikaM bhavet॥193॥
 bhiSha_{gmAtrAvikalpaj}o [1] dadyAttAnapi kAlavit॥194॥

The soup prepared from *lava*, *kapinjala* (white variety of *tittiri*), *ena* (*krishna sara*), *chakora*, *upachakraka* (a variety of *chakora*), *kuranga*, *kala puccha* (a type of *harina*), *harina* (coppery coloured dear), *priashata* (spotted deer) and *shasha* (rabbit) are alleviators of *jwara* and hence should be given to the patients of *jwara* for whom meat is wholesome. These meat soups may be made slightly sour or taken as such. The wise physician should administer these soups at appropriate time.

Some physicians do not advise the meat soups of animals such as *kukkuta*, *mayura*, *tittiri*, *krauncha* and *vartaka* as they are heavy to digest and hot potency. In *jwara* if *vayu*

gets aggravated because of *langhana*, then the physician acquainted with the signs of the *doshas* should give the meat soup of these animals also at appropriate time.[190-194]

Anupana(beverages)

घर्माम्बु चानुपानार्थं तृषिताय प्रदापयेत्॥१९४॥

मद्यं वा मद्यसात्म्याय यथादोषं यथाबलम्॥१९५॥

gharmāmbu cānupānārtham tṛṣitāya pradāpayēt||194||

madyam vā madyasātmyāya yathādōṣam yathābalam|195|

gharmAmbu cAnupAnArthaM tRuShitAya pradApayet||194||

madyaM vA madyasAtmyAya yathAdoShaM yathAbalam|195|

Hot water should be given to drink to a thirsty person. Depending upon the *doshas* involved and the strength of the patient *madya* (wines) may be given to those patients for whom it is wholesome. [194-195]

Contra-indications in jwara

गुरुष्णस्निग्धमधुरान् कषायांश्च नवज्वरे॥१९५॥

आहारान् दोषपक्त्यर्थं प्रायशः परिवर्जयेत्।

अन्नपानक्रमः सिद्धो ज्वरधनः सम्प्रकाशितः॥१९६॥

gurūṣṇasnidhānādūrān kaṣāyāṁśca navajvarē||195||

āhārān dōṣapaktyartham prāyaśah parivarjayēt|

annapānakramah siddhō jvaraghnah samprakāśitah||196||

gurUShNasnidhānādūrān kaShAyAMshca navajvare||195||

AhArAn doShapaktyarthaM prAyashaH parivarjayet|

annapAnakramaH siddho jvaraghnaH samprakAshitaH||196||

Food ingredients, which are heavy to digest, hot in potency, with unctuous property, sweet and astringent taste should preferably be avoided in a patient suffering from *nava jwara* (the patient of first stage of *jwara*) in order to facilitate the *paka* of the *doshas*.

So, the diet and drinks, which are wholesome to the patient of *jwara* have been described here. [195-196]

Decoctions indicated in jwara

अत ऊर्ध्वं प्रवक्ष्यन्ते कषाया ज्वरनाशनाः। पाक्यं शीतकषायं वा मुस्तपर्षटकं षिवेत्॥१९७॥

सनागरं पर्षटकं पिबेद् वा सदुरालभम्| किराततिक्तकं मुस्तं गुड्हचीं विश्वभेषजम्||१९८||

पाठामुशीरं सोदीच्यं पिबेद् वा ज्वरशान्तये| ज्वरध्ना दीपनाश्चैते कषाया दोषपाचनाः||१९९||

तृष्णारुचिप्रशमना मुखवैरस्यनाशनाः|२००|

ata ūrdhvam̄ pravakṣyantē kaśāyā jvaranāśanāḥ| pākyam̄ śītakaśāyam̄ vā
mustaparpaṭakam̄ pibēt||197||

sanāgaram̄ parpaṭakam̄ pibēdvā sadurālabham| kirātatiktakam̄ mustam̄ guḍūcīm̄
viśvabhbēṣajam||198||

pāṭhāmuśīram̄ sōdīcyam̄ pibēdvā jvaraśāntayē| jvaraghnā dīpanāścaitē kaśāyā
dōṣapācanāḥ||199||

trṣṇāruciप्रशमना mukhavairasyanāśanāḥ|200|

ata UrdhvaM pravakShyante kaShAyA jvaranAshanAH| pAkyam shItakaShAyam vA
mustaparpaTakam pibet||197||

sanAgaraM parpaTakaM pibedvA sadurAlabham| kirAtatiktakaM mustaM guDUcIM
vishvabheShajam||198||

pATHAmushIraM sodIcyam pibedvA jvarashAntayel jvaraghnA dlpanAshcaite kaShAyA
doShapAcanAH||199||

tRuShNAruciप्रशमनA mukhavairasyanAshanAH|200|

Now, we will describe the *kashayas* (decoctions), which alleviate *jwara*. These are as follows:

- *Musta* and *parpataka* can be taken either in the form of decoction (*pakya*) or *shita kashaya* (soaking the drugs for overnight period in water and then filtering the content and using the filtrate).
- *Parpataka* decoction may be given to the patient along with *nagara* and *duralabha*.
- The decoction made from *kirata tikta*, *musta*, *guduchi* and *vishva bheshaja*.
- The decoction of *patha* and *ushira* along with *udichya*.

The above mentioned, decoctions which are used for the alleviation of *jwara* are *jwaraghna*. They stimulate the power of digestion, help in the *pachana* (metabolic transformation) of the *doshas*; alleviate thirst, anorexia and cure *mukha vairasya* (bad taste of the mouth). [197-199]

Kashaya in vishama jwara

कलिङ्गकाः पटोलस्य पत्रं कटुकरोहिणी||२००||

पटोलः सारिवा मुस्तं पाठा कटुकरोहिणी|

निम्बः पटोलस्त्रिफला मृद्वीका मुस्तवत्सकौ॥ २०१॥
 किराततिक्तममृता चन्दनं विश्वभेषजम्।
 गुद्यामलकं मुस्तमर्धश्लोकसमापनाः॥२०२॥
 कषायाः शमयन्त्याशु पञ्च पञ्चविधाञ्जवरान्।
 सन्ततं सततान्येद्युस्तृतीयकचतुर्थकान्॥२०३॥
 kaliṅgakāḥ paṭōlasya patraṁ kaṭukarōhiṇī॥२००॥
 paṭōlaḥ sārivā mustaṁ pāṭhā kaṭukarōhiṇī॥
 nimbaḥ paṭōlastriphalā mr̄dvīkā mustavatsakau॥१०१॥
 kirātaktaṁamṛtā candanaṁ viśvabhēṣajam।
 guḍūcyāmalakaṁ mustamardhaślōkasamāpanāḥ॥२०२॥
 kaṣāyāḥ śamayantyāśu pañca pañcavidhāñjvarān।
 santataṁ satatānyēdyustṛtiyakacaturthakān॥२०३॥
 kali~ggakAH paTolasya patraM kaTukarohiNI॥२००॥
 paTolaH sArivA mustaM pATHA kaTukarohiNI।
 nimbaH paTolastriphalA mRudvIkA mustavatsakau॥२०१॥
 kirAtatiktamamRutA candanaM vishvabheShajam।
 guDUCyAmalakaM mustamardhashlokasamApanAH॥२०२॥
 kaShAyAH shamayantyAshu pa~jca pa_jcavidhAjvarAn।
 santataM satatAnyedyustRutlyakacaturthakAn॥२०३॥

The five types of *jwara* named the *santata*, *satata*, *anyedyushka*, *tritiyaka* and *chaturthaka* are quickly cured by the five types of decoctions made from drugs described below:

1. *Kalingaka*, *patola* leaves and *katuka rohini*
2. *Patola*, *sariva*, *musta*, *patha* and *katuka rohini*
3. *Nimba*, *patola*, *triphalā*, *mrudvika*, *musta* and *vatsaka*
4. *Kiratatikta*, *amrita*, *chandana*, *vishva bheshaja*; and
5. *Guduchi*, *amalaka* and *musta*. [200-203]

वत्सकारग्वधौ पाठां षड्ग्रन्थां कटुरोहिणीम्।
 मूर्वा सातिविषां निम्बं पटोलं धन्वयासकम्॥२०४॥
 वचां मुस्तमुशीरं च मधुकं त्रिफलां बलाम्।

पाक्यं शीतकषायं वा पिबेज्जवरहरं नरः॥२०५॥
 मधूकमुस्तमृद्वीकाकाशमर्याणि परूषकम्।
 त्रायमाणामुशीरं च त्रिफलां कटुरोहिणीम्॥२०६॥
 पीत्वा निशिस्थितं जन्तुज्वराच्छीघ्रं विमुच्यते॥२०७।
 vatsakāragvadhau pāṭhāṁ ṣadgranthāṁ kaṭurōhiṇīm|
 mūrvāṁ sātiviśāṁ nimbarāṁ paṭolāṁ dhanvayāsakam॥204॥
 vacāṁ mustamuśīram ca madhukāṁ triphalāṁ balām|
 pākyāṁ śītakaśāyāṁ vā pibējjvaraharam narah॥205॥
 madhūkamustamṛdvīkākāśmaryāṇi parūṣakam|
 trāyamāṇāmuśīram ca triphalāṁ kaṭurōhiṇīm॥206॥
 pītvā niśisthitāṁ janturjvarācchīghram vimucyatē॥207।
 vatsakAragvadhau pATHAM ShaDgranthAM kaTurohiNIm|
 mUrvAM sAtiviShAM nimbaM paTolaM dhanvayAsakam॥204॥
 vacAM mustamushIraM ca madhukaM triphalaM balAm|
 pAkyaM shItakaShAyaM vA pibejjvaraharaM naraH॥205॥
 madhUkamustamRudvIkAkAshmaryANi parUShakam|
 trAyamANA mushIraM ca triphalaM kaTurohiNIm॥206॥
 pltvA nishisthitaM janturjvarAcchIghraM vimucyate॥207।

The decoction or *shita kashaya* of the following drugs should be taken by a person for curing *jwara*:

1. *vatsaka, aragavadha, patha, shad grantha* and *katurohini*
2. *murva* along with *ativisha, nimbi, patola* and *dhanavayasaka*
3. *vacha, musta, ushira, madhuka, triphala* and *bala*

The *shita kashaya* of *madhuka, musta, mrudvika, kashmarya, parushaka, trayamana, ushira, triphala*, and *katu rohini*, prepared by keeping overnight, immediately cures the *jwara* of living beings. [204-207]

जात्यामलकमुस्तानि तद्वद्धन्वयवासकम्॥२०७॥
 विबद्धदोषो ज्वरितः कषायं सगुडं पिबेत्।
 त्रिफलां त्रायमाणां च मृद्वीकां कटुरोहिणीम्॥२०८॥

पित्तश्लेष्महरस्त्वेष कषायो हयानुलोमिकः।
 त्रिवृताशर्करायुक्तः पित्तश्लेष्मज्वरापहः॥२०९॥
 jātyāmalakamustāni tadvaddhanvayavāsakam॥२०७॥
 vibaddhadōsho jvaritah kaśāyam saguḍam pibēt
 triphalāṁ trāyamāṇāṁ ca mṛdvīkāṁ kaṭurōhiṇīm॥२०८॥
 pittaślēshmaharastvēṣa kaśāyō hyānulōmikah|
 trivṛtāśarkarāyuktaḥ pittaślēshmajvarāpahah॥२०९॥
 jAtyAmalakamustAni tadvaddhanvayavAsakam॥२०७॥
 vibaddhadoSho jvaritaH kaShAyaM saguDaM pibet|
 triphalAM trAyamANAM ca mRudvIkAM kaTurohiNIm॥२०८॥
 pittashleShmaharastveSha kaShAyo hyAnulomikaH|
 trivRutAsharkarAyuktaH pittashleShmajvarApahaH॥२०९॥

The decoction of either *jati*, *amalaka* and *musta* or that of *dhanavayavasakam* along with *guda* (jaggery) should be given to the patient suffering from *jwara* where the *doshas* are in *vibaddha* state (adhered to *dhatus*).

The decoction of *triphala*, *trayamana*, *mridvika* and *katu rohini* alleviates *pitta* and *shleshma* and causes the *anulomana* of *doshas*. This decoction when taken along with *trivrita* and *sharkara* cures *jwara* caused by the aggravation of *pitta* and *shleshma*. [207-209]

Formulations used in *sannipata jwara*

बृहत्यौ वत्सकं मुस्तं देवदारु महौषधम्।
 कोलवल्ली च योगोऽयं सन्निपातज्वरापहः॥२१०॥
 शटी पुष्करमूलं च व्याघ्री शृङ्गी दुरालभा।
 गुड्ढी नागरं पाठा किरातं कटुरोहिणी॥२११॥
 एष शट्यादिको वर्गः सन्निपातज्वरापहः।
 कासहृदग्रहपार्श्वार्तिंश्वासतन्द्रासु शस्यते॥२१२॥
 बृहत्यौ पौष्करं भार्गी शटी शृङ्गी दुरालभा।
 वत्सकस्य च बीजानि पटोलं कटुरोहिणी॥२१३॥
 बृहत्यादिर्गणः प्रोक्तः सन्निपातज्वरापहः।

कासादिषु च सर्वेषु दद्यात् सोपद्रवेषु च॥२१४॥
 bṛhatyau vatsakam mustam dēvadāru mahauṣadham|
 kōlavallī ca yōgō'yaṁ sannipātajvarāpahah||210||
 śaṭī puṣkaramūlam ca vyāghrī śṛṅgī durālabhā|
 guḍūcī nāgaram pāṭhā kirātam kaṭurōhiṇī||211||
 ēṣa śatyādikō vargaḥ sannipātajvarāpahah|
 kāsaḥṛdgrahapārśvārtiśvāsatandrāsu śasyatē||212||
 bṛhatyau pauṣkaram bhārgī śaṭī śṛṅgī durālabhā|
 vatsakasya ca bijāni paṭolam kaṭurōhiṇī||213||
 bṛhatyādirganaḥ prōktaḥ sannipātajvarāpahah|
 kāsādiṣu ca sarvēṣu dadyāt sōpadravēṣu ca||214||
 bRuhatyau vatsakaM mustaM devadAru mahauShadham|
 kolavallI ca yogo~ayaM sannipAtajvarApahaH||210||
 shaTI puShkaramUlaM ca vyAghrl shRu~ggl durAlabha|
 guDUcl nAgaraM pAThA kirAtaM kaTurohiNI||211||
 eSha shaTyAdiko vargaH sannipAtajvarApahaH|
 kAsahRudgrahapArshvArtishvAsatandrAsu shasyate||212||
 bRuhatyau pauShkaraM bhArgI shaTI shRu~ggl durAlabha|
 vatsakasya ca bljAni paTolaM kaTurohiNI||213||
 bRuhatyAdirgaNaH proktaH sannipAtajvarApahaH|
 kAsAdiShu ca sarveShu dadyAt sopadraveShu ca||214||

A decoction prepared from both the varieties of *bruhati*, *vatsaka*, *musta*, *devadarū*, *mahaushadha*, and *kolavalli* cures *sannipata jwara*. *Shati*, *pushkaramula*, *vyaghri*, *shringi*, *duralabha*, *guduchi*, *nagara*, *patha*, *kirata*, *katurohini* - all together are called by the name of *shatyadi varga*. The decoction made from these drugs helps in curing *sannipāta jwara* along with *kasa* (coughs), *hrid graham* (a kind of heart disease), *parshva arti* (pain in the flanks), *shvasa* (breathlessness) and *tandra* (drowsiness).

Both the varieties of *brihati*, *paushkar*, *bhaargi*, *shathi*, *shringī*, *duraalabha*, seeds of *vatsaka*, *patola* and *katu rohini* – are together called the *brihatyadi gana* and the decoction made from it cures the *sannipata jwara*. And is also useful in complications like *kasa*. [210-214]

कषायाश्च यवाग्वश्च पिपासाज्वरनाशनाः।
 निर्दिष्टा भेषजाध्याये भिषक्तानपि योजयेत्॥२१५॥
 kaśāyāśca yavāgvaśca pipāsājvaranāśanāḥ।
 nirdiṣṭā bhēṣajādhyāyē bhiṣaktānapi yōjayēt॥२१५॥
 kaShAyAshca yavAgvashca pipAsAjvaranAshanAH|
 nirdiShTA bheShajAdhyAye bhiShaktAnapi yojayet||215||

Different types of decoctions and gruels are also described in the first four chapters of Sutra Sthana which also cure *pipasa* (thirst) and *jwara*. They may also be used by the physician for the treatment of *jwara*. [215]

Advantage of ghee

ज्वराः कषायैर्वमनैर्लङ्घनैर्लघुभोजनैः।
 रुक्षस्य ये न शाम्यन्ति सर्पिस्तेषां भिषग्जितम्॥२१६॥
 रुक्षं तेजो ज्वरकरं तेजसा रुक्षितस्य च।
 यः स्यादनुबलो धातुः स्नेहवद्यः स चानिलः॥२१७॥
 jvarāḥ kaśāyairvamanairlaṅghanairlaghubhōjanaiḥ।
 rūkṣasya yē na śāmyanti sarpistēśāṁ bhiṣagjitatam॥२१६॥
 rūkṣam tējō jvarakaram tējasā rūkṣitasya ca|
 yaḥ syādanubalō dhātuḥ snēhavadhyah [1] sa cānilah॥२१७॥
 jvarAH kaShAyairvamanairla~gghanairlaghubhojanaiH|
 rUkShasya ye na shAmyanti sarpisteShAM bhiShagjitatam||216||
 rUkShaM tejo jvarakaram tejasA rUkShitasya ca|
 yaH syAdanubalo dhAtuH snehavadhyaH [1] sa cAnilaH||217||

If in a person of ununctuous disposition, *jwara* doesn't get cured by the use of decoctions, emesis, fasting and by light diet, then *jwara* in such a person should be cured by the use of medicated *ghrita* (ghee). *Jwara* is manifested by ununctuous state of *tejasa* in such a person and a patient suffering from *jwara* further develops ununctuousness due to the action of this *tejasa* (*pitta*). The *vata* gets aggravated due to the action of this *tejasa* and it can be corrected by the use of some unctuous material like *ghrita*. [216-217]

कषायाः सर्व एवैते सर्पिषा सह योजिताः।
 प्रयोज्या ज्वरशान्त्यर्थमग्निसन्धुक्षणाः शिवाः॥२१८॥

kasāyāḥ sarva ēvaitē sarpisā saha yōjitāḥ|
 prayōjyā jvaraśāntyarthamagnisandhukṣanāḥ śivāḥ||218||
 kaShAyAH sarva evaite sarpisH A saha yojitAH|
 prayojyA jvarashAntyarthamagnisandhukShaNAH shivAH||218||

Ghrīta should be added to all those decoctions described above for the alleviation of *jwara*. They stimulate the power of digestion and endow auspiciousness. [218]

Various medicated ghee formulations

पिप्पल्यश्चन्दनं मुस्तमुशीरं कटुरोहिणी।
 कलिङ्गकास्तामलकी सारिवाऽतिविषा स्थिरा॥२१९॥
 द्राक्षामलकबिल्वानि त्रायमाणा निदिग्धिका।
 सिद्धमितैर्घृतं सद्यो जीर्णज्वरमपोहति॥२२०॥
 क्षयं कासं शिरःशूलं पाश्वर्शूलं हलीमकम्।
 अंसाभितापमाग्निं च विषमं सन्नियच्छति॥२२१॥
 pippalyaścandanam mustamuśīram kaṭurōhiṇī।
 kaliṅgakāstāmalakī sārivā'tviṣā sthirā॥219॥
 drākṣāmalakabilvāni trāyamāṇā nidigdhikā।
 siddhamitairghṛtam sadyo jīrṇajvaramapōhati॥220॥
 kṣayam kāsam śiraḥśūlam pārśvaśūlam halīmakam।
 aṁsābhītāpamāgnim ca viṣamam sanniyacchatī॥221॥
 pippalyashcandanaM mustamushlraM kaTurohiNI।
 kali~ggakAstAmalakI sArivA~ativiShA sthirA॥219॥
 drAkShAmalakabilvAni trAyamANA nidigdhikA।
 siddhamitairghRutaM sadyo jIrnajvaramapohati॥220॥
 kShayaM kAsaM shiraHshUlaM pArshvashUlaM hallmakam।
 aMsAbhitApamAgniM ca viShamaM sanniyacchatii॥221॥

Medicated *ghrita* prepared by boiling with *pipali*, *chandana*, *musta*, *katurohini*, *kalingaka*, *tamalaki* (*bhumyamalaki*), *sariva*, *ativisha*, *sthira*, *draksha*, *amalaka*, *bilva*, *trayamana* and *nidigdhika* cure chronic types of *jwara* instantaneously. It also cures *kshaya* (consumption), *kasa* (coughs), *shirahshula* (headache), *parshvashula* (pain in

the sides of chest), *halimaka* (a type of jaundice), *ansabhitapa* (burning sensation in the scapular region) and *vishama agni* (irregularity in the power of digestion). [219-221]

वासां गुदूचीं त्रिफलां त्रायमाणां यवासकम्।
पक्त्वा तेन कषायेण पयसा द्विगुणेन च॥२२२॥
पिप्पलीमुस्तमृद्वीकाचन्दनोत्पलनागरैः।
कल्कीकृतैश्च विपचेद्धृतं जीर्णज्वरापहम्॥२२३॥

vāsāṁ gudūcīṁ triphalāṁ trāyamāṇāṁ yavāsakam|
paktvā tēna kaśāyēṇa payasā dviguṇēna ca||222||
pippalīmustamṛdvīkācandanōtpalanāgaraiḥ|
kalkīkṛtaiśca vipacēddhṛtam jīrṇajvarāpaham||223||

vAsAM guDUcIM triphalAM trAyamANAM yavAsakam|
paktvA tena kaShAyeNa payasA dviguNena ca||222||
pippallmustamRudvIkAcandanotpalanAgaraiH|
kalkIkRutaishca vipaceddhRutaM jlRNajvarApaham||223||

Ghrita prepared from the decoction made by boiling *vasa*, *guduchi*, *triphalā*, *trayamana* and *yavasaka*, milk in double the quantity, paste of *pippali*, *musta*, *mridvika*, *chandana*, *utpala* and *nagara* cures chronic fevers.[222-223]

बलां श्वदंष्ट्रां बृहतीं कलसीं धावनीं स्थिराम्।
निम्बं पर्पटकं मुस्तं त्रायमाणां दुरालभाम्॥२२४॥
कृत्वा कषायं पेष्यार्थं दद्यात्तामलकीं शटीम्।
द्राक्षां पुष्करमूलं च मेदामामलकानि च॥२२५॥

घृतं पयश्च तत् सिद्धं सर्पिजरहरं परम्।
क्षयकासशिरःशूलपाश्वर्शूलांसतापनुत् ॥२२६॥

balāṁ śvadāṁṣṭrāṁ bṛhatīṁ kalasīṁ dhāvanīṁ sthirām|
nimbarṁ parpaṭakam mustam trāyamāṇāṁ durālabhām||224||

kṛtvā kaśāyam pēṣyārthē dadyāttāmalakīṁ śatīm|
drākṣāṁ puṣkaramūlaṁ ca mēdāmāmalakāni ca||225||

ghṛtam payaśca tat siddham sarpirjvaraharam param|
kṣayakāsaśiraḥsūlapārśvaśūlāṁsatāpanut ||226||

balAM shvadaMShTrAM bRuhatIM kalasiM dhAvanIM sthirAm|
 nimbaM parpaTakaM mustaM trAyamANAM durAlabhAm||224||
 kRutvA kaShAyaM peShyArthe dadyAttAmalakIM shaTIm|
 drAkShAM puShkaramUlaM ca medAmAmalakAni ca||225||
 ghRutaM payashca tat siddhaM sarpirjvaraharaM param|
 kShayakAsashiraHshUlapArshvashUIAMsatApanut ||226||

Ghrita prepared from boiling the decoction of *bala*, *shvadamstra*, *brihati*, *kalasi*, *dhavani*, *sthira*, *nimba*, *parpataka*, *musta*, *trayamana* and *duralabha*; paste of *tamalaki*, *shati*, *draksha*, *pushkarmula*, *meda* and *amalakī*, ghee and milk; is an excellent medicine for the treatment of *jwara*. It also cures *kshaya* (consumption), *kasa* (coughs), *shirahshula* (headache), *parshvashula* (pain in the sides of chest), *halimaka* (a type of jaundice), *ansabhitapa* (burning sensation in the scapular region. [224-226]

Formulations used in purification therapies

ज्वरिभ्यो बहुदोषेभ्य ऊर्ध्वं चाधश्च बुद्धिमान्।
 दद्यात् संशोधनं काले कल्पे यदुपदेक्ष्यते॥२२७॥
 मदनं पिप्पलीभिर्वा कलिङ्गैर्मधुकेन वा।
 युक्तमुष्णाम्बुना पेयं वमनं ज्वरशान्तये॥२२८॥
 क्षौद्राम्बुना रसेनेक्षोरथवा लवणाम्बुना।
 ज्वरे प्रच्छर्दनं शस्तं मदयैर्वा तर्पणेन वा॥२२९॥
 मृद्वीकामलकानां वा रसं प्रस्कन्दनं पिबेत्।
 रसमामलकानां वा घृतभृष्टं ज्वरापहम्॥२३०॥
 लिह्याद् वा त्रैवृतं चूर्णं संयुक्तं मधुसर्पिषा।
 पिबेद् वा क्षौद्रमावाप्य सघृतं त्रिफलारसम्॥२३१॥
 आरग्वधं वा पयसा मृद्वीकानां रसेन वा।
 त्रिवृतां त्रायमाणां वा पयसा ज्वरितः पिबेत्॥२३२॥
 ज्वराद् विमुच्यते पीत्वा मृद्वीकाभिः सहाभयाम्।
 पयोऽनुपानमुष्णं वा पीत्वा द्राक्षारसं नरः॥२३३॥
 jvaribhyō bahudōṣēbhya ūrdhvam cādhaśca buddhimān|
 dadyāt saṁśōdhanaṁ kālē kalpē yadupadēkṣyatē॥227॥

madanam pippalibhirvā kaliṅgairmadhukēna vā|
yuktamuṣṇāmbunā pēyam vamanam jvaraśāntayē||228||

kṣaudrāmbunā rasēnēkṣōrathavā lavaṇāmbunā|
jvarē pracchardanam śastam madyairvā tarpaṇēna vā||229||

mṛdvīkāmalakānām vā rasam praskandanam pibēt|
rasamāmalakānām vā ghṛtabhṛṣṭam jvarāpaham||230||

lihyādvā traivṛtam cūrṇam saṁyuktam madhusarpiṣā|
pibēdvā kṣaudramāvāpya saghṛtam triphalārasam||231||

āragvadham vā payasā mṛdvīkānām rasēna vā|
trivṛtam trāyamāṇām vā payasā jvaritah pibēt||232||

jvarādvimucyatē pītvā mṛdvīkābhiḥ sahābhayām|
payō'nupānamuṣṇam vā pītvā drākṣārasam narah||233||

jvaribhyo bahudoShebhya UrdhvaM cAdhashca buddhimAn|
dadyAt saMshodhanaM kAlē kalpe yadupadekShyate||227||

madanaM pippallbhivA kali~ggairmadhukena vA|
yuktamuShNAmbunA peyaM vamanam jvarashAntaye||228||

kShaudrAmbunA rasenekShorathavA lavaNAmbunA|
jvare pracchardanaM shastaM madyairvA tarpaNena vA||229||

mRudvIkAmalakAnAM vA rasaM praskandanaM pibet|
rasamAmalakAnAM vA ghRutabhRuShTaM jvarApaham||230||

lihyAdvA traivRutaM cUrNaM saMyuktaM madhusarpiShA|
pibedvA kShaudramAvApya saghRutaM triphalArasam||231||

AragvadhaM vA payasA mRudvIkAnAM rasena vA|
trivRutAM trAyamANAM vA payasA jvaritaH pibet||232||

jvarAdvimucyate pītvA mRudvIkAbhiH sahAbhayAm|
payo~anupAnamuShNaM vA pītvA drAkShArasaM narah||233||

Elimination therapies (of *doshas*), both in upward and downward routes should be administered at appropriate time, to a patient suffering from *jwara*, having more

aggravated *doshas*. Details of these methods and the formulations used for them will be discussed in the Kalpa Sthana.

Vamana performed by hot water and *madana* mixed with either *pippali*, *kalinga* or *madhuka* alleviates *jwara*.

Emetic therapy given by administering water mixed with honey, sugar cane juice, water mixed with rock salt, alcoholic drinks and *tarpana* (roasted corn flour eaten mixed with water) is also useful in *jwara*.

A patient suffering from *jwara* can also be given the juice of *mridvika* and *amalaka* for purgation.

The juice of *āmalaka* fried with *ghrita* also cures *jwara*.

Following recipes are also useful for purgation in a patient suffering from *jwara*:

- powder of *trivrita* mixed with honey and *ghrita* prepared in the form of linctus.
- Juice of *triphalā* mixed with honey and *ghrita*
- *Āragvadha* along with milk or the juice of *mṛdvikā*
- *trivrita* and *trāyamāṇa* along with milk
- *mṛdvikā* and *abhaya* along with warm milk or the juice of *drāksā* as *anupāna*. [227-233]

Formulations with medicated milk

कासाच्छ्वासाच्छिरःशूलात्पाश्वशूलाच्चिरज्वरात्।

मुच्यते ज्वरितः पीत्वा पञ्चमूलीशृतं पयः॥२३४॥

एरण्डमूलोत्क्वथितं ज्वरात् सपरिकर्तिकात्।

पयो विमुच्यते पीत्वा तद्वद्बिल्वशलाटुभिः॥२३५॥

त्रिकण्टकबलाद्याघीगुडनागरसाधितम्।

वर्चमूत्रविबन्धैनं शोफज्वरहरं पयः॥२३६॥

सनागरं समृद्धीकं सघृतक्षौद्रशर्करम्।

शृतं पयः सखर्जूरं पिपासाज्वरनाशनम्॥२३७॥

चतुर्गुणेनाभ्यसा वा शृतं ज्वरहरं पयः।

धारोष्णं वा पयः सद्यो वातपितज्वरं जयेत्॥२३८॥

जीर्णज्वराणां सर्वेषां पयः प्रशमनं परम्।

पेयं तदुष्णं शीतं वा यथास्वं भेषजैः शृतम्॥२३९॥

kāśācchvāśācchirahśūlātpārśvaśūlāccirajvarāt।

mucyatē jvaritah pītvā pañcamūlīśṛtam̄ payah||234||
 ēraṇḍamūlōtkvathitam̄ jvarāt saparikartikāt|
 payō vimucyatē pītvā tadvadbilvaśalāṭubhih||235||
 trikaṇṭakabalāvyāghrīguḍanāgarasādhitam|
 varcōmūtravibandhaghnam̄ śōphajvaraharam̄ payah||236||
 sanāgaram̄ samṛdvīkarāt saghṛtakṣaudraśarkaram|
 śṛtam̄ payah sakharjūram̄ pipāsājvaranāśanam||237||
 caturguṇenāmbhasā vā śṛtam̄ jvaraharam̄ payah|
 dhārōṣṇam̄ vā payah sadyō vātapittajvaram̄ jayēt||238||
 jīrṇajvarānām̄ sarvēśām̄ payah praśamanam̄ param|
 pēyam̄ tадuṣṇam̄ śītam̄ vā yathāsvam̄ bhēṣajaiḥ śṛtam||239||
 kAsAcchvAsAcchiraHshUIAtpArshvashUIAccirajvarAt|
 mucyate jvaritaH pltvA pa~jcamUllshRutaM payaH||234||
 eraNDamUlotkvathitaM jvarAt saparikartikAt|
 payo vimucyate pltvA tadvadbilvashaIATubhiH||235||
 trikaNTakabalAvyAghrlguDanAgarasAdhitam|
 varcomUtravibandhaghnaM shophajvaraharaM payaH||236||
 sanAgaraM samRudvIkam̄ saghRutakShaudrasharkaram|
 shRutaM payaH sakharjUraM pipAsAjvaranAshanam||237||
 caturguNenAmbhasA vA shRutaM jvaraharaM payaH|
 dhAroShNaM vA payaH sadyo vAtapittajvaraM jayet||238||
 jlrNajvarANAM sarveShAM payaH prashamanaM param|
 peyaM tадuShNaM shItaM vA yathAsvaM bheShajaiH shRutam||239||

A patient suffering from *chira jwara* (chronic type of fevers), *kasa*, *shvāsa*, *shirahshula* and *parshvashula* gets cured by taking milk boiled with *panchamula* (*bilva* and *shyonaka*, *gambhari*, *patala* and *ganikarika*).

Milk boiled either with the root of *eranda* or the *shalatu* (unripe fruit cut into pieces) of *bilva* when taken cures fever along with *parikartika* in the abdomen (sawing pain).

Milk boiled with *trikantaka*, *bala*, *vyaghri*, *gud* and *nagara* cures *jwara* along with *shopha* (edema) and obstruction of the urine and feces.

The medicine prepared by boiling milk with *nagara*, *mridika*, *khajura* and added with *ghrita*, honey and sugar cures *jwara* associated with thirst.

Milk boiled by adding water four times cures *jwara*.

Dharoshna milk (freshly milked from the cow, when its still hot) immediately cures *jwara* caused by the aggravation of *vata* and *pitta*.

All types of chronic fevers are alleviated by milk. It can be taken either hot, cold or after boiling with drugs appropriate to the kind of fever. [234-239]

Medicated enemas

प्रयोजयेज्जवरहरान्निरुहान् सानुवासनान्।
पक्वाशयगते दोषे वक्ष्यन्ते ये च सिद्धिषु॥२४०॥
पटोलारिष्टपत्राणि सोशीरश्चतुरङ्गुलः।
हीबेरं रोहिणी तिक्ता श्वदंष्ट्रा मदनानि च॥२४१॥
स्थिरा बला च तत् सर्वं पयस्यर्थोदके शृतम्।
क्षीरावशेषं निर्यूहं संयुक्तं मधुसर्पिषा॥२४२॥
कल्कैर्मदनमुस्तानां पिप्पल्या मधुकस्य च।
वत्सकस्य च संयुक्तं बस्तिं दद्याज्जवरापहम्॥२४३॥
शुद्धै मार्गं हृते दोषे विप्रसन्नेषु धातुषु।
गताङ्गशूलो लघ्वङ्गः सद्यो भवति विज्वरः॥२४४॥
आरग्वथमुशीरं च मदनस्य फलं तथा।
चतस्रः पर्णिनीश्चैव [१] निर्यूहमुपकल्पयेत्॥२४५॥
प्रियङ्गुर्मदनं मुस्तं शताहवा मधुयष्टिका।
कल्कः सर्पिर्गुडः क्षौद्रं ज्वरध्नो बस्तिरुत्तमः॥२४६॥
गुड्यीं त्रायमाणां च चन्दनं मधुकं वृषम्।
स्थिरां बलां पृश्निपर्णीं मदनं चेति साधयेत्॥२४७॥
रसं जाङ्गलमांसस्य रसेन सहितं भिषक्।
पिप्पलीफलमुस्तानां कल्केन मधुकस्य च॥२४८॥
ईषत्सलवणं युक्त्या निरुहं मधुसर्पिषा।

ज्वरप्रशमनं दद्याट्बलस्वेदरुचिप्रदम्॥२४९॥
जीवन्तीं मधुकं मेदां पिप्पलीं मदनं वचाम्।
ऋद्धिं रास्जां बलां विश्वं [२] शतपुष्पां शतावरीम्॥२५०॥
पिष्ट्वा क्षीरं जलं सर्पिस्तैलं च विपचेदभिषक्।
आनुवासनिकं स्नेहमेतं विद्याज्ज्वरापहम्॥२५१॥
पटोलपिचुमर्दभ्यां गुडूच्या मधुकेन च।
मदनैश्च शृतः स्नेहो ज्वरघ्नमनुवासनम्॥२५२॥
चन्दनागुरुकाशमर्यपटोलमधुकोत्पलैः।
सिद्धः स्नेहो ज्वरहरः स्नेहबस्तिः प्रशस्यते॥२५३॥
prayōjayējjvaraharānnirūhān sānuvāsanān|
pakvāśayagatē dōshē vakṣyantē yē ca siddhiṣu॥२४०॥
paṭōlāriṣṭapatrāṇī sōśīraścaturaṅgulah|
hrībēram rōhiṇī tiktā śvadāṁśtrā madanāni ca॥२४१॥
sthirā balā ca tat sarvam̄ payasyardhōdakē śṭtam|
kṣīrāvaśeṣam̄ niryūham̄ saṁyuktam̄ madhusarpiṣā॥२४२॥
kalkairmadanamustānām pippalyā madhukasya ca|
vatsakasya ca saṁyuktam̄ bastīm dadyājjvarāpaham॥२४३॥
śuddhē mārgē hṛtē dōshē viprasannēṣu dhātuṣu|
gatāṅgaśūlō laghvaṅgah sadyō bhavati vijvarah॥२४४॥
āragvadhamuśīram̄ ca madanasya phalaṁ tathā|
catasrah parṇīścaiva [१] niryūhamupakalpayēt॥२४५॥
priyaṅgurmadanam̄ mustam̄ śatāhvā madhuyaṣṭikā|
kalkah sarpirguḍah kṣaudram̄ jvaraghno bastiruttamah॥२४६॥
guḍūcīm trāyamāṇām̄ ca candanam̄ madhukam̄ vṛṣam|
sthīrām̄ balām̄ pr̄śniparṇīm̄ madanam̄ cēti sādhayēt॥२४७॥
rasam̄ jāṅgalamāṁsasya rasēna sahitam̄ bhiṣak|
pippalīphalamustānām kalkēna madhukasya ca॥२४८॥
T̄ṣatsalavaṇam̄ yuktyā nirūham̄ madhusarpiṣā|

jvarapraśamanam dadyādbalasvēdarucipradam||249||
jīvantīṁ madhukam mēdāṁ pippalīṁ madanam vacām|
ṛddhim rāsnāṁ balāṁ viśvam [2] śatapuspāṁ śatāvarīṁ||250||
piṣṭvā kṣīram jalarū sarpistailam ca vipacēdbhiṣak|
ānuvāsanikam snēhamētam vidyājjvarāpaham||251||
paṭōlapicumardābhyaṁ guḍūcyā madhukēna ca|
madanaiśca śītaḥ snēhō jvaraghnamanuvāsanam||252||
candanāgurukāśmaryapaṭōlamadhukōtpalaiḥ|
siddhaḥ snēhō jvaraharaḥ snēhabastiḥ praśasyatē||253||
prayojayejjvaraharAnnirUhAn sAnuvAsanAn|
pakvAshayagate doShe vakShyante ye ca siddhiShu||240||
paToIARIshTapatrANI soshIrashcatura~ggulaH|
hrlberaM rohiNI tiktA shvadaMShTrA madanAni ca||241||
sthirA balA ca tat sarvaM payasyardhodake shRutam|
kShlrAvasheShaM niryUhaM saMyuktaM madhusarpiShA||242||
kalkairmadanamustAnAM pippalyA madhukasya ca|
vatsakasya ca saMyuktaM bastiM dadyAjvarApaham||243||
shuddhe mArge hRute doShe vprasanneShu dhAtuShu|
gatA~ggashUlo laghva~ggaH sadyo bhavati vijvaraH||244||
AragvadhamushIraM ca madanasya phalaM tathA|
catasraH parNinlshcaiva [1] niryUhamupakalpayet||245||
priya~ggurmadanaM mustaM shatAhvA madhuyaShTikA|
kalkaH sarpirguDaH kShaudraM jvaraghno bastiruttamaH||246||
guDUcIM trAyamANAM ca candanaM madhukaM vRuSham|
sthirAM balAM pRushniparNIM madanaM ceti sAdhayet||247||
rasaM ja~ggalamAMsasya rasena sahitam bhiShak|
pippallphalamustAnAM kalkena madhukasya ca||248||
IShatsalavaNaM yuktyA nirUhaM madhusarpiShA|

jvaraprashamanaM dadyAdbalasvedarucipradam||249||
jlvantIM madhukaM medAM pippalIM madanaM vacAm|
RuddhiM rAsnAM balAM vishvaM [2] shatapuShpAM shatAvarIm||250||
piShTvA kShIraM jalaM sarpistailaM ca vipacedbhiShak|
AnuvAsanikaM snehametaM vidyAjvarApaham||251||
paTolapicumardAbhyAM guDUCyA madhukena cal|
madanaishca shRutaH sneho jvaraghnamanuvAsanam||252||
candanAgurukAshmaryapaTolamadhukotpalaiH|
siddhaH sneho jvaraharaH snehabastiH prashasyate||253||

Niruha and *anuvasana* types of *bastis* (medicated enemas) which will be described in the Siddhi Sthana should be administered when the *doshas* are lodged in the *pakvashaya*, for the treatment of *jwara*.

Patola, arishtha leaves, *ushira, chaturangula, hribera, rohini, tikta, shvadanshtrā, madana, sthira* and *bala* – these drugs should be boiled in milk by adding water which should be taken in equal the quantity of milk. This should be boiled till the amount equal to that of milk is left. To this mixture honey and *ghrita* should be added along with the *kalka* of *madana, musta, pippali, madhuka* and *vatsaka*. This portion should be administered in the form of enema for the cure *jwara*. When the *margas* (channels) are clean, the *doshas* are eliminated and the *dhatus* are refreshed. Then the pain in the body disappears and the body becomes light and instantaneously free from fever.

A decoction prepared from *aragvadha, ushira*, fruits of *madana, shalaparni, prishniparni, mashaparni* and *mudgaparni*, mixed with the paste of *priyangu, madana, musta, shatavha* and *madhuyashti* should be used as an enema, for the cure of *jwara*.

A decoction prepared from *guduchi, trayamana, chandana, madhuka, vrisha, sthira, bala, prishniparni* and *madana*, to which meat soup of *jangala* type of animals (those inhabiting in arid lands) and the paste of *pippali, phala, musta* and *madhuka* has been added.

A small quantity of rock salt should also be added to this decoction along with honey and *ghrita* and used as *niruha* type of medicated enema for the alleviation of *jwara* as it promotes strength, sweating and taste appreciation.

A medicated *ghrita* prepared from the paste of *jeevanti, madhuka, meda, pippali, madana, vacha, riddhi, rasna, bala, vishva, shatapushpa* and *shatavari*, boiled with milk, water, *ghrita* and oil, should be used as *anuvasana basti* for the treatment of *jwara*.

The *sneha* (*ghrita* and oil) boiled with *paṭola, pichumarda, guduchi, madhuka* and *madana* should also be used as *anuvasana basti* for the treatment of *jwara*.

The *sneha* boiled with *chandana*, *aguru*, *kashmarya*, *patola*, *madhuka* and *utpala* is exceedingly useful for the administration as *anuvasana basti* to cure *jwara*. [241-253]

Indications of *shiro-virechana* (nasal errhines)

यदुक्तं भेषजाद्याये विमाने रोगभेषजे।

शिरोविरेचनं कुर्याद्युक्तिजस्तज्ज्वरापहम्॥२५४॥

यच्च नावनिकं तैलं याश्च तैलं याश्च प्राग्धूमवर्तयः।

मात्राशितीये निर्दिष्टाः प्रयोज्यास्ता ज्वरेष्वपि॥२५५॥

yaduktam bhēṣajādhyāyē vimānē rōgabhēṣajē|

śirōvirēcanam kuryādyuktijñastajjvarāpaham||254||

यत्तद्विरेचनाम् तैलम् यास्ता तैलम् यास्ता प्राग्धुमवर्तयाहि।

mātrāśitīyē nirdiṣṭāḥ prayōjyāstā jvarēṣvapi||255||

yaduktaM bheShajAdhyAye vimAne rogabheShaje|

shirovirecanaM kuryAdyuktij~jastajjvarApaham||254||

यत्तद्विरेचनाम् तैलम् यास्ता तैलम् यास्ता प्राग्धुमवर्तयाहि।

mAtrAshitlye nirdiShTAH prayojyAstA jvareShvapi||255||

Drugs for *shirovirechana* therapy (module of taking out the *doshas* from the *uttamāṅga - shira*) are already described in the *Bheshaja Chatushka* of Sutra Sthana and Rogabhishagjitiya Vimana of Vimana Sthana. A physician well versed in these treatment modules should apply them for the treatment of *jwara*.

The medicated oil and the *dhuma varti* described for application as nasal drop and *dhuma varti* respectively in Matrashiteeya Adhyaya, should also be used for the treatment of *jwara*.[254-255]

External applications

अङ्गाद्यगांश्च प्रदेहांश्च परिषेकांश्च कारयेत्।

यथाभिलासं शीतोष्णं विभज्य द्विविधं ज्वरम्॥२५६॥

सहस्रधौतं सर्पिर्वा तैलं वा चन्दनादिकम्।

दाहज्वरप्रशमनं दद्यादभ्यञ्जनं भिषक्॥२५७॥

abhyāṅgāṁśca pradēhāṁśca pariṣēkāṁśca kārayēt।

yathābhilāśam śītōṣṇam vibhajya dvividham jvaram||256||

sahasradhautam sarpivā tailam vā candanādikam।

dāhajvara praśamanam dadyādabhyañjanam bhiṣak||257||
 abhya~ggAMshca pradehAMshca pariShekAMshca kArayet|
 yathAbhilAShaM shltoShNaM vibhajya dvividhaM jvaram||256||
 sahasradhautaM sarpirvA tailaM vA candanAdikam|
 dAhajvara prasha manam dadyAdabhya~jjanaM bhiShak||257||

Abhyanga (massage), *pradeha* (unction) and *parisheka* (medicated bath) should be given to the patient, either hot or cold, according to the appropriateness of the two types of *jwara* of the patient.

Medicated *ghrita* called as *Sahasra dhauta ghrita* and medicated oil called *chandanadya taila* should be given for massage to the patient, as these alleviate *jwara* associated with burning. [256-257]

Chandanadya taila

अथ चन्दनादयं तैलमुपदेक्ष्यामः-

चन्दनभद्रश्रीकालानसार्यकालीयकपद्मापद्मकोशीरसारिवामधुकप्रपोटडीच्यवन्यपद्मोत्पलनलिनकुमुद-सौगन्धिकपुण्डरीकशतपत्रबिसमूणालशालूकशैवालकशेरुकानन्ताकशकाशेक्षुदर्भशरनलशा लिम्लजम्बुवेतसवानीरगुन्द्रा-कक्षासनाश्वकर्णस्यन्दनवातपोथशालतालधवित्तिनिशखदिरकदरकदम्ब काशमर्यफलसर्जप्लक्षवटकपीतनोदुम्बराश्वत्थ-न्यग्रोधधातकीदूर्वत्कटशृङ्गाटकमञ्जिष्ठाज्योतिष्मतीपुष्करबीजक्रौञ्चादनबदरीकोविदारकदली-संवर्तकारिष्टशतपर्वशीतकमिभकाशतावरीश्रीपर्णीश्रावणीमहाश्रा वणीरोहिणीशीतपाक्योदनपाकीकालबलापयस्याविदारी-जीवकर्षभक्तेदामहामेदामधुरसर्यप्रोक्तातृणशून्यमोचरसाटरुषकबकुलकटजपटोलनिम्बशाल्मलीनारिकेल-खर्जूरमूदवीकाप्रियालप्रियङ्गुधन्वनात्मागुप्तामधूकानामन्येषां च शौतवीर्यणां यथालाभमौषधानां कषायं कारयेत्।

तेन कषायेण द्विगुणितपयसा तेषामेव च कल्केन कषायार्धमात्रं मृद्वग्निना साधयेतैलम्।
 एततैलमङ्गात् सद्यो दाहज्वरमपनयति।

एतैरेव चौषधैरश्लक्षणपिष्टैः सुशीतैः प्रदेहं कारयेत्।

एतैरेव च शृतशीतं सलिलमवगाहपरिषेकार्थं प्रयुञ्जीत॥२५८॥

इति चन्दनादयं तैलम्।

मध्वरनालक्षीरदधिघृतसलिलसेकावगाहाश्च सद्यो दाहज्वरमपनयन्ति शीतस्पर्शत्वात्॥२५९॥

atha candanādyam tailamupadēkṣyāmaḥ-

candanabhadraśrīkālānusāryakālīyakapadmāpadmakōśīrasārivāmadhukaprappaundarīk anāgapuṣpōdīcyavanyapadmōtpalanalinakumuda-saugandhikapuṇḍarīkaśatapatrabisa mṛgālaśālūkaśaivālakaśērukānāntākuśakāśēkṣudarbhaśaranalaśālimūlajambuvētasavā nīragundrā-kakubhāsanāśvakarṇasyandanavātapaṭhaśālatāladhavatiniśakhadirakadara kadambakāśmaryaphalasarjaplakṣavaṭakapītanōdumbarāśvattha-nyagrōdhadhātakīdūr vētkaṭaśringāṭakamañjiṣṭhājyōtiṣṭmatīpuṣkarabījakrauñcādanabadarīkōvidārakadalī-saṁ

vartakāristaśataparvāśītakumbhikāśatāvarīśīparṇīśrāvaṇīmahāśrāvaṇīrōhiṇīśītapākyōd
anapākīkālalabāpayasyāvidārī-jīvakarṣabhakamēdāmahāmēdāmadhurasarṣyaprōktātṛṇ
aśūnyamōcarasātarūṣakabakulakuṭajapāṭōlanimbaśālmalīnārikēla-kharjūramḍvīkāpriyā
lapriyaṅgudhanvanātmāguptāmadhūkānāmanyēśāṁ [1] ca śītavīryāṇāṁ
yathālābhamausadhānāṁ kaśāyāṁ kārayēt|

tēna kaśāyēṇa dviguṇitapayasā tēśāmēva ca kalkēna kaśāyārdhamātrāṁ mṛdvagninā
sādhayēttailam| ētattailamabhyāṅgāt sadyō dāhajvaramapanayati|

ētaireva cauṣadhairaślakṣṇapiṣṭaiḥ suśītaiḥ pradēham kārayēt|

ētaireva ca śītāśītāṁ salilamavagāhapariṣēkārthaṁ prayuñjīta||258||

iti candanādyāṁ tailam|

madhvāranālakṣītradadhīghṛtasalilasēkāvagāhāśca sadyō dāhajvaramapanayanti
śītasparśatvāt||259||

atha candanAdyaM tailamupadekShyAmaH-

candanabhadrashrīkAlAnusAryakAllyakapadmApadmakoshIrasArivAmadhukrapauN
DarlkānAgapuShpodlcyanayapadmotpalanalalinakumuda-saugandhikapuNDarlakshata
patrabisamRuNAlashAlUkashaivAlakasherukAnantAkushakAshekShudarbhasharanalas
hAlimUlajambuvetasavAnIragundrA-kakubhAsanAshvakarNasyandanavAtapothashAlat
AladhavatinishakhadirakadarakadambakAshmaryaphalasarjaplakShavaTakapItanodum
barAshvatha-nyagrodhadhAtakIdUrvetkaTashRu_{ggAtakama}jjīShThAgyotiShmatlpuShkarablj
akrau_{jc}AdanabadarlkovidArakadall-saMvartakAriShTashataparyAshltakumbhikAshatAvarlshrlparNlshrAvaNlmahAshrAvaNlrohiNlshltapAkyod
anapAkIkAlabalApayasyAvidArl-jīvakarShabhakamedAmahAmedAmadhurasarShyaproktAtRuNashUnyamocarasATarUShakabakulakuTajapaTola
nimbasAlmallnArikela-kharjūramRudvIkApriyAlapriya_{gg}udhanvanAtmAguptAmadhUkAnAmanyeShAM [1]
ca shītavīryANAM yathAlAbhamauShadhAnAM kaShAyaM kArayet|

tena kaShAyeNa dviguNitapayasA teShAmeva ca kalkena kaShAyArdhamAtraM
mRudvagninA sAdhayettailam| etattailamabhyā~ggAt sadyo dAhajvaramapanayati|

etaireva cauShadhairashlakShNapiShTaiH sushltaiH pradeham kArayet|

etaireva ca shRutashltaM salilamavagAhapariShekArthaM prayu~jjīta||258||

iti candanAdyaM tailam|

madhvAranAlakShIradadhīghRutasalilasekAvagAhAshca sadyo dAhajvaramapanayanti
shītasparshatvAt||259||

Now, *Chandanadya taila* preparation will be described – *chandana* (red variety of *chandana*), *bhadrashri* (white variety of *chandana*), *kalanusarya*, *kaiyaka*, *padma*, *padmaka*, *ushira*, *sariva*, *madhuka*, *nagapushpa*, *udichya*, *vanya*, *padma*, *utpala*, *nalina* (a white variety of *padma*), *kumuda*; *saugandhika*, *pundarika*, *shata patra*, *bis*, *mrinala*, *shaluka*, *shaivala*, *kasheruka*, *ananta*, *kusha*, *kasa*, *ikshu*, *darbha*, *shara*, *nala* – root of *shali*, *jambu*, *vetasa*, *vanira* (a variety of *vetasa* which do not have fragrant root),

gundra, kakubha, asana, ashvakarna (a variety of *shala*), *syandana (nemi vriksha)*, *vatapotha (palasha)*, *shala, tala, dava, tinisha (vanjula)*, *khadira, kadara (vitkhadira)*, *kadamba*, fruit of *kashmarya*, *sarja, plaksha, vata* (the variety without any adventitious root), *kapitana* (popularly known as *gandhamunda*), *udumbara, ashvattha, nyagodhra, dhataki, durva, itkata, shringataka, manjishta, jyotishmati (kanganika)*, seeds of *pushkara, karunyachandana, badari, kovidara, kadali, samvartaka, arista* (a variety of *neem* growing in the hills), *shataparva (bibhitaka)*, *shita kumbhika (kashta patala)*, *shatavari, shriparni, shravani, mahashravani (alambusha – having big fruits)*, *rohini, seeta paki (ganda durva)*, *odana paki (neela bhendi)*, *kala (kakoli), bala, payasya, vidari, jeevaka, rishabhaka, meda, mahamedha, madurasa, rishyaproktta (riddhi), trina shunya (ketaki), mocharasa, atarushaka, bakula, kutaja, patola, shalmali, narikela, kharjura, mridvika, priyala, priyangu, dhanvana, atmangupta, madhuka*, and such other drugs which are cold in potency. Also, the drugs which have the same cooling effect can also be added to prepare this decoction, using double the quantity of water. The *kalka* (paste) of all the above mentioned drugs must also be taken. Oil mixed with the above stated decoction and paste should be boiled on mild fire till half the quantity is left.

Massage of this medicated oil instantaneously cures *daha jwara*.

The above mentioned drugs should be made in the form of a fine paste and then used as a *pradeha* when it has cooled. The water boiled with these drugs should be used when cooled for *avagaha* and *parisheka* (bathing and sprinkling over the body respectively).

The *seka* and *avagaha* (sprinkling of water and bathing) with *madhu, aranala* (sour gruel), milk, curd, *ghrita* and water cure *daha jwara* instantaneously, because of their cold touch.[258-259]

Guidelines for a patient with burning sensation

भवन्ति चात्र-

पौष्करेषु सुशीतेषु पद्मोत्पलदलेषु च।
कदलीनां च पत्रेषु क्षौमेषु विमलेषु च॥२६०॥
चन्दनोदकशीतेषु शीते धारागृहेऽपि वा।
हिमाम्बुसिक्ते सदने दाहार्तः संविशेत् सुखम्॥२६१॥
हेमशङ्खप्रवालानां मणीनां मौक्तिकस्य च।
चन्दनोदकशीतानां संस्पर्शनुरसान् स्पृशेत्॥२६२॥
सग्निर्नीलोत्पलैः पद्मैर्व्यजनैर्विवैरपि।
शीतवातावहैर्व्यज्ज्येच्चन्दनोदकवर्षिभिः ॥२६३॥
नद्यस्तडागाः पद्मिन्यो हृदाश्च विमलोदकाः।

अवगाहे हिता दाहतृष्णाग्लानिज्वरापहा:||२६४||

प्रिया: प्रदक्षिणाचारा: प्रमदाश्चन्दनोक्षिता:।

सान्त्वयेयुः पैरः कामैर्मणिमौक्तिकभूषणाः॥२६५॥

शीतानि चान्नपानानि शीतान्युपवनानि च।

वायवश्चन्द्रपादाश्च शीता दाहज्वरापहा:||२६६||

bhavanti cātra-

pauṣkarēṣu suśītēṣu padmōtpaladalēṣu ca।

kadalīnāṁ ca patrēṣu kṣaumēṣu vimalēṣu ca॥२६०॥

candanōdakaśītēṣu śītē dhārāgrhē'pi vā।

himāmbusiktē sadanē dāhārtah saṁviśēt sukham॥२६१॥

hēmaśāṅkhapravālānāṁ maṇīnāṁ mauktikasya ca।

candanōdakaśītānāṁ samsparsānurasān sprśēt॥२६२॥

sragbhirnīlōtpalaiḥ padmairvyajanairvividhairapi।

śītavātāvahairvyajjyēccandanōdakavarṣibhiḥ ||२६३||

nadyastadāgāḥ padminyō hradāśca vimalōdakāḥ।

avagāhē hitā dāhatrṣṇāglānijvarāpahāḥ॥२६४॥

priyāḥ pradakṣinācārāḥ pramadāścandanōkṣitāḥ।

sāntvayēyuḥ paraiḥ kāmairmaṇimauktikabhūṣaṇāḥ॥२६५॥

śītāni cānnapānāni śītānyupavanāni ca।

vāyavaścandrapādāśca śītā dāhajvarāpahāḥ॥२६६॥

bhavanti cAtra-

pauShkareShu sushIteShu padmotpaladaleShu ca।

kadallInAM ca patreShu kShaumeShu vimaleShu ca॥२६०॥

candanodakashIteShu shlte dhArAgRuhe~api vA।

himAmbusikte sadane dAhArtaH saMvishet sukham॥२६१॥

hemasha~gkhapravAIAnAM maNInAM mauktikasya ca।

candanodakashItAnAM saMsparsheAnurasAn spRushet॥२६२॥

sragbhirnllotpalaiH padmairvyajanairvividhairapi।

shItavAtAvahairvyajjyeccandanodakavarShibhiH ||263||
 nadyastaDAgAH padminyo hradAshca vimalodakAH|
 avagAhe hitA dAhatRuShNAglAnijvarApahAH||264||
 priyAH pradakShiNAcArAH pramadAshcandanokShitAH|
 sAntvayeyuH paraiH kAmairmaNimauktikabhUShaNAH||265||
 shItAni cAnnapAnAni shItAnyupavanAni ca|
 vAyavashcandrapAdAshca shItA dAhajvarApahAH||266||

A patient of *jwara* suffering from burning sensation should reside in a house cooled by the leaves of *puśkara*, *padma*, *utpalā*, *kadalī* or *kṣauma*. The house can also be cooled by cold water of sandalwood or the patient can also reside in a *dhāra gṛha* (a house cooled by running water either flowing from above or falling from the roof) or a house cooled by ice cool water. This gives comfort to the patient. His body should be touched with the pleasant touch of gold or conch shell or coral or jewels and pearls which are cooled by the sandalwood water. He should be made to wear the garlands made of *nīotpala* or *padma* and fanned with the cold air from different types of fans which are cooled with sandalwood water.

He should take bath in rivers, ponds, ponds having lotus plant and lakes having clean water. This bath alleviates burning sensation, morbid thirst, *glāni* and *jwara*.

Such patient should also be comforted with the touch of ladies smeared with sandalwood paste, wearing desirable jewels and pearls; which are affectionate and skilled with polite manners.

Diet and drinks which are cold, cooling gardens, cold wind and cold rays of the moon; alleviate *jwara* with burning sensation. [260-266]

Agurvadya tallam

अथोष्णाभिप्रायिणं

जवरितानामभ्यङ्गादीनुपक्रमानुपदेक्ष्यामः-अग्रुकष्ठतगरपत्रनलदशौलेयैद्यामकहरेणुकास्थौपेयकक्षेम
 कैलावराङ्गदलपुरतमालपत्रभूतौकरोहिषसरलशल्लैकी-देवदार्वग्निमन्थबिल्वस्योनाककाशमर्यपाटलापुनर्न
 वावश्चीरकण्टकारीबृहतीशालपर्णीपृश्निपर्णीमाषपर्णीमुदगपर्णीगोक्षुरकैरण्ड-शोभाजनकवरुणार्कचिराबि
 ल्वतिल्वकशटीपष्करमूलगण्डीरोरुबूकपत्तूराक्षीवाशमान्तकशिग्रुमातलङ्गपीलुकमूलकपर्णी-तिलपर्णीपीलु
 पर्णीमेषशृङ्गीहिसादन्तशठैरावतकभल्लातकास्फोतकाण्डीरात्मजैकेषीकाकरञ्जधान्यकाजमोद-पृथ्वीका
 सुमुखसुरसकठेरककालमालकपर्णीसक्षवकफणिजङ्गकभूस्तृणशङ्गवेरपिप्पलीसर्षपाश्वगन्धारास्नारुहारो
 हावचाबलातिबला-गुड्चीशतपुष्पाशीतवल्लीनाकलीगन्धनाकुर्लीश्वेताज्योतिष्मतीचित्रकाईयण्डाम्लचाङ्गे
 री-तिलबदरकलत्थमाषाणामेविधानामन्येषां चोष्णवीर्याणां यथालाभमौषधानां कषायं कारयेत्, तेन
 कषायेण तेषांमेव चकल्केन सुरासौवीरकतुषोदकमैरेयमेदकदधिमण्डारनालकट्वरप्रतिविनीतेन तैलपात्रं
 विपाचयेत्।

तेन सुखोष्णेन तैलेनोष्णाभिप्रायिणं ज्वरितमभ्यञ्ज्यात्, तथा शीतज्वरः प्रशाम्यति; एतैरेव चौषधैः
श्लक्षणपिष्टैः सुखोष्णैः प्रदेहंकारयेत्, एतैरेव च शृतं सुखोष्णं सलिलमवगाहनार्थं परिषेकार्थं च प्रयुञ्जीत
शीतज्वरप्रशामार्थम्॥२६७॥

इत्यगुर्वाद्यं तैलम्

athōṣṇābhīprāyināṁ

jvaritānāmabhyāṅgādīnupakramānupadēkṣyāmaḥ-agurukuṣṭhatagarapatrana ladaśailēy
adhyāmakaharēṇukāsthauṇeyakakṣēmakailāvaraṇgadalapuratamālapatrabhūtikarohi
saralaśallakāt-dēvadārvagnimanthabilvasyōnākakāśmaryapāṭalāpunarnavāvṛścīrakanṭak
ārībṛhatīśālaparnīprśniparnīmāṣaparnīmudgaparnīgōkṣurakairanḍa-śōbhārījanakavarun
ārkacirabilvatilvakaśāṭpuṣkaramūlaganḍīrōrubukaptūrākṣīvāśmāntakaśigrumātuluṅga
pīlukamūlakaparnī-tilaparnīpīluparnīmēṣaśṛṅgīhīṁsrādantaśaṭhairāvatakabhallātakāsp
ōtakāṇḍīrātmajākēśīkākarañjadhānyakājamōda-pṛthvīkāsumukhasurasakuṭhērakakāla
mālakaparnīasakṣavakaphaṇijjhakabhūstṛṇgavērapippalīsarapāśvagandhārāsnāru
hārōhāvacābalātibalā-guḍūcīśatapuṣpāśītavallīnākulīgandhanākulīśvētājyōtiṣmatīcitrak
ādhyāṇḍāmlacāṅgērī- tilabadarakulatthamāśāṇāmēvamvidhānāmanyēśāṁ
cōṣṇavīryāṇāṁ yathālābhamausadhānāṁ kaṣāyāṁ kārayēt, tēna kaṣāyēṇa tēśāmēva
ca

kalkēnasurāsauvīrakatuśōdakamairēyamēdakadadhimaṇḍāranālakaṭvaraprativinītēna
tailapātrāṁ vipācayēt|

tēna sukhōṣṇēna tailēnōṣṇābhīprāyināṁ jvaritamabhyāñjyāt, tathā śītajvarah
praśāmyati; ētaireva cauṣadhaiḥ ślakṣṇapiṣṭaiḥ sukhōṣṇaiḥ pradēhamkārayēt, ētaireva
ca śītāṁ sukhōṣṇāṁ salilamavagāhanārthāṁ pariṣekārthāṁ ca prayuñjīta
śītajvarapraśamārtham॥२६७॥

ityagurvādyāṁ tailam

athoShNAbhīprAyiNAM

jvaritAnAmabhyā<sub>ggAdInupakramAnupadekShyAmaH-agurukuShThatagarapatrana ladaśailēyadhyAmakahareNukAsthouNeyakakShe
makailAvarA<sub>ggadupalapratamAlapatrabhUtlkarohiShasaralashallaki-devadArvagnimanthbilv
asyonAkakAshmaryapATalApunarnavAvRushclrakaNTakArlbRuhatlshAlaparNIpRushni
parNIlASHaparNIludgaparNIlgokShurakairaNDa-shobhA<sub>jjanakavaruNArkacirabilvatilvakaśaTlpuShkara
mUlagaNDIrorubUkappatUrAkShlvAshmAntakashigrumAtulu<sub>ggaplukamUlakaparNI-tilaparNIpluparNImeShash
Ru<sub>ggIhiMsAdantashaThairAvatakabhallAtakAsphotakANDIrtAtmajaikeShlkAkara<sub>jadhAnyakAjamoda-pRuthvIkAsumuk
hasurasakuTherakakAlamAlakaparNASakShavakaphaNijjhakabhUstRuNashRu<sub>ggaverapippal
IsarShapAshvagandhArAsnAruhArohAvacAbalAtibalA-guDUclshatapuShpAshltavallInAkullgandhanAkullshvetAjyotiShmatlcitrakAdhyaNDAmIacA
ggerl- tilabadarakulatthamAShANAmevaMvidhAnAmanyeShAM coShNavIryANAM
yathAlAbhamauShadhAnAM kaShAyaM kArayet, tena kaShAyeNa teShAmeva ca
kalkēnasurAsauvīrakatuShodakamaireyamedakadadhimaNDAranAlakaTvaraprativinItē
na tailapAtraM vipAcayet|</sub></sub></sub></sub></sub></sub></sub>

tena sukhoShNena tailenoShNAbhīprAyiNaM jvaritamabhyā~jjyAt, tathA shltajvaraH
prashAmyati; etaireva cauShadhaiH shlakShNapiShTaiH sukhōShNaiHpradehaM
kArayet, etaireva ca shRutaM sukhōShNaM salilamavagAhanArthaM pariShekArthaM
ca prayu~jjita shltajvarapraphashamArtham॥२६७॥

ityagurvAdyaM tailam

Now, we will explain the therapies for patients of *jwara* for whom hot treatment is desirable –

A decoction prepared from *aguru*, *kuṣṭha*, *tagara*, *patra*, *nalada*, *shaileya*, *dhyāmaka*, *hareṇuka*, *sthauṇeyaka*, *kṣemaka*, *elā*, *varāṅga*, *dala*, *pura*, *tamāla patra*, *bhūtika*, *rohiśa*, *sarala*, *shallakī*, *devadārū*, *agnimantha*, *bilva*, *shyonāka*, *kāshmarya*, *pāṭalā*, *punarnavā*, *vṛścīra*, *kanṭakārī*, *bṛhatī*, *shālaparṇī*, *prshniparṇī*, *māśaparṇī*, *mudgaparṇī*, *gokṣur*, *eranda*, *shobhānjana*, *varuṇa*, *arka*, *cirabilva*, *tilvaka*, *shaṭī*, *puṣkaramūla*, *gandīra*, *urūbaka*, *pattūra*, *akṣīva*, *aśmantaka*, *shigru*, *mātulunga*, *pīlūka*, *mūlaka prṇī*, *tila parṇī*, *pīlu parṇī*, *meṣa shṛngī*, *hiṁsrā*, *danta shaṭha*, *airāvata*, *bhallātaka*, *āsphoṭaka*, *ānddīra*, *ātmajā*, *ekaiśikā* (*ambaśṭhā*) *karanja*, *dhānyaka*, *ajamodā*, *pr̥thvīkā*, *sumukhā*, *surasā*, *kuṭheraka*, *kāla mālaka*, *parṇāsa*, *kṣavaka*, *phanijjhaka*, *bhūstrīna*, *shṛngabera*, *pippalī*, *sarṣapa*, *ashvagandhā*, *rāsnā*, *ruhā* (*vṛkṣa rūhā*), *rohā* (*añjalīkārikā*), *vacā*, *balā*, *atibalā*, *guḍucī*, *shatapuṣpā*, *shita vallī*, *nākulī*, *gandha nākulī*, *shvetā*, *jyotiśmatī*, *citraka*, *adhyanḍā*, *amla cāngerī*, *tila*, *badara*, *kulattha*, *māṣa*, and such other drugs which are hot in potency.

A decoction and paste should be prepared from all the drugs described or those amongst them which are available. These decoction and paste should be added with *surā* (alcoholic drinks), *sauvīraka* (vinegar), *tuśodaka* (a type of vinegar), *maireya* (an alcoholic drink), *dadhi manda* (scum of curd), *ārnāla* (sour gruel recipe), *kaṭvara* (watery curd along with the fat content) should be boiled in one *pāṭra* of oil (3.072 l). When this oil is still lukewarm, it should be massaged to the patient suffering from *jwara* for whom hot therapy is indicated. This will cure *shīta jwara*.

The above mentioned drugs should be made in the form of a fine paste and then used as a *pradeha* when it is cooled. The water boiled with these drugs should be used when cooled for *avagāha* and *pariṣeka* (bathing and sprinkling over the body respectively).
[267]

Indications of fomentation for alleviating cold

भवन्ति चात्र-

त्रयोदशविधः स्वेदः स्वेदाद्याये निर्दर्शितः।

मात्राकालविदा युक्तः स च शीतज्वरापहः॥२६८॥

सा कुटी तच्च शयनं तच्चावच्छादनं ज्वरम्।

शीतं प्रशमयन्त्याशु धूपाश्चागुरुजा घनाः॥२६९॥

चारूपचितगात्र्यश्च तरुण्यो यौवनोष्मणा।

आश्लेषाच्छमयन्त्याशु प्रमदाः शिशिरज्वरम्॥२७०॥

स्वेदनान्यन्नपानानि वातश्लेषमहराणि च।

शीतज्वरं जयन्त्याशु संसर्गबलयोजनात्॥२७१॥

bhavanti cātra-

trayōdaśavidhaḥ svēdah svēdādhyāyē nidarśitah
mātrākālavidā yuktaḥ sa ca śītajvarāpahah||268||
sā kuṭī tacca śayanaṁ taccāvacchādanaṁ jvaram
śītarṁ praśamayantyāśu dhūpāścāgurujā ghanāḥ||269||
cārūpacitagātryaśca taruṇyō yauvanōśmaṇā|
āślēśācchamayantyāśu pramadāḥ śiśirajvaram||270||
svēdanānyannapānāni vātaślēśmaharāṇi ca|
śītajvaraṁ jayantyāśu saṁsargabalayōjanāt||271||

bhavanti cAtra-

trayodashavidhaH svedaH svedAdhyAye nidarshitaH|
mAtrAkAlavidA yuktaH sa ca shItajvarApahaH||268||
sA kuTI tacca shayanaM taccAvacchAdanaM jvaram|
shItaM prashamayantyAshu dhUpAshcAgurujA ghanAH||269||
cArUpacitagAtryashca taruNyo yauvanoShmaNA|
AshleShAcchamayantyAshu pramadAH shishirajvaram||270||
svedanAnyannapAnAni vAtashleShmaharANI ca|
shItajvaraM jayantyAshu saMsargabalayojanAt||271||

Thirteen varieties of *sweda* procedures have been described in the Swedadhaya of Sutra Sthana. A physician who is well versed with the proper duration of *sweda* as suitable to the season and person should administer them for the treatment of *shīta jwara*.

Sleeping on a bed and covering oneself with clothes in the *kuthi sweda* (fomentation technique by keeping the patient in a cottage) immediately alleviates *sheeta*. Similarly, the strong fumigation by *aguru* also alleviates *shīta*.

Sheeta jwara is also cured by the embrace of passionate ladies who are beautiful, have plump body and are young, due to their youthful heat.

Different types of diet and drinks which cause fomentation and alleviate *vata* and *kapha*, instantaneously alleviate *sheeta jwara*. These should be administered keeping in view of the *samsarga* (combination of two *doshas*) and the *bala* of each *dosha*. [268-271]

Contra-indications of *langhana*

वातजे श्रमजे चैव पुराणे क्षतजे ज्वरे।
लङ्घनं न हितं विद्याच्छमैस्तानुपाचरेत्॥२७२॥
vātajē śramajē caiva purāṇē kṣatajē jvarē।
laṅghanam na hitam vidyācchamanaistānupācarēt॥२७२॥
vAtaje shramaje caiva purANe kShataje jvare।
la~gghanaM na hitaM vidyAcchamanaistAnupAcaret॥२७२॥

Langhana (fasting) is not useful for patients suffering from *jwara* caused by aggravated *vata*, by exhaustion, in chronic fevers, in fevers caused by *kshata* (external and internal injuries). Such patients should be treated by *shamana* therapy (alleviation therapy). [272]

Guidelines for improving *agni* (digestive strength)

विक्षिप्यामाशयोष्माणं यस्माद्गत्वा रसं नृणाम्।
ज्वरं कुर्वन्ति दोषास्तु हीयतेऽग्निबलं ततः॥२७३॥
यथा प्रज्वलितो वह्निः स्थाल्यामिन्धनवानपि।
न पचत्योदनं सम्यग्निलप्रेरितो बहिः॥२७४॥
पक्तिस्थानातथा दोषैरूष्मा क्षिप्तो बहिर्नृणाम्।
न पचत्यभ्यवहृतं कृच्छ्रात् पचति वा लघु॥२७५॥
अतोऽग्निबलरक्षार्थं लङ्घनादिक्रमो हितः।
सप्ताहेन हि पच्यन्ते सप्तधातुगता मलाः॥२७६॥
निरामश्चाप्यतः प्रोक्तो ज्वरः प्रायोऽष्टमेऽहनि।
उदीर्णदोषस्त्वल्पाग्निरशनं गुरु विशेषतः॥२७७॥
मुच्यते सहसा प्राणैश्चिरं क्लिश्यति वा नरः।
एतस्मात्कारणाद्विद्वान् वातिकेऽप्यादितो ज्वरे॥२७८॥
नाति गुर्वति वा स्निग्धं भोजयेत् सहसा नरम्।
ज्वरे मारुतजे त्वादावनपेक्ष्यापि हि क्रमम्॥२७९॥
कुर्यान्निरनुबन्धानामभ्यङ्गादीनुपक्रमान्।
पाययित्वा कषायं च भोजयेद्रसभोजनम्॥२८०॥
जीर्णज्वरहरं कुर्यात् सर्वशश्चाप्युपक्रमम्।

श्लोभमलानामवातानां ज्वरोऽनुष्णः कफाधिकः||२८१||
परिपाकं न सप्ताहेनापि याति मृदूष्मणाम्।
तं क्रमेण यथोक्तेन लङ्घनाल्पाशनादिना॥२८२॥
आदशाहमुपक्रम्य कषायाद्यैरूपाचरेत्॥२८३॥
vikṣipyāmāśayōśmāṇāṁ yasmādgatvā rasāṁ nṛṇām|
jvaraṁ kurvanti dōśāstu hīyatē'gnibalaṁ tataḥ||273||
yathā prajvalitō vahniḥ sthālyāmindhanavānapi|
na pacatyōdanāṁ samyaganilaprēritō bahih||274||
paktisthānāttathā dōśairūṣmā kṣiptō bahirnṛṇām|
na pacatyabhyavahṛtaṁ kṛcchrāt pacati vā laghu||275||
atō'gnibalarakṣārthaṁ laṅghanādikramō hitaḥ|
saptāhēna hi pacyantē saptadhātugatā malāḥ||276||
nirāmaścāpyataḥ prōktō jvarah prāyō'śtamē'hani|
udīrṇadōśastvalpāgniraśnan guru viśēṣataḥ||277||
mucyatē sahasā prāṇaiściraṁ kliṣyati vā narah|
ētasmātkāraṇādvidvān vātikē'pyāditō jvarē||278||
nāti gurvati vā snigdhaṁ bhōjayēt sahasā naram|
jvarē mārutajē tvādāvanapēkṣyāpi hi kramam||279||
kuryānniranubandhānāmabhyaṅgādīnupakramān|
pāyayitvā kaṣāyāṁ ca bhōjayēdrasabhōjanam||280||
jīrṇajvaraharam kuryāt sarvaśāscāpyupakramam|
ślēśmalānāmavātānāṁ jvarō'nuṣṭaḥ [1] kaphādhikah||281||
paripākaṁ na saptāhēnāpi yāti mr̄dūṣmaṇām|
tarāṁ kramēṇa yathōktēna laṅghanālpāśanādinā॥२८२॥
ādaśāhamupakramya kaṣāyādyairupācarēt||283||
vikShipyAmAshayoShmANaM yasmAdgatvA rasaM nRuNAm|
jvaraM kurvanti doShAstu hlyate~agnibalaM tataH||273||
yathA prajvalito vahniH sthAlyAmindhanavAnapi|

na pacatyodanaM samyaganilaprerito bahiH||274||
 paktisthAnAttathA doShairUShmA kShipto bahirnRuNAm|
 na pacatyabhyavahRutaM kRucchrAt pacati vA laghu||275||
 ato~agnibalarakShArthaM la~gghanAdikramo hitaH|
 saptAhena hi pacyante saptadhAtugatA malAH||276||
 nirAmashcApyataH prokto jvaraH prAyo_{aShTame}ahani|
 udIrNadoShastvalpAgnirashnan guru visheShataH||277||
 mucyate sahasA prANAishciraM klishyati vA naraH|
 etasmAtkAraNAdvidvAn vAtike~apyAdito jvare||278||
 nAti gurvati vA snigdhaM bhojayet sahasA naram|
 jvare mArutaje tvAdAvanapekShyApi hi kramam||279||
 kuryAnniranubandhAnAmabhya~ggAdInupakramAn|
 pAyayitvA kaShAyaM ca bhojayedrasabhojanam||280||
 jIrnAjvaraharaM kuryAt sarvashashcApyupakramam|
 shleShmalAnAmavAtAnAM jvaro~anuShNaH kaphAdhikaH||281||
 paripAkaM na saptAhenApi yAti mRudUShmaNAm|
 taM krameNa yathoktena la~gghanAlpAshanAdinA||282||
 AdashAhamupakramya kaShAyAdyairupAcaret||283|

The aggravated *doshas* afflict the *rasa dhatus* and displace the *agnī* from the *āmāshaya*, for causing *jwara*. Thus, such patients have less of *agni* (digestive strength). Even if a rice pot is kept on burning fire with enough fuel, the rice will not get cooked if the fire is blown out by a strong wind. Similarly, in a patient of *jwara*, the *ūśmā* (digestive fire) is blown out of the *paktī sthāna* (place of digestion) and in this condition the consumed food is not digested properly. If the food is light, then also it gets digested with difficulty. Therefore, the line of treatment in *jwara* of *langhana* is useful for the preservation of the power of digestion.

The *malas* of the seven *dhatus* get metabolized in seven days. Therefore, generally on the eighth day the *jwara* becomes *nirama* (free from the accumulated metabolic waste product).

If a person takes heavy food in the stage when the *doshas* are aggravated and the power of digestion is suppressed, he succumbs to death immediately, or becomes miserable for a long time. Therefore, a wise physician should not immediately give

either heavy or unctuous food in the beginning stage of *jwara*, even if it is caused by the aggravation of *vata*.

If the *jwara* is caused by *vata* and is not associated with the other two *doshas* then, in exception to the above rule the patient should be given massage and such other therapies. He should be given decoctions and meat or vegetable soups to drink. All the therapies described for chronic fever are useful for the management of this kind of fever. [273-283]

Guidelines for management in *sannipata* conditions

सामा ये ये च कफजाः कफपित्तज्वराश्च ये॥२८३॥

लङ्घनं लङ्घनीयोक्तं तेषु कार्यं प्रति प्रति॥२८४॥

वमनैश्च विरेकैश्च बस्तिभिश्च यथाक्रमम्॥२८४॥

ज्वरानुपचरेद्धीमान् कफपित्तानिलोदभवान्।

संसृष्टान् सन्निपतितान् बुद्ध्वा तरतमैः समैः॥२८५॥

ज्वरान् दोषक्रमापेक्षी यथोक्तैरौषधैर्जयेत्।

वर्धनेनैकदोषस्य क्षपणेनोच्छ्रितस्य वा॥२८६॥

कफस्थानानुपूर्व्या वा सन्निपातज्वरं जयेत्॥२८७॥

sāmā yē yē ca kaphajāḥ kaphapittajvarāśca yē॥283॥

laṅghanāṁ laṅghanīyōktāṁ tēṣu kāryāṁ prati prati|

vamanaiśca virēkaiśca bastibhiśca yathākramam॥284॥

jvarānupacarēddhīmān kaphapittānilōdbhavān|

saṁsṛṣṭān sannipatitān buddhvā taratamaiḥ samaiḥ॥285॥

jvarān dōṣakramāpēkṣī yathōktairauṣadhairjayēt|

vardhanēnaikadōṣasya kṣapaṇēnōcchritasya vā॥286॥

kaphasthānānupūrvyā vā sannipātajvaraṁ jayēt॥287|

sAmA ye ye ca kaphajAH kaphapittajvarAshca ye॥283॥

la~gghanaM la~gghanlyoktaM teShu kAryaM prati prati|

vamanaishca virekaishca bastibhishca yathAkramam॥284॥

jvarAnupacareddhImAn kaphapittAnilodbhavAn|

saMsRuShTAn sannipatitAn buddhvA taratamaiH samaiH॥285||

jvarAn doShakramApekShI yathoktairauShadhairjayet|
vardhanenaikadoShasya kShapaNenocchritasya vA||286||
kaphasthAnAnupUrvyA vA sannipAtajvaraM jayet||287|

Langhana and similar other therapies described in *Langhanabrimhaniya Adhyaya* of *Sutra Sthana* should be invariably administered in the following conditions:

- When the *jwara* is in the *sama* stage
- When *jwara* is produced by the aggravated *kapha dosha*
- When both the *kapha* and the *pitta dosha* are aggravated together

Vamana, *virechana* and *basti* therapies should be administered to cure the *jwara* caused by the aggravated *vata*, *pitta* and *kapha dosha* respectively.

In the case of *samsṛṣṭra* and *sannīpātaja* (in case of combination of two or all the three *doshas*) type of *jwara*, the *tara*, *tama* and *sama* (lesser, greater or equal) status of the vitiated *doshas* should be ascertained and the treatment planned according to the line of treatment and drugs prescribed for that *dosha*.

Sannīpātaja jwara should be treated by increasing one *dosha*, reducing the excessively aggravated one or by correcting the sites of the *doshas* in order, beginning with the site of *kapha*.[283-287]

Management of *karnamulika shotha* (inflammatoion near the root of the ears)

सन्निपातज्वरस्यान्ते कर्णमूले सुदारूणः||२८७||
शोथः सञ्जायते तेन कश्चिदेव प्रमुच्यते।
रक्तावसेचनैः शीघ्रं सर्पिष्पानैश्च तं जयेत्॥२८८॥
प्रदेहैः कफपित्तधनैर्नावनैः कवलग्रहैः॥२८९॥
sannipātajvarasyāntē karṇamūlē sudārūṇah||287||
śōthah sañjāyatē tēna kaścidēva pramucyatē|
raktāvasēcanaiḥ śīghram sarpiṣpānaiśca tam jayēt||288||
pradēhaiḥ kaphapittaghnairnāvanaiḥ kavalagrahah||289
sannipAtajvarasyAnte karNamUle sudArUNaH||287||
shothah sa~jjAyate tena kashcideva pramucyate|
raktAvasecanaiH shlghraM sarpiShpAnaishca taM jayet||288||
pradehaiH kaphapittaghnairnAvanaiH kavalagrahaiH||289|

A serious outcome of the *sannipataja jwara* is inflammation near the root of the ears which is a very serious condition and very few of such patients survive. Thus, efforts must be made immediately to cure it through therapeutic measures which alleviate *kapha* and *pitta* like blood letting, intake of ghee, *pradeha* (application of unction), *navana* (nasal instillation) and *kavala graham* (mouthful of liquid medication). [287-289]

Indications of blood letting

शीतोष्णस्तिनग्धरुक्षाद् यैजर्वरो यस्य न शाम्यति॥२८९॥

शाखानुसारी रक्तस्य सोऽवसेकात् प्रशाम्यति॥२९०॥

śītōṣṇasnidharūkṣādyaирjvarō yasya na śāmyati॥289॥

śākhānusārī raktasya so'vasēkāt praśāmyati॥290॥

shltoShNasnigdharUkShAdyairjvaro yasya na shAmyati॥289॥

shAkhAnusArl raktasya so~avasekAt prashAmyati॥290॥

When the *jwara* doesn't get cured by either hot or cold or unctuous or ununctuous therapies etc., then it should be understood as *śākhānusāri* (that which is located in the peripheral tissues). Such type of fever gets cured by the administration of blood letting therapy. [289-290]

Indication of consumption of ghee

विसर्पेणाभिघातेन यश्च विस्फोटकैर्जर्वरः॥२९०॥

तत्रादौ सर्पिषः पानं कफपितोत्तरो न चेत्॥२९१॥

visarpēṇābhīghātēna yaśca visphōṭakairjvarah॥290॥

tatrādau sarpiṣah pānam kaphapittottarō na cēt॥291॥

visarpeNAbhīghAtena yashca visphoTakairjvaraH॥290॥

tatrAdau sarpiShaH pAnaM kaphapittottaro na cet॥291॥

If *jwara* arises in a patient as a complication of *visarpa* (erysipelas like disease), *abhīghāta* (injury) and *visphoṭaka* (eruptions in the body), the patient in such case should be given ghee to drink provided *kapha* and *pitta dosha* are not aggravated. [290-291]

Management of *jeerna jwara* (chronic stage)

दौर्बल्याद्देहधातूनां ज्वरो जीर्णोऽनुवर्तते॥२९१॥

बल्ये: सम्बूहणैस्तस्मादाहारैस्तमुपाचरेत्॥२९२॥

daurbalyāddēhadhātūnāṁ jvarō jīrnō'nuvartatē॥291॥

balyēḥ sambṛ̥ṇhaṇaistasmādāhāraistamupācarēṭ||292||
daurbalyAddehadhAtUnAM jvaro jIrNo~anuvartate||291||
balyeH sambRuMhaNaistasmAdAhAraistamupAcaret||292||

The fever turns chronic if there is weakness in the tissues of the body. Hence such patients should be given foods which promote the strength and are nourishing.
[291-292]

Management of *dosha* dominance in *vishamajwara*

कर्म साधारणं जह्यात् तीयकचतुर्थकौ ॥२९२॥
आगन्तुरनुबन्धो हि प्रायशो विषमज्वरे।
वातप्रधानं सर्पिर्भिर्बस्तिभिः सानुवासनैः॥२९३॥
स्निग्धोष्णौरन्नपानैश्च शमयेद् विषमज्वरम्।
विरेचनेन पयसा सर्पिषा संस्कृतेन च॥२९४॥
विषमं तिक्तशीतैश्च ज्वरं पित्तोत्तरं जयेत्।
वमनं पाचनं रुक्षमन्नपानं विलङ्घनम्॥२९५॥
कषायोष्णं च विषमे ज्वरे शस्तं कफोत्तरे॥२९६॥
karma sādhāraṇam jahyāttṛtīyakacaturthakau ||292||
āganturanubandhō hi prāyaśō viṣamajvarē|
vātapradhānam sarpirbhīr bastibhiḥ sānuvāsanaiḥ||293||
snigdhōṣṇair annapānaiśca śamayēdviṣamajvaram|
virēcanēna payasā sarpiṣā saṁskṛtēna ca||294||
viṣamam tiktaśītaiśca jvaram pittōttaram jayēt|
vamanam pācanam rūkṣamannapānam vilaṅghanam||295||
kaṣāyōṣṇam ca viṣamē jvarē śastam kaphōttarē||296||
karma sAdhAraNaM jahyAttRutlyakacaturthakau ||292||
Aganturanubandho hi prAyasho viShamajvare|
vAtapradhAnaM sarpirbhīr bastibhiH sAnuvAsanaiH||293||
snigdhoShNairannapAnaishca shamayedviShamajvaram|
virecanena payasA sarpiShA saMskRutena ca||294||

viShamaM tiktashItaishca jvaraM pittottaraM jayet|
 vamanaM pAcanaM rUkShamannapAnaM vila~gghanam||295||
 kaShAyoShNaM ca viShame jvare shastaM kaphottare|296|

The general line of treatment of *jwaras* should not be followed for the management of *trtīyaka* and *chaturthaka jwara* as these two types of fever are mostly associated with *āgantu* or extraneous factors as *būtās* or evil spirits including germs. When *vāyu* is predominantly aggravated in these two types of *jwara*, then they should be cured by the administration of ghee, *niruha* and *anuvāsana bastīs* (medicated enemas), unctuous and hot diet and drinks. When the *pitta dosha* is dominant the patient should be given purgation therapy, medicated milk, ghee and articles which are bitter and cold. In state of *kapha* predominance, then the patient should be administered emetic therapy, *pachana* (therapy which promotes the digestion and metabolism), ununctuous diet and drinks, fasting and hot decoctions are useful. [292-296]

Guidelines and various formulations in *vishama jwara*

योगः परा: प्रवक्ष्यन्ते विषमज्वरनाशनाः||२९६||
 प्रयोक्तव्या मतिमता दोषादीन् प्रविभज्य ते।
 सुरा समण्डा पानार्थं भक्ष्यार्थं चरणायुधः||२९७||
 तितिरिश्च मयूरश्च प्रयोज्या विषमज्वरे।
 पिबेद्वा षट्पलं सर्पिरभ्यां वा प्रयोजयेत्॥२९८॥
 त्रिफलायाः कषायं वा गुड्ढच्या रसमेव वा।
 नीलिनीमजगन्धां च त्रिवृतां कटुरोहिणीम्॥२९९॥
 पिबेज्ज्वरागमे युक्त्या स्नेहस्वेदोपपादितः।
 सर्पिषो महतीं मात्रां पीत्वा वा छर्दयेत् पुनः॥३००॥
 उपयुज्यान्नपानं वा प्रभूतं पुनरुल्लिखेत्।
 सान्नं मद्यं प्रभूतं वा पीत्वा स्वप्याज्ज्वरागमे॥३०१॥
 आस्थापनं यापनं वा कारयेद् विषमज्वरे।
 पयसा वृषदंशस्य शकृद्वा तदहः पिबेत्॥३०२॥
 वृषस्य दधिमण्डेन सुरया वा ससैन्धवम्।
 पिप्पल्यास्त्रिफलायाश्च दैनस्तक्रस्य सर्पिषः॥३०३॥
 पञ्चगव्यस्य पयसः प्रयोगो विषमज्वरे।
 रसोनस्य सतैलस्य प्राग्भक्तमुपसेवनम्॥३०४॥

मेद्यानामुष्णवीर्याणामामिषाणां च भक्षणम्।
हिङुतुल्या तु वैयाधी वसा नस्यं ससैन्धवा॥३०५॥

पुराणसर्पिः सिंहस्य वसा तद्वत् ससैन्धवा।
सैन्धवं पिष्पलीनां च तण्डुलाः समनःशिलाः॥३०६॥

नेत्राञ्जनं तैलपिष्टं शस्यते विषमज्वरे।
पलङ्कषा निम्बपत्रं वचा कुष्ठं हरीतकी॥३०७॥

सर्षपाः सयवाः सर्पिर्धूपनं ज्वरनाशनम्।
ये धूमा धूपनं यच्च नावनं चाञ्जनं च यत्॥३०८॥

मनोविकारे निर्दिष्टं कार्यं तद्विषमज्वरे।
मणीनामोषधीनां च मङ्गल्यानां विषस्य च॥३०९॥

धारणादगदानां च सेवनान्नं भवेजज्वरः॥३१०॥

yōgāḥ parāḥ pravakṣyantē viśamajvaranāśanāḥ॥२९६॥
prayōktavyā matimatā dōśādīn pravibhajya tē|
surā samanḍā pānārthē bhakṣyārthē caraṇāyudhah॥२९७॥
tittiriśca mayūraśca prayōjyā viśamajvarē|
pibēdvā ṣaṭpalam̄ sarpirabhayāṁ vā prayōjayēt॥२९८॥
triphalāyāḥ kaṣāyāṁ vā guḍūcyā rasamēva vā|
nīlinīmajagandhāṁ ca trivṛtāṁ kaṭurōhiṇīm॥२९९॥
pibējjvarāgamē yuktyā snēhasvēdōpapāditah|
sarpiṣō mahatīm mātrāṁ pītvā vā chardayēt punah॥३००॥
upayujyānnapānam̄ vā prabhūtam̄ punarullikhēt|
sānnarāṁ madyāṁ prabhūtam̄ vā pītvā svapyājjvarāgamē॥३०१॥
āsthāpanam̄ yāpanam̄ vā kārayēdviśamajvarē|
payasā vṛṣadarāṁśasya śakṛdvā tadahaḥ pibēt॥३०२॥
vṛṣasya dadhimāṇḍēna surayā vā sasaindhavam|
pippalyāstriphalāyāśca dadhnastakrasya sarpiṣah॥३०३॥
pañcagavyasya payasah prayōgō viśamajvarē|
rasōnasya satailasya prāgbhaktamupasēvanam॥३०४॥

mēdyānāmuṣṇavīryāṇāmāmiṣāṇāṁ ca bhakṣaṇam|
hiṅgutulyā tu vaiyāghrī vasā nasyāṁ sasaindhavā||305||
purāṇasarpīḥ siṁhasya vasā tadvat sasaindhavā|
saindhavāṁ pippalīnāṁ ca taṇḍulāḥ samanaḥśilāḥ||306||
nētrāñjanāṁ tailapiṣṭāṁ śasyatē viṣamajvarē|
palaṅkaṣā nimbapatrāṁ vacā kuṣṭham harītakī||307||
sarṣapāḥ sayavāḥ sarpirdhūpanāṁ jvaranāśanam|
yē dhūmā dhūpanāṁ yacca nāvanāṁ cāñjanāṁ ca yat||308||
manōvikārē nirdiṣṭāṁ kāryāṁ tadviṣamajvarē|
maṇīnāmōṣadhiṇāṁ ca maṇgalyānāṁ viṣasya ca||309||
dhāraṇādagadānāṁ ca sēvanānna bhavējjvaraḥ||310||
yogAH parAH pravakShyante viShamajvaranAshanAH||296||
prayoktavyA matimatA doShAdIn pravibhajya te|
surA samaNDA pAnArthe bhakShyArthe caraNAyudhaH||297||
tittirishca mayUrashca prayojyA viShamajvare|
pibedvA ShaTpalaM sarpirabhayAM vA prayojayet||298||
triphalAyAH kaShAyaM vA guDUCyA rasameva vA|
nllinImajagandhAM ca trivRutAM kaTurohiNIm||299||
pibejjvarAgame yuktyA snehasvedopapAditaH|
sarpiSho mahatiM mAtrAM pltvA vA chardayet punaH||300||
upayujyAnnapAnaM vA prabhUtaM punarullikhet|
sAnnaM madyaM prabhUtaM vA pltvA svapyAjjvarAgame||301||
AstheApanaM yApanaM vA kArayedviShamajvare|
payasA vRuShadaMshasya shakRudvA tadaHaH pibet||302||
vRuShasya dadhimaNDena surayA vA sasaindhavam|
pippalyAstriphalAyAshca dadhnastakrasya sarpiShaH||303||
pa~jcagavyasya payasaH prayogo viShamajvare|
rasonasya satailasya prAghaktamupasevanam||304||

medyAnAmuShNavIryANAmAmiShANAM ca bhakShaNam|
 hi~ggutulyA tu vaiyAghrl vasA nasyaM sasaindhavA||305||
 purANasarpiH siMhasya vasA tadvat sasaindhavA|
 saindhavaM pippalInAM ca taNDuLAH samanaHshilAH||306||
 netrA~jjanaM tailapiShTaM shasyate viShamajvare|
 pala~gkaShA nimbapatraM vacA kuShThaM harItakI||307||
 sarShapAH sayavAH sarpirdhUpanaM jvaranAshanam|
 ye dhUmA dhUpanaM yacca nAvanaM cA~jjanaM ca yat||308||
 manovikAre nirdiShTaM kAryaM tadviShamajvare|
 maNIInAmoShadhInAM ca ma~ggalyAnAM viShasya ca||309||
 dhAraNAdagadAnAM ca sevanAnna bhavejjvaraH||310|

Formulations which are effective in curing *jwara* are being described. A wise physician should administer them, keeping in view their suitability for the type of *dosha* involved. These recipes are as follows –

- *Sura* along with its *manda* (alcohol along with its supernatant part) as drink
- The meat of chicken, partridge and peacock are used as food
- Intake of medicated ghee called as *shatapala*; *abhaya*; *triphalā* decoction; *guduchi* juice; preparation of *nīlinī*, *ajagandhā*, *trivrita* and *kaṭurohiṇī* during the onset of fever. These things should be administered to the patient appropriately, after the patient is given *snehana* and *swedana* therapies (oleation and sudation).
- Emesis after the administration of ghee in large quantity
- Emesis after taking large quantity of food and drinks
- Sleeping after taking large quantity of alcohol along with food when the attack of fever is due
- Administration of *āsthāpana* and *yāpanā bastīs*
- Intake of cat's stool mixed with milk on the same day
- Intake of cat's stool mixed with either *dadhi manda* (scum of curd) or alcohol or rock salt or *pippalī* or *triphalā* or curd or butter or milk or ghee or *panchagavya* (mixture of five products obtained from cow);
- Intake of *rasona* along with oil immediately before food
- Intake of meat of animals which are fatty and hot in potency
- Inhalation of *hingu* and *vasā* of *vyāghra* (tiger) taken in equal quantity and mixed with rock salt.

- Inhalation of old ghee and *vasā* of *siṁha* (lion) taken in equal quantity and mixed with rock salt.
- Application of *anjana* prepared of rock salt, seeds of *pippalī* and *manahshilā* mixed with oil
- Fumigation by *palankaśā*, leaves of *nimba*, *vacā*, *kuṣṭha*, *harītakī*, *sarṣapa*, *yava* and ghee
- Administration of formulations of *dhūma* (medicated smoking), *dhūpana* (fumigation), *nāvana* (nasal instillation of medicine), and *anjana* (collyrium) which are prescribed in the treatment of *manovikāra* or psychic ailments like *unmāda* and *apasamāra*.
- Wearing of *manis* (precious stones and jewels), *auśadha* (drugs), *mangalya* (auspicious talisman) and *viśa* (poisonous substances)
- Intake of *agada* (antidote like drugs). [296-309]

Spiritual therapy

सोमं सानुचरं देवं समातृगणमीश्वरम्॥३१०॥
 पूजयन् प्रयतः शीघ्रं मुच्यते विषमज्वरात्।
 विष्णुं सहस्रमूर्धानं चराचरपतिं विभुम्॥३११॥
 स्तुवन्नामसहस्रेण ज्वरान् सर्वानपोहति।
 ब्रह्माणमश्विनाविन्द्रं हुतभक्षं हिमाचलम्॥३१२॥
 गड्गां मरुद्गणांश्चेष्ट्या पूजयञ्जयति ज्वरान्।
 भक्त्या मातुः पितुश्चैव गुरुणां पूजनेन च॥३१३॥
 ब्रह्मचर्येण तपसा सत्येन नियमेन च।
 जपहोमप्रदानेन वेदानां श्रवणेन च॥३१४॥
 ज्वराद्विमुच्यते शीघ्रं साधूनां दर्शनेन च।
 sōmar̄m sānucaraṁ dēvar̄m samātṛgaṇamīśvaram॥310॥
 pūjayan prayataḥ śīghraṁ mucyatē viśamajvarāt।
 viṣṇum sahasramūrdhānam carācarapatim vibhum॥311॥
 stuvannāmasahasrēṇa jvarān sarvānapōhati।
 brahmāṇamaśvināvindraṁ hutabhakṣam himācalam॥312॥
 gaṅgāṁ marudgaṇāṁścēṣṭyā [5] pūjayañjayati jvarān।
 bhaktyā mātuḥ pituścaiva gurūṇāṁ pūjanēna ca॥313॥
 brahmacaryēṇa tapasā satyēna niyamēna ca।

japahōmapradānēna vēdānāṁ śravaṇēna ca||314||
 somaM sAnucaraM devaM samAtRugaNamIshvaram||310||
 pUjayan prayataH shlghraM mucyate viShamajvarAt|
 viShNuM sahasramUrdhAnaM carAcarapatiM vibhum||311||
 stuvannAmasahasreNa jvarAn sarvAnapohati|
 brahmANamashvinAvindraM hutabhakShaM himAcalam||312||
 ga~ggAM marudgaNAMshceShTyA [5] pUjaya~jjayati jvarAn|
 bhaktyA mAtuH pitushcaiva gurUNAM pUjanena ca||313||
 brahmacaryeNa tapasA satyena niyamena ca|
 japahomapradAnena vedAnAM shravaNena ca||314||
 jvarAdvimucyate shlghraM sAdhUnAM darshanena ca|

Prayers should be offered to lord Ishvara along with Umā, their attendents and matrs. This immediately cures *viśama jwara*.

Recitation of the *sahasra nāma* (one thousand names) of Lord Viśnū, who has one thousand heads, who is the chief of the *carācara* (moving and non-moving things of the universe) and who is omnipresent cures all type of *jwara*.

Offering prayers through *iṣṭī* or *yajña* (fire ritual) to Brahmā, the Ashvinīs, īndra, āgni, the Himalayās, the Ganges and the followers of Māruts cures the *jwara*.

Devotion to father and mother, prayer to *gurūs*, observance of celibacy, practice of *tapa* (penance), truthfulness and *niyama* (religious rites), *japa* (incantations), *homa* (like *yajña* – offering oblation to fire), hearing the recitation of the *vedās* and the *darshana* (visiting) of saints immediately cures *jwara*. [310-314]

Management of *jwara* located in various *dhatu*

ज्वरे रसस्थे वमनमुपवासं च कारयेत्॥३१५॥
 सेकप्रदेहौ रक्तस्थे तथा संशमनानि च।
 विरेचनं सोपवासं मांसमेदःस्थिते हितम्॥३१६॥
 अस्थिमज्जगते देया निरुहाः सानुवासनाः॥३१७॥
 jvarādvimucyatē śīghraṁ sādhūnāṁ darśanēna ca|
 jvarē rasasthē vamanamupavāsaṁ ca kārayēt॥315॥
 sēkapradēhau raktasthē tathā sarṇśamanāni ca|

virēcanāṁ sōpavāsaṁ māṁsamēdaḥsthitē hitam||316||
 asthimajagatē dēyā nirūhāḥ sānuvāsanāḥ|317|
 jvare rasasthe vamanamupavAsaM ca kArayet||315||
 sekapradehau raktasthe tathA saMshamanAni ca|
 virecanaM sopavAsaM mAMsamedaHsthite hitam||316||
 asthimajagate deyA nirUhAH sAnuvAsanAH|317|

When the *doshas* causing *jwara* are located in –

- the *rasa dhatu*, then *vamana* and *upavāsa* (emesis and fasting) should be done.
- the *rakta dhatu*, then *seka* and *pradeha* (pouring of hot medicated liquids and ointment application) should be done.
- in the *mamsa dhatu* and the *meda dhatu* *virecana* and *upavāsa* should be done.
- in the *asthi dhatu* and *majja dhatus*, *nirūha* and *anuvāsana bastis* should be given. [315-317]

Management of *abhicharaja* and *abhishangaja jwara*

शापाभिचारादभूतानामभिषङ्गाच्च यो ज्वरः||३१७||
 दैवव्यपाश्रयं तत्र सर्वमौषधमिष्यते।
 śāpābhicārādbhūtānāmabhiṣaṅgācca yō jvaraḥ||317||
 daivavyapāśrayaṁ tatra sarvamauṣadhamiṣyatē|
 shApAbhicArAdbhUtaNAmabhiSha~ggAcca yo jvaraH||317||
 daivavyapAshrayaM tatra sarvamauShadhamiShyate|

The *jwara* caused by *shapa* (curse), *abhichara* (tantric rituals with evil purpose), *bhutabhishanga* (affliction by micro organisms or evil spirits), *daiva vyapashraya chikitsa* (performance of spiritual therapies) is the most desired therapy. [317]

Management of *abhighataja jwara*

अभिघातज्वरो नश्येत् पानाभ्यङ्गेन सर्पिषः||३१८||
 रक्तावसेकैर्मद्यैश्च सात्म्यैर्मासरसौदनैः।
 सानाहो मद्यसात्म्यानां मदिरारसभोजनैः||३१९||
 क्षतानां व्रणितानां च क्षतव्रणचिकित्सया।
 abhighātajvarō naśyēt pānābhyaṅgēna sarpiṣah||318||
 raktāvasēkairmadaiśca sātmyairmāṁsarasaudanaiḥ|

sānāhō madyasātmyānāṁ madirārasabhōjanaiḥ||319||
 kṣatānāṁ vraṇitānāṁ ca kṣatavraṇacikitsayā|
 abhighAtajvaro nashyet pAnAbhya~ggena sarpiShaH||318||
 raktAvasekairmadyaishca sAtmyairmA MsarasaudanaiH|
 sAnAho madyasAtmyAnAM madirArasabhojanaiH||319||
 kShatAnAM vraNitAnAM ca kShatavraNacikitsayA|

Jwara caused by *abhighāta* (external injury) gets cured by the intake and massage of ghee, blood letting, in take of rice with wholesome meat soup. If such patients of *abhighata jwara*, are suffering from *anaha* (gaseous distention of abdomen) and are accustomed to alcohol, then they should be given food with alcohol and meat soup. For the treatment of *jwara* caused by *kshata* (injury like cuts, stabs etc.) and *vraṇa* (ulcers) line of treatment suggested for *kshata* and *vraṇa* should be adopted. [318-320]

Management of *agantuja jwara* due to mental factors

आश्वासेनेष्टलाभैन वायोः प्रशमनेन च||320||
 हर्षणैश्च शमं यान्ति कामशोकभयज्वराः|
 काम्यैरर्थमनोज्ञैश्च पितॄद्नैश्चाप्युपक्रमैः||321||
 सद्वाक्यैश्च शमं याति ज्वरः क्रोधसमुत्थितः|
 कामात् क्रोधज्वरो नाशं क्रोधात् कामसमुद्भवः||322||
 याति ताम्यामुभाम्यां च भयशोकसमुत्थितः|
 ज्वरस्य वेगं कालं च चिन्तयञ्ज्वर्यते तु यः||323||
 तस्येष्टैस्तु विचित्रैश्च विषयैर्नाशयेत् स्मृतिम्||324||
 āśvāsēnēṣṭalābhēna vāyōḥ praśamanēna ca||320||
 harṣaṇaiśca śamāṁ yānti kāmaśōkabhaya jvaraḥ|
 kāmyairartha manōjñaiśca pittaghnaiścāpyupakramaiḥ||321||
 sadvākyaiśca śamāṁ yāti jvaraḥ krōdhasamutthitah|
 kāmāt krōdhajvaraḥ nāśam krōdhāt kāmasamudbhavaḥ||322||
 yāti tābhyaṁ mu bhābhyaṁ ca bhayaśōkasamutthitah|
 jvara sya vēgam kālam ca cintayañjvaryatē tu yaḥ||323||
 tasyēṣṭa istu vicitraiśca viṣaya irnāśayēt smṛtim||324|

AshvAseneShTalAbhena vAyoH prashamanena ca||320||
 harShaNaishca shamaM yAnti kAmashokabhayajvarAH|
 kAmyairarthairmanoj~jaishca pittaghnaishcApyupakramaiH||321||
 sadvAkyuishca shamaM yAti jvaraH krodhasamuththitaH|
 kAmAt krodhajvaro nAshaM krodhAt kAmasamudbhavaH||322||
 yAti tAbhyAmubhAbhyAM ca bhayashokasamutthitaH|
 jvarasya vegaM kAlaM ca cintaya~jjvaryate tu yaH||323||
 tasyeShTaistu vicitraishca viShayairnAshayet smRutim||324|

The *jwara* caused by *kāma* (passion), *shoka* (grief) and *bhaya* (fear) gets cured by the *āshvāshana* (assurance), *ishta labha* (providing the desired object), alleviation of *vāyu* and *harshana* (bringing excitement).

The *jwara* caused by *krodhā* gets subsided by providing the *kamya artha* (desired object), *manojna artha* (pleasing object), therapies for the alleviation of *pitta* and *sadvakya* (correct advice).

The *jwara* caused by *krodhā* gets subsided by *kama* and that caused by *kama* gets cured by *krodhā*. *Jwara* caused by *bhaya* (fear) and *shoka* (grief or sorrow) gets subsided by both *kama* and *krodhā*.

If a patient gets *jwara* just by thinking about its episode, then his mind should be diverted to desirable, different and surprising incidents (*vishaya*).[320-323]

Signs of remission of *jwara*

ज्वरप्रमोक्षे पुरुषः कूजन् वमति चेष्टते।
 श्वसन्निवर्णः स्विन्नाङ्गो वेपते लीयते मुहुः॥३२४॥
 प्रलपत्युष्णसर्वाङ्गः शीताङ्गश्च भवत्यपि।
 विसञ्जो ज्वरवेगार्तः सक्रोध इव वीक्ष्यते ॥३२५॥
 सदोषशब्दं च शकृद्रवं स्रवति वेगवत्।
 लिङ्गान्येतानि जानीयाज्ज्वरमोक्षे विचक्षणः॥३२६॥
 बहुदोषस्य बलवान् प्रायेणाभिनवो ज्वरः।
 सत्क्रियादोषपक्त्या चेद्विमुच्यति सुदारुणम्॥३२७॥
 कृत्वा दोषवशाद्वेगं क्रमादुपरमन्ति ये।
 तेषामदारुणो मोक्षो ज्वराणां चिरकारिणाम्॥३२८॥

jvarapramōkṣē puruṣah kūjan vamati cēstatē|
 śvasanvivarṇah svinnāṅgō vēpatē līyatē muhuḥ||324||
 pralapatyusñasarvāṅgah śītāṅgaśca bhavatyapi|
 visañjñō jvaravēgārtah sakrōdha iva vīkṣyatē ||325||
 sadōṣaśabdāṁ ca śakṛddravāṁ sravati vēgavat|
 liṅgānyētāni jānīyājjvaramōkṣē vicakṣaṇah||326||
 bahudōṣasya balavān prāyēṇābhinavō jvaraḥ|
 satkriyādōṣapaktyā cēdvimuñcati sudāruṇam||327||
 kṛtvā dōṣavaśādvēgarāṁ kramāduparamanti yē|
 tēśāmadāruṇō mōkṣō jvarāṇāṁ cirakāriṇām||328||
 jvarapramokShe puruShaH kUjan vamati ceShTate|
 shvasanvivarNaH svinnA~ggo veprate llyate muhuH||324||
 pralapatyuShNasarvA~ggaH shItA~ggashca bhavatyapi|
 visa_{jj}o jvaravegArtaH sakrodha iva vIkShyate ||325||
 sadoShashabdaM ca shakRuddravaM sravati vegavat|
 li~ggAnyetAni jAnlyAjvaramokShe vicakShaNaH||326||
 bahudoShasya balavAn prAyeNAbhinavo jvaraH|
 satkriyAdoShapaktyA cedvimu~jcati sudAruNam||327||
 kRutvA doShavashAdvegaM kramAduparamanti ye|
 teShAmadAruNo mokSho jvarANAM cirakAriNAm||328||

The clinical features manifested at the time of remission of (*sannipata jwara*) are – the patient produces *kujana* (rumbling) sound, vomiting, abnormal movements of the limbs (*cheshta*), heavy breathing or difficulty in breathing, discoloration, *svinna anga* (sweating), trembling (*veprate*), frequent fainting (*llyate muhuḥ*), delirium, the body becoming very hot and cold at times, unconsciousness, more rise of temperature, angry appearance and forceful passage of liquid stools mixed with *doshas* with sound.

If a severe condition of *jwara* with excessively aggravated *doshas* and recent onset, is treated with appropriate therapy, then *dosha paka* occurs. Because of this, the sudden remission of *jwara* occurs with difficulty (*daruna moksha*).

In chronic stage of *jwara*, the episodes are remitted depending upon strength of *dosha*. The remission occurs slowly without difficulty. [324-328]

Signs of completely cured *jwara* patient

विगतक्लमसन्तापमव्यथं विमलेन्द्रियम्।

युक्तं प्रकृतिसत्क्षेन विद्यात् पुरुषमज्वरम्॥३२९॥

vigataklamasantāpamavyathāṁ vimalēndriyam|

yuktāṁ prakṛtisattvēna vidyāt̄ puruṣamajvaram||329||

vigataklamasantApamavyathaM vimalendriyam|

yuktaM prakRutisattvena vidyAt̄ puruShamajvaram||329||

Disappearance of *klama* (mental fatigue) and *santapa* (temperature), absence of pain, clarity of senses, gaining natural mental faculties – are all the signs and symptoms of a person who has become free from *jwara*.[329]

Precautions after being cured from *jwara*

सज्वरो ज्वरमुक्तश्च विदाहीनि गुरुणि च।

असात्म्यान्यन्नपानानि विरुद्धानि च वर्जयेत्॥३३०॥

व्यवायमतिच्छेष्टाश्च स्नानमत्यशनानि च।

तथा ज्वरः शमं याति प्रशान्तो जायते न च॥३३१॥

व्यायामं च व्यवायं च स्नानं चड्क्रमणानि च।

ज्वरमुक्तो न सेवेत यावन्न बलवान् भवेत्॥३३२॥

sajvarō jvaramuktaśca vidāhīni gurūṇi ca|

asātmyānyannapānāni viruddhāni ca varjayēt||330||

vyavāyamaticēṣṭāśca snānamatyāśanāni ca|

tathā jvaraḥ śamarāṁ yāti praśāntō jāyatē na ca||331||

vyavāyamāṁ ca vyavāyāṁ ca snānamāṁ caṅkramaṇāni ca|

jvaramuktō na sēvēta yāvanna balavān bhavēt||332||

sajvaro jvaramuktashca vidAhIni gurUNi ca|

asAtmyAnyannapAnAni viruddhAni ca varjayet||330||

vyavAyamaticeShTAshca snAnamatyashanAni ca|

tathA jvaraH shamaM yAti prashAnto jAyate na ca||331||

vyAyAmaM ca vyavAyaM ca snAnaM ca~gkramaNAni ca|

jvaramukto na seveta yAvanna balavAn bhavet||332||

A person suffering from *jwara* and the one who has become free from it should not indulge in and avoid the following - the intake of food and drinks which are *vidahi* (causing burning sensation), *guru* (heavy), *asatmya* (unwholesome) and *viruddha* (mutually contradictory); sexual intercourse, excessive exhaustion, bath and excessive walking. By observing these rules the fever gets alleviated and does not occur again.

Exercise, sexual intercourse, bath, *chankramana* (brisk walk) – these should be avoided by the person who has become free from *jwara* till he regains strength. [330-332]

Punaravarti jwara (recurrent *jwara*)

असञ्जातबलो यस्तु ज्वरमुक्तो निषेवते।
वर्ज्यमेतन्नरस्तस्य पुनरावर्तते ज्वरः॥३३३॥
दुर्घृतेषु च दोषेषु यस्य वा विनिवर्तते।
स्वल्पेनप्यपचारेण तस्य व्यावर्तते पुनः॥३३४॥
चिरकालपरिक्लिष्टं दुर्बलं हीनतेजसम् [१] ।
अचिरेणैव कालेन स हन्ति पुनरागतः॥३३५॥
अथवाऽपि परीपाकं धातुष्वेव क्रमान्मलाः।
यान्ति ज्वरमकुर्वन्तस्ते तथाऽप्यपकुर्वते॥३३६॥
दीनतां शवयथुं ग्लानिं पाण्डुतां नान्नकामताम्।
कण्ठरूत्कोठपिडकाः कुर्वन्त्यग्निं च ते मृदुम्॥३३७॥
एवमन्येऽपि च गदा व्यावर्तन्ते पुनर्गताः।
अनिर्घातेन दोषाणामल्पैरप्यहितैर्णाम्॥३३८॥
निर्वृत्तेऽपि ज्वरे तस्माद्यथावस्थं यथाबलम्।
यथाप्राणं हरेद्दोषं प्रयोगैर्वा शमं नयेत्॥३३९॥
मृदुभिः शोधनैः शुद्धिर्यापना बस्तयो हिताः।
हिताश्च लघवो यूषा जाङ्गलामिषजा रसाः॥३४०॥
अभ्यङ्गोद्वर्तनस्नानधूपनान्यञ्जनानि च।
हितानि पुनरावृते ज्वरे तिक्तघृतानि च॥३४१॥
गुर्व्यभिष्यन्दयसात्म्यानां भोजनात् पुनरागते।
लङ्घनोष्णोपचारादिः क्रमः कार्यश्च पूर्ववत्॥३४२॥

किराततिक्तकं तिक्ता मुस्तं पर्षटकोऽमृता।
घनन्ति पीतानि चाभ्यासात् पुनरावर्तकं ज्वरम्॥३४३॥

asañjātabalō yastu jvaramuktō niśēvatē|
varjyamētannarastasya punarāvartatē jvarah॥३३३॥

durhṛtēsu ca dōshēsu yasya vā vinivartatē|
svalpēnapyapacārēṇa tasya vyāvartatē punah॥३३४॥

cirakālaparikliṣṭam durbalam hīnatējasam |
acirēṇaiva kālēna sa hanti punarāgatah॥३३५॥

athavā'pi parīpākam dhātuśvēva kramānmalāh|
yānti jvaramakurvantastē tathā'pyapakurvatē॥३३६॥

dīnatām śvayathum glānim pāṇḍutām nānnakāmatām|
kaṇḍūrutkōthapiḍakāh kurvanyagnim ca tē mṛdum॥३३७॥

ēvamanyē'pi ca gadā vyāvartantē punargatāh|
anirghātēna dōṣānāmalpairapyahitairnṛṇām॥३३८॥

nirvṛttē'pi jvarē tasmādyathāvastham yathābalam|
yathāprāṇam harēddōṣam prayōgairvā śamam nayēt॥३३९॥

mṛdubhiḥ śōdhanaīḥ śuddhiryāpanā bastayō hitāḥ|
hitāśca laghavō yūṣā jāṅgalāmiṣajā rasāh॥३४०॥

abhyāṅgōdvartanasnānadhūpanānyañjanāni ca|
hitāni punarāvṛttē jvarē tiktaghṛtāni ca॥३४१॥

gurvyabhiṣyandyasātmyānām bhōjanāt punarāgatē|
laṅghanōśṇōpacārādiḥ kramah kāryaśca pūrvavat॥३४२॥

kirātatiktakam tiktā mustam parpaṭakō'mṛtā|
ghnanti pītāni cābhyaśāt punarāvartakam jvaram॥३४३॥

asa~jjAtabalo yastu jvaramukto niShevate|
varjyametannarastasya punarAvartate jvaraH॥३३३॥

durhRuteShu ca doSheShu yasya vA vinivartate|
svalpenapyapacAreNa tasya vyAvartate punaH॥३३४॥

cirakAlaparikliShTaM durbalaM hInatejasam [1] |
 acireNaiva kAlena sa hanti punarAgataH||335||
 athavA~api [2] parlpAkaM dhAtuShveva kramAnmalAH|
 yAnti jvaramakurvantaste tathA~apyapakurvate||336||
 dInatAM shvayathuM glAniM pANDutAM nAnnakAmatAm|
 kaNDUrutkoThapiDakAH kurvanyagniM ca te mRudum||337||
 evamanye~api ca gadA vyAvartante punargatAH|
 anirghAtena doShANAmalpairapyahitairnRuNAm||338||
 nirvRutte~api jvare tasmAdyathAvasthaM yathAbalam|
 yathAprANaM hareddoShaM prayogairvA shamaM nayet||339||
 mRudubhiH shodhanaiH shuddhirtyApanA bastayo hitAH|
 hitAshca laghavo yUShA jA~ggalAmiShajA rasAH||340||
 abhya_{ggodvartanasnAnadhUpanAnyaa}jjanAni ca|
 hitAni punarAvRutte jvare tiktaghRutAni ca||341||
 gurvyabhiShyandyasAtmyAnAM bhojanAt punarAgate|
 la~gghanoShNopacArAdiH kramaH kAryashca pUrvavat||342||
 kirAtatiktakaM tiktA mustaM parpaTako~amRutA|
 ghnanti pltAni cAbhyAsAt punarAvartakaM jvaram||343||

If a person, who has become free from *jwara*, resorts to prohibited factors (as described before) before gaining strength, then the *jwara* reappears. If a person becomes free from *jwara* when the *doshas* have not been eliminated properly, then, even with mild irregularity in regimens (*apachara*), it reappears. As such patients have already suffered for a long time; hence there is weakness and loss of vitality in the tissues. If the fever reappears in them and then this certainly leads to their death.

Sometimes, *doshas* undergo *paripāka* (metabolic transformation) in the *dhatus* and gradually the fever subsides. But, their harmful effects continue as a result of which the patient suffers from *dīnata* (uneasiness), *shvayathu* (edema), *glani* (lassitude), *panduta* (pallor or anemia), loss of appetite, itching, urticaria, pimples and suppression of the power of digestion.

Similarly, other diseases which are already cured reappear in the individual due to the non – elimination of the *doshas* completely, even by resorting to little unwholesome regime after the cure of the disease.

Therefore, the *doshas* should be eliminated from the body either by elimination or alleviation therapies depending upon the stage and strength of the *doshas*, even after the fever subsides in a patient of *jwara*. For this purpose mild elimination therapies and *yāpanā bastīs* should be administered. *Yūṣa* (vegetable soups) and *rasa* (meat soups) of animal's meat, which are light, are useful in this condition. *Abhyanga*, *udvartana*, *snāna*, *dhūpana*, *anjana* and ghee prepared boiling with bitter drugs are useful in the treatment of *jwara*, which has reappeared in a patient.

If the fever reappears because of the intake of food which is guru (heavy), *abhiṣyandī* (which cause obstruction in the channels of the body) and unwholesome; then *langhana* (fasting) and hot therapies should be administered for its treatment as described before. Habitual intake of the decoction of *kirāta tikta*, *tikta*, *mustā*; *parpaṭaka* and *amṛtā* cures repeated fever. [333-343]

Guidelines for management

तस्यां तस्यामवस्थायां ज्वरितानां विचक्षणः। ज्वराक्रियाक्रमपेक्षी कुर्यात्तत्तचिकित्सितम्॥३४४॥

tasyāṁ tasyāmavasthāyāṁ jvaritānāṁ vicakṣaṇah| jvarākriyākramāpēkṣī kuryāttattaccikitsitam||344||

tasyAM tasyAmavasthAyAM jvaritAnAM vicakShaNaH| jvarAkriyAkramApekShI kuryAttattaccikitsitam||344||

The wise physician should treat the patient in different stages of *jwara*, according to the line of treatment of *jwara*. [344]

रोगराट् सर्वभूतानामन्तकृद्दारुणो ज्वरः। तस्माद्विशेषतस्तस्य यतेत प्रशमे भिषक्॥३४५॥

rōgarāṭ sarvabhūtānāmantakṛddāruṇo jvarah| tasmādvīśeṣatastasya yatēta praśamē bhiṣak||345||

rogarAT sarvabhUtAnAmantakRuddAruNo jvaraH| tasmAdvisheShatastasya yateta prashame bhiShak||345||

Jwara is the king of diseases and it causes the death of all creatures and is of serious nature. Therefore, the physician should make special efforts for its treatment. [345]

Summary

तत्र श्लोकः-

यथाक्रमं यथाप्रश्नमुक्तं ज्वरचिकित्सितम्। आत्रेयेणाग्निवेशाय भूतानां हितकाम्यया॥३४६॥

tatra ślōkaḥ-

yathākramāṁ yathāpraśnamuktāṁ jvaracikitsitam| ātrēyēṇāgnivēśāya bhūtānāṁ hitakāmyayā||346||

tatra shlokaH-

yathAkramaM yathAprashnamuktaM jvaracikitsitam| AtreyeNAgniveshAya bhUtAnAM hitakAmyayA||346||

With a desire for the welfare of the living creatures, Atreya has furnished the replies to the queries of Agniveśa regarding the treatment of *jwara*. [347]

Tattva Vimarsha (Fundamental Principles)

- All diseases including *jwara* occur due to disequilibrium of *dosha*. If the *dosha* are in equilibrium state, health is maintained and disease cannot occur.
- The origin of all diseases is because of the tendency for greed or attachment (*parigraha*).
- In order to know a disease, the diagnosis of *sharira* (physical) and *manasa* (mental); *saumya* (predominated by cold) and *agneya* (predominated by heat); *antarvega* (internal) and *bahirvega* (external); *prakrita* (according to seasons) and *vaikrita* (unseasonal); *sadhya*(curable) and *asadhya* (incurable) should be made and treated accordingly.
- The psychic involvement in a disease shall be assessed on the basis of *vaichitya* (mental instability), *arati* (disliking for everything) and *gani* (feeling of weakness in the body).
- *Dosha* dominance can be assessed by the desire to take cold or hot things. In *vata-pitta* dominant diseases, there is desire for cold things and in *vata-kapha* dominant diseases, there is desire for hot things.
- Seasonal variations in temperature, environment can adversely affect the *dosha* balance leading to diseases originated from naturally vitiated *dosha*.
- As a seed remains dormant in the soil and germinates at a favorable time, similarly the *doshas* remain in dormant condition in the *dhatu* and get aggravated at a favorable time. These *dosha* gain strength at an appropriate time and when the power of the inhibiting (disease preventing) factors subsides, then disease occurs.
- In the *abhighataja jwara*, caused by any injury, vitiated *vata* affects predominantly *rakta* (blood) to resulting in *jwara* with discomfort, swelling, discoloration and pain. This resembles with inflammation.
- The exogenous *jwara* caused by external causes are at first independent, but later they get mixed up with the signs and symptoms of *nija jwara* (endogenous fevers).
- The processes of vitiated *dosha* spread all over body after combining with the *rasa* (first *dhatu* of nutrition), its effect of displacement of *agni* (hampering metabolism), obstruction of transport channels specifically sweat pores leading to increase in internal heat are important milestones in pathogenesis of *jwara*.
- *Langhana* (fasting) reduces the aggravated *dosha*, stimulates the *agni*, and leads to lightness and restoration of appetite with alleviation of *jwara* .

- *Langhana* should be performed to the extent that it does not hamper the vitality or strength of the individual. The aim of all these measures is to regain the health which also depends on the physical, mental and spiritual strength.
- Any treatment shall always be performed after proper assessment of nature and state of *dosha*. Otherwise it leads to complications and adverse effects.
- The purification treatments are done only in a state of *utkrishta dosha* (on the verge of being expelled out). If the *dosha* are excessively vitiated, but not in *utkrishta*, then pre-purification treatments like *deepana*, *pachana*, *snehana* are performed to bring the *dosha* to *utkrishta* state.
- *Langhana* (fasting), *swedana* (fomentation to remove obstruction in sweat pores), *kala* (waiting period of eight days), *yavagu* (medicated gruels) and *tikta rasa* drugs (drugs having bitter taste) and all digestive enhancers of *avipakva dosha* (untransformed) are prescribed in the initial stage of *jwara*.
- When *vayu* is predominantly aggravated in *jwara*, then patient should be treated by the administration of *ghee*, *niruha* and *anuvasana bastis* (medicated enemas), unctuous and hot diet and drinks.
- When the *pitta dosha* is dominant the patient should be given purgation therapy, medicated milk, *ghee* and articles which are bitter and cold.
- In state of *kapha* predominance, the patient should be administered emetic therapy, *pachana* (therapy which promotes the digestion and metabolism), non-unctuous diet and drinks, fasting and hot decoctions are useful.
- When the *doshas* causing *jwara* are located in the *rasa dhatu*, then *vamana* and *upavasa* (emesis and fasting) should be done; in case of location in the *rakta dhatu*, *seka* and *pradeha* (pouring of hot medicated liquids and ointment application) should be done; in case of *mamsa dhatu* and the *meda dhatu* *virechana* and *upavasa* should be done; in the *asthi dhatu* and *maja dhatus*, *niruha* and *anuvasana bastis* should be given.
- The *jwara* caused by *shapa* (curse), *abhichara* (tantric rituals with evil purpose), *bhutabhisanga* (affliction by micro organisms or evil spirits), *daiva vyapashraya chikitsa* (performance of spiritual therapies) is the most desired therapy.
- *Jwara* caused by abhighata (external injury) gets cured by the intake and massage of *ghee*, blood-letting, intake of rice with wholesome meat soup.
- Mental factors like *kama* (passion), *shoka* (grief) and *bhaya* (fear) gets cured by the *ashvasana* (assurance), *ish̄ta labha* (providing the desired object), alleviation of *vayu* and *harshana* (bringing excitement or pleasure).
- *Krodha* (anger) subsides by providing *kamya artha* (desired object), *manojna artha* (pleasing object), therapies for the alleviation of *pitta* and *sadvakya* (correct advice).
- The *jwara* caused by *krodha* subsides by *kama* and that caused by *kama* gets cured by *krodha*. *Jwara* caused by *bhaya* (fear) and *shoka* (grief or sorrow) subsides by both *kama* and *krodha*.
- If a patient gets *jwara* just by thinking about it, then his mind should be diverted to desirable, different and surprising incidents (*vishaya*).

- For prevention of re-occurrence of jwara and during its treatment, one should avoid the following: intake of food and drinks which are vidahi (causing burning sensation), guru (heavy), asatmya (unwholesome) and viruddha (mutually contradictory); sexual intercourse, excessive exhaustion, bath, excessive walking exercise, should be avoided by the person who has become free from jwara till he regains strength.
- The remission of jwara depends upon strength of dosha. In acute stage, the remission occurs with difficulty because of severity of dosha. In chronic stage, the remission occurs without difficulty due to mild strength of dosha.
- The signs of regaining health after remission of a disease are disappearance of klama (mental fatigue) and santapa (raised temperature/feeling of heat), absence of pain, clarity of senses and gaining natural mental faculties.
- If a person, who has become free from jwara, resorts to prohibited factors (as described before) before gaining strength, then the jwara reappears.

Vidhi Vimarsha (Applied Inferences)

The clinical applications of jwara and different types of fevers are described in details in a separate article on Jwara.

Related Chapters

- Jwara Nidana Jwara

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Raktapitta Chikitsa

Chikitsa Sthana Chapter 4. Management of Raktapitta (Bleeding Disorders)

Abstract

Raktapitta is a treatable bleeding disorder, if recognized and managed in early stage. If diagnosis is missed and disease is not managed properly, it becomes life threatening (*mahagada*). It occurs because of excessive aggravation of *pitta* and its affliction with *rakta*. Before initiation of treatment, it is important to assess strength of the patient because the treatment regimen is personified for well nourished and emaciated persons. Etiology, classification, prognosis and treatment of *raktapitta* have been described in detail. A good number of herbal and animal preparations are given. Further, this chapter enumerates aspects that are favorable or unfavorable to *raktapitta*. To improve the efficacy of treatment, external beneficial measures, such as *pradeha*, *parisheka*, *sheetasnana* and habitat are described at the end of chapter. This bleeding disorder is not described in modern medicine writings and appears to be unknown to allopathic medicine.

Keywords: *Raktapitta*, *Chikitsa*, *Mahagada*, bleeding disorders, *pitta* aggravation, *rakta* vitiation.

Introduction

Raktapitta is a serious disease caused due to vitiation of *rakta* by aggravated *pitta*. This chapter is placed after *jwara*, because *raktapitta* can occur due to the increased heat in the body produced after *jwara*. Prompt management is necessary for this dreadful disease. This disease develops due to *pitta* aggravation as a result of consumption of *ushna*, *teekshna*, *agneya dravya* and excessive exposure to sunlight.

Because of similarity in constitution of *pitta* with *rakta*, *rakta dhatus* is also vitiated by the etiological factors and has similarity in its smell and color, and is therefore called *raktapitta*.

It originates in the spleen and liver which play pivotal roles in the blood physiology, including clotting. Manifestations of *raktapitta* depend upon vitiation and predominance of a particular *dosha*. There may be a combination of one, two or all the three *dosha*. Based on *dosha* specific features, the blood of the patient of *raktapitta* may appear pale, unctuous and slimy in *kapha*, frothy, blackish red in *vata* and cane sugar like cow urine, shiny black, smoky and coarse-like collierum in *pitta*. *Raktapitta* associated with one *dosha* is curable, with two *dosha* is difficult to cure and incurable if all three *dosha* are involved.

Movement of *raktapitta* may be upward or downward meaning bleeding from upper and/or lower external orifices. This manifestation depends on etiological factors, unctuous hot factors associated with *kapha* has upward *raktapitta* however rough hot associated with *vata* has downward *raktapitta*.

Upward *raktapitta*, associated with *kapha dosha* is treated with *tarpana* (nourishment therapy) and downwards *raktapitta* is associated with *vata* and *peya* (liquid gruel) should be used.

Their drugs mainly have *madhura*, *tikta* and *sheeta guna* which pacify *pitta* and *rakta*. One herb which is very important in *raktapitta* is *vasa*, which alone can check the bleeding quickly.

Sanskrit text, Transliteration and English Translation

अथातो रक्तपित्तचिकित्सितं व्याख्यास्यामः ||१||

इति ह स्माह भगवानात्रेयः||२||

athātō raktapittacikitsitaṁ vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAto raktapittacikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Raktapitta Chikitsa”(Management of bleeding disorders). Thus said Lord Atreya. [1-2]

Agnivesha's query

विहरन्तं जितात्मानं पञ्चगङ्गे पुनर्वसुम् प्रणम्योवाच निर्मोहमग्निवेशोऽग्निवर्चसम्॥३॥ भगवन्
रक्तपित्तस्य हेतुरुक्तः सलक्षणः। वक्तव्यं यत् परं तस्य वक्तुमर्हसि तद्गुरो॥४॥

viharantam jitātmānam pañcagaṅgē punarvasum| praṇamyōvāca
nirmōhamagnivēśō'gnivarcasam||3|| bhagavan raktapittasya hēturuktah salakṣaṇah|
vaktavyam yat param tasya vaktumarhasi tadgurō||4|| viharantaM jitAtmAnaM pa_jcaga_gge
punarvasum| praNamyovAca nirmohamagnivesho~agnivarcasam||3|| bhagavan
raktapittasya heturuuktah salakShaNaH| vaktavyaM yat paraM tasya vaktumarhasi
tadguro||4||

Agnivesha bowed to Punarvasu Atreya who is devoid of confusion, having fire-like brilliance(sharp intellect) and self-control while he was making stroll in the *panchaganga* region, and said, “O Lord! the etiology along with symptoms of haemorrhagic disorders has already been said, now you may tell me the further points, O my teacher! [3-4]

Atreya Punarvasu's reply

गुरुरुवाच-

महागदं महावेगमग्निवच्छीघकारि च। हेतुलक्षणविच्छीघं रक्तपित्तमुपाचरेत्॥५॥ तस्योष्णं तीक्ष्णमम्लं च
कटूनि लवणानि च। घर्मश्चान्नविदाहश्च हेतुः पूर्वं निदर्शितः॥६॥

gururuvāca-

mahāgadarṁ mahāvēgamagnivacchīghrakāri ca| hētulakṣaṇavicchīghraṁ raktapittamupācarēt||5|| tasyōṣṇāṁ tīkṣṇamamlāṁ ca kaṭūni lavaṇāni ca| gharmaścānnavidāhaśca hētuḥ pūrvam̄ nidaśitah||6|| gururuvAca-

maheAgadaM maheVegamagnivacchIghrakAri ca| hetulakShaNavicchIghraM raktapittamupAcaret||5|| tasyoShNaM tlkShNamamlaM ca kaTUni lavaNAni ca| gharmashcAnnovidAhashca hetuH pUrvam̄ nidareshitaH||6||

The teacher said-

The physician knowing causes and symptoms should quickly manage the case of haemorrhagic disorders which is an acute dreadful disease, having more severity and quick-acting like fire. The etiology of the same has already been said earlier such as intake of hot, sharp, sour, pungent and salty substances in excess, exposure to the sun and foods that cause burning sensations. [5-6]

Pathogenesis

तैर्हेतुभिः समत्क्लिष्टं पित्तं रक्तं प्रपद्यते। तद्योनित्वात् प्रपन्नं च वर्धते तत् प्रदूषयत्॥७॥ तस्योष्मणा द्रवो धातुर्धातौर्धातोः प्रसिद्यते। स्विद्यतस्तेन संवृद्धिं भूयस्तदधिगच्छति॥८॥

tairhētubhiḥ samutkliṣṭam̄ pittam̄ raktam̄ prapadyatē| tadyōnitvāt prapannaṁ ca
vardhatē tat pradūṣayat||7|| tasyōṣmaṇādravō dhāturdhātōrdhātōḥ rasicyatē|
svidyatastēnasamāvṛddhirṁ hūyastadadhigacchatii||8|| tairhetubhiH samutkliShTaM pittaM
raktaM prapadyate| tadyonitvAt prapannaM ca vardhate tat pradUShayat||7||
tasyoShmaNA dravo dhAturdhAtordhAtoH prasicyate| svidyatastena saMvRuddhiM
bhUyastadadhigacchatii||8||

Pitta aggravated by these causes vitiates *rakta*. Due to similarity in constitution (of *rakta* and *pitta*), the pathogenesis develops furthermore to vitiate *rakta*. Due to heat of *pitta*, the fluid portion from all the fomented *dhatus* oozes out, which additionally leads to aggravation of *rakta* and *pitta*. [7-8]

Derivation

संयोगाद्दूषणाततु सामान्याद्गन्धवर्णयोः। रक्तस्य पित्तमाख्यातं रक्तपित्तं मनीषिभिः॥९॥

samyoḡāddūṣaṇāttattu sāmānyādgandhavarṇayōḥ| raktasya pittamākhyātam̄
raktapittam̄ manīṣibhiḥ||9|| saMyogAddUShaNAttattu sAmAnyAdgandhavarNayoH|
raktasya pittamAkhyAtaM raktapittam̄ manIshibhiH||9||

Because of conjunction with, similarity in causes of vitiation, odor, color and origin, the disease is called *rakta-pitta*. [9]

Origin of disease

प्लीहानं च यकृच्चैव तदधिष्ठाय वर्तते। स्रोतांसि रक्तवाहीनि तन्मूलानि हि देहिनाम्॥१०॥

plīhānarṁ ca yakṛccaiva tadaḍhiṣṭhāya vartatē| srōtār̄si raktavāhīni tanmūlāni hi dēhinām||10|| plīhAñāM ca yakRuccaiva tadaḍhiShThAya vartate| srotAMsi raktavAhīni tanmUñāni hi dehinAm||10||

The *pitta* (*rakta pitta*) stays located in spleen and liver, because in persons the blood vessels originate from them. [10]

Characteristics of *dosha* vitiation

सान्द्रं सपाण्डु सस्नेहं पिच्छिलं च कफान्वितम् ३यावारुणं सफेनं च तनु रुक्षं च वातिकम्॥११॥ रक्तपितं कषायाभं कृष्णं गोमत्रसन्निभम् मेचकागारधूमाभमञ्जनाभं च पैतिकम्॥१२॥ संसृष्टलिङ्गं संसर्गात्त्रिलिङ्गं सान्निपातिकम्॥१३॥

sāndram sapāṇdu sasnēhaṁ picchilaṁ ca kaphānvitam| syāvāruṇam saphēnam ca tanu rūkṣam ca vātikam||11|| rakta pittam kaśāyābhām kṛṣṇam gōmūtrasannibham| mēcakāgāradhūmābhamañjanābhām capaitikam||12|| saṁsṛṣṭaliṅgam sar̄sargāttriliṅgam ānnipātikam||13| sAndraM sapANDu sasnehaM picchilaM ca kaphAnvitam| shyAvAruNaM saphenaM ca tanu rUkShaM ca vAtikam||11|| rakta pittaM kaShAyAbhaM kRuShNaM gomUtrasannibham| mecaKAgAradhUmAbhama~jjanAbhaM ca paittikam||12|| saMsRuShTali~ggaM saMsargAttrili~ggaM sAnnipAtikam||13|

Viscous, pale, unctuous and slimy (in blood coming out) indicates affliction by *kapha*. Blackish, reddish, frothy, thin and roughness in blood indicates affliction by *vata*. That having ochre-like, black, cow-urine-like, shining black, smoky and collierum-like color indicates *pitta* affliction. Due to combination of two *doshas* the symptoms of the concerned ones are combined. *Rakta pitta* caused by *sannipata* has symptoms of all the three *doshas*. [11-12]

Prognosis

एकदोषानुगं साध्यं द्विदोषं याप्यमुच्यते॥१३॥ यत्त्रिदोषमसाध्यं तन्मन्दाग्नेरतिवेगवत् व्याधिभिः क्षीणदेहस्य वृद्धस्यानशनतश्च यत्॥१४॥

ēkadōṣānugam sādhyam dvidōṣam yāpyamucyatē||13||
yat tridōṣamasādhyam tanmandāgnērativēgavat| vyādhībhīḥ kṣīṇadēhasya
vrddhasyānaśnataśca yat||14|| ekadoShAnugaM sAdhyaM dvi doShaM
yApyamucyate||13|| yattridoShamasAdhyaM tanmandAgnerativegavat| vyAdhibhiH
kShI Nadehasya vRuddhasyAnashnatashca yat||14||

Rakta pitta associated with one *dosha* is curable; that with two *doshas* is palliable while that caused by three *doshas* is incurable. It is also incurable if it is severely forceful and invading the person who has poor digestion, is emaciated due to diseases, old and under-nourished. [13-14]

Gati (direction of flow) and prognosis

गतिरुद्धर्मधृचैव रक्तपितस्य दर्शिता। ऊर्ध्वा सप्तविधदवारा द्विदवारा त्वर्धरा गतिः॥१५॥ सप्त चिछद्राणि शिरसि द्वे चाधः, साध्यमूर्धर्वगम्। याप्य त्वर्धोर्गं, मार्गं तु साध्यं प्रपद्यते॥१६॥ यदा तु

सर्वच्छिद्रेभ्यो रोमकूपेभ्य एव तामसङ्ख्येयां गतिं तस्याहरान्तिकीम्॥१७॥ यच्चोभयाभ्यां
मार्गाभ्यामतिमात्रं प्रवर्तते। तुल्यं कणपगन्धेन रक्तं कृष्णमतीव च॥१८॥ संसृष्टं कफवाताभ्यां कण्ठे
सज्जति चापि यत्। यच्चाप्युपद्रवैः सर्वर्यथोक्तैः समभिद्रुतम्॥१९॥ हारिद्रनीलहरिततामैर्वर्णरूपद्रुतम्।
क्षीणस्य कासमानस्य यच्च न सिद्ध्यति॥२०॥ यद्विदोषानुगं यद्वा शान्तं प्रकुप्यति। मार्गान्मार्ग
चरेद्यद्वा याप्यं पित्तमसृक् चतत्॥२१॥

gatirūrdhvamadhaścaiva raktapittasya | darśitā ūrdhvā saptavidhadvārā dvidvārā
tvadharā gatiḥ॥१५॥ sapta cchidrāni śirasi dvē cādhaḥ, sādhyamūrdhvagam|
yāpyaṁtvadhōgam, mārgau tu dvāvasādhyamprapadyatē॥१६॥ yadā tu
sarvacchidrēbhyō rōmakūpēbhya ēva ca] vartatē tāmasaṅkhyēyāṁ gatim
tasyāhurāntikīm॥१७॥ yaccōbhayābhyāṁ mārgābhyāmatimātrāṁ pravartatē| tulyāṁ
kuṇapagandhēna raktarāṁ kṛṣṇamatīva ca॥१८॥ saṁsṛṣṭāṁ kaphavātābhyāṁ
kanthēsajjati cāpi yat| yaccāpyupadravaiḥ sarvairyathōktaiḥ samabhidrutam॥१९॥
hāridranīlaharitatāmrairvarṇairupadrutam| kṣīnasya kāsamānasya yacca tacca
nasidhyati॥२०॥ yadvidōśānugāṁ yadvā śāntarāṁ śāntarāṁ prakupyati| mārgānmārgam
rēdyadvā yāpyaṁ ittamasṛk ca tat॥२१॥ gatirUrdhvamadhashcaiva raktapittasya
darshitA| UrdhvA saptavidhadvArA dvidvArA tvadharA gatiH॥१५॥ sapta cchidrANI
shirasi dve cAdhaH, sAdhyamUrdhvagam| yApyaM tvadhogaM, mArgau tu
dvAvAsAdhyaM prapadyate॥१६॥ yadA tu sarvacchidrebhyo romakUpebhya eva ca|
vartate tAmasa~gkhyeyAM gatiM tasyAhurAntikIm॥१७॥ yaccobhayAbhyAM
mArdhyAmatimAtraM pravartate| tulyaM kuNapagandhena raktaM kRuShNamatlva
ca॥१८॥ saMsRuShTaM kaphavAtAbhyAM kaNTThe [4] sajjati cApi yat|
yaccApyupadravaiH sarvairyathoktaiH samabhidrutam॥१९॥
hAridranllaharitatAmrairvarNairupadrutam| kShINasya kAsamAnasya yacca tacca na
sidhyati॥२०॥ yadvidoShAnugaM yadvA shAntaM shAntaM [5] prakupyati|
mArdAnmArgaM caredyadvA yApyaM pittamasRuk ca tat॥२१॥

Movement of *raktapitta* is directed upwards and downwards, the former through seven orifices and the latter through two orifices. There are seven orifices in head and two below. That coming from upper passages is curable, the one coming downwards is palliable and that which comes both ways is incurable. When it flows out from all the orifices including the hair follicles it is known as with innumerable movements which is fatal.

Raktapitta passing out excessively through both the passages, having corpse-like smell, exceedingly red or black, associated with *kapha* and *vata*, adhering in throat, having all the complications mentioned earlier, possessing deep yellow, blue, green or coppery color and is in emaciated and coughing patient is incurable.

That *raktapitta* is palliable which is associated with two *doshas*, which aggravates again and again after subsiding and shifts from one passage to another. [15-21]

Characteristics of curable *raktapitta*

एकमार्गं बलवतो नातिवेगं नवोत्थितम्। रक्तपित्तं काले साध्यं स्यान्निरूपद्रवम्॥२२॥

ēkamārgam balavatō nātivēgarṁ avōtthitam| raktapittam sukhē kālē sādhyarṁ syānnirupadravam||22|| ekamArgaM balavato nAtivegaM navotthitam| raktapittaM sukhē kAle sAdhyaM syAnnirupadravam||22||

Raktapitta which has only one passage, is in the strong person, not very forceful, with recent onset, in favorable season (early winter and winter) and without complication is curable. [22]

स्त्रिनर्धोष्णमुष्णारुक्षं च रक्तपित्तस्य कारणम् । अधोगस्योत्तरं प्रायः, पूर्व स्यादूर्धवर्गस्य तु॥२३॥ ऊर्ध्वर्गं कफसंसृष्टमर्थोगं मारुतानुगम् । द्विमार्गं कफवाताभ्यामुभाभ्यामनुबृद्ध्यते॥२४॥

snigdhōṣṇamuṣṇārūkṣam ca raktapittasya kāraṇam| hōgasyōttaram rāyah, pūrvam syādūrdhvagasyatu||23|| ūrdhvagaṁ kaphasamṛṣṭamadhōgam mārutānugam| dvimārgamkaphavātābhyaṁubhābhyaṁanubadhyatē||24||
snigdhoShNamUShNarUkShaM ca raktapittasya kAraNam| adhogasyottaraM prAyaH, pUrvaM syAdUrdhvagasya tu||23|| UrdhvagaM kaphaMsRuShTamadhogaM mArutAnugam| dvimArgaM kaphavAtAbhyAmubhAbhyAmanubadhyate||24||

Raktapitta is caused by food having predominantly unctuous-hot and rough-hot properties. The former often gives rise to the upward movement and the latter to the downward movement of *raktapitta*. The upward movement in *raktapitta* is associated with *kapha*, the downward one with *vata* and that from both the passages is associated with both *kapha* and *vata*. [23-24]

Consequeneces of styptic therapy in *rakta-pitta*

अक्षीणबलमांसस्य रक्तपित्तं यदश्नतः| तद्दोषदुष्टमुत्क्लिष्टं नादौ स्तम्भनमहति॥२५॥ गलग्रहं पूतिनस्यं मूर्छायमरुचिं ज्वरम् गुल्मं प्लीहानमानाह किलासंकृच्छ्रमूत्रताम्॥२६॥ कुष्ठान्यर्शासि वीसर्प वर्णनाशं भग्नंदरम् बुद्धीन्द्रियोपरोधं च कुर्यात् स्तम्भितमादितः॥२७॥ तस्मादुपेक्ष्यं बलिनो बलदोषविचारिणा | रक्तपित्तं प्रथमतप्रवृद्धसिद्धिमिच्छता॥२८॥

akṣīṇabalamāṁsasya raktapittam yadaśnataḥ| taddoṣaduṣṭamutkliṣṭam nādau stambhanamarhati||25|| galagraham pūtinasyam mūrcchāyamaruciṁ jvaram| gulmaṁ plīhānamānāhaṁ kilāsam ṛcchramūtratām||26|| kuṣṭhānyarśāṁsi vīsarparāṁ varṇanāśāṁ bhagandaram| buddhīndriyōparōdhaṁ ca kuryāt stambhitamāditah||27|| tasmādupēkṣyaṁbalinō baladōṣavicāriṇi rakta-pittaṁ prathamataḥ ravṛddhamīddhimicchatā||28|| akShINabalamAMsasya raktapittaM yadashnataH| taddoShaduShTamatkliShTaM nAdau stambhanamarhati||25|| galagrahaM pUtinasyaM mUrcchAyamaruciM jvaram| gulmaM plihAnamAnAhaM kilAsaM kRucchramUtratAm||26|| kuShThAnyarshAMsi vlsarpaM varNanAshaM bhagandaram| buddhIndriyoparodhaM ca kuryAt stambhitamAditaH||27|| tasmAdupekShyaM balino baladoShavicAriNA [6] | raktapittaM prathamataH pravRuddhaM [7] siddhimicchatā||28||

Stambhana (styptic therapy) should not be given at first in hemorrhagic disorders having excessive impurities, aggravated *doshas* and in a person who is not emaciated and weak and originated from excess nourishment. If checked at the very start, it produces throat congestion, fetid smell from the nose, fainting, anorexia, fever, *gulma*, spleen

enlargement, hardness of bowels, leucoderma, dysuria, skin disorders, piles, erysipelas, loss of complexion, fistula-in-anus, obstruction to intellect and senses.

Hence for successful management, one should at first ignore (should not give styptic therapy) the hemorrhagic disorder after assessing the strength and condition or morbidity in a strong patient. [25-28]

प्रायेण हि समुक्तिक्लिष्टमामदोषाच्छरीरिणाम्। वृद्धिं प्रयातिपित्तासृक्तस्मातलङ्घ्यमादितः॥२९॥ मार्गे
दोषानुबन्धं च निदानं प्रसमीक्ष्य च। लङ्घनं रक्तपित्तादौ तर्पणं वा प्रयोजयेत्॥३०॥

prāyēṇa hi mutkliṣṭamāmadōṣāccharīṇām| vṛddhim prayāti
pittāśrktasmāttallaṅghyamādītah||29|| mārgau dōṣānubandhaṁ ca nidānam
prasamīkṣya ca| laṅghanam raktapittādau tarpaṇam vā prayōjayēt||30|| prAyeNa hi
samutkliShTamAmadoShAccharIriNAm| vRuddhiM prayAti
pittAsRuktasmAttalla~gghyamAditaH||29|| mArgau doShAnubandhaM ca nidAnaM
prasamIkShya ca| la~gghanaM raktapittAdau tarpaNaM vA prayojayet||30||

Mostly the *raktapitta* is aggravated by *amadosha*, hence patient should be managed with lightening measures. The physician should apply in the beginning of *raktapitta*, lightening or nourishing measure according to passage, association of *dosha* and etiology. [29-30]

Nourishment regimen

हीबेरचन्दनोशीरमुस्तपर्पटकैः शृतम्। केवलं शृतशीतं वा दद्यातोयं पिपासवे॥३१॥ ऊर्ध्वगे तर्पणं पूर्वं पेयां
पूर्वमधोगते। कालसात्म्यानबन्धजो दद्यात् प्रकृतिकल्पवित्॥३२॥ जलं खर्जूरमूद्वीकामधूकैः सपरुषकैः।
शतशीतं प्रयोक्तव्यं तर्पणार्थं सशर्करम्॥३३॥ तर्पणं सघृतक्षीद्रं लाजचूर्णं प्रदापयेत्। ऊर्ध्वगे रक्तपित्तं तत्
पीतं काले व्यपोहति॥३४॥ मन्दाग्नेरम्लसात्म्याय तत् साम्लमपि कल्पयेत्॥३५॥

hrībēracandanōśīramustaparpaṭakaiḥ śṛtam|kēvalam śṛtaśītam vā dadyāttōyam
pipāsavē॥३१॥ ūrdhvagē tarpaṇam pūrvam pēyām pūrvamadhogatē|
kālasātmyānubandhajñō dadyāt prakṛitikalpavit॥३२॥ jalām kharjūramudvīkāmadhukaiḥ
saparūṣakaiḥ| śṛtaśītam prayōktavyam tarpaṇārthē saśarkaram॥३३॥ tarpaṇam
saghṛtakṣaudram lājacūrnaiḥ pradāpayēt| ūrdhvagaṁ raktapittam tat pītam kālē
vyapōhati॥३४॥ mandāgnēramlasātmyāya tat sāmlamapi kalpayēt|
dādimāmalakairvidvānamlārtham cānudāpayēt॥३५॥
hrlberacandanoshIramustaparpaTakaiH shRutam| kevalaM shRutashItaM vA
dadyAttoyaM pipAsave॥३१॥ Urdhvage tarpaNaM pUrvaM peyAM pUrvamadhogate|
kAlasAtmyAnubandhaj~jo dadyAt prakRutikalpavit॥३२॥ jalaM
kharJuraM RudvIkAmadhUkaiH saparUShakaiH| shRutashItaM prayoktavyaM
tarpaNArthe sasharkaram॥३३॥ tarpaNaM saghRutakShaudraM IAjacUrNaiH
pradApayet| UrdhvagaM raktapittaM tat pltaM kAle vyapohati॥३४॥
mandAgneramlasAtmyAya tat sAmlamapi kalpayet| dADimAmalakairvidvAnamIArthaM
[8] cAnudApayet॥३५॥

The patient who feels thirsty should be given water boiled with *hibera*, *chandana*, *ushira*, *musta* and *parpataka* or only cooled boiled water. One having knowledge of constitution and preparation should prescribe saturating drink in upward movement of *raktapitta* and liquid gruel in the downward one considering time, suitability and association of *doshas*. For saturation, water boiled with *kharjura* (date), *mridvika* (fruit), *madhuka* (dry flowers) and *parushaka* (fruit) and cooled along with sugar.

Powder of parched paddy mixed with ghee and honey makes a good saturating preparation which, if taken timely, alleviates the upward movement of *raktapitta*. The saturating preparation may be soured with pomegranates and *amalaka* fruits in persons having poor digestion and suited to sour things.[31-35]

Diet advised in *raktapitta*

शालिषष्टिकनीवारकोरटूषप्रशान्तिकाः ३६॥ मुद्गा
मसराश्चणकाः समकृष्टाढकीफलाः ३७॥ प्रशस्ताः सूपयषार्थं कल्पिता रक्तपित्तिनाम् ३८॥ कोविदारस्य
पुष्पाणि काश्मर्यस्याथ शाल्मले ३९॥ अन्नपानविधौ शाकंयच्चान्यद्रक्तपित्तिनुत् ४०॥ पारावतान्
कपोताश्च लावान् रक्ताक्षवर्तकान् ४१॥ शशान् कपिञ्जलानेणान् हरिणान्कालपृच्छकान् ४२॥ रक्तपित्ते
हितान् विद्याद्रसास्तेषां प्रयोजयेत् ४३॥ इषदम्लाननम्लान् वा घृतभृष्टान् सशक्तिरान् ४४॥ कफानुगे यूषशाकं
दद्याद्वातानुगे रसम् ४५॥ रक्तपित्ते यवागूनामतः कल्पः प्रवक्ष्यते ४६॥

śaliṣṭikanīvārakōradūṣapraśāntikāḥ| śyāmākaśca priyaṅguśca bhōjanāṁ
raktapittinām||36|| mudgā masūrāścaṇakāḥ samakuṣṭhādhakīphalāḥ| praśastāḥ
sūpayūṣārthē kalā raktapittinām||37|| paṭōlanimbavētrāgraplakṣavētasapallavāḥ|
kirātātiktakāṁ śākāṁ gaṇḍīrah sakāṭhillakah||38|| kōvidārasya puṣpāṇi kāśmaryasyātha
śālmalēḥ| annapānavidhau śākāṁ yaccānyadraktapittanut||39|| śākārthāṁ
śākasātmyānāṁ tacchastāṁ raktapittinām| svinnām vā sarpiṣā bhr̄ṣṭām yūṣavadvā
vipācitam||40|| pārāvatān kapōtāṁśca lāvān raktākṣavartakān| śāśān kapiñjalānēṇān
hariṇānkālapucchakān||41|| raktapittē hitān vidyādrasāṁstēshāṁ prayōjayēt|
īśadamlānanamlān vā ghṛtabhr̄ṣṭān saśarkarān||42|| kaphānugē yūṣāśākāṁ
dadyādvātānugē rasam| raktapittē yavāgūnāmataḥ kalpaḥpravakṣyatē||43||
shAlishtikanlvArakoradUShaprashAntikAH| shyAmAkashca priya~ggushca
bhojanaM raktapittinAm||36|| mudgA masUrAshcaNakAH samakuShThADhakIphalAH|
prashastAH sUpayUShArthe kalpitA raktapittinAm||37||
paTolanimbavetrAgraplakShavetasapallavAH| kirAtatiktakaM shAkaM gaNDIraH [9]
sakaThillakaH||38|| kovidArasya puShpAni kAshmaryasyAtha shAlmaleH|
annapAnavidhau shAkaM yaccAnyadraktapittanut||39|| shAkArthaM shAkAsAtmyAnAM
tacchastaM raktapittinAm| svinnāM vA sarpiShA bhRuShTaM yUShavadvA
vipAcitam||40|| pArAvatAn kapotAMshca lAvAn raktAkShavartakAn| shashAn
kapi~jjalAneNAn hariNAnkAlapucchakAn||41|| raktapitte hitAn vidyAdrasAMsteShAM
prayojayet| IShadamlAnanamlAn vA ghRutabhuShTAshasharkarAn||42|| kaphAnuge
yUShashAkaM dadyAdvAtAnuge rasam| raktapitte yavAgUnAmataH kalpaH
pravakShyate||43||

The patients of *raktapitta* should take meal consisting of the cereals of *shali*, *shashtika*, *nivara*, *koradusha*, *prashantika*, *shyamaka* and *priyangu*. For them gram, lentils, green grams, *makustha* (kidney beans), and *adhaki* are recommended for the pulse-soup. The vegetables useful in *raktapitta* are *patola*, *nimba*, tip of *vetra*, tender leaves of *plaksha* and *vetasa*, *kiratatikta*, *gandira* and *kathillaka*. The flowers of *kovidara*, *kashmarya* and *shalmali* are also used and vegetable should be prepared by boiling or frying with ghee or like soup and given to the vegetarian patients.

The flesh of dove, pigeon, common quail, *raktaksha* (crane), *vartaka* (a quail), grey partridge, *ena*, *harina* and *kalapucchaka* (species of deer) are wholesome in *raktapitta*. Their soup is used in sour or in-soured form, fried with ghee and added sugar. In (*raktapitta*) associated with *kapha* vegetable soup and in that with *vata* meat-soup is prescribed. Now for *raktapitta*, preparations of gruel will be described. [36-43]

Medicated gruels in *raktapitta*

पद्मोत्पलानां किञ्जल्कः पृश्निपर्णी यडगुकाः। जले साध्या रसे तस्मिन् पेया स्याद्रक्तपितिनाम्॥४४॥
चन्दनोशीरलोधाणां रसे तद्वत् नागरे। किराततिक्तकोशीरमुस्तानां तद्वदेव च॥४५॥
धातकीधन्वयासाम्बुबिल्वानां वा रसे शता। मसूरपृश्निपण्यर्वा स्थिरामुद्गरसेऽथ वा॥४६॥ रसे हरेणकानां
वा सघृते सबलारसे। सिद्धाः पारावतार्दीना रसे वा स्युः पृथक्पृथक्॥४७॥ इत्युक्ता रक्तपितिघ्न्यः शौताः
समधुशर्कराः। यवाग्वः कल्पना चैषा कार्या मांसरसेष्वपि॥४८॥

padmōtpalānāṁ kiñjalkaḥ pṛśniparnī priyaṅgukāḥ| jalē sādhyā rasē tasmin pēyā
syādraktapittinām||44|| candanōśīralōdhrānāṁ rasē tadvat sanāgarē|
kirātakātakōśīramustānāṁ tadvadēva ca||45|| dhātakīdhanvayāsāmbubilvānāṁ vā rasē
śītāl masūraprśniparnyōrvāsthirāmudgarasē'tha vā||46|| rasē harēṇukānāṁ vā saghṛtē
sabalārasē| siddhāḥ pārāvatādīnāṁ rasē vā syuḥ pṛthakpṛthak||47|| ityuktā
raktapittaghnyaḥ śītāḥ samadhuśarkarāḥ| yavāgvah kalpanā caiṣā kāryā
māṁsaraseshvapi||48|| padmotpalAnAM ki~jjalkaH pRushniparNI priya~ggukAH| jale
sAdhyA rase tasmin peyA syAdraktapittinAm||44|| candanoshIralodhrANAM rase tadvat
sanAgare| kirAtatiktakoshIramustAnAM tadvadeva ca||45||
dhAtakIdhanvayAsAmbubilvAnAM vA rase shRutA| masUrapRushniparNyovrA
sthirAmudgarase~atha vA||46|| rase hareNukAnAM vA saghRute sabalArase| siddhAH
pArAvatAdInAM rase vA syuH pRuthakpRuthak||47|| ityuktA raktapittaghnyaH shItAH
samadhuśarkarAH| yavAgvaH kalpanA caiShA kAryA mAMsaraseShvapi||48||

The stamens of lotus and water lily, *prashniparni* and *priyangu* grains should be boiled in water. In the same decoction liquid gruel should be prepared for the patients of *raktapitta*. Gruel may also be prepared in the decoction of

1. *chandana*, *ushira*, *lodhra*, and *musta*,
2. *Kiratatikta*, *ushira* and *musta*,
3. *Dhataki*, *dhanvayasa*, *hrivera* and *bilwa*,
4. *Masura* and *prashniparni* or *shalaparni* and *mudga*,
5. *Harenuka* mixed with ghee,
6. *Bala*,

7. The meat-soup of dove etc.

These are the gruels useful in *raktapitta* and should be taken cooled and added with honey and sugar. Such preparations may also be made in meat-soups. [44-48]

शशः सवास्तुकः शस्तो विबन्धे रक्तपित्तिनाम्| वातोल्बणे तितिरिः स्यादुदुम्बररसे शूतः||४९|| मयूरः प्लक्षनिर्यूहे न्यग्रोधस्य च कक्कटः| रसे बिल्वोत्पलादीनांवर्तकक्रकरौ हितौ||५०|| तृष्ण्यते तिक्तकैः सिद्धं तृष्णाघ्नं वा फलोदकम्| सिद्धं विदारिगन्धाद्यैरथवाशृतशीतलम्||५१||

śāśah savāstukah śastō vibandhē raktapittinām| ātōlbaṇē tittirih syādudumbararasē śṛtaḥ||49|| mayūrah plakṣaniryūhē nyagrōdhasya ca kukkuṭah| rasē bilvōtpalādīnām vartakakrakarau hitau||50|| ṭryatē tiktakaiḥ siddhaṁṭṛṣṇāghnaṁ vā phalōdakam| siddhaṁ vidārigandhādyairathavā śṛtaśītalām||51|| shashaH savAstukaH shasto vibandhe raktapittinAM| vAtolbaNe tittiriH syAdudumbararase shRutaH||49|| mayUraH plakShaniryUhe nyagrodhasya ca kukkuTaH| rase bilvotpalAdInAM [10] vartakakrakarau hitau||50|| tRuShyate tiktakaiH siddhaM tRuShNAghnaM vA phalodakam| siddhaM vidArigandhAdyairathavA [11] shRutashItalam||51||

In the patient of *raktapitta* if there is constipation due to aggravated *vata*, the following preparations are useful:

1. rabbit cooked with *vastuka*,
2. partridge cooked in decoction of *udumbara*,
3. peacock cooked in decoction of *plaksha*,
4. fowl cooked in decoction of *nygrodha*,
5. *vartaka* and *krakara* cooked in decoction of *bilwa*, *utpala* etc. In the condition of thirst, water boiled with bitter or thirst-alleviating fruit-juice, or water boiled with the drugs of the *vidarigandhadi* group or simply water boiled and cooled is prescribed. [49-51]

जात्वा दोषावनुबलौ बलमाहारमेव च| जलं पिपासवे दद्याद्विसर्गादल्पशोऽपि वा॥५२॥

jñātvā dōśāvanubalau balamāhāramēva ca| jalām pipāsavē dadyādvisargādalpaśo'pi vā||52|| j~jAtvA doShAvanubalau balamAhArameva ca| jalaM pipAsave dadyAdvisargAdalpasho~api [12] vA||52||

Water should be given to the thirsty patient up to complete satisfaction of thirst or in small quantity considering the associated *doshas*, strength as well as diet (of the patient). [52]

निदानं रक्तपित्तस्य यत्किञ्चित् सम्प्रकाशितम्| जीवितारोग्यकामैस्तन्न सेव्यं रक्तपित्तिभिः॥५३॥
इत्यन्नपानं निर्दिष्टं क्रमशो रक्तपित्तनुत्॥५४॥

nidānam raktapittasya yatkiñcit samprakāśitam| jīvitārōgyakāmaistanna sēvyam raktapittibhiḥ||53|| ityannapānam nirdiṣṭam kramaśō raktapittanut|54| nidAnaM raktapittasya yatki~jcit samprakAshitam| jīvitArogyakAmaistanna sevyam raktapittibhiH||53|| ityannapAnaM nirdiShTaM kramasho raktapittanut|54|

Whatever etiological factors of *raktapitta* are mentioned should be avoided by those patients, if they want to survive and to be free from the disease. Thus, the diet alleviating *raktapitta* has been described in order. [53]

Indication of purification therapy

वक्ष्यते बहदोषाणां कार्यं बलवतां च यत्॥५४॥ अक्षीणबलमांसस्य यस्य सन्तर्पणोत्थितम्। बहदोषं बलवतो रक्तपितं शेरीरिणः॥५५॥ काले संशोधनाहस्य तद्धरेन्निरुपद्रवम्। विरेचनेनोर्ध्वभागमधोगं वैमनेन च॥५६॥ त्रिवृतामभयां प्राजःफलान्यारग्वधस्य वा। त्रायमाणां गवाक्ष्या वा मूलमामलकानि वा॥५७॥ विरेचनं प्रयुज्जीत प्रभूतमधशर्करम्। रसः शस्यते तेषां रक्तपिते विशेषतः॥५८॥ वमनं मदनोन्मिश्रो मन्थः सक्षौद्रशर्करः। सशर्करं वा सोलिलमिक्षूणां रस एव वा॥५९॥ वत्सकस्य फलं मुस्तं मदनं मधुकं मधुं। अधोवहे रक्तपिते वमनं परमुच्यते॥६०॥ ऊर्ध्वर्गे शुद्धकोष्ठस्य तर्पणादिः क्रमो हितः। अधोगते यवाग्वादिर्न चेत्स्यान्मारुतोबली॥६१॥

vakṣyatē bahudōṣāṇāṁ kāryam balavatāṁ ca yat॥54॥ akṣīṇabalamāṁsasya yasya santarpaṇōtthitam| bahudōṣāṁ balavatō raktapittāṁ śarīriṇah॥55॥ kālē sarīśōdhanārhasya taddharēnnirupadrvam| virēcanēnōrdhvabhāgamadhōgarṁ vamanēna ca॥56॥ trivṛtāmabhayāṁ prājñāḥ phalānyāragvadhasya vā| trāyamāṇāṁ gavākṣyā vā mūlamāmalakāni vā॥57॥ virēcanāṁ prayuñjīta prabhūtamadhuśarkaram| rasaḥ praśasyatē tēśāṁ raktapittē viśeṣataḥ॥58॥ vamanāṁ madanōnmīśrō manthāḥ sakṣaudraśarkarah| saśarkaram vā salilamikṣūṇāṁ rasa ēva vā॥59॥ vatsakasya phalaṁ mustaṁ madanaṁ madhukaṁ madhu| adhōvahē raktapittē vamanāṁ paramucyatē॥60॥ ūrdhvagē śuddhakōṣṭhasya tarpaṇādih kramō hitaḥ| adhōgatē yavāgvādirna cētsyānmāruto balī॥61॥ vakShyate bahudoShANAM kAryAM balavatAM ca yat॥54॥ akShINabalAMMsasya yasya santarpaNotthitam| bahudoShaM balavato raktapittAM sharIriNaH॥55॥ kAle saMshodhanArhasya taddharen nirupadrvam| virecanenordhvabhAgamadhogaM vamanena ca॥56॥ trivRutAmabhayAM prAj~jaH phalAnyAragvadhasya vA| trAyamANAM gavAkShyA vA mUlamAmalakAni vA॥57॥ virecanAM prayu~jjita prabhUtamadhuSharkaram| rasaH prashasyate teShAM raktapitte visheShataH॥58॥ vamanAM madanonmishro manthaH sakShaudrasharkaraH| sasharkaram vA salilamikShUNAM rasa eva vA॥59॥ vatsakasya phalaM mustaM madanaM madhukaM madhu| adhovahe raktapitte [13] vamanAM paramucyate॥60॥ Urdhvage shuddhakoShThasya tarpaNAdiH kramo hitaH| adhogate yavAgvAdirna cetsyAnmAruto ball॥61॥

Now the management of strong patients having plenty of *doshas* will be explained further:

Raktapitta, due to excess nutrition in a strong patient with aggravated *doshas*, who do not have emaciation, debility and complications, should be treated with purification therapy by purgation in upward type and emesis in lower movement of *raktapitta*.

Purgation should be administered with (the decoction) of *trivrita*, *haritaki*, fruit of *aragavadha*, *trayamana*, *indrayana* (roots) or *amalaka* (fruits) mixed with plenty of honey and sugar. Their decoction is efficacious particularly in *raktapitta*.

In the downward *raktapitta madanaphala* mixed with

1. *mantha* (churned beverage) also having honey and sugar, or
2. water added with sugar or
3. sugarcane juice, or *indrayava*, *musta*, *madana*, *madhuka* and honey – all mixed together make an excellent emetic.

After purification, in the case of upward type, the dietetic regimen starts with saturating drink while in that of downward type, it starts with gruel subjected to the condition that *vata* is not dominant. [54-61]

Pacification therapy

बलमांसपरिक्षीणं शोकभाराध्वकर्शितम्| ज्वलनादित्यसन्तप्तमन्यैर्वा क्षीणमामयैः||६२|| गर्भिणीं स्थविरं बालं रुक्षाल्पप्रमिताशिनम्| अवम्यमविरेच्यं वा यं पश्येद्रक्तपित्तिनम्||६३|| शोषेण सानुबन्धं वा तस्य संशमनी या| शस्यते रक्तपित्तस्य परं साऽथ प्रवक्ष्यते||६४|| अटरूषकमृदवीकापथ्याक्वाथः सशर्करः| मधुमिश्रः श्वासकासरक्तपित्तनिर्बहृणः||६५|| अटरूषकनिर्यूहे प्रियङ्गं मृतिकाञ्जने| विनीयलोधं क्षौद्रं च रक्तपित्तहरं पिबेत्||६६|| पदमकं पद्मकिञ्जलं दूर्वा वास्तूकमुत्पलम्| नागपष्पं च लोधं च तेनैव विधिना पिबेत्||६७|| प्रपोण्डरीकं मधुकं मधु चाश्वशकृद्रसे| यवासभृगरजसोमूलं वा गोशकृद्रसे||६८|| विनीय रक्तपित्तघ्नं पेयं स्यातपुलाम्बुना| यक्तं वा मधुसर्पिभ्यां लिहयादगोश्वशकृद्रसम्||६९|| खदिरस्य प्रियङ्गूणां कोविदारस्य शाल्मलेः| पृष्पचण्णीने मधुना लिहयान्ना रक्तपित्तिकः||७०|| शृङ्गाटकाना लाजाना मुस्तखर्जूरयोरपि लिहयाच्छण्णीने मधुना पदमानां केशरस्य चा||७१|| धन्वजानामसृग्लहयान्मधुना मृगपक्षीणाम्| सक्षोद्रं ग्रथिते रक्ते लिहयात् पारावतं शकृत्||७२||

balamāṁsapariksṭīnam sōkabhārādhvakarśitam jvalanādityasantaptamanyairvā
kṣṭīnamāmayaih||62|| garbhīḥīṁ sthavirāṁ bālāṁ rūkṣālpapramitāśinam|
avamyamavirēcyam vā yaṁ paśyēdraktapittinam||63|| sōṣēṇa sānubandham vā tasya
saṁśamanī kriyā| śasyatē rakta pittasya param sā'tha pravakṣyatē||64||
aṭarūṣakamrdvīkāpathyākvāthaḥ saśarkaraḥ| madhumiśraḥ
śvāsakāsaraktapittanibarhanah||65|| aṭarūṣakaniryūhē priyaṅgum mṛttikāñjanē| vinīya
lōdhrām kṣaudram ca rakta pittaharam pibēt||66|| padmakām padmakiñjalkām dūrvām
vāstukamutpalam| nāgapuṣparām ca lōdhrām ca tēnaiva vidhinā pibēt||67||
prapaṇḍarīkām madhukām madhu cāśvaśakṛdrasē| yavāsabhr̄ngarajasōrmūlam vā
gōśakṛdrasē||68|| vinīya rakta pittaghnam pēyam syāttāndulāmbunā| yuktam vā
maghusarpibhyām lihyādgōśvaśakṛdrasam||69|| khadirasya priyaṅgūṇām kōvidārasya
śālmalēh| puṣpacūrṇāni madhunā lihyānnā rakta pittakah||70|| śr̄ngāṭakānām lājānām
mustakharjūrayōrapi lihyāccūrṇāni madhunā padmānām kēśarasya ca||71||
dhanvajānāmasrglihyānmadhunā mrgapakṣīnām| sakṣaudram grathitē raktē lihyāt
pārāvatarām śakṛt||72|| balamAMsaparikShINaM shokabhArAdhvakarshitam|
jvalanAdityasantaptamanyairvA kShINaM AmayaiH||62|| garbhiNIM sthaviraM bAlaM
rUkShAlpapramitAshinam| avamyamavirecyam vA yaM pashyedraktapittinam||63||
shoSheNa sAnubandhaM vA tasya saMshamanI kriyA| shasyate rakta pittasya paraM
sA~atha pravakShyate||64|| aTarUShakamRudvIkApathyAkvAthaH sasharkaraH|
madhumishraH shvAsakAsaraktapittanibarhaNaH||65|| aTarUShakaniryUhe priya~gguM
mRuttikA~jjane| vinlya lodhraM kShaudraM ca rakta pittaharam pibet||66|| padmakaM
padmaki~jalkaM dUrvAM vAstUkamutpalam| nAgapuShpaM ca lodhraM ca tenaiva
vidhinA pibet||67|| prapaṇDarlkaM madhukaM madhu cAshvashakRudrase|
yavAsabhRu~ggarajasormUlaM vA goshakRudrase||68|| vinlya rakta pittaghnaM peyam

syAttaNDulAmbunA] yuktaM vA maghusarpibhyAM lihyAdgoshvashakRudrasam||69||
 khadirasya priya~ggUNAM kovidArasya shAlmaleH| puShpacUrNAni madhunA
 lihyAnnA raktapittikaH||70|| shRu~ggATakAnAM IAjAnAM mustakharjUraylorapi|
 lihyAccUrNAni madhunA padmAnAM kesharasya ca||71||
 dhanvajAnAmasRuglihyAnmadhunA mRugapakShiNAM| sakShaudraM grathite rakte
 lihyAt pArAvataM shakRut||72||

The patient of *raktapitta* who is not fit for emesis or purgation such as one debilitated, emaciated by excess grief, weight lifting or walking, exposed to heat of the fire or the sun, or emaciated by other diseases, pregnant, old, child, taking rough, little and measured diet or associated with phthisis should be treated with pacificatory treatment which is mentioned hereafter.

Decoction of *vasa*, *mridwika* and *haritaki* added with sugar and honey alleviates dyspnea, cough and hemorrhagic disorder.

Decoction of *vasa* after mixing *priyangu*, *mruttika*(mud), collyrium, *lodhra* and honey in the same should be taken in *raktapitta*.

In the same way, *padmaka*, lotus stamens, *durva*, *vastuka*, *utpala*, *nagakeshara* and *lodhra* should be taken.

Parpaundarika, *madhuka* and honey dissolved in the liquefied horse's feces or the roots of *yavasa* or *bhringaraja* dissolved in liquefied cow-dung should be taken with rice water. This alleviates hemorrhagic disorder. Or the solution of cow-dung and horse-dung mixed with honey and ghee be taken.

The patient suffering from hemorrhagic disorder should take powder of the flowers of *khadira*, *priyangu*, *kovidara* and *shalmali* mixed with honey.

Powders or *shrangataka* parched paddy, *musta*, *kharjura* and lotus stamens should be taken with honey.

Blood of the wild animals and birds should be taken with honey. If the blood is clotted, one should take excrement of pigeon with honey. [62-72]

उशीरकालीयकलोधपदमकप्रियइगुकाकट्फलशड्खगैरिकाः पृथक् पृथक्
 चन्दनतुल्यभागिकाः शर्करास्तण्डुलधावनाप्लुताः ||७३|| रक्तं सपितं तमकं पिपासां दाहं च पीताः
 शमयन्ति सद्यः | किराततिक्तं क्रमकं समस्तं कमलोत्पले च ||७४|| हीबेरमूलानि पटोलपत्रं दुरालभा
 पर्षटको मणालम् | धनञ्जयोदम्बरवैतसत्वइन्यगोधशालेयवासकत्वक् ||७५||
 तुगालतावृत्तसतण्डुलीयंसारिवंमोचरसः समझगा| पृथक् पथक् चन्दनयोजितानि तेनैव कल्पेन हितानि
 तत्र ||७६|| निशिस्थिता वा स्वरसीकृता वा कल्कीकृतावा मृदिताः शृता वा| एते समस्ता गणशः पृथग्वा
 रक्तं सपितं शमयन्ति योगाः ||७७||

uśīrakālīyakalōdhrapadmakapriyaṅgukākaṭphalaśaṅkhagairikāḥ| pr̥thak pr̥thak
 candanatulyabhāgikāḥ saśarkarāstāṇḍuladhāvanāplutāḥ||73|| raktam̄ sapittam̄ tamakam̄
 pipāsām̄ dāham̄ ca pītāḥ śamayanti sadyaḥ| kirātatiktam̄ kramukam̄ samustam̄
 rapauṇḍarīkarān̄ kamalōtpalē ca||74|| hr̥bēramūlāni paṭolapatram̄ durālabhā parpaṭakō

mr̄nālam| dhanañjayōdumbaravētasatvañyagrōdhaśālēyayavāsakatvak||75||
 tugālatāvētasatañdūtīyam sasārivam mōcarasaḥ samaṅgāḥ pṛthak pṛthak
 candanayōjītāni tēnaiva kalpēna hitāni tatra||76|| niśi sthitā vā svarasīkrtā vā kalkīkrtā vā
 mr̄ditāḥ śrtā vāl ētē samastā gaṇaśah pṛthagvā raktam̄ sapittam̄ śamayanti yōgāḥ||77||
 ushlrakAllyakalodhrapadmakapriya_{ggukAkaTphalasha} gkhagairikAH| pRuthak pRuthak
 candanatulyabhAgikAH sasharkarAstaNDuladhAvanAplutAH||73|| raktaM sapittaM
 tamakaM pipAsAM dAhaM ca pltAH shamayanti sadyaH| kirAtatiktaM kramukaM
 samustaM prapaUNDarikaM kamalotpale ca||74|| hrlberamUIAni paTolapatraM
 durAlabha parpaTako mRuNAlam|
 dhana_{jjayodumbaravetasava} gnyagrodhashAleyayavAsakatvak||75|| tugAlatAvetasataNDullyaM
 [15] sasArivaM mocarasaH sama~ggA| pRuthak pRuthak candanayojitAni tenaiva
 kalpena hitAni tatra||76|| nishi sthitA vA svarasIkRutA vA kalkIkRutA [16] vA mRuditAH
 shRutA vA| ete samastA gaNashaH pRuthagvA raktaM sapittaM shamayanti [17]
 yogAH||77||

Ushira, kalyaka, lodhra, padmaka, priyangu, katphala, conch and ochre-each taken separately with equal part of sandal along with sugar and dissolved in rice water alleviate quickly internal haemorrhage, fainting, thirst and burning sensation.

Kiratatikta, kramuka, musta, prapaundarika, kamala, utpala, hribera (root), *patola* (leaves), *duralabha, parpataka*, lotus stalk, bark of *arjuna, udumbara, vetasa, nyagrodha, shaileya* and *yavashaka; tuga, lata* (durva), *vetasa tanduliya, sariva, mocharasa* and *lajjalu* – each separately mixed with sandal may be administered as above. They collectively as group or separately used in the form of cold infusion, juice, paste, hot infusion or decoction check the hemorrhagic disorder. [72-77]

मुद्गः सलाजः सयवा: कृष्णः सोशीरमुस्ताः सह चन्दनेन। बलाजले पर्युषिताः कषाया रक्तं सपितं शमयन्त्युदीर्णम्॥७८॥

mudgāḥ salājāḥ sayavāḥ sakṛṣṇāḥ sōśīramustāḥ saha candanēnaḥ balājalē paryuṣitāḥ kaśāyā raktam̄ sapittam̄ śamayantyudīrṇam||78|| mudgAH salAjAH sayavAH sakRuShNAH soshlramustAH saha candanenaḥ balAjale paryuShitAH kaShAyA raktaM sapittaM shamayantyudlNam||78||

Green gram, parched paddy, *pippali, ushira, musta* and *chandana* are kept for the whole night in water boiled with *bala*. This pacifies even the aggravated *raktapitta*. [78]

वैद्यर्यमुक्तामणिगैरिकाणां मृच्छङ्खहेमामलकोटकानाम्। मधूदकस्येक्षुरसस्य चैव पानाच्छमं गच्छति रक्तपित्तम्॥७९॥ उशीरपद्मात्पलचन्दनानां पक्वस्य लोष्टस्य च यः प्रसादः सशर्करः क्षोद्रयुतः सुशीतो रक्तातियोगप्रशमाय देयः॥८०॥ प्रियडग्काचन्दनलोधसारिवामधूकमुस्ताभयधातकीजलम्। समृतप्रसादं सह यष्टिकाम्बुना सशर्करं रक्तनिर्बहूण् परम्॥८१॥

vaidūryamuktāmanigairikānām mṛcchaṅkhahēmāmalakōdakānām|
 madhūdakasyēkṣurasasya caiva pānācchamar̄ gacchatī raktapittam||79||
 uśīrapadṁtpalacandanānām pakvasya lōṣṭasya ca yaḥ prasādaḥ| saśarkarah
 kṣaudrayutāḥ suśītō raktātiyōgapraśamāya dēyah||80||
 priyaṅgukācandalalōdhrasārivāmadhūkamustābhayadhātakījalam| samṛtprasādām

saha yaṣṭikāmbunā saśarkaram raktanibarhaṇam param||81||
 vaidUryamuktAmaNigairikANAM mRuccha~gkhahemAmalakodakAnAm|
 madhUdakasyekShurasasya caiva pAnAcchamaM gacchatI raktapittam||79||
 ushlrapadmotpalacandanAnAM pakvasya loShTasya ca yaH prasAdaH| sasharkaraH
 kShaudrayutaH sushlto raktAtiyogaprashamAya deyaH||80||
 priya~ggukAcandalalodhrasArivAmadhUkamustAbhayadhAtakljalam|
 samRutprasAdaM saha yaShTikAmbunA [20] sasharkaraM raktanibarhaNaM
 param||81||

Hemorrhagic disorder gets alleviated by the use of water in contact with *vaidurya* (cat's eye), pearls, gems, ochre, earth, conch, *nagakeshara* and *amalaka*; honey-water and sugar cane juice.

Clear water kept with *ushira*, lotus, water lily, sandal and cooked earthen cold (or brick) well-cooled and mixed with sugar and honey should be administered to check excessive bleeding.

Water kept with *priyangu*, *chandana*, *lodhra*, *sariva*, *madhuka*, *musta*, *ushira* and *dhataki*, or water kept with brick, or *shashika* rice water added with sugar is an excellent haemostatic. [79-81]

कषाययोगैर्विधैर्यथोक्तैर्दीप्तेऽनले श्लेष्मणि निर्जिते च। यद्रक्तपितं प्रशमं न याति तत्रानिलःस्यादनु
 तत्र कार्यम्॥८२॥ छांगं पयः स्यात् परमं प्रयोगे गव्यं शृतं पञ्चगुणे जले वा। सर्वकरं माक्षिकसम्प्रयुक्तं
 विदारिगन्धादिगणैः शृतं वा॥८३॥ द्राक्षाशृतं नागरकैः शृतं वा बलाशृतं गोक्षुरकैः शृतं वा। सजीवकं सर्षभकं
 ससर्पिः पयः प्रयोज्यं सितया शृतं वा॥८४॥

kaṣāyayogaivividhairyathōktairdp̄te'nalē ślēṣmaṇi nirjite ca| yadraktapittam praśamaṁ
 na yāti tatrānilaḥ syādanu tatra kāryam||82|| chāgaṁ payaḥ syāt paramaṁ prayōgē
 gavyaṁ śṛtaṁ pañcaguṇē jalē vāl saśarkaram mākṣikasamprayuktam
 vidārigandhādigaṇaiḥ śṛtaṁ vā||83|| drākṣāśṛtaṁ nāgarakaiḥ śṛtaṁ vā balāśṛtaṁ
 gōkṣurakaiḥ śṛtaṁ vāl sajīvakam sarshabham sasariḥ payaḥ prayōjyaṁ sitayā śṛtaṁ
 vā||84|| kaShAyayogaivividhairyathoktairdlpte~anale shleShmaNi nirjite ca|
 yadraktapittaM prashamaM na yAti tatrAnilaH syAdanu tatra kAryam||82|| chAgaM
 payaH syAt paramaM prayoge gavyaM shRutaM pa~jcaguNe jale vA| sasharkaram
 mAkShikasamprayuktaM vidArigandhAdigaNaiH shRutaM vA||83|| drAkShAshRutaM
 nAgarakaiH shRutaM vA balAshRutaM gokShurakaiH shRutaM vA| sajlvakaM
 sarShabhakam sasariH payaH prayojyaM sitayA shRutaM vA||84||

The hemorrhagic disorder which does not get pacified by the said various extracts after digestive fire being kindled and *kapha* being overcome, there may be association of *vayu* which should be treated thereafter.

Goat milk is the excellent remedy for that. Cow milk boiled with:

1. five times water along with sugar and honey or
2. the drugs of *vidarigandhadi* group or
3. *draksha* or

4. *nagaraka (musta)* or
5. *bala* or
6. *gokshuraka* or
7. *jivaka* and *rishabhaka* added with ghee and sugar. [82-84]

Treatment of hematuria

शतावरीगोक्षुरकैः शृतं वा शृतं पयो वाऽप्यथ पर्णिनीभिः। रक्तं निहन्त्याशु विशेषतस्तु यन्मूत्रमार्गात् सरुजं याति॥८५॥

śatāvarīgokṣurakaiḥ śṛtam vā śṛtam payo vā'pyatha parṇinībhīḥ। raktam nihantyāśu viśeṣastastu yanmūtramārgāt sarujaṁ prayāti॥85॥ shatAvarlgokShurakaiH shRutaM vA shRutaM payo vA~apyatha parNinlbhiH raktaM nihantyAshu visheShastu yanmUtramArgAt sarujaM prayAti॥85॥

Milk boiled with *shatavari* and *gokshura*, or the four leaved herbs (*mudgaparni*, *mashaparni*, *shalaparni* and *prashniparni*), check the hemorrhage quickly particularly that from urinary passage and with pain.[85]

Treatment of per rectal bleeding

विशेषतो विट्पथसम्प्रवृत्ते पयो मतं मोचरसेन सिद्धम्। वटावरोहैर्वटशुड्गकैर्वा हीबेरनीलोत्पलनागरैर्वा॥८६॥ कषाययोगान् पयसा पुरा वा पीत्वाऽनु चाद्यात् पयसैव शालीन्। कषाययोगैरथवा विपक्वमेतैः पिबेत् सर्पिरतिस्वे च॥८७॥

viśeṣatō viṭpathasampravṛttē payo mataṁ mōcarasēnasiddham| vaṭāvarōhairvaṭaśuṅgakairvā hrīberanīlōtpalanāgarairvā॥86॥ kaṣāyayōgān payasā purā vā pītvā'nu cādyāt payasaiva śālin| kaṣāyayōgairathavā vipakvamētaiḥ pibēt sarpiratisravē ca॥87॥ visheShato viTpathasampravRutte payo mataM mocarasena siddham| vaTavarohairvaTashu~ggakairvA hrlberanllotpalanAgarairvA॥86॥ kaShAyayogAn payasA purA vA pltvA~anu cAdyAt payasaiva shAllin| kaShAyayogairathavA vipakvametaiH pibet sarpiratisrave ca॥87॥

Particularly in haemorrhage from rectum milk boiled with *mocharasa*, or hanging roots or leaf-buds of *vata* or *hribera*, *nilotpala* and *nagara* (*musta*) should be taken. After taking the medicinal extracts with milk the patient should take ghee cooked with these extracts. [85-87]

Vasa ghee

वासां सशाखां सपलाशमूलां कृत्वा कषायं कुसुमानि चास्याः। प्रदाय कल्कं विपचेद्घृतं तत् सक्षौद्रमाश्वेवनिहन्ति रक्तम्॥८८॥ इति वासाघृतम्।

vāsāṁ saśākhāṁ sapalāśamūlāṁ kṛtvā kaṣāyarāni kusumāni cāsyāḥ। pradāya kalkam vipacēdghṛtam tat sakṣaudramāśvēva nihanti raktam॥88॥ iti vāsāghṛtam। vAsAM sashAkhAM sapalAshamUIAM kRutvA kaShAyaM kusumAni cAsyAH| pradAya kalkaM vipacedghRutaM tat sakShaudramAshveva nihanti raktam॥88॥ iti vAsAghRutam

Vasa along with branches, leaves and root should be boiled and made into decoction. Ghee should be cooked with this decoction putting *vasa* flowers as paste. This (*vasa*) *ghrita* taken with honey checks the hemorrhage quickly (thus the name, *vasa ghrita*). [88]

पलाशवृन्तस्वरसेन सिद्धं तस्यैव कल्केन मधुद्रवेण। लिह्यादघृतं वत्सककल्कसिद्धं तदवत्
समङ्गोत्पललोधसिद्धम्॥८९॥ स्यात्त्रायमाणविधिरेष एव सोदुम्बरे चैव पटोलपत्रे । सर्पीषि
पित्तज्वरनाशनानि सर्वाणि शस्तानि च रक्तपित्ते॥९०॥

palāśavṛntasvarasēna siddham tasyaiva kalkēna madhudravēṇa| lihyādghṛtam
vatsakakalkasiddham tadvat samangōtpalalōdhrasiddham||89|| syāttrāyamāṇāvidhirēṣa
ēva sōdumbarē caiva paṭolapatrē| sarpīṣi pittajvaranāśanāni sarvāṇi śastāni ca
raktapittē||90|| palAshavRuntasvarasena siddhaM tasyaiva kalkena madhudraveNa|
lihyAdghRutaM vatsakakalkasiddhaM tadvat sama~ggotpalodhrasiddham||89||
syAttrAyamANAvidhireSha eva sodumbare caiva paTolapatre| sarpIMShi
pittajvaranAshanAni sarvANI shastAni ca raktapitte||90||

Ghrita cooked with:

1. the juice of the stamens of the *palasha* (flowers) along with the paste of the same liquefied with honey,
2. the paste of *kutaja*,
3. *samanga* (*lajjalu*), *utpala* and *lodhra*,
4. *trayamana*,
5. *udumbara* and
6. *patola* leaves are efficacious in *paitika* fever and all are commended for use in hemorrhagic disorder. [89-90]

External applications

अङ्गयुद्गयोगः परिषेचनानि सेकावगाहाः शयनानि वेशम्। शीतो विधिर्बस्तिविधानमग्न्यं पित्तज्वरे यत्
प्रशमाय दिष्टम्॥९१॥ तद्रक्तपित्ते निखिलेन कार्यं कालं च मात्रां च पुरा समीक्ष्या सर्पिर्गुडा ये च हिताः
क्षतेभ्यस्ते रक्तपित्तं शमयन्ति सद्यः॥९२॥

abhyāṅgayōgāḥ pariṣēcanāni sēkāvagāhāḥ śayanāni vēśma|
śītōvidhirbastividhānamagryāṁ pittajvarē yat praśamāyadiṣṭam||91|| tadraktapittē
nikhilēna kāryāṁ kālarāṁ ca mātrāṁ ca purā samīkṣya| sarpirguḍā yē ca hitāḥ
kṣatēbhystē raktapittāṁ śamayanti sadyah||92|| abhya~ggayogAH pariShecanAni
sekAvagAhAH shayanAni veshma| shlto vidhirbastividhAnamagryaM pittajvare yat
prashamAya diShTam||91|| tadraktapitte nikhilena kAryaM kAlaM ca mAtrAM ca purA
samIkShya| sarpirguDA ye ca hitAH kShatebhyste raktapittaM shamayanti
sadyaH||92||

All measures which are prescribed for the treatment of *pattika* fever such as massage, sprinkling, baths, beds, room/coverings, cooling methods or enema should be applied in hemorrhagic disorder considering the season and dose. *Sarpirguda* (the formulation of

jaggery and ghee) prescribed for the patients of *kshata* (chest injury) control the hemorrhagic disorder quickly. [91-92]

Treatment of *raktapitta* with associated *kapha*

कफानुबन्धे रुधिरे सपित्ते कण्ठागते स्याद्‌ग्रथिते प्रयोगः। युक्तस्य युक्त्यामधुसर्पिषोश्च क्षारस्य चैवोत्पलनालजस्य॥९३॥ मृणालपदमोत्पलकेशराणां तथा पलाशस्य तथा प्रियङ्गोः। तथा मधूकस्य तथाऽसनस्य क्षाराः प्रयोज्या विधिनैव तेन॥९४॥

kaphānubandhē rudhirē sapittē kanṭhāgatē syādgrathitē prayogaḥ। yuktasya yuktyā madhusarpiśōśca kṣārasya caivōtpalanālajasya॥९३॥ mṛṇālapadmotpalakēśarāṇāṁ tathā palāśasya tathā priyaṅgōḥ। tathā madhūkasya tathā'sanasya kṣārāḥ prayojo विधिनैव तेन॥९४॥ kaphAnubandhe rudhire sapitte kaNThAgate syAdgrathite prayogaḥ। yuktasya yuktyA madhusarpiShoshca kShArasya caivotpalanAlajasya॥९३॥ mRuNALapadmotpalakesharANAM tathA palAshasya tathA priya~ggoḥ। tathA madhUkasya tathA~asanasya kShArAH prayojyA vidhinaiva tena॥९४॥

In case of *raktapitta* if there is association of *kapha* and blood reaching the throat is adherent, alkali of the stalk of water lily mixed with honey and ghee should be used. In the same way, alkali of lotus stalk, lotus, water lily, *nagakeshara*, *palasha*, *priyangu*, *madhuka* and asana should be used. [93-94]

Shatavaryadi ghee

शतावरीदाडिमतिन्तिडीं काकोलिमेदे मधुकं विदारीम्। पिष्ट्वा च मलं फलपूरकस्य घृतं पचेत् क्षीरचर्तर्गणं जः॥९५॥ कासज्वरानाहविबन्धशूलं तद्रक्तपितं च घृतं निहन्यात्। यत् पञ्चमूलैरथं पञ्चभिंवौ सिद्धं घृतं तच्च तदर्थकारि॥९६॥ इति शतावर्यादिघृतम्।

śatāvarīdāḍimatintidīkām kākōlimēdē madhukāṁvidārīm। piṣṭvā ca mūlaṁ phalapūrakasya ghṛtam pacēt kṣīracaturguṇām jñah॥९५॥ kāsajvarānāhavibandhaśūlam tadraktapittam ca ghṛtam nihanyāt। yat pañcamūlairatha pañcabhirvā siddham ghṛtam tacca tadarthakāri॥९६॥ iti śatāvaryādighṛtam। shatAvarIdADimatintiDIkaM kAkolimedē madhukaM vidArlī। piShTvA ca mUlāM phalapUrakasya ghRutaM pacet kShIracaturguNaM j~jaH॥९५॥ kAsajvarAnAhavibandhashUlaM tadraktapittaM ca ghRutaM nihanyAt। yat pa~jcamUlairatha pa~jcabhirvA siddhaM ghRutaM tacca tadarthakAri॥९६॥ iti shatAvaryAdighRutam

Ghee should be cooked with *shatavari*, *dadima*, *tintidika*, *kakoli*, *meda*, *madhuka* and *vidari* along with the paste of the root of *bijapura* adding four times milk. This ghrita alleviates cough, fever, hardness of bowels, constipation, pain and hemorrhagic disorder.

Ghee cooked with drugs of five groups of five roots each(described in Rasayana chapter) has the same effect. (This is *shatavaryadi* *ghrita*). [95-96]

Treatment of nasal bleeding

कषाययोगा य इहोपदिष्टास्ते चावपीडे भिषजा प्रयोज्याः। घ्राणात् प्रवृत्तं रुधिरं सपितं यदा
अवेन्निःसृतदुष्टदोषम्॥१७॥ रक्ते प्रदुष्टे हयवपीडबन्धे दुष्टप्रतिश्यायशिरोविकाराः। रक्तं सपूर्यं
कणपश्चगन्धैः स्याद् घ्राणनाशः कृमयश्चदुष्टाः॥१८॥ नीलोत्पलं गैरिकशङ्खयुक्तं सचन्दनं स्यात्
सिताजलेन। नस्यं तथाऽमास्थिरसः समङ्गा सधातकीमोचरसः सलोधः॥१९॥ द्राक्षारसस्येक्षुरसस्य नस्यं
क्षीरस्य द्रवास्वरसस्य चैव। यवासमलानि पलाण्डुमूलं नस्यं तथा दाडिमपृष्ठतोयम्॥२०॥ प्रियालतैलं
मधुकं पर्यश्च सिद्धं धृतं माहिषमाजिकं वा। आम्रास्थिपूर्वः पयसा च नस्यं ससारिवैः स्यात्
कमलोत्पलैश्च॥२१॥

kaśāyayōgā ya iḥōpadiṣṭāstē cāvapīdē bhiṣajā prayōjyāḥ| ghrāṇāt pravṛttam̄ rūdhiram̄
sapittam̄ yadā bhavēnniḥsṛtaduṣṭadōṣam||97|| raktaṁ praduṣṭē hyavapīḍabandhē
duṣṭapratisyāyaśirōvikārāḥ| raktaṁ sapūyaṁ kuṇapaśca gandhaḥ syād ghrāṇanāśaḥ
kṛmayaśca duṣṭāḥ||98|| nīlotpalaṁ gairikaśāṅkhayuktaṁ sacandanaṁ syāttu sitājalēnaḥ
nasyaṁ tathā”mrāsthiraśaḥ samaṅgā sadhātakīmōcarasaḥ salōdhraḥ||99||
drākṣārasasyēkṣurasasya nasyaṁ kṣīrasya dūrvāsvarasasya caival yavāsamūlāni
palāṇḍumūlaṁ nasyaṁ tathā dāḍimapuṣpatoyam||100|| priyālatailaṁ madhukam̄
payaśca siddhamghṛtam̄ māhiṣamājikam̄ vā| āmrāsthipūrvaiḥ payasā ca nasyaṁ
sasārivaiḥ syāt kamalōtpalaiśca||101|| kaShAyayogA ya ihopadiShTAste cAvapIDe
bhiShajA prayojyAH| ghrANAt pravRuttaM rūdhiraM sapittaM yadA
bhavenniHsRutaduShTadoSham||97|| rakte praduShTe hyavapIDabandhe
duShTapratishyAyashirovikArAH| raktaM sapUyaM kuNapashca [21] gandhaH syAd
ghrANanAshaH kRumayashca duShTAH||98|| nīlotpalaM gairikasha~gkhayuktaM
sacandanaM syAttu sitAjaleNaḥ nasyaM tathā amrAsthirasaH sama~ggA
sadhAtakImocarasaH salodhraH||99|| drAkShArasasyekShurasasya nasyaM kShIrasya
dUrvAsvarasasya caival yavAsamUIAni palANDumUlaM nasyaM tathā
dADimapuShpatoyam||100|| priyAlatailaM madhukaM payashca siddhaM ghRutaM
mAhiShamAjikaM vA| AmrAsthipUrvaiH payasA ca nasyaM sasArivaiH syAt
kamalotpalaishca||101||

The hemorrhagic disorder coming out of the nose should be treated with the above decoctive drugs in the form of *avapida* (nasal errhines with juice) when the vitiated *doshas* are eliminated, otherwise if the affected *rakta* is checked by juice-snuffing it produces obstinate coryza, head diseases, blood with pus and corpse-like smell, loss of smell sensation and maggots.

In this condition snuffing with:

1. *nilotpala*, ochre, conch, sandal along with sugar water,
2. juice of mango-seed, *lajjalu*, *dhataki*, *mocharasa* and *lodhra*,
3. grape juice,
4. sugarcane juice,
5. milk,
6. juice of *durva*,
7. *yavasa* roots,

8. *palandu* (bulbs),
9. juice of pomegranate flowers,
10. *priyala taila* or buffalo's or goat's ghee cooked with *madhuka* and milk,
11. mango seed, *lajjatu*, *dhataki*, *mocarasa* and *lodhra* along with milk,
12. *sariva*, *kamala* and *utpala* with milk. [97-101]

भद्रश्रियं लोहितचन्दनं च प्रपौष्टरीकं कमलोत्पले च उशीरवानीरजलं मृणालं सहस्रवीर्या मधुकं पयस्या॥१०२॥ शालीक्षुमूलानि यवासगुन्द्रामूलं नलानां कशकाशयोश्च। कंचन्दनं शैवलमप्यनन्ता कालानुसार्या तृणमूलमूदीधिः॥१०३॥ मूलापष्पाणि च वारिजानां प्रलेपनं पृष्करिणीमूदश्च। उदुम्बराश्वतथमधूक्लोधाः कषायवृक्षाः शिंशिराश्च सर्वे॥१०४॥ प्रदेहकल्पे परिषेचने च तथाऽवगाहे घृततैलसिद्धौः रक्तस्य पित्तस्य च शान्तिमिच्छन् भद्रश्रियादीनि भिषक् प्रयुज्ज्यात्॥१०५॥ धारागृहं भमिगृहं सूशीतं वनं च रम्यं जलवातशीतम्। वैदर्यमक्तामणिभाजनानास्पशीश्च दाहे शिंशिराम्बुशीताः॥१०६॥ पत्राणि पुष्पाणि च वारिजानां क्षौमं च शीतं कदलीदलानि। प्रच्छादनार्थं शयनासनानां पद्मोत्पलानां च दलाः प्रशस्ताः॥१०७॥ प्रियडुगुकाचन्दनरूषितानां स्पश्चाः प्रियाणां च वराङ्गनानाम्। दाहे प्रशस्ताः सजलाः सुशीताः पद्मोत्पलानां च कलापवाताः॥१०८॥ सरिदध्यदानां हिमवद्दरीणां चन्द्रोदयानां कमलाकराणाम्। मनोऽनुकूलाः शिंशिराश्च सर्वाः कथाः सरक्तं शमयन्ति पित्तम्॥१०९॥

bhadraśriyam lōhitacandanam ca prapaundarīkam kamalōtpalē ca| uśīravānīrajalam
 mṛṇālam sahasravīryā madhukam payasyā॥102॥ śālīkṣumūlāni yavāsagundrāmūlam
 nalānām kuśakāśayōśca| kucandanam śaivalamapyanantā
 kālānusāryātṛṇamūlamṛddhiḥ॥103॥ mūlāni puśpāni ca vārijānām
 pralēpanampuṣkariṇīmṛdaśca| udumbarāśvatthamadhūkalōdhrāḥ kaśāyavṛkṣāḥ
 śisirāśca sarvē॥104॥ pradēhakalpē pariṣēcanē ca tathā'vagāhē ghṛtatailasiddhau|
 raktasya pittasya ca śāntimicchan bhadraśriyādīni bhiṣak prayuñjyāt॥105॥ dhārāgrhaṁ
 bhūmigrhaṁ suśītam vanam ca ramyam jalavātaśītam| vaidūryamuktāmaṇibhājanānām
 sparśāśca dāhēśisirāmbuśītāḥ॥106॥ patrāṇi puśpāṇi ca vārijānām kṣaumarām caśītam
 kadalīdalāni| pracchādanārthaṁ śayanāsanānām padmōtpalānām ca dalāḥ
 praśastāḥ॥107॥ priyaṅgukācandanarūṣitānām sparśāḥ priyāñānām ca varāñganānām|
 dāhē praśastāḥ sajalāḥ suśītāḥ padmōtpalānām ca kalāpavātāḥ॥108॥ sariddhradānām
 himavaddarīnām candrōdayānām kamalākarāñām| manō'nukūlāḥ śisirāśca sarvāḥ
 kathāḥ saraktam śamayanti pittam॥109॥ bhadrashriyaM lohitacandanaM ca
 prapauNDarIkaM kamalotpale ca ushlrvAnIrajalaM mRuNALaM sahasravIryA
 madhukaM payasyA॥102॥ shAllkShumUIAni yavAsagundrAmUlaM nalAnAM
 kushakAshayoshca| kucandanaM śaivalamapyanantA kAIAnusAryA
 tRuNamUlamRuddhiH॥103॥ mUIAni puShpANi ca vArijAnAM pralepanaM
 puShkariNImRudashca| udumbarAshvatthamadhUkalodhrAH kaShAyavRukShAH
 shishirAshca sarve॥104॥ pradehakalpe pariShecane ca tathA~avagAhe
 ghRutatailasiddhau| raktasya pittasya ca shAntimicchan bhadrashriyAdIni bhiShak
 prayu~jjyAt॥105॥ dhArAgRuhaM bhUmigRuhaM sushItaM vanaM ca ramyaM
 jalavAtashItam| vaidUryamuktAmaNihBajanAnAM sparshAshca dAhe
 shishirAmbushItAH॥106॥ patrANi puShpANi ca vArijAnAM kShaumaM ca shItaM
 kadalīdalāni| pracchAdanArthaM shayanAsanAnAM padmotpalAnAM ca dalAH
 prashastAH॥107॥ priya~ggukAcandanarUShitAnAM sparshAH priyANAM ca
 varA~gganAnAm| dAhe prashastAH sajalAH sushItAH padmotpalAnAM ca

kalApavAtAH||108|| sariddhradAnAM himavaddarINAM candrodayAnAM
kamalAkarANAm| mano~anukUIAH shishirAshca sarvAH kathAH saraktaM shamayanti
pittam||109||

Bhadrashriya, red sandal, *prapaundarika*, *kamala*, *utpala*, *ushira*, *vanira*, *hribera*,
mrinala, bigger *shatavari*, *madhuka*, *payasya*, roots of *shali*, *ikshu*, *yavasa*, *gundra*,
nala, *kusha*, *kuchandana*, *shaivala*, *ananta*, seasonal grass roots (of cold season),
riddhi, roots and flowers of aquatic plants, local application of mud from pond,
udumbara, *ashwattha*, *madhuka*, *lodhra* and other astringent and cold plants – the
physician desiring alleviation of *raktapitta* should use the drugs of the (above)
bhadrashriyadi group in anointing, sprinkling, bath and preparation of ghee and oil.

Quiet cool water chamber, underground chamber, beautiful park cooled with watery air,
contact of utensils made of *vaidurya*, pearls, gems cooled with cold water – these are
used in case of burning sensation. Moreover, the beds and chairs be covered with
leaves and flowers of aquatic plants, cold silk cloth, banana leaves and leaves of lotus
and water lily. Touch of the charming women anointed with *priyangu* and *chandana*, and
moist and cool breezes from lotus and water lily are commended for use in burning
sensation. Visit of rivers and lakes, glaciers, ponds having water lily and lotus flowers,
shishira (winter) season, favorite and soothing narratives pacify *raktapitta*. [101-109]

Summary

तत्र श्लोकौ-

हेतुं वृद्धिं सञ्जां स्थानं लिङ्गंपृथक् प्रदुष्टस्य। मार्गौ साध्यमसाध्यं याप्यं कार्यक्रमं चैव॥११०॥
पानान्नमिष्टमेव च वर्ज्यं संशोधनं च शमनं च। गुरुरुक्तवान्यथावच्चिकित्सिते रक्तपित्तस्य॥१११॥

tatra ślōkau-

hētuṁ vṛddhiṁ sañjñāṁ sthānaṁ liṅgaṁ pṛthakpraduṣṭasya| mārgau
sādhyamasādhyāṁ yāpyaṁ kāryakramāṁ caiva||110|| pānānnamīṣṭamēva ca varjyaṁ
saṁśōdhanaṁ ca śamanāṁ ca| gururuktavānyathāvaccikitsitē raktapittasya||111|| tatra
shlokau-

hetuM vRuddhiM sajjAM sthAnaM li~ggaM pRuthak praduShTasya| mArgau
sAdhyamasAdhyAM yApyaM kAryakramaM caiva||110|| pAnAnnamIShTameva ca
varjyaM saMshodhanaM ca shamanAM ca| gururuktavAnyathAvaccikitsite
raktapittasya||111||

Now the summing up verse –

Etiology, aggravation, definition, location, symptoms, passages, curability, incurability
and maintainability principle of treatment, diet indicated and contraindicated, purification
and pacification measures, all this described by the teacher shall be applied for
treatment of *raktapitta* (hemorrhagic disorder). [110]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेचिकित्सितस्थाने रक्तपित्तचिकित्सितं नाम चतुर्थोऽध्यायः॥४॥

ityagnivēśakṛtētantrē carakapratisaṁskṛtē cikitsasthānēraktapittacikitsitāṁ nāma
caturthō'dhyāyah||4||

ityagniveshakRute tanre carakapratisaMskRute cikitsasthAne raktapittacikitsitaM
nAma caturtho~adhyAyaH||4||

Thus ends the fourth chapter on the treatment of hemorrhagic disorder in Chikitsa
Sthana in the treatise composed by Agnivesha and redacted by Charak. (4)

Tattva Vimarsha (Fundamental Principles)

- The causes of *raktapitta* include excess consumption of food with hot potency and ingredients with sharp, sour, pungent and salty taste, exposure to the sun and foods that cause burning sensations.
- *Pitta dosha* and *rakta* have similar properties in terms of vitiation, odor, color and origin. Therefore, anything affecting *pitta* will affect *rakta* and vice versa.
- The *pitta* and *rakta* (blood) including blood vessels originate from spleen and liver.
- Affliction by *kapha* in *rakta* can be observed by appearance of viscous, pale, unctuous and slimy blood (in blood coming out).
- Blackish, reddish, frothy, thin and roughness in blood indicates affliction by *vata*.
- Blood having ochre-like, black, cow-urine-like, shining black, smoky and collyrium-like color indicates *pitta* affliction. Due to combination of two *doshas* the symptoms of both manifest. *Raktapitta* caused by *sannipata* has symptoms of all the three *doshas*.
- The prognosis and treatment of *raktapitta* depend upon movement of vitiated *rakta*, direction of its flow, origin, severity of disease, strength of patient.
- *Raktapitta* is caused by food having predominantly unctuous-hot and rough-hot properties. The former often gives rise to the upward movement and the latter to the downward movement of *raktapitta*.
- The upward movement in *raktapitta* is associated with *kapha*, the downward one with *vata* and that from both the passages is associated with both *kapha* and *vata*.
- *Stambhana* (styptic therapy) should not be given at first in hemorrhagic disorders having excessive impurities, aggravated *doshas*, over-nourished and in a person who is not emaciated and weak.
- Mostly the *raktapitta* is aggravated by *amadosha*, hence patient should be managed with *langhana* (lightening measures). In the beginning stage of *raktapitta*, lightening or nourishing measure according to passage, association of *dosha* and etiology shall be applied.
- *Raktapitta*, due to excess nutrition in a strong patient with aggravated *[doshas]*, who don't have emaciation, debility and complications, should be treated with purification therapy by purgation in upward type and emesis in lower movement of *raktapitta*.

- After purification, in the case of upward type, the dietetic regimen starts with saturating drinks. In that of downward type, it starts with gruel subjected to the condition that *vata* is not dominant.
- All types of sweet, bitter, astringent medicines with cold potency are indicated in diet and medicinal management. In lifestyle management, the cold measures and avoiding exposure to excess heat are applied in treatment of hemorrhagic disorders.

Vidhi Vimarsha (Applied Inferences)

Bleeding disorders are often caused by a failure of the blood to clot. Several conditions can affect the way the blood clots. Many causes are related to protein defects in the plasma (the liquid component of blood). These proteins are directly responsible for how the blood coagulates (clots). In some diseases, these proteins might be missing completely or they may be low in count. The majority of these defects are hereditary (passed from parent to child through genes). However, some may develop due to other medical conditions. Other conditions that can cause bleeding disorders are:

- liver disease
- low red blood cell count
- vitamin K deficiency
- medication side-effects

Types of Bleeding Disorders

There are several bleeding disorders that can be inherited (passed down through genetics) or acquired. Some cause bleeding spontaneously, whereas others cause bleeding following an accident.

The most common inherited bleeding disorders are:

- **Hemophilia A and B:** caused by a deficiency or lack of certain blood clotting proteins, called factors. This disorder causes heavy or unusual bleeding
- **Factor II, V, VII, X, XII deficiency:** relate to blood clotting problems or abnormal bleeding problems
- **von Willebrand's Disease:** the most common inherited bleeding disorder; caused by a deficiency of von Willebrand factor, which helps blood platelets clump together and stick to a blood vessel wall.

Certain diseases or medical conditions can also cause a deficiency of one or more blood clotting factors. The most common causes of acquired bleeding disorders are end-stage liver disease or vitamin K deficiency. According to the American Association of Clinical Chemistry (AACC), this is because most blood clotting factors are produced in the liver, and certain clotting factors are vitamin k dependent (AACC, 2011).

Identification of Bleeding Disorders/Symptoms

The main sign of a bleeding disorder is prolonged or excessive bleeding. The bleeding is normally heavier than normal and unprovoked.

Other signs of a bleeding disorder include:

- unexplained bruising
- heavy menstrual bleeding
- frequent nosebleeds

Types of *raktapitta* described in Ayurveda can be correlated with following disorders for understanding:

Type	Ayurvedi	Modern
<i>Urdhvaga</i>	<i>Nasa</i>	Epistaxis
	<i>Mukha</i>	Hematemesis
	<i>Karna</i>	Otorrhagia
<i>Adhoga</i>	<i>Guda</i>	Bacillary dysentery, melena, bloody diarrhoea
	<i>Mutra</i>	Hematuria
	<i>Yoni</i>	Menorrhagia or metrorrhagia
<i>Tiryaka</i>		Purpura

There are various bleeding disorders, some of which can be correlated with *raktapitta*. Bleeding disorders can occur either due to decrease in coagulation factor in blood or due to increase in bleeding factor. When patient has bleeding from anus (*guda*) or vagina(*yoni*), then it is difficult to differentiate whether the disease is *adhoga raktapitta* or *raktarsha* or *raktatisara* or *pradara*. There are major similarities in causes, signs, *doshas* involved but also minor differences. And that minor differences need to be studied to capture the right link of disease, which can be done only when one has, the deep knowledge of Ayurvedic diagnostic tool i.e. *nidanpanchaka*. The profound cognizance of *nidanpanchaka* as a diagnostic tool can enhance the treatment modalities of Ayurvedic management of diseases in coming years.

Commonly used medicines in *raktapitta*

Important medicines

1. *Vasa*
2. *Amalaki*
3. *Praval bhasma*

Treatment of urdhvaga raktapitta

1. *Lakshadi* mixture 3-5 grams frequently with *vasavaleha*
2. *Padmakadi tailam* 10-20 drops empty stomach three times in a day with milk

Treatment of adhoga raktapitta

1. *Shatavaryadi kwatha* 25 to 40 ml empty stomach three times with sugar
2. *Mocharasa* mixture 125 to 250 mg before meals two times with juice of *amalaki* or *vasavaleha* or *shatavaryadi kwatha*
3. *Chadrakala rasa* 250 to 500 mg after meals with *vasavaleha*
4. *Bol-parpati* mixture 250 to 500 mg after meals with *vasavaleha*

Treatment of chronic stage

1. *Vasa ghee* 10 to 40 ml after meals with milk

Related Chapters

- Vidhishonitiya Adhyaya
- Raktapitta Nidana

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Gulma Chikitsa

Chikitsa Sthana Chapter 5. Management of Gulma Abstract

Gulma is defined as large palpable, rounded, intra-abdominal swellings between *hridaya* (cardiac region) and the *basti* (bladder) regions, which develop due to excess accumulation of *doshas* with predominance of *vata*. Such swellings are either transitory or static, and display the properties of spontaneous regression and reappearance. This chapter on the treatment of *gulma* (abdominal lumps) first describes its general etiological factors and pathogenesis along with five places in the abdomen where the swelling occurs. The treatment of *vata gulma* includes *snehana* (oleation), *swedana* (sudation), *brimhana* (repletion), *basti* with *ghee*, *virechana*, *vamana* and preparations in the form of powders, pills and medicated *ghrita* and as a last resort bloodletting. For the treatment of *pitta gulma*, the *ghrita* prepared with bitter (*tikta*) drugs, *virechana*, recipes for *niruha basti*, blood-letting (*raktamokshana*), use of milk, counseling (*ashvasana*) and oral recipes have been elaborated. *Upanaha* (poultice), *shodhana* and surgical measures for suppurated and internally ruptured *gulma* have also been described. For *kapha gulma snehana*, *swedana*, *bhedana* (puncturing), *langhana* (lightening therapy), *vamana*, *virechana*, medicated *ghee*, *basti*, pills, powder, *arishta*, and *kshara* are described. Bloodletting followed by cauterization of the *gulma* as a last resort is explained. A surgical procedure for *rakta gulma*, which occurs only in women is also described. Wholesome (*pathya*) food and drinks, avoidance of etiological factors, continuous protection of digestive power (*agni*) and the instructions for a patient who undergoes *snehana* are discussed in detail.

Keywords: *Gulma* (abdominal lumps), *Pathya* (whole some), *Raktamokshana* (bloodletting), *Apathya* (unwholesome)

Introduction

The word *gulma* stands for an entity that encircles, envelops or covers something. Situations such as panic, stress, or grief, usually associated with chaotic, cataclysmic event would lead to vitiation of *vata* causing the appearance of *vata*-dominant diseases like *gulma*, etc. The vitiated *vata*, in conjunction with other *doshas*, gets into the *mahasrotas* and get lodged either in the *amashaya* (stomach), *pittashaya* (gall bladder), *pakwashaya* (cecum) or in other regions like *hridaya* (epigastric), *basti* (bladder) and *nabhi* (umbilicus) leading to formation of deep-rooted shrub-like mass. As mentioned earlier, *gulma* afflicts the gastrointestinal region between the heart and the bladder. Depending upon the region it afflicts, it can be classified into four general types common to males and females: *vata gulma*, *pitta gulma*, *kapha gulma*, and *sannipatik gulma*.

Since *gulma* can occur as complication of *raktapitta* (bleeding disorders) Charak describes this chapter after the *raktapitta* chapter. *Jwara* is the disease of *rasavah srotas* whereas, *raktapitta* is a disease of *raktavah srotas*, in that sequence *gulma* is a disease of *mansavah srotas* and further *prameha* is of *medavah srotas*. However, this chapter seems to be designed with greater implication and term *mahasrotasa* has been

used because manifestation of disease is in the viscera/ organs up to uterus. Even then the involvement of *vata dosha* and *mamsa dhatu* is predominant in final manifestation of disease *gulma*.

It should also be noted that the same pathogenesis route and treatment procedure should be kept in mind for the disease of the *mahasrotasa* occurring without the true manifestation of growth/tumor. Hence peptic ulcer and ulcer dyspepsia should be treated like *pitta gulma* etc.

Gulma is defined as a palpable round compact lump in the abdomen. Thus, all the localized palpable masses in the abdomen are classified under *gulma*, but they are named depending upon the dominance of *dosha* or the place. Its four types belong to *dosha* i.e. three of single *dosha* and one of a combination of all the three *dosha* and the fifth one is *rakta gulma* which occurs only in females in uterine cavity (*garbhashayashroni*). *Sannipata Gulma* has been given synonym as *nichaya-gulma*.

Sanskrit text, Transliteration and English Translation

Management of *Gulma* (abdominal lumps)

अथातो गुल्मचिकित्सितं व्याख्यास्यामः॥१॥

इति ह स्माह भगवानात्रेयः॥२॥

athātō gulmacikitsitam vyākhyāsyāmah||1||

iti ha smāha bhagavānātrēyah||2||

athAto gulmacikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “*Gulma Chikitsa*” (Management of abdominal lumps and other diseases) . Thus said Lord Atreya. [1-2]

सर्वप्रजानां पितृवच्छरण्यः पुनर्वसुभूतभिष्यदीशः।

चिकित्सितं गुल्मनिर्बहुणार्थं प्रोवाच सिद्धं वदतां वरिष्ठः॥३॥

sarvaprajānām pitṛvaccharanyaḥ punarvasurbhūtabhaviṣyadīśah|

cikitsitam gulmanibarhaṇārtham prōvāca siddham vadatām variṣṭhah||3||

sarvaprajAnAM pitRuvaccharaNyaH punarvasurbhUtabhaviShyadIshaH|

cikitsitaM gulmanibarhaNArthaM provAca siddhaM vadatAM variShThaH||3||

Punarvasu the fatherly figure for all, who has knowledge of past and future, who is the best among the exponents, describes the treatment for the complete eradication of *gulma* [3]

Etiopathogenesis of gulma

विट्शलेष्मपित्तातिपरिस्वादवा तैरेव वृद्धैः परिपीडनादवा|
वैगौरुदीर्णविहतैरधो वा बाह्यभिघातैरतिपीडनैर्वा||४||
रुक्षान्नपानैरतिसेवितैर्वा शोकेन मिथ्याप्रतिकर्मणा वा|
विचेष्टितैर्वा विषमातिमात्रैः कोष्ठे प्रकोपं समुपैति वायुः||५||
viṭślēṣmapittātiparisravādvā tairēva vṛddhaiḥ paripīḍanādvā|
vēgairudīrṇairvhatairadhō vā bāhyabhighātairatipīḍanairvā||४||
rūkṣānnapānairatisēvitairvā śokēna mithyāpratikarmaṇā vā|
vicēṣṭitairvā viṣamātimātraiḥ kōṣṭhē prakōpaṁ samupaiti vāyuḥ||५||
viTshleShmapittAtiparisravAdvA taireva vRuddhaiH paripIDanAdvA|
vegairudIrNairvhatairadho vA bAhyabhighAtairatiplDanairvA||४||
rUkShAnnapAnairatisevitairvA shokena mithyApratikarmaNA vA|
viceShTitairvA viShamAtimAtraiH koShThe prakopaM samupaiti vAyuH||५||

Following are the general causative factors of *gulma*:

- Excessive excretion of feces, *kapha* and *pitta* or due to pressure exerted by their excessive aggravation,
- Suppression of downward natural urges (like feces, flatus and urine),
- Physical trauma,
- By excessive pressure (on abdomen),
- By taking food articles and drinks having excessive dry property,
- Excessive grief,
- Improper implementation of Panchakarma procedures,
- Excessive wrongful body activities,

Due to the above mentioned factors *vata* gets aggravated in *koshtha* i.e. thoraco-abdominal cavity [4-5]

General Pathogenesis of gulma

कफं च पित्तं च स दुष्टवायुरुद्धूय मार्गान् विनिबद्ध्य ताभ्याम्|
हन्नाभिपाश्वर्दरबस्तिशूलं करोत्यथो याति न बद्धमार्गः||६||
kaphaṁ ca pittam ca sa duṣṭavāyuruddhūya mārgān vinibaddhya tābhyaṁ|
hṛnnābhīpāśvōdarabastiśūlaṁ karōtyathō yāti na baddhamārgah||६||

kaphaM ca pittaM ca sa duShTavAyuruddhUya [1] mArgAn vinibaddhya tAbhyAm|
hRunnAbhipArshvodorabastishUlaM karotyatho yAti na baddhamArgaH||6||

The provoked *vata* takes out *kapha* and *pitta* from their sites and in turn gets blocked its own passage by them. Thus, blocked *vata* is unable to move properly leading to pain in the regions of heart, umbilicus, both sides of abdomen and urinary bladder [6]

Cardinal Signs of *Gulma*

पक्वाशये पित्तकफाशये वा स्थितः स्वतन्त्रः परसंश्रयो वा|
स्पर्शोपलभ्यः परिपिण्डितत्वाद्गुल्मो यथादोषमुपैति नामा||७||
pakvāśayē pittakaphāśayē vā sthitāḥ sVātantrāḥ parasaṁśrayō vā|
sparśōpalabhyāḥ pariṇḍitatvādgulmō yathādōṣamupaiti nāma||७||
pakvAshaye pittakaphAshaye vA sthitaH svatantraH parasaMshrayo vA|
sparshopalabhyāH paripiNDitatvAdgulmo yathAdoShamupaiti nAma||7||

Formation of a palpable mass in colon, gall-bladder or stomach which may be independent or associated with other dosha is known as *gulma*. It is named according to the *dosha* involved. [7]

Five sites of *gulma*

बस्तौ च ना भ्यां हृदि पाश्वर्योर्वा स्थानानि गुल्मस्य भवन्ति पञ्चः|
पञ्चात्मकस्य प्रभवं तु तस्य वक्ष्यामि लिङ्गानि चिकित्सितं च||८||
bastau ca nābhyaṁ hṛdi pāśvayōrvā sthānāni gulmasya bhavanti pañca|8|
pañcātmakasya prabhavam tu tasya vakṣyāmi liṅgāni cikitsitam ca||8||
bastau ca nAbhyAM hRudi pArshvayorvA sthAnAni gulmasya bhavanti pa~jca|8|
pa~jcAtmakasya prabhavaM tu tasya vakShyAmi li~ggAni cikitsitaM ca||8||

Five places of *gulma* are urinary bladder (hypogastric region), umbilical region (*nabhi*), cardiac region (*hṛidi*) and two flanks (*parshva*). Henceforth I will explain the causes, symptoms and the treatment of these five types of *gulma* [8]

Causative factors of *vata* dominant *gulma*

रुक्षान्नपानं विषमातिमात्रं विचेष्टितं वेगविनिग्रहश्च|
शोकोऽभिघातोऽतिमलक्ष्यश्च निरन्नता चानिलगुल्महेतुः||९||
rūkṣānnapānam viṣamātimātram vicēṣṭitam vēgavinigrahaśca|
śokō'bhighātō'timalakṣayaśca nirannatā cānilagulmahētuḥ||9||

rUkShAnnapAnaM viShamAtimAtraM viceShTitAM vegavinigrahashca|
shoko_{abhighAto}atimalakShayashca nirannatA cAnilagulmaheTuH||9||

Excessive use of dry articles of food and drinks, excessive or wrong body activities, suppression of natural urges, excessive grief, too-much diminution of feces, trauma and excessive fasting are the causes of *vata-gulma* [9]

Symptoms of *vata gulma*

यः स्थानसंस्थानरुजां विकल्पं विड्वातसङ्गं गलवक्त्रशोषम्|
श्यावारुणत्वं शिशिरज्वरं च हृत्कुक्षिपाश्वासशिरोरुजं च||१०||
करोति जीर्णद्वयधिकं प्रकोपं भ्रुक्ते मृदुत्वं समुपैति यश्च।
वातात् स गुल्मो न च तत्र रुक्षं कषायतिक्तं कटु चोपशेते॥११॥
yah sthānasamsthānarujāṁ vikalparṁ viḍvātasaṅgarṁ galavakraśōsam|
śyāvāruṇatvam̄ śiśirajvaram̄ ca hṛtkukṣipārśvāṁsaśirōrujam̄ ca||10||
karōti jīrṇē'bhyadhikam̄ prakōparṁ bhuktē mṛdutvam̄ samupaiti yaśca|
vātāt sa gulmō na ca tatra rūkṣam̄ kaśāyatiktam̄ kaṭu cōpaśētē||11||
yaH sthAnasaMsthAnarujAM vikalpaM viDvAtasa~ggaM galavaktrashoSham|
shyAvAruNatvaM shishirajvaraM ca hRutkukShipArshvAMsashirorujaM ca||10||
karoti jlrNe~abhyadhikaM prakopaM bhukte mRudutvaM samupaiti yashca|
vAtAt sa gulmo na ca tatra rUkShaM kaShAyatiktaM kaTu copashete||11||

Frequent change in the site, shape and pain of the lump along with obstruction of feces and flatus, dryness in throat and mouth, dusky-red color of body, fever with chills, pain in the cardiac, umbilical, flanks and shoulder regions and headache are the sign and symptoms of *vata gulma*. The symptoms decrease on taking of food but increase on completion of digestion as well as by taking dry substances or having astringent, bitter and pungent tastes [10-11]

Causative factors and pathogenesis of *pitta dominant gulma*

कट्वम्लतीक्ष्णोष्णविदाहिरुक्षक्रोधातिमद्यार्कहृताशसेवा।
आमाभिघातो रुथिरं च दुष्टं पैतस्य गुल्मस्य निमित्तमुक्तम्॥१२॥
kaṭvamlaṭīkṣṇōṣṇavidāhirūkṣakrōdhātimadyārakahutāśasēvā।
āmābhīghātō rudhiram̄ ca duṣṭam̄ paittasya gulmasya nimittamuktam||12||
kaTvamlatlkShNoShNavidAhirUkShakrodhAtimadyArkahutAshasevA|

AmAbhighAto [2] rudhiraM ca duShTaM paittasya gulmasya nimittamuktam||12||

Taking of food articles having pungent and sour tastes and piercing, hot, irritant (*vidahi*) and dry properties; excessive wines; exposure to sun and heat; indulgence in anger, affliction by *ama* and vitiation of *rakta* are the causative factors of *pitta-gulma* [12]

Symptoms of *pitta-gulma*

ज्वरः पिपासा वदनाङ्गरागः शूलं महजीर्यति भोजने च।

स्वेदो विदाहो व्रणवच्च गुल्मः स्पर्शासहः पैत्तिकगुल्मरूपम्॥१३॥

jvarah pipasā vadanāṅgarāgah śūlam mahajīryati bhōjanē ca|

svēdō vidāhō vrāṇavacca gulmāḥ sparśāsahāḥ paittikagulmarūpam||13||

jvaraH pipAsA vadanA~ggarAgaH shUlaM mahajīryati bhojane ca|

svedo vidAho vraNavacca gulmaH sparshAsahaH paTTikagulmarUpam||13||

Fever, thirst, redness of mouth and other organs, excessive pain during digestion, sweating, burning sensation and tenderness in the lesion like that of ulcer are the signs and symptoms of *pitta-gulma* [13]

Causative factors of *kapha-gulma* and *nichaya-gulma*

शीतं गुरु स्निग्धमचेष्टनं च सम्पूरणं प्रस्वपनं दिवा च।

गुल्मस्य हेतुः कफसम्भवस्य सर्वस्तु दिष्टो निचयात्मकस्य॥१४॥

śītam guru snigdhamacēṣṭanam ca sampūraṇam prasvapanam divā ca|

gulmasya hētuḥ kaphasambhavasya sarvastu diṣṭō nicayātmakasya||14||

shItaM guru snigdhamaceShTanaM ca sampUraNaM prasvapanaM divA ca|

gulmasya hetuH kaphasambhavasya sarvastu diShTo nicayAtmakasya||14||

Excessive intake of food articles having cold, heavy and unctuous properties and excessive eating, sedentary life style and day-sleep are the causative factors of *kapha-gulma*.

All the causative factors mentioned for all the above three types of *dosha gulma* are also of *nichaya (tridosha)-gulma* [14]

Symptoms of *kapha* dominant *gulma*

स्तैमित्यशीतज्वरगात्रसादहृल्लासकासारुचिगौरवाणि।

शैत्यं रुग्न्या कठिनोन्नतत्वं गुल्मस्य रूपाणि कफात्मकस्य॥१५॥

staimityaśītajvaragātrasādahṛllāsakāsārucigauravāṇi|

śaityaṁ rugalpā kāthinañnatatvaṁ gulmasya rūpāṇī kaphātmakasya||15||

staimityashItajvaragAtrasAdahRullAsakAsArucigauravANi|

shaityaM rugalpA kaThinonnatatvaM gulmasya rUpANi kaphAtmakasya||15||

Feeling as covered by wet cloth, fever with chills, exhaustion of limbs, nausea, cough, anorexia, heaviness, cold and mild pain with palpable hard and protruded mass are the signs and symptoms of *kaphaja-gulma* [15]

Dvi-doshaja gulma

निमित्तलिङ्गान्युपलभ्य गुल्मे द्विदोषजे दोषबलाबलं च।

व्यामिश्रलिङ्गानपरांस्तु गुल्मांस्त्रीनादिशेदौषधकल्पनार्थम्॥१६॥

nimittaliṅgānyupalabhyā gulmē dvidōṣajē dōṣabalābalā ca|

vyāmiśraliṅgānaparāṁstu gulmāṁstrīnādiśēdauṣadhaṁkalpanārtham||16||

nimittali~ggAnyupalabhyā gulme dvideoShaje doShabalAbalaM ca|

vyAmishrali~ggAnaparAMstu gulmAMstrInAdishedauShadhakalpanArtham||16||

Three types of *dvi-doshaja gulma* (*vata-pitta*, *vata-kapha* and *kapha-pitta*) are produced by the mixture of causative factors of two involved *dosha*. These *gulma* manifest the signs and symptoms of two involved *dosha*. These varieties are mentioned here for the purpose of the treatment which can be planned on the basis of degree of provocation of each *dosha* [16]

Signs and symptoms of tri-doshaja gulma

महारुजं दाहपरीतमश्मवदघनोन्नतं शीघ्रविदाहि दारुणम्।

मनःशरीराग्निबलापहारिणं त्रिदोषजं गुल्ममसाध्यमादिशेत्॥१७॥

mahārujam dāhapaṛītamashaṁmavadghanōnnatam śīghravidāhi dārunam|

manahśarīrāgnibalāpahāriṇam tridōṣajam gulmamasādhyamādiśēt||17||

maRaJuJaM dAhapaṛitamashmavadghanonnataM shlghravidAhi dAruNam|

manaHsharIraGnibalApahAriNaM tridoShajaM gulmamasAdhyamAdishet||17||

The symptoms of *tri-dosha gulma* include agonizing pain and excessive burning sensation, elevated mass, stony hard and quick to mutilate. It is a very serious condition and leads to diminution of strength of body, mind and digestion. It is incurable [17]

Causative factors of rakta gulma

ऋतावनाहारतया भयेन विरुक्षणैर्वगविनिग्रहैश्च।

संस्तम्भनोल्लेखनयोनिदोषैर्गुल्मः स्त्रियं रक्तभवोऽन्यपैति॥१८॥
 इतावनाहारातया bhayēna virūkṣaṇairvēgavinigrahaicā|
 sar̄stambhanōllēkhanayōnidōṣairgulmaḥ striyāṁ raktabhavō'bhyupaiti॥१८॥
 RutAvanAhAratayA bhayena virUkShaNairvegavinigrahaishca|
 saMstambhanollekhanayonidoShairgulmaH striyAM raktabhavo~abhyupaiti॥१८॥

During *ritu-kala* (ovulation period) if a woman does fasting or takes dry food articles or indulges in fear and suppression of natural urges; or misuses styptic (*stambhana*) drugs i.e. try to stop the menstrual bleeding; improper conduction of vomiting therapy and disorders of genital organs, all these may lead to formation of *rakta gulma* in women [18]

Symptoms of *rakta gulma*

यः स्पन्दते पिण्डित एव नाङ्गैश्चिरात् सशूलः समगर्भलिङ्गः।
 स रौधिरः स्त्रीभव एव गुल्मो मासे व्यतीते दशमे चिकित्स्यः॥१९॥
 yaḥ spandatē piṇḍita ēva nāṅgaiścīrāt saśūlaḥ samagarbhaliṅgaḥ।
 sa raudhiraḥ strībhava ēva gulmō māsē vyatītē daśamē cikitsyāḥ॥१९॥
 yaH spandate piNDita eva nA~ggaishcirAt sashUlaH samagarbhali~ggaH।
 sa raudhiraH strlbhava eva gulmo mAse vyatlte dashame cikitsyaH॥१९॥

The lump slowly grows in the form of round mass which has pulsation as a whole but not in its part. It is associated with acute pain and signs and symptoms mimicking pregnancy. *Raktaja gulma* occurs only in women and should be treated after the completion of ten months [19]

क्रियाक्रममतः सिद्धं गुल्मिनां गुल्मनाशनम्।
 प्रवक्ष्याम्यत ऊर्ध्वं च योगान् गुल्मनिबर्हणान्॥२०॥
 kriyākramamataḥ siddham gulmināṁ gulmanāśanam|
 pravakṣyāmyata ūrdhvam ca yōgān gulmanibarhaṇān॥२०॥
 kriyAkramamataH siddhaM gulminAM gulmanAshanam|
 pravakShyAmyata UrdhvaM ca yogAn gulmanibarhaNAAn॥२०॥

Now onward first the successful line of treatment shall be described for the cure of *gulma*. Thereafter, the remedies and recipes for its cure shall be described [20]

Treatment of *vata-gulma*

रुक्षव्यायामजं गुल्मं वातिकं तीव्रवेदनम्।

बद्धविण्मारुतं स्नेहैरादितः समुपाचरेत्॥२१॥

rūkṣavyāyāmajaṁ gulmaṁ vātikam tīvravēdanam|

baddhaviṇmārutarūt snēhairāditaḥ samupācarēt||21||

rUkShavyAyAmajaM gulmaM vAtikaM tlrvavedanam|

baddhaviNmArutaM snehairAditaH samupAcaret||21||

As *vata gulma* is produced due to excessive dryness and exercise and is associated with severe pain and retention of feces and flatus, therefore in the beginning *snehana* (unctuous) therapy should be prescribed [21]

Snehana for *vata-gulma*

भोजनाभ्यञ्जनैः पानैर्निरुहैः सानुवासनैः।

स्निग्धस्य भिषजा स्वेदः कर्तव्यो गुल्मशान्तये॥२२॥

bhōjanābhyañjanaiḥ pānairnirūhaiḥ sānuvāsanaiḥ।

snigdhasya bhiṣajā svēdah kartavyō gulmaśāntayē||22||

bhojanAbhya~jjanaiH pAnairnirUhaiH sAnuvAsanaiH|

snigdhasya bhiShajA svedaH kartavyo gulmashAntaye||22||

Snehana is performed by administration of unctuous substances in the form of food and drink, oil massage and *anuvasana basti* along with *niruha basti*. After proper *snehana*, physician should subject the patient to *swedana* therapy [22]

Benefit of *swedana* therapy for *vata-gulma*

स्रोतसां मार्दवं कृत्वा जित्वा मारुतमुल्बणम्।

भित्वा विबन्धं स्निग्धस्य स्वेदो गुल्ममपोहति॥२३॥

srōtasāṁ mārdavam kṛtvā jitvā mārutamulbaṇam|

bhittvā vibandham snigdhasya svēdō gulmamapōhati||23||

srotasAM mArdavaM kRutvA jitvA mArutamulbaNam|

bhittvA vibandhaM snigdhasya svedo gulmamapohati||23||

Swedana therapy administered to a patient who has already undergone oil massage produces softness in the channels leading to alleviation of *vata*. Thus by breaking the obstruction and opening the channels the *vata-gulma* is cured [23]

Mode of Administration of *sneha* according to sites of *vata gulma*

स्नेहपानं हितं गुल्मे विशेषेणोर्धवनाभिजो|

पक्वाशयगते बस्तिरुभयं जठराश्रये||२४||

snēhapānam hitam gulmē viśeṣenōrdhvānābhijē|

pakvāśayagatē bastirubhayam jaṭharāśrayē||२४||

snehapAnaM hitaM gulme visheSheNordhvanAbhije|

pakvAshayagate bastirubhayaM jaTharAshraye||24||

Oral administration of unctuous substances is beneficial in *vata gulma* particularly if it is situated above the umbilicus i.e. in stomach. *Anuvasana* (unctuous) *basti* is beneficial if *gulma* is situated in colon and both oral administration of unctuous substances and unctuous *basti* are beneficial if it is situated in the middle of *jathara* i.e. in small intestine [24]

दीप्तेऽग्नौ वातिके गुल्मे विबन्धैऽनिलवर्चसोः|

बृहणान्यन्नपानानि स्निग्धोष्णानि प्रयोजयेत्||२५||

dīptē'gnau vātikē gulmē vibandhē'nilavarcasōḥ|

bṛhmaṇānyannapānāni snigdhōṣṇāni prayōjayēt||२५||

dipte~agnau vAtike gulme vibandhe~anilavarcasoH|

bRuMhaNAnyannapAnAni snigdhoShNAni prayojayet||25||

In *vata gulma* if the retention of feces and flatus is present but digestion is good then unctuous, hot and nourishing (*brimhana*) diet and drinks should be given [25]

Repeated *basti* in *vata gulma*

पुनः पुनः स्नेहपानं निरुहाः सानुवासनाः|

प्रयोज्या वातगुल्मेषु कफपित्तानुरक्षिणा||२६||

punah punah snēhapānam nirūhāḥ sānuvāsanāḥ|

prayōjyā vātagulmēṣu kaphapittānurakṣiṇā||२६||

punaH punaH snehapAnaM nirUhAH sAnuvAsanAH|

prayojyA vAtagulmeShu kaphapittAnurakShiNA||26||

In *vata gulma* repeated use of unctuous drink and alternative use of *anuvasana* (unctuous) and *niruha* (un-unctuous) *basti* are advised in taking care of *kapha* and *pitta* [26]

कफो वाते जितप्राये पितं शोणितमेव वा।
 यदि कुप्यति वा तस्य क्रियमाणे चिकित्सिते॥२७॥
 यथोल्बणस्य दोषस्य तत्र कार्यं भिषग्नितम्।
 आदावन्ते च मृद्ये च मारुतं परिरक्षता॥२८॥
 kaphō vātē jitaprāyē pittam śōṇitamēva vā|
 yadi kupyati vā tasya kriyamāṇē cikitsitē||27||
 yathōlbaṇasya dōṣasya tatra kāryam bhiṣagjitam|
 ādāvantē ca madhyē ca mārutam parirakṣatā||28||
 kapho vAte jitaprAye pittaM shoNitameva vA|
 yadi kupyati vA tasya kriyamANe cikitsite||27||
 yatholbaNasya doShasya tatra kAryaM bhiShagjitam|
 AdAvante ca madhye ca mArutaM parirakShatA||28||

During the treatment when *vata* has almost subsided but *kapha*, *pitta* or *rakta* gets provoked, then routine treatment of these provoked *dosha* should be done. In this condition, the treatment should be according to the predominance of *dosha* but care should be taken to protect *vata* in the beginning, middle and at the end of the treatment [27-28]

Vamana in vata gulma

वातगुल्मे कफो वृद्धो हत्वाऽग्निमरुचिं यदि।
 हल्लासं गौरवं तन्द्रां जनयेदुल्लिखेतु तम्॥२९॥
 vātagulmē kaphō vṛddhō hatvā'gnimaruciṁ yadi|
 hṛllāsaṁ gauravaṁ tandrāṁ janayēdullikhēttu tam||29||
 vAtagulme kapho vRuddho hatvA~agnimaruciM yadi|
 hRullAsaM gauravaM tandrAM janayedullikhettu tam||29||

In *vata gulma* if *kapha* gets increased, it causes diminution in digestion leading to anorexia, nausea, heaviness and sleepiness; such condition should be treated with *vamana* therapy [29]

शूलानाहविबन्धेषु गुल्मे वातकफोल्बणो।
 वर्तयो गुटिकाश्चूर्णं कफवातहरं हितम्॥३०॥
 śūlānāhavibandhēṣu gulmē vātakaphōlbaṇē|

vartayō guṭikāścūrṇam kaphavātaharam hitam||30||

shUIAnAhavibandheShu gulme vAtakapholbaNe|

vartayo guTikAshcUrNaM kaphavAtaharaM hitam||30||

In *vata-kapha* dominant *gulma* if there is acute pain, distension of abdomen and constipation then it should be treated with suppositories, pills and powders which are prepared from *vata* and *kapha* pacifying drugs [30]

Virechana in vata gulma

पितं वा यदि संवृद्धं सन्तापं वातगुल्मिनः।

कुर्याद्विरेच्यः स भवेत् सस्नेहैरानुलोमिकैः॥३१॥

pittam vā yadi saṁvṛddham santāpaṁ vātagulminah|

kuryādvirēcyah sa bhavēt sasnēhairānulōmikaih||31||

pittaM vA yadi saMvRuddhaM santApaM vAtagulminaH|

kuryAdvirecyaH sa bhavet sasnehairAnulomikaiH||31||

In *vata gulma* if increased *pitta* causes burning sensation then *virechana* should be done with laxative drugs mixed with unctuous substances [31]

Blood-letting in vata gulma

गुल्मो यद्यनिलादीनां कृते सम्यग्भिषजिते।

न प्रशाम्यति रक्तस्य सोऽवसेकात् प्रशाम्यति॥३२॥

gulmō yadyanilādīnāṁ kṛtē samyagbhiṣagjite|

na praśāmyati raktasya sō'vasēkāt praśāmyati||32||

gulmo yadyanilAdInAM kRute samyagbhiShagjite|

na prashAmyati raktasya so~avasekAt prashAmyati||32||

If *gulma* does not subside even after proper treatment of *vata* etc. mentioned above then bloodletting is advised to cure it [32]

Treatment of pitta dominant gulma

स्निग्धोष्णोदिते गुल्मे पैतिके संसनं हितम्।

रुक्षोष्णेन तु सम्भूते सर्पिः प्रशमनं परम्॥३३॥

snigdhōṣṇēnōditē gulmē paittikē srar̄sanam hitam|

rūkṣoṣṇēna tu sambhūtē sarpiḥ praśamanam param||33||

snigdhoShNenodite gulme paittike sraMsanaM hitam|
rUkShoShNena tu sambhUte sarpiH prashamanaM param||33||

If *pitta gulma* is caused by indulging in unctuous and hot substances then *virechana* is beneficial. But if it is caused by indulging in dry and hot substances then ghee is a choice of drug [33]

पितं वा पित्तगुल्मं वा ज्ञात्वा पक्वाशयस्थितम्।
कालविन्निर्हरेत् सद्यः सतिकृतैः क्षीरबस्तिभिः॥३४॥
पयसा वा सुखोष्णेन सतिकृतेन विरेचयेत्।
भिषगग्निबलापेक्षी सर्पिषा तैल्वकेन वा॥३५॥
pittam vā pittagulmam vā jñātvā pakvāśayasthitam|
kālavinnirharēt sadyah satiktaih kṣīrabastibhiḥ||34||
payasā vā sukhōṣṇēna satiktēna virēcayēt|
bhiṣagagnibalāpēkṣī sarpiṣā tailvakēna vā||35||
pittaM vA pittagulmaM vA j~jAtvA pakvAshayasthitam|
kAlavinnirharet sadyaH satiktaIH kShIrbastibhiH||34||
payasA vA sukhoShNena satiktena virecayet|
bhiShagagnibalApekShI sarpiShA tailvakena vA||35||

If *pitta* or *pitta-gulma* is situated in colon, the physician expert in proper and timely treatment should eliminate it by giving *kshira-basti* mixed with bitter drugs immediately. The physician aiming to increase the digestive power should perform *virechana* with milk mixed with bitter drugs or with *tilvaka ghrita* [34-35]

Blood-letting in *pitta* dominant *gulma*

तृष्णाज्वरपरीदाहशूलस्वेदाग्निमार्दवे।
गुल्मनामरुचौ चापि रक्तमेवावसेचयेत्॥३६॥
त्रृष्णाज्वरापरार्द्धाहाशुलस्वेदाग्निमार्दवेऽ।
gulmināmarucau cāpi raktamēvāvasēcayēt||36||
tRuShNAjvaraparIdAhashUlasvedAgnimArdave|
gulminAmarucau cApi raktamevAvasecayet||36||

The patient of *pitta-gulma* if having thirst, fever, burning sensation, pain, perspiration, impaired digestion and anorexia is treated with bloodletting [36]

छिन्नमूला विदहयन्ते न गुल्मा यान्ति च क्षयम्।
रक्तं हि व्यम्लतां याति, तच्च नास्ति न चास्ति रुक्॥३७॥

chinnamūlā vidahyantē na gulmā yānti ca kṣayam|
raktam̄ hi vyamlatām̄ yāti, tacca nāsti na cāsti ruk||37||

chinnamUla vidahyante na gulmA yAnti ca kShayam|
raktaM hi vyamlatAM yAti, tacca nAsti na cAsti ruk||37||

Provoked *rakta* is responsible for inflammation (*vidaha*) which is removed by bloodletting; thus when root-cause is removed then there will be no inflammation resulting in vanishing of swelling and pain [37]

Diet after blood-letting

हृतदोषं परिम्लानं जाङ्गलैस्तर्पितं रसैः।
समाश्वस्तं सशेषार्तिं सर्पिरभ्यासयेत् पुनः॥३८॥

hṛtadōṣam̄ parimlānām̄ jāngalaistarpiṭam̄ rasaiḥ|
samāśvastam̄ saśeṣārtim̄ sarpirabhyāsayēt punah||38||

hRutadoShaM parimlAnaM jA~ggalaistarpiTA M rasaiH|
samAshvastaM sasheShArtiM sarpirabhyAsayet punaH||38||

The patient may become weak due to elimination of vitiated blood; hence he should be nourished by the diet comprising of meat soup of wild animals and comforted. To pacify the remaining complaints, he should be prescribed the medicated ghee again [38]

रक्तपित्तातिवृद्धत्वात् क्रियामनुपलभ्य च।
यदि गुल्मो विदहयेत शस्त्रं तत्र भिषग्जितम्॥३९॥

raktapittātivṛddhatvāt kriyāmanupalabhy ca|
yadi gulmo vidahyeta shastraM tatra bhiṣagjitam||39||

raktapittAtivRuddhatvAt kriyAmanupalabhy ca|
yadi gulmo vidahyeta shastraM tatra bhiShagjitam||39||

In case of excessive increase of *pitta* and *rakta* or due to unavailability of proper treatment, if suppuration occurs then surgery should be performed by the surgeon [39]

Apakva gulma (initial non-suppurative stage)

गुरुः कठिनसंस्थानो गूढमांसान्तराश्रयः।

अविवर्णः स्थिरश्चैव हयपक्वो गुल्म उच्यते॥४०॥

guruḥ kaṭhinasaṁsthānō gūḍhamāṁsāntarāśrayah|

avivarṇah sthiraścaiva hyapakvō gulma ucyatē||40||

guruH kaThinasaMsthAno gUDhamAMsAntarAshrayaH|

avivarNaH sthirashcaiva hyapakvo gulma ucyate||40||

Immovable lump of *gulma* which is deeply situated under the flesh and hard and heavy to palpate and whose color remains unchanged is considered as *apakva* i.e. non-suppurative [40]

Symptoms of suppurating (*vidahamana*) *gulma*

दाहशूलार्तिसङ्क्षोभस्वप्ननाशारतिज्वरैः।

विदहयमानं जानीयादगुल्मं तमुपनाहयेत्॥४१॥

dāhaśūlārtisaṅksōbhasvapnanāśāratijvaraiḥ|

vidahyamānam jānīyādgulmar̥ tamupanāhayēt||41||

dAhashUIArtisa~gkShobhasvapnanAshAratijvaraiH|

vidahyamAnaM jAnlyAdgulmaM tamupanAhayet||41||

The *gulma* with symptoms of burning sensation, much pain, very much irritation and discomfort, loss of sleep and fever indicates that it is about to suppurate. In this condition *upanaha* (poultice) is indicated. [41]

Symptoms of suppurated *gulma*

विदाहलक्षणे गुल्मे बहिस्तुङ्गे समुन्नते।

श्यावे सरक्तपर्यन्ते संस्पर्शे बस्तिसन्निभे॥४२॥

निपीडितोन्नते स्तब्धे सुप्ते [४] तत्पाश्वर्पीडनात्।

तत्रैव पिण्डिते शूले सम्पक्वं गुल्ममादिशेत्॥४३॥

vidāhalakṣaṇe gulmē bahistuṅgē samunnatē|

śyāvē saraktaparyantē saṁsparśē bastisannibhē||42||

nipīḍitōnnatē stabdhē suptē [4] tatpāśvapīḍanāt|

tatraiva piṇḍitē śūlē sampakvar̥ gulmamādiśēt||43||

vidAhalakShaNe gulme bahistu~gge samunnate|

shyAve saraktaparyante saMsparshe bastisannibhe||42||

nipiDitonnate stabdhe supte [4] tatpArshvapIDanAt|
tatraiva piNDite shUle sampakvaM gulmamAdishet||43||

If *gulma* protrudes pointing toward outside and skin over the lesion becomes stiff and numb and its color changes to dusky with red margins. On palpation, the lump resembles as bladder filled with water, pitting on pressure, but on pressing from side the mass becomes tense with mild pain, otherwise it feels compressed mass with acute pain; all these signs and symptoms indicate that the *gulma* has suppurated [42-43]

तत्र धान्वन्तरीयाणामधिकारः क्रियाविधौ।
वैद्यानां कृतयोग्यानां व्यथशोधनरोपणे॥४४॥
tatra dhānvantarīyānāmadhikārah kriyāvidhau।
vaidyānām kṛtayōgyānām vyadhaśodhanarōpaṇē॥४४॥
tatra dhAnvantarlyANAmadhikAraH kriyAvidhau।
vaidyAnAM kRutayogyAnAM vyadhashodhanaropaNe॥४४॥

The suppurated *gulma* requires surgical intervention such as incision, cleansing and healing therefore it should be treated by a surgeon [44]

अन्तभीगस्य चाप्येतत् पच्यमानस्य लक्षणम्।
हृत्क्रोडशूनताऽन्तःस्थे [५] बहिःस्थे पाश्वनिर्गतिः॥४५॥
antarbhāgasya cāpyētat pacyamānasya lakṣaṇam।
hṛ̥tkrōḍaśūnatā'ntaḥsthē [५] bahiḥsthē pārśvanirgatiḥ॥४५॥
antarbhAgasya cApyetat pacyamAnasya lakShaNam।
hRutkroDashUnatA~antaHsthe [५] bahiHsthe pArshvanirgatiH॥४५॥

The above mentioned symptoms also occur in suppurating (*pachyamana*) internal *gulma*. Only difference is that in the internal *gulma* there is swelling in cardiac region of the abdomen while exterior *gulma* protrudes towards sides of abdomen [45]

Management of pus discharging *gulma*

पक्वः स्रोतांसि सङ्क्लेदद्य व्रजत्यूर्ध्वमधोऽपि वा।
स्वयम्प्रवृत्तं तं दोषमुपेक्षेत हिताशनैः [६] ||४६॥
दशाहं द्वादशाहं वा रक्षन् भिषगुपद्रवान्।
pakvah̄ srōtāṁsi saṅklēda vrajatyūrdhvamadhō'pi vā।
svayampravṛttam tam dōsamupēkṣēta hitāśanaiḥ [६] ||४६॥

daśāhaṁ dvādaśāhaṁ vā rakṣan bhiṣagupadravān|
 pakvaH srotAMsi sa~gkledya vrajatyUrdhvamadho~api vA|
 svayampravRuttaM taM doShamupekSheta hitAshanaiH [6] ||46||
 dashAhaM dvAdashAhaM vA rakShan bhiShagupadravAn|

Suppurated *gulma* on softening of the passage discharges the pus upwards or downwards. In case of *gulma* starts discharging at its own then the physician should wait and watch for ten or twelve days while taking care that no complication occurs [46]

अत ऊर्ध्वं हितं पानं सर्पिषः सविशोधनम्॥४७॥
 शुद्धस्य तिक्तं सक्षोद्रुं प्रयोगे सर्पिरिष्यते॥४८॥
 ata ūrdhvam hitam pānam sarpiṣah saviśōdhanam||47||
 śuddhasya tiktam sakṣaudram prayōgē sarpirisyatē||48||
 ata UrdhvaM hitaM pAnaM sarpiShaH savishodhanam||47||
 shuddhasya tiktaM sakShaudraM prayoge sarpiriShyate||48|

Oral administration of ghee with cleansing of the discharging ulcer with *shodhana* drugs are beneficial. After the cleansing, medicated ghee prepared with bitter drugs should be given with honey [48]

Management of kaphaja gulma

Indications of langhana

शीतलैर्गुरुभिः स्निग्धैर्गुल्मे जाते कफात्मके॥४८॥
 अवम्यस्याल्पकायाग्नेः कुर्याल्लङ्घनमादितः।
 śītalairgurubhiḥ snigdhairgulmē jātē kaphātmakē||48||
 avamyasyālpakāyāgnēḥ kuryāllaṅghanamāditah।
 shītalairgurubhiH snigdhairgulme jAtē kaphAtmake||48||
 avamyasyAlpakAyAgneH kuryAlla~gghanamAditaH|

Kapha-gulma if caused by indulgence in cold, heavy and unctuous diet and in those not eligible for *vamana*, *langhana* (depletion) therapy should be prescribed in the beginning. [48]

Indications of vamana

मन्दोऽग्निर्वेदना मन्दा गुरुस्तिमितकोष्ठता॥४९॥
 सोत्क्लेशा चारुचिर्यस्य स गुल्मी वमनोपगः।

mandō'gnirvēdanā mandā gurustimitakōṣṭhatā||49||
sōtklēśā cāruciryasya sa gulmī vamanōpagah|
mando~agnirvedanA mandA gurustimitakoShThatA||49||
sotkleshA cAruciryasya sa gulml vamanopagaH|

Vamana is indicated in a patient of *gulma* who is having low digestion, anorexia, nausea and mild pain, heaviness and stiffness in abdomen [49]

उष्णौरेवोपचर्यश्च कृते वमनलङ्घने॥५०॥
योज्यश्चाहारसंसर्गो भेषजैः कटुतिक्तकैः।
uṣṇairēvōpacaryaśca kṛtē vamanalaṅghanē॥५०॥
yōjyaścāhārasaṁsargō bhēṣajaiḥ kaṭutiktakaiḥ।
uShNairevopacaryashca kRute vamanala~gghane॥५०॥
yojyashcAhArasaMsargo bheShajaiH kaTutiktakaiH|

After the treatment with *vamana* and *langhana*, the patient should be given hot (*ushna*) therapy and food mixed with pungent and bitter substances [50]

सानाहं सविबन्धं च गुल्मं कठिनमुन्नतम्॥५१॥
दृष्ट्वाऽसदौ स्वेदयेद्युक्त्या स्विन्नं च विलयेदभिषक्।
sānāham savibandham ca gulmam kaṭhinamunnatam||51||
dṛṣṭvā”dau svēdayēdyuktyā svinnam ca vilayēdbhiṣak|
sAnAhaM savibandhaM ca gulmaM kaThinamunnatam||51||
dRuShTvA_aadau svedayeduyuktyA svinnaM ca vilayedbhiShak|

If the *gulma* is hard and protruded accompanied with constipation and distension of abdomen then physician should give sudation locally to dissolve it [51]

लङ्घनोल्लेखने स्वेदे कृतेऽग्नौ सम्प्रधुक्षिते॥५२॥
कफगुल्मी पिबेत् काले सक्षारकटुकं घृतम्।
laṅghanollēkhanē svēdē kṛtē'gnau sampradhukṣitē||52||
kaphagulmī pibēt kālē sakṣārakaṭukam ghṛtam|
la~gghanollekhane svede kRute~agnau sampradhukShite||52||
kaphagulml pibet kAle sakShArakaTukaM ghRutam|

After performing *langhana*, *vamana* and *swedana* therapies when digestion is improved, the patient of *kapha gulma* should be given ghee prepared with bitter substances and *kshara* (alkali preparation) at the proper time [52]

स्थानादपसृतं जात्वा कफगुलमं विरेचनैः॥५३॥
सस्नेहैर्बस्तिभिर्वाऽपि शोधयेद् दाशमूलिकैः।
sthānādapasṛtam jñātvā kaphagulmam virēcanaiḥ||53||
sasnēhairbastibhirvā'pi śōdhayēddāśamūlikaiḥ|
sthAnAdapasRutaM j~jAtvA kaphagulmaM virecanaiH||53||
sasnehairbastibhirvA~api shodhayeddAshamUlikaiH|

By the above treatments when *kapha gulma* dislodges from its place, the patient should be given *virechana* for purification. *Anuvasana basti* with oil prepared with *dashamula* drugs can also be given for this purpose [53]

मन्देऽग्नावनिले मूढे जात्वा सस्नेहमाशयम्॥५४॥
गुटिकाचूर्णनिर्यूहाः प्रयोज्याः कफगुल्मनाम्।
mandē'gnāvanilē mūḍhē jñātvā sasnēhamāśayam||54||
guṭikācūrṇaniryūhāḥ prayōjyāḥ kaphagulminām|
mande~agnAvanile mUDhe j~jAtvA sasnehamAshayam||54||
guTikAcUrNaniryUhAH prayojyAH kaphagulminAm|

In the condition when digestion is low and dysfunction of *vata*, after proper oleation of the affected site (*ashaya*), the drugs in the form of pills, powder or decoction are administered to the patient of *kapha gulma* [54]

कृतमूलं महावास्तुं कठिनं स्तिमितं गुरुम्॥५५॥
जयेत्कफकृतं गुलमं क्षारारिष्टाग्निकर्मभिः॥
kṛtamūlam mahāvāstum kaṭhinam stimitam gurum||55||
jayētkaphakṛtam gulmarū kṣārāriṣṭāgnikarmabhiḥ||
kJRutamUlaM mahAvAstuM kaThinaM stimitaM gurum||55||
jayetkaphakRutaM gulmaM kShArAriShTAGnikarmabhiH|56|

If *kapha-gulma* has a deep root and is large in size, hard in consistency and heavy, then the patient should be treated with alkali preparation-*kshara*, *arishta* and *agni karma* (cauterization) [55]

दोषप्रकृतिगुल्मर्तुयोगं बुद्ध्वा कफोल्बणे॥५६॥

बलदोषप्रमाणजः क्षारं गुल्मे प्रयोजयेत्।
 एकान्तरं द्व्यन्तरं वा ऋहं विश्रम्य वा पुनः॥५७॥
 शरीरबलदोषाणां वृद्धिक्षणकोविदः।
 dōṣaprakṛtigulmartuyogaṁ buddhvā kaphōlbaṇē॥५६॥
 baladōṣapramāṇajñah kṣāraṁ gulmē prayōjayēt।
 ēkāntaram dvyantaram vā tryaharā viśramya vā punah॥५७॥
 śarīrabaladōṣāṇāṁ vṛddhikṣapaṇakōvidah।
 doShaprakRutigulmartuyogaM buddhvA kapholbaNe॥५६॥
 baladoShapramANaj~jaH kShAraM gulme prayojayet।
 ekAntaraM dvyantaraM vA tryahaM vishramya vA punaH॥५७॥
 sharIrbabaladoShANAM vRuddhikShapaNakovidaH।

A physician expert in assessing the degree of strength of patient as well as of *dosha* should prescribe alkali preparation—*kshara* to the patient of *kapha gulma* by considering its *dosha* and nature as well as prevailing season. The expert physician should use *kshara* treatment on alternate day or at the interval of two or three days depending on the increase or decrease in the strength of the body and *dosha* [56-57]

श्लेष्माणं मधुरं स्निग्धं मांसक्षीरघृताशिनः॥५८॥
 छित्वा छित्वाऽशयात् क्षारः क्षरत्वात् क्षारयत्यधः।
 ślēṣmāṇam madhuram snigdham māṁsakṣīrghṛtāśinah। 58॥
 chittvā chittvā”śayāt kṣārah kṣaratvāta kṣārayatyadhaḥ।
 shleShmANaM madhuraM snigdhaM mAmsakShIraghRutAshinaH॥५८॥
 chittvA chittvA_aashayAt kShAraH kSharatvAta kShArayatyadhaH।

Kapha is sweet and unctuous, so it is increased by indulging in the diet comprising of excessive meat, milk and ghee. Alkali preparation-*kshara* has an action of erosion (*ksharana*) due to which it erodes the *gulma* and tickles it down from its habitat [58]

मन्देऽग्नावरुचौ सात्म्ये मद्ये सस्नेहमश्नताम्॥५९॥
 प्रयोज्या मार्गशुद्ध्यर्थमरिष्टाः कफगुल्मनाम्॥
 mandē'gnāvarucau sātmyē madyē sasnēhamaśnatām॥५९॥
 prayōjyā mārgaśuddhyarthamariṣṭāḥ kaphagulminām॥
 mande~agnAvarucau sAtmye madye sasnehamashnatAm॥५९॥

prayojyA mArgashuddhyarthamariShTAH kaphagulminAm|60|

The diminution in digestion and loss of appetite occur in a patient of *kapha gulma* due to excessive indulgence in unctuous diet, therefore for the purification of the channels medicated fermented preparation-*arishta* should be given provided the patient is habituated of taking alcohol [59]

Daha karma and raktamokshana in kapha gulma

लङ्घनोल्लेखनैः स्वेदैः सर्पिः पानैर्विरेचनैः ||६०||

बस्तिभिर्गुटिकाचूर्णक्षारारिष्टगणैरपि।

श्लैष्मिकः कृतमूलत्वाद्यस्य गुल्मो न शाम्यति॥६१॥

तस्य दाहो हृते रक्ते शरलोहादिभिर्हितः।

laṅghanollēkhanaiḥ svēdaiḥ sarpihpānairvirēcanaiḥ||60||

bastibhirguṭikācūrṇakṣārāriṣṭaganairapiḥ

ślaiśmikah kṛtamūlatvādyasya gulmō na śāmyati||61||

tasya dāhō hṛtē raktē śaralōhādibhirhitah̄i

la~gghanollekhanaiH svedaiH sarpiHpAnairvirecanaiH||60||

bastibhirguTikAcUrNakShArAriShTagaNairapiḥ

shlaiShmikaH kRutamUlatvAdyasya gulmo na shAmyati||61||

tasya dAho hRute rakte sharalohAdibhirhitah̄i

If the *kapha gulma* does not subside by *langhana*, *vamana*, *swedana*, oral administration of medicated ghee, *virechana*, *basti*, pills, powder, *kshara* and *arishta* due to its firm root in the body, then first bloodletting should be done and then cauterization with such means as arrow head should be done [61]

औष्णयातैक्षण्याच्च शमयेदग्निर्गुल्मे कफानिलौ॥६२॥

तयोः शमाच्च सङ्घातो गुल्मस्य विनिवर्तते।

auṣṇyāttaiķṣṇyācca śamayēdagnirgulmē kaphānilau||62||

tayōḥ śamācca saṅghātō gulmasya vinivartatē।

auShNyAttaikShNyAcca shamayedagnirgulme kaphAnilau||62||

tayoH shamAcca sa~gghAto gulmasya vinivartate।

The fire heat due to its hot and sharp properties relieves *kapha* and *vata* in *gulma*, which in turn leads to dissolving the mass of *gulma* [62]

दाहे धान्वन्तरीयाणामत्रापि भिषजां बलम्||६३||

क्षारप्रयोगे भिषजां क्षारतन्त्रविदां बलम्॥

dāhē dhānvantarīyāñāmatrāpi bhiṣajāṁ balam||63||

kṣāraprayōgē bhiṣajāṁ kṣāratantravidāṁ balam||

dAhe dhAnvantarlyANAmatrApi bhiShajAM balam||63||

kShAraprayoge bhiShajAM kShAratantravidAM balam|64|

Cauterization comes under the purview of the surgeon and the use of *kshara* is the field of specialist in *kshara karma* [63]

व्यामिश्रदोषे व्यामिश्र एष एव क्रियाक्रमः||६४||

vyāmiśradōṣē vyāmiśra ēṣa ēva kriyākramah||64||

vyAmishradoShe vyAmishra eSha eva kriyAkramaH||64||

If the *gulma* is due to two *dosha* then the mix treatment of the involved two *dosha* should be done [64]

सिद्धानतः प्रवक्ष्यामि योगान् गुल्मनिबर्हणान्।

siddhānataḥ pravakṣyāmi yōgān gulmanibarhaṇān|

siddhAnataH pravakShyAmi yogAn gulmanibarhaNAn|

Now the specific preparations for the cure of *gulma* will be described [64 ½]

Tryushanadi-ghritam

ऋूषणत्रिफलाधान्यविडङ्गचत्यचित्रकैः॥६५॥

कल्कीकृतैर्धृतं सिद्धं सक्षीरं वातगुल्मनुतिति ऋूषणादिघृतम्।

tryūṣaṇatrimphalādhānyaviḍaṅgacavyacitrakaiḥ||65||

kalkīkṛtairghṛtaṁ siddham sakṣīram vātagulmanutiti tryuṣaṇādighṛtam ||

tryUShaNatriphalAdhAnyaviDa~ggacavyacitrakaiH||65||

kalkIkRutaIrghRutaM siddhaM sakShIraM vAtagulmanutiti tryUShaNAdighRutam |

Ghee prepared with a paste of *trayushna* (dry ginger, black and long pepper), *triphalā*, coriander, *vidanga*, *chavya* and *chitraka* by adding milk is known as *tryushanadighritam*. It is curative of *vata gulma*; thus described *tryushanadighritam* [65]

Parama trayushanadighritam

एत एव च कल्का: स्युः कषायः पाञ्चमूलिकः ||६६||

द्विपञ्चमूलिको वाऽपि तद्घृतं गुल्मनुत् परमिति त्र्यूषणादिघृतमपरम्

ēta ēva ca kalkāḥ syuḥ kaśāyah pāñcamūlikah ||66||

dvipañcamūlikō vā'pi tadghṛtam gulmanut paramiti tryuṣanādighṛtamaparam ||

eta eva ca kalkAH syuH kaShAyaH pA~jcamUlikaH [7] ||66||

dvipa~jcamUliko vA~api tadghRutaM gulmanut paramiti tryUShaNAdighRutamaparam

Above mentioned paste if prepared with decoction of *brihat panchamula* or *dashamula* is known as *parama tryushanadighritama*. It is very much effective in curing *gulma*; thus described *parama tryushanadighritama* [66]

(षट्पलं वा पिबेत् सर्पिर्यद्गृतं राजयक्षमणि) ||67||

(ṣaṭpalam vā pibētsarpiryaduktam rājayakṣmaṇi) ||67||

(ShaTpalaM vA pibetsarpiryaduktaM rAjayakShmaNi) ||67||

(*shatpalam ghrita* described for the treatment of *rajayakshma* may also be used orally) [67]

प्रसन्नया वा क्षीरार्थं सुरया दाडिमेन वा।

दृजः सरेण वा कार्यं घृतं मारुतगुल्मनुत्॥६८॥

prasannayā vā kṣīrārthaṁ surayā dāḍimēna vā।

dadhnaḥ sarēṇa vā kāryam ghṛtam mārutagulmanut||68||

prasannayA vA kShIrArthaM [8] surayA dADimena vA|

dadhnaH sareNa vA kAryaM ghRutaM mArutagulmanut||68||

In place of milk in above preparation of *tryushanadighritam*, *ghrita* can also be prepared with *prasanna* wine, *sura* wine, pomegranate juice or cream of yogurt (curd). It also cures *vata gulma* [68]

Hingusauvarchaladya ghrita

हिङ्गुसौवर्चलाजाजीबिडदाडिमदीप्यकैः।

पुष्करव्योषधन्याकवेतसक्षारचित्रकैः॥६९॥

शटीवचाजगन्धैलासुरसैश्च विपाचितम्।

शूलानाहहरं सर्पिर्दृना चानिलगुल्मिनाम्॥७०॥

इति हिङ्गुसौवर्चलाद्यं घृतम्

hiṅgusauvarcalājājībiḍadāḍimadīpyakaiḥ।

puṣkaravyōṣadhanyākavētasakṣāracitrakaiḥ||69||
 ḫativacājagandhailāsurasaiṣca vipācitam
 śūlānāhaharam sarpirdadhnā cānilagulminām||70||
 iti hiṅgusauvarcalādyam ghṛtam
 hi~ggusauvarcalAjAjibiDadADimadIpyakaiH|
 puShkaravyoShadhanyAkavetasakShAracitrakaiH||69||
 shaTlavacAjagandhailAsurasaischca vipAcitam|
 shUIAnAhaharaM sarpirdadhnA cAnilagulminAm||70||
 iti hi~ggusauvarcalAdyaM ghRutam

A *ghrita* prepared with paste of asafoetida, rock salt, cumin, Vit-salt, pomegranate, *ajwan*, *pushkaramula*, *trikatu*, coriander, *vetas*, *yavakshara*, *chitraka*, *shati*, *vacha*, *ajagandha*, cardamom and holy basil by adding curd/yogurt is known as *hiṅgusauvarchaladyam ghritam*. It cures *vata gulma*, acute pain and distension of abdomen due to retention of gases (*anaha*). Thus *hiṅgusauvarchaladyam ghritam* is described [69-70]

Hapushadaya ghritam

हपुषाव्योषपृथ्वीकाचव्यचित्रकसैन्धवैः।
 साजाजीपिप्पलीमूलदीप्यकैर्विपचेद्घृतम्॥७१॥
 सकोलमूलकरसं सक्षीरदधिदाडिमम्।
 तत् परं वातगुल्मधनं शूलानाहविमोक्षणम्॥७२॥
 योन्यर्शोग्रहणीटोषश्वासकासारुचिज्वरान्।
 बस्तिहृत्पाशर्वशूलं च घृतमेतद्व्यपोहति॥७३॥
 इति हपुषादयं घृतम्
 hapuṣāvyōṣapṛthvīkācavyacitrakasaindhavaiḥ|
 sājājīpippalīmūladīpyakairvipacēdghṛtam||71||
 sakōlamūlakarasam sakṣīradadhidāḍimam|
 tat param vātagulmaghnām śūlānāhavimōkṣaṇam||72||
 yonyarśōgrahaṇīdōṣaśvāsakāsāruciijvarān|
 bastihṛtpārśvaśūlarṁ ca ghṛtamētadvyapōhati||73||

iti hapuśādyarṁ ghṛtam
 hapuShAvyoShapRuthvIkAcavyacitrakasaindhavaiH|
 sAjAjlippallImUladiipyakairvipacedghRutam||71||
 sakolamUlakarasaM sakShIradadhidADimam|
 tat paraM vAtagulmaghnaM shUIAnAhavimokShaNam||72||
 yonyarshograhaNIdoShashvAsakAsArucijvarAn|
 bastihRutpArshvashUlaM ca ghRutametadvayapohati||73||
 iti hapuShAdyaM ghRutam

Ghee prepared with a paste of *hapusha*, *trikatu*, cardamom, *chavya*, *chitraka*, rock salt, cumin, root of long pepper and *ajwain* along with juice of jujubes, radish and pomegranate, by adding milk and curd is known as *hapushadyam ghritam*. It is best drug to cure *vata gulma*, abdominal pain and distension of abdomen. It also provides relief in gynecological disorders, piles, *grahani* (assimilation disorders), dyspnea, cough, anorexia, fever and pain in hypogastric, epigastric and flanks regions of the abdomen. Thus, *hapushadyam ghritam* is described [71-73]

Pippalyadyam ghritam

पिप्पल्या पिचुरध्यर्धो दाडिमादद्विपलं पलम्।
 धान्यात्पञ्च घृताच्छुण्ठ्याः कर्षः क्षीरं चतुर्गुणम्॥७४॥
 सिद्धमेतैर्घृतं सद्यो वातगुल्मं व्यपोहति।
 योनिशूलं शिरःशूलमर्शासि विषमज्वरम्॥७ ५॥
 इति पिप्पल्यादयं घृतम्

pippalyā picuradhyardhō dāḍimāddvipalam palam|
 dhānyātpañca ghṛtācchunṭhyāḥ karṣaḥ kṣīraṁ caturguṇam||74||
 siddhamētairghṛtam sadyō vātagulmaṁ vyapōhati|
 yōniśūlam śirahśūlamarśāṁsi viṣamajvaram||75||

iti pippalyādyarṁ ghṛtam
 pippalyA picuradhyardho dADimAddvipalaM palam|
 dhAnyAtpa~jca ghRutAcchuNThyAH karShaH kShIraM caturguNam||74||
 siddhametairghRutaM sadyo vAtagulmaM vyapohati|
 yonishUlaM shiraHshUlamarshAMsi viShamajvaram||75||

iti pippalyAdyaM ghRutam

Ghee prepared with paste of one and half part of long pepper, eight parts of pomegranate seeds, four parts of coriander and one part of dry ginger in 20 parts of ghee and 80 parts of milk is known as *pippalyadyam ghritam*. It provides quick relief in *vata gulma*, pain in vagina, headache, piles and irregular fever. Thus *pippalyadyam ghritam* is described [74-75]

घृतानामौषधगणा य एते परिकीर्तिताः।

ते चूर्णयोगा वर्त्यस्ताः कषायास्ते च गुल्मिनाम्॥७६॥

ghṛtānāmauṣadhaṇā ya ētē parikīrtitāḥ।

tē cūrnayōgā vartyastāḥ kaṣāyāstē ca gulminām॥७६॥

ghRutAnAmauShadhagaNA ya ete parikIrtitAH|

te cUrNayogA vartyastAH kaShAyAste ca gulminAm||76||

The drugs mentioned in the above *ghrita* preparations may also be used in form of powders, suppositories or decoctions for the treatment of *gulma* [76]

Peya (liquid gruel)

कोलदाडिमधर्माम्बुसुरामण्डाम्लकाञ्जिकैः।

शूलानाहहरी पेया बीजपूरसेन वा॥७७॥

kōladāḍimagharmāmbusurāmaṇḍāmlakāñjikaiḥ।

śūlānāhaharī pēyā bījapūrarasēna vā॥७७॥

koladADimagharmAmbusurAmaNDAmIkA~jjikaiH|

shUIAnAhaharl peyA bljapUrarasena vA||77||

The liquid gruel prepared from jujube, pomegranate, warm water, supernatant liquid of *sura*(wine) (*sura manda*), sour *kanji* or citron juice relieves abdominal pain and distension of abdomen [77]

चूर्णानि मातुलुडगस्य भावितानि रसेन वा।

कुर्याद्वर्तीः सगुटिका गुल्मानाहार्तिशान्तये॥७८॥

cūrnāni mātuluḍgasya bhāvitāni rasēna vā।

kuryādvartīḥ saguṭikā gulmānāhārtiśāntayē॥७८॥

cUrNAni mAtulu~ggasya bhAvitAni rasena vA|

kuryAdvartiH saguTikA gulmAnAhArtishAntaye||78||

Or prepare the suppositories and pills by impregnating the powders of the above drugs in the juice of pomelo (*matulunga*) and use them for providing relief in *gulma*, distension of abdomen and discomfort [78]

Hingvadi churna and gutika

हिङ्गु त्रिकटुकं पाठं हपुषामभयां शटीम्।
अजमोदाजगन्धे च तिन्तिडीकाम्लवेतसौ॥७९॥
दाढिमं पुष्करं धान्यमजार्जीं चित्रकं वचाम्।
द्वौ क्षारौ लवणे द्वे च चव्यं चैकत्र चूर्णयेत्॥८०॥
चूर्णमेतत् प्रयोक्तव्यमन्नपानेष्वनन्त्ययम्।
प्रागभक्तमथवा पेयं मद्येनोष्णोदकेन वा॥८१॥
पार्श्वहृद्बस्तिशूलेषु गुल्मे वातकफात्मके।
आनाहे मूत्रकृच्छ्रे च शूले च गुदयोनिजे [९] ॥८२॥
ग्रहण्यशर्विकारेषु प्लीहिन पाण्डवामयेऽरुचौ।
उरोविबन्धे हिक्कायां कासे श्वासे गलग्रहे॥८३॥
भावितं मातुलुङ्गस्य चूर्णमेतद्रसेन वा।
बहुशो गुटिकाः कार्याः कार्मुकाः स्युस्ततोऽधिकम्॥८४॥
इति हिङ्गवादिचूर्णं गुटिका च ।

hiṅgu trikaṭukam pāṭhāṁ hapuṣāmabhayāṁ śaṭīm|
ajamōdājagandhē ca tintidīkāmlavētasau||79||
dāḍimam puṣkaram dhānyamajājīm citrakam vacām|
dvau kṣārau lavaṇē dvē ca cavyam caikatra cūrṇayēt||80||
cūrṇamētat prayōktavyamannapānēśvanatyayam|
prāgbhaktamathavā pēyam madyēnōṣṇōdakēna vā||81||
pārśvahṛdbastiśūlēṣu gulmē vātakaphātmakē|
ānāhē mūtrakṛcchrē ca śūlē ca gudayōnijē [9] ||82||
grahaṇyarśōvikārēṣu plīhni pāṇḍvāmayē’rucau|
urōvibandhē hikkāyāṁ kāsē śvāsē galagrahē||83||
bhāvitāṁ mātuluṅgasya cūrṇamētadrasēna vā|

bahuśō guṭikāḥ kāryāḥ kārmukāḥ syustatō’dhikam||84||
 iti hiṅgvādicūrṇam̄ guṭikā ca |
 hi~ggu trikaTukaM pAThAM hapuShAmabhayAM shaTIm|
 ajamodAjagandhe ca tintiDIkAmlavetasau||79||
 dADimaM puShkaraM dhAnyamajAjIM citrakaM vacAm|
 dvau kShArau lavaNe dve ca cavyaM caikatra cUrNayet||80||
 cUrNametat prayoktavyamannapAneShvanatyayam|
 prAghaktamathavA peyaM madyenoShNodakena vA||81||
 pArshvahRudbastishUleShu gulme vAtakaphAtmake|
 AnAhe mUtrakRucchre ca shUle ca gudayonije [9] ||82||
 grahaNyarthovikAreShu pllhni pANDvAmaye~arucau|
 urovibandhe hikkAyAM kAse shvAse galagrahe||83||
 bhAvitaM mAtulu~ggasya cUrNametadrasena vA|
 bahusho guTikAH kAryAH kArmukAH syustato~adhikam||84||
 iti hi~ggvAdicUrNaM guTikA ca

Make fine powder of equal parts of asafoetida, *trikatu*, *patha*, *hapusha*, *haritaki*, *shati*, *ajamoda*, *ajagandha*, *tintidika*, *amlavetas*, pomegranate, *pushkaramula*, coriander, *cumin*, *chitraka*, *vacha*, two types of *kshara*, two types of salt and *chavya*. It is known as *hingvadichurnam*.

This powder is to be given with food and drinks or it may be taken before meal as drink mixed with wine or hot water. This has no harmful effect.

It is useful in *vata-kapha gulma*, pain in hypogastric, epigastric and hypochondric regions of the abdomen, distension of abdomen, dysuria, pain in anus and vagina, assimilation disorders, piles, spleen disorders, anemia, anorexia, tightness of chest, hiccup, cough, dyspnoea and sore-throat.

The pills may also be prepared by repeatedly impregnating the above mentioned powders in juice of citron, which is more effective than administration of the simple powders. Thus *hingvadichurnam* and *gutika* have been described [79-84]

मातुलुङ्गरसो हिङ्गु दाडिमं बिडसैन्धवे।
 सुरामण्डेन पातव्यं वातगुल्मरुजापहम्॥८५॥
 mātuluṅgarasō hiṅgu dāḍimam̄ biḍasaīndhavē|

surāmaṇḍēna pātavyaṁ vātagulmarujāpaham||85||
 mAtulu~ggaraso hi~ggu dADimaM biDasaindhavel|
 surAmaNDena pAtavyaM vAtagulmarujApaham||85||

Mix asafoetida, pomegranate and bid and rock salts in juice of citron and take with supernatant fluid of *surā* wine. It cures pain of *vata gulma* [85]

Shatyadi churnam and gutika

शटीपुष्करहिङ्गवम्लवेतसक्षारचित्रकान्।
 धान्यकं च यवानीं च विडङ्गं सैन्धवं वचाम्॥८६॥
 सचव्यपिप्पलीमूलामजगन्धां सदाडिमाम्।
 अजार्जीं चाजमोदां च चूर्णं कृत्वा प्रयोजयेत्॥८७॥
 रसेन मातुलुङ्गस्य मधुशुक्तेन वा पुनः।
 भावितं गुटिकां कृत्वा सुपिष्टां कोलसम्मिताम्॥८८॥
 गुल्मं प्लीहानमानाहं श्वासं कासमरोचकम्।
 हिक्कां हृद्रोगमर्शासि विविधां शिरसो रुजम्॥८९॥
 पाण्डवामयं कफोत्क्लेशं सर्वजां च प्रवाहिकाम्।
 पार्श्वर्हद्बस्तिशूलं च गुटिकैषा व्यपोहति॥९०॥
 śaṭīpuṣkarahiṅgvamlavētasakṣāracitrakān|
 dhānyakāṁ ca yavānīṁ ca viḍāṅgam saindhavaṁ vacām||86||
 sacavyapippalīmūlāmajagandhāṁ sadāḍimām|
 ajājīṁ cājamōdāṁ ca cūrṇāṁ kṛtvā prayōjayēt||87||
 rasēna mātuluṅgasya madhuśuktēna vā punah|
 bhāvitāṁ guṭikāṁ kṛtvā supiṣṭāṁ kōlasammitām||88||
 gulmarāṁ plīhānamānāhaṁ śvāsam kāsamarōcakam|
 hikkāṁ hṛdrōgamarśāṁsi vividhāṁ śirasō rujam||89||
 pāṇḍvāmayāṁ kaphōtklēśāṁ sarvajāṁ ca pravāhikām|
 pārśvahṛdbastiśūlaṁ ca guṭikaiṣā vyapōhati||90||
 shaṭīpuṣkarahi~ggvamlavetasakShAracitrakAn|
 dhAnyakaM ca yavAnIM ca viDa~ggaM saindhavaM vacAm||86||

sacavyapippallmUIAmajagandhAM sadADimAm|
 ajAjIM cAjamodAM ca cUrNaM kRutvA prayojayet||87||
 rasena mAtulu~ggasya madhushuktena vA punaH| bhAvitaM guTikAM kRutvA
 supiShTAM kolasammitAm||88||
 gulmaM pllhAnamAnAhaM shvAsaM kAsamarocakam|
 hikkAM hRudrogamarshAMsi vividhAM shiraso rujam||89||
 pANDvAmayaM kaphotkleshaM sarvajAM ca pravAhikAm|
 pArshvahRudbastishUlaM ca guTikaiShA vyapohati||90||

Mix fine powders of *shati*, *pushkaramula*, *asafoetida*, *amlavetasa*, *kshara*, *chitraka*, coriander, *ajwain* (*yavani*), *vidanga*, rock-salt, *vacha*, *chavya*, *pippalimula*, *ajagandha*, pomegranate, *ajaji* and *ajamoda*. It may be used in powder form or in the form of pills made of size of jujube by impregnating these powders in juice of citron or vinegar of honey by rubbing well.

This pill cures *gulma*, spleen disorders, distension of abdomen, dyspnea, anorexia, hiccup, heart diseases, piles, various types of headache, anemia, excessive of secretions (*kaphotklesha*), all types of dysenteries and pain in hypogastric, epigastric and hypochondric regions of the abdomen [86-90]

Nagara preparation

नागरार्धपलं पिष्ट्वा द्वे पले लुच्चितस्य च|
 तिलस्यैकं गुडपलं क्षीरेणोष्णेन ना पिबेत्॥९१॥
 वातगुल्ममुदावर्तं योनिशूलं च नाशयेत्|
 nāgarārdhapalaṁ piṣṭvā dvē palē luñcitasya ca|
 tilasyaikaṁ guḍapalaṁ kṣīrēṇoṣṇēna nā pibēt||91||
 vātagulmamudāvartam yōniśūlam ca nāśayēt|
 nAgarArdhapalaM piShTvA dve pale lu~jcitasya ca|
 tilasyaikaM guDapalaM kShIreNoShNena nA pibet||91||
 vAtagulmamudAvartaM yonishUlaM ca nAshayet|

Make paste of 25 gm of dried ginger, 100 gm peeled sesame and 50 gm of jaggery and administer to the patient with warm milk. It cures *vata gulma*, *udavarta* (disorder due to improper direction of *vata*) and pain in vagina [91½]

पिबेदेरण्डजं तैलं वारुणीमण्डमिश्रितम्॥९२॥

तदेव तैलं पयसा वातगुल्मी पिबेन्नरः।
 श्लेष्मण्यनुबले पूर्वं हितं पित्तानुगे परम्॥९३॥
 pibēdērandajam tailam vārunīmaṇḍamīśritam॥९२॥
 tadēva tailam payasā vātagulmī pibennarah।
 ślēṣmaṇyanubalē pūrvam hitam pittānugē param॥९३॥
 pibederaNDajaM tailaM vAruNlmaNDamishritam॥९२॥
 tadeva tailaM payasA vAtagulml pibennaraH।
 shleShmaNyanubale pUrvam hitaM pittAnuge param॥९३॥

The patient of *vata gulma* associated with *kapha* dominance, then should take castor oil with supernatant of *varuni* wine and if *pitta* is associated then take castor oil with milk [92-93]

Lashuna-kshiram

साधयेच्छुद्धशुष्कस्य लशुनस्य चतुष्पलम्।
 क्षीरोदकेऽष्टगुणिते क्षीरशेषं च ना पिबेत्॥९४॥
 वातगुल्ममुदावर्तं गृधर्सीं विषमज्वरम्।
 हृद्रोगं विद्रधिं शोथं साधयत्याशु तत्पयः॥९५॥
 इति लशुनक्षीरम्।
 sādhayēccchuddhaśuṣkasya laśunasya catuṣpalam|
 kṣīrōdakē'ṣṭaguṇitē [10] kṣīraśēṣam ca nā pibēt||९४||
 vātagulmamudāvartam gr̥dhrasīm viṣamajvaram|

hṛdrōgam vidradhiṁ śōtham sādhayatyāśu tatpayah॥९५॥
 iti laśunakṣīram |
 sAdhayecchuddhashuShkasya lašunasya catuShpalam|
 kShIrodake~aShTaguNite [10] kShIrasheShaM ca nA pibet||९४||
 vAtagulmamudAvartaM gRudhrasIM viShamajvaram|
 hRudrogaM vidradhiM shothaM sAdhayatyAshu tatpayaH||९५||
 iti lašunakShIram

Take 160 gm of dried and peeled garlic, add to it 640 ml of milk and 640 ml of water and boil on slow fire till only milk remains. It is known as *lashuna kshiram* and its oral

administration provides quick relief in *vata gulma*, *udavarta*, sciatica, irregular fever, heart disease, abscess and inflammation [94-95]

Taila panchakam

तैलं प्रसन्ना गोमूत्रमारनालं यवाग्रजम्।
गुल्मं जठरमानाहं पीतमेकत्र साधयेत्॥९६॥
इति तैलपञ्चकम्।

tailam̄ prasannā gōmūtramāranālam̄ yavāgrajam|
gulmar̄ jaṭharamānāhaṁ pītamēkatra sādhayēt||96||
iti tailapañcakam |
tailaM prasannA gomUtramAraNaM yavArajam|
gulmaM jaTharamAnAhaM pltamekatra sAdhayet||96||
iti tailapa~jcakam

The mixture of castor oil, *prasanna* wine, cow's urine, *aranala* (sour *kanji*) and *yavakshara* is known as *tailapanchakam*. Its oral administration cures *gulma*, gastric disorders and distension of abdomen [96]

shilajatu-prayoga

पञ्चमूलीकषायेण सक्षारेण शिलाजतु।
पिबेत्स्य प्रयोगेण वातगुल्मात् प्रमुच्यते॥९७॥
इति शिलाजतुप्रयोगः।
pañcamūlīkaśāyēṇa sakṣārēṇa śilājatu|
pibēttasya prayōgēṇa vātagulmāt pramucyatē||97||
iti śilājatuprayōgah |
pa~jcamUllkaShAyeNa sakShAreNa [11] shilAjatu|
pibettasya prayogeNa vAtagulmAt pramuciate||97||
iti shilAjatuprayogaH

Taking of *shilajatu* with *kshara* and decoction of *panchamula* cures *vata gulma*. Thus administration of *shilajatu* is described [97]

Vatyam or barley preparation

वाट्यं पिप्पलीयूषेण मूलकानां रसेन वा।

भुक्त्वा स्निग्धमुदावर्तीद्वातगुल्माद्विमुच्यते॥९८॥
 vātyam pippalīyūṣēṇa mūlakānāṁ rasēna vāḥ
 bhuktvā snigdhamudāvartādvātagulmādvimucyatē॥९८॥
 vATyaM pippallyUSheNa mUlakAnAM rasena vA|
 bhuktvA snigdhamudAvartAdvAtagulmAdvimucyate॥९८॥

Taking of barley meal mixed with unctuous substances along with soup of long pepper or juice of radish, provides relief in *vata gulma* and *udavarta* [98]

Swedana

शूलानाहविबन्धार्त स्वेदयेद्वातगुल्मिनम्।
 स्वेदैः स्वेदविधावुक्तैर्नाडीप्रस्तरसङ्करैः॥९९॥
 śūlānāhavibandhārtāṁ svēdayēdvātagulminam|
 svēdaiḥ svēdavidhāvuktairnāḍīprastarasāṅkaraiḥ॥९९॥
 shUIAnAhavibandhArtaM svedayedvAtagulminam|
 svedaiH svedavidhAvuktairnADIpriastara~gkaraiH॥९९॥

If the patient of *vata gulma* is also having the complaints of distension of abdomen and constipation then *swedana* therapy should be given in the form of *nadi* (cattle sudation), *prastara* (stone slab sudation) and *sankara* (mix sudation) *sweda* as described in *Swedadhyaya* [99]

Basti karma

बस्तिकर्म परं विद्यादगुल्मधनं तद्धि मारुतम्।
 स्वे स्थाने प्रथमं जित्वा सद्यो गुल्ममपोहति॥१००॥
 तस्मादभीक्षणशो गुल्मा निरूहैः सानुवासनैः।
 प्रयुज्यमानैः शाम्यन्ति वातपितकफात्मकाः॥१०१॥
 गुल्मधना विविधा दिष्टाः सिद्धाः सिद्धिषु बस्तयः।
 bastikarma parama vidyādgulmaghnāṁ taddhi mārutam|
 svē sthānē prathamaṁ jitvā sadyō gulmamapōhati॥१००॥
 tasmādabhīkṣṇaśō gulmā nirūhaiḥ sānuvāsanaiḥ|
 prayujyamānaiḥ śāmyanti vātapittakaphātmakāḥ॥१०१॥
 gulmaghnā vividhā diṣṭāḥ siddhāḥ siddhiṣu bastayah|

bastikarma paraM vidyAdgulmagnam taddhi mArutam|
 sve sthAne prathamaM jitvA sadyo gulmamapohati||100||
 tasmAdabhIkShNasho gulmA nirUhaiH sAnuvAsanaiH|
 prayujyamAnaiH shAmyanti vAtapittakaphAtmakAH||101||
 gulmaghnA vividhA diShTAH siddhAH siddhiShu bastayaH|

Basti Karma is the best treatment of *gulma* because it first conquers *vata* at its natural site and then cures *gulma* quickly. Therefore *niruha* and *anuvasana basti* should be administered repeatedly for cure of *vata*, *pitta* and *kapha gulma*. Various types of *basti* for the cure of *gulma* shall be described in *Basti Siddhi* [100-101]

Medicated oils

गुल्मधनानि च तैलानि वक्ष्यन्ते वातरोगिके॥१०२॥
 तानि मारुतजे गुल्मे पानाभ्यङ्गानुवासनैः।
 प्रयुक्तान्याशु सिद्ध्यन्ति तैलं हयनिलजित्परम् [१२] ||१०३॥
 gulmaghnāni ca tailāni vakṣyantē vātarōgikē||102||
 tāni mārutajē gulmē pānābhyaṅgānūvāsanaiḥ।
 prayuktānyāśu sidhyanti tailam hyanilajitparam [12] ||103||
 gulmaghnAni ca tailAni vakShyante vAtarogike||102||
 tAni mArutaje gulme pAnAbhya~ggAnuvAsanaiH|
 prayuktAnyAshu sidhyanti tailaM hyanilajitparam [12] ||103||

The various types of medicated oil useful for *gulma* will be described in *Vatavyadhi Chikitsa*. The medicated oils are used for oral administration, massage and *anuvasana basti*. As oil is best therapy for *vata* therefore it cures *vata gulma* quickly [102-103]

नीलिनीचूर्णसंयुक्तं पूर्वोक्तं घृतमेव।
 समलाय प्रदातव्यं शोधनं वातगुल्मिने॥१०४॥
 nīlinīcūrṇasamyuktam pūrvōktam ghṛtamēva|
 samalāya pradātavyam śodhanaṁ vātagulminē||104||
 nllinlcUrNasaMyuktaM pUrvoktaM ghRutameva|
 samalAya pradAtavyaM shodhanaM vAtagulmine||104||

Accumulated feces of the patient of *vata gulma* should be eliminated by giving earlier mentioned *ghrita* mixed with powder *nilini*.[104]

Nilinyadyam ghritam

नीलिनीत्रिवृतादन्तीपथ्याकम्पिल्लकैः सह|
 शोधनार्थं घृतं देयं सबिडक्षारनागरम्||१०५||
 nīlinītrivṛtādantīpathyākampillakaiḥ sahaḥ
 śodhanārthaṁ ghṛtam dēyam sabidakṣāraṇāgaram||105||
 nllinltrivRutAdantlpathyAkampillakaiH sahaḥ
 shodhanArthaM ghRutaM deyaM sabiDakShAraNaGaram||105||

The ghee prepared with *nilini*, *trivrita*, *danti*, *haritaki* and *kampillaka* along with bid-salt and *kshara* should be given for *shodhana* [105]

Nilinyadyam ghritam

नीलिनीं त्रिफलां रास्नां बलां कटुकरोहिणीम्।
 पचेद्विडङ्गं व्याघ्रीं च पलिकानि जलाढके॥१०६॥
 तेन पादावशेषेण घृतप्रस्थं विपाचयेत्।
 दृष्टनः प्रस्थेन संयोज्य सुधाक्षीरपलेन च॥१०७॥
 ततो घृतपलं दद्याद्यवागूमण्डमिश्रितम्।
 जीर्णे सम्यग्निविरक्तं च भोजयेद्रसभोजनम्॥१०८॥
 गुल्मकुष्ठोदरव्यड्गशोफपाण्डवामयज्वरान्।
 शिवत्रं प्लीहानमुन्मादं घृतमेतद्व्यपोहति॥१०९॥
 इति नीलिन्याद्यं घृतम्
 nīlinīṁ triphalāṁ rāsnāṁ balāṁ kaṭukarōhiṇīṁ|
 pacēdvīḍaṅgam vyāghrīṁ ca palikāni jalāḍhakē॥106॥
 tēna pādāvaśēṣēṇa ghṛtaprasthāṁ vipācayēṭ|
 dadhnāḥ prasthēna samyōjya sudhākṣītrapalēna ca॥107॥
 tatō ghṛtapalaṁ dadyādyavāgūmaṇḍamisritam|
 jīrṇē samyagviriktam ca bhōjayēdrasabhōjanam॥108॥
 gulmakuṣṭhōdaravyaṅgaśōphapāṇḍvāmaya jvarān|
 śvitram plīhānamunmādaṁ ghṛtamētadvyapōhati॥109॥
 iti nīlinyādyam ghṛtam

nllinIM triphalAM rAsnAM balAM kaTukarohiNIm|
 pacedviDa~ggaM vyAghrIM ca palikAni jalADhake||106||
 tena pAdAvasheSheNa ghRutaprasthaM vipAcayet|
 dadhnaH prasthena saMyoja sudhAkShIrapalena ca||107||
 tato ghRutapalaM dadyAdyavAgUmaNDamishritam|
 jIrNe samyagviriktaM ca bhojayedrasabhojanam||108||
 gulmakuShThodaravya~ggashophapANDvAmayajvarAn|
 shvitraM pllhAnamunmAdaM ghRutametadvayapohati||109||
 iti nllinyAdyaM ghRutam

Take 50 gm each of *nili*, *triphal*a, *rasna*, *bala*, *katuki*, *vidanga* and *kantakari* and add to it 2.5 litres of water and prepare the decoction by reducing it to one-fourth. Add to it 640 ml of ghee, 640 ml of curd and 50 ml of latex of *snui* and prepare ghee as per method of *sneha-paka*. Its 40 ml mixed with *manda* (liquid obtained by filtering the boiled rice) should be given for *virechana*. When the patient is well purged and the drug is digested then meat soup is given in diet.

This *ghrita* cures *gulma*, *kushtha*, *udara roga*, *vyanga* (freckles), swellings, anemia, fever, leukoderma, splenomegaly and psychic disorders (*unmada*). Thus *niliyadi ghritam* is described [106-109]

Pathya in vata gulma

कुक्कुटाश्च मयूराश्च तित्तिरिक्रौञ्चवर्तकाः।
 शालयो मदिरा सर्पिर्वातगुल्मभिषग्जितम्॥११०॥
 हितमुष्णं द्रवं स्निग्धं भोजनं वातगुल्मनाम्।
 समण्डवारुणीपानं पकवं वा धान्यकैर्जलम्॥१११॥
 kukkuṭāśca mayūrāśca tittirikrauñcavartakāḥ।
 śālayō madirā sarpirvātagulmabhiṣagjitatam||110||
 hitamuṣṇāṁ dravāṁ snigdham bhōjanāṁ vātagulminām|
 samandavāruṇīpānāṁ pakvāṁ vā dhānyakairjalām||111||
 kukkuṭAshca mayUrAshca tittirikrau~jcavartakAH|
 shAlayo madirA sarpirvAtagulmabhiShagjitatam||110||
 hitamuShNaM dravaM snigdhaM bhojanaM vAtagulminAm|

samaNDavAruNIpAnaM pakvaM vA dhAnyakairjalam||111||

Hot, liquid and unctuous diet is beneficial for the patient of *vata gulma*. Red rice, wine and ghee; meats of chicken, peacock, partridge (*tittara*), *krauncha* (demoiselle) and quail (*vartaka*) are beneficial for the patient of *vata gulma*.

Similarly a potion of *varuni* wine with *manda* (supernatant fluid of boiled rice) or water boiled with coriander is beneficial [110-111]

Protection of *agni*

मन्देऽग्नौ वर्धते गुल्मो दीप्ते चाग्नौ प्रशाम्यति।
तस्मान्ना नातिसौहित्यं कुर्यान्नातिविलङ्घनम्॥११२॥

mandē'gnau vardhatē gulmō dīptē cāgnau praśāmyati|
tasmānnā nātisauhityam kuryānnātivilaṅghanam||112||
mande~agnau vardhate gulmo dlpte cAgnau prashAmyati|
tasmAnnA nAtisauhityaM kuryAnnAtivila~gghanam||112||

With decrease in digestive-power (*agni*) the *gulma* is aggravated, while on augmentation of the digestion (*agni*) the *gulma* is pacified. Therefore, to the patient of *gulma* neither excessive nutritional food nor excessive fasting or light food/treatment should be prescribed [112]

Oleation therapy

सर्वत्र गुल्मे प्रथमं स्नेहस्वेदोपपादिते।
या क्रिया क्रियते सिद्धिं सा याति न विरुक्षिते॥११३॥

sarvatra gulmē prathamam snēhasvēdōpapāditē|
yā kriyā kriyatē siddhim sā yāti na virūkṣitē||113||
sarvatra gulme prathamaM snehasvedopapAdite|
yA kriyA kriyate siddhiM sA yAti na virUkShite||113||

In all types of *gulma*, only that successive treatment is fruitful which is given after subjecting first the patient to *snehana* and then *swedana*, but it never success if given after un-unctuous (*ruksha*) treatment [113]

Management of *pitta gulma*

भिषगात्ययिकं बुद्ध्वा पित्तगुल्ममुपाचरेत्।
वैरेचनिकसिद्धेन सर्पिषा तिक्तकेन वा॥११४॥

bhiṣagātyayikāṁ buddhvā pittagulmamupācarēṭ|
 vairēcanikasiddhēna sarpiṣā tiktakēna vā||114||
bhiShagAtyayikaM buddhvA pittagulmamupAcaret|
 vairecanikasiddhena sarpiShA tiktakena [14] vA||114||

Physician while dealing with pitta *gulma* should know that it requires immediate treatment (*atyayika*). *Pitta gulma* patient should be given ghee prepared with purgative and bitter drugs [114]

Rohinyadya ghritam

रोहिणीकटुकानिम्बमधुकत्रिफलात्वचः।
 कर्षशास्त्रायमाणा च पटोलत्रिवृतोः पले॥११५॥
 द्वे पले च मसूराणां साध्यमष्टगुणेऽम्भसि।
 शृताच्छेषं घृतसमं सर्पिषश्च चतुष्पलम्॥११६॥
 पिबेत् सम्मूच्छितं तेन गुल्मः शाम्यति पैत्तिकः।
 ज्वरस्तृष्णा च शूलं च ऋमो मूर्च्छाऽरुचिस्तथा॥११७॥
 इति रोहिण्यादयं घृतम्
 rōhiṇīkaṭukānimbamadhukatriphalātvacah|
 karṣāṁśāstrāyamāṇā ca paṭolatrvṛtōḥ palē||115||
 dvē palē ca masūrāṇāṁ sādhyamaṣṭaguṇē'mbhasi|
 śṛtācchēṣam gṛitasamam̄ sarpiṣaśca catuṣpalam||116||
 pibēt sammūrcchitarāṁ tēna gulmah̄ śāmyati paittikah|
 jvaraṣṭṛṣṇā ca śūlam̄ ca bhramō mūrcchā'ruciṣtathā||117||
 iti rōhiṇyādyarāṁ ghṛtam
 rohiNIkaTukAnimbamadhukatriphalAtvacaH|
 karShAMshAstrAyamANA ca paTolatrivRutoH pale||115||
 dve pale ca masUrANAM sAdhyamaShTaguNe~ambhasi|
 shRutAccheShaM ghRutasamaM sarpiShashca catuShpalam||116||
 pibet sammUrcchitaM tena gulmaH shAmyati paittikaH|
 jvarastRuShNA ca shUlaM ca bhramo mUrcchA~arucistathA||117||

iti rohiNyAdyaM ghRutam

Take 10 gm each of *katuka*, *neem*, liquorices, *triphala* and *trayamana*; 40 gm each of *patola* and *trivrita*; 80 gm of lentil (*masura*) and add to it 8 times water; boil on low fire till it reduces to 160 ml. Add to it equal quantity of ghee i.e. 160 ml and administer it to the patient orally. It alleviates *pitta gulma*, fever, thirst, abdominal pain, giddiness, fainting and anorexia. Thus *rohinyadi ghrita* is described [117]

Trayamaṇadi ghritam

जले दशगुणे साध्यं त्रायमाणाचतुष्पलम्।
पञ्चभागस्थितं पूतं कल्कैः संयोज्य कार्षिकैः॥११८॥
रोहिणी कटुका मुस्ता त्रायमाणा दुरालभा।
कल्कैस्तामलकीवीराजीवन्तीचन्दनोत्पलैः॥११९॥
रसस्यामलकानां च क्षीरस्य च घृतस्य च।
पलानि पृथगष्टाष्टौ दत्त्वा सम्यग्विपाचयेत्॥१२०॥
पित्तरक्तभवं गुल्मं वीसर्पं पैतिकं ज्वरम्।
हृद्रोगं कामलां कुष्ठं हन्यादेतद्घृतोत्तमम्॥१२१॥
इति त्रायमाणाद्यं घृतम्

jalē daśaguṇē sādhyam trāyamāṇācatuṣpalam|
pañcabhāgasthitam pūtam kalkaiḥ saṃyojya kārṣikaiḥ||118||
rōhiṇī kaṭukā mustā trāyamāṇā durālabhā|
kalkaistāmalakīvīrājīvantīcandanōtpalaiḥ||119||
rasasyāmalakānām ca kṣīrasya ca ghṛtasya ca|
palāni pṛthagṣṭāṣṭau dattvā samyagvipācayēt||120||
pittaraktabhavaṁ gulmarṁ vīsarparṁ paittikam jvaram|
hṛdrōgam kāmalām kuṣṭham hanyādētadghṛtöttamam||121||
iti trāyamāṇādyam ghṛtam
jale dashaguNe sAdhyaM trAyamANAcatuShpalam|
pa~jcabhAgasthitaM pUtaM kalkaiH saMyojya kArShikaiH||118||
rohiNI kaTukA mustA trAyamANA durAlabhA|
kalkaistAmalakIvIrlAjvantlcandanotpalaiH||119||

rasasyAmalakAnAM ca kShIrasya ca ghRutasya ca|
 paLA尼 pRuthagaShTAShTau dattvA samyagvipAcayet||120||
 pittaraktabhavaM gulmaM vlsarpaM paTTikaM jvaraml
 hRudrogaM kAmalAM kuShThaM hanyAdetadghRutottamam||121||
 iti trAyamANAdyaM ghRutam

Make decoction by adding 10 times of water to 160 gm of *trayamana* and reducing it to one fifth. To this decoction add 10 gm paste of *katuka*, *mustaka*, *trayamana* and *duralabha*; 10 gm paste of *tamalaki*, *veera*, *jivanti*, *chandana* and lotus; add to it 320 ml juice of *amalaki*, milk and ghee. From all these, prepare ghrita as per method of *sneha pāka*. It is best *ghrita* to cure *pitta* and *rakta-gulma*, *visarpa*, *pitta jwara*, heart disease, jaundice and *kushtha*. Thus *trayamanadi ghritam* is described [118-121]

Amalakadi ghritam

रसेनामलकेक्षूणां घृतपादं विपाचयेत्।
 पश्यापदं पिबेत्सर्पिस्तत्सिद्धं पित्तगुल्मनुत्॥१२२॥
 इत्यामलकाद्यं घृतम्।
 rasēnāmalakēkṣūṇāṁ ghṛtapādaṁ vipācayēt|
 pathyāpadāraṁ pibētsarpistatsiddhaṁ pittagulmanut||122||
 ityāmalakādyāraṁ ghṛtam
 rasenAmalakekShUNAM ghRutapAdaM [15] vipAcayet|
 pathyApadaM pibetsarpistatsiddhaM pittagulmanut||122||
 ityAmalakAdyaM ghRutam

Prepare *ghrita* with four parts of juice of *amalaki* and sugarcane juice, one-fourth part of paste of *haritaki* and one part of ghee. It is to be taken orally to cure *pitta gulma*. Thus *amalakadyam ghritam* is described [122]

Drakshadi ghritam

द्राक्षां मधूकं खर्जूरं विदारीं सशतावरीम्।
 पर्शकाणि त्रिफलां साधयेत्पलसम्मितम्॥१२३॥
 जलाढके पादशेषे रसमामलकस्य च।
 घृतमिक्षुरसं क्षीरमभ्याकल्कपादिकम्॥१२४॥
 साधयेत्तद्घृतं सिद्धं शर्कराक्षौद्रपादिकम्।

प्रयोगात् पित्तगुल्मधनं सर्वपित्तविकारनुत्॥१२५॥

इति द्राक्षाद्यं घृतम्

drāksāṁ madhūkam kharjūram vidārīṁ saśatāvaraṁ|

parūṣakāṇi triphalāṁ sādhayētpalasammitam||123||

jalāḍhakē pādaśēshē rasamāmalakasya ca|

ghṛtamikṣurasarāṁ kṣīramabhayākalkapādikam||124||

sādhayēttadghṛtam siddham śarkarākṣaudrapādikam|

prayōgāt pittagulmaghnāṁ sarvapittavikāranut||125||

iti drākṣādyam ghṛtam

drAkShAM madhUkaM kharjUraM vidArIM sashatAvarIm|

parUShakANi triphalAM sAdhayetpalasammitam||123||

jalADhake pAdasheShe rasamAmalakasya ca|

ghRutamikShurasaM kShIramabhayAkalkapAdikam||124||

sAdhayettadghRutaM siddhaM sharkarAkShaudrapAdikam|

prayogAt pittagulmaghnāM sarvapittavikAranut||125||

iti drAkShAdyaM ghRutam

Take 40 gm each of raisin, *madhuka* (mahva), date, *vidari*, *shatavari*, *parushaka* and *triphala* and add to it 2560 ml of water and boil till reduced to one-fourth. To this decoction add 640 gm each of ghee, sugar-cane juice, juice of *amalaki* and milk and its one fourth part of paste of *haritaki*; and prepare *ghrita* as per method of *sneha-paka*. Take this ghee by adding one fourth quantities of sugar and honey. It cures *pitta-gulma* and all types of pitta disorders. Thus *drakshdyam ghritam* is described [123-125]

Vasaghṛitam

वृषं समूलमापोथ्य पचेदष्टगुणे जले।

शेषेऽष्टभागे तस्यैव पुष्पकल्कं प्रदापयेत्॥१२६॥

तेन सिद्धं घृतं शीतं सक्षौद्रं पित्तगुल्मनुत्।

रक्तपित्तज्वरश्वासकासहद्रोगनाशनम्॥१२७॥

इति वासाघृतम्

vṛṣāṁ samūlamāpōthya pacēdaṣṭaguṇē jalē|

śesē'sṭabhāgē tasyaiva puspakalkam pradāpayēt||126||
 tēna siddham gṛtam śītam sakṣaudram pittagulmanut|
 raktapittajvaraśvāsakāsaḥrdrōganāśanam||127||
 iti vāsāghṛtam
 vRuShaM samUlamApothya pacedaShTaguNe jale|
 sheShe~aShTabhAge tasyaiva puShpakalkaM pradApayet||126|
 tena siddhaM ghRutaM shItaM sakShaudraM pittagulmanut|
 raktapittajvarashvAsakAsahRudrogaNAshanam||127||
 iti vAsAghRutam

Take whole plant of *vasa* including its root and make decoction by adding to it eight times water and reducing to one-eighth. Add to the decoction, paste of its flower and ghee and prepare the *ghrita*. It is to be taken with honey which cures *pitta gulma*, piles, fever, dyspnea, cough and heart disease. Thus *vasaghritam* is described [126-127]

द्विपलं त्रायमाणाया जलद्विप्रस्थसाधितम्|
 अष्टभागस्थितं पूतं कोण्णं क्षीरसमं पिबेत्॥१२८॥
 पिबेदुपरि तस्योष्णं क्षीरमेव यथाबलम्|
 तेन निर्हतदोषस्य गुल्मः शाम्यति पैतिकः॥१२९॥
 dvipalaṁ trāyamāṇāyā jaladviprasthasādhitam|
 aṣṭabhāgasthitam pūtaṁ kōṣṇam kṣīrasamam pibēt||128||
 pibēdupari tasyoṣṇam kṣīramēva yathābalam|
 tēna nirhṛtadōṣasya gulmaḥ śāmyati paittikah||129||
 dvipalaM trAyamANAyA jaladviprasthasAdhitam|
 aShTabhAgasthitaM pUtaM koShNaM kShIrasamaM pibet||128||
 pibedupari tasyoShNaM kShIrameva yathAbalam|
 tena nirhRutadoShasya gulmaH shAmyati paittikaH||129||

Take 80 gm of *trayamana* and make decoction by adding 1.280 litre of water and reducing to one-eighth and filter it. Take it by adding equal quantity of warm milk and thereafter take as much milk as one can digest. This preparation eliminates the toxic substances and thus cures *pitta gulma* [128-129]

द्राक्षाभ्यारसं गुल्मे पैतिके सगुडं पिबेत्|

लिह्यात्कम्पिलकं वाऽपि विरेकार्थं मधुद्रवम्॥१३०॥
drākṣābhayārasam̄ gulmē paittikē saguḍam̄ pibēt|
lihyātkampillakam̄ vā'pi virēkārtham̄ madhudravam||130||
drAkShAbhayArasaM gulme paittike saguDaM pibet|
lihyAtkampillakaM vA~api virekArthaM madhudravam||130||

In patient of *pitta gulma* the *virechana* can be performed by administration of decoction of raisins and *haritaki* with jaggery or by licking powder of *kampillaka* with honey [130]

Massage

दाहप्रशमनोऽभ्यङ्गः सर्पिषा पित्तगुल्मिनाम्|
चन्दनादयेन तैलेन तैलेन मधुकस्य वा॥१३१॥
dāhapraśamanō'bhyaṅgaḥ sarpiṣā pittagulminām|
candanādyēna tailēna tailēna madhukasya vā||131||
dAhaprashamano_{abhy}ggaH sarpiShA pittagulminAm|
candanAdyena tailena tailena madhukasya vA||131||

For relieving burning sensation in the patient of *gulma*, massage with ghee or *chandanadi taila* or medicated oil prepared with *madhuka* should be done [131]

Kshira-basti for *pitta gulma*

ये च पित्तज्वरहरा: सतिक्ता: क्षीरबस्त्यः|
हितास्ते पित्तगुल्मिभ्यो वक्ष्यन्ते ये च सिद्धिषु॥१३२॥
yē ca pittajvaraharāḥ satiktāḥ kṣīrabastayaḥ|
hitāstē pittagulmibhyō vakṣyantē yē ca siddhiṣu||132||
ye ca pittajvaraharAH [16] satiktAH kShIrbastayaH|
hitAste pittagulmibhyo vakShyante ye ca siddhiShu||132||

Kshira-basti comprising of bitter drugs described for *pitta* fever as well as which will be described in Siddhi Sthana are also beneficial for curing *pitta gulma* [132]

Pathya for *pitta gulma*

शालयो जाङ्गलं मांसं गव्याजे पयसी घृतम्|
खर्जूरामलकं द्राक्षां दाढिमं सपरूषकम्॥१३३॥

आहारार्थं प्रयोक्तव्यं पानार्थं सलिलं शृतम्।
 बलाविदारीगन्धाद्यैः पित्तगुल्मचिकित्सितम्॥१३४॥
 śālayō jāṅgalaṁ māṁsaṁ gavyājē payasī ghṛtam|
 kharjūrāmalakaṁ drākṣāṁ dāḍimāṁ saparūṣakam॥133॥
 āhārārthaṁ prayōktavyaṁ pānārthaṁ salilaṁ śṛtam|
 balāvidārīgandhādyaiḥ pittagulmacikitsitam॥134॥
 shAlayo jA~ggalaM mAmsaM gavyAje payasI ghRutam|
 kharjUrAmalakaM drAkShAM dADimaM saparUShakam॥133॥
 AhArArthaM prayoktavyaM pAnArthaM salilaM shRutam|
 balAvidArlgandhAdyaiH pittagulmacikitsitam॥134॥

Red rice, meat of wild animals, milk and ghee of cow and goat, dates, grapes, pomegranates, *amalaki* and *parushaka* are wholesome diet articles for eating and water boiled with *bala-vidarigandhadi* drugs for drinking for the patient of *pitta gulma* [133-134]

Management of *ama* associated *gulma*

आमान्वये पित्तगुल्मे सामे वा कफवातिके।
 यवागूभिः खडैर्यूषैः सन्धुक्ष्योऽग्निर्विलङ्घिते॥१३५॥
 āmānvayē pittagulmē sāmē vā kaphavātikē|
 yavāgūbhīḥ khadairyūṣaiḥ sandhukṣyō'gnirvilaṅghitē॥135॥
 AmAnvaye pittagulme sAme vA kaphavAtike|
 yavAgUbhiH khaDairyUShaiH sandhukShyo_{agnirvila}gghite॥135॥

Pitta gulma or *kapha-vata gulma* if associated with *ama*, first it should be subjected to *langhana* and then given cooked rice (*yavagu*) and vegetable or pulse soup to enhance the digestion [135]

Importance of *agni*

शमप्रकोपौ दोषाणां सर्वेषामग्निसंश्रितौ।
 तस्मादग्निं सदा रक्षेन्निदानानि च वर्जयेत्॥१३६॥
 śamaprakōpau dōṣāṇāṁ sarvēṣāmagnisamśritau|
 tasmādagnim sadā rakṣennidānāni ca varjayēt॥136॥
 shamaprakopau doShANAM sarveShAmagnisaMshritau|

tasmAdagniM sadA rakShennidAnAni ca varjayet||136||

Equilibrium or provocation of all the *dosha* depend upon the condition of *agni* (digestion and metabolism), hence one should always take its care and avoid such causes which disturb it [136]

Treatment of *kaphaja gulma*

Vamana in kaphaja gulma

वमनं वमनार्हाय प्रदद्यात् कफगुल्मिने।

vamanam vamanārhāya pradadyāt kaphagulminē।

vamanaM vamanArhAya pradadyAt kaphagulmine।

Vamana karma should be done in *kapha gulma* provided the patient is fit for it [136½]

Surgical treatment of kapha gulma

स्निग्धस्विन्नशरीराय गुल्मे शैथिल्यमागते॥१३७॥

परिवेष्ट्य प्रदीप्तांस्तु बल्वजानथवा कुशान्।

भिषक्कुम्भे समावाप्य गुल्मं घटमुखे न्यसेत्॥१३८॥

सङ्गृहीतो यदा गुल्मस्तदा घटमथोदधरेत्।

वस्त्रान्तरं ततः कृत्वा भिन्द्यादगुल्मं प्रमाणवित्॥१३९॥

विमार्गाजपदादर्शयथालाभं प्रपीडयेत्।

मृद्नीयादगुल्ममेवैकं न त्वन्त्रहृदयं स्पृशेत्॥१४०॥

snigdhasvinnaśarīrāya gulmē śaithilyamāgatē॥137॥

parivēṣṭya pradīptāṁstu balvajānathavā kuśān।

bhiṣakkumbhē samāvāpya gulmar̥ ghaṭamukhē nyasēt॥138॥

saṅgr̥hitō yadā gulmastadā ghaṭamathōddharēt।

vastrāntaram tataḥ kṛtvā bhindyādgulmar̥ pramāṇavit॥139॥

vimārgājapadādarśairyathālābhām prapīḍayēt।

mṛdnīyādgulmamēvaikam na tvantrahṛdayam sprśēt॥140॥

snigdhasvinnasharīrāya gulme shaithilyamAgate॥137॥

pariveShTyā pradīptAMstu balvajAnathavA kushAn।

bhiShakkumbhe samAvApya gulmaM ghaTamukhe nyaset॥138॥

sa~ggRuhito [17] yadA gulmastadA ghaTamathoddharet|
vastrAntaraM tataH kRutvA bhindyAdgulmaM [18] pramANavit||139||
vimArgAjapadAdarshairyathAlAbhaM prapIDayet|
mRudnlyAdgulmamevaikaM na tvantrahRudayaM [19] spRushet||140||

First make the *kapha gulma* loose (*shaithilya*) by *snehana* and *swedana* therapies then following operation should be performed on the patient:

Cover the brim of *gulma* with a piece of cloth and on the inner portion of the brim put an earthen lid containing ignited *balvaja* or small sacrificial grass (*kusha*). Then place the mouth of an inverted empty pot on it in such a way so that it covers and fit on the brim. Due to negative pressure produced inside the pot by the fire, the mouth of the pot will strongly adhere to the brim and the lump will be pulled into the pot. Then remove the pot and tightly tie the bottom of this bulged portion of the *gulma* and then puncture it. Thereafter, with the help of any available instruments such as *vimarga*, *ajapada* and *adarsha*, only the *gulma* part is squeezed or compressed, without touching the intestines and heart. This operation should be done only by the expert surgeon in the technique [137-140]

Post-operative measures

तिलैरण्डातसीबीजसर्षपैः परिलिप्य च|
श्लेष्मगुल्ममयःपात्रैः सुखोष्णैः स्वेदयेद्भिषक्॥१४१॥
tilairanḍātasībijasarṣapaiḥ parilipy ca|
ślēṣmagulmamayahpātraiḥ sukhōṣṇaiḥ svēdayēdbhiṣak||141||
tilairaNDAtaslbljasarShapaiH parilipy ca|
shleShmagulmamayaHpAtraiH sukhoShNaiH svedayedbhiShak||141||

After the above operation apply the paste made from sesame, castor seed, linseeds and mustard seeds on the *gulma* and do its sudation through bearable hot iron pot [141]

Dashamuli ghrita

सव्योषक्षारलवणं दशमूलीशृतं घृतम्|
कफगुल्मं जयत्याशु सहिङ्गुबिडदाइमम्॥१४२॥
इति दशमूलीघृतम्|
savyoṣakṣāralavaṇam daśamūlīśṛtam ghṛtam|
kaphagulmarṇ jayatyāśu sahiṅgubidādādimam||142||
iti daśamūlīghṛtam |

savyoShakShAralavaNaM dashamUllshRutaM ghRutam|
 kaphagulmaM jayatyAshu sahi~ggubiDadADimam||142||
 iti dashamUllghRutam

Prepare a medicated ghee with decoction of *dashamula*, paste of *trikatu*, *yavakshara*, salt, asafoetida, bid-salt and pomegranate, and ghee. Its oral use quickly subsides *kapha gulma*. Thus *dashamuli-ghritam* is described. [142]

Bhallatakadi ghritam

भल्लातकानां द्विपलं पञ्चमूलं पलोन्मितम्।
 साध्यं विदारीगन्धादयमापोथ्य सलिलाढके॥१४३॥
 पादशेषे रसे तस्मिन् पिप्पलीं नागरं वचाम्।
 विडङ्गं सैन्धवं हिङ्गु यावशूकं बिडं शटीम्॥१४४॥
 चित्रकं मधुकं रास्नां पिष्टवा कर्षसमं भिषक्।
 प्रस्थं च पयसो दत्त्वा घृतप्रस्थं विपाचयेत्॥१४५॥
 एतद्भल्लातकघृतं कफगुल्महरं परम्।
 प्लीहपाण्डवामयश्वासग्रहणीरोगकासनुत्॥१४६॥
 इति भल्लातकाद्यं घृतम्
 bhallātakānāṁ dvipalaṁ pañcamūlaṁ palōnmitam|
 sādhyam̄ vidārīgandhādyamāpōthya salilāḍhakē||143||
 pādaśēṣē rasē tasmin pippalīṁ nāgaram̄ vacām|
 viḍāṅgarāṁ saindhavarāṁ hiṅgu yāvaśūkarāṁ biḍarāṁ śatīm||144||
 citrakāṁ madhukāṁ rāsnāṁ piṣṭvā karṣasamaṁ bhiṣak|
 prasthaṁ ca payasō dattvā ghṛtaprasthaṁ vipācayēt||145||
 ētadbhallātakaghṛtam̄ kaphagulmaharam̄ param|
 plīhapāṇḍvāmayaśvāsagrahaṇīrōgakāsanut||146||
 iti bhallātakādyam̄ ghṛtam
 bhallAtakAnAM dvipalaM pa~jcamUlaM palonmitam|
 sAdhyaM vidArlgandhAdyamApothya salilADhake||143||
 pAdasheShe rase tasmin pippalIM nAgaraM vacAm|

viDa~ggaM saindhavaM hi~ggu yAvashUkaM biDaM shaTIm||144||
 citrakaM madhukaM rAsnAM piShTvA karShasamaM bhiShak|
 prasthaM ca payaso dattvA ghRutaprasthaM vipAcayet||145||
 etadbhallAtakaghRutaM kaphagulmaharaM param|
 plIhapANDvAmayashvAsagrahaNIrogakAsanut||146||
 iti bhallAtakAdyaM ghRutam

Take coarse powder of 80 gm of *bhallataka*, 40 gm of *laghu panchamula* and 40 gm of *vidarigandhadi* and prepare a decoction by adding 2.5 liters of water and reducing to one-fourth. To this decoction add paste made of 10 gm each of long pepper, dry ginger, *vacha*, *vidanga*, rock and bid salts, asafoetida, *yavakshara*, *chitraka*, *shati*, liquorices and *rasna*; 640 ml each of milk and ghee and make *ghrita* as per method of *sneha paka*. Oral use of *bhallatakadyam ghritam* is best for providing cure to *kapha gulma*. It also provides relief in spleen disorders, anemia, asthma, assimilation disorders and cough. Thus *bhallatakadyam ghritam* is described [143-146]

Kshiraṣṭaṭpalaka ghritam

पिप्पलीपिप्पलीमूलचत्वयचित्रकनागरैः।
 पलिकैः सयवक्षारैर्धृतप्रस्थं विपाचयेत्॥१४७॥
 क्षीरप्रस्थं च तत् सर्पिहन्ति गुल्मं कफात्मकम्।
 ग्रहणीपाण्डुरोगधनं प्लीहकासज्वरापहम्॥१४८॥
 इति क्षीरषट्पलकं घृतम्
 pippalīpippalīmūlacavyacitrakanāgaraiḥ|
 palikaiḥ sayavakṣārairghṛtaprasthaṁ vipācayēt||147||
 kṣīraprasthaṁ ca tat sarpirhanti gulmaṁ kaphātmakam|
 grahanīpāṇḍurōgaghnaṁ plīhakāsajvarāpaham||148||
 iti kṣīraṣṭaṭpalakaṁ ghṛtam
 pippallpippallmUlacavyacitrakanAgaraiH|
 palikaiH sayavakShArairghRutaprasthaM vipAcayet||147||
 kShIraprasthaM ca tat sarpikhanti gulmaM kaphAtmakam|
 grahaNIpANDurogaghnaM plIhakAsajvarApaham||148||
 iti kShIraShaTpalakaM ghRutam

Make a paste of 40 gm each of fruits and roots of long pepper, *chavya* and *chitraka*, *yavakshara* and dried ginger and add to it 640 gm each of ghee and milk, and prepare a medicated ghee. This *ghrita* cures *kapha gulma*, *grahani* (chronic assimilation disorders), anemia, spleen disorders, cough and fever. Thus *kshirashatpalakam ghritam* is described [147-148]

Mishraka sneha

त्रिवृतां त्रिफलां दन्तीं दशमूलं पलोन्मितम्।
जले चतुर्गुणे पक्त्वा चतुर्भागस्थितं रसम्॥१४९॥
सर्पिरेण्डजं तैलं क्षीरं चैकत्र साधयेत्।
स सिद्धो मिश्रकस्नेहः सक्षोद्रः कफगुल्मनुत्॥१५०॥
कफवातविबन्धेषु कुष्ठप्लीहोदरेषु च।
प्रयोज्यो मिश्रकः स्नेहो योनिशूलेषु चाधिकम्॥१५१॥
इति मिश्रकः स्नेहः
trivṛtāṁ triphalāṁ dantīṁ daśamūlaṁ palōnmitam|
jalē caturguṇē paktvā caturbhāgasthitam rasam||149||
sarpirēraṇḍajam tailam kṣīram caikatra sādhayēt|
sa siddhō miśrakasnēhāḥ sakṣaudraḥ kaphagulmanut||150||
kaphavātavibandhēṣu kuṣṭhaplīhōdarēṣu ca|
prayōjyō miśrakah snēhō yoniśūlēṣucādhikam||151||
iti miśrakah snēhah
trivRutAM triphalaM dantiM dashamUlaM palonmitam|
jale caturguNe paktvA caturbhAgasthtaM rasam||149||
sarpireraNDajaM tailaM kShIraM caikatra sAdhayet|
sa siddho mishrakasnehaH sakShaudraH kaphagulmanut||150||
kaphavAtavibandheShu kuShThaplIhodareShu ca|
prayojo mishrakaH sneho yonishUleShu cAdhikam||151||
iti mishrakaH snehaH

Prepare a decoction of 40 gm each of *trivrita*, *triphalā*, *danti* and *dashamula* by adding four times of water and reducing to one-fourth. In this decoction add ghee, castor oil and milk and prepare medicated ghee. This *mishraka sneha* taken orally by adding honey

cures *kapha gulma*. It also provides relief in constipation due to *kapha* and *vata*, *kushtha* (chronic skin disorders), spleen disorders and *udara-roga* (generalized enlargement of abdomen) and especially useful in vaginal pain. Thus *mishraka sneha* is described [149-151]

Virechana in kapha gulma

यदुक्तं वातगुल्मधनं संसनं नीलिनीघृतम्।
द्विगुणं तद्विरेकार्थं प्रयोज्यं कफगुल्मिनाम्॥१५२॥
सुधाक्षीरद्रवे चूर्णं त्रिवृतायाः सुभावितम्।
कार्षिकं मधुसर्पिश्यां लीढ़वा साधु विरिच्यते॥१५३॥
yaduktam vātagulmaghnām sramsanām nīlinīghṛtam|
dviguṇam tadvirēkārtham prayōjyaṁ kaphagulminām||152||
sudhākṣīradravē cūrṇām trivṛtāyāḥ subhāvitam|
kārṣikām madhusarpibhyām līḍhvā sādhu viricyatē||153||
yaduktaM vAtagulmaghnaM sraMsanaM nllinIghRutam|
dviguNaM tadvirekArthaM prayojoYaM kaphagulminAm||152||
sudhAkShIradrave cUrNaM trivRutAyAH subhAvitam|
kArShikaM madhusarpibhyAM IIDhvA [20] sAdhu viricyate||153||

Nilini-ghrita already described as laxative for the cure of *vata gulma* should be used in double the dose for *virechana* in the patient of *kapha gulma*.

10 gm powder of *trivrita* well impregnated with latex of *snuhi* taken with ghee and honey may also be used to produce a good *virechana* [152-153]

Danti-haritaki

जलद्रोणे विपक्तव्या विंशतिः पञ्च चाभयाः।
दन्त्याः पलानि तावन्ति चित्रकस्य तथैव च॥१५४॥
अष्टभागावशेषं तु रसं पूतमधिक्षिपेत्।
दन्तीसमं गुडं पूतं क्षिपेतत्राभयाश्च ताः॥१५५॥
तैलार्धकुडवं चैव त्रिवृतायाश्चतुष्पलम्।
चूर्णितं पलमेकं तु पिप्पलीविश्वभेषजम्॥१५६॥
तत् साध्यं लेहवच्छीते तस्मिंस्तैलसमं मधु।

क्षिपेच्चूर्णपलं चैकं त्वगेलापत्रकेशरात्॥१५७॥
ततो लेहपलं लीढ़वा जग्धवा चैकां हरीतकीम्।
सुखं विरिच्यते स्निग्धो दोषप्रस्थमनामयम्॥१५८॥
गुल्मं शवयथुमर्शासि पाण्डुरोगमरोचकम्।
हृद्रोगं ग्रहणीदोषं कामलां विषमज्वरम्॥१५९॥
कुष्ठं प्लीहानमानाहमेषा हन्युपसेविता।
निरत्ययः क्रमश्चास्या द्रवो मांसरसौदनः॥१६०॥

इति दन्तीहरीतकी

jaladrōṇē vipaktavyā viṁśatiḥ pañca cābhayāḥ।
dantyāḥ palāni tāvanti citrakasya tathaiva ca॥154॥
aṣṭabhāgāvaśēśam tu rasam pūtamadhikṣipēt।
dantīsamam guḍam pūtam kṣipēttatrābhayāśca tāḥ॥155॥
tailārdhakuḍavam caiva trivṛtāyāścatuṣpalam।
cūrṇitam palamēkam [21] tu pippalīviśvabhbēṣajam॥156॥
tat sādhyam lēhavacchītē tasmiṁstailasamaṁ madhu।
kṣipēccūrnopalam caikam tvagēlāpatrakēśarāt॥157॥
tatō lēhapalam līḍhvā jagdhvā caikām harītakīm।
sukham viricyatē snigdhō dōṣaprasthamanāmayam॥158॥
gulmam śvayathumarśāṁsi pāṇḍurōgamarōcakam।

hṛdrōgam grahaṇīdōśam kāmalām viṣamajvaram॥159॥
kuṣṭham plīhānamānāhamēśā hanyupasēvitā।
niratyayah kramaścāsyā dravō māṁsarasaudanaḥ॥160॥
iti dantīharītakī

jaladroNe vipaktavyA viMshatiH pa~jca cAbhayAH|
dantyAH palAni tAvanti citrakasya tathaiva ca॥154॥
aShTabhAgAvasheShaM tu rasaM pUtamadhikShipet|
dantIsamaM guDaM pUtaM kShipettatrAbhayAshca tAH॥155॥
tailArdhakuDavaM caiva trivRutAyAshcatuShpalam|

cUrNitaM palamekaM [21] tu pippallvishvabheShajam||156||
 tat sAdhyaM lehavacchlte tasmiMstailasamaM madhu|
 kShipeccUrNapalaM caikaM tvagelApatrakesharAt||157||
 tato lehapalaM IIDhvA jagdhvA caikAM harItakIm|
 sukhaM viricyate snigdho doShaprasthamanAmayam||158||
 gulmaM shvayathumarshAMsi pANDurogamarocakam|
 hRudrogaM grahaNIdoShaM kAmalAM viShamajvaram||159||
 kuShThaM pllhAnamAnAhameShA hanyupasevitA|
 niratyayaH kramashcAsyA dravo mAMsarasaudanaH||160||
 iti dantIharItaki

Prepare a decoction of 25 *haritaki* and 50 gm each of *danti* and *chitraka* in 10 liters of water by reducing it to one-eighth. Add jaggery equal to quantity of *danti* to the decoction and filter again and add to it *haritaki*, 80 ml of sesame oil, 160 gm of *trivrita* powder and 40 gm each of long pepper and dry ginger and by heating made into constituency of the jam. On cooling add 80 gm of honey, 40 gm powder of cinnamon, cardamom, *tamalapatra* and *keshara*. Administer its 40 gm with one *haritaki* daily to a person who has already been prepared with *snehana* and *swedana* for a good *virechana*. It will remove 640 gm of morbid material (*dosha prastha*) without producing any side effect.

This decoction for *virechana* will cure *gulma*, swellings, piles, anemia, anorexia, heart disease, chronic assimilation disorders, jaundice, irregular fever, *kushtha*, spleen disorders and distension of abdomen. The therapy does not produce any complication. During this therapy liquid diet and rice with meat soup are given to eat. Thus *dantiharitaki* is described [154-160]

Basti in kapha gulma

सिद्धाः सिद्धिषु वक्ष्यन्ते निरुहाः कफगुल्मिनाम्|
 अरिष्टयोगः सिद्धाश्च ग्रहण्यर्शश्चिकित्सिते||१६१||
 siddhāḥ siddhiṣu vakṣyantē nirūhāḥ kaphagulminām|
 aristayōgāḥ siddhāśca grahanyarśāścikitsitē||161||
 siddhAH siddhiShu vakShyante nirUhAH kaphagulminAm|
 ariShTayogAH siddhAshca grahaNyashashcikitsite||161||

The most effective *niruha basti* for *kapha gulma* will be described in Siddhi Sthana and most effective medicated wines (*arishta*) will be described in the chapter on Grahani Chikitsa and Arsha Chikitsa [161]

Powders and pills

यच्चूर्णं गुटिका याश्च विहिता वातगुल्मिनाम्।
द्विविगुणक्षारहिङ्गवम्लवेतसास्ताः कफे हिताः॥१६२॥
yaccūrṇam guṭikā yāśca vihitā vātagulminām|
dviguṇakṣārahiṅgavamlavētasāstāḥ kaphē hitāḥ||162||
yaccUrNaM guTikA yAshca vihitA vAtagulminAm|
dviguNakShArahi~ggvamlavetasAstAH kaphe hitAH||162||

Powder and pills which are described for the treatment of *vata gulma* should also be used for *kapha gulma* but added with double the quantity of mixture of *kshara*, *asafoetida* and *amlavetasa* [162]

Kshara and *daha karma*

य एव ग्रहणीदोषे क्षारास्ते कफगुल्मिनाम्।
सिद्धा निरत्ययाः शस्ता दाहस्त्वन्ते प्रशस्यते॥१६३॥
ya ēva grahanīdōṣe kṣārāstē kaphagulminām|
siddhā niratyayāḥ śastā dāhastvantē praśasyatē||163||
ya eva grahaNIdoShe kShArAste kaphagulminAm|
siddhA niratyayAH shastA dAhastvante prashasyate||163||

Kshara preparations mentioned in Grahani Chikitsa are also beneficial for *kapha gulma* without any side effect. If above mentioned treatment does not cure *kapha gulma* then cauterization should be done as a last resort [163]

Pathya for *kapha gulma*

प्रपुराणानि धान्यानि जाङ्गला मृगपक्षिणः।
कौलत्थो मुट्ठग्यूषश्च पिप्पल्या नागरस्य च॥१६४॥
शुष्कमूलकयूषश्च बिल्वस्य वरुणस्य च।
चिरबिल्वाङ्कुराणां च यवान्याश्चित्रकस्य च॥१६५॥
prapurāṇāni dhānyāni jāṅgalā mṛgapakṣinah|
kaulatthō mudgayūṣaśca pippalyā nāgarasya ca||164||

śuṣkamūlakayūṣaśca bilvasya varuṇasya ca|
cirabilvāṅkurāṇāṁ ca yavānyāścitrakasya ca||165||
prapurANAni dhAnyAni jA~ggaIA mRugapakShiNaH|
kaulattho mudgayUShashca pippalyA nAgarasya ca||164||
shuShkamUlakayUShashca bilvasya varuNasya [22] ca|
cirabilvA~gkurANAM ca yavAnyAshcitrakasya ca||165||

More than one year old grains, meat of wild animals and birds, soup of horse-gram (*kulattha*) or green gram (*mudga*), long pepper, dry ginger, dry radish, *bilva*, *varuna*, sprouts of *chirabilva*, *yavani* and *chitraka* are beneficial diet articles for the patient of *kapha gulma* [165]

बीजपूरकहिङ्गवम्लवेतसक्षारदाडिमैः।
तक्रेण तैलसर्पिञ्चर्या व्यञ्जनान्युपकल्पयेत्॥१६६॥
bījapūrakahiṅgvamlavētasakṣāradāḍimaiḥ।
takrēṇa tailasarpirbhyaṁ vyāñjanānyupakalpayēt||166||
bljapUrakahi~ggvamlavetasakShAradADimaiH|
takreNa tailasarpirbhyaM vyā~jjanAnyupakalpayet||166||

Citron, asafoetida, *amlavetas*, *kshara*, pomegranate, butter milk, oil and ghee preparations are also wholesome for *kapha gulma* [166]

पञ्चमूलीशृतं तोयं पुराणं वारुणीरसम्।
कफगुल्मी पिबेत्काले जीर्ण माधवीकमेव वा॥१६७॥
pañcamūlīśṛtam tōyam purāṇam vāruṇīrasam|
kaphagulmī pibētkälē jīrṇam mādhvīkamēva vā||167||
pa~jcamUllshRutaM toyam purANaM vAruNIrasam|
kaphagulml pibetkAle jIrnAM mAadhvlkameva vA||167||

Water boiled in *laghu panchamula* or old *varuni* or old honey wine should be given to drink on getting the thirst to the patient of *kapha gulma* [167]

यवानीचूर्णितं तक्रं बिडेन लवणीकृतम्।
पिबेत् सन्दीपनं वातकफमूत्रानुलोमनम्॥१६८॥
yavānīcūrṇitam takram biḍēna lavaṇīkṛtam|

pibēt sandīpanam vātakaphamūtrānulōmanam [23] ||168||

yavAnlcUrNitaM takraM biDena lavaNIkRutam|

pibet sandIpanaM vAtakaphamUtrAnulomanam [23] ||168||

Taking of butter milk mixed with *yavani* (*ajwain*) and salted with bid-salt acts as a digestive stimulant and the regulator of flatus, urine and *kapha* [168]

Signs and symptoms of incurable *gulma*

सञ्चितः क्रमशो गुल्मो महावास्तुपरिग्रहः।

कृतमूलः सिरानदधो यदा कूर्म इवोन्नतः॥१६९॥

दौर्बल्यारुचिह्लासकासवम्यरतिज्वरे:।

तृष्णातन्द्राप्रतिश्यायैर्युज्यते न स सिध्यति॥१७०॥

sañcitaḥ kramaśō gulmō mahāvāstuparigrahah|

kṛtamūlaḥ sirānaddhō yadā kūrma ivōnnataḥ||169||

daurbalyārucihṛllāsakāsavamyaratijvaraiḥ |

tṛṣṇātandrāpratiśyāyairyujyatē na sa sidhyati||170||

sa~jcitaH kramasho gulmo mahAvAstuparigrahaH|

kRutamUlaH sirAnaddho yadA kUrma ivonnataH||169||

daurbalyArucihRullAsakAsavamyaratijvaraiH [24] |

tRuShNAtandrApratishyAyairyujyate na sa sidhyati||170||

The *gulma* which gradually goes on increasing, spreading over a large area, has taken firm root, is covered by veins, has convex surface like that of tortoise, and which is accompanied with weakness, anorexia, thirst, nausea, vomiting, fever, cough, coryza and drowsiness is considered as incurable [169-170]

Signs and symptoms of bad prognosis

गृहीत्वा सज्वरश्वासं वम्यतीसारपीडितम्।

हृन्नाभिहस्तपादेषु शोफः कर्षति गुल्मिनम्॥१७१॥

gr̥hītvā sajvaraśvāsam vamyatīsārapīḍitam|

hṛnnābhīhastapādēṣu śophaḥ karṣati gulminam||171||

gRuhltvA sajvarashvAsaM vamyatlsArapIDitam|

hRunnAbhihastapAdeShu shophaH karShati gulminam||171||

The patient of *gulma* accompanied with fever, dyspnea, vomiting and diarrhea along with edema in the epigastric and umbilical regions and on hands and feet indicate that the patient is approaching to death [171]

Treatment of *rakta gulma*

रौधिरस्य तु गुल्मस्य गर्भकालव्यतिक्रमे।

स्निग्धस्विन्नशरीरायै दद्यात् स्नेहविरेचनम्॥१७२॥

raudhirasya tu gulmasya garbhakālavyatikramē|

snigdhasvinnaśarīrāyai dadyāt snēhavirēcanam||172||

raudhirasya tu gulmasya garbhakAlavyatikrame| snigdhasvinnasharIrAyai dadyAt
snehavirecanam||172||

The treatment of *rakta gulma* should be undertaken only after completion of normal period of gestation i.e. 10 months. The patient should be given unctuous *virechana* after preparing with *snehana* and *swedana* [172]

पलाशक्षारपात्रे द्वे द्वे पात्रे तैलसर्पिषोः।

गुल्मशैथिल्यजननीं पक्त्वा मात्रां प्रयोजयेत्॥१७३॥

palāśakṣārapātrē dvē dvē pātrē tailasarpiṣōḥ|

gulmaśaithilyajananīṁ paktvā mātrāṁ prayōjayēt||173||

palAshakShArapAtre dve dve pAtre tailasarpisHoH|

gulmashaithilyajananIM paktvA mAtrAM prayojayet||173||

Make a semisolid preparation by heating 5 Kg of *palasha-kshara* with 5 kg each of ghee and oil. Administer it in sufficient dose to make the *gulma* soft/loose. [173]

प्रभिद्येत न यद्येवं दद्याद्योनिविशोधनम्।

क्षारेण युक्तं पललं सुधाक्षीरेण वा पुनः॥१७४॥

आभ्यां वा भावितान् दद्याद्योनौ कटुकमत्स्यकान्।

वराहमत्स्यपित्ताभ्यां लक्तकान् वा सुभावितान्॥१७५॥

अधोहरैश्चोर्ध्वर्हरैर्भावितान् वा समाक्षिकैः।

किणवं वा सगुडक्षारं दद्याद्योनिविशोधनम्॥१७६॥

prabhidyēta na yadyēvaṁ dadyādyōniviśōdhanam |

kṣārēṇa yuktāṁ palalāṁ sudhākṣīrēṇa vā punah||174||

ābhyaṁ vā bhāvitān dadyādyōnau kaṭukamatsyakān|

varāhamatsyapittābhyaṁ laktakān vā subhāvitān||175||
 adhōharaiścōrdhvaharairbhāvitān vā samākṣikaiḥ|
 kinvarṁ vā sagudakṣāram dadyādyōniviśōdhanam||176||
 prabhidyeta na yadyevaM dadyAdyonivishodhanam [25] |
 kShAreNa yuktaM palalaM sudhAkShIreNa vA punaH||174||
 AbhyAM vA bhAvitAn dadyAdyonau kaTukamatsyakAn|
 varAhamatsyapittAbhyAM laktakAn vA subhAvitAn||175||
 adhoharaishcordhvaharairbhAvitAn vA samAkShikaiH|
 kiNvaM vA saguDakShAraM dadyAdyonivishodhanam||176||

If the above mentioned treatments do not break the *rakta gulma* then the preparations which cleans vagina should be used locally. A swab well saturated with one of the following pastes may be inserted in the vagina:

- Sesame paste mixed with *kshara* or latex of *snuhi* or
- Pungent fish impregnated with both *kshara* and latex of *snuhi*
- Bile of hog or fish or emetic or purgative drugs or with honey

Or yeast mixed with jaggery and honey may be used for cleansing the vagina [174-176]

रक्तपित्तहरं क्षारं लेहयेन्मधुसर्पिषा।
 लशुनं मदिरां तीक्ष्णां मत्स्यांश्चास्यै प्रदापयेत्॥१७७॥
 raktapittaharam kṣāram lēhayēnmadhusarpīṣā|
 laśunām madirām tīkṣṇām matsyāmścāsyai pradāpayēt||177||
 raktapittaharaM kShAraM leharenmadhusarpiShA|
 lashunaM madirAM tlkShNAM matsyAMshcAsyai pradApayet||177||

Kshara which cures *raktapitta* may be licked with honey and ghee. Or garlic mixed with strong wine and fish may be given in diet [177]

बस्ति॑ं सक्षीरगोमूत्रं सक्षारं दाशमूलिकम्।
 अदृश्यमाने रुधिरे दद्याद्गुल्मप्रभेदनम्॥१७८॥
 bastiṁ sakṣīragomūtram sakṣāram dāśamūlikam|
 adr̥syamānē rudhirē dadyādgulmaprabhēdanam||178||
 bastiM sakShIragomUtraM sakShAraM dAshamUlikam|

adRushyamAne rudhire dadyAdgulmaprabhedenam||178||

Basti prepared with milk, cow's urine, *kshara* and decoction of *dashamula* should be given. Even after all these treatments, if blood does not flow from vagina then surgical intervention is required [178]

प्रवर्तमाने रुधिरे दद्यान्मांसरसौदनम्।

घृतैलेन चाभ्यङ्गं पानार्थं तरुणीं सुराम्॥१७९॥

pravartamānē rudhirē dadyānmāṁsarasaudanam|

ghṛtatailēna cābhyaṅgam pānārtham taruṇīm surām||179||

pravartamAne rudhire dadyAnmAMsarasaudanam|

ghRutatailena cAbhya~ggaM pAnArthaM taruNIM surAm||179||

When blood starts flowing through vagina then rice with meat soup should be given to eat. Massage with ghee or oil is done and for drink new wine may be given [179]

रुधिरेऽतिप्रवृत्ते तु रक्तपित्तहरीः क्रियाः।

कार्या वातरुगार्तायाः सर्वा वातहरीः पुनः॥१८०॥

rudhirē'tipravṛttē tu raktapittaharīḥ kriyāḥ|

kāryā vātarugārtāyāḥ sarvā vātaharīḥ punah||180||

rudhire~atipravRutte tu raktapittaharIH kriyAH|

kAryA vAtarugArtAyAH sarvA vAtaharIH punaH||180||

In case of excessive bleeding, the measures curative of *raktapitta* should be prescribed. If the patient gets *vata* type of pains then all the remedies curative of *vata* are given [180]

घृतैलावसेकांश्च तित्तिर्णश्चरणायुधान्।

सुरां समण्डां पूर्वं च पानमम्लस्य सर्पिषः॥१८१॥

प्रयोजयेदुत्तरं वा जीवनीयेन सर्पिषा।

अतिप्रवृत्ते रुधिरे सतिकतेनानुवासनम्॥१८२॥

ghṛtatailāvasēkāṁśca tittirīṁścaranāyudhān|

surāṁ samanḍāṁ pūrvam ca pānamamlasya sarpiṣah||181||

prayōjayēduttaram vā jīvanīyēna sarpiṣā|

atipravṛttē rudhirē satiktēnānuvāsanam||182||

ghRutatailAvasekAMshca tittirIMshcaraNAyudhAnj
 surAM samaNDAM pUrvaM ca pAnamamlasya sarpiShaH||181||
 prayojayeduttaraM vA jivanlyena sarpiShA
 atipravRutte rudhire satiktenAnuvAsanam||182||

Effusion with ghee and oil should be performed. Meat of partridge (*tittara*) and rooster (*charanayudha*), *sura* (wine) along with its upper fluid (*manda*) and ghee prepared with sour drugs may be given in diet.

Uttara basti with ghee prepared with *jivaniya* drugs should be given. In case of the excessive blood flow, *anuvasana basti* with ghee/oil prepared with bitter drugs should be given [181-182]

Summary

तत्र श्लोकाः-

स्नेहः स्वेदः सर्पिर्बस्ति॒श्चूर्णानि बृंहणं गुडिकाः।
 वमनविरेकौ मोक्षः क्षतजस्य च वातगुल्मवताम्॥१८३॥
 सर्पिः सतिकतसिद्धं क्षीरं प्रसंसनं निरुहाश्च।
 रक्तस्य चावसेचनमाश्वासनसंशमनयोगाः॥१८४॥
 उपनाहनं सशस्त्रं पक्वस्याभ्यन्तरप्रभिन्नस्य।
 संशोधनसंशमने पितप्रभवस्य गुल्मस्य॥१८५॥
 स्नेहः स्वेदो भेदो लङ्घनमुल्लेखनं विरेकश्च।
 सर्पिर्बस्तिर्गुटिकाश्चूर्णमरिष्टाश्च सक्षाराः॥१८६॥
 गुल्मस्यान्ते दाहः कफजस्याग्रेऽपनीतरक्तस्य।
 गुल्मस्य रौधिरस्य क्रियाक्रमः स्त्रीभवस्योक्तः॥१८७॥
 पथ्यान्नपानसेवा हेतूनां वर्जनं यथास्वं च।
 नित्यं चाग्निसमाधिः स्निग्धस्य च सर्वकर्माणि॥१८८॥
 हेतुर्लिङ्गं सिद्धिः क्रियाक्रमः साध्यता न योगाश्च।
 गुल्मचिकित्सितसङ्ग्रह एतावान् व्याहृतोऽग्निवेशस्य॥१८९॥
 tatra ślōkāḥ-
 snēhaḥ svēdaḥ sarpibastiścūrṇāni bṛmhānam guḍikāḥ।
 vamanavirēkau mōkṣaḥ kṣatajasya ca vātagulmavatām॥183॥

sarpiḥ satiktasiddhaṁ kṣīraṁ prasraṁsanāṁ nirūhāśca|
raktasya cāvasēcanamāśvāsanasaṁśamanayōgāḥ||184||
upanāhanāṁ saśastraṁ pakvasyābhyantraprabhinnasya|
saṁśōdhanasaṁśamanē pittaprabhavasya gulmasya||185||
snēhaḥ svēdō bhēdō laṅghanamullēkhanaṁ virēkaśca|
sarpirbastirguṭikāścūrṇamariṣṭāśca sakṣārāḥ||186||
gulmasyāntē dāhaḥ kaphajasyāgrē'panītaraktasya|
gulmasya raudhirasya kriyākramah strībhavasyōktah||187||
pathyānnapānasēvā hētūnāṁ varjanāṁ yathāsvam ca|
nityāṁ cāgnisamādhiḥ snigdhasya ca sarvakarmāṇi||188||
hēturlīṅgam siddhiḥ kriyākramah sādhyatā na yōgāśca|
gulmacikitsitañgraḥā ētāvān vyāhṛtō'gnivēśasya||189||

tatra shlokAH-

snehaH svedaH sarpirbastishcUrNAni bRuMhaNaM guDikAH|
vamanavirekau mokShaH kShatajasya ca vAtagulmavatAm||183||
sarpiH satiktasiddhaM kShIraM prasraMsanaM nirUhAshca|
raktasya cAvasecanamAshvAsanasaMshamanayogAH||184||
upanAhanaM sashastraM pakvasyAbhyantaraprabhinnasya|
saMshodhanasaMshamane pittaprabhavasya gulmasya||185||
snehaH svedo bhedo la~gghanamullekhanaM vireakashca|
sarpirbastirguTikAshcUrNamariShTAshca sakShArAH||186||
gulmasyAnte dAhaH kaphajasyAgre~apanItaraktasya|
gulmasya raudhirasya kriyAkramaH strlbhavasyoktaH||187||
pathyAnnapAnasevA hetUnAM varjanaM yathAsvaM ca|
nityaM cAgnisamAdhiH snigdhasya ca sarvakarmANi||188||
heturli~ggaM siddhiH kriyAkramaH sAdhyatA na yogAshca|
gulmacikitsita~ggraḥā etAvAn vyAhRuto~agniveshasya||189||

In this chapter, *sneha*, *sweda*, *sarpi-basti*, *churna*, *brimhana*, *gudika*, *vamana*, *virechana* and *raktamokshana* for the patient suffering from *vata-gulma* have been described.

For the treatment of *pitta gulma*, *sarpi* prepared with *tikta* drugs, *kshira*, *samshamana-niruha basti*, bloodletting, counseling (*ashvasana*), *samshamana*(preparations) have been described.

For *pakva* (suppurated) *gulma*, surgical procedure and poultice (*upanaha*) are described and for that which is ruptured internally the purification (*samshodhana*) and palliative (*samshamana*) treatments are mentioned.

For *kapha gulma*, *snehana*, *swedana*, *bhedana*, *langhana*, *vamana*, *virechana*, *sarpibasti*, *gutika*, *churna*, *arishta*, *kshara*, bloodletting followed by cauterization of the *gulma* as a last resort have been described. Line of treatment for [[/rakta]]-guma occurring in women has also been described.

Use of wholesome (*pathya*) eats and drinks, avoidance of the respective etiological factors, continuously protection of digestive power (*agni*), the instruction for the patient who has undergone *snehana* are described.

Etiological factors, signs and symptoms, successful line of treatment, curability and otherwise and therapeutic measures are described in concise form in this chapter of Gulma Chikitsa as described by Agnivesha [183-189]

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते चिकित्सितस्थाने

गुल्मचिकित्सितं नाम पञ्चमोऽध्यायः||५||

ityagnivēśakṛtē tantrē carakapratisaṁskṛtē cikitsitasthānē

gulmacikitsitam nāma pañcamō’dhyāyah||5||

ityagniveshakRute tantre carakapratisaMsRute cikitsitasthAne

gulmacikitsitaM nAma pa_{jcamo}adhyAyaH||5||

Thus fifth chapter named Gulma Chikitsa in Chikitsa Sthana in the treatise compiled by Agnivesha and revised by Charak is completed [5]

Tattva Vimarsha (Fundamental Principles)

- *Gulma* occurs predominantly due to excessive excretion of feces, *kapha* and *pitta* or due to pressure exerted by their excessive aggravation and other causes leading to vitiation of *vata dosha*.
- Cavities like that in urinary bladder (hypo gastric region), umbilical region (*nabhi*), cardiac region (*hridi*) and two flanks (*parshva*) are susceptible sites for *gulma*.
- All *gulma* are treated after consideration of *dosha* dominance, stage, site and strength of patient.

- Internal administration of *sneha* (unctuous substance) in various modes like oral administration, massage, unctuous enema is the principle of management of *vata* dominant *gulma*.
- If *pitta gulma* is caused due to unctuous and hot substances, then *virechana* shall be administered. If it is caused by dry and hot substances, then ghee shall be administered.
- If *kapha-gulma* is caused by indulgence in cold, heavy and unctuous diet and in those not eligible for *vamana*, *langhana* (depletion) therapy should be prescribed in the beginning. *Vamana* is indicated in a patient of *gulma* who is having low digestion, anorexia, nausea and mild pain, heaviness and stiffness in abdomen.
- *Kapha gulma* is treated with *langhana*, *agni dipana*, *swedana*, *vamana*, *snehana*, *kshara karma* and *agni karma*.
- If *kapha-gulma* has a deep root and is large in size, hard in consistency and heavy, then the patient should be treated with alkali preparation-*kshara*, *arishta* and *agni karma* (cauterization).
- With decrease in digestive-power (*agni*) the *gulma* is aggravated, while on augmentation of the digestion (*agni*) the *gulma* is pacified. Therefore, to the patient of *gulma* neither excessive nutritional food nor excessive fasting or light food/treatment should be prescribed (112).
- *Pitta gulma* requires immediate treatment (*atyayika*) and the patient should be given ghee prepared with purgative and bitter drugs (114).
- Equilibrium or provocation of all the *dosha* depend upon the condition of *agni* (digestion and metabolism), hence one should always take its care and avoid such causes which disturb it.
- *Vamana karma* should be done in *kapha gulma* provided the patient is fit for it.
- The excessively increased stage of *gulma* needs surgical intervention.
- The *gulma* which gradually goes on increasing, spreading over a large area, has taken firm root, is covered by veins, has convex surface like that of tortoise, and which is accompanied with weakness, anorexia, thirst, nausea, vomiting, fever, cough, coryza and drowsiness is considered malignant and as incurable.
- *Rakta gulma* should be treated only after observation for 10 months. This waiting period is essential for achieving a stage suitable for intervention. The patient should be given unctuous *virechana* after preparing with *snehana* and *swedana*.

Vidhi Vimarsha (Applied Inferences)

Contemporary understanding of *gulma*

In Ayurveda, a comprehensive description is given for abdominal swellings. While the generalized swellings have been described under the heading of *udara roga* (ascites), localized inflammatory swellings are described under the heading of *vidradhi*. However, there are other varieties of localized abdominal lumps which are non inflammatory in nature and are considered primarily under the heading of *gulma*.

On analyzing the features described by Charak, it appears that the *vataja gulma* are irregular, mobile swellings of waxing and waning nature and are associated with pain of different characters. Such features can be seen in conditions like chronic intestinal obstructions of various etiology, intestinal tuberculosis, pyloric stenosis, mobile caecum etc. The treatment modalities like *snehana*, *swedana* and *basti/vamana* help in alleviating the symptoms by elimination of feces and flatus as well as improving the gut motility.

Pittaja gulma have been described as tender abdominal lumps associated with fever, thirst, burning sensation etc. which usually progress through various stages of inflammation i.e. *ama-avastha* and *pachyamana avastha* and finally suppurate. It is mentioned that the *pittaja gulma* situated in *antarbhaga* (inside i.e. intra-abdominal) can produce swelling in the *hrid pradesha* (upper abdomen) and when suppurate, may penetrate into the adjacent *mahasrotas* i.e. gastrointestinal tract and burst open culminating with discharge of pus either through oral or rectal route. The discharge of pus may usually continue for a couple of weeks (ten to twelve days) during which, no aggressive measure should be taken except that the nutritional status of the patient should be managed by proper diet.

On examining these features, these can be correlated with clinical condition like empyema of gall bladder which may adhere and penetrate into the adjacent organs like stomach, duodenum or colon and may burst open into the lumen leading to the discharge of pus either through oral or rectal route. Similarly, a subphrenic abscess or liver abscess may rupture into the pleural cavity and may result into discharge of pus during coughing. In addition, suppurative pathologies of pelvic organs leading to pelvic abscesses and a diverticular abscess may erode into rectal lumen and result into pus discharge through rectum.

The other variants of *gulma* that is *bahistha* (externally located) may present with a visible swelling over the surface of abdomen usually in the flanks. These inflammatory pathologies seem to be located extraperitoneally or in the wall of abdomen. Ileopsoas or iliac abscess, perinephric abscess are some of the examples. Some other clinical conditions like infected urachal cyst or infected vitellointestinal duct cysts may also resemble with *bahistha pittaja gulma*.

The features described in *kaphaja gulma* like a firm, fixed, elevated, non-tender lump are comparable to solid mass lesions of the abdomen. Charak has also added that these lumps can be treated surgically and a detailed surgical procedure has been described as under.

An earthen pitcher (*ghati*) of suitable size is taken and fire is put inside for a while. Once the fire is extinguished, the pitcher is placed over the *gulma* in upside down position. This creates a negative pressure inside the earthen pitcher resulting a part of the *gulma* to gradually move inside the pitcher. The pitcher is separated after a while. As the mass has risen above rest of the surface of abdominal wall sufficiently, a tourniquet is tied firmly at the narrow part i.e. the base of the *gulma* for further surgical procedure. Tying

of tourniquet at the base of *gulma* facilitate proper holding as well as minimize bleeding during surgical procedure. An incision is made and the *gulma* is compressed firmly by *vimarga yantra* (a wooden instrument to apply pressure). The contents of *gulma* are removed by scrapping with the help of other *yantras* like *ajpada* and *adarsha* (ref. commentary by Yogindranath Sen). During this procedure, he has cautioned not to injure *aantra* (gut) or *hridaya* (vital organ).

This surgical technique suggests that *kaphaja gulma* includes the benign lesions of the abdominal wall, epigastric or paraumbilical hernia containing extraperitoneal fat or omentum etc.

In addition to above varieties of *gulma*, a *tridoshaja gulma* is also described which is considered as incurable. The features described like an elevated, stony hard lump with excessive pain and burning sensation and loss of vitality suggest more towards a malignant tumor of the abdomen. Moreover, the bad prognostic characters defined for an incurable *gulma* viz. a gradually increasing, deep rooted, elevated hard mass like a turtle shell which is associated with visibly engorged vessels and poor general condition like generalized edema, loss of appetite, cough, vomiting, persistent fever etc. point more towards an advanced malignant lesion of abdomen e.g. hepatoma or the metastatic involvement of liver or other solid malignant tumors of abdominal organs.

In conclusion, *vataja gulma* are mobile swellings of waxing and waning nature due to partial obstructive lesions of gut lumen. *Pittaja gulma* are intraperitoneal or extraperitoneal inflammatory or suppurative lesions of abdomen whereas *kaphaja gulma* are non inflammatory benign lesions of abdominal wall. *Tridoshaja gulma* seems to be malignant intra-abdominal lesions with poor prognosis.

Sites of *gulma*

Five regions of the abdomen where *gulma* occurs are *hrid* (epigastric), *nabhi* (umbilical), *basti* (hypogastric) and two *parshva* (right and left flanks). If both flanks are further subdivided into three *urdhva* (upper), *madhya* (middle) and *adho* (lower), then whole abdomen is divided into 9 parts which is similar to the modern clinical method where abdomen is also divided into nine parts as shown in Table-1. Some of the organs situated in these regions as mentioned by Warner (1964) are also depicted therein and on that basis exact location of the Gulma can be traced.

Table1. Nine divisions of the abdomen, according to Ayurveda and allopathic medicine

Region and Organs	Right section, with organs situated therein	Middle section, with organs situated therein	Left section, with organs situated therein
Region	<i>Dakshina Urdhva Parshva</i> (Right Hypochondriac)	<i>Hrid</i> (Epigastric)	<i>Vama Urdhva Parshva</i> (Left Hypochondriac)

Region and Organs	Right section, with organs situated therein	Middle section, with organs situated therein	Left section, with organs situated therein
Organs	Right lobe of liver, gall-bladder, part of duodenum, hepatic flexure of colon, part of right kidney, right suprarenal gland	Pyloric end of stomach, duodenum, pancreas, aorta & part of liver	Stomach, spleen, tail of pancreas, splenic flexure of colon, upper part of left kidney, part of the left lobe of liver (some time)
Region	<i>Dakshina Madhya Parshva (Right Lumbar)</i>	<i>Nabhi (Umbilical)</i>	<i>Vama Madhya Parshva (Left Lumbar)</i>
Organs	Ascending colon, lower part of right kidney & part of duodenum and jejunum	Omentum, transverse colon, lower part of jejunum & ileum	Descending colon, lower half of left kidney & portions of jejunum and ileum
Region	<i>Dakshina Adho Parshva (Right Iliac)</i>	<i>Basti (Hypogastric)</i>	<i>Vama Adho Parshva (Left Iliac)</i>
Organs	Caecum, appendix, lower end of ileum, right ureter, right spermatic cord in male & right ovary in female	Ileum, bladder, gravid pregnant uterus	Sigmoid colon, left ureter, left spermatic cord in male & left ovary in female

Differential diagnosis of *gulma*

Ayurveda is a clinical science; therefore, the diseases are classified in such a way so that they can be systematically diagnosed on the basis of the symptoms. *Gulma* is a good example for it.

Mainly three resembling diseases occur in the abdominal cavity viz. *udara roga*, *gulma* and *pliha dosha* which require differential diagnosis. *Udararoga* comprises of eight diseases which cause general enlargement of the abdomen. Five types of *gulma* have protruding and palpable localized swellings related to the abdominal organs and

appendages. Under *pliha dosha* benign enlargement of spleen or liver occurs⁷³. Therefore, on the basis of these clear demarcations, it may not be difficult to differentiate these three kinds of diseases clinically.

Chikitsa sutra (principles of management) of *gulma*

Principles:

1. *Anulomana*
2. *Pachana*

Main drugs:

1. *Bhallataka*
2. *Lashuna*
3. Castor oil
4. *Tamra bhasma*

Internal Medicines

Type	Medicine	Dose	Time of Administration	<i>Anupana</i>
<i>Vata</i> dominant	<i>Lashunadi Vati</i>	500 to 1000 mg	Before meals, two times	Lemon water
	<i>Vata vidhvansa</i>	250 to 500 mg	Before meals, two times	Lemon water
	<i>Chukra</i> oil	20 to 40 drops	Before meals, two times	Milk
<i>Pitta</i> dominant	<i>Praval panchamritam</i>	250 to 500 mg	Before and after meals, four times	Milk and sugar
	<i>Shatavari-trinapanchamula</i> decoction	20 to 40 ml	Before two meals, two times	Milk

⁷³ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Type	Medicine	Dose	Time of Administration	Anupana
Kapha dominant	<i>Shatavari mandura</i>	500 to 1000 mg	Before meals, two times	Milk
	<i>Svarna vasant</i>	250 to 500 mg	After meals	Milk
	<i>Bhallataka oil</i>	5 to 10 drops	Before meals, two times	Milk
Raktaja	<i>Arogya kshara mixture</i>	500 to 1000 mg	Before meals, two times	<i>Kumaryasava</i>
	<i>Shatavari-truna panchamula decoction</i>	20 to 40 ml	Between meals, two times	Milk
	<i>Loha parpati</i> mixture	500 to 750 mg	Before meals, two times	Honey
Sannipatika	<i>Varunadi kwatha</i>	20 to 40 ml	Between two meals, two times	Honey

Panchakarma

Type	Medicine	Dose	Time of Administration	Anupana
Virechana	Castor Oil	20-40 ml	Morning, one time	Milk
	<i>Virechana</i> decoction	20-40 ml	Morning, one time	Milk
Niruha	<i>Dashamula</i> decoction	320 ml	Morning, one time	-
Anuvasana	<i>Sahachara</i> decoction	40 to 70 ml	Morning, one time	-
Anulomana	<i>Triphala</i> mixture	1 to 3 grams	Frequently	Honey
Blood Letting	-	100 to 150 ml	-	-

Related Chapter

- Gulma Nidana

Further reading

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Prameha Chikitsa

Chikitsa Sthana Chapter 6. Management of Prameha (Urinary Diseases including diabetes) Abstract

Prameha is a set of complex clinical disorders characterized by frequent abnormal micturition, with the etiology involving genetic predisposition as well as improper diet and lifestyle. The clinical conditions described in *prameha* have much in common with diabetes mellitus. In the chapter dealing with the treatment for the alleviation of *prameha* following topics have been discussed: Etiology of the disease; *doshas* and *dushyas* involved in the pathogenesis of the disease; Curability and incurability of the disease; Signs and symptoms of the disease; Two types of *prameha* patients; Three categories of therapy; viz. *samshodhana* (elimination therapy), *samsamana* (alleviation therapy) and *nidana parivarjana* (avoiding causative factors); Disadvantages of over depletion; Eatables prepared of barley, *mantha* (thin gruel) and decoctions for the cure of *prameha*. Treatment of *prameha* includes, medicated oil, medicated ghee, various recipes of linctus, food preparations; good quality *asavas* (fermented drinks) having known therapeutic utility; and different methods of exercise, baths, unctuous and fragrant applications. Though *prameha* is widely accepted as description of diabetes, it covers various types of urinary disorders.

Keywords: *Sthula Pramehi*, *Krishna Pramehi*, *Chikitsa*, Diabetes Mellitus, obstinate urinary disorders

Introduction

The word *Prameha* literally means urinary disorders with increased quantity of urine with turbidity in it. In the last chapter of Nidana Sthana, *prameha* is said to have originated from excess consumption of ghee. This chapter deals with the detail etio-pathogenesis, clinical features, classification and management of *prameha*. It is widely considered as diabetes mellitus. However, *prameha* covers various types of obstinate urinary disorders under its umbrella. The key to management of *prameha roga* is to attempt to stop its pathogenesis for which the etiological factors responsible for the origin of the disease are identified. These etiological factors include both faulty dietary habits and life style that cause imbalance between energy consumption and energy expenditure and ultimately cause obesity. Indulgence in high calorie diet including refined carbohydrate and bad fat associated with sedentary life style causes excessive storage of fatty tissue in body to disturb the body mass index. The disturbed body mass index reflects as obesity causing disturbed lipid metabolism and assimilation (FFAs, TG, HDL and VLDL) that in turn causes insulin resistance and produces type-2 DM.

It is interesting to note that the ancient acharyas (preceptors, teachers) were aware of the fact that insulin resistance is secondary to the dyslipidemia. Therefore, the patients of *prameha* are classified as *sthula pramehi* and *krisha pramehi* which can be identified based on body mass index. All those factors, that cause vitiation of *kapha* will cause

prameha. At the end of the chapter, it is mentioned that *jatah/ kulaja* (hereditary) *prameha* and *madhumeha* are incurable. *Prameha* is also classified as

- (1) *jatah pramehi* (hereditary) and
- (2) *sthula pramehi* (acquired).

Further justification that acquired type of *prameha* (*apathyanimmitaja*) occurs only in obese persons i.e. obesity is the root cause for insulin resistance. But in addition to that it is stated that genetic predisposition is also required for the development of disease. There is difference of opinion within the Ayurvedic community on equating *prameha* with diabetes mellitus. Though it is not always feasible to accurately/exactly correlate or map Ayurvedic terms with modern medical concepts (e.g., there are no accurate medical terms to explain the concepts of *gulma* or *prameha*), Ayurveda provides insights that can prove to be invaluable in exploring effective ways of the management of various chronic diseases, including diabetes. The medical community of today believes that raised FFAs cause insulin resistance leading to diabetes mellitus along with hypertension and atherogenic dislipidemias⁷⁴⁷⁵. It is assumed that targeting FFA will help in mitigating insulin resistance more than using only hypoglycemic drugs. This chapter clearly depicts that the Ayurvedic approach for the management of *prameha* by *apatarpana chikitsa* (depleting therapy), drugs as well as diet that are helpful in lowering both fat as well as glucose such as *yava* (barley), *triphalā* etc.

The chapter also gives the detailed description of urinalysis for the diagnosis, classification and assessment of prognosis of the disease. Distinctive description of *raktameha* and *siktameha* correlates with current method of microscopic examination of urine.

Description of *Sahaja prameha* and role of genetic predisposition in the development of disease clears all the doubt about the scientific validity of Ayurveda.

Sanskrit text, Transliteration and English Translation

अथातः प्रमेहचिकित्सितं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātaḥ pramēhacikitsitam vyākhyāsyāmah||1||

iti ha smāha bhagavānātrēyah||2||

⁷⁴ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

⁷⁵ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

athAtaH cikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Prameha Chikitsa” (Management of Urinary Diseases including diabetes). Thus said Lord Atreya. [1-2]

निर्मोहमानानुशयो निराशः पुनर्वसुर्ज्ञानतपोविशालः।

कालेऽग्निवेशाय सहेतुलिङ्गानुवाच मेहान्त्वामनं च तेषाम्॥३॥

nirmōhamānānuśayō nirāśah punarvasurjñānatapōviśālahi।

kālē'gnivēśāya sahētuliṅgānuvāca mēhāñśamanam ca tēśām॥३॥

nirmohamAnAnushayo nirAshaH punarvasurj~jAnatapovishAlaH|

kAle~agniveshAya sahetuli~ggAnuvAca Meha~jshamanaM ca teShAm||3||

Punarvasu who is free from delusion, ego, hatred and attachment, and who has attained magnanimity because of his knowledge and penance, described the etiology, signs and symptoms, and treatment of *meha (prameha)* to Agnivesha at proper time (when query was asked).[3]

Etiology of *prameha*

आस्यासुखं स्वप्नसुखं दधीनि ग्राम्यौदकानूपरसाः पयांसि।

नवान्नपानं गुडवैकृतं च प्रमेहहेतुः कफकृच्च सर्वम्॥४॥

āsyāsukham svapnasukham dadhīni grāmyaudakānūparasāḥ payāṁsi।

navānnapānam guḍavaikṛtam ca pramēhahētuḥ kaphakṛcca sarvam॥४॥

AsyAsukhaM svapnasukhaM dadhIni grAmyaudakAnUparasAH payAMsi|

navAnnapAnaM guDavaikRutaM ca PramehahetuH kaphakRucca sarvam||4||

Over-indulgence in the pleasure of sedentary habits, excess sleep, curds, soup of the meat of domesticated and aquatic animals and animals inhabiting marshy land, milk and its preparations, freshly harvested food articles, freshly prepared drinks, preparations of jaggery and all *kapha-* aggravating factors are responsible for the causation of *prameha*. [4]

Dushya (vitiated factors) and pathogeneis

मेदश्च मांसं च शरीरजं च क्लेदं कफो बस्तिगतं प्रदूष्य।

करोति मेहान् समुदीर्णमुष्णौस्तानेव पितं परिदूष्य चापि॥७॥

क्षीणेषु दोषेष्ववकृष्य बस्तौ धातून् प्रमेहाननिलः करोति।

दोषो हि बस्तिं समुपेत्य मूत्रं सन्दूष्य मेहाज्जनयेद्यथास्वम्॥६॥
 mēdaśca māṁsaṁ ca śarīrajaṁ ca klēdaṁ kaphō bastigataṁ pradūṣya|
 karōti mēhān samudīrṇamuśnaistānēva pittam paridūṣya cāpi||5||
 kṣīṇēśu dōshēśvavakṛṣya bastau dhātūn pramēhānanilaḥ karōti|
 dōṣō hi bastiṁ samupētya mūtram sandūṣya mēhāñjanayēdyathāsvam||6||
 Medashca mAMsaM ca sharIrajaM ca kledaM kapho bastigataM pradUShya|
 karoti Mehan samudIrNamuShNaistAneva pittaM paridUShya cApi||5||
 kShINeShu doSheShvavakRuShya bastau dhAtUn pramehananilaH karoti|
 doSho hi bastiM samupetya mUtraM sandUShya Meha~jjanayedyathAsvam||6||

Aggravated *kapha* vitiates *medas*, *mamsa* and *kleda* of the body located in *basti* (bladder and urinary system) and causes different types of *kapha* dominant *meha*.

Similarly, *pitta* aggravated by hot things vitiates those elements and causes different types of *pitta* dominant *meha*. When other two *doshas* are in a relatively diminished state, the aggravated *vata* draws tissues elements (viz. *ojas*, *majja*, and *lasika*) into the urinary tract and vitiates them to cause *vata* dominant *pramehas*. Different *doshas* having entered the urinary tract in vitiated condition give rise to the respective types of *meha* with their own dominance. [5-6]

Classification and Prognosis

साध्या: कफोत्था दश, पितजा: षट् याप्या, न साध्य: पवनाच्चतुष्कः॥
 समक्रियत्वाद् विषमक्रियत्वान्महात्ययत्वाच्च यथाक्रमं ते॥७॥
 sādhyāḥ kaphōtthā daśa, pittajāḥ ṣaṭ yāpyā, na sādhyāḥ pavanāccatuṣkah|
 samakriyatvādvिषमक्रियत्वान्महात्ययत्वाच्च yathākramam tē||7||
 sAdhyAH kaphotthA dasha, pittajAH ShaT yApyA, na sAdhyaH pavanAccatuShkaH|
 samakriyatvAdviShamakriyatvAnmahAtiyatvAcca yathAkramaM te||7||

Kaphaja pramehas are of ten types and they are curable because of their compatibility of the therapies meant for their cure (*samakriyatvata*).

Pittaja pramehas are of six types and they are only palliable (*yapya*) because of their incompatibility of the therapies meant for their treatment.

Vatika pramehas are of four types and they are incurable because of their incompatibility with therapies and dreadful nature of *vata* leading to complications. [7]

Vitiating factors involved in pathogenesis

कफः सपित्तः पवनश्च दोषा मेदोऽस्तुक्राम्बुवसालसीकाः।
मज्जा रसौजः पिशिं च दूष्याः[१] प्रमेहिणां, विंशतिरेव मेहाः॥८॥
kaphah sapittah pavanaśca dōṣā mēdō'sraśukrāmbuvasālaśikāḥ|
majjā rasaujaḥ piśitam ca dūṣyāḥ [3] pramēhiṇāṁ, viṁśatirēva mēhāḥ॥८॥
kaphaH sapittaH pavanashca doShA medo~asrashukrAmbuvasAlasIkAH|
majJA rasaujaH pishitaM ca dUShyAH pramehiNAM, viMshatireva MehaH॥८॥

Doshas like kapha, pitta and vata, and dushyas like medas, rakta, shukra, ambu (body fluid), vasa (muscle fat), lasika (lymph), majja, rasa, ojas and mamsa are responsible for the causation of prameha which is of twenty types. [8]

Twenty types of dosha dominant prameha

जलोपमं चेक्षुरसोपमं वा घनं घनं चोपरि विप्रसन्नम्।
शुक्लं सथुक्रं शिशिरं शनैर्वा लालेव वा वालुकया युतं वा॥९॥
विद्यात् प्रमेहान् कफजान् दशैतान् क्षारोपमं कालमथापि नीलम्।
हारिद्रमाञ्जिष्ठमथापि रक्तमेतान् प्रमेहान् षडुशन्ति पित्तात्॥१०॥
मज्जौजसा वा वसयाऽन्वितं वा लसीकया वा सततं विबद्धम्।
चतुर्विधं मूत्रयतीह[१] वाताच्छेषु धातुष्वपकर्षितेषु॥११॥
jalōpamaṁ cēksurasōpamaṁ vā ghanam ghanam cōpari viprasannam|
śuklam saśukram śiśiram śanairvā lālēva vā vālukayā yutam vā||९||
vidyāt pramēhān kaphajān daśaitān kṣārōpamaṁ kālamathāpi nīlam|
hāridramāñjiṣṭhamathāpi raktamētān pramēhān ṣaduśanti pittāt||१०||
majjaujasā vā vasayā'nvitam vā lasīkayā vā satataṁ vibaddham|
caturvidharā mūtrayatīha [4] vātācchēṣēṣu dhātuṣvapakarṣitēṣu||११||
jalopamaM cekShurasopamaM vA ghanaM ghanaM copari viprasannam|
shuklaM sashukraM shishiraM shanairvA lAleva vA vAlukayA yutaM vA||९||
vidyAt pramehan kaphajAn dashaitAn kShAropamaM kAlamathApi nllam|
hAridramA~jjiiShThamathApi raktametAn pramehan ShaDushanti pittAt||१०||
majjaujasA vA vasayA~anvitaM vA laslkayA vA satataM vibaddham|

caturvidhaM mUtrayatlha vAtAccheSheShu dhAtuShvapakarShiteShu||11||

Ten varieties of *kaphaja meha* have the following characteristic features:

1. The urine resembling water (*udaka meha*)
2. The urine resembling sugar cane juice (*iksu- valika meha*)
3. Dense urine (*sandra meha*)
4. Low density urine with transparent upper layer (*Sandra prasad meha*)
5. The urine having white colour (*shukla meha*)
6. The urine containing seminal fluid (*shukra meha*)
7. The urine having cold touch (*shita meha*)
8. The urine passing out slowly (*shanaih meha*)
9. The urine containing slimy material like saliva (*lala meha*) and
10. The urine containing sand like substance (*sikata meha*).

Six varieties of *pittaja meha* have following characteristic features:

1. The urine resembling alkali solution (*kshara meha*)
2. The urine having black color (*kala meha*)
3. The urine having indigo color (*nila meha*)
4. The urine having yellow color like turmeric (*haridra meha*)
5. The urine having reddish color like that of *manjistha* (*manjishtha meha*) and
6. The urine having blood in it (*rakta meha*).

Four varieties of *vatika meha* have the following characteristic features:

1. The urine mixed with *majja* (*majja meha*)
2. The urine mixed with *ojas* (*oja meha*)
3. The urine mixed with muscle fat (*vasa meha*)
4. The urine mixed with lymph (*lasika meha*)

Diminution of other *dhatus* or tissue elements (besides those described above) is responsible for the causation of the above mentioned four varieties of *vatika prameha*. [9-11]

Criteria for diagnosis

वर्णं रसं स्पर्शमथापि गन्धं यथास्वदोषं भजते प्रमेहः।

श्यावारुणो वातकृतः सशूलो मज्जादिसाद्गुण्यमुपैत्यसाध्यः॥१२॥

varṇam rasaṁ sparśamathāpi gandham yathāsvadōṣam bhajatē pramēhah।

śyāvāruṇo vātakṛtaḥ saśūlo majjādisādgunyamupaityasādhyah॥१२॥

varNaM rasaM sparshamathApi gandhaM yathAsvadoShaM bhajate PramehaH।

shyAvAruNo vAtakRutaH sashUlo majjAdisAdguNyamupaityasAdhyaH||12||

Different types of *prameha* are characterized by the color, taste, touch and smell of the respective *dosha*. *Vatika* varieties of *prameha* are characterized by grayish or reddish coloration of the urine, pain and attributes of *majja*, etc. These types of *vatika prameha* are incurable. [12]

Premonitory signs and symptoms

स्वेदोऽङ्गगन्धः शिथिलाङ्गता च शय्यासनस्वप्नसुखे रतिश्च।

हृन्नेत्रजिह्वाश्रवणोपदेहो घनाङ्गता केशनखातिवृद्धिः॥१३॥

शीतप्रियत्वं गलतालुशोषो माधुर्यमास्ये करपाददाहः।

भविष्यतो मेहगदस्य रूपं मूत्रेऽभिधावन्ति पिपीलिकाश्च॥१४॥

svēdō'ngagandhah śithilāṅgatā ca śayyāsanaspnasukhē ratiśca|
hṛnnētrajihvāśravaṇōpadēhō ghanāṅgatā kēśanakhātivṛddhiḥ||13||

śītapriyatvaraṁ galatāluśośō mādhuryamāsyē karapādadāhah| bhaviṣyatō mēhagadasya
rūpaṁ mūtrē'bhidhāvanti pipīlikāśca||14||

svedo_aggagandhaH shithilA~ggatA ca shayyAsanasvapnasukhe ratishca|
hRunnetrajihvAshravaNopadeho ghanA~ggatA keshanakhAtivRuddhiH||13||

shItapriyatvaM galatAlushoSho mAdhuryamAsye karapAdadAhaH| bhaviShyato
Mehagadasya rUpaM mUtre~abhidhAvanti pipillikAshca||14||

Sweating, body odor, flabbiness of the body, liking for constantly lying on the bed, sitting, sleeping and leading an easy life, a feeling as if the cardiac region is covered with extraneous material, exudation of excreta from eyes, tongue and ears, corpulence of the body, excessive growth of hair and nails, liking for cold things, dryness of throat and palate, sweet taste in the mouth, burning sensation in hands and legs and swarming of ants on the urine- these are the premonitory signs and symptoms of *prameha*. [13-14]

Principles of management

स्थूलः प्रमेही बलवानिहैकः कृशस्तथैकः परिदुर्बलश्च।

सम्बृहणं तत्र कृशस्य कार्य संशोधनं दोषबलाधिकस्य॥१५॥

स्त्रिगृहस्य योगा विविधाः प्रयोज्याः कल्पोपदिष्टा मलशोधनाय[१] |

ऊर्ध्वं तथाऽधश्च मलेऽपनीते मेहेषु सन्तर्पणमेव कार्यम्॥१६॥

गुल्मः क्षयो मेहनबस्तिशूलं मूत्रग्रहश्चाप्यपतर्पणेन।

प्रमेहिणः स्युः, परितर्पणानि[२] कार्याणि तस्य[३] प्रसमीक्ष्य वहिनम्॥१७॥

sthūlah pramēhī balavānihaikah krśastathaikah paridurbalaśca|
 sambṝmhaṇam tatra krśasya kāryam saṁśōdhanam dōśabalādhikasya||15||
 snigdhasya yōgā vividhāḥ prayōjyāḥ kalpōpadistā malaśōdhanāya [5] |
 ūrdhvam tathā'dhaśca malē'panītē mēhēṣu santarpaṇamēva kāryam||16||
 gulmaḥ kṣayō mēhanabastiśūlam mūtragrahaścāpyapatarpaṇēna|
 pramēhiṇah syuḥ, paritarpaṇāni [6] kāryāṇi tasya [7] prasamīkṣya vahnim||17||
 sthUlaH pramehl balavAnihaikaH kRushastathaikaH paridurbalashca|
 sambRuMhaNaM tatra kRushasya kAryaM saMshodhanaM doShabalAdhikasya||15||
 snigdhasya yogA vividhAH prayojyAH kalpopadiShTA malashodhanAya|
 UrdhvaM tathA~adhashca male~apanlte meheShu santarpaNameva kAryam||16||
 gulmaH kShayo MehanabastishUlaM mUtragrahashcApyapatarpaNena|
 pramehiNaH syuH, paritarpaNANi kAryANi tasya prasamlkShya vahnim||17||

Patients suffering from *prameha* are classified into two categories, viz. (1) those who are obese and strong, and (2) those who are emaciated and weak.

Patients belonging to the latter category should be given nourishing therapy. Patient of the former category who are strong and who have more *doshas* in the body should be treated with elimination therapy.

For this purpose, the oleated patient should be given various recipes described in Kalpa Sthana with a view to eliminating metabolic waste products through both upward and downward tracts. After the waste products (excess metabolic bi-products) are eliminated from his body, the patient should be given *santarpana* or nourishment therapy. Because *apatarpana* (depletion) therapy in this condition may produce *gulma*, consumption, pain in phallus and urinary bladder including kidneys and retention of urine. Such patients should be given *santarpana* therapy depending upon their power of digestion. [15-17]

Samshamana (pacification therapy)

संशोधनं नार्हति यः प्रमेही तस्य क्रिया संशमनी प्रयोज्या|
 मन्थाः कषाया यवचूर्णलेहाः प्रमेहशान्त्यै लघवश्च भक्ष्याः||१८||
 ये विष्किरा ये प्रतुदा विहङ्गास्तेषां रसैर्जाङ्गलजैर्मनोजैः।
 यवौदनं रुक्षमथापि वाट्यमद्यात्[१] ससक्तूनपि चाप्यपूपान्॥१९॥
 मुद्गादियूषैरथ तिक्तशाकैः पुराणशाल्योदनमाददीत।

दन्तीङ्गुटीतैलयुतं प्रमेही तथाऽतसीसर्षपतैलयुक्तम्॥२०॥
सषष्ठिकं स्यात्तृणधान्यमन्नं यवप्रधानस्तु भवेत् प्रमेही।
यवस्य भक्ष्यान् विविधांस्तथाऽद्यात् कफप्रमेही मधुसम्प्रयुक्तान्॥२१॥
निशिस्थितानां त्रिफलाकषाये स्युस्तर्पणाः क्षौद्रयुता यवानाम्।
तान् सीधुयुक्तान् प्रपिबेत् प्रमेही प्रायोगिकान्मेहवधार्थमेव॥२२॥
ये श्लेषमेहे विहिताः कषायास्तैर्भवितानां च पृथग्यवानाम्।
सक्तूनपूपान् सगुडान् सधानान् भक्ष्यांस्तथाऽन्यान् विविधांश्च खादेत्॥२३॥
खराश्वगोहंसपृष्टद्भूतानां तथा यवानां विविधाश्च भक्ष्याः।
देयास्तथा वेणुयवा यवानां कल्पेन गोधूममयाश्च भक्ष्याः॥२४॥

saṁśōdhanam nārhati yaḥ pramēhī tasya kriyā saṁśamanī prayōjyā|
manthāḥ kaśāyā yavacūrṇalēhāḥ pramēhaśāntyai laghavaśca bhakṣyāḥ॥१८॥
yē viśkirā yē pratudā vihaṅgāstēśāṁ rasairjāṅgalajairmanōjñaiḥ|
yavaudanam rūkṣamathāpi vātyamadyāt [8] sasaktūnapi cāpyapūpān॥१९॥
mudgādiyūśairatha tiktaśākaiḥ purāṇaśālyōdanamādadīta|
dantīngudītailayutam pramēhī tathā'tasīsarşapatalayuktam॥२०॥
saşaśtikam syāttṛṇadhānyamannam yavapradhānastu bhavēt pramēhī|
yavasya bhakṣyān vividhāṁstathā'dyāt kaphapramēhī madhusamprayuktān॥२१॥
niśisthitānāṁ triphalākaśāyē syustarpaṇāḥ kṣaudrayutā yavānām|
tān sīdhuyuktān prapibēt pramēhī prāyōgikānmēhavadhārthamēva॥२२॥
yē ślēśmamēhē vihitāḥ kaśāyāstairbhāvitānāṁ ca pṛthag्यavānām|
saktūnapūpān sagudān sadhānān bhakṣyāṁstathā'nyān vividhāṁśca khādēt॥२३॥
kharāśvagōhāṁsapṛṣadbhṛtānāṁ tathā yavānāṁ vividhāśca bhakṣyāḥ|
dēyāstathā vēṇuyavā yavānāṁ kalpēna gōdhūmamayāśca bhakṣyāḥ॥२४॥
saMshodhanaM nArhati yaH pramehl tasya kriyA saMshamanI prayojojA|
manthAH kaShAyA yavacUrNalehAH PramehashAntyai laghavashca bhakShyAH॥१८॥
ye viShkirA ye pratudA viha~ggAsteShAM rasairjA_ggalajairmanojaiH|
yavaudanaM rUkShamathApi vATyamadyAt sasaktUnapi cApyapUpAn॥१९॥
mudgAdiyUShairatha tiktashAkaiH purANashAlyodanamAdadIta|

dantl~ggudItailayutaM pramehl tathA~atasIsarShapatailayuktam||20||
 saShaShTikaM syAttRuNadhAnyamannaM yavapradhAnastu bhavet pramehl|
 yavasya bhakShyAn vividhAMstathA~adyAt kaphapramehl madhusamprayuktAn||21||
 nishisthitAnAM triphalAkaShAye syustarpaNAH kShaudrayutA yavAnAm|
 tAn sldhuyuktAn prapibet pramehl prAyogikAnMehavadhArthameva||22||
 ye shleShmamehe vihitAH kaShAyAstairbhAvitAnAM ca pRuthagyavAnAm|
 saktUnapUpAn saguDAAn sadhAnAn bhakShyAMstathA~anyAn vividhAMshca
 khAdet||23||
 kharAshvagohaMsapRuShadbhRutAnAM tathA yavAnAM vividhAshca bhakShyAH|
 deyAstathA veNuyavA yavAnAM kalpena godhUmamayAshca bhakShyAH||24||

If the patient of *prameha* is not eligible for *samshodhana* or elimination therapy, *samshamana* or alleviation therapies should be given. [18]

Diet

The patient suffering from *prameha* should be given the following food:

1. *Manthas* (flour of different types of corn mixed with water), *kashayas* (decoctions), barley powder, linctus prepared of barley and other light-eatables;
2. *Yavaudana* (cooked barley) without adding any unctuous articles, *vatya* (barley porridge), *saktu* (roasted corn flour) and *apupa* (pancakes) mixed with the meat soup of gallinaceous and pecker birds and animals inhabiting arid land;
3. Old *shali* rice cooked and mixed with the soup of *mudga* etc., and preparations of bitter vegetables; and
4. Cooked *shashtika* rice and *trina dhanyas* mixed with the oil of *danti*, *ingudi*, *atasi* and *sarshapa*.

Shashtika rice with *shyamaka* etc., *truna dhanya* with *yava* as predominant food is advised for *prameha* patients.

Various food recipes of *yava* with honey are indicated in *kapha* dominant *prameha*.

Barley soaked in the decoction of *triphala* and kept overnight should be mixed with honey. It is a refreshing (*tarpana*) diet. It should be taken by the patient suffering from *prameha* regularly to overcome the disease. Barley should be soaked separately with each of decoctions prescribed for the treatment of *kaphaja prameha* and taken by the patient in the form of *saktu* (roasted flour), *apupa* (pancake), *dhana* (roasted barley) and other types of eatables along with jaggery.

Various eatables prepared from the barley or bamboo seed or wheat previously eaten by asses, horses, cows, swans and deer and collected from their dung should be given to the patient suffering from *prameha*. [18-24]

Specific Therapies

संशोधनोल्लेखनलङ्घनानि काले प्रयुक्तानि कफप्रमेहान्।

जयन्ति पितप्रभवान् विरेकः सन्तर्पणः संशमनो विधिश्च॥२५॥

saṁśōdhanōllēkhanalaṅghanāni kālē prayuktāni kaphapramēhān|

jayanti pittaprabhavān virēkah santarpaṇah saṁśamanō vidhiśca||25||

saMshodhanollekhanala~gghanAni kAle prayuktAni kaphaPramehan|

jayanti pittaprabhavAn virekaH santarpaNaH saMshamano vidhishca||25||

Purificatory therapies including specifically emesis and fasting therapies, administered at the appropriate time, cure *kaphaja* types of *prameha*. Similarly, *pittaja* types of *prameha* are overcome by purgation, *santarpana* (refreshing therapy) and alleviation therapies. [25]

Various formulations

दार्वी सुराहवां त्रिफलां समुस्तां कषायमुत्क्वाथ्य पिबेत् प्रमेही।

क्षौद्रेण युक्तामथवा हरिद्रां पिबेद्रसेनामलकीफलानाम्॥२६॥

dārvīṁ surāhvāṁ triphalāṁ samustāṁ kaśāyamutkvāthya pibēt pramēhī|

kṣaudrēṇa yuktāmathavā haridrāṁ pibēdrasēnāmalakīphalānām||26||

dArvIM surAhvAM triphalAM samustAM kaShAyamutkvAthya pibet pramehl|

kShaudreNa yuktAmathavA haridrAM pibedrasenAmalakiPhalAnAm||26||

The patient suffering from *prameha* should take the decoction of *darvi*, *surahva*, *triphalā* and *musta* mixed with honey. He may also take *haridra* along with the juice of *amalaki*. [26]

Decoctions for *kaphaja prameha*

हरीतकीकट्फलमुस्तलोधां पाठविडङ्गार्जुनधन्वनाश्च।

उभे हरिद्रे तगरं विडङ्गं कदम्बशालार्जुनदीप्यकाश्च॥२७॥

दार्वी विडङ्गं खदिरो धवश्च सुराहवकुष्ठागुरुचन्दनानि।

दार्व्यग्निमन्थौ त्रिफला सपाठा पाठा च मूर्वा च तथा श्वदंष्ट्रा॥२८॥

यवान्युशीराण्यभयागुड्चीचव्याभयाचित्रकसप्तपर्णाः।

पादैः कषायाः कफमेहिनां ते दशोपदिष्टा मधुसम्प्रयुक्ताः॥२९॥

harītakīkaṭphalamustalōdhram pāṭhāviḍāṅgārjunadhanvanāśca|

ubhē haridrē tagaram viḍāṅgam kadambaśālārjunadīpyakāśca||27||
 dārvī viḍāṅgam khadirō dhavaśca surāhvakuṣṭhāgurucandanāni|
 dārvyagnimanthau triphalā sapāṭhā pāṭhā ca mūrvā ca tathā śvadāṁśtrā||28||
 yavānyuśīrāṇyabhayāguḍūcīcavyābhayācitrakasaptaparṇāḥ|
 pādaiḥ kaśāyāḥ kaphamēhinām tē daśōpadisṭā madhusamprayuktāḥ||29||
 harītakīkaTphalamustalodhraM pAThAviDa~ggArjunadIpyakAshca|
 ubhe haridre tagaraM viDa~ggaM kadambashAIArjunadIpyakAshca||27||
 dArvI viDa~ggaM khadiro dhavashca surAhvakuShThAgurucandanAni|
 dArvyagnimanthau triphala sapAThA pAThA ca mUrvA ca tathA shvadaMShtRA||28||
 yavAnyushIrANyabhayAguDUclcavyAbhayAcitrakasaptaparNAH|
 pAdaiH kaShAyAH kaphamehinAM te dashopadiShTA madhusamprayuktAH||29||

The following ten decoctions should be mixed with honey and given to patients suffering from *kaphaja prameha*:

1. Decoction of *haritaki*, *katphala*, *musta* and *lodhra*;
2. Decoction of *patha*, *vidanga*, *arjuna* and *dhanvana*;
3. Decoction of *haridra*, *daruharida*, *tagar* and *vidanga*;
4. Decoction of *kadamba*, *shala*, *arjuna* and *dipyaka*;
5. Decoction of *darvi*, *vidanga*, *khadira* and *dhava*;
6. Decoction of *surahva*, *kushtha*, *aguru* and *chandana*;
7. Decoction of *darvi*, *agnimantha*, *triphalā* and *patha*;
8. Decoction of *patha*, *murva* and *shvadāṁśtra*;
9. Decoction of *yavani*, *ushira*, *abhaya* and *guduchi*; and
10. Decoction of *chavya*, *abhaya*, *chitraka* and *sapta parna*.

Decoctions for pittaja prameha

उशीरलोधाऽजनचन्दनानामुशीरमुस्ता मलकाभयानाम्|
 पटोलनिम्बामलकामृतानां मुस्ताभयापदमकवृक्षकाणाम्||३०||
 लोधाम्बुकालीयकधातकीनां निम्बार्जुनाम्रातनिशोतपलानाम्|
 शिरीषसर्जार्जुनकेशराणां प्रियङ्गुपदमोत्पलकिंशुकानाम्||३१||
 अश्वत्थपाठासनवेतसानां कटडकटेर्युत्पलमुस्तकानाम्|
 पैतेषु महेषु दश प्रदिष्टाः पादैः कषाया मधुसम्प्रयुक्ताः||३२||
 उशीरलोधरान्जनाकानामुशीरमुस्तामलकाभयानाम्|

paṭolanimbāmalakāmṛtānāṁ mustābhayāpadmakavrkṣakāṇām||30||
 lōdhrāmbukālīyakadhātakīnāṁ nimbārjunāmrātaniśōtpalānām|
 śirīśasarjārjunakēśarānāṁ priyaṅgupadmōtpalakimśukānām||31||
 aśvatthapāṭhāsanavētasānāṁ [11] kaṭaṅkaṭēryutpalamustakānām|
 paittēsu mēhēsu daśa pradiṣṭāḥ pādaiḥ kaśāyā madhusamprayuktāḥ||32||
 ushlralodhrA~jjanacandanAnAmushIramustAmalakAbhayAnAm|
 paTolanimbAmalakAmRutAnAM mustAbhayApadmakavRukShakANAm||30||
 lodhrAmbukAllyakadhAtakInAM nimbArjunAmrAtanishotpalAnAm|
 shirlShasarjArjunakesharANAM priya~ggupadmotpalakiMshukAnAm||31||
 ashvatthapAThAsanavetasAnAM kaTa~gkaTeryutpalamustakAnAm|
 paitteShu meheShu dasha pradiShTAH pAdaiH kaShAyA madhusamprayuktAH||32||

The following ten decoctions should be mixed with honey and given to patients suffering from *pittaja prameha*:

1. Decoction of *ushira*, *lodhra*, *arjuna*, *lalachandana*
2. Decoction of *ushira*, *musta*, *amalaka* and *abhaya*;
3. Decoction of *patola*, *nimba*, *amalaka* and *amrita*;
4. Decoction of *musta*, *abhaya*, *padmaka* and *vrikshaka*;
5. Decoction of *lodhra*, *ambu*, *kaliyaka* and *dhataki*;
6. Decoction of *nimba*, *arjuna*, *amrita*, *nisha* and *utpala*;
7. Decoction of *shirisha*, *sarja*, *arjuna* and *keshara*;
8. Decoction of *priyangu*, *padma*, *utpala* and *kimshuka*;
9. Decoction of *ashvattha*, *patha*, *asana* and *vetasa*; and
10. Decoction of *katankateri* (*daruharidra*), *utpala* and *mustaka*. [30-32]

Decoctions for all types of prameha

सर्वेषु मेहेषु मतौ तु पूर्वो कषाययोगौ विहितास्तु सर्वे।
 मन्थस्य पाने यवभावनायां स्युर्भोजने पानविधौ पृथक् च॥३३॥
 सिद्धानि तैलानि घृतानि चैव देयानि मेहेष्वनिलात्मकेषु।
 मेदः कफश्चैव कषाययोगैः स्नेहैश्च वायुः शममेति तेषाम्॥३४॥
 sarvēṣu mēhēṣu matau tu pūrvau kaśāyayōgau vihitāstu sarvē|
 manthasya pānē yavabhāvanāyāṁ syurbhōjanē pānavidhau pṛthak ca||33||
 siddhāni tailāni ghṛtāni caiva dēyāni [12] mēhēṣvanilātmakēṣu|

mēdaḥ kaphaścaiva kaśayayōgaiḥ snēhaiśca vāyuh śamamēti tēśām||34||
 sarveShu meheShu matau tu pUrvau kaShAyayogau vihitAstu sarve|
 manthasya pAne yavabhAvanAyAM syurbhojane pAnavidhau pRuthak ca||33||
 siddhAni tailAni ghRutAni caiva deyAni meheShvanilAtmakeShu|
 medaH kaphashcaiva kaShAyayogaiH snehaishca vAyuH shamameti teShAm||34||

Two recipes of decoction are described for the treatment of all varieties of *prameha*. These decoctions can be used for the preparation of *mantha* (a drink prepared of roasted corn flour mixed with water), for the impregnation of barley and for the preparation of different kinds of food and drinks.

Medicated oils and medicated ghee prepared by cooking with these decoctions should be administered to patients suffering from *vatika prameha*. These decoctions correct the vitiated *medas* and *kapha*, and the aggravated *vata* in these patients gets alleviated by the unctuous ingredients (viz., oil and ghee) included in these recipes. [33-34]

Formulations for kaphaja and pittaja prameha

कम्पिल्लसप्तच्छदशालजानि बैभीतरौहीतककौटजानि|
 कपित्थपुष्पाणि च चूर्णितानि क्षौद्रेण लिहयात् कफपित्तमेही||35||
 पिबेद्रसेनामलकस्य चापि कल्कीकृतान्यक्षसमानि काले|
 जीर्णं च भुज्जीत पुराणमन्नं मेही रसैर्जाङ्गलजैर्मनोजैः||36||
 kampillasaptacchadaśālajāni baibhītarauhītakakauṭajāni|
 kapitthapuspāṇi ca cūrṇitāni kṣaudrēṇa lihyāt kaphapittamēhī||35||
 pibēdrasēnāmalakasya cāpi kalkīkṛtānyakṣasamāni kālē|
 jīrnē ca bhuñjīta purāṇamannāṁ mēhī rasairjāṅgalajairmanōjñaiḥ||36||
 kampillasaptacchadashAlajAni baibhItarauhItakakauTajAni] kapitthapuShpANi ca
 cUrNitAni kShaudreNa lihyAt kaphapittamehl||35||
 pibedrasenAmalakasya cApi kalkIkRutAnyakShasamAni kAle|
 jlrNe ca bhu~jjlta purANamannaM mehl rasairjA_{ggalajairmanoj}jaiH||36||

Powder of *kampillaka*, barks of *saptachchada*, *bibhitaka*, *rohitaka* and *kutaja* and flower of *kapittha* should be added with honey, made to a linctus and taken by patients suffering from *kaphaja* and *pittaja prameha*. One *aksha* of the paste of above mentioned drugs should be mixed with the juice of *amalaki* and given at the appropriate time to patients suffering from *kaphaja* and *pittaja* types of *prameha*. After the digestion of this potion, the patient should be given to eat old rice cooked and mixed with the delicious soup of the meat of animals living in arid land.[35-36]

Formulations for vata association in kaphaja and pittaja prameha

दृष्ट्वाऽनुबन्धं पवनात् कफस्य पित्तस्य वा स्नेहविधिर्विकल्प्यः।
तैलं कफे स्यात् स्वकषायसिद्धं पिते घृतं पित्तहरैः कषायैः॥३७॥
त्रिकण्टकाशमन्तकसोमवल्कैर्भल्लातकैः सातिविषैः सलोधैः।
वचापटोलार्जुननिम्बमुस्तैरिद्रया[१] पद्मकदीप्यकैश्च॥३८॥
मञ्जिष्ठया चागुरुचन्दनैश्च सर्वैः समस्तैः कफवातजेषु।
मेहेषु तैलं विपचेद् घृतं तु पैतेषु, मिश्रं त्रिषु लक्षणेषु॥३९॥
फलत्रिकं दारुनिशां विशालां मुस्तां च निःक्वाथ्य निशां सकल्काम्।
पिबेत् कषायं मधुसम्प्रयुक्तं सर्वप्रमेहेषु समुद्धतेषु॥४०॥

dṛṣṭvā'nubandham pavanāt kaphasya pittasya vā snēhavidhirvikalpyah|
tailam kaphē syāt svakaśāyasiddham pittē ghṛtam pittaharaiḥ kaśāyaiḥ||37||
trikanṭakāśmantakasōmavalkairbhallātakaiḥ sātiviṣaiḥ salōdhraiḥ|
vacāpaṭolārjunanimbamustairharidrayā [13] padmakadīpyakaiśca||38||
mañjīṣṭhayā cāgurucandanaīśca sarvaiḥ samastaiḥ kaphavātajēṣu|
mēhēṣu tailam vipacēd, ghṛtam tu paittēṣu, miśram triṣu lakṣaṇēṣu||39||
phalatrikam dāruniśām viśālām mustām ca niḥkvāthya niśām sakalkām|
pibēt kaśāyam madhusamprayuktam sarvapramēhēṣu samuddhatēṣu||40||

dRuShTvA~anubandhaM pavanAt kaphasya pittasya vA snehavidhirvikalpyaH|
tailaM kaphe syAt svakaShAyasiddhaM pitte ghRutaM pittaharaiH kaShAyaiH||37||
trikaNTakAshmantakasomavalkairbhallAtakaiH sAtiviShaiH salodhraiH|
vacApaToArjunanimbamustairharidrayA?] padmakadIpyakaishca||38||
ma~jiShThayA cAgurucandanaishca sarvaiH samastaiH kaphavAtajeShu|
meheShu tailaM vipaced, ghRutaM tu paitteShu, mishraM triShu lakShaNeShu||39||
phalatrikam dArunishAM vishAIAM mustAM ca niHkvAthya nishAM sakalkAm|
pibet kaShAyaM madhusamprayuktaM sarvaprameheShu samuddhateShu||40||

If *vata* is secondarily aggravated along with either *kapha* or *pitta*, then the patient should be administered unctuous preparations. For the *kapha* aggravation, medicated oil should be processed with the decoction of *kapha* alleviating drugs. .For the *pitta* aggravation, medicated ghee should be processed with the decoction of *pitta* alleviating

drugs. *Trikantaka, ashmantaka, somavalka, bhallataka, ativisha, lodhra, vacha, patola, arjuna, nimbi, musta, haridra, padmaka, dipyaka, manjishta, aguru* and *chandana-* all these drugs together should be used in the preparation of medicated oil for the treatment of *kaphaja prameha* which is associated with secondarily aggravated *vata*. In case of *pitta* dominance, ghee shall be processed with above mentioned drugs.

If the signs and symptoms of all the three *doshas* are manifested, then with all the above mentioned drugs together, ghee and oil both in a mixed form should be cooked and given to the patient.

Recipe for all types of prameha:

The decoction of *triphalā, darunisha, vishala* and *musta* should be mixed with the paste of *haridra* and honey. Intake of this potion cures all types of *prameha* even when these are manifested in acute form. [37-40]

Madhvāsava

लोधं शटीं पुष्करमूलमेलां मूर्वा विडङ्गं त्रिफलां यमानीम्।
चत्वयं प्रियडङ्गुं क्रमुकं विशालां किराततिक्तं कटुरोहिणीं च॥४१॥
भाईर्गीं नतं चित्रकपिष्पलीनां मूलं सकुष्ठतिविषं सपाठम्।
कलिङ्गकन् केशरमिन्द्रसाहवां नखं सपत्रं मरिचं प्लवं च॥४२॥
द्रोणेऽम्भसः कर्षसमानि पक्त्वा पूते चतुर्भागजलावशेषे।
रसेऽर्धभागं मधुनः प्रदाय पक्षं निधेयो घृतभाजनस्थः॥४३॥
मध्वासवोऽयं[१] कफपित्तमेहान् क्षिप्रं निहन्याद्द्विपलप्रयोगात्।
पाण्डवामयार्शास्यरुचिं ग्रहण्या दोषं किलासं विविधं च कुष्ठम्॥४४॥
इति मध्वासवः।

lōdhram̄ śaṭīṁ puṣkaramūlamēlāṁ mūrvāṁ viḍaṅgam̄ triphalāṁ yamānīm|
cavyam̄ priyaṅgum̄ kramukam̄ viśālāṁ kirātatiktam̄ kaṭurōhiṇīm̄ ca||41||
bhārṅgīm̄ natam̄ citrakapippalīnāṁ mūlarāṁ sakuṣṭhātiviṣām̄ sapāṭham|
kaliṅgakan̄ kēśaramindrasāhvāṁ nakham̄ sapatram̄ maricam̄ plavam̄ ca||42||
drōṇē’mbhasah̄ karṣasamāni paktvā pūtē caturbhāgajalāvaśēṣē|
rasē’rdhabhāgam̄ madhunah̄ pradāya pakṣam̄ nidhēyō ghṛtabhājanasthah̄||43||
madhvāsavō’yam̄ [15] kaphapittamēhān̄ kṣipram̄ nihanyāddvipalaprayōgāt|
pāṇḍvāmayārśāṁsyarucim̄ grahanyā dōṣam̄ kilāsam̄ vividham̄ ca kuṣṭham||44||
iti madhvāsavaḥ

lodhraM shaTIM puShkaramUlameIAM mUrvAM viDa~ggaM triphalAM yamAnIm|
 cavyaM priya~gguM kramukaM vishAIAM kirAtatiktaM kaTurohiNIM ca||41||
 bhAr~ggIM nataM citrakapippallnAM mUlaM sakuShThAtiviShaM sapATham|
 kali~ggakan kesharamindrasAhvAM nakhaM sapatraM maricaM plavaM ca||42||
 droNe~ambhasaH karShasamAni paktvA pUte caturbhAgajalAvasheShe|
 rase~ardhabhAgaM madhunaH pradAya pakShaM nidheyo ghRutabhAjanasthaH||43||
 madhvAsavo~ayaM kaphapittaMehan kShipraM nihanyAddvipalaprayogAt|
 pANDvAmayArshAMsyaruciM grahaNyA doShaM kilAsaM vividhaM ca kuShTham||44||
 iti madhvAsavaH|

Lodhra, shati, pushkaramula, ela, murva, vidanga, triphala, yamani, chavya, priyangu, kramuka, vishala, kiratatikta, katurohini, bharngi, nata, chiraka, pippalimula, kushtha, ativisha, patha, kalingaka, keshara, indravaruni, nakha, patra, maricha and plava- one *karsha* of each of these drugs should be boiled in one *drona* of water till one fourth remains. This decoction along with half its quantity of honey should be kept inside a ghee smeared jar for a fort night. This is called *madhvAsava*. It instantaneously cures *kaphaja* and *paittika* types of *meha* when administered in a dose of two *palas*. It also cures *pandu*, *arsha*, *aruchi*, *grahani dosha*, *kilasa* and different types of *kushtha*.[41-44]

Dantyasava and bhallatakasava

क्वाथः स एवाष्टपलं च दन्त्या भल्लातकानां च चतुष्पलं स्यात्।
 सितोपला त्वष्टपला विशेषः क्षौद्रं च तावत् पृथगासवौ तौ॥४५॥
 kvāthah sa ēvāṣṭapalam ca dantyā bhallātakānām ca catuṣpalam syāt|
 sitōpalā tvaṣṭapalā viśēṣah kṣaudram ca tāvat pṛthagāsavau tau||45||
 kvAthaH sa evAShTapalaM ca dantyA bhallAtakAnAM ca catuShpalaM syAt|
 sitopalA tvaShTapalA visheShaH kShaudraM ca tAvat pRuthagAsavau tau||45||

In the above mentioned decoction, eight *palas* of *danti*, eight *palas* of sugar and the same quantity of honey should be added and processed. Similarly, in the above mentioned decoction four *palas* of *bhallataka*, eight *palas* of sugar and the same quantity of honey should be added and processed. These two *asavas* (namely *dantyasava* and *bhallatokusava*) are useful in the treatment of *prameha*. [45]

Beneficial diet and drinks

सारोदकं वाऽथ कुशोदकं वा मधूदकं वा त्रिफलारसं वा।
 सीधुं पिबेद्वा निगदं प्रमेही माधवीकमग्नं चिरसंस्थितं वा॥४६॥

मांसानि शूल्यानि मृगदविजानां खादेद्यवानां विविधांश्च भक्ष्यान्।
 संशोधनारिष्टकषायलेहैः सन्तर्पणोत्थाज् शमयेत् प्रमेहान्॥४७॥
 भृष्टान् यवान् भक्षयतः प्रयोगाच्छुष्कांश्च सक्तून्न भवन्ति मेहाः।
 शिवत्रं च कृच्छ्रं कफजं च कुष्ठं तथैव मुद्गामलकप्रयोगान्॥४८॥
 sārōdakam vā'tha kuśōdakam vā madhūdakam vā triphalārasam vā|
 sīdhum pibēdvā nigadarī pramēhī mādhvīkamagryarī cirasāṁsthitarī vā||46||
 māṁsāni śūlyāni mrgadvijānām khādēdyavānām vividhāṁśca bhakṣyān|
 saṁśōdhanāriṣṭakaśāyalēhaiḥ santarpaṇōtthāñ śamayēt pramēhān||47||
 bhṛṣṭān yavān bhakṣayataḥ prayōgācchuṣkāṁśca saktūnna bhavanti mēhāḥ|
 śvitram ca kṛcchraṁ kaphajam ca kuṣṭham tathaiva mudgāmalakaprayogān||48||
 sArodakaM vA~atha kushodakaM vA madhUdakaM vA triphalArasaM vA|
 slahuM pibedvA nigadaM pramehl mAadhvIkamagryaM cirasaMsthitaM vA||46||
 mAMsAni shUlyAni mRugadvijAnAM khAdedyavAnAM vividhAMshca bhakShyAn|
 saMshodhanAriShTakaShAyalehaiH santarpaNotthA~j shamayet pramehan||47||
 bhRuShTAyavAn bhakShayataH prayogAcchuShkAMshca saktUnna bhavanti
 MehaH|
 shvitram ca kRucchraM kaphajaM ca kuShThaM tathaiva mudgAmalakaprayogAn||48||

The patient suffering from *prameha* should drink *sarodaka* (water boiled with the heart-wood of *khadira* etc.,), *kushodaka* (water boiled with *kusha*), *madhudaka* (water mixed with honey), *triphala rasa* (juice or decoction of *triphala*) or *sidhu* (a type of wine) which is properly fermented or *madhvika* (another type of wine) which is of superior quality and is prepared after fermenting for a long time.

Spit- roasted meat of animals and birds and different eatables prepared of barley should be given to the patient to eat. Different types of *prameha* caused by over-nourishment should be alleviated by the administration of elimination therapies, *arishtas* (a type of wine), decoctions and various types of linctus.

Persons habitually taking roasted barley, dry corn- flour, *mudga* and *amalaka* do not suffer from *prameha*, *shvitra* (leucoderma), *mutrakrucchra* (dysuria) and *kaphaja kushtha*. [46-48]

Indications of above treatment

सन्तर्पणोत्थेषु गदेषु योगा मेदस्विनां ये च मयोपदिष्टाः।

विरुक्षणार्थं कफपित्तजेषु सिद्धाः प्रमेहेष्वपि ते प्रयोज्याः||४९||
santarpaṇōtthēsu gadēsu yōgā mēdasvināṁ yē ca mayōpadistāḥ|
virūkṣaṇārthaṁ kaphapittajēsu siddhāḥ pramēhēṣvapi tē prayōjyāḥ||४९||
santarpaNottheShu gadeShu yogA medasvinAM ye ca mayopadiShTAH|
virUkShaNArthaM kaphapittajeShu siddhAH prameheShvapi te prayojyAH||४९||
Effective formulations for producing drying effect on obese patients while describing the management of diseases caused by over-nourishment are useful in the treatment of *pramehas* caused by *kapha* and *pitta* dominance. [49]

Various external applications

व्यायामयोगैर्विविधैः प्रगाढैरुद्वर्तनैः स्नानजलावसेकैः।
सेव्यत्वगेलागुरुचन्दनाद् यैर्विलेपनैश्चाशु[१] न सन्ति मेहाः॥५०॥
vyāyāmayōgairvividhaiḥ pragāḍhairudvartanaiḥ snānajalāvasēkaiḥ|
sēvyatvagēlāgurucandanādyairvilēpanaiścāśu [17] na santi mēhāḥ॥५०॥
vyAyAmayogairvividhaiH pragADhairudvartanaiH snAnajaAvasekaiH|
seyvatvagelAgurucandanAdyairvilepanaishcAshu na santi MehaH॥५०॥

Pramehas get immediately cured by different types of exercises, unction, bath, sprinkling of water over the body and application of ointment made of *seyva* (*ushira*), *tvak*, *ela*, *aguru*, *chandana* etc. [50]

Indication of *apatarpana* treatment

क्लेदश्च मेदश्च कफश्च वृद्धः प्रमेहहेतुः प्रसमीक्ष्य तस्मात्।
वैद्येन पूर्वं कफपित्तजेषु मेहेषु कार्याण्यपतर्पणानि॥५१॥
klēdaśca mēdaśca kaphaśca vṛddhaḥ pramēhahētuḥ prasamīkṣya tasmāt|
vaidyēna pūrvam kaphapittajēsu mēhēsu kāryāṇyapatarpanāni॥५१॥
kledashca medashca kaphashca vRuddhaH pramehahetuH prasamIkShya tasmAt|
vaidyena pUrvaM kaphapittajeShu meheShu kAryANyapatarpaNAni॥५१॥

Aggravated *kleda* (liquid element of the body), *medas* (adipose tissue) and *kapha* are responsible for the causation of *prameha*. Keeping this in view, the physician, in the beginning, should administer depletion therapies to patients suffering with *kapha* and *pitta* dominant types of *prameha*. [51]

Vata dominant prameha

या वातमेहान् प्रति पूर्वमुक्ता वातोल्बणानां विहिता क्रिया सा|
वायुहि मेहेष्वतिकर्शितानां कुप्यत्यसाध्यान् प्रति नास्ति चिन्ता||५२||
yā vātamēhān prati pūrvamuktā vātōlbañānāṁ vihitā kriyā sā|
vāyurhi mēhēśvatikarśitānāṁ kupyatyasādhyān prati nāsti cintā||52||
yA vAtaMehan prati pUrvamuktA vAtolbaNAnAM vihitA kriyA sA|
vAyurhi meheShvatikarshitAnAM kupyatyasAdhyAn prati nAsti cintA||52||

Formulations described earlier for the *vatika prameha* are actually meant for *vata* dominant *prameha* where *vata* is secondarily (subsequently) aggravated. If the *vata* is primarily aggravated in *prameha* because of excessive depletion of tissue elements, then it is incurable and the physician need not make efforts to treat. [52]

Prevention of prameha

यैर्हतुभिर्ये प्रभवन्ति मेहास्तेषु प्रमेहेषु न ते निषेव्याः|
हेतोरसेवा विहिता यथैव जातस्य रोगस्य भवेच्चिकित्सा||५३||
yairhētubhīryē prabhavanti mēhāstēṣu pramēhēṣu na tē niṣēvyāḥ|
hētōrasēvā vihitā yathaiva jātasya rōgasya bhavēccikitsā||53||
Yairhetubhiryे prabhavanti MehasteShu prameheShu na te niShevyAH|
hetorasevA vihitA yathaiva jAtasya rogasya bhaveccikitsA||53||

Etiological factors responsible for the causation of different types of *prameha* should be avoided even after *prameha* are manifested. The causative factors described shall be avoided during the treatment of those particular diseases (even after its manifestation). [53]

Differentiation between raktapitta and prameha

हारिद्रवर्ण रुधिरं च मूत्रं विना प्रमेहस्य हि पूर्वरूपैः|
यो मूत्रयेत्तं न वदेत् प्रमेहं रक्तस्य पित्तस्य हि स प्रकोपः||५४||
hāridravarṇāṁ rudhirāṁ ca mūtram vinā pramēhasya hi pūrvarūpaiḥ|
yō mūtrayēttāṁ na vadēt pramēham raktasya pittasya hi sa prakōpah||54||
hAridravarNaM rudhiraM ca mUtraM vinA pramehasya hi pUrvarUpaiH|
yo mUtrayettaM na vadet pramehaM raktasya pittasya hi sa prakopaH||54||

If the color of the urine is yellow or if blood is excreted through the urine without the prior manifestation of premonitory signs and symptoms of *prameha*, such a person should not be diagnosed as a patient of *prameha*. He should be diagnosed as a case of *rakta-pitta* (a disease characterized by bleeding from different parts of body).[54]

Two types of *prameha* patient

दृष्ट्वा प्रमेहं मधुरं सपिच्छं मधूपमं स्याद् विविधो विचारः।
क्षीणेषु दोषेष्वनिलात्मकः स्यात् सन्तर्पणाद् वा कफसम्भवः स्यात्॥५४॥
dṛṣṭvā pramēham madhuram sapicchaṁ madhūpamam syāddvividhō vicārah|
kṣīṇēṣu dōshēśvanilātmakah syāt santarpaṇādvā kaphasambhavaḥ syāt||55||
dRuShTvA pramehaM madhuraM sapicchaM madhUpamaM syAddvividho vicAraH|
kShINeShu doSheShvaniAtmakaH syAt santarpaNAadvA kaphasambhavaH syAt||55||

If the patient suffering from *prameha* passes urine which is sweet, slimy and honey-like, then there are two possibilities. It is caused either by the diminution of *doshas* having *vata*-dominant type or by over-nourishment having *kapha* dominant type. [55]

Prognosis

सपूर्वरूपाः कफपित्तमेहाः क्रमेण ये वातकृताश्च मेहाः।
साध्या न ते, पित्तकृतास्तु याप्याः, साध्यास्तु मेदो यदि न प्रदुष्टम्॥५६॥
sapūrvarūpāḥ kaphapittamēhāḥ kramēṇa yē vātakṛtāśca mēhāḥ|
sādhyā na tē, pittakṛtāstu yāpyāḥ, sādhyāstu mēdō yadi na praduṣṭam||56||
sapUrvarUpAH kaphapittaMehaH krameNa ye vAtakRutAshca MehaH|
sAdhyA na te, pittakRutAstu yApyAH, sAdhyAstu medo yadi na praduShTam||56||

Kapha dominant and *pitta* dominant types of *prameha*, if preceded by their premonitory signs and symptoms, are incurable. Similarly, *vata* *prameha*, where *vata* is aggravated right from the beginning is incurable. *Pitta* dominant types of *prameha* are generally palliable. But they are curable if *medas* (adipose tissue) is not vitiated. [56]

In-curability of hereditary diseases

जातः प्रमेही मधुमेहिनो वा न साध्य उक्तः स हि बीजदोषात्।
ये चापि केचित् कुलजा विकारा भवन्ति तांश्च प्रवदन्त्यसाध्यान्॥५७॥
jātah pramēhī madhumēhinō vā na sādhyā uktah sa hi bījadōṣāt|
yē cāpi kēcīt kulajā vikārā bhavanti tāṁśca pravadantyasādhyān||57||

jAtaH pramehl madhumehino vA na sAdhya uktaH sa hi bijadoShAt|
ye cApi kecit kulajA vikArA bhavanti tAMshca pravadantyasAdhyAn||57||

Patients who suffer from *prameha* since birth (congenital) and those who are borne of *prameha* parents (hereditary) are not curable because of the morbidity in their *bija* (genes). Similarly, other hereditary (*kulaja/familial*) ailments are considered as incurable. [57]

Treatment of *prameha pidaka*

प्रमेहिणां या: पिडका मयोक्ता रोगाधिकारे पृथगेव सप्त|
ता: शल्यविदभिः कुशलैश्चिकित्स्याः शस्त्रेण संशोधनरोपणौश्च||५८||
pramēhiṇāṁ yāḥ piḍakā mayōktā rōgādhikārē pṛthagēva sapta|
tāḥ śalyavidbhiḥ kuśalaiścikitsyāḥ śastrēṇa samśodhanarōpaṇaiśca||५८||
pramehiNAM yAH piDakA mayoktA rogAdhikAre pRuthageva sapta|
tAH shalyavidbhiH kushalaishcikitsyAH shastreNa saMshodhanaropaNaishca||58||

Seven types of *prameha pidaka* of patients suffering from *prameha* described in the quadrate on diseases (*rogadhikara*) are to be treated by expert surgeons with the help of *shastras* (surgical operations), *samshodhana* (cleansing) and *ropana* (healing therapies). [58]

Summary

तत्र श्लोकाः-

हेतुर्दोषो दूष्यं मेहानां साध्यतानुरूपश्च|
मेही द्विविधस्त्रिविधं [१] भिषग्जितमतिक्षपणदोषः||५९||
आद्या यवान्नविकृतिर्मन्था मेहापहाः कषायाश्च|
तैलघृतलेहयोगा भक्ष्याः प्रवरासवाः सिद्धाः||६०||
व्यायामविधिर्विधः स्नानान्युद्वर्तनानि गन्धाश्च|
मेहानां प्रशमार्थं चिकित्सिते दिष्टमेतावत्||६१||

tatra ślōkāḥ-

hēturdōṣō dūṣyāṁ mēhānāṁ sādhyatānurūpaśca|
mēhī dvividhastrividham [18] bhiṣagjitatamatikṣapaṇadōṣah||५९||
ādyā yavānnavikṛtirmanthā mēhāpahāḥ kaṣāyāśca|
tailaghṛtalēhayōgā bhakṣyāḥ pravarāsavāḥ siddhāḥ||६०||

vyāyāmavidhirvividhaḥ snānānyudvartanāni gandhāśca|

mēhānāṁ praśamārthaṁ cikitsitē diṣṭamētāvat||61||

Tatra shlokAH-

heturdoSho dUShyaM MehanAM sAdhyatAnurUpashca|

mehl dvividhastrividhaM bhiShagjitamatikShapaNadoShaH||59||

AdyA yavAnnavigRutirmanthA MehapahAH kaShAyAshca|

tailaghRutalehayogA bhakShyAH pravarAsavAH siddhAH||60||

vyAyAmavidhirvividhaH snAnAnyudvartanAni gandhAshca|

MehanAM prashamArthaM cikitsite diShTametAvat||61||

Here are the recapulatory verses:

The causes, *dosha*, *dushya*, curability, characteristics of urine in *prameha*, two types of patients, three modes of treatment, disadvantages of excess depletion therapy, various food items of *yava*, *mantha*, various decoctions used in treatment of *prameha*, medicated oils, ghee preparations, linctuses, diet articles, fermented preparations like *asava*, various exercises, baths, massage, fragrant applications all these are described in the management of *prameha*. [59-61]

Thus, ends the sixth chapter dealing with the treatment of *prameha* of Chikitsa Sthana of Agnivesha's work as redacted by Charak.[6]

Tattva Vimarsha (Fundamental Principles)

- Excess intake of curds, soup of the meat of domesticated, aquatic animals and animals inhabiting marshy land, milk and its preparations, freshly harvested food articles, freshly prepared drinks, preparations of jaggery and all *kapha*-aggravating factors are responsible for the causation of *prameha*.
- Over-indulgence in the pleasure of sedentary habits, excess sleep are lifestyle factors leading to *prameha*.
- Aggravated *kapha* vitiates *medas*, *mamsa* and *kleda* of the body located in *basti* (bladder and urinary system) and causes different types of *kapha* dominant *meha*.
- Similarly, *pitta* aggravated by hot things vitiates those elements and causes different types of *pitta* dominant *meha*.
- When other two *doshas* are in a relatively diminished state, the aggravated *vata* draws tissues elements (viz. *ojas*, *majja*, and *lasika*) into the urinary tract and vitiates them to cause *vata* dominant *pramehas*. Different *doshas* having entered the urinary tract in vitiated condition give rise to the respective types of *meha* with their own dominance.

- *Doshas* like *kapha*, *pitta* and *vata*, and *dushyas* like *medas*, *rakta*, *shukra*, *ambu* (body fluid), *vasa* (muscle fat), *lasika* (lymph), *majja*, *rasa*, *ojas* and *mamsa* are responsible for the causation of *prameha* which is of twenty types. *Prameha* is classified on the basis of characteristics of urine as observed. Indeed the classification depends upon response of urinary system towards internal imbalance of cellular metabolism. This depends upon waste products excreted through urine after interaction of aggravated *dosha* and *dushya*.
- Different types of *prameha* are characterized by the color, taste, touch and smell of the respective *dosha*.
- Patients suffering from *prameha* are classified into two categories, viz. (1) those who are obese and strong, and (2) those who are emaciated and weak. The clinical presentation and treatment is different for both categories. Patients belonging to the latter category should be given nourishing therapy. Patient of the former category who are strong and who have more *doshas* in the body should be treated with elimination therapy.
- After elimination therapy, nourishment therapy shall be prescribed to the patient. If nourishment therapy is not done, then the aggravated *vata dosha* leads to complications of *prameha*.
- The food preparations like *yava* (barley) which have dry, light to digest and hot properties are predominantly indicated in *prameha*.
- Aggravated *kleda* (liquid element of the body), *medas* (adipose tissue) and *kapha* are responsible for the causation of *prameha*. Considering this aggravation, *apatarpana* (depletion therapies) is the first principle of treatment in *kapha* and *pitta* dominant types of *prameha*.
- If *vata* is primarily aggravated in *prameha* because of excessive depletion of tissue elements, then it is incurable. If *vata* is associated and secondarily aggravated, then it is treatable upto some extent.
- Persistently avoiding etiological factors after manifestation of disease and during treatment of disease are important principles of management of disease.
- The curability of *kapha* and *pitta* dominant *prameha* depends upon intensity of involvement of *meda dhatu*.
- Patients who suffer from *prameha* since birth (congenital) and those who are borne of *prameha* parents (hereditary) are not curable because of the morbidity in their *bija* (genes). Similarly, other hereditary (*kulaja/familial*) ailments are considered as incurable.

Vidhi Vimarsha (Applied Inferences)

Role of *kapha* dominant diet

In *prameha*, *kapha* is the main culprit both as *dosha* as well as *dushya*. Diet having high contents of bad fat and carbohydrates like curd (Fat= 3g/ 100g, carbohydrate= 7.8g/100g, Protein= 5.25g, calories= 63), meat soup (calories= 902), jaggery (Fat= 0g/ 100g, carbohydrate= 97.2 g/100g, Protein= 0.5g/100g, calories= 367), newly harvested

grains that are having high calories than old one (If dry grains are held for only a few months, minimum nutritional changes will take place, but if the grains are held with a higher amount of moisture, the grain quality can deteriorate because of starch degradation by grain and microbial amylases) etc., causes *prameha*. All the causative factors are in diet that have high content of bad fat like saturated fats and no good fats like polyunsaturated or monounsaturated fats (which are mostly present in plant originated dietary products). It is advisable that maximum percentage of daily fat consumption should come from plant origin to lower the risk of dyslipidemia.

Optimum levels of fat in the diet are given below:

- Less than 10 percent of calories should come from saturated fat.
- An average of 30 percent of calories or less should come from total fat.
- Dietary cholesterol intake should be less than 300 mg a day.

Thus the causative factors can be categorized as:

1. those related to high fat and refined carbohydrate diet that provide high calories by liberating high and instant energy (jaggery, meat soup, etc.) and
2. those related to sedentary life style that causes low energy expenditure (lack of exercise, etc). These two factors cause an imbalance between energy consumption and energy expenditure and ultimately cause obesity.

Role of obesity and pathogenesis in *sthula prameha*

Excessive consumption of fats and sedentary life style causes obesity. Obesity causes derangement in lipid metabolism and storage which in turn leads to *prameha* as shown in the following chart 1:

thumb|right|Chart 1: Role of obesity in diabetes

Diagnosis of *prameha* based on characteristics of urine

Different categories of *prameha* are described to possess the color, taste, touch, and smell of the respective *doshas*. For example, in *kaphaja prameha*, the urine is characterized by white color, sweet taste; cold touch and *ama gandha* (smell like that of flesh). In the same way, the characteristic features of *pittaja prameha* are to be determined. *Vayu* itself is colorless. Therefore, different varieties of *vata* dominant *prameha* are characterized by grayish or reddish color of urine as a result of the *prabhava* (specific action) of the *vayu*.

Vata dominant *prameha* is already described to be incurable (*asadhy*). Again repeating the statement regarding its incurability implies that the presence of several symptoms including the grayish and reddish coloration of urine right from the origin of disease is incurable; and if these signs and symptoms appear at later stage, then the condition is incurable. In the latter type, attributes of *maja* etc., need not to be present. Alternatively, it can be explained that when at a later stage, any type of *prameha* gets associated with *vayu* and characterized by grayish and reddish coloration of urine, and then it also

becomes incurable. In addition when *kaphaja* and *pittaja* types of *prameha* are associated with the passage of *maja* etc., in the urine, they become incurable. It is stated, "All types of *prameha*, if not treated in time, leads to *madhumeha* and become incurable" ⁷⁶

1. *Kaphaja prameha* (progressive stage from pre-diabetic to diabetes mellitus type-2)

- *Udakameha* – Osmotic diuresis (having characteristic similar to that of water)
 - Pre-diabetic stage - hyperglycemia causes decrease reabsorption of water and excessive loss of water through urine.
- *Ikshumeha* – Alimentary glycosuria (having characteristic similar to sugarcane juice)
 - Pre-diabetic stage when liver is unable to metabolize excessive glucose due to hepatic insulin resistance and thus presence of glucose in urine.
- *Sandra meha*, and
- *Sandraprashada meha* – (layered urine: 3 layers: a top layer of chylomicrons, a middle layer rich in protein, and a bottom layer containing fibrin clots and cellular debris)
 - Intermediary stage between pre-diabetic and diabetic mellitus start with the involvement of kidneys.
- *Lalameha* – Albuminuria (heavy whitish foam in urine)
 - Progressive stage of diabetes mellitus type-2 which may show the presence of albumin.
- *Shuklameha* – (urine having white colour like that of pasted flour)
 - Progressive stage of diabetes mellitus type-2 with the further derangement in the functioning of nephrons (proteinuria).
- *Shanaimeha* – Reduced urinary flow (reduced urinary flow with increased frequency)
 - Stage of diabetes involving advanced nephropathy. Infective and reduced urinary flow.
- *Shitameha* – (the patient gets frequent micturition which is exceedingly sweet and cold)
 - Stage of kidney failure due to diabetic nephropathy presence of excessive ammonical substance in urine.
- *Sukrameha* – Spermaturia (patient passes semen like urine or urine mixed with semen)
 - Autonomic diabetic neuropathy leading to retrograde ejaculation of sperm.

⁷⁶ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

2. Pittaja prameha- (Stage of infection & inflammation in diabetes)

- *Ksharameha*- the patient passes urine having the smell, color, taste and touch like those of alkalies. (pH of urine become alkaline)
 - Increased urinary pH due to UTI in diabetes.
 - Alkaline fermentation causes an ammoniacal smell, and patients with diabetic ketoacidosis produce urine that may have a sweet or fruity odor.
- *Kalameha*- the patient passes black color urine.
 - Highly concentrated urine due to dehydration.
- *Nilameha*- the patient passes urine having sour taste and color like that of the feather of *casa* bird.
 - Blue colour urine indicative of bacterial urinary tract infection
- *Raktameha*- the patient passes urine having red colour, saline taste and smell like that of raw fish.
 - Microscopic hematuria.
- *Manjishtameha*- the patient passes frequent urine having the smell like that of raw flesh and color like that of the juice of *manjistha* (*Rubia cordifolia Linn.*)
 - Gross hematuria due to UTI
- *Haridrameha*- the patient passes urine having pungent taste and color like that of the juice of *haridra* (*Curcuma longa Linn.*)
 - dark yellow color urine due to dehydration. Highly concentrated urine due to UTI/ dark yellow color due to jaundice.

3. Vataja prameha- (Type-1 Diabetes mellitus)

- *Vasameha* - Lipiduria (presence of lipid in urine) in Nephrotic syndrome associated with type-1 diabetes mellitus (30-40%) known as Kimmelstiel –Wilsone Syndrome.
- *Majjameha*– presence of bone marrow.
- *Lasikameha/ Hastimeha*- Proteinuria/ diabetic ketoacidosis due to diabetes mellitus
- *Ojomeha/ Madhumeha*- Type – 1 Diabetes mellitus

Parameter of urinalysis used in above

1. Physical parameters

- Color
 - *Raktameha, haridrameha, majjisthameha, kalameha* etc.
- Appearance
 - Cloudy: *Shuklameha*
 - Layered: *Sandrameha, Sandraprasadameha*.
- Foamy
 - *Lalameha*
- Temperature

- *Shitameha*

2. Chemical parameters

- pH
 - *Ksharameha*
- Specific Gravity
 - *Udakameha*

3. Microscopic Examination

- Hematuria
 - *Manjisthameha*
- Red blood casts
 - *Raktameha*
- Crystalluria
 - *Siktameha*
- Leukocytes
 - *Shuklameha*
- Nitrite
 - *Shitameha*
- Protein
 - *Lalameha, Lasikameha*
- Blood
 - *Raktameha*
- Glucose
 - *Ikshumeha, Madhumeha*
- Bilirubin
 - *Haridrameha*

Vivid description of *manjisthameha*, *raktameha*, *siktameha* clearly indicate evolved observation skills of physicians. Analyzing the details of urine characteristics the scientific approach of Ayurveda is established. It is really appreciable that a disease can be classified and identified at every stage merely by urinalysis.

Importance of Barley

Barley should constitute the principal ingredient of food of the patient suffering from *prameha*. The patient suffering from *kaphaja prameha* should take eatable prepared of barley mixed with honey.

Barley soaked in the decoction of *triphala* and kept overnight should be mixed with honey. It is a refreshing (*tarpana*) diet. It should be taken by the patient suffering from *prameha* regularly to overcome the disease. Barley should be soaked separately with each of decoctions prescribed for the treatment of *kaphaja prameha* and taken by the

patient in the form of *saktu* (roasted flour), *apupa* (pan-cake), *dhana* (fried barley) and other types of eatables along with jaggery.

Various eatables prepared from the barley or bamboo seed or wheat previously eaten by asses, horses, cows, swans and deer and collected from their dung should be given to the patient suffering from *prameha*.

Importance of Barley in Diabetes

Charak gives much emphasis on the use of barley (*yava*) in *prameha*. Barley has hypoglycemic effect along with its potent lipid reducing effect and it is best *ruksha* diet that helps in depleting excess of fat while providing essential energy required for maintaining daily life. Dutch researchers used a crossover study with 10 healthy men to compare the effects of cooked barley kernels and refined wheat bread on blood sugar control. The men ate one or the other of these grains at dinner, then were given a high glycemic index breakfast (50g of glucose) the next morning for breakfast. When they had eaten the barley dinner, the men had 30% better insulin sensitivity the next morning after breakfast⁷⁷.

Scientists at the Functional Food Centre at Oxford Brookes University in England fed 8 healthy human subjects *chapatis* (unleavened Indian flatbreads) made with 0 g, 2g, 4g, 6g or 8g of barley beta-glucan fiber. They found that all amounts of barley beta-glucan lowered the glycemic index of the breads, with 4g or more making a significant difference⁷⁸

In a crossover study involving 17 obese women at increased risk for insulin resistance, USDA scientists studied the effects of 5 different breakfast cereal test meals on subjects' insulin response. They found that consumption of 10g of barley beta-glucan significantly reduced insulin response⁷⁹

University of Connecticut researchers reviewed 8 studies evaluating the lipid-reducing effects of barley. They found that eating barley significantly lowered total cholesterol,

⁷⁷ Sushruta. Chikitsa Sthana, Cha.23 Sopha Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Acharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁷⁸ Sushruta. Sutra Sthana, Cha.17 Amapkweshaneeya Adhyaya verse 3 In: Jadavaji Trikamji Acharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

⁷⁹ Vaghata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 21-42. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

LDL (“bad”) cholesterol, and triglycerides, but did not appear to significantly alter HDL (“good”) cholesterol⁸⁰.

Barley intake significantly reduced serum cholesterol and visceral fat, both accepted markers of cardiovascular risk⁸¹. 25 adults with mildly high cholesterol were fed whole grain foods containing 0g, 3g or 6g of barley beta-glucan per day for five weeks, with blood samples taken twice weekly. Total cholesterol and LDL (“bad”) cholesterol significantly decreased with the addition of barley to the diet⁸². Thus use of barley is very beneficial in diabetes.

Contemporary management of *prameha*

Disease management: 1. Wholesome diet 2. Exercise 3. Pacification of *dosha*

Important medicines: 1. *Shilajatu* 2. *Asana* 3. *Jambu* 4. *Yashada* 5. *Kumbha* 6. *Haridra* 7. *Amalaki* 8. *Tikta rasa*

Pacification Treatment

Type	Medicine	Dose	Time	Vehicle
<i>Kapha dominant</i>	1. Juice of <i>Bilva</i> leaves	10-20 ml	Between two meals, two times	Milk
	2. Juice of <i>nimba</i> leaves	10-20 ml	Between two meals, two times	Milk
	3. <i>Shilajatu rasayana</i>	250-500 mg	Between two meals, two times	Milk
	4. <i>Chandraprabha</i>	250-500 mg	Between two meals, two times	Milk
	5. <i>Lodhrasava</i>	10-20 ml	Between two meals, two times	Milk

⁸⁰ Madhavakara. Madhava Nidanam (Roga vinischaya). Translated from Sanskrit by K. R. Srikantha Murthy. 8th ed. Varanasi: Chaukhamba orientalia;2007.pp–

⁸¹ Sushruta. Nidana Sthana, Cha.11 Grandhiapachiarbudagalaganda Nidana Adhyaya verse 13-14 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhamba Orientalia;2005. p.1.

⁸² American Journal of Clinical Nutrition. November 2004; 80(5):1185-93.

Type	Medicine	Dose	Time	Vehicle
	6. <i>Asanadi kwatha</i>	10-20 ml	Between two meals, two times	Milk
Pitta dominant	1. <i>Shatavryadi decoction</i>	20-40 ml	Between two meals, two times	–
	2. <i>Jambavasava</i>	10-20 ml	Between two meals, two times	–
	3. <i>Vasanta kusumakar rasa</i>	60-120 mg	Between two meals, two times	–
Vata dominant	1. <i>Trivanga bhasma</i>	120-500 mg	Between two meals, two times	Milk
	2. <i>Vasanta kusumakar rasa</i>	60-120 mg	Between two meals, two times	Milk

Researches on effect of herbs on diabetes

Research has shown that many of the herbs described have antioxidant properties, an anti-diabetic effect, and a beneficial effect on the lipid profile. Descriptions of few of them are as follows:

Curcuma neilgherrensis

Curcuma neilgherrensis Wight, in the dose of 400mg/kg, showed a mild reduction in blood glucose level at 3rd and 5th hour in normoglycemic mice; however, the observed decrease in blood glucose level was found to be statistically insignificant. Even though the drug failed to cease the hypoglycemia in the first hour after the glucose overload, it attenuated the same in later hours, but not in a significant manner.

The study reveals that *C. neilgherrensis* is having mild hypoglycemic potential and moderate antihyperglycemic effect. A clinical trial investigating the effects of combining *C. neilgherrensis* treatment with conventional therapy compared to the *C. neilgherrensis* alone showed that *C. neilgherrensis* significantly reduces the level of fasting blood

sugar, postprandial blood glucose level, glycosylated hemoglobin, serum cholesterol, LDL and urine sugar⁸³⁸⁴

Gymnema Sylvester

Meshashringi (*Gymnema Sylvester* (Retz.) R.Br.; Gurmar) targets several of the etiological factors associated with diabetes, including chronic inflammation, obesity and pancreatic B-cell function⁸⁵. In a study on rats with streptozotocin – induced diabetes, *G. sylvestre* treatment resulted in 30% increase in total pancreatic weight and a significant increase in the number of islets and number of B-cells per islet. The regenerated pancreatic tissue resulted in complete control of fasting blood glucose levels within 20-60 days. Normal rats in this study did not experience an increase in insulin release when treated with *G. Sylvestre* extract, indicating that this herb has a normalizing effect on the blood glucose and may, therefore, be safer than conventional oral hypoglycemic agents such as sulphonylureas⁸⁶. Several clinical studies have demonstrated that *G. Sylvestre* effective in decreasing blood glucose levels in patients with type 1 and type 2 diabetes⁸⁷⁸⁸⁸⁹. Two (2) clinical trials investigated the effects of combining *G. Sylvestre* treatment with conventional therapy compared to the conventional therapy alone. In 22 patients with type 2 diabetes, treatment with *G. Sylvestre* extract significantly reduced

⁸³ Mahalakshmiapuram PS, Ramachandran A, Nishtheswar K, Chandola HM. A preface study on exploring the pharmacodynamics of Curcuma neilgherrensis Wight- A folklore medicine. Indian J of Traditional Knowl 2013; 12(2): 288-294

⁸⁴ M Prasad Shyam, Chandola HM, Ravishankar. A clinico- experimental study to evaluate the therapeutic efficacy of Curcuma neilgherrensis Weight in the management of MadhuMeha (Type 2 Diabete Mellitus). PhD thesis. Institute of Post Graduate Teaching and Resaerch in Ayurveda, Gujarat Ayurveda University, Jamnagar, India, 2011

⁸⁵ Leach MJ. *Gymnema sylvestre* for diabetes mellitus: A systematic review. J Alter Complement Med 2007; 13: 977-983

⁸⁶ Shanmugasundaram ER, Gopinath KL, Radha Shanmugasundaram K, Rajendran VM. Possible regeneration of the islets of Langerhans in streptozocin- diabetic rats given *Gymnema sylvestre* leaf extracts. J Ethnnopharmacol 1990; 30: 265-279

⁸⁷ Leach MJ. *Gymnema sylvestre* for diabetes mellitus: A systematic review. J Alter Complement Med 2007; 13: 977-983

⁸⁸ Baskaran K, Kizar Ahamath B, Radha Shanmugasundaram K, Shanmugasundaram ER. Antidiabetic effect of a leaf extract from *Gymnema sylvestre* in non-insulin – dependent diabetes mellitus patients. J Ethnnopharmacol 1990; 30: 295-300

⁸⁹ Shanmugasundaram ER, Rajeswari G, Baskaran K, et al. Use of *Gymnema sylvestre* leaf extract in the control of blood glucose in in insulin- dependent diabetes mellitus. J Ethnnopharmacol 1990; 30: 281-294

blood glucose, glycosylated hemoglobin, and glycosylated plasma proteins, whereas, with conventional treatment alone (i.e. glibenclamide or tolbutamide), these values increased or remain the same. The patients receiving the herbal extract were able to decrease the dosage of their conventional drug, and five patients were able to discontinue the drug entirely and maintain their glucose level using only *G. sylvestre*⁹⁰. In 27 patients with type 1 diabetes, *G. Sylvestre* treatment reduced fasting blood glucose, glycosylated hemoglobin, and glycosylated plasma protein levels⁹¹.

Tinospora cordifolia

Aqueous and alcoholic extracts of *guduchi* (*Tinospora cordifolia* (Willd.) Hook. f. & Thomson) reduced glucose levels in rats with alloxan- induced diabetes. The antihyperglycemic effect may be due to pancreatic islet free- radical- scavenging activity. This herb also lowers the levels of tissue and serum cholesterol, phospholipids, and free fatty acids⁹²⁹³

Swertia chirayita

Kiratatikta (*Swertia chirata* (Roxb.) Buch.-Hum; also known as *swertia chirayita* (Roxb.) H. Karst.) is a potent anti-diabetic herb. In a pilot study, *swertia chirata* produced a significant decrease in fasting and postprandial blood glucose level in patients with diabetes. It contains swerchirin, a xanthone found in the *swertia* species of plants. Xanthones are a unique class of biologically active compounds with antioxidant properties. Research has shown swerchirin produces a significant decrease in blood

⁹⁰ Baskaran K, Kizar Ahamath B, Radha Shanmugasundaram K, Shanmugasundaram ER. Antidiabetic effect of a leaf extract from *Gymnema sylvestre* in non-insulin – dependent diabetes mellitus patients. J Ethnnopharmacol 1990; 30: 295-300.

⁹¹ Shanmugasundaram ER, Rajeswari G, Baskaran K, et al. Use of *Gymnema sylvestre* leaf extract in the control of blood glucose in insulin- dependent diabetes mellitus. J Ethnnopharmacol 1990; 30: 281-294

⁹² Stanely P, Prince M, Menon VP. Hypoglycaemic and other related actions of *Tinospora cordifolia* roots in alloxan induced diabetic rats. J Ethnnopharmacol 2000; 70: 9-15

⁹³ Stanely Mainzen Prince P, Menon VP. Antioxidant action of *Tinospora cordifolia* roots in alloxan induced diabetic rats. J Ethnnopharmacol 1999; 64: 53-57

glucose levels in rat models⁹⁴⁹⁵⁹⁶⁹⁷. A 60% decrease in blood glucose induced by swerchirin was accompanied by a marked depletion in B- granules and insulin in the pancreatic islets. Glucose uptake and glycogen synthesis in the diaphragm muscle was significantly enhanced in vitro by the serum of swerchirin- treated rats. It was therefore concluded that swerchirin lowers blood glucose levels by stimulating insulin release from the islets of Langerhans⁹⁸.

Enicostema littorale

Mamejaka (*Enicostema littorale* Blume) is used as a single herb and also as a part of an anti-diabetic mixture⁹⁹. In a clinical study on patients with type 2 diabetes, *E. littorale* reduced blood glucose and prevented the progression of diabetic complications. There was a significant improvement in the lipid profile, blood pressure, and kidney function¹⁰⁰. It significantly reduced blood glucose and lipid peroxides in rats with alloxan- induced diabetes, and increased superoxide dismutase, catalase, and glutathione peroxidase¹⁰¹. In studies on rats with streptozotocin- induced type 1 diabetes, *E. littorale* significantly

⁹⁴ Bajpai M, Asthana RK, Sharma NK, et al. Hypoglycemic effect of swerchirin from the hexane fraction of *Swertia chirayita*. Plant Med 1991; 57: 102-104

⁹⁵ Sekar BC, Mukherjee B, Chakravarti RB, Mukherjee SK. Effect of different fractions of *Swertia chirayita* on the blood sugar level of albino rats. J Ethnopharmacol 1987; 21: 175-181

⁹⁶ Chandrasekar B, Bajpai MB, Mukherjee SK. Hypoglycemic activity of *Swertia chirayita* (Roxb ex Flem) Karst. Indian J Exp Bio. 1990; 28: 616-618

⁹⁷ Saxena AM, Bajpai MB, Murthy PS, Mukherjee SK. Swerchirin induced blood sugar lowering of streptozotocin treated hypoglycemic rats. Indian J Exp Biol 1993; 31:178-181

⁹⁸ Saxena AM, Bajpai MB, Murthy PS, Mukherjee SK. Mechanism of blood sugar lowering by a swerchirin- containing hexane fraction (SWI) of *Swertia chirayita*. Indian J Exp Biol 1993; 31:178-181

⁹⁹ Shanmugasundaram ER, Gopinath KL, Radha Shanmugasundaram K, Rajendran VM. Possible regeneration of the islets of Langerhans in streptozocin- diabetic rats given *Gymnema sylvestre* leaf extracts. J Ethnopharmacol 1990; 30: 265-279

¹⁰⁰ Upadhyay UM, Goyal RK. Efficacy of *Enicostemma littorale* in type-2 diabetic patients. Phytother Res 2004; 18:233-235

¹⁰¹ Prince PS, Srinivasan M. *Enicostemma littorale* Blume aqueous extract improves the antioxidant status in alloxan induced diabetic rat tissues. Acta Pol Pharm 2005; 62: 363-367

reduced glucose, cholesterol, and triglyceride levels¹⁰², and ameliorated diabetic nephropathy. Serum creatinine and urea were significantly decreased and glomerular function improved¹⁰³. In rats fed a hypercholesterolemic diet, *E. littorale* decreased serum cholesterol, triglycerides, LDL, VLDL, liver, and kidney cholesterol levels, and lipid peroxidation levels. There was an increase in HDL and an increase in reduced glutathione levels¹⁰⁴.

A pilot study on an herbal mixture containing *tejapatra* (*Cinnamomum Tamala*)¹⁰⁵¹⁰⁶, *pushkarmula* (*Inula racemosa*), *mamejjaka* (*E.littorale*), *meshashringi* (*Gymnema Sylvestre*), and *jambu* (*Syzygium cumini*) seeds with *karvellaka* (bitter gourd; bitter melon; *Momordica charantia*) juice, administered at a dose of 5g twice a day before meals, decreased fasting and post- prandial blood glucose levels in patients with diabetes¹⁰⁷. *Avartaki* (*Cassia auriculata Linn.*) and *methika* (*Trigonella foenum-graecum*) as single herbs and decoction of *nimba* or *neem* (*Azadirachta indica A.juss;*) have also demonstrated blood glucose- lowering action³³. In a clinical study on patients

¹⁰² Vishwakarma SL, Sonawane RD, Rajani M, Goyal RK. Evaluation of effect of aqueous extract of *Enicostemma littorale* in streptozotocin –induced type- 1 diabetic rats. Indian J Exp Biol 2010; 48:26-30

¹⁰³ Sonawane RD, Vishwakarma SL, Lakshmi S, et al. Amelioration of STZ-induced type 1 diabetic nephropathy by aqueous extract of *Enicostemma littorale* Blume and swertiamarin in rats. Mol Cell Biochem 2010; 340:1-6

¹⁰⁴ Vasu VT, Modi H, Thaikottathil JV, Gupta S. Hypolipidaemic and antioxidant effect of *Enicostemma littorale* Blume aqueous extract in cholesterol fed rats. J Ethnopharmacol 2005; 101: 277-282.

¹⁰⁵ Chandola HM, Tripathi S N. Hypoglycemic response of *C.tamala* in diabetes. In: Bajaj JS,ed. Diabetes Mellitus in developing Countries. New Delhi: Interprint, 1984: 383-386.

¹⁰⁶ Chandola HM, Tripathi S N, Udupa KN. Effect of *C.tamala* on plasma insulin vis-à-vis blood sugar in patients of diabetes mellitus. J Res Ayurveda Siddha 1980;1:3455-357.

¹⁰⁷ Singh B, Singh G, Vyas SN, Chandola HM. The role of Virechana and herbal drugs in the management of MadhuMeha (diabetes mellitus). MD (Ayu) thesis. Institute of Post Graduate Teaching and Research in Ayurveda, Gujarat Ayurveda University, Jamnagar, India, 1992

with type 2 diabetes, neem showed significant hypoglycemic effect. The effect of *neem* was comparable to that of glibenclamide¹⁰⁸¹⁰⁹.

The herb *gokshura* (*Tribulus Terrestris Linn.*)¹¹⁰, *asana* (*Pterocarpus marsupium Roxb.*)¹¹¹, *kulatha* (*Vigna unguiculata* (Linn.) Walp.), and *saptaparna*¹¹² (*Alstonia scholaris* (Linn.) R.Br.) is also beneficial in treating *prameha*. These herbs can be used in different combinations, depending on the doshic involvement and severity of illness. An herbal mixture comprised of one part each of *karvellaka* (bitter gourd; bitter melon; *Momordica charantia*), *jambu* (*Syzygium cumini*), *gurmar* (*Meshashringi G.sylvestre*), and *amra* (*Moringa indica Linn.*), taken along with *shilajit*, was investigated in a clinical study on 805 patients with diabetes. The results showed a statistically significant reduction in fasting and postprandial blood glucose along with clinical improvement (website of India's Central Council for Research in Ayurveda and Siddha).

Prameha is described as a set of complex clinical disorders characterized by frequent abnormal micturition, with the etiology involving genetic predisposition as well as diet and life style. The role of stress and obesity in the pathogenesis is also elaborately described in *prameha* have much in common with those described for obesity, metabolic syndrome and diabetes mellitus. The management of *prameha* emphasizes dietary and life style recommendation and herbal preparations. Due to the richness and complexity of the compound in plants, herbal therapy has always been thought to act on multiple targets. Even one single compound can have multiple target which acts as a double edge sword in managing diabetes mellitus. *Medhya* or mental health promoting drugs, if added along with anti-diabetic therapy, will further potentiate anti-diabetic effect of the principal drug by counteracting stress. Ayurveda and modern medicine both are complimentary to each other. Simultaneous administration of Ayurvedic drug will not only potentiate therapeutic efficacy of modern drug rather it will also counteract or reduce the adverse effects of the modern drug, if any; to lead the patient a healthy and happy life. Moreover, organ specific *rasayana* may be added for prevention and cure of complications. Ayurvedic drugs should be use in its natural form without disturbing its

¹⁰⁸ Waheeda A, Miana GA, Ahmead SI. Clinical investigation of hypoglycemic effect of seeds of *Azadirachata indica* in type-2 (NIDDM) diabetes mellitus. Pak J Pharm Sci 2006; 19: 322-325

¹⁰⁹ Khosla P, Bhanwra S, Singh J, et al. A study of hypoglycaemic effect of *Azadirachata indica* (Neem) in normal and alloxan diabetic rabbits. Indian J Physiol Pharmacol 2000;44:69-74

¹¹⁰ Amin A, Lotfy M, Shafiullah M, Adeghate E. The protective effect of *Tribulus terrestris* in diabetes. Ann NY Acad Sci 2006; 1084: 391-401

¹¹¹ Anonymous. *Sahasrayogam*. 23rd ed. Alappuzha, Kerala, India: Vidyarambam Publisheres, 2000:93

¹¹² Dasa G. *Bhaishajyaratnavali*. Varanasi, India: Choukhamba Sanskrit Sansthan, 2000

natural combination/holistic principle of the drug. Single drug may have composite fractions and each fraction has its own medicinal value. Polyherbal combination potentiate therapeutic efficacy of a particular ingredient of the formulation and also counteract adverse effect if present in the combination. Instead of isolating a particular alkaloid it is suggested that the Ayurvedic drug should be used as a whole. All patients of diabetes are not similar, so a stepped care treatment is recommended. In early stage of disease and patients having *kaphaja* constitution, it is better to use Ayurvedic drugs alone. In acute stage and having *pittaja* constitution of patients wherever found necessary, oral insulin promoter may be added. In chronic stage and having *vataja* constitution, insulin therapy may also be added as these cases are insulin dependent.

Ayurveda has a vast array of herbs and herbal mixtures that are used in the treatment of *prameha*. A large number of these herbs have demonstrated efficacy in research investigations. The herbs have various properties including hypoglycemic, antihyperglycemic, hypolipidemic, antihyperlipidemic, insulin promoting and antioxidant properties. Some of these herbs are capable of counteracting stress induced catecholamines, which are proven insulin antagonists. Hence, the choice of the herb or combination of herbs for the patient depends upon the stage of the disease, disturbances in the psychophysiologic constitution of the patient, and mode of action of the herbs. Further research is needed in the clinical setting to elucidate the Ayurvedic modalities that are effective in the management of obesity, metabolic syndrome and diabetes mellitus in light of their similarities with *prameha*¹¹³.

Future Scope for Research

1. Fundamental studies to observe link between *meda* (adipose tissue) and urinary disorders are needed.
2. Searching herbs described in the chapter for their potential in reducing FFAs and blood glucose level.
3. Clinical studies to evaluate the efficacy of anti-lipidemic drugs and its comparison with hypoglycemic drugs in the management of type-2 diabetes mellitus.
4. Elaborating Urinalysis by adding new parameters like temperature for determining the abnormal physical characteristic of urine in different disease like assessing the presence of ketones in urine by low temperature of urine.
5. Analysis of urine at different stages of diabetes for the assessment of its progression and prognosis.

Related Chapter

- Prameha Nidana

¹¹³ Sharma H, Chandola HM. Prameha in Ayurveda: Correlation with Obesity, Metabolic Syndrome, and Diabetes Mellitus. Part 2- Management of Prameha. The Journal of Alternative and Complementary Medicine. 2011. 17(7):589-599

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Kushtha Chikitsa

“Chikitsa Sthana Chapter 7. Management of Kushtha (Skin Diseases)”

“Abstract”

Kushtha Chikitsa is a compendium of various skin diseases, divided into two groups i.e. major (“maha kushtha”) and ii. minor (“kshudra kushtha”). Seven types of major and eleven types of minor skin disorders or dermatosis are described here as guidelines to understand diagnosis and treatment principles of various skin disorders. Etiological factors including antagonistic food, suppression of natural urges especially vomiting, quick change in temperature, exposure to excess heat, and sudden biological changes in fluid volume and muscle mass cause “kushtha”. Clinical features of skin disorders, their diagnosis according to dominance of “dosha” as well as their prognosis and treatment is described in detail. Panchakarma (five body purification procedures) are emphasized for management of skin diseases and prevention of recurrence. Local scrapping method for bloodletting in smaller lesions and venesection for large lesions, therapeutic purgation are important treatment measures in “kushtha”. Medicinal preparations including ghee, formulations for internal administration and external application on skin lesions are described. “Keywords”: Skin diseases, dermatology, discoloration, itching, saptaka dravya, kotha, Kandu, kapala, udumbara, maṇḍala, rishyajihva, puṇḍarika, sidhma, kakaṇaka, ekakushtha, charmakhya, kitibha, vipadika, alasaka, dadru, charmadala, pama, visphotaka, shataru, vicharchika, kshudrakushtha, mahakushtha, matsyashakalopamam, hasticharmavat, kinakharasparsham, lelitaka, madhvasava, shvetakaraviradya tailam, tiktekshvakvadi taila, kanakakshiritaila, tiktāṣṭpalakam ghrita, mahatiktakam ghritam, mahakhadiram ghrita, shvitra, daruna, charunam, kilasa, psoriasis, scabies, ringworms, eczema

Introduction

Skin is the largest organ of the body constituting the integumentary system, comprising of skin, hair and nails etc. It constitutes 16% of body weight. Skin has the total surface area varying 1.2-2.2 sq.m. It is a combined product of ectoderm as well as of mesoderm. “Kushtha” (skin disorder or dermatosis) is a chronic disease which presents with ugly colors / complexion/ texture and altered tactile perceptions of the skin. The word “kushtha” is derived from “kushnati vapuh” meaning that which alters complexion of body by extracting.

All the types of “kushtha” are caused due to vitiation of “tridosha” with involvement of skin, blood, lymph and muscular issue. “Kushtha” is often translated in English as leprosy, which is not correct because of absence of *Mycobacterium leprae*, though the appearance of skin lesions of “mahakushtha” resemble leprosy. Etiological factors of “kushtha” are antagonistic food, toxins released from suppressed natural urges, and practices harmful to the blood and skin. It is “tridoshaja” disease, but because of

variable proportion of one specific “dosha”, causes variation in features and prognosis. Variable doshic impact on skin, gives different color, complexion, pain sensitivity, texture, deformities, discharge, and tactile perception. Generalized symptoms appear only in prodromal stage.

In the context of “kushtha”, four aspects of skin are important. First is that it consists of six layers as described in [Cha. Sa.Sharira Sthana chapter 4], and each layer is seat of specific type of gradually progressing “kushtha”.

Second aspect is that it is a sensory organ too, and is seat of “vata dosha”. In case of “kushtha” vitiated “vata” in skin manifests as, horripilations, numbness, and loss of tactile perceptions.

Third aspect, skin is the sub-tissue or “upadhatu” of “mamsa dhatu”, texture of skin depends upon muscle texture, so the dermal deformities spread upto the mamsa dhatu or musculature and skin texture causing ugly shape of skin lesions. Lastly, affliction of deeper layers of skin deteriorates the ulcer healing ability of skin and damages the defense mechanisms against enormous pathological invasions. Thus, the “kushtha” stands for long time with more and more uglier shape.

This chapter is placed after Prameha Chikitsa, because one of the complications of “prameha” is carbuncle, which penetrates deeper into the muscles and is very similar to “kushtha” but the etio-pathogenesis is very different. Indulging in heavy to digest food products is responsible for increase of “kleda” (excess moisture) in the body. Such “kleda” is carried by “mutra” and leads to increase in quantity and frequency of “mutra” leading to pathogenesis of “prameha”. When same “kleda” spreads throughout the body causes “shaithilyata” (looseness of body tissue) and also vitiates “meda dhatu”. Vitiated “kleda” and “meda” are responsible for “mamsa dusti” which is responsible for “pidika” genesis and manifest as change in color, texture and sensation of “tvacha” (skin). This leads to various skin diseases.

Another disease named “visarpa” is explained later in 21st chapter of this section also has these components commonly, but due to prominence of impurity in blood that is a rapidly spreading disease whereas “kushtha” is slow progressing disease. Whereas “visarpa” advances into the visceral parts, “kushtha” spreads horizontally and limited to skin only.

All the “kushtha” are curable except “mahakushtha” named “kakanak”, because it does not have any systemic involvements. At the end of the chapter, three types of skin disorders caused by hypo-pigmentations are mentioned as “shwitra” with their treatments.

Sanskrit Text, Transliteration and English Translation

अथातः कुष्ठचिकित्सितं व्याख्यास्यामः॥१॥

इति ह स्माह भगवानात्रेयः||२||

हेतुं द्रव्यं लिङ्गं कुष्ठानामाश्रयं प्रशमनं च। शृणविनवेश! सम्यग्विशेषतः स्पर्शनधनानाम्॥३॥

athātah kuṣṭhacikitsitam vyākhyāsyāmahi॥१॥

iti ha smāha bhagavānātrēyah॥२॥

hētuṁ dravyam liṅgam kuṣṭhānāmāśrayam praśamanam ca। śr̄ṇvagnivēśa!
samyagviśēṣataḥ sparśanaghnānām॥३॥

athAtaH kuShThacikitsitaM vyAkhyAsyAmaH॥१॥

iti ha smAha bhagavAnAtreyaH॥२॥

hetuM dravyaM li~ggaM kuShThAnAmAshrayaM prashamanaM ca| shRuNvagnivesha!
samyagvisheShataH sparshanaghnAnAm॥३॥

Now we shall expound the chapter “Kushta Chikitsa” (Management of skin diseases).
Thus said Lord Atreya.

Etiology, factors essential for genesis of disease, symptoms and signs, premonitory features, pathogenesis along with treatment is being mentioned. Listen Agnivesha! The specialty of this disease is that there is loss of integrity of seat of “sparshanendriya” i.e. “tvacha”. [1-3]

Etiology

विरोधीन्यन्नपानानि द्रवस्त्रिंश्चगृहणि च। भजतामागतां छर्दिं वेगांश्चान्यान्प्रतिघनताम्॥४॥

व्यायाममतिसन्तापमतिभुक्त्वोपसेविनाम्। शीतोष्णलङ्घनाहारान् क्रमं मुक्त्वा निषेविणाम्॥५॥

घर्मश्रमभयार्तानां द्रुतं शीताम्बुसेविनाम्। अजीर्णाद्यशिनां चैव पञ्चकर्मापचारिणाम्॥६॥

नवान्नदधिमत्स्यातिलवणाम्लनिषेविणाम्। माषमूलकपिष्टान्नतिलक्षीरगुडाशिनाम्॥७॥

व्यवायं चाप्यजीर्णऽन्ने निद्रां च भजतां दिवा। विप्रान् गुरुन् धर्षयतां पापं कर्म च कुर्वताम्॥८॥

virōdhīnyannapānāni dravasnidhagurūṇi ca| bhajatāmāgatām chardim
vēgāmścānyānpratighnatām॥४॥

vyāyāmamatisantāpāmātibhuktvōpasēvinām। sītōṣṇalaṅghanāhārān kramam muktvā
niṣēviṇām॥५॥

gharmaśramabhayārtānām drutam sītāmbusēvinām। ajīrṇādhyaśinām caiva
pañcakarmāpacāriṇām॥६॥

navānnadadhimsyātilavaṇāmlaniṣēviṇām|
māṣamūlakapiṣṭānnatilakṣīragudāśinām॥७॥

vyavāyam cāpyajīrnē'nnē nidrām ca bhajatām divāl| viprān gurūn dharsayatām pāparām karma ca kurvatām||8||

virodhInyannapAnAni dravasnigdhagurUNi ca| bhajatAmAgatAM chardiM
vegAMshcAnyAnpratighnatAm||4||

vyAyAmamatisantApamatibhuktvpasevinAm| shltoShNala~gghanAhArAn kramaM
muktvA niSheviNAm||5||

gharmashramabhayArtAnAM drutaM shltAmbusevinAm| ajIrNAdhyashinAM caiva
pa~jcakarmApacAriNAm||6||

navAnnadadhimsyAtilavaNAmIaniSheviNAm|
mAShamUlakapiShTAnnatilakShIraguDASHinAm||7||

vyavAyaM cApyajIrNe~anne nidrAM ca bhajatAM divA| viprAn gurUn dharShayatAM
pApaM karma ca kurvatAm||8||

"Viruddha annapana", excessive intake of "drava, snigdha" and "guru dravyas"; restraining natural urges like vomiting etc; exercising or coming in contact of excessive heat after eating excessive quantity of food. Indulging in habits such as, taking "shita" quality food etc. followed by "ushna" quality or either fasting followed by heavy meals. Having cold water immediately after exposure to scorching sun, exertion and fear, eating uncooked or raw foods or having meals although previously taken meals have not been digested. Indulging in food and other habits which have been restricted during the phase of Panchakarma.

Consuming new grains, curds, fish, excessive salty and sour food items. Black grams, radish, food prepared from flour paste, sesame, milk and jaggery products. Indulging in sexual activity even if the food is not well digested (sexual intercourse immediately after taking food), sleeping during day time, insulting peers like brahmin / guru and other respected personal and doing sinful acts are the etiological and risk factors of "kushtha". [4-8]

Pathogenic factors

वातादयस्त्रयो दुष्टास्त्वग्रक्तं मांसमम्बु च| दूषयन्ति स कुष्ठानां सप्तको द्रव्यसङ्ग्रहः||९||

अतः कुष्ठानि जायन्ते सप्त चैकाटशैव च| न चैकटोषजं किञ्चित् कुष्ठं समुपलभ्यते||१०||

vātādayastrayō duṣṭāstvagraktām māṁsamambu ca| dūṣayanti sa kuṣṭhānām saptakō
dravyasaṅgrahah||9||

ataḥ kuṣṭhāni jāyantē sapta caikādaśaiva ca| na caikadōṣajām kiñcit kuṣṭham
samupalabhyatē||10||

vAtAdayastrayo duShTAstvagraktaM mAMsamambu ca| dUShayanti sa kuShThAnAM
saptako dravyasa~ggraHaH||9||

ataH kuShThAni jAyante sapta caikAdashaiva ca] na caikadoShajaM ki~jcit kuShThaM samupalabhyate||10||

The vitiated three “doshas”-“vata, pitta, kapha” along with impaired “tvak, rakta, mamsa” and “ambu” together constitute seven essential entities which play role in pathogenesis of “kushtha”. “Kushtha” can be classified into seven “mahakushtha” (major skin disorders) and eleven “kshudrakushtha” (eleven minor skin disorders). Single “dosha” cannot cause “kushtha” on its own i.e. “kushtha” is not an “nanatmaja” (disease caused by single specific “dosha”) disease. [9-10]

Premonitory signs and symptoms

स्पर्शी जन्त्वमतिस्वेदो न वा वैवर्ण्यमुन्नतिः। कोठानां लोमहर्षश्च कण्डूस्तोदः श्रमः क्लमः॥११॥

व्रणानामधिकं शूलं शीघ्रोत्पत्तिश्चिरस्थितिः। दाहः [१] सुप्ताङ्गता चेति कुष्ठलक्षणमग्रजम्॥१२॥

sparśājñatvamatisvēdō na vā vaivarṇyamunnatiḥ| kōṭhānāṁ lōmahaṛṣaśca
kaṇḍūstōdah śramah klamah||11||

vraṇānāmadhikam śūlam śīghrōtpattiścirasthitih| dāhah [1] suptāṅgatā cēti
kuṣṭhalakṣaṇamagrajam||12||

sparsA~jatvamatisvedo na vA vaivarNyamunnatiH| koThAnAM lomaharShashca
kaNDUstodaH shramaH klamaH||11||

vraNAnAmadhikaM shUlaM shIghrotpattishcirasthitih| dAhaH [1] suptA~ggatA ceti
kuShThalakShaNamagrajam||12||

Decreased touch sensation, excessive sweating or absence of sweating (which may be localized or generalized), change in color (discoloration), papules on skin, horripilation, pruritus, pricking pain, physical exhaustion, mental fatigue, severe pain in ulcerated area, sudden appearance and chronic the ulcers, burning sensation, numbness are the premonitory symptoms of skin disease.[11-12]

Eighteen types of skin diseases

अत ऊर्ध्वमष्टादशानां कृष्टानां

कपालोदुम्बरमण्डलर्घ्यजैवृपुण्डरीकसिद्धकाकणकैकुष्ठचर्माख्य-किटिभविपादिकालसकदद्रुचर्मदल
पामाविस्फोटकशतारुविचर्चिकानां लक्षणान्युपदेक्ष्यामः॥१३॥

ata ūrdhvamaṣṭādaśānāṁ

kuṣṭhānāṁ kapālōdumbaramaṇḍalarśyajihvapuṇḍarīkasidhmakākaṇakaikakuṣṭhacarmā
khya-kiṭibhavipādikālasakadadrucarmadalapāmāvisphōṭakaśatārvicārcikānāṁ
lakṣaṇānyupadēkṣyāmaḥ||13||

ata UrdhvamaShTAdashAnAM

kuShThAnAMkapAlodumbaramaNDalarShyajihvapuNDarlkasidhmakAkaNakaikakuShT

hacarmAkhya-kiTimavipAdikAlasakadadrucarmadalapAmAvisphoTakashatArurvicarcikAnAMlakShaNAnyupadekShyAmaH||13||

Henceforth 18 types of “kushtha” alongwith their signs and symptoms are described viz. “kapāla, udumbara, maṇḍala, rṣyajihva, puṇḍarīka, sidhma, kākaṇaka, ekkuṣṭha, carmākhyā, kiṭibha, vipādikā, alasaka, dadru, charmadala, pāmā, visphōṭaka, śatāru” and “vicārchipikā”.[13]

Seven major kushtha

1. “Kapala Kushtha”

कृष्णारुणकपालाभं यदूक्षं परुषं तनु| कापालं तोदबहुलं तत्कुष्ठं विषमं स्मृतम्||१४||

kṛṣṇāruṇakapālābhāṁ yadrūkṣam̄ paruṣam̄ tanu| kāpālam̄ tōdabahulam̄ tatkuṣṭham̄ viṣamam̄ smṛtam||14||

kRuShNAruNakapAlAbhaM yadrUkShaM paruShaM tanu| kApAlaM todabahulaM tatkuShThaM viShamaM smRutam||14||

The clinical presentation of “kapala kushtha” is as follows:

“Color” — “kṛṣṇa” (blackish), “aruna” (reddish)

“Nature” – “kapāla” (similar to broken piece of earthen pot)

“Touch” – “rūkṣa” (dry), “paruṣa” (rough), “tanu” (thin)

“Associated symptoms” – severe pain

“Sadhya / sadyata” – Difficult to cure

2. “Udumbara kushtha”

दाहकण्डुरुजारागपरीतं लोमपिञ्जरम्| उदुम्बरफलाभासं कुष्ठमौदुम्बरं विदुः||१५||

dāhakaṇḍūrujārāgaparītaṁ lōmapiñjaram| udumbaraphalābhāsaṁ kuṣṭhamaudumbaraṁ viduh||15||

dAhakaNDUrujArAgaparItaM lomapi~jjaram| udumbaraphalAbhAsaM kuShThamaudumbaraM viduH||15||

The clinical presentation of “udumbara kushtha” is as follows:

“Color” – Similar to “udumbara” fruit

“Nature” – “rāgaparīta” (redness), “lōmapiñjara” (hair on the patch become brown)

“Associated symptoms” – burning sensation, pruritus and pain

3. “Mandala Kushtha”

श्वेतं रक्तं स्थिरं स्त्यानं स्निग्धमुत्सन्नमण्डलम्| कृच्छ्रमन्योन्यसंसक्तं कुष्ठं मण्डलमुच्यते॥१६॥

śvētar̥ raktaṁ sthiraṁ styānaṁ snigdhamutsannamaṇḍalam|
kṛcchramanyōnyasaṁsaktam̥ kuṣṭham̥ maṇḍalamucyatē॥16॥

shvetaM raktaM sthiraM styAnaM snigdhamutsannamaNDalam|
kRucchramanyonyasaMsaktaM kuShThaM maNDalamucyate॥16॥

The clinical features of “mandala kushtha” are as follows:

“Color” – white and red

“Nature” – “sthira” (slow progress), “styāna”/“ghana” (compact), “snigdha,” elevated round patches

“Associated symptoms” – patches are matted

“Sadhyasadhyata” – Difficult to cure

4. “Rishyajivha Kushtha”

कर्कशं रक्तपर्यन्तमन्तः श्यावं सवेदनम्| यदृश्यजिह्वासंस्थानमृष्यजिह्वं तदुच्यते॥१७॥

karkaśaṁ raktaparyantamantaḥ śyāvaṁ savēdanam|
yadṛśyajihvāsaṁsthānamṛṣyajihvam̥ taducyatē॥17॥

karkashaM raktaparyantamantaH shyAvaM savedanam|
yadRuShyajihvAsaMsthAnamRuShyajihvaM taducyate॥17॥

The clinical features of “rishyajivha kushtha” are as follows:

“Color” – “Rakta paryanta anta śyāvaṁ” (red in edges and brown inside)

“Nature” – “karkaśa” (rough), it resembles the tongue of “ṛṣya” ,a type of deer with blue testicles[Cha.Sa. Chikitsa Sthana 7 / 17 Chakrapani]

“Associated symptoms” – pain

5. “Pundarika Kushtha”

सश्वेतं रक्तपर्यन्तं पुण्डरीकदलोपमम्| सोत्सेधं च सदाहं च पुण्डरीकं तदुच्यते॥१८॥

saśvētar̥ raktaparyantam̥ puṇḍarīkadalōpāmām| sōtsēdhām̥ ca sadāhām̥ ca
puṇḍarīkam̥ taducyatē॥18॥

sashvetaM raktaparyantaM puNDarIkadalopamam| sotsedhaM ca sadAhaM ca puNDarikaM taducyate||18||

The clinical features of “pundarika kushtha” are as follows:

“Color” – White with red edges

“Nature” – resembles lotus petals, elevated patches

“Associated symptoms” – burning sensation

6. “Sidhma Kushtha”

श्वेतं ताम्रं तनु च यद्रजो [१] घृष्टं विमुचति। अलाबूपुष्पवर्णं तत् सिद्धमं प्रायेण चोरसि॥१९॥

śvētarṁ tāmrarṁ tanu ca yadrajō [1] ghṛṣṭam vimuñcati| alābūpuṣpavarṇam tat sidhmaṁ prāyēṇa cōrasi||19||

shvetaM tAmraM tanu ca yadrajo [1] ghRuShTaM vimu~jcati| alAbUpuShpavarNaM tat sidhmaM prAyeNa corasi||19||

The clinical features of “sidhma kushtha” are as follows:

“Color” – white coppery, color resembles flower of “alabu” (*lagenaria siceraria*)

“Nature” – thin

“Associated symptom” – particles resembling dust are observed, it is located mostly on chest due to dominance of “kapha” on “ura pradesh” [Cha.Sa Chikitsa Sthana 7/19 Chakrapani].

7. “Kakanaka Kushtha”

यत् काकणन्तिकावर्णमपाकं तीव्रवेदनम्। त्रिदोषलिङ्गं तत् कुष्ठं काकणं नैव सिद्ध्यति॥२०॥

yat kākaṇantikāvarṇamapākam tīvravēdanam| tridōṣaliṅgam tat kuṣṭham kākaṇam naiva sidhyati||20||

yat kAkAaNtikAvarNamApAkam tlrvavedanam| tridoShali~ggaM tat kuShThaM kAkAaNam naiva sidhyati||20||

The clinical features of “Kākaṇaka kuṣṭha” are as follows:

“Color” – resemble “gunjā” (*abrus precatorius*) i.e. red in color

“Nature” – does not get suppurated

“Associated symptoms” – Pain and incurable, all the three “doshas” are present

इति सप्तमहाकृष्णनि

iti saptamahākuṣṭhāni

iti saptamahAkuShThAni

This ends the explanation of seven “mahakushtha”.[14-20]

Eleven “kshudra kushta”

1.“Eka kuṣṭha”

अस्वेदनं महावास्तु यन्मत्स्यशकलोपमम्| तदेककुष्ठः

asvēdanam mahāvāstu yanmatsyaśakalōpāmām| tadēkakuṣṭam,

asvedanaM mahAvAstu yanmatsyashakalopamam| tadekakuShTaM,

The clinical features of “eka kushta” are as follows:

“Nature” – resembles scales of fish

“Location” – Extensive

2.“Charmakhya Kushtha”

चर्माख्यं बहलं हस्तिचर्मवत्||२१||

carmākhyam bahalam hasticarmavat||21||

carmAkhyam bahalaM hasticarmavat||21||

The clinical features of “charmakhya” are as follows:

“Nature” – skin is thick resembling elephant skin

3.“Kitibha Kushtha”

श्यावं किणखरस्पर्शं परुषं किटिभं स्मृतम्|

śyāvam kiṇakharasparśam paruṣam kiṭimam smṛtam|

shyAvam kiNakharasparshaM paruShaM kiTimaM smRutam|

The clinical features of are as follows:

“Color” – It is blackish brown

“Nature” – Rough similar to scar tissue and hard to touch

Touch similar to the granulation process in wound.

4. "Vaipadika Kushtha"

वैपादिकं पाणिपादस्फुटनं तीव्रवेदनम्॥२२॥

vaipādikam pāṇipādasphuṭanam tīvravēdanam||22||

vaipAdikaM pANipAdasphuTanaM tlrvavedanam||22||

The clinical features are as follows:

"Location" – Hand and legs

"Nature" – cracks in palms and sole

"Associated symptoms" – severe / excruciating pain

5. "Alasaka Kuṣṭha"

कण्डुमदभिः सरागैश्च गण्डैरलसकं चितम्।

kaṇḍūmadbhīḥ sarāgaiśca gaṇḍairalasakam citam|

kaNDUmadbhiH sarAgaishca gaNDairalasakaM citam|

The clinical features are as follows:

"Nature" – Nodules

"Associated symptoms" – Pruritus

"Color" – redness

6. "Dadru Kushtha"

सकण्डूरागपिडकं दद्रुमण्डलमुद्गतम्॥२३॥

sakaṇḍūrāgapidiḍakam dadrumaṇḍalamudgatam||23||

sakaNDUrAgapiDakaM dadrumaNDalamudgatam||23||

The clinical features are as follows:

"Color" – redness

"Nature" – Elevated circular patch with "pidaka"

"Associated symptoms" – Itching

7. "Charmadala Kushtha"

रक्तं [१] सकण्डु स्सफोटं सरुगदलति चापि यत्। तच्चर्मदलमाख्यातं संस्पर्शासहमुच्यते॥२४॥

raktam [1] sakaṇḍu sasphoṭam̄ sarugdalati cāpi yat| taccarmadalamākhyātam̄ saṁsparśāsaḥamucyate॥24॥

raktaM [1] sakaNDu sasphoTaM sarugdalati cApi yat| taccarmadalamAkhyAtaM saMsparsAsahamucyate॥24॥

The clinical features are as follows:

"Color" – Redness

"Nature" – pustules, cracks in skin which are crusted

"Associated symptoms" – Itching

8. "Pāmā kuṣṭha"

पामाश्वेतारुणश्यावा: कण्डूलाः पिडका भृशम्।

pāmāśvētāruṇāsyāvāḥ kandūlāḥ piḍakā bhṛśam|

pAmAshvetAruNashyAvAH kaNDUIAH piDakA bhRusham|

The clinical features are as follows:

"Color" – white, reddish, brownish blackish

"Nature" – Itching

"Associated symptoms" – "piḍakā" (eruptions)

9. "Visphoṭa kuṣṭha"

स्फोटाः श्वेतारुणाभासो विस्फोटाः स्युस्तनुत्वचः॥२५॥

sphoṭāḥ śvētāruṇābhāsō visphoṭāḥ syustanutvacāḥ॥25॥

sphoTAH shvetAruNAbhAso visphoTAH syustanutvacaH॥25॥

The clinical features are as follows:

"Color" – white reddish in appearance

"Nature" – eruptions and pustules with thin skin

10. "Śatāru kuṣṭha"

रक्तं श्यावं सदाहार्ति शतारुः स्याद् बहुवृणम्।

raktam śyāvam sadāhārti śatāruḥ syādbahuvraṇam।

raktaM shyAvaM sadAhArti shatAruH syAdbahuvraNam|

The clinical features are as follows:

"Color" – reddish, blackish

"Nature" – ulcerated

"Associated symptoms" – burning sensation and pain

11. "Vicārcikā kuṣṭha"

सकण्डः पिडका श्यावा बहुस्रावा विचर्चिका॥२६॥

sakaṇḍūḥ piḍakā śyāvā bahusrāvā vicārcikā॥२६॥

sakaNDUH piDakA shyAvA bahusrAvA vicarcikA॥२६॥

The clinical features are as follows:

"Color" – blackish brown

"Nature" – excessive exudation, eruptions

"Associated symptoms" – pruritus

इत्येकादश क्षुद्रकुष्ठानि

ityēkādaśa kṣudrakuṣṭhāni

ityekAdasha kShudrakuShThAni

This ends the explanation of 11 "ksudrakuṣṭha".[21-26]

"Dosha" dominance in types of "kushtha"

वातेऽधिकतरे कुष्ठं कापालं मण्डलं कफे। पिते त्वौदुम्बरं विद्यात् काकणं तु त्रदोषजम्॥२७॥

वातपिते श्लेष्मपिते वातश्लेष्मणि चाधिके। ऋष्यजिह्वं पुण्डरीकं सिद्धमकुष्ठं च जायते॥२८॥

चर्माख्यमेककुष्ठं च किटिमं सविपादिकम्। कुष्ठं चालसकं ज्येयं प्रायो वातकफाधिकम्॥२९॥

पामा शतारुविस्फोटं दद्रुचर्मदलं तथा। पित॒श्लेष्माधिकं प्रायः कफप्राया विचर्चिका॥३०॥

vātē’dhikatarē kuṣṭharṁ kāpālāṁ maṇḍalam kaphē| pittē tvaudumbaram̄ vidyāt
kākaṇam̄ tu tradōṣajam||27||

vātapittē ślēśmapittē vātaślēśmaṇi cādhikē| ḍsyajihvam̄ puṇḍarīkam̄ sidhmakuṣṭharṁ ca
jāyatē||28||

carmākhyamēkakuṣṭharṁ ca kiṭimam̄ savipādikam| kuṣṭharṁ cālasakam̄ jñēyam̄ prāyō
vātakaphādhikam||29||

pāmā śatārurvisphōṭam̄ dadruścarmadalam tathā| pittaślēśmādhikam̄ prāyah
kaphaprāyā vicārcikā||30||

vAte~adhikatare kuShThaM kApAlaM maNDalaM kaphe| pitte tvaudumbaraM vidyAt
kAkNaM tu tradoShajam||27||

vAtapitte shleShmapitte vAtashleShmaNi cAdhike| RuShyajihvaM puNDarikaM
sidhmakuShThaM ca jAyate||28||

carmAkhyamekakuShThaM ca kiTimam̄ savipAdikam| kuShThaM cAlasakaM j~jeyaM
prAyo vAtakaphAdhikam||29||

pAmA shatArurvisphoTaM dadrushcarmadalaM tathA| pittashleShmAdhikaM prAyaH
kaphaprAyA vicarcikA||30||

The “dosha” dominance in types of “kushtha” is as enlisted below:

{
! scope=“col”
! scope=“col”

-
“Vata”

“Kapala”

-
“Kapha”

“Mandala, Vicharchika”

-
“Pitta”

“Udumbara”

-
“Tridosha”

“Kakanaka”

-
“Vata-Pitta”

{

“Rishyajihva”

-

“Kapha-Pitta”

“Pundarika”

-

“Vata-Kapha”

“Siddhma, Carmākhya, Ekkuṣṭha, Kitibha, Vipādikā, Alasaka”

-

“Pitta-Kapha”

“Pāmā, Śatāru, Visphoṭaka, Dadru, Charmadala”

}

General guidelines for diagnosis

सर्वं त्रिदोषजं कुष्ठं दोषाणां तु बलाबलम्| यथास्वैरक्षण्यैर्बुद्ध्वा कुष्ठानां क्रियते क्रिया||३१||

दोषस्य यस्य पश्येत् कुष्ठेषु विशेषतिङ्गमद्रिक्तम्| तस्यैव शमं कुर्यात्ततः परं चानुबन्धस्य||३२||

sarvarṁ tridōṣajam kuṣṭham dōṣāṇāṁ tu balābalam| yathāsvairlakṣaṇairbuddhvā
kuṣṭhānāṁ kriyatē kriyā||31||

dōṣaya yasya paśyēt kuṣṭhēṣu viśēṣaliṅgamadriktam| tasyaiva śamaṁ kuryāttataḥ
param cānubandhasya||32||

sarvaM tridoShajAM kuShThaM doShANAM tu balAbalam|
yathAsvairlakShaNairbuddhvA kuShThAnAM kriyate kriyA||31||

doShasya yasya pashyet kuShTheShu visheShali~ggamadriktam| tasyaiva shamaM
kuryAttataH paraM cAnubandhasya||32||

“Tridosha” are involved in pathogenesis of all types of “kushtha”. Depending on “dosha” predominant symptoms are manifested and treatment should be decided on the basis of symptoms shown in specific “kushtha”. The “dosha” presenting important and specific symptoms should be alleviated firstly followed by the treatment of associated “dosha”. [31-32]

कुष्ठविशेषर्देषा दोषविशेषैः पुनश्च कुष्ठानि| ज्ञायन्ते तैर्हतुर्हतुस्तांश्च [१] प्रकाशयति||३३||

kuṣṭhaviśēṣairdōṣā dōṣaviśēṣaiḥ punaśca kuṣṭhāni| jñāyantē tairhēturhētustāṁśca [1]
prakāśayati||33||

kuShThavisheShairdoShA doShavisheShaiH punashca kuShThAni| j~jAyante
tairheturhetustAMshca [1] prakAshayati||33||

Specific “kushtha” determine the predominance of specific “dosha” and vice versa is also true i.e. predominance of “dosha” determines the specific type of “kushtha”. Similarly specific symptoms determine the causative factors vice versa causative factors determine the specific symptoms.[33]

“Dosha” specific features of diagnosis of “dosha” dominance in “kushtha”

रौक्ष्यं शोषस्तोदः शूलं सङ्कोचनं तथाऽयामः। पारुष्यं खरभावो हर्षः ३४॥

कुष्ठेषु वातलिङ्गं, दाहो रागः परिस्रवः पाकः। विसो गन्धः क्लेदस्तथाऽङ्गपतनं च पित्तकृतम्॥३५॥

श्वैत्यं शैत्यं कण्डः स्थैर्यं चोत्सेधगौरवस्नेहाः। कुष्ठेषु तु कफलिङ्गं जन्तुभिरभिभक्षणं क्लेदः॥३६॥

raukṣyam śoṣastodah śūlam saṅkōcanam tathā”yāmaḥ| pāruṣyam kharabhāvō harṣah
śyāvāruṇatvam ca||34||

kuṣṭhēṣu vātaliṅgam, dāhō rāgaḥ parisravaḥ pākaḥ| visrō gandhaḥ
klēdastathā’ṅgapatanam ca pittakṛtam||35||

śvāityam śaityam kaṇḍūḥ sthairyam cōtsēdhagauravasnēhāḥ| kuṣṭhēṣu tu kaphaliṅgam
jantubhirabhibhakṣanam klēdaḥ||36||

raukShyaM shoShastodaH shUlaM sa~gkocanaM tathA_aayAmaH| pAruShyaM
kharabhAvo harShaH shyAvAruNatvaM ca||34||

kuShTheShu vAtali~ggaM, dAho rAgaH parisravaH pAkaH| visro gandhaH
kledastathA_aggapatanam ca pittakRutam||35||

shvāityaM shaityaM kaNDUH sthairyam cotsedhagauravasnehAH| kuShTheShu tu
kaphali~ggaM jantubhirabhibhakShaNaM kledaH||36||

Symptoms due to “dosha” predominance include dryness, atrophy, pricking pain / paraesthesia, pain, constriction or loss of elasticity, hardness, roughness, horripilation, blackish, brownish, slight reddish in color are manifestation of “vata dosha”.

Burning sensation, redness, exudation, suppuration, offensive smell, stickiness / moist and sloughing of body parts are the symptoms caused by predominance of “pitta dosha”.

“Kapha dosha” is responsible for symptoms like whitish discolouration, cold in touch, pruritus, non-progressive / slow progression of disease, elevated; heaviness and oiliness are presented along with maggot’s formation and stickiness like symptoms.[34-36]

Prognosis

सर्वैर्लिङ्गैर्युक्तं मतिमान् विवर्जयेदबलम्| तृष्णादाहपरीतं शान्ताग्निं जन्तुभिर्जग्धम्||३७||

वातकफप्रबलं यद्यदेकदोषोल्बणं न तत् कृच्छ्रम्| कफपित्त-वातपित्तप्रबलानि तु कृच्छ्रसाध्यानि||३८||

sarvairliṅgairyuktam̄ matimān vivarjayēdabalam| tṛṣṇādāhapaṛitam̄ śāntāgnim̄ jantubhirjagdham||37||

vātakaphaprabalaṁ yadyadēkadōśōlbañam̄ na tat kṛcchram| kaphapitta-vātapiṭṭaprabalāni tu kṛcchrasādhyāni||38||

sarvairli~ggairyuktaM matimAn vivarjayedabalam| tRuShNAdAhaParItaM shAntAgniM jantubhirjagdham||37||

vAtakaphaprabalaM yadyadekadoSholbaNaM na tat kRucchram| kaphapitta-vAtapiṭṭaprabalAni tu kRucchrasAdhyAni||38||

If all the symptoms are simultaneously observed, in weak (immune-compromised) patient, suffering from morbid thirst, burning sensation, loss of digestive power and presence of maggots then the intelligent person should avoid treatment (as it is incurable). Further “vata kapha” predominated “kushtha” and single “dosha” predominated “kushtha” are not so difficult to treat. Whereas “kapha pitta” and “vata pitta” dominated “kushtha” are “krichchra sadhya” i.e. curable, but with efforts. [37-38]

Principles of management

वातोत्तरेषु सर्पिर्वमनं श्लेष्मोत्तरेषु कुष्ठेषु| पित्तोत्तरेषु मोक्षो रक्तस्य विरेचनं चाग्ने||३९||

vātottarēṣu sarpirvamanam̄ ślēṣmōttarēṣu kuṣṭhēṣu| pittottarēṣu mōkṣō raktasya virēcanam̄ cāgrē||39||

vAtottareShu sarpirvamanaM shleShmottareShu kuShTheShu| pittottareShu mokSho raktasya virecanam cAgre||39||

In “vataja kushtha”, firstly administer “ghritapana”, whereas in “kaphaja kushtha vamana” procedure should be done and in “pittaja kushtha, virechana” along with “raktamokshana” should be first line of treatment.[39]

वमनविरेचनयोगः कल्पोक्ता: कुष्ठिनां प्रयोक्तव्याः| प्रच्छनमल्पे कुष्ठे महति च शस्तं सिराव्यधनम्||४०||

vamanavirēcanayōgāḥ kalpōktāḥ kuṣṭhināṁ prayōktavyāḥ| pracchanamalpē kuṣṭhē mahati ca śastam̄ sirāvyadhanam||40||

vamanavirecanayogAH kalpoktAH kuShThinAM prayoktavyAH| pracchanamalpe kuShThe mahati ca shastaM sirAvyadhanam||40||

For “vamana” and “virechana” drugs mentioned in Kalpa Sthana should be used. “Prachhana karma” i.e. blood letting by rubbing with coarse device should be carried out if “dushya dushti” is less and venesection should be carried out in condition where “dosha dusya dusti” is strong.[40]

बहुदोषः संशोध्यः कुष्ठी बहुशोऽनुरक्षता प्राणान्| दोषे हयतिमात्रहते वायुर्हन्यादबलमाशु||४१||

bahudōṣah saṁśodhyah kuṣṭhī bahuśo'�urakṣatā prāṇān| dōṣe hyatimātrahṛtē vāyurhanyādabalamāśu||41||

bahudoShaH saMshodhyaH kuShThI bahusho~anurakShatA prANAn| doShe hyatimAtrahRute vAyurhanyAdabalamAshu||41||

Patients with excessive vitiated “dosha” should be given “shodhana” therapy repeatedly; taking care about their “prana” (strength). Excessive elimination of “dosha” may increase “vata dosha” which may bring about weakness and in rare condition endanger the life of patient.[41]

स्नेहस्य पानमिष्टं शुद्धे कोष्ठे प्रवाहिते रक्ते| वायुर्हि शुद्धकोष्ठं कुष्ठिनमबलं विशति शीघ्रम्||४२||

snēhasya pānamiṣṭam śuddhē kōṣṭhē pravāhitē raktē| vāyurhi śuddhakōṣṭham
kuṣṭhinamabalaṁ viśati śīghram||42||

snehasya pAnamiShTaM shuddhe koShThe pravAhite rakte| vAyurhi
shuddhakoShThaM kuShThinamabalaM vishati shlghram||42||

After “shodhana” and letting of blood, “sneha” should be administered since after “shodhana”, “vata dosha” enters the “shuddha koshtha” of patient and is cause for immediate “bala kshaya”. [42]

Various formulations

दोषोत्क्लिष्टे हृदये वाम्यः कुष्ठेषु चोर्धर्वभागेषु| कुटजफलमदनमधुकैः सपटोलैर्निंम्बरसयुक्तैः||४३||

शीतरसः पक्वरसो मधूनि मधुकं च वमनानि|

dōṣōtkliṣṭē hṛdayē vāmyah kuṣṭhēṣu cōrdhvabhāgēṣu| kuṭajaphalamadanamadhukaiḥ
sapaṭolairnimbarasayuktaiḥ||43||

śītarasaḥ pakvarasō madhūni madhukam ca vamanānil|

doShotkliShTe hRudaye vAmyaH kuShTheShu cordhvabhAgeShu|
kuTajaphalamadanamadhukaiH sapaTolairnimbarasayuktaiH||43||

shltarasaH pakvaraso madhUni madhukaM ca vamanAnil|

If “dosha” are “utkrishta” and located in “hridaya” or “kushtha” is manifested in the upper part of body, then “vamana” should be administered with help of fruit of “kuthaja, madanaphala” and “madhuka” along with juice of “patola” and “nimba”. “Sheeta rasa”

(cold effusion), “pakva rasa”(decoction), honey and“madhuka” should be used for “vamana”.[43]

कुष्ठेषु त्रिवृता दन्ती त्रिफला च विरेचने शस्ता॥४४॥

सौवीरकं तुषोदकमालोडनमासवाश्च सीधूनि। शंसन्त्यधोहराणां यथाविरेकं क्रमश्चेष्टः॥४५॥

kuṣṭhēṣu trivṛtā dantī triphalā ca virēcanē śastā॥44॥

sauvīrakam tuṣōdakamālōḍanamāsavāśca sīdhūni। śaṁsantyadhōharāṇāṁ yathāvirēkam kramaścēṣṭah॥45॥

kuShTheShu trivRutA dantl triphalA ca virecane shastA॥44॥

sauvlrakaM tuShodakamAloDanamAsavAshca sldhUni। shaMsantyadholharANAM yathAvirekaM kramashceShTaH॥45॥

“Trivrita, danti” and “triphala” are to be used for “virechana” in “kushtha”. “Sauviraka, tushodaka, alodhana, asava, sidhu” are types of “ausadi kalpana” to be used in “virechana”. Further “sansarjana karma” should be followed as per order. [44-45]

दार्वीबृहतीसेव्यैः पटोलपिचुमर्देमदनकृतमालैः। सस्नेहैरास्थाप्यः कुष्ठी सकलिङ्गयवमुस्तैः॥४६॥

वातोल्बणं विरिक्तं निरुद्धमनुवासनार्हमालक्ष्य। फलमधुकनिम्बकुटजैः सपटोलैः साध्येत्स्नेहम्॥४७॥

dārvībṛhatīsēvyaiḥ paṭolapicumardamadanakṛtamālaiḥ। sasnēhairāsthāpyaḥ kuṣṭhī sakaliṅgayavamustaiḥ॥46॥

vātōlbāṇam viriktam nirūḍhamanuvāsanārhamālakṣya। phalamadhuṇimbakuṭajaiḥ sapaṭolaiḥ sādhayētsnēham॥47॥

dArvIbRuhatlsevyaiH paTolapicumardamadanakRutamAlaiH| sasnehairAsthApyaH kuShThI sakali~ggayavamustaiH||46||

vAtolbaNaM viriktaM nirUDhamanuvAsanArhamAlakShya| phalamadhuṇimbakuTajaiH sapaTolaiH sAdhayetsneham||47||

“Darvi, brihati, patola, pichumarda, madanaphala, kritamala, kalinga, yava” and “musta” should be used along with “sneha” for “asthapana”. After “virechana” and “asthapana basti” still if there is excess of “vata” than give “anuvasana basti” should be given. In such condition “sneha” fortified with “madanaphala, madhuka, nimba, kutaja,” and “patola” should be used. [46-47]

सैन्धवदन्तीमरिचं फणिजङ्गकः पिप्पली करञ्जफलम्। नस्यं स्यात्सविडङ्गं क्रिमिकुष्ठकफप्रकोपचनम् [१] ||४८||

वैरेचनिकैर्धूमैः श्लोकस्थानेरितैः प्रशान्त्यन्ति। कृमयः कुष्ठकिलासाः प्रयोजितैरुतमाङ्गस्थाः॥४९॥

saindhavadantīmaricam phanijjhakah pippalī karañjaphalam| nasyam syātsaviḍāngam kṛmi kuṣṭhakaphaprakōpaghnam [1] ||48||

vairēcanikairdhūmaiḥ ślōkasthānēritaiḥ praśāmyantiḥ kṛmayaḥ kuṣṭhakilāsāḥ
prayōjitairuttamāṅgasthāḥ||49||

saindhavadantīmaricaM phaNijjhakaH pippall kara~jjaphalam| nasyaM
syAtsaviDa~ggaM krimikuShThakaphaprakopaghnam [1] ||48||

vairecanikairdhUmaiH shlokasthAneritaiH prashAmyantiḥ kRumayaH kuShThakilAsAH
prayojitairuttamA~ggasthAH||49||

“Saindhava, dantī, maricha, phanijjhaka, pippali,” fruit of “karanja” and “vidanga” should be used for “nasya” especially in case of “krimi” and “kapha pradhan kushtha”.

Drugs mentioned in Sutra Sthana for “vaireshanika dhuma” should be used in “krimija kushtha” and “kilasa” and also disease affecting the upper part of the body. [48-49]

स्थिरकठिनमण्डलानां स्विन्नानां प्रस्तरप्रणाडीभिः। कूर्चैर्विघट्टितानां रक्तोत्क्लेशोऽपनेतव्यः॥५०॥

sthirakaṭhinamaṇḍalānāṁ svinnānāṁ prastarapraṇāḍībhiḥ| kūrcairvighaṭṭitānāṁ raktōtklēśo'panētavyah||50||

sthirakaThinamaNDalAnAM svinnAnAM prastarapraNADlbhiH| kUrcairvighaTTitAnAM raktotkleshos~apanetavyaH||50||

If the patches are stable and hard, then give fomentation by “prastara sweda” or “nadi sweda” method and later on with the help of “kurcha” (a surgical instrument) scrub the patches so that there is increased flow of “rakta” in that specific area along with blood letting.[50]

Local treatments

आनूपवारिजानां मांसानां पोट्टलैः सुखोष्णैश्च। स्विन्नोत्सन्नं [१] विलिखेत् कुष्ठं तीक्ष्णेन शस्त्रेण॥५१॥

रुधिरागमार्थमथवा शृङ्गालाबूनि [२] योजयेत् कुष्ठे। प्रच्छितमल्पं कुष्ठं विरेचयेद् वा जलौकोभिः॥५२॥

ये लेपाः कुष्ठानां युज्यन्ते निर्हतासदोषाणाम्। संशोधिताशयानां सद्यः सिद्धिभवेत्तेषाम्॥५३॥

ānūpavārijānāṁ māṁsānāṁ pōṭṭalaiḥ sukhōṣṇaiśca। svinnōtsannāṁ [१] vilikhēt kuṣṭham tīkṣṇēna śastrēṇa॥५१॥

rudhirāgamārthamathavā śṛṅgālābūni [२] yōjayēt kuṣṭhē। pracchitamalpaṁ kuṣṭham virēcayēdvā jalaukōbhiḥ||52||

yē lēpāḥ kuṣṭhānāṁ yujyantē nirhṛtāsradōṣānām। saṁśōdhitāśayānāṁ sadyaḥ siddhirbhavēttēṣām॥५३॥

AnUpavArijAnAM mAMsAnAM poTTalaiH sukhoShNaishca| svinnotsannaM [1] vilikhET kuShThaM tlkShNena shastreNa||51||

rudhirAgamArthamathavA shRu~ggAlAbUni [2] yojayet kuShThe| pracchitamalpaM kuShThaM virecayedvA jalaukobhiH||52||

ye lepAH kuShThAnAM yujyante nirhRutAsradoShANAm| saMshodhitAshayAnAM
sadyaH siddhirbhavetteShAm||53||

If the patches are elevated then “swedana” with lukewarm poultice of meat of aquatic animals should be followed by scrubbing with sharp edge surgical instrument for blood letting. For blood letting “shringa” (horn), “alabu” (gourd) may be used. Especially in “alpa kushtha, prachana, virechana” and/or use of “jaluka” should be done.

“Lepa” explained in “kushtha” become efficient if applied after “raktamokshana” and other “shodhana” procedures. [51-53]

येषु न शस्त्रं क्रमते स्पर्शेन्द्रियनाशनानि यानि स्युः| तेषु निपात्यः क्षारो रक्तं दोषं च विस्त्राव्य||५४||

पाषाणकठिनपरुषे सुप्ते कुष्ठे स्थिरे पुराणे च| पीतागदस्य कार्यो विषैः प्रदेहोऽगदैश्चानु||५५||

स्तब्धानि सुप्तसुप्तान्यस्वेदनकण्डुलानि कुष्ठानि| कूर्चेदन्तीत्रिवृत्ताकरवीरकरञ्जकुटजानाम्||५६||

जात्यर्कनिम्बजैर्वा पत्रैः शस्त्रैः समुद्रफेनैर्वा| घृष्टानि गोमयैर्वा ततः प्रदेहैः प्रदेहयानि||५७||

yēṣu na śastrāṁ kramatē sparśēndriyanāśanāni yāni syuḥ| tēṣu nipātyah kṣārō raktāṁ dōṣāṁ ca visrāvya||54||

pāṣāṇakaṭhinaparuṣē suptē kuṣṭhē sthirē purāṇē ca| pītāgadasya kāryō viṣaiḥ pradēhō'gadaiścānu||55||

stabdhāni suptasuptānyasvēdanakanḍulāni kuṣṭhāni| kūrcайдantītrivṛtākaravīrakarañjakuṭajānām||56||

jātyarkanimbajairvā patraiḥ śastraiḥ samudraphēnairvā| ghṛṣṭāni gōmayairvā tataḥ pradēhaiḥ pradēhyāni||57||

yeShu na shastraM kramate sparshendriyanAshanAni yAni syuH| teShu nipAtyaH kShAro raktaM doShaM ca visrAvya||54||

pAShANakaThinaparuShe supte kuShThe sthire purANE ca| pltAgadasya kAryo viShaiH pradeho~agadaishcAnu||55||

stabdhAni suptasuptAnyasvedanakaNDuIAni kuShThAni| kUrcайдantItrivRutAkaravIrkara~jjakuTajAnAm||56||

jAtyarkanimbajairvA patraiH shastraiH samudraphenairvA| ghRuShTAni gomayairvA tataH pradehaiH pradehyAni||57||

When there is loss of sensation and/or surgical interventions is prohibited, “kshara” should be used after “rakta” and “dosha” are eliminated.

If “kushtha” is hard like stone with numbness, it is stable (not spreading) and chronic in such cases antidotes should be given internally prior to the application of poison in the form of “lepa” followed by application of antidote.

If there is numbness around the patch of “kushtha” associated with complete loss of sensation along with anhidrosis, and pruritus then for scrubbing in such condition brush (“kurcha”) prepared from “danti, trivrita, karavira, karanja, kutaja” or leaves of “jāti, arka, nimba” or surgical instruments, “samudra phena”, dried cow-dung should be used followed by application of “lepa”. [54-57]

मारुतकफकुष्ठधनं कर्मोक्तं पितकुञ्जिनां कार्यम्। कफपितरक्तहरणं तिक्तकषायैः प्रशमनं च॥५८॥

सर्पेषि तिक्तकानि च यच्चान्यद्रक्तपितनुत् [१] कर्म। बाह्याभ्यन्तरमध्यं तत् कार्यं पितकुष्ठेषु॥५९॥

mārutakaphakuṣṭhaghnam karmōktam pittakuṣṭhinām kāryam| kaphapittaraktaharanām tiktakaśāyaiḥ praśamanām ca||58||

sarpīṁṣi tiktakāni ca yaccānyadraktapittanut [1] karma| bāhyābhyantraramagryam tat kāryam pittakuṣṭhēṣu||59||

mArutakaphakuShThaghnaM karmoktaM pittakuShThinAM kAryam|
kaphapittaraktaharaNAM tiktakaShAyaiH prashamanaM ca||58||

sarpIMShi tiktakAni ca yaccAnyadraktapittanut [1] karma| bAhyaAbhyantaramagryaM tat kAryaM pittakuShTheShu||59||

In “pittaja kushtha” line of treatment followed in “vata kaphaja kushtha” should be followed along with “kapha, pitta” and “rakta” should be eliminated and “tikta” (bitter), “kashaya” (astringent) drugs are to be used for pacifying the “dosha”. Ghee fortified with “tikta” (bitter) drugs and line of treatment of “raktapitta” should be followed internally and externally for treatment of “pittaja kushtha”. [58-59]

दोषाधिक्यविभागादित्येतत् कर्म कुष्ठनुत् प्रोक्तम्। वक्ष्यामि कुष्ठशमनं प्रायस्त्वगदोषसामान्यात्॥६०॥

dōṣādhikyavibhāgādityētat karma kuṣṭhanut prōktam| vakṣyāmi kuṣṭhaśamanām
prāyastvagdōṣāāmānyāt||60||

doShAdhikyavibhAgAdityetat karma kuShThanut proktam| vakShyAmi
kuShThashamanaM prAyastvagdoShasAmAnyAt||60||

Treatment of different “kushtha” categorized on basis of aggravated “dosha” has been explained henceforth treatment for pacifying of “kushtha” is being explained wherein defect in skin is general symptom. [60]

दार्वी रसाञ्जनं वा गोमूत्रेण प्रबाधते कुष्ठम्। अभया प्रयोजिता वा मासं सव्योषगुडतैला॥६१॥

dārvī rasāñjanām vā gōmūtrēṇa prabādhatē kuṣṭham| abhayā prayōjitā vā māsaṁ savyōṣaguḍatailā||61||

dArvi rasA~jjanaM vA gomUtreNa prabAdhate kuShTham| abhayA prayojitA vA
mAshaM savyoShaguDatailA||61||

“Dārvi” or “rasāñjana” along with cow’s urine helps in treatment of “kushtha”. Similarly “haritaki” along with “trikatu” or “gud” and “taila” for period of one month is helpful. [61]

मूलं पटोलस्य तथा गवाक्ष्याः पृथक् पलांशं त्रिफलात्वचश्च [१] | स्यात्त्रायमाणा कटुरोहिणी च भागार्थिका नागरपादयुक्ता॥६२॥

पलं तथैषां सह चूर्णितानां जले शृतं दोषहरं पिबेन्ना। जीर्णे रसैर्धन्वमृगद्विजानां पुराणशाल्योदनमाददीता॥६३॥

कण्ठानि शोफं ग्रहणीप्रदोषमर्शासि कृच्छ्राणि हलीमकं च। षड्ग्रात्रयोगेन निहन्ति चैष हृद्बस्तिशूलं विषमज्वरं च॥६४॥

mūlam paṭolasya tathā gavākṣyāḥ pṛthak palāṁśam triphalātvacāśca [1] | syāttrāyamāṇā kaṭurōhiṇī ca bhāgārdhikā nāgarapādayuktā॥६२॥

palam tathaiṣāṁ saha cūrṇitānāṁ jalē śṛtam dōṣaharam pibennā| jīrṇē rasairdhānvamrgadvijānāṁ purāṇaśālyōdanamādadīta॥६३॥

kuṣṭhāni śōphāṁ grahanīpradōṣamarśāṁsi kṛcchrāṇi halīmakāṁ ca| ṣaḍrātrayōgēna nihanti caiṣa hṛdbastiśūlāṁ viṣamajvaraṁ ca॥६४॥

mUlAM paTolasya tathA gavAkShyAH pRuthak palAMshaM triphalAtvacashca [1] | syAttrAyamANA kaTurohiNI ca bhAgArdhikA nAgarapAdayuktA॥६२॥

palaM tathaiShAM saha cUrNitAnAM jale shRutaM doShaharaM pibennA| jIrnE rasairdhānvamRugadvijAnAM purANashAlyodanamAdadIta॥६३॥

kuShThAni shophaM grahaNIpradoShamarsAMsi kRucchrANI hallmakaM ca| ShaDrAtrayogena nihanti caiSha hRudbastishUlaM viShamajvaraM ca॥६४॥

One “pala” of root of “patola” and “gavakshi”, contents of “triphala” (“haritaki, bibhataki” and “amalaki”) taken separately in one “pala” quantity each. “Trayamana” and “katuki” in quantity of 6 “sanas” and 4 “sana” of “sunthi”, should be taken together. One “pala” of this combination should be boiled in water and administered for elimination of “dosha”.

After the combination has been digested by “jatharagni” of patient, soup of animal and birds residing in arid land along with old “shali” type of rice should be given. The preparation when administered for 6 days cures “kushtha, shotha, grahani, arsha, mutrakricha, halimaka,” chest pain and pain in bladder region along with “vishama jwara”. [62-64]

“Mustadi churna”

मुस्तं व्योषं त्रिफला मञ्जिष्ठा दारु पञ्चमूल्यौ द्वे। सप्तच्छदनिम्बत्वक् सविशालशिच्चको मूर्वा॥६५॥
चूर्णं तर्पणभागैर्नवभिः संयोजितं समध्वाज्यम् [१] | सिद्धं कुष्ठनिबर्हणमेतत् प्रायोगिकं भक्ष्यम्॥६६॥

श्वयथुं सपाण्डुरोगं शिवत्रं ग्रहणीप्रदोषमर्शासि। ब्रह्मभगन्दरपिडकाकण्डूकोठंश्च विनिहन्ति॥६७॥

इति मुस्तादिचूर्ण

mustam vyōśam triphalā mañjishthā dāru pañcamūlyau dvē| saptacchadanimbavak
saviśālaśitrakō mūrvā||65||

cūrṇam tarpaṇabhbhāgairnavabhiḥ saṁyōjitaṁ samadhvāyam [1] | siddhaṁ
kuṣṭhanibarhaṇamētāt prāyōgikam bhakṣyam||66||

śvayathurū sapāṇḍurōgaṁ śvitram grahaṇīpradōśamarśāṁsi|
braghnabhagandarapiḍakākaṇḍukōṭhāṁśca vinihanti||67||

iti mustādicūrṇam

mustaM vyoShaM triphalA ma~jjiShThA dAru pa~jcamUlyau dve|
saptacchadanimbavak savishAlashcitrako mUrvAI||65||

cUrNaM tarpaNabhAgairnavabhiH saMyojaM samadhvAyyam [1] | siddhaM
kuShThanibarhaNametat prAyogikaM bhakShyam||66||

shvayathuM sapANDurogaM shvitraM grahaNIpradoShamarshAMsi|
braghnabhagandarapiDakAkaNDUkoThAMshca vinihanti||67||

iti mustAdicUrNam

"Musta, trikatu, triphala, manjishtā, dāruharidra," two "panchamūla" ("brihat" and "laghu") "saptacchada", bark of 'nimba, viśāla, chirakra, mūrvā' are taken in equal quantity and powdered together. This powder should be mixed with nine times of "saktu" and should be prescribed with honey and "ghrita". It is among the best treatment for "kushtha" which should be given everyday. The combination is also useful in "shotha, pāṇḍu, śvitra, grahaṇīdoṣa, arśa, braghna, bhagandar, piḍakā, kaṇḍū, kōṭhā".

This ends the explanation of "mustādichūrṇam".[65-67]

त्रिफलाफलातिविषाकटुकानिम्बकलिङ्गकवचापटोलानाम्।
मागधिकारजनीट्वयपद्मकमूर्वविशालानाम्॥६८॥

भूनिम्बपलाशानां दद्याद्विपलं ततस्त्रिवृद्दविगुणा। तस्याश्च पुनर्ब्राह्मी तच्चूर्णं सुप्तिनुत् परमम्॥६९॥

triphalātiViṣākaṭukānimbaKaliṅgakavaCāpaṭolānām|
māgadhikārajanīdvayaPadmakamūrvāviśālānām||68||

bhūnimbapalāśānāṁ dadyādvipalam tatastrivṛddvigunā| tasyāśca punarbrāhmī
taccūrṇam suptinut paramam||69||

triphalAtiviShAkaTukAnimbakali~ggakavacApaTolAnAm|
mAgadhikArajanIdvayapadmakamUrvAvishAIAnAm||68||

bhUnimbapalAshAnAM dadyAdvipalaM tatastrivRuddviguNA| tasyAshca punarbrAhml
taccUrNaM suptinut paramam||69||

“Triphala, ativiṣā, kaṭuki, nimba, kaliṅgaka, vachā, paṭōla, pippali, haridra, dāruharidra, padmaka, mūrvā, viśālā, bhūnimba” and palāśa, all are taken in two “pala” quantity each (i.e. total 34 “pala”), double the total quantity of above “churna” (68 “pala”) “trivrita” is taken and double of “trivrita” (136 “pala”) “brahmi churna” should be taken. It is a best combination for numbness.[68-69]

Benefits of “lelitaka” (sulphur)

लेलीतकप्रयोगो [१] रसेन जात्या: समाक्षिक: परमः| सप्तदशकुष्ठघाती माक्षिकधातुश्च मूत्रेण||७०||

lēlitakapravīgō [1] rasēna jātyāḥ samākṣikah paramah| saptadaśakuṣṭhaghātī^{mākṣikadhātusca mūtrēṇa||70||}

lellitakapravīgo [1] rasena jAtyAH samAkShikaH paramaH| saptadashakuShThaghAtl
mAkShikadhAtushca mUtreNa||70||

“Lelitaka” (sulphur) when administered with juice of “jāti” (“āmalaki”) along with honey is beneficial in 17 types of “kushtha”. Similarly use of ‘makshika’ (copper pyrite) with cows’ urine too is very beneficial. [70]

श्रेष्ठं [२] गन्धकयोगात् सुवर्णमाक्षिकप्रयोगाद् वा| सर्वव्याधिनिर्बहुणमद्यात् कुष्ठी रसं च
निगृहीतम्||७१||

वज्रशिलाजतुसहितं सहितं वा योगराजेन| सर्वव्याधिप्रशमनमद्यात्कुष्ठी निगृह्य नित्यं च||७२||

śrēṣṭham [2] gandhakayōgāt suvarṇamākṣikaprayōgādvā|
sarvavyādhinibarhanamadyāt kuṣṭhī rasaṁ ca nigṛhitam||71||

vajraśilājatusahitaṁ sahitam vā yōgarājēna| sarvavyādhipraśamanamadyātkuṣṭhī
nigrhya nityam ca||72||

shreShThaM [2] gandhakayogAt suvarNamAkShikapravoyAdvA|
sarvavyAdhinibarhaNamadyAt kuShThI rasaM ca nigRuhItam||71||

vajrashilAjatusahitaM sahitaM vA yogarAjena| sarvavyAdhiprashamanamadyAtkuShThI
nigRuhya nityaM ca||72||

“Gandhaka” (sulphur) and/or “suvarṇamākṣika” when used for processing of “rasa” (mercury) acts as the best medicine in treatment of all disease especially “kushtha”.

Similarly “kushtha” patient should regularly consume “parada” (mercury) with “vajra shilajatu” or “yogaraja” which helps in curing of all diseases. [71-72]

“Madhvāsava”

खदिरसुरदारुसारं श्रपयित्वा तद्रसेन तोयार्थः। क्षौद्रप्रस्थे कार्यः कार्ये ते चाष्टपलिके च॥७३॥

तत्राश्चूर्णनामष्टपलं प्रक्षिपेत्तथाऽमूनि। त्रिफलैले त्वङ्मरिचं पत्रं कनकं च कर्षाशम्॥७४॥

मत्स्यण्डिका मधुसमा तन्मासं जातमायसे भाण्डे। मध्वासवमाचरतः कुष्ठकिलासे शमं यातः॥७५॥

इति मध्वासवः

khadirasuradārusāraṁ śrapayitvā tadrasēna tōyārthah| kṣaudraprasthē kāryah kāryē tē cāṣṭapalikē ca||73||

tatrāścūrṇānāmaṣṭapalaṁ prakṣipēttathā'mūni| triphalailē tvañmaricāṁ patraṁ kanakaṁ ca karṣāṁśam||74||

matsyaṇḍikā madhusamā tanmāsaṁ jātamāyasē bhāṇḍē| madhvāsavamācarataḥ kuṣṭhakilāsē śamam yātah||75||

iti madhvāsavaḥ

khadirasuradAruSAraM shrapayitvA tadrasena toyArthaH| kShaudraprasthe kAryaH
kArye te cAShTapalike ca||73||

tatrAshcUrNAnAmaShTapalaM prakShipettathA~amUni| triphalaile tva~gmaricaM
patraM kanakaM ca karShAMsham||74||

matsyaNDikA madhusamA tanmAsaM jAtamAyase bhANDe| madhvAsavamAcarataH
kuShThakilAse shamaM yAtaH||75||

iti madhvAsavaH

Decoction should be prepared from 8 “pala” each of water extract of “khadira” and “devadāru” to this one “prastha” of honey should be added. To this powder (“bhasma / mandura”) of iron in 8 “pala” quantity should be added along with “triphalā, ela, tvak, maricha, patra” and “kanaka” (“nagkeshara”) in one “karsa” quantity. “Matsyaṇḍikā” (sugar) should be added in quantity equal to honey (one “prastha”). This preparation should be kept in an iron jar for one month. This is called as “madhvāsava” and it is administered in “kushta” and “kilāsa”. [73-75]

“Kanaka bindu arishta”

खदिरकषायद्रोणं कुम्भे घृतभाविते समावाप्य। द्रव्याणि चूर्णितानि च षट्पलिकान्यत्र देयानि॥७६॥

त्रिफलाव्योषविडङ्गरजनीमुस्ताटरूषकेन्द्रयवाः। सौवर्णी च तथा त्वक् छिन्नरुहा चेति तन्मासम्॥७७॥

निदधीत धान्यमध्ये प्रातः प्रातः पिबेततो युक्त्या। मासेन महाकुष्ठं हन्त्येवाल्पं तु पक्षेण॥७८॥

अर्शःश्वासभगन्दरकासकिलासप्रमेहशोषांश्च। ना भवति कनकवर्णः पीत्वाऽरिष्टं कनकबिन्दुम्॥७९॥

इति कनकबिन्दवरिष्टम् कुष्ठेष्वनिलकफकृतेष्वेवं पेयस्तथाऽपि ऐतेषु। कृतमालक्वाथश्चाप्येष विशेषात् कफकृतेषु॥८०॥

khadirakaśayadrōṇāṁ kumbhē ghṛtabhāvitē samāvāpya| dravyāṇī cūrṇitāni ca ṣaṭpalikānyatra dēyāni||76||

triphalāvyōṣaviḍāṅgarajanīmustātarūṣakēndrayavāḥ| sauvarṇī ca tathā tvak chinnaruhā cēti tanmāsam||77||

nidadhīta dhānyamadhyē prātaḥ prātaḥ pibēttatō yuktyā| māsēna mahākuṣṭham hantyēvālpam tu pakṣēṇa||78||

arśahśvāsabhagandarakāsaṅkāsaprāmēhaśōśāṁśca| nā bhavati kanakavarṇaḥ pītvā’riṣṭam kanakabindum||79||

iti kanakabindvariṣṭam kuṣṭhēśvanilakaphakṛtēṣvēvaṁ pēyastathā’pi paittēṣu| kṛtamālakvāthaścāpyēṣa viśēṣāt kaphakṛtēṣu||80||

khadirakaShAyadroNaM kumbhe ghRutabhAvite samAvApya| dravyANi cUrNitAni ca ShaTpaliKAnyatra deyAni||76||

triphalAvyoShaviDa~ggarajanImustATarUShakendrayavAH| sauvarNI ca tathA tvak chinnaruhA ceti tanmAsam||77||

nidadhīta dhAnyamadhye prAtaH prAtaH pibettato yuktyA| mAsena mahAkuShThaM hantyevAlpaM tu pakSheNa||78||

arshaHshvAsabhagandarakAsaṅkāsaprāmehashoShAMshca| nA bhavati kanakavarNaH pītvA~ariShTaM kanakabindum||79||

iti kanakabindvariShTam kuShTheShvanilakaphakRuteShvevaM peyastathA~api paiteShu| kRutamAlakvAthaścāpyeSha visheShAt kaphakRuteShu||80||

In ghee smeared jar one “drona” of decoction of “khadira” should be added. To these 6 “palas” each of powdered “triphala, trikatu, viḍāṅga, haridra, musta, vāsā, indrayava,” bark of “sauvarṇi” (“dāruharidra”), and “guduchi” should be added. The jar should be kept for one month inside a heap of grains. Every morning if this preparation is taken then in one month “mahakuṣṭha” gets cured and within 15 days “ksudrakuṣṭha” is cured. It is also useful “arśa, śvāsa, bhagandar, kasa, kilasa, prameha” and “shosha”. Skin achieves golden complexion after having “kanakabindu”. This ends explanation of “kanakabindvariṣṭa”. It is useful in all “vataja, pittaja” and “kaphaja kushta”.

Especially in “kaphaja kuṣṭha, kritmalaka” decoction should be used in place of “khadira”. [76-80]

त्रिफलासवश्च गौडः सचित्रकः कुष्ठरोगविनिहन्ता। क्रमुकदशमूलदन्तीवराङ्गमधुयोगसंयुक्तः॥८१॥

triphalāsavaśca gaudah sacitrakah kuṣṭharōgavinihantā| kramukadaśamūladantīvarāṅgamadhuyōgasamyuktah||81||

triphalAsavashca gauDaH sacitrakaH kuShTharogavinhantA|
kramukadashamUladantIvarA~ggamadhuyogasaMyuktaH||81||

“Triphalāsava” prepared from jaggery along with “chitraka, kramuka, daśamūla, dantī, varā” (“triphala”) and honey helps in treating various “kushtha”. [81]

Diet in “kushtha”

लघुनि चान्नानि हितानि विद्यात् कुष्ठेषु शाकनि च तिक्तकानि। भल्लातकैः सत्रिफलैः सनिम्बैर्युक्तानि
चान्नानि घृतानि चैव॥८२॥

पराणधान्यान्यथ जाङ्गलानि मांसानि मुद्गाश्च पटोलयुक्ताः। शस्ता, न गुर्वम्लपयोदधीनि
नानूपमत्स्या न गडस्तिलाश्च॥८३॥

laghuni cānnāni hitāni vidyāt kuṣṭhēṣu śākani ca tiktakāni| bhallātakaiḥ satrīphalaiḥ
sanimbairyuktāni cānnāni ghṛtāni caiva||82||

purāṇadhānyānyatha jāṅgalāni māṁsāni mudgāśca paṭōlayuktāḥ| śastā, na
gurvamlapayodadhīni nānūpāmātsyā na guḍastilāśca||83||

laghUni cAnnAni hitAni vidyAt kuShTheShu shAkAni ca tiktakAni| bhallAtakaiH
satrīphalaiH sanimbairyuktAni cAnnAni ghRutAni caiva||82||

purANadhAnyAnyatha jA~ggalAni mAMsAni mudgAshca paTolayuktAH| shastA, na
gurvamlapayodadhIni nAnUpamatsyA na guDastilAshca||83||

Easily digestible and wholesome food, green leafy vegetables bitter in taste, food and ghee prepared by fortifying with “bhallaṭaka, triphala” and “nimba”, one year old cereals, meat of animals inhabiting from arid area, preparations of “mudga” and “patola”.

Avoid heavy to digest, sour food, milk, curd, meat of animals residing in marshy area, fish, jaggery and sesame. [82-83]

एला कुष्ठं दार्वी शतपुष्पा चित्रको विडङ्गश्च। कुष्ठालेपनमिष्टं रसाञ्जनं चाभया चैव॥८४॥

ēlā kuṣṭham dārvī śatapuṣpā citrakō viḍaṅgaśca| kuṣṭhālēpanamiṣṭam rasāñjanam
cābhayā caiva||84||

elA kuShThaM dArvI shatapuShpA citrako viDa~ggashca| kuShThAlepanamiShTaM
rasA~janaM cAbhayA caiva||84||

“Ela, kuṣṭha, dārvī, śatapuṣpā, chitraka, viḍaṅga, rasāñjana” and “abhaya” taken together and their paste when applied has a very efficacious role in “kushtha”. [84]

चित्रकमेलां बिम्बीं [१] वृषकं त्रिवृद्कर्नागरकम्। चूर्णकृतमष्टाहं भावयितव्यं पलाशस्य॥८५॥

क्षारेण गवां मूत्रसुतेन तेनास्य मण्डलान्याशु। भिद्यन्ते विलयन्ति च लिप्तान्यर्कमितप्तानि॥८६॥

citrakamēlāṁ bimbīṁ [1] vṛṣakāṁ trivṛdarkanāgarakam| cūrṇīkṛtamaṣṭāharṁ bhāvayitavyam̄ palāśasya||85||

kṣārēṇa gavāṁ mūtrasrutēna tēnāsyā maṇḍalānyāśu| bhidyantē vilayanti ca liptānyarkābhitaptāni||86||

citrakamelAM bimbIM [1] vRuShakaM trivRudarkanAgarakam| cUrNIkRutamaShTAhaM bhAvayitavyaM palAshasya||85||

kShAreNa gavAM mUtrasrutena tenAsya maNDalAnyAshu| bhidyante vilayanti ca liptAnyarkAbhitaptAni||86||

“Chitraka, ela, bimbi, vṛṣaka, trivṛtā, arka” and “shunthi” should be powdered together and trichurate with “palāśa kshara” and fortify it with cows urine for eight days.

Application of this paste followed by sun exposure leads to bursting and dissolution of “maṇḍala”. [85-86]

मांसी मरिचं लवणं रजनी तगरं सुधा गृहाद्धूमः। मूत्रं पित्तं [2] क्षारः पालाशः कुष्ठहा लेपः॥८७॥

māṁsī maricāṁ lavaṇāṁ rajaṇī tagaraṁ sudhā gr̥hāddhūmaḥ| mūtraṁ pittāṁ [2] kṣāraḥ pālāśaḥ kuṣṭhahā lēpaḥ||87||

mAMsl maricaM lavaNaM rajaNL tagaraM sudhA gRuhAddhUmaH| mUtraM pittaM [2] kShAraH pAlAshaH kuShThahA lepaH||87||

“Māṁsī, maricha, lavana, haridra, tagara, sudhā” and “gr̥hāddhūma” paste should be prepared along with cow urine, cow’s bile and “palasha kshara” should be applied.[87]

त्रपु सीसमयश्चूर्णं मण्डलनुत् फल्गुचित्रकौ बृहती। गोधारसः सलवणो दारु च मूत्रं च मण्डलनुत्॥८८॥

trapu sīsamayaścūrṇāṁ maṇḍalanut phalgucitrakau bṛhatī| gōdhārasaḥ salavaṇō dāru ca mūtraṁ ca maṇḍalanut||88||

trapu slsamayashcUrNaM maNDalanut phalgucitrakau bRuhatl| godhArasaH salavaNo dAru ca mUtraM ca maNDalanut||88||

“Trapu” (tin), “sīsa” (lead) and “ayaś” (iron) powders when applied treats “maṇḍala kuṣṭha”. Similarly application of ‘phalgu, citraka, bṛhatī, gōdhārasa’ (meat soup of iguana) “lavana, devdāru” and cow’s urine is also helpful in “maṇḍala”. [88]

कदलीपलाशपाटलिनिचुलक्षाराम्भसा प्रसन्नेन। मांसेषु तोयकार्यं कार्यं पिष्टे च किण्वे [3] च॥८९॥

तैर्मेदकः सुजातः किण्वैर्जनितं प्रलेपनं शस्तम्। मण्डलकुष्ठविनाशनमातपसंस्थं कृमिघ्नं च॥९०॥

kadalīpalāśapāṭaliniculakṣārāmbhasā prasannēna| māṁsēṣu tōyakāryam̄ kāryam̄ piṣṭē ca kiṇvē [3] ca||89||

tairmēdakah sujātah kiṇvairjanitam̄ pralēpanam̄ śastam| maṇḍalakuṣṭhavināśanamātapasamsthām̄ kṛmighnam̄ ca||90||

kadallpalAshapATaliniculakShArAmbhasA prasannena| mAmseshu toyakAryaM
kAryaM piShTe ca kiNve [3] ca||89||

tairmedakaH sujAtaH kiNvairjanitaM pralepanaM shastam|
maNDalakuShThavinAshanamAtapasaMsthaM kRumighnaM ca||90||

From “kshara” of “kadalī, palāśa, pātalā” and “nichula kshara jala” (alkaline water) should be prepared which should be well filtered. The same should be added to meat of animals for cleaning of meat, for making paste and for fermentation process. A self fermented (“medaka”) alcoholic formulation should be prepared. After well fermented “medaka” prepared the “kinva” (fermented paste of drug) should be removed and applied as paste. It is useful in “maṇḍala kuṣṭha” and other “krīmi” infestations.[89-90]

“Siddharthaka snana”(medicinal bath)

मुस्तं मदनं त्रिफला करञ्ज आरग्वधकलिङ्गयवाः| दार्वी ससप्तपर्णा स्नानं सिद्धार्थकं नाम||९१||
एष कषायो वमनं विरेचनं वर्णकस्तथोद्घर्षः| त्वग्दोषकुष्ठशोफप्रबाधनः पाण्डुरोगधनः||९२||

mustam madanam triphalā karañja āragvadhakaliṅgayavāḥ| dārvī sasaptaparṇā
snānam siddhārthakam nāma||91||

ēṣa kaṣāyō vamanam virēcanam varṇakastathōdgharṣah|
tvagdōṣakuṣṭhaśōphaprabādhanaḥ pāṇḍurōgaghnaḥ||92||

mustaM madanaM triphala kara~jja Aragvadhakali~ggayavAH| dArvi sasaptaparNA
snAnaM siddhArthakaM nAma||91||

eSha kaShAyo vamanaM virecanaM varNakastathodgharShaH|
tvagdoShakuShThashophaprabAdhanaH pANDurogaghnaH||92||

Powder of “musta, madanphala, triphala, karañja, āragvadha, kaliṅgaka, yava, dārvī, saptaparna” are boiled in water and used for bath. This preparation is called as “siddhārthaka snana”.

Decoction of above combination is useful for “vamana” and “virechana” procedures. It helps in promotion of color and complexion. It is also useful in “tvagdōṣa, kuṣṭha, śōpha” and “panduroga”.[91-92]

External applications

कुष्ठं करञ्जबीजान्येडगजः कुष्ठसूदनो लेपः| प्रपुन्नाडबीजसैन्धवरसाञ्जनकपित्थलोधाश्च||९३||
श्वेतकरवीरमूलं कुटजकरञ्जयोः फलं त्वचो दार्व्याः| सुमनःप्रवालयुक्तो लेपः कुष्ठापहः सिद्धः||९४||

kuṣṭham karañjabījānyēḍagajah kuṣṭhasūdanō lēpah|
prapunnāḍabījasaindhavarasāñjanakapitthalōdhrāscā||93||

śvētakaravīramūlam kuṭajakarañjayōḥ phalaṁ tvacō dārvyāḥ| sumanahpravālayuktō lēpaḥ kuṣṭhāpahāḥ siddhaḥ||94||

kuShThaM kara~jjabljAnyeDagajaH kuShThasUdano lepaH|
prapunnADabljasaindhavarasA~jjanakapiththalodhrAshca||93||

shvetakaravIramUlaM kuTajakara~jjayoH phalaM tvaco dArvyAH|
sumanaHpravAlayukto lepaH kuShThApahaH siddhaH||94||

“Lepa” of “kuṣṭha” (herb), seeds of “karañja” and “ēḍagaja” is useful in “kuṣṭha roga”. Similarly, paste of seeds’prapunnāḍa, saindhava, rasāñjana, kapittha, lōdhra,” root of white variety of “karavīra,” fruits of “kuṭaja” and “karañja”, bark of “dāruharidra” along with tender leaves of “jati” is useful in “kuṣṭha”. [93-94]

लोधस्य धातकीनां वत्सकबीजस्य नक्तमालस्य| कल्कश्च मालतीनां कुष्ठेषून्मर्दनालेपोऽपि||९५||

lōdhrasya dhātakīnāṁ vatsakabījasya naktamālasya| kalkaśca mālatīnāṁ
kuṣṭhēśūnmardanālēpau||95||

lōdhrasya dhAtakInAM vatsakabljasya naktamAlasya| kalkashca mAlatInAM
kuShTheShUnmardanAlepaU||95||

Paste of “lōdhra, dhātakī,” seeds of “vatsaka” (“kuṭaja”), “naktamāla” and “malati” is to be used externally for udvartan and “lepa”. [95]

शेरीषी त्वक् पुष्पं कार्पास्या राजवृक्षपत्राणि| पिष्टा च काकमाची चतुर्विधः कुष्ठनुल्लेपः||९६||

इति लेपाः

śairīṣī tvak puṣpaṁ kārpāsyā rājavṛkkārpāssapatrāṇī| piṣṭā ca kākamācī caturvidhah
kuṣṭhanullēpah||96||

iti lēpāḥ

shairIShI tvak puShpaM kArpAsyA rAjavRukShapatrANi| piShTA ca kAkamAcl
caturvidhaH kuShThanullepaH||96||

iti lepAH

Paste of bark of “shirīṣa” or flowers of kārpās, leaves of “rājavṛkksha” or paste of “kākamācī” are 4 different types of “lepa” useful in “kuṣṭha”. [96]

दाव्या रसाञ्जनस्य च निम्बपटोलस्य खदिरसारस्य| आरग्वधवृक्षकयोस्त्रिफलायाः सप्तपर्णस्य||९७||

इति षट् कषाययोगाः कुष्ठध्नाः सप्तमश्च तिनिशस्य| स्नाने पाने च
हितास्तथाष्टमश्चाश्वेमारस्य||९८||

आलेपनं प्रघर्षणमवचूर्णनमेत एव च कषायाः| तैलघृतपाकयोगे चेष्यन्ते कुष्ठशान्त्यर्थम्||९९||

dārvyā rasāñjanasya ca nimbapaṭōlasya khadirasārasya|
āragvadhadhvṛkṣakayōstriphalāyāḥ saptaparnasya||97||

iti ṣaṭ kaṣāyayōgāḥ kuṣṭhaghnāḥ saptamaśca tiniśasya| snānē pānē ca hitāstathā'ṣṭamaścāśvamārasya||98||

ālēpanam̄ pragharṣaṇamavacūrṇanamēta ēva ca kaṣāyāḥ| tailaghr̄tapākayōgē cēṣyantē kuṣṭhaśāntyartham||99||

dArvyA rasA~jjanasya ca nimbapaTolasya khadirasArasya| AragvadhavRukShakayostriphalAyAH saptaparNasya||97||

iti ShaT kaShAyayogAH kuShThaghnAH saptamashca tinishasya| snAne pAne ca hitAstathA~aShTamashcAshvamArasya||98||

AlepanaM pragharShaNamavacUrNanameta eva ca kaShAyAH| tailaghRutapAkayoge ceShyante kuShThashAntyartham||99||

Following six decoctions viz. #“Dārvi, rasāñjana”

#“Nimba, paṭola”

#Heart wood of “khadira” #“Āragvadha” and “vr̄kṣaka” #“Triphala”

#“Saptaparna”

Seventh decoction is of “tiniśa” and decoction of “āśvamāra”.

All of the above decoctions should be used for bathing, drinking, in the form of “lepa”, for scrubbing and for dusting. The same decoctions can be used for fortifying of medicated ghee and oil.[97-99]

त्रिफला निम्बपटोलं मञ्जिष्ठा रोहिणी वचा रजनी| एष कषायोऽभ्यस्तो निहन्ति कफपित्तजं कुष्ठम्||१००||

एतैरेव च सर्पिः सिद्धं वातोल्बणं जयति कुष्ठम्| एष च कल्पो दिष्टः खदिरासनदारुनिम्बानाम्||१०१||

triphalā nimbapaṭolam̄ mañjiṣṭhā rōhiṇī vacā rajaṇī| ēṣa kaṣāyō'bhyastō nihanti kaphapittajam̄ kuṣṭham||100||

ētairēva ca sarpiḥ siddham̄ vātōlbaṇam̄ jayati kuṣṭham| ēṣa ca kalpō diṣṭah khadirāsanadārunimbaṇām||101||

triphalA nimbapaTolaM ma~jjishThA rohiNI vacA rajaṇI| eSha kaShAyo~abhyasto nihanti kaphapittajaM kuShTham||100||

etaireva ca sarpiH siddhaM vAtolbaNaM jayati kuShTham| eSha ca kalpo diShTaH khadirAsanadArunimbAnAm||101||

In “kaphaja-pittaja kuṣṭha, triphala, nimba, paṭola, mañjiṣṭhā, rōhiṇī, vacā, rajani” should be regularly taken in the form of decoction. The same medicine, when used to fortify “ghṛita” helps in curing “vataja kuṣṭha”.

“Khadira, asana, devadāru” and “nimba” together when used like above has similar benefits.[100-101]

कुष्ठार्कतुत्थकट्फलमूलकबीजानि रोहिणी कटुका| कुटजफलोत्पलमुस्तं बृहतीकरवीरकासीसम्||१०२||

एडगजनिम्बपाठ दुरालभा चित्रको विडङ्गश्च। तिक्तालाबुकबीजं कम्पिल्लकसर्षपौ वचा दार्वी॥१०३॥

एतैस्तैलं सिद्धं कुष्ठधनं योग एष चालेपः। उद्वर्तनं प्रघर्षणमवचूर्णनमेष एवेष्टः॥१०४॥

kuṣṭhārkatutthakaṭphalamūlakabījāni rōhiṇī kaṭukā| kuṭajaphalōtpalamustaṁ
bṛhatīkaravīrakāśīsam॥102॥

ēdagajanimbapāṭhā durālabhā citrakō viḍaṅgaśca| tiktālābukabījaṁ
kampillakasarşapau vacā dārvī॥103॥

ētaistailaṁ siddhaṁ kuṣṭhaghnaṁ yōga ēṣa cālēpaḥ| udvartanaṁ
pragharṣaṇamavaṁcūrṇanamēṣa ēvēṣṭah॥104॥

kuShThArkatutthakaTphalamUlakabljAni rohiNI kaTukA| kuTajaphalotpalamustaM
bRuhatIkaravIrakAsIsam॥102॥

eDagajanimbapAThA durAlabhA citrako viDa~ggashca| tiktAIAbukabljaM
kampillakasarShapau vacA dArvi॥103॥

etaistailaM siddhaM kuShThaghnaM yoga eSha cAlepaH| udvartanaM
pragharShaNamavaṁcūrṇanameSha eveShTaH॥104॥

“Kuṣṭha, arka, tuttha, katphala,” seeds of “mūlaka, katukarōhiṇī,” fruits of “kuṭaja, utpala, musta, bṛhatī, karavīra, kāśīsa, ēdagaja, nimba, pāṭhā, durālabhā, citraka, viḍaṅga,” seeds of “alābū” which is bitter in taste, “kampillaka, sarṣapa, vacā” and “dārvī” when used for preparation of medicated oil helps in reducing “kuṣṭha”. The same contents may be used for “lepa, udvartana”, scrubbing and dusting. [102-104]

“Shweta-karaviradya taila”

श्वेतकरवीरकरसो गोमूत्रं चित्रको विडङ्गश्च। कुष्ठेषु तैलयोगः सिद्धोऽयं सम्मतो भिषजाम्॥१०५॥

इति श्वेतकरवीराद्यं तैलम्

śvētakaravīrakarasō gōmūtraṁ citrakō viḍaṅgaśca| kuṣṭhēṣu tailayōgaḥ siddhō'yaṁ
sammatō bhiṣajām॥105॥

iti śvētakaravīrādyam tailam

shvetakaravIrakaraso gomUtraM citrako viDa~ggashca| kuShTheShu tailayogaH
siddho~ayaM sammato bhiShajAm॥105॥

iti shvetakaravIrAdyaM tailam

Physicians recommend that, medicated oil prepared with the help of juice of white variety of “karavīra,” cows’ urine, “chitraka” and “viḍaṅga” cures all type of “kuṣṭha”. This ends the explanation of “śvēta karavīrādyā taila”. [105]

“Shweta karavira palladi tailam”

श्वेतकरवीरपल्लवमूलत्वग्वत्सको विडङ्गश्च। कुष्ठार्कमूलसर्षपशिग्रुत्वग्रोहिणी कटुका॥१०६॥
एतैस्तैलं सिद्धं कल्कैः पादांशिकैर्गवां मूत्रम्। दत्त्वा तैलचतुर्गुणमभ्यङ्गात् कुष्ठकपडूधनम्॥१०७॥
इति श्वेतकरवीरपल्लवाद्यं तैलम्

śvētakaravīrapallavamūlatvagvatsakō viḍaṅgaśca|
kuṣṭhārkamūlasarṣapaśigrutvagrōhiṇī kaṭukā||106||

ētaistailam siddham kalkaiḥ pādāṁśikairgavāṁ mūtram| dattvā
tailacaturguṇamabhyāṅgāt kuṣṭhakaṇḍūghnam||107||

iti śvētakaravīrapallavādyaṁ tailam

shvetakaravIrapallavamUlatvagvatsako viDa~ggashca|
kuShThArkamUlasarShapashigrutvagrohiNI kaTukA||106||

etaistailaM siddhaM kalkaiH pAdAMshikairgavAM mUtram| dattvA
tailacaturguNamabhyā~ggAt kuShThakaNDUghnam||107||

iti shvetakaravIrapallavAdyaM tailam

Paste of tender leaves of “śvēta karavīra,” root and bark of “vatsaka, viḍaṅga, kuṣṭha,” root of “arka, sarṣapa,” bark of “śigru, rōhiṇī,” 1/4th quantity of oil and cows urine in quantity four times that of oil and then “taila siddhi” is done then it helps in treating “kuṣṭha” and itching. The preparation is known as “śvēta karavīrapallavādya tailam”.[106-107]

“Tikta-ikshwakwadi tailam”

तिक्तालाबुकबीजं द्वे तुत्थे रोचना हरिद्रे द्वे। बृहतीफलमेरण्डः सविशालश्चित्रको मूर्वा॥१०८॥
कासीसहिङ्गुशिग्रुयूषणसुरदारुतुम्बुरुविडङ्गम्। लाङ्गालकं कुटजत्वक् कटुकाख्या रोहिणी चैव॥१०९॥
सर्षपतैलं कल्कैरतैर्मूत्रे चतुर्गुणे साध्यम्। कण्डूकुष्ठविनाशनमभ्यङ्गान्मारुतकफहन्त्॥११०॥
इति तिक्तेक्ष्वाक्वादितैलम्

tiktālābukabijam dvē tutthē rōcanā haridrē dvē| bṛhatīphalamēraṇḍah saviśālaścitrakō
mūrvā||108||

kāsīsahiṅguśigrutryūṣaṇasuradārutm̄buruviḍaṅgam| lāṅgālakam̄ kuṭajatvak
kaṭukākhyā rōhiṇī caiva||109||

sarṣapatailam kalkairētairmūtrē caturguṇē sādhyam|
kaṇḍukuṣṭhavināśanamabhyāṅgānmārutakaphahant̄||110||

iti tiktēkṣvākvāditailam

tiktAlAbukabljaM dve tutthe rocanA haridre dve| bRuhatlphalameraNDaH
savishAlashcitrako mUrvAl||108||

kAsIsahi_{ggushigrutryUShaNasuradArutumburuviDaggam| IA~ggAlakaM kuTajatvak kaTukAkhyA rohiNI caiva||109||}

sarShapatailaM kalkairetailmUtre caturguNe sAdhyam|
kaNDUkuShThavinAshanamabhya~ggAnmArutakaphahantRu||110||

iti tiktekShvAkvAditailam

Seeds of bitter variety of “alābu,” both varieties of “tuttha” (“mayura” and “kharparika tuttha”) “gorōcanā, haridra, dāruharidra,” fruit of “bṛhatī, ēraṇḍa, viśāla, citraka, murva, kāsīsa, hiṅgu, śigru, trikati suradāru, tumburu, viḍaṅga, lāṅgāli,” bark of “kuṭaja, katukarōhiṇī” are pasted together and mustard oil is fortified with above medicines and cow’s urine taken in quantity four times of oil.

Application of “tikta ekṣvākvādi tailam” is useful in itching, “kuṣṭha” and “vata kapha” dominated diseases. [108-110]

“Kanakaksheeri tailam”

कनकक्षीरी शैला भार्गी दन्त्या: फलानि मूलं च। जातीप्रवालसर्षपलशुनविडङ्गं करञ्जत्वक्॥१११॥
सप्तच्छदार्कपल्लवमूलत्वइनिम्बचित्रकास्फोताः। गुञ्जैरण्डं बृहतीमूलकसुरसार्जकफलानि॥११२॥
कुष्ठं पाठा मुस्तं तुम्बुरुमूर्वावचाः सषड्ग्रन्थाः [१] | एडगजकुटजशिगुञ्यूषणभल्लातकक्षवकाः॥११३॥
हरितालमवाक्पुष्पी तुत्थं कम्पिल्लकोऽमृतासञ्जः। सौराष्ट्री कासीसं दार्वीत्वक् सर्जिकालवणम्॥११४॥
कल्कैरतैस्तैलं करवीरकमूलपल्लवकषायो। सार्षपमथवा तैलं गोमूत्रचतुर्गुणं साध्यम्॥११५॥
स्थाप्यं कटुकालाबुनि तत्सिद्धं तेन मण्डलान्याशु। भिन्द्यादभिषगभयडगात्कूर्मीश्च कण्डुं च
विनिहन्यात्॥११६॥

इति कनकक्षीरीतैलम्

kanakaksṭrī śailā bhārgī dantyāḥ phalāni mūlam ca| jātīpravālasarṣapalaśunaviḍaṅgam
karañjatvak||111||

saptacchadārkapallavamūlatvañnimbacitrakāsphōtāḥ| guñjairanḍam
bṛhatīmūlakurasārjakaphalāni||112||

kuṣṭham pāṭhā mustam tumburumūrvāvacāḥ saṣadgranthāḥ [1] |
ēḍagajakuṭajaśigrutryūṣaṇabhallātakakṣavakāḥ||113||

haritālamavākpuṣpī tuttham kampillakō’mr̄tāsañjñāḥ| saurāṣṭrī kāsīsam dārvītvak
sarjikālavāṇam||114||

kalkairētaistailam karavīrakamūlapallavakasāyē| sārsapāmāthavā tailam
gōmūtracaturguṇam sādhyam||115||

sthāpyam kaṭukālābuni tatsiddham tēna maṇḍalānyāśu|
bhindyādbhiṣagabhyaṅgātkṛmīṁśca kaṇḍūm ca vinihanyāt||116||

iti kanakakṣīrītailam

kanakakShIrl shailA bhArgI dantyAH phaIAni mUlaM ca|
jAtlpravAlasarShapalashunaviDa~ggaM kara~jjatvak||111||

saptacchadArkapallavamUlatva~gnimbacitrakAsphotAH| gu~jjairaNDaM
bRuhatImUlakasurasArjakaphalAni||112||

kuShThaM pAThA mustaM tumburumUrvAvacAH saShaDgranthAH [1] |
eDagajakuTajashigrutryUShaNabhallAtakakShavakAH||113||

haritAlamavAkpuShpl tutthaM kampillako_{amRutAsa}jj~jaH| saurAShTrI kAsIsaM dArvItvak
sarjikAlavaNam||114||

kalkairetaistilaM karavIrakamUlapallavakaShAye| sArShapamathavA tailaM
gomUtracaturguNaM sAdhyam||115||

sthApyaM kaTukAIAbuni tatsiddhaM tena maNDalAnyAshu|
bhindyAdbhiShagabhya~ggAtkRumiMshca kaNDUM ca vinihanyAt||116||

iti kanakakShIrltailam

“Kanakakṣīrī” (“Kankuṣṭha”), “śailā” (“manashila”), “bhārangi,” fruits, root and tender leaves of “dantī, sarṣapa, laśuna, viḍaṅga,” bark of “karañja”, “saptacchadā,” tender leaves, root and bark of “arka, nimba, chitraka, āspḥōtāḥ, guñja, eraṇḍa,” root of “bṛhatī,” seeds of “surasā” and fruits of “arjaka kuṣṭha, pāṭhā, musta, tumburu, vacā, murva, ṣaḍgranthā, ēḍagaja, kuṭaja, śigru, trikatu, bhallataka, kṣavaka, haritāla, avākpuṣpī” (“apāmārga”), “tuttha, kampillaka, amṛtāsañjñā” (“kharparika tuttha”), “saurāṣṭrī, kāsīsa,” bark of “dārvi, sarjikālavaṇa”. All the above medicines should be pasted and oil should be added (either sesame or mustard oil) along with decoction of root and tender leaves of “karavira” and four times of oil, cows urine should be added and the same should be stored in container of “kaṭukālābu”. It immediately cures “maṇḍala kuṣṭha” by “bhedana” of “mandala” also cures “krīmi” and itching. This preparation is known as “kanakakṣīrī taila” .[111-116]

“Sidhmahara lepa”

कुष्ठं तमालपत्रं मरिचं समनःशिलं सकासीसम्। तैलेन युक्तमुषितं सप्ताहं भाजने ताम्रे॥११७॥
तेनालिप्तं सिद्धं सप्ताहाह्येति [१] तिष्ठतो घर्मे। मासान्नवं किलासं स्नानं मुक्त्वा विशुद्धतनोः॥११८॥
इति सिद्धमे लेपः

kuṣṭhaṁ tamālapatrāṁ maricāṁ samanahśilāṁ sakāśīsam| tailēna yuktamuṣitarṁ saptāhaṁ bhājanē tāmrē||117||

tēnāliptarṁ sidhmaṁ saptāhāhyēti [1] tiṣṭhatō gharmē| māsānnavāṁ kilāsaṁ snānam muktvā viṣuddhatanōḥ||118||

iti sidhmē lēpaḥ

kuShThaM tamAlapatraM maricaM samanaHshilaM sakAslsam| tailena yuktamuShitaM saptAhaM bhAjane tAmre||117||

tenAliptaM sidhmaM saptAhAhyeti [1] tiShThato gharme| mAsAnnavaM kilAsaM snAnaM muktvA vishuddhatanoH||118||

iti sidhme lepaH

The paste of “kuṣṭha, tamālapatra, maricha, manahśila, kāśīsa” should be mixed with oil and kept for seven days in copper vessel. Application of this oil and exposure to sun helps in curing “siddhma” within a week and “kilāsa” gets cured within a month provided the patient does not take bath but maintains cleaned body. The preparation is called as “sidhma lepa”.[117-118]

सर्षपकरञ्जकोषातकीनां तैलान्यथेऽगुदीनां च। कुष्ठेषु हितान्याहुस्तैलं यच्चापि खदिरसारस्य॥११९॥

sarsapakarañjakōṣātakīnāṁ tailānyathēngudīnāṁ ca| kuṣṭhēsu hitānyāhustailāṁ yaccāpi khadirasārasya||119||

sarShapakara~jjakoShAtakInAM tailAnyathe~ggudInAM ca| kuShTheShu hitAnyAhustailaM yaccApi khadirasArasya||119||

Oil extracted from “sarṣapa, karañja, kōṣātakī,” and “ingudi” when fortified with heartwood of “khadira” is useful in “kuṣṭha”.[119]

“Vipadikahara ghee” and “taila”

जीवन्ती मञ्जिष्ठा दार्वी कम्पिल्लकः पयस्तुत्थम्। एष घृततैलपाकः सिद्धः सिद्धै च सर्जरसः॥१२०॥

देयः समधूच्छिष्टो विपादिका तेन शाम्यतेऽभ्यक्ता। चर्मेकुष्ठकिटिम् कुष्ठं शाम्यत्यलसकं च॥१२१॥

इति विपादिकाहरघृततैले

jīvantī mañjīṣṭhā dārvī kampillakah payastuttham| ēṣa ghṛtatailapākah siddhah siddhē ca sarjarasah||120||

dēyah samadhūcchiṣṭō vipādikā tēna śāmyatē'bhyaktā| carmaikakuṣṭhakiṭimāṁ kuṣṭhaṁ śāmyatyalaśakāṁ ca||121||

iti vipādikāharaghṛtataile

jIvantl ma~jjiShThA dArvl kampillakaH payastuttham| eSha ghRutatailapAkaH siddhaH siddhe ca sarjarasaH||120||

deyaH samadhUcchiShTo vipAdikA tena shAmyate~abhyaktA| carmaikakuShThakiTimaM kuShThaM shAmyatyalasakaM ca||121||

iti vipAdikAharaghRutataile|

With “jīvantī, mañjīṣṭhā, dārvi, kampillaka, payas” (milk) and “tuttha” should be used to prepare ghee and/or fortify oil. Once “sneha siddhi lakshana” are seen “sarjarasa” and “madhūcchiṣṭa” should be added. Application of the oil cures, “charmakuṣṭha, ekakuṣṭha, kiṭibha” and “alasaka” type of “kuṣṭha”. This preparation is called as “vipādikāhara ghṛita” and “taila.”[120-121]

किण्वं [१] वराहरुधिरं पृथ्वीका सैन्धवं च लेपः स्यात् | लेपो योज्यः कुस्तुम्बुरुणि कुष्ठं च मण्डलनुत् ||१२२||

kiṇvarṁ [1] varāharudhiram pṛthvīkā saindhavarṁ ca lēpaḥ syāt| lēpō yōjyāḥ kustumburūṇi kuṣṭham ca maṇḍalanut||122||

kiNvaM [1] varAharudhiraM pRuthvIkA saindhavaM ca lepaH syAt| lepo yojyaH kustumburUNi kuShThaM ca maNDalanut||122||

Application of paste of “kiṇva” (enzyme used for fermentation), blood of boar, “pṛthvīkā” and “saindhava” or “lepa” of “kustumburūṇi” cures “maṇḍala” type of “kuṣṭha”.[122]

पूतीकदारुजटिला: पक्वसुरा क्षौद्रमुद्गपण्यौ च| लेपः सकाकनासो मण्डलकुष्ठापहः सिद्धः ||१२३||

pūtīkadārujaṭilāḥ pakvasurā kṣaudramudgaparṇyau ca| lēpaḥ sakākanāsō maṇḍalakuṣṭhāpahāḥ siddhahāḥ ||123||

pUtkadArujaTilAH pakvasurA kShaudramudgaparNyau ca| lepaH sakAkanAso maNDalakuShThApaHaH siddhaH||123||

Application of “lepa” of “pūtīka, devadāru, jaṭi, pakvasurā, kṣaudravalli” (“guduchi”)“mudgaparṇi” and “kākanāsa” cures “maṇḍala kuṣṭha”.[123]

चित्रकशोभाज्जनकौ गुदूच्यपामार्गदेवदारुणि| खदिरो धवश्च लेपः श्यामा दन्ती द्रवन्ती च ||१२४||

लाक्षारसाज्जनैला: पुनर्नवा चेति कुष्ठिनो लेपाः| दधिमण्डयुताः सर्वे देयाः षण्मारुतकफकुष्ठधनाः ||१२५||

citrakaśōbhāñjanakau guḍūcyapāmārgadēvadārūṇi| khadirō dhavaśca lēpaḥ śyāmā dantī dravantī ca||124||

lākṣārasāñjanailāḥ punarnavā cēti kuṣṭhinō lēpāḥ| dadhimāṇdayutāḥ sarvē dēyāḥ ṣaṇmārutakaphakuṣṭhaghnāḥ||125||

citrakashobhA~jjanakau guDUCyapAmArgadevadArUNi| khadiro dhavashca lepaH shyAmA dantl dravantl ca||124||

IAkShArasA~jjanailAH punarnavA ceti kuShThino lepAH| dadhimaNDayutAH sarve
deyAH ShaNmArutakaphakuShThaghnAH||125||

#Citraka and śōbhāñjana
#Guduchi , apāmārga , devadāru #Khandira
#Dhava #Syama, dantī, dravanti
#lākṣā, rasāñjana , ela, punarnava

The above six combinations when mixed separately with “dadhimaṇḍa” and applied in the form of “lepa” cures “kuṣṭha” having predominance of “vata” and “kapha dosha”.[124-125]

एडगजकुष्ठसैन्धवसौवीरकसर्षपैः कृमिद्यनैश्च| कृमिकुष्ठमण्डलाख्यं दद्रकुष्ठं च शममुपैति||१२६||

ēdagajakuṣṭhasaindhavasauvlrakasarshapaiḥ kṛmighnaiśca| kṛmikuṣṭhamandalākhyam
dadrūkuṣṭhaṁ ca śamamupaiti||126||

eDagajakuShThasaindhavasauvlrakasarShapaiH kRumighnaishca|
kRumikuShThamaNDalAkhyam dadrUkuShThaM ca shamamupaiti||126||

Application of “ēdagaja, kuṣṭha, saindhava, sauviraka, sarṣapa” and “kṛmighna” (“viḍaṅga”) cures “kṛmi, maṇḍala” and “dadru kuṣṭha”. [126]

एडगजः सर्जरसो मूलकबीजं च सिध्मकुष्ठानाम्| काञ्जिकयुक्तं तु पृथग्मतमिदमुद्वर्तनं लेपाः||१२७||

ēdagajah sarjaraso mūlakabījam ca sidhmakuṣṭhānām| kāñjikayuktam tu
pr̥thañmatamidamudvartanaṁ lēpāḥ||127||

eDagajaH sarjaraso mUlakabljaM ca sidhmakuShThAnAm| kA~jjikayuktaM tu
pRutha~gmatamidamudvartanaM lepAH||127||

Application of “ēdagaja” or “sarjarasa” or seeds of “mūlaka” prepared by adding “kāñji” should be used as “udvartana” or in the form of “lepa” it cures “sidhma”.[127]

Management of “pitta-kapha” dominant “kushtha”

वासा त्रिफला पाने स्नाने चोद्वर्तने प्रलेपे च| बृहतीसेव्यपटोलाः ससारिवा रोहिणी चैव||१२८||

खदिरावघातकुभरोहीतकलोधकुटजध्वनिम्बाः| सप्तच्छदकरवीराः शस्यन्ते स्नानपानेषु||१२९||

vāsā triphalā pānē snānē cōdvartanē pralēpē ca| bṛhatīsēvyapaṭolāḥ sasārivā rōhiṇī caiva||128||

khadirāvaghātakakubharōhītakalōdhhrakutajadhabanimbāḥ| saptacchadakaravīrāḥ
śasyantē snānapānēṣu||129||

vAsA tiphalA pAne snAne codvartane pralepe ca| bRuhatlsevyapaTolAH sasArivA
rohiNI caiva||128||

khadirAvaghAtakakubharohItakalodhrakuTajadhavanimbAH| saptacchadakaravIrAH
shasyante snAnapAneShu||129||

“Vāsā” and “triphalā” may be used internally, for bathing, “udvartana” and “lepa” along with “bṛhatī, sēvyā, paṭōla, sārivā, rōhiṇī.”

Similarly “khadira, avaghāta” (“karnikākāra”), “kakubha, rōhītaka, lōdhra, kuṭaja, dhava, nimba, saptacchada” and “karavira” combination is useful for external use, for bathing and internal use. [128-129]

जलवाप्यलोहकेशरपत्रप्लवचन्दनं मृणालानि। भागोत्तराणि सिद्धं प्रलेपनं पित्तकफकुष्ठे॥१३०॥
jalavāpyalōhakēśarapatraplavacāndanam mṛṇālāni| bhāgottarāṇi siddham pralēpanam
pittakaphakuṣṭhē||130||

jalavApyalohakesharapatraplavacandanaM mRuNAIANi| bhAgottarANi siddhaM
pralepanaM pittakaphakuShThe||130||

Application of water (one part), “vāpya” (“kuṣṭha” herb) (2 part), “lōha” (“agaru”) (3 part) “kēśara” (4 part), “patra” (5 part), “plava” or “kaivartamusta” (6 part), “chāndana, mṛṇāla” (8 part) is useful in “pitta-kapha” type of “kuṣṭha”. [130]

Management of “pitta” dominant “kushtha”

यष्ट्याहवलोधपद्मकपटोलपिचुमर्दचन्दनरसाश्च। स्नाने पाने च हिताः सुशीतलाः पित्तकुष्ठिभ्यः॥१३१॥
yaṣṭyāhvalōdhrapadmakapaṭōlapicumardacandanarasāśca| snānē pānē ca hitāḥ
suśītalāḥ pittakuṣṭhibhyah||131||

yaShTyAhvalodhrapadmakapaTolapicumardacandanarasAshca| snAne pAne ca hitAH
sushItalAH pittakuShThibhyaH||131||

Decoction of “yaṣṭyāhva, lōdhra, padmaka, paṭōla, pichumarda” and “chandana” may be used externally for bathing and internal use. It has cooling effect and is beneficial in “pittaja kuṣṭha”. [131]

आलेपनं प्रियङ्गुरेणुका वत्सकस्य च फलानि। सातिविषा च ससेव्या सचन्दना रोहिणी कटुका॥१३२॥
ālēpanam priyaṅgurharēṇukā vatsakasya ca phalāni| sātiviṣā ca sasēvyā sacandanā
rōhiṇī kaṭukā||132||

AlepanaM priya~ggurhareNukA vatsakasya ca phalAni| sAtiviShA ca sasevyA
sacandanA rohiNI kaTukA||132||

Application of “priyaṅgu, harēṇuka,” fruits of “vatsaka, ativiṣā, sēvyā, chandana” and “katu rōhiṇī” is also useful in “paittika kuṣṭha”. [132]

तिक्तघृतैधौतिघृतैरभ्यङ्गो दृश्यमानकुष्ठेषु। तैलैश्चन्दनमधुकप्रपौण्डरीकोत्पलयुतैश्च॥१३३॥

tiktaghṛtairdhautaghṛtairabhyāṅgō dāhyamānakusṭhēsu|
tailaiścandanamadhukaprapauṇḍarīkōtpalayutaiśca||133||

tiktaghRutaIRDhautaghRutairabhyā~ggo dāhyamAnakuShTheShu|
tailaishcandanamadhukaprapauNDarlkoTPalayutaishca||133||

Massaging with “tiktaghṛta” and “dhautaghṛta” helps in reducing burning sensation in “kuṣṭha”. Similarly medicated oil prepared from “chandana, madhuka, prapaunḍarīka” and “utpala” also has similar effect. [133]

क्लेदे प्रपतति चाङ्गे दाहे विस्फोटके सचर्मदले। शीता: प्रदेहसेका व्यधो विरेको घृतं तिक्तम्॥१३४॥

klēdē prapatati cāṅgē dāhē visphōṭakē sacarmadalē। śītāḥ pradēhasēkā vyadhō virēkō
ghṛtam tiktam||134||

klede prapatati cA~gge dAhe visphoTake sacarmadale| shltAH pradehasekA vyadho
vireko ghRutaM tiktam||134||

If there is excessive secretions from skin lesion, sloughing of body parts, burning sensation, eruptions and exfoliation of skin then “śitā pradēha” (application of “lepa” with “śitā dravya”), “sēkā, virechana” and use of “tikta ghṛta” should be done.[134]

खदिरघृतं निम्बघृतं दार्वीघृतमुत्तमं पटोलघृतम्। कुष्ठेषु रक्तपित्तप्रबलेषु भिषग्जितं सिद्धम्॥१३५॥

khadiraghṛtam nimbaghṛtam dārvīghṛtamuttamaṁ paṭolaghṛtam| kuṣṭhēsu
raktapittaprabaleṣu bhiṣagjitaṁ siddham||135||

khadiraghRutaM nimbaghRutaM dArVighRutamuttamaM paTolaghRutam| kuShTheShu
raktapittaprabaleShu bhiShagjitaM siddham||135||

“Khandiraghṛta, nimbaghṛta, dārvīghṛta” and “paṭolaghṛta” are among the best to be used in “rakta” and “pitta pradhana kuṣṭha”. [135]

त्रिफलात्वचोऽर्धपलिकाः पटोलपत्रं च कार्षिकाः शेषाः। कटुरोहिणी सनिम्बा यष्ट्याहवा त्रायमाणा
च॥१३६॥

एष कषायः साध्यो दत्त्वा द्विपलं मसूरविदलानाम्। सलिलाढकेऽष्टभागे शेषे पूतो रसो ग्राहयः॥१३७॥

ते च [१] कषायेऽष्टपले चतुष्पलं सर्पिषश्च पक्तव्यम्। यावत्स्यादष्टपलं शेषं पेयं ततः कोष्णम्॥१३८॥

तद्वातपित्तकुष्ठं वीसर्प वातशोणितं प्रबलम्। ज्वरदाहगुल्मविद्रधिविभ्रमविस्फोटकान् हन्ति॥१३९॥

triphalātvacō’rdhapalikāḥ paṭolapatram ca kārṣikāḥ śeṣāḥ। kaṭurōhiṇī sanimbā¹
yaṣṭyāhvā trāyamāṇā ca||136||

ēṣa kaṣāyah sādhyō dattvā dvipalam masūravidalānām| salilāḍhakē’ṣṭabhāgē śeṣē
pūtō rasō grāhyah||137||

tē ca [1] kaṣāyē’ṣṭopalē catuṣpalam sarpiṣāśca paktavyam| yāvatsyādaṣṭopalam
śeṣam pēyam tataḥ kōṣṇam||138||

tadvātāpitakuṣṭharṁ vīsarparṁ vātaśōṇitam̄ prabalam|
jvaradāhagulmavidradhvibhramavisphōṭakān hanti||139||

triphalAtvaco~ardhapalikAH paTolapatraM ca kArShikAH sheShAH| kaTurohiNI
sanimbA yaShTyAhvA trAyamANA ca||136||

eSha kaShAyaH sAdhyo dattvA dvipalaM masUravidAnAm|
salilADhake~aShTabhAge sheShe pUto raso grAhyaH||137||

te ca [1] kaShAye~aShTapale catuShpalaM sarpiShashca paktavyam|
yAvatsyAdaShTapalaM sheShaM peyaM tataH koShNam||138||

tadvAtapittakuShThaM vlsarpaM vAtashoNitaM prabalam|
jvaradAhagulmavidradhvibhramavisphoTakAn hanti||139||

"Triphala" fruit pulp in quantity of ½ "pala" each, "paṭōla patra" ½ "pala" quantity, one "karsa" each of "katurōhiṇī, nimba, yaṣṭyāhva" and "trāyamāṇa" and two "pala" of dehusked seeds of "masūra" which should be boiled in one "āḍhaka" of water and reduced to 1/8th. The decoction should be filtered and to this eight "pala" of decoction, four "pala" of ghee should be added and cooked till 8 "palas" remain and this medicated ghee should be administered lukewarm. It is useful in "vata pitta kuṣṭha, visarpa, vātarakta, jwara, daha, gulma, vidradhi," giddiness and "visphōṭaka". [136-139]

"Tikta shatpala" ghee

निम्बपटोलं दार्वीं दुरालभां तिक्तरोहिणीं त्रिफलाम्| कुर्यादर्धदलांशं पर्पटकं त्रायमाणां च||१४०||

सलिलाढकसिद्धानां रसेष्टभागस्थिते क्षिपेत् पूते| चन्दनकिराततिक्तकमागधिकास्त्रायमाणां च||१४१||

मुस्तं वत्सकबीजं कल्कीकृत्यार्धकार्षिकान् भागान्| नवसर्पिषश्च षट्पलमेतत्सिद्धं [3] घृतं पेयम्||१४२||

कुष्ठज्वरगुल्मार्शोग्रहणीपाण्डवामयश्वयथुहारि| पामाविसर्पिडकाकण्डमदगण्डनुत्सिद्धम्||१४३||

इति तिक्तषट्पलं घृतम्

nimbapaṭolam̄ dārvīṁ durālabhāṁ tiktarōhiṇīṁ triphalām| kuryādardhadalāṁśam̄
parpaṭakāṁ trāyamāṇāṁ ca||140||

salilāḍhakasiddhānāṁ rasē'ṣṭabhāgasthitē kṣipēt pūtē|
candanakirātatiktakamāgadhikāstrāyamāṇāṁ ca||141||

mustāṁ vatsakabījaṁ kalkīkṛtyārdhakārṣikān bhāgān| navasarpiṣāśca
ṣaṭpalamētatsiddham̄ [3] ghṛtam̄ pēyam||142||

kuṣṭhajvaragulmārśōgrahaṇīpāṇḍvāmayaśvayathuhāri|
pāmāvisarpapiḍakākanḍūmadaganḍanutsiddham||143||

iti tiktaṣaṭpalakāṁ ghṛtam

nimbapaTolaM dArvIM durAlabhAM tiktarohiNIM triphalAm| kuryAdardhadalAMshaM
parpaTakaM trAyamANAM ca||140||

salilADhakasiddhAnAM rase~aShTabhAgasthite kShipet pUte|
candanakirAtatiktakamAgadhikAstrAyamANAM ca||141||

mustaM vatsakabljaM kalkIkRutyArdhakArShikAn bhAgAn| navasarpiShashca
ShaTpalametatsiddhaM [3] ghRutaM peyam||142||

kuShThajvaragulmArshograhaNIpANDvAmayashvayathuhAri|
pAmAvisarpapiDakAkaNDUmadagaNDanutsiddham||143||

iti tiktaShaTpalaM ghRutam

"Nimba, patōla, dārvi, duralabha, tiktarōhiṇī, triphala, parpaṭaka" and "trāyamāṇa" are taken in half "pala" quantity and boiled with water in quantity of one "āḍhaka" and reduced to 1/8th. The decoction should be filtered and to it paste of "chandana, kirātatiktaka, pippali, trāyamāṇa, musta," seeds of "vatsaka" in quantity of half "karsa" should be added along with 6 "palas" of "ghṛita" and "sneha siddhi" should be carried out. This "tiktaṣaṭpala ghṛita" is useful in "kuṣṭha, jwara, gulma, arśa, grahani, pāṇḍu, śvayathu, pāmā, visarpa, piḍakā, kaṇḍū, mada" and "galagaṇḍa". [140-143]

"Mahatiktaka" ghee

सप्तच्छदं प्रतिविषां शम्पाकं तिक्तरोहिणीं पाठाम्। मुस्तमुशीरं त्रिफलां पटोलपिचुमर्दपर्षटकम्॥१४४॥

धन्वयवासं चन्दनमुपकुल्यां पद्मकं हरिद्रे द्वे। षड्ग्रन्थां सविशालां शतावरीं सारिवे चोभे॥१४५॥

वत्सकबीजं यासं [४] मूर्वाममृतां किराततिक्तं च। कल्कान् कुर्यान्मतिमान्यष्ट्याहवं त्रायमाणां च॥१४६॥

कल्कश्चातुर्भागो [५] जलमष्टगुणं रसोऽमृतफलानाम्। द्विगुणो घृतात्प्रदेयस्तत्सर्पिः
पाययेत्सिद्धम्॥१४७॥

कुष्ठानि रक्तपित्प्रबलान्यर्शासि रक्तवाहीनि। वीसर्पमन्त्लपित्तं [६] वातासृक् पाण्डुरोगं च॥१४८॥

विस्फोटकान्सपामानुन्मादं कामलां ज्वरं कण्डूम्। हृद्रोगगुल्मपिडका असृग्दरं गण्ठमालां च॥१४९॥

हन्यादेतत् सर्पिः पीतं काले यथाबलं सद्यः। योगश्तैरप्यजितान्महाविकारान्महातिक्तम्॥१५०॥

इति महातिक्तकं घृतम्

saptacchadāṁ prativiśāṁ śampākāṁ tiktarōhiṇīṁ pāṭhām| mustamuśīram triphalāṁ
paṭolapicumarpaṭakam||144||

dhanvayavāsaṁ candanamupakulyāṁ padmakāṁ haridrē dvē| ṣadgranthāṁ saviśālāṁ
śatāvarīṁ sārivē cōbhē||145||

vatsakabījaṁ yāsaṁ [4] mūrvāmamṛtāṁ kirātatiktāṁ ca| kalkān
kuryānmatimānyāstyāhvām trāyamāṇāṁ ca||146||

kalkaścāturbhāgō [5] jalamaśtagunārā rasō'mṛtaphalānām| dviguṇō
ghṛtāpradēyastatsarpiḥ pāyayētsiddham||147||

kuṣṭhāni raktapittaprabalānyarśāṁsi raktavāhīni| vīsarpaṁāmlapittam [6] vātāśrk
pāṇḍurōgarām ca||148||

visphōṭakānsapāmānumādaṁ kāmalāṁ jvaraṁ kaṇḍūm| hr̥drōgagulmapiḍakā
asrgdaraṁ gaṇdamālāṁ ca||149||

hanyādētat sarpiḥ pītaṁ kālē yathābalāṁ sadyah|
yogaśatairapyajitānmahāvikārānmahātiktam||150||

iti mahātiktakam ghṛtam

saptacchadaM prativiShAM shampAkaM tiktarohiNIM pAThAm| mustamushIraM
triphalAM paTolapicumardaparpaTakam||144||

dhanvayavAsaM candanamupakulyAM padmakaM haridre dve| ShaDgranthAM
savishAIAM shatAvarIM sArive cobhe||145||

vatsakabljaM yAsaM [4] mUrvAmamRutAM kirAtatiktaM ca| kalkAn
kuryAnmatimAnyashTyAhvaM trAyamANAM ca||146||

kalkashcAturbhAgo [5] jalamaShTaguNaM raso~amRutaphalAnAm| dviguNo
ghRutAtpradeyastatsarpiH pAyayetsiddham||147||

kuShThAni raktapittaprabalAnyarshAMsi raktavAhIni| vlsarpamamlapittaM [6]
vAtAsRuk pANDurogaM ca||148||

visphoTakAnsapAmAnunmAdaM kAmalAM jvaraM kaNDUm| hRudrogagulmapiDakA
asRugdaraM gaNdamAIAM ca||149||

hanyAdetat sarpiH pltaM kAle yathAbalaM sadyaH|
yogashatairapyajitAnmahAvikArAnmahAtiktam||150||

iti mahAtiktakam ghRutam

"Saptacchada, prativiśā, śampāka (āragvada), tiktarōhiṇī, pāṭhā, musta, uśīra, triphala, paṭola, picumarda, parpaṭaka, dhanvayavās, candana, upakulyā (pippali), padmaka haridra, dāruharidra, ṣaḍgrantha, viśālā, śatāvarī," both the type of "sāriva" ("Krsna" and "sveta"), seeds of 'vatsaka, yāsa, mūrvā, amṛtā, kirātakta, yastimadhu" and "trayamana" are taken together and paste is prepared in quantity of one fourth of "ghṛita". To this water should be added in quantity of 8 times of ghee along with juice of "amṛtaphala" ("amalaki") in quantity of twice of "ghṛita" and "siddha ghṛita" should be prepared. It is beneficial in "kuṣṭha, raktapitta," serious type of bleeding piles, "vīarpa, amlapitta, vātarakta, pāṇḍurōga, visphōṭakaka, pāmā, unmāda, kāmalā, jwara, kaṇḍū, hr̥drōga, gulma, piḍakā, raktapradar, gaṇdamālā." This ghee should be administered at recommended time and dose according to the strength of patient. This

“mahātiktakaghṛita” is useful in above mentioned disease conditions where hundred of other preparations do not cure above diseases. [144-150]

दोषे हृतेऽपनीते रक्ते बाह्यान्तरे कृते शमने [७] | स्नेहे च कालयुक्ते न कुष्ठमनुवर्तते [८] साध्यम्॥१५१॥

dōṣē hṛtē'panītē raktē bāhyāntarē kṛtē śamanē [7] | snēhē ca kālayuktē na kuṣṭhamanuvartatē [8] sādhyam||151||

doShe hRute~apanlte rakte bAhyAntare kRute shamane [7] | snehe ca kAlayukte na kuShThamanuvartate [8] sAdhyam||151||

After “shodhana” of “dosha”, blood letting, external and internal “shamana” therapies and administration of ghee at appropriate time helps in curing skin diseases and also prevents recurrence. [151]

“Maha khadira” ghee

खदिरस्य तुला: पञ्च शिंशपासनयोस्तुले। तुलार्धः सर्व एवैते करञ्जारिष्टवेतसाः॥१५२॥

पर्पटः कुटजश्चैव वृषः कृमिहरस्तथा। हरिद्रे कृतमालश्च गुड्ची त्रिफला त्रिवृत्॥१५३॥

सप्तपर्णश्च सङ्कुण्णा दशद्रोणेषु वारिणः। अष्टभागावशेषं तु कषायमवतारयेत्॥१५४॥

धात्रीरसं च तुल्यांशं सर्पिषश्चाढकं पचेत्। महातिक्तकल्कैस्तु यथोक्तैः पलसम्नितैः॥१५५॥

निहन्ति सर्वकुष्ठानि पानाभ्यङ्गनिषेवणात्। महाखदिरमित्येतत् परं कुष्ठविकारनुत्॥१५६॥

इति महाखदिरं घृतम्

khadirasya tulāḥ pañca śimśapāsanayōstulē| tulārdhāḥ sarva ēvaitē
karañjāriṣṭavētasāḥ||152||

parpaṭāḥ kuṭajaścaiva vṛṣah kṛmiharastathā| haridrē kṛtamālaśca guḍūcī triphalā
trivṛt||153||

saptaparnaśca saṅkṣuṇṇā daśadrōṇēṣu vāriṇah| aṣṭabhāgāvaśēśam tu
kaśāyamavatārayēt||154||

dhātrīrasam ca tulyāṁśam sarpiṣaścāḍhakam pacēt| mahātiktakakalkaistu yathōktaiḥ
palasammitaiḥ||155||

nihanti sarvakuṣṭhāni pānābhyaṅganisēvanāt| mahākhadiramityētat param
kuṣṭhavikāranut||156||

iti mahākhadirar̄ ghṛtam

khadirasya tulAH pa~jca shiMshapAsanayostule| tulArdhAH sarva evaite
kara~jjAriShTavetasAH||152||

parpaTaH kuTajashcaiva vRuShaH kRumiharastathA| haridre kRutamAlashca guDUcl
triphalA trivRut||153||

saptaparNashca sa~gkShuNNA dashadroNeShu vAriNaH| aShTabhAgAvasheShaM tu
kaShAyamavatArayet||154||

dhAtrIrasaM ca tulyAMshaM sarpiShashcADhakaM pacet| mahAtiktakakalkaistu
yathoktaiH palasammitaiH||155||

nihanti sarvakuShThAni pAnAbhya~gganiShevaNAt| mahAkhadiramityetat paraM
kuShThavikAranut||156||

iti mahAkhadiraM ghRutam

Five “tulā” of “khadira,” one “tulā” each of “śimśapa” and “āsana,” half “tulā” each of “karañja, arīṣṭa, vētasa, parpata, kuṭaja, vr̥sa, kṛ̥mi hara (viḍaṅga), haridra, kṛ̥tamāla, guḍūcī, triphala, trivṛ̥t, saptaparna” should be cut into small parts and boiled in 10 “drōṇa” of water and reduced to 1/8th . To this add one “ādhaka” each of “ghrit” and juice of “āmalaki” along with one “pala” of “mahātiktaka kalka” content. “Sneha siddhi” should be done; this “mahākhadira ghṛita” when used internally and for application cures all type of “kuṣṭha”.[152-156]

Treatment of maggots/micro-organisms in “kushtha”

प्रपतत्सु लसीकाप्रसुतेषु गात्रेषु जन्तुजग्धेषु। मूत्रं निम्बविडङ्गे स्नानं पानं प्रदेहश्च॥१५७॥

prapatatsu lasīkāprasruteṣu gātrēṣu jantujagdhēṣu| mūtram nimbaviḍaṅgē snānam
pānam pradēhaśca||157||

prapatatsu laslkAprasruteShu gAtreShu jantujagdheShu| mUtraM nimbaviDa~gge
snAnaM pAnaM pradehashca||157||

If there is sloughing of phalanges, exudation, maggots than such “kuṣṭha” patient should use “gomūtra, nimba” and “viḍaṅga” in appropriated quantity for bath (dressing), internally and for “lepa”. [157]

वृषकुटजसप्तपर्णः करवीरकरञ्जनिम्बखदिराश्च। स्नाने पाने लेपे क्रिमिकुष्ठनुदः सगोमूत्राः॥१५८॥

vṛ̥ṣakuṭajasaptaparnāḥ karavīrakarañjanimbakhadirāśca| snānē pānē lēpē kṛ̥mi
kuṣṭhanudah sagomutrāḥ||158||

vRuShakuTajasaptaparNAH karavIrakara~jjanimbakhadirAshca| snAne pAne lepe
krimikuShThanudaH sagomUtrAH||158||

“Vṛ̥ṣa, kuṭaja, saptaparna, karavira, karañja, nimba, khadira,” along with “gomūtra” is useful in “kṛ̥mi” and “kuṣṭha” in the form of “lepa”, internal and external use.[158]

पानाहारविधाने प्रसेचने धूपने प्रदेहे च। कृमिनाशनं विडङ्गं विशिष्यते कुष्ठहा खदिरः॥१५९॥

pānāhāravidhānē prasēcanē dhūpanē pradēhē ca| kṛmināśanam viḍaṅgam viśiyatē kuṣṭhahā khadirah||159||

pAnAhAravidhAne prase cane dhUpa ne prade he ca| kRumi nAshanaM viDa~ggaM vishiShyate kuShThahA khadiraH||159||

For internal use in the form of medicine and diet along with external use in the form of “prasēchana, dhupana, lepa viḍaṅga” which is effective in “kṛimi” and “khadira” which is special drug for “kuṣṭha” should be used.[159]

एडगजः सविडङ्गो मूलान्यारग्वधस्य कुष्ठानाम्। उद्दालनं श्वदन्ता गोशवराहोष्ट्रदन्ताश्च॥१६०॥

ēdagajah saviḍaṅgō mūlānyāragvadhasya kuṣṭhānām| uddālanam śvadantā gōśvavarāhōṣṭradantāscā||160||

eDagajaH saviDa~ggo mUIAnyAragvadhasya kuShThAnAm| uddAlanaM shvadantA goshvavarAhoShTradantAshca||160||

“Ēdagaja, viḍaṅga,” root of “āragvadha” and tooth of dog, cow, horse, boar and camel are useful in “kuṣṭha”. [160]

एडगजः सविडङ्गो द्वे च निशे राजवृक्षमूलं च। कुष्ठोद्दालनमग्यं सपिप्पलीपाकलं योज्यम्॥१६१॥

ēdagajah saviḍaṅgō dvē ca niśē rājavṛkṣamūlam ca| kuṣṭhōddālanamagryam sapippalīpākalam yojyam||161||

edagajaH saviDa~ggo dve ca nishe rAjavRukShamUlaM ca| kuShThoddAlanamagryaM sapippallpAkalaM yojyam||161||

“Ēdagaja, viḍaṅga, haridra, dāruharidra,” root of “rājavṛkṣa, pippali, pākala” (“kuṣṭha” herb) are useful in “kuṣṭha”. [161]

Management of “shwitra”(vitiligo)

शिवत्राणां सविशेषं [१] योक्तव्यं सर्वतो विशुद्धानाम्। शिवत्रे संसनमग्यं मलपूरस इष्यते सगुडः॥१६२॥
तं पीत्वा सुस्निग्धो यथाबलं सूर्यपादसन्तापम्। संसेवेत विरिक्तस्त्र्यहं पिपासुः पिबेत् पेयाम्॥१६३॥

śvitrāṇām saviśeṣām [1] yōktavyam sarvatō viśuddhānām| śvitrē srar̄sanamagryam malapūrasa iṣyatē saguḍah||162||

taṁ pītvā susnigdhō yathābalam sūryapādasantāpam| sar̄sēvēta viriktastryaham pipāsuḥ pibēt pēyām||163||

shvitrANAM savisheShaM [1] yoktavyaM sarvato vishuddhAnAm| shvitre sraMsanamagryaM malapUrasha iShyate saguDaH||162||

taM pltvA susnigdho yathAbalaM sUryapAdasantApam| saMseveta viriktastryahaM
pipAsuH pibet peyAm||163||

In case of “śvitrā, shodhana” is the specific treatment especially purgation with “malapūrasa” along with jaggery is the best treatment for leucoderma. The patient must be firstly oleated and should take the above mentioned combination as per his “bala” and disease “bala” and later on expose to sunlight. Purgation will be started and whenever patient feels thirsty “pēyā” should be given for next three days. [162-163]

शिवत्रेऽङ्गे ये स्फोटा जायन्ते कण्टकेन तान्मिन्दयात्। स्फोटेषु विसुतेषु प्रातः प्रातः पिबेत् पक्षम्॥१६४॥

मलपूमसनं प्रियङ्गुं शतपुष्पां चाम्भसा समुत्कवाथ्य। पालाशं वा क्षारं यथाबलं फाणितोपेतम्॥१६५॥

śvitrē'ṅgē yē sphōṭā jāyantē kaṇṭakēna tānbhindyāt| sphōṭēṣu visrutēṣu prātaḥ prātaḥ pibēt pakṣam||164||

malapūmasanam priyaṅguṁ śatapuṣpāṁ cāmbhasā samutkvāthya| pālāśam vā
kṣāram yathābalaṁ phāṇitōpētam||165||

shvitre_agge ye sphoTA jAyante kaNTakena tAnbhindyAt| sphoTeShu visruteShu prAtaH
prAtaH pibet pakSham||164||

malapUmasanaM priya~gguM shatapuShpAM cAmbhasA samutkvAthya| pAlAshaM vA
kShAraM yathAbalaM phANitopetam||165||

Eruptions that occur over the hypo-pigmented patches should be punctured with thorn so that the exudation within the eruptions is removed. Later on for 15 days “malapū, asana, priyaṅgu, śatapuṣpā” should be boiled in water and should be administered as per strength with “pālāśa kṣāra” and/or with “phāṇita”.[164-165]

यच्चान्यत् कुष्ठधनं शिवत्राणां सर्वमेव तच्छस्तम्। खदिरोदकसंयुक्तं खदिरोदकपानव्ययं वा॥१६६॥

yaccānyat kuṣṭhaghnam śvitrāṇāṁ sarvamēva tacchastam| khadirōdakasarṇyuktam
khadirōdakapānagryam vā||166||

yaccAnyat kuShThaghnaM shvitrANAM sarvameva tacchastam|
khadirodakasaMyuktaM khadirodakapAnagryaM vA||166||

All the treatment which is “kuṣṭhaghna” is also useful in “śvitrā” especially drinks of “khadira” or mixed with decoctions of “khadira”.[166]

समनःशिलं विडङ्गं कासीसं रोचनां कनकपुष्पीम्। शिवत्राणां प्रशमार्थं ससैन्धवं लेपनं दद्यात्॥१६७॥

samanaḥśilarṁ viḍāṅgarṁ kāśīsaṁ rōcanāṁ kanakapuṣpīm| śvitrāṇāṁ praśamārthaṁ
sasaindhavarṁ lēpanam dadyāt||167||

samanaHshilaM viDa~ggaM kAsIsaM rocanAM kanakapuShpIm| shvitrANAM
prashamArthaM sasaindhavaM lepanaM dadyAt||167||

“Manahśila, viḍāṅga, kāśīsa, gorōcana, kanakapuṣpī” (“svarnakshri”) and “saindhava” when applied externally is useful in leucoderma.[167]

कदलीक्षारयुतं वा खरास्थि दग्धं गवां रुधिरयुक्तम्। हस्तिमदाध्युषितं वा मालत्याः कोरकक्षारम्॥१६८॥

नीलोत्पलं सकुष्ठं ससैन्धवं हस्तिमूत्रपिष्टं वा। मूलकबीजावल्गुजलेपः पिष्टो गवां मूत्रे॥१६९॥

काकोदुम्बरिका वा सावल्गुजचित्रका गवां मूत्रे। पिष्टा मनःशिला वा संयुक्ता बहिपितेन॥१७०॥

लेपः किलासहन्ता बीजान्यावल्गुजानि लाक्षा च। गोपित्तमञ्जने द्रवे पिप्पल्यः काललोहरजः॥१७१॥

kadalīkṣārayutaṁ vā kharāsthī dagdhaṁ gavāṁ rudhirayuktam| hastimadādhyuṣitam
vā mālatyāḥ kōrakakṣāram||168||

nīlōtpalam sakuṣṭham sasaindhavaṁ hastimūtrapiṣṭam vā| mūlakabījāvalgujalēpah
piṣṭō gavāṁ mūtrē||169||

kākōdumbarikā vā sāvalgujacitrakā gavāṁ mūtrē| piṣṭā manahśilā vā saṁyuktā
barhipittēna||170||

lēpah kilāsaḥantā bījānyāvalgujāni lākṣā ca| gōpittamañjanē dvē pippalyāḥ
kālalōharajah||171||

kadallkShArayutaM vA kharAsthi dagdhaM gavAM rudhirayuktam|
hastimadAdhyuShitaM vA mAlyAH korakakShAram||168||

nllotpalaM sakuShThaM sasaindhavaM hastimUtrapiShTaM vA|
mUlakabljAvalgujalepaH piShTo gavAM mUtre||169||

kAkodumbarikA vA sAvalgujacitrakA gavAM mUtre| piShTA manahshilA vA saMyuktA
barhipittena||170||

lepaH kilAsahantA bljAnyAvalgujAni lAkShA ca| gopittama~jjane dve pippalyaH
kAlaloharajaH||171||

#Kadalīksāra and bone ash of ass with blood of cow. #kṣāra of flower buds of mālati mixed with hastimada (crut of elephant). #Nīlōtpala, kuṣṭha (herb), saindhava mixed with elephant urine. #Seed of mūlaka and bakuchi with cows' urine. #Kākōdumbar along with bakuchi, citraka and cows urine. #Manahśilā with peacocks' bile. #Seeds of avalguja, lākṣā, cow bile, both type of añjana (rasāñjana and sauvirāñjan) pippali and powder of kalaloha.

The above 7 combination of lepa is useful in leucoderma.(168-171)

शुद्ध्या शोणितमोक्षैर्विरक्षणैर्भक्षणैश्च सक्तूनाम्। शिवत्रं कस्यचिदेव प्रणश्यति क्षीणपापस्य॥१७२॥

śuddhyā śōṇitamōkṣairvirūkṣaṇairbhakṣaṇaiśca saktūnām| śvitram kasyacidēva
praṇaśyati kṣīṇapāpasya||172||

shuddhyA shoNitamokShairvirUkShaNairbhakShaNaishca saktUnAm| shvitram kasyacideva
praNashyati kShINapApasya||172||

After “shodhana” therapy “raktamoksana” and also intake of ununctuous food like “saktū” (roasted corn flour) leucoderma is cured only in few who are free from effects of sinful deeds. [172]

Various stages of “shwitra”

दारुणं चारुणं [१] शिव्रं किलासं नामभिस्त्रिभिः। विजेयं त्रिविधं तच्च [२] त्रिदोषं प्रायशश्च तत्॥१७३॥

दोषे रक्ताश्रिते रक्तं ताम्रं मांससमाश्रिते। श्वेतं मेदःश्रिते शिव्रं गुरु तच्चोत्तरोत्तरम्॥१७४॥

dāruṇam cāruṇam [1] śvitraṁ kilāsaṁ nāmabhistribhiḥ| vijñeyam trividham tacca [2] tridōṣam prāyaśaśca tat॥173॥

dōṣē raktāśritē raktam tāmrām māṁsasamāśritē| śvētaṁ mēdahśritē śvitraṁ guru taccaottarottaram॥174॥

dAruNaM cAruNaM [1] shvitraM kilAsaM nAmabhistribhiH| vij~jeyaM trividhaM tacca [2] tridoShaM prAyashashca tat॥173॥

doShe raktAshrite raktaM tAmraM mAmsasamAshrite| shvetaM medaHshrite shvitraM guru tacccottarottaram॥174॥

“Dāruṇa, chāruṇa,” and “kilāsa” are the various synonyms for “śvitrā”. It is of 3 types and generally all the “tridosha” are involved. If the “dosha” responsible for “śvitrā” are seated in the “rakta dhatu” then the color of hypo-pigmentation is red. It is copper-colored if “dosha” are seated in “mamsa dhatu” and whitish in color if located in “meda dhatu”. The subsequent ones are more difficult to treat than earlier ones.[173-174]

Prognosis of vitiligo

यत् परस्परतोऽभिन्नं बहु यद्रक्तलोमवत्। यच्च वर्षगणोत्पन्नं तच्छवित्रं भैव सिद्ध्यति॥१७५॥

अरक्तलोम तनु यत् पाण्डु नातिचिरोत्थितम्। मध्यावकाशे चोच्छूनं शिव्रं तत्साध्यमुच्यते॥१७६॥

yat parasparato’bhinnam bahu yadraktalōmavat| yacca varṣagaṇoṭpannam tacchvitram naiva sidhyati॥175॥

araktalōma tanu yat pāṇḍu nāticirōtthitam| madhyāvakāsē cōcchūnarāṁ śvitraṁ tatsādhya macyatē॥176॥

yat parasparato~abhinnam bahu yadraktalomavat| yacca varShagaNotpannaM tacchvitram naiva sidhyati॥175॥

araktaloma tanu yat pANDu nAticirotthitam| madhyAvakAshe cocchUnaM shvitraM tatsAdhyamucyate॥176॥

If the patches are conjoined together and are more in number, if the body hair above the patches are red in color and if the disease is more than one year old. Such “śvitrā” never gets cured. If body hair over the patches is not red if skin is thin and pale in color. The disease, if is not old, space between patches is elevated then such “śvitrā” is “sādhya” (curable). [175-176]

Meta-physical causes of “kilasa”

वचांस्यतथ्यानि कृतधनभावो निन्दा सुराणां [१] गुरुधर्षणं च। पापक्रिया पूर्वकृतं च कर्म हेतुः किलासस्य विरोधि चान्नम्॥१७७॥

vacāṁsyatathyāni kṛtaghnabhāvō nindā surāṇāṁ [1] gurudharṣaṇam ca| pāpakriyā pūrvakṛtam ca karma hētuḥ kilāsasya virōdhi cānnam||177||

vacAMsyatathyAni kRutaghnabhAvo nindA surANAM [1] gurudharShaNaM ca| pApakriyA pUrvakRutaM ca karma hetuH kilAsasya virodhi cAnnam||177||

Untruthfulness, ungratefulness, no respect for the gods, disrespect for the peers (guru), sinful acts, and misdeeds of past life and intake of mutually contradictory food are the causes for “śvitrā”.[177]

Summary

तत्र श्लोकाः-

हेतुर्द्रव्यं लिङ्गं विविधं ये येषु चाधिका दोषाः। कुष्ठेषु दोषलिङ्गं समासतो दोषनिर्देशः॥१७८॥

साध्यमसाध्यं कृच्छ्रं कुष्ठं कुष्ठापहाश्च ये योगाः। सिद्धाः किलासहेतुर्लिङ्गं गुरुलाघवं तथा शान्तिः॥१७९॥

इति सङ्ग्रहः प्रणीतो महर्षिणा कुष्ठनाशनेऽद्याये। स्मृतिबुद्धिवर्घनार्थं शिष्याय हुताशवेशाय॥१८०॥

tatra ślōkāḥ-

hēturdhvyaṁ liṅgarṁ vividham yē yēṣu cādhikā dōṣāḥ। kuṣṭhēṣu dōṣaliṅgarṁ samāsatō dōṣanirdēṣāḥ॥178॥

sādhyamasādhyam kṛcchram kuṣṭham kuṣṭhāpahāśca yē yōgāḥ। siddhāḥ kilāsahēturliṅgarṁ gurulāghavam tathā sāntih॥179॥

iti saṅgrahaḥ prāṇītō maharṣinā kuṣṭhanāśanē’dhyāyē। smṛtibuddhivarghanārtham śiṣyāya hutāśavēśāya॥180॥

tatra shlokAH-

heturdravyaM li~ggaM vividhaM ye yeShu cAdhikA doShAH| kuShTheShu doShali~ggaM samAsato doShanirdeshaH||178||

sAdhyamasAdhyaM kRucchraM kuShThaM kuShThApahAshca ye yogAH| siddhAH
kilAsaheturli~ggaM gurulAghavaM tathA shAntiH||179||

iti sa~ggraHaH praNIto maharShiNA kuShThanAshane~adhyAye
smRutibuddhivarghanArthaM shiShyAya hutAshaveshAya||180||

Etiology, “dravya” (“tridosha, rasa, rakta, mamsa, ambu”), various signs and symptoms, predominance of “dosha” in various “kushtha” and symptoms as per type of vitiated “dosha,” curable and difficult to cure types of “kushtha,” preparation useful in “kushtha”. Similarly etiology, symptoms, curable and incurable symptoms and treatment of “śvitrā” have been explained.

The above detailed description has been given by Lord Punarvasu with a view of sharpening the memory and intellect of disciple Agnivesha.

Tattva Vimarsha (Fundamental Principles)

Important etiological factors for skin diseases include: Diet and beverages with antagonistic properties, excess intake of liquid, unctuous, heavy to digest food, suppression of natural urges specially that of emesis, excess exercise, exposure to excess heat, excessive eating, quick change in environmental temperature, inappropriate follow up of purification procedures, eating new grains, curd, fish, sesame, excessive salty and sour food, black gram, radish, milk, sugar products, following daytime sleep, and bad thoughts and deeds towards venerable people. These factors vitiate water component of skin, blood, muscular layer and other layers of skin and localize three “dosha” in the skin to cause “kushtha”, layer by layer. *Variable skin manifestations of “kushtha” depend upon degree of involvement of three vitiated “dosha” and their effect on four “dhatus” i.e. “rasa, rakta, mamsa” and “lasika”.* With involvement of first and second layer, prodromal symptoms appear. Third and fourth layer involvement results in minor “kushtha”. Fifth and sixth layer involvement causes “mahakushtha”. *Dryness, atrophy, pricking pain / paraesthesia, pain, constriction or loss of elasticity, hardness, roughness, horripilation, blackish, brownish, slight reddish in color are manifestation of “vata dosha”.* *Burning sensation, redness, exudation, suppuration, offensive smell, stickiness / moist and sloughing of body parts are the symptoms caused by predominance of “pitta dosha”.* *“Kapha dosha” is responsible for symptoms like whitish discoloration, cold in touch, pruritus, non-progressive / slow progression of disease, elevated; heaviness and oiliness are presented along with maggot’s formation and stickiness like symptoms.* Different degree of “doshic” involvement determines the color, shape, size, symptoms and discharge from the lesions. The treatment differs as per dominance of “dosha”.

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1

"Vata"

Dryness, atrophy, pricking pain / paraesthesia, pain, constriction or loss of elasticity, hardness, roughness, horripilation, blackish, brownish, slight reddish in color

Ghee

-
2

"Pitta"

Burning sensation, redness, exudation, suppuration, offensive smell, stickiness / moist and sloughing of body parts

"Virechana" (therapeutic purgation), "raktamokshana" (bloodletting)

-
3

"Kapha"

Whitish discolouration, cold in touch, pruritus, non-progressive/ slow progression of disease, elevated; heaviness and oiliness, stickiness, maggot infestation

"Vamana" (therapeutic emesis)

}

If all symptoms appear simultaneously, then the "kushtha" is untreatable. Similarly, immune-compromised patients and those suffering from morbid thirst, burning sensation, loss of digestive power and lesions have maggots then the prognosis is bad. "Vata kapha" dominant and single "dosha" predominated "kushtha" are easily curable. Whereas "kapha pitta" and "vata pitta" dominated "kushtha" are "kricchra sadhya" i.e. curable with difficulty.

If the skin lesion is small, then "prachchanna" (bloodletting by rubbing with coarse device) should be done. If the skin lesions are large and spread all over body, "siravyadha" (venesection) should be done for bloodletting. *Frequent body purification procedures are needed in treatment of skin diseases. The treatment includes internal purification in the form of therapeutic emesis, purgation etc. and external purification in the form of local applications of "lepa" of purifying herbs.* "Shwitra" may be caused by meta-physical causes like sinful deeds and those in previous life.

Therapeutic purgation is main principle of management in "shwitra" (vitiligo). Exposure to sunlight is one of the treatments of "shwitra".

Vidhi Vimarsha (Applied Inferences)

In the context of “kushtha”, Ayurveda acknowledges that the human skin consists of six layers, and each layer is seat of specific type of gradually progressing “kushtha”: #First layer “udakadhara”, external most layer is responsible for water metabolism. Initial pathology of minor types of “kushtha” starts with excessive sweating/ discoloration/itching swelling/ altered tactile sense in prodromal stage of “kushtha” indicative of impairment of water metabolism. This layer may be correlated with stratum corneum. #Second layer is “asragdhara”, which contains the blood metabolites and impurities of blood trigger the pathology of “kushtha” and manifest as – bluish black, red, rashes/ pricking pains/ and ulceration. This layer may be correlated with stratum lucidum, #The third layer of skin is the seat of “sidhma” and “kilas kushtha”. The third layer may be correlated with stratum granulosum. #The fourth layer is seat of “dadru” and “krushtha”. The fourth layer may be correlated with stratum germinosum (combination of spinosum and basale layers), #The fifth layer of skin is seat of “makushtha” and severe dermal pathologies. The fifth layer may be correlated with papillary layer. #The sixth layer is the seat of most severe “mahakushtha”, which are incurable. The sixth layer may be compared with reticular layer.(Ch. Sharira 7/4)

Patho-physiology of “kushtha”

1. “Kapāla kushtha”

It is “rūkṣa, paruṣa, khara” in nature which signifies the increase of “rūkṣa, khara guna” at the level of skin. Roughness, dryness increases when there is destruction of sweat glands (“dusti” of “ambu dhatu”), decrease in essential fatty acids (reduce “snigdhata” of “meda”, in turn, of “kapha”), proliferation of keratinocytes. Primary lesion manifest in the form of dry, rough and blackish brownish color. Secondary lesion includes loss of sensation (due to degeneration of nerve endings or less nutrition to the nerve tissue due to atherosclerosis or reduce blood supply) severe pricking pain (“nistoda”) itching, burning sensation and pustular presentation. Thus conditions of non erythematous eczema, keratosis, atrophic actinic keratosis, non hypertrophic keratosis, seborrhic conditions can be understood in “kapāla kushtha”.

2. “Udumbara kushtha”

It is “pitta” dominated “kushtha”. Hyper-pigmentation, increased vaso-congestion, burning, pain and pus formation are the symptoms and signs.

Primary lesion manifests as red in color associated with pus, burning sensation caused mainly due to “pitta” and “rakta”. “Ushna” and “tikshna guna” is responsible for the same.

Secondary lesion includes “kleda, kotha,” body hair attains brownish color, excessive secretion due to “sasneha, sara” and “drava guna” of “pitta” and “rakta”.

The infectious and inflammatory phase can be explained thus:

Increased flow of inflammatory factors causes rise in temperature, redness and burning sensation. Eczema is inflammation of the skin. It is characterized by erythematous, vesicular, weeping, itchy and crusting patches. The condition is caused by dysfunctional interplay between the immune system and skin.

Dyshidrosis, discoid eczema, venous eczema, dermatitis herpetiformis, autoeczematization, eczema overlaid by viral infections can be understood under “udumbara kushtha”.

3. “Mandala kushtha”

It is predominated by “kapha dosha”. The “sthira, snigdha guna” brings about “sthirata” and “snigdhata” to the “kushtha”.

Therefore the lesion is granulomatous in presentation. The early and indeterminate leprosy, especially lepromatous leprosy, is a skin condition consisting of pale macules. It results from failure of Th1 cell activation which is necessary to eradicate the mycobacteria. In Lepromatous Leprosy Th2 response is turned on and because of reciprocal inhibition the cell mediated response is depressed.

4. “Rishyajivha kushtha”

It is dominated by “vata” and “pitta dosha”. “Vata dosha” brings roughness, pain whereas pitta is responsible for the discoloration, burning sensation whereas both the “dosha” are responsible for “ashugati” and “samuthana”.

Thus inflammatory and degenerative changes dominate the condition. Pathogenesis involving infectious origin or allergic origin may be included. Diseases such as Lyme disease may be included. Expanding redness known as “erythema migrans” begins at the site of bite after a period of one week. There is no much itching i.e. “alpa kandu” but the rash is red and warm but generally painless.

Classically the innermost portion remain darker red and becomes indurated (is thicker and firmer).

5. “Pundarika kushtha”

It is dominated by “pitta” and “kapha”. “Pitta” is responsible for redness, burning sensation, “pāka” (..), pus formation whereas “kapha” is responsible for whitish nature, itching and “kr̥mi”.

Primary lesion manifest as “rakta rāji sirā santata utsedavanti” i.e. vessel are inflamed and are palpable. Systemic vasculitis may affect the skin and vascular damage may be the main feature in several skin diseases. The histological features that are common are:- Vessel wall damage , red cell extravasation, and invasion of inflammatory cells into vessel walls.

6. “Sidhma kushtha”

It is dominated by “vata kapha dosha”, fine powder falls after scratching and resembles color similar to flower of “alābū”. The specialty of disease is that it is mainly seen in “urabhāga” i.e. trunk. “Tinea versicolor” is a condition characterized by a skin eruption on the trunk and proximal extremity. The symptoms of this condition include; fine scaling of the skin producing a very superficial ash like scale. Pale (“sveta”), dark tan (“arun”), pink in color (“shukla rakta avabhasani”) with a reddish undertone (“tamra”) that can darken when the patient is overheated, such as in a hot shower or during/ after exercise, tanning typically makes the affected areas contrast more starkly with the surrounding skin leading to sharp borders. In people with dark skin tones, pigmentary changes such as hypo-pigmentation (loss of color) are common while in those with lighter skin color hyper-pigmentattion (increase in skin color) is more common. The yeast is thought to feed on skin oils (lipids) as well as dead skin cells.

7. “Kakanaka kushtha”

It is predominated by all the three “dosha”. Thus symptoms of all three dosha are observed. The presentation is similar to “gunja” i.e bright red with black spot. In Nidana Sthana, it has been explained to be of different colors and it is “asadhyा”.

Squamous cell carcinoma or squamous cell cancer or epidermoid carcinoma or squamous cell epithelioma is a cancer of a kind of epithelial cell, the squamous cell. These cells are the main part of the epidermis of the skin, and this cancer is one of the major forms of the skin cancer. However, squamous cells also occur in the lining of the digestive tract, lungs and other areas of body and squamous cell carcinoma occurs as a form of cancer in diverse tissue such as lips, mouth, esophagus, urinary bladder, prostate, lung, vagina and cervix. Despite sharing the name squamous cell carcinoma there may be tremendous differences in presenting symptoms, natural history, prognosis and response to treatment. It arises from the uncontrolled multiplication of cells of epithelium, or cells showing particular cytological or tissue architectural characteristic of squamous cell differentiation, such as the presence of keratin, tonofilament bundles or dermosomes structures involved in cell to cell adhesion. This non melanoma skin cancer may appear as a firm red nodule, a scaly growth that bleeds or develops a crust or a sore that does not heal.

Minor “kushtha”

1. “Eka kushtha”

It is a skin disease caused due to “vata kapha” predominance. As discussed previously “vata dosha” is responsible for the degenerative or destructive changes whereas “kapha” is responsible for obstructive changes.

“Aswēdana” (Anhidrosis) may be caused by destruction of sweat glands and/or integumentary system it may be due to autoimmune process or infection or anhidrosis may be due to obstruction (“kapha”) in the outlet or blood supply as in micro-angiopathy.

Stimulation of acetylcholine and further ionic changes caused thereafter are responsible for sweating. Lack of such impulse also causes reduced sweating. “Astanga Sangrahakara” has explained role of “vyana vāyu” in “sweda” which when hampered leads to anhidrosis.

Anhidrosis can occur as an isolated condition or as part of a group of symptoms associated with other diseases. Anhidrosis can also occur after skin has been injured, because sweat glands are clogged or obstructed, as an inherited defect, or as a side effect of medication.

Reduced sweating increases dryness of skin which is presented as rough, scaly or flaky skin. The word ichthyosis comes from ancient Greek where ichthys means fish. All types of ichthyosis have dry, thickened scaly or flaky skin.

“Ichthyosis vulgaris” is a skin condition that causes dry, dead skin cells to accumulate in patches on the surface of skin. It is also known as “fish scale disease” because the dead skin accumulates in a similar pattern to a fish scale.

2. “Charmakhya”

Skin is similar to elephant (pachyderms) and thick is nature “pachys” means thick and “derma” means skin.

The main symptom is skin getting thick thus disease like scleroderma, onchocerciasis, harlequin ichthyosis etc can be considered in this group.

Building up of collagen is associated with thickening of skin. Transport of fats into the space between the skin cells may be another reason for thickening of skin.

Research shows that in diabetic patient thickness of skin is observed reason being collagen bundles become large, disorganized and separated by clear spaces. Small amount of acid mucopolysaccharides may be present in upper reticular dermis. Presence

of active fibroblast and extensive collagen polymerization in the rough endoplasmic reticulum may be the pathogenesis for thick skin.

Calcium deposition may also be cause for tough and thick skin. "Rūksata, kharata, guna" of "vata" and "shita guna" of "vata" and "kapha" along with increase of "guruta, manda" and "sthira guna" of "kapha" contribute to thickening of skin. "Khara" is also property of "asthi dhatus" which is generated by interplay between "prithvi, agni" and "vayu". Here calcium is representative of "prithvi mahabhuta". So "prithvi mahabhuta bhuyista āhara" or increased "parthivagni" can lead to increased absorption of calcium from gastrointestinal tract.

3. "Kitibha kushtha"

Skin diseases in which process of tissue granulation takes place is "Kitibha kushtha". When this process takes abnormally "Kitibha kushtha" is formed. It may take place in psoriasis, lichen planus, lichen sclerosis.

Granulation tissue appearance is light red or dark pink in color ("śyāva"), being perfused with new capillary loops or buds granular in appearance. Formation of extracellular matrix gives it hard touch and abnormal productions of skin cells (especially during wound repair) leading to overabundance of skin cells. Premature maturation of keratinocytes induced by an inflammatory cascade in the dermis also contributes for the same.

"Vata, rakta, mamsa, kapha"- all take part in healing of wound but whenever abnormality at the level of these factors takes place granulation process is hampered which gives the "kiṇakharasparśa".

4. "Vaipadika kushtha"

Skin fissure is a cutaneous condition in which there is a linear like cleavage of skin, sometimes defined as extending into the dermis. Skin dryness is the cause.

Cracked skin is often kicked off by a vicious cycle of events starting off as a minor, but leading to painful deep cracks. Plain old dry skin can lead to scaling, scaling can cause itchiness leading to scratching and scratching can cause inflammation and tears of skin that can become fissures which leads to more irritation and pain.

Healthy skin has slightly acidic pH, exposure to substances with an alkaline pH such as many commercial cleansers and hand soaps also contribute to interruptions of skin integrity. Once the skin integrity is disturbed, a homeostatic repair mechanism is stimulated that causes the rapid repair of barrier function. Continued exposure to alkaline substances will slow down repair by inhibiting normal skin acidity when there is continued exposure to unfavourable environmental factors.

Anhidrosis, Dermatitis, Diabetic neuropathy, Eczema, Hypothyroidism, Psoriasis, cold weather, excessive exposure to hot water, detergent chemicals and low humidity can cause cracked skin.

5. "Alasaka kushta"

"Ganda" here means nodular growth. Chronic and repetitive scratching, picking or rubbing may result in permanent changes to the skin, including nodular lichenification ("ganda"), hyperkeratosis, hyperpigmentation ("rāga") and skin thickening.

Nodular prurigo cause is unknown. It is uncertain whether scratching leads to lumps, or if the lumps appear before they are scratched. The reason for the lumps, the inflammation and the increased activity and size of nerves in the skin is under investigation but remains unknown.

Prurigo nodularis, Hyde's diseases, picker nodules, lichen corneus obtusus, nodular lichen simplex chronicus, nodular neurodermatitis circumscripta are various synonyms. The constant scratching leads to development of discrete, excoriated nodular hyperpigmented / purpuric lesion with crusted or scaly surfaces.

The wart like plaque may be observed in dermatosis neglecta; an skin condition in which accumulation of sebum, keratin, sweat, dirt and debris lead to localized patch of skin. Dryness is the main cause for the above pathogenesis and role of vata and kapha in causing dryness is already been discussed.

6. "Vichārchikā"

It is caused by "kapha" dominated condition. "Kapha" by its "snigdha, guru, mridu" and "sheeta guna" when increased above normal condition it leads to obstructive changes at the integumentary system. Reduced blood supply causes blackish brown discoloration. Further obstructive changes reduce the local immunity and give a chance for dermatophytes to penetrate the skin barrier. It results in eruptions and thereby causing excessive exudation. Secondary infection and reduced blood supply is cause for pruritus. It can be compared with wet eczema.

Table 2. Comparison of Ksudhra kustha with its Modern resemblance:

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1  
"Eka Kushtha"
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{

Ichthyosis vulgaris, psoriasis

-

2

"Kitibha Kushtha"

scleroderma, onchocerciasis, harlequin ichthyosis

-

3

"Charmakhyā Kushtha"

psoriasis, lichen planus, lichen sclerosis

-

4

"Vaipadika Kushtha"

Anhidrosis, Dermatitis, Diabetic neuropathy, Eczema, Hypothyroidism, Psoriasis, cold weather, excessive exposure to hot water, detergent chemicals and low humidity can cause skin fissure, palm and sole psoriasis

-

5

"Alasaka Kushtha"

Nodular prurigo, Dermatosis neglecta

-

6

"Dadru Kushtha"

Tinea corpora or ringworm of the body, Tinea faciei or Facial Ringworm, Tinea Capitis Or Blackdot Ringworm, Tinea Capitis or Scalp Ringworm, Tinea Manuum or Ringworm of the Hands, Onychomycosis, Tines Unguium or Ringworm of the nail, Impetigo, Moccasin type of Tinea Pedis

-

7

"Charmadala Kushtha"

Pre ulcerative phase of Ecthyma, Interdigital type of tinea pedis (athlete's foot)

-

8

"Visphota Kushtha"

{

Bullous Impetigo, Vesicular type of tinea pedis (athlete's foot),
Folliculitis, Malassezia folliculitis, Eosinophilic folliculitis

-

9

"Pama Kushtha"

Scabies

-

10

"Sataru Kushtha"

Furuncle

-

11

"Vicharchika Kushtha"

Wet eczema

}

Current clinical management of skin diseases

Principal treatment modalities

#Internal and external application of sneha (medicated ghee or oil) #Shodhana (purification therapies) #Raktamokshana (blood letting)

Principal drugs

#Gandhaka (sulphur) #Nimba #Bakuchi #Hartal #Haridra #Manjishta #Khadira #Sariva #Patol #Lodhra

Medicines:(Referred from Chikitsa Pradipa): {| class="wikitable" style="text-align: center; |- ! scope="col"! Type ! scope="col"! "Kalpa" ! scope="col"! Dose ! scope="col"! Time ! scope="col"! Anupama |- | "Vata" dominant ("Kapala") | "Swatambhu guggulu" | 500-1000 mg | Between Meals | Ghee + Honey |- || "Haratal Bhasma" | 60-120 mg | After Meals | Ghee + Sugar |- | "Pitta" dominant("Audumbara") | "Tala bhasma" mixture | 120-250 mg | During Meals | Ghee + Sugar |- || "Karavira Twak" powder | 30 - 60 mg | After Meals | Ghee + Honey |- | "Vata- Pitta" dominant("Rishyajivha") | "Sarvanganasundari vati" | 500-1000 mg | Between Meals | Ghee + Sugar |- || "Katu kapittha" oil | 5-20 drops | Before Meals | Ghee + Sugar |- | "Kapha-pittaja" ("pundarika") | As per "dosha" dominance | | | |- | "Vata Kaphaja" ("Sidhma") | As

per "dosha" dominance | | | - | "Tridoshaja" ("Kakanaka") | As per "dosha" dominance | | | - | "Vicharchika" | "Aarogya" mixture | 500-1000 mg | Between meals | "Khadirarishta" | - | "Vaipadika" and "Alasaka" | "Swayambhu guggulu" | 250-500 mg | After meals | "Khadirarishta" | - | "Dadru-Charmadala" and "Pama-Kachchu -shataru" | "Aarogya" mixture | 500-1000 mg | Between meals | "Manjishthadi kwatha" | - | | "Nimba-gandhaka churna" | 350-750 mg | Between meals | Ghee + sugar | - | | "Gandhaka druti" | 2-5 drops | Between meals | Milk | - | "Eka kushtha- charma kushta -kitibha" | "Gandhaka rasayana" | 250-500 mg | After meals | Ghee + sugar | - | "Shwitra" | "Aarogyavardhini" | 250-500 mg | After meals | Ghee + sugar | - | | "Karavira mula twak" powder | 30-60 mg | After meals | Ghee + sugar | - | | "Bakuchi" seed powder | 750-1500 mg | After meals | "Khadira" + "Aamalaki kashaya" | - | | "Sarvanga sundari vati" | 500 -1000 mg | After meals | Ghee |}

Related links

[Matrashiteeya Adhyaya Verse 29-32.](#)

[Naveganadharaniya Adhyaya Verse 38.](#)

[Kiyanta Shiraseeya Adhyaya Verse 65.](#)

[Vidhishonitiya Adhyaya Verse 9.](#)

[Atreyabhadrakapyiya Adhyaya Verse 43.](#)

[Atreyabhadrakapyiya Adhyaya Verse 81 Chakrapani.](#)

[Atreyabhadrakapyiya Adhyaya Verse 85 Chakrapani.](#)

[Annapanavidhi Adhyaya Verse 24.](#)

[Annapanavidhi Adhyaya Verse 30.](#)

[Annapanavidhi Adhyaya Verse 238.](#)

[Prameha Nidana Verse 3.](#)

[Kushtha Nidana Verse 4 .](#)

[Rogabhishagjitiya Vimana Verse 103.](#)

[Rogabhishagjitiya Vimana Verse 06.](#)

[Sharira Sankhya Sharira Verse 4](#)

Jwara Chikitsa Verse 285,286.

Grahani Chikitsa verse 35.

Vatavyadhi Chikitsa Verse 226.

Phalamatra Siddhi Verse 12.

Further reading

#Adrienne Santos-Longhurst Type 2 Diabetes and Skin Health published Published on September 8, 2014, <http://www.healthline.com/health/type-2-diabetes/skin-problems>
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Kushtha Nidana, Skin diseases in Integrative Medicine

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Rajayakshma Chikitsa

Chikitsa Sthana Chapter 8. Management of Rajayakshma (Wasting Diseases)

Abstract

Rajayakshma is a syndrome consisting of diseases associated with wasting (*kshaya*) of various tissues including *rasa* and *ojas* causing immunodeficiency resulting in opportunistic infections, most common being tuberculosis. The term *rajayakshma* has been used interchangeably with tuberculosis. It is potentially fatal wasting disease that “consumes” the body. This chapter describes etio-pathogenesis, signs and symptoms and principles of management. Groups of signs viz. a group of three signs, six signs and eleven signs are enlisted to designate variety of *srotasa* (systems) involved with increasing severity of disease. The complications and prognosis are elaborated to categorize the disease as one of the dreadful diseases. Treatment with modern antitubercular medicines reduces mortality in patients with tuberculosis (cure rate 11.42% and the death rate 40.9%) but when combined with Ayurvedic treatment there was significant improvement (cure rate 41.3% and the death rate 3.8%).

Keywords: *Rajayakshma*, *kshaya*, *shosha*, tuberculosis, *vyadhikshamatva*, *dhatukshaya*, immunity, depletion of tissues, wasting diseases.

Introduction

Rajayakshma has been identified since Vedic period (2400 BC). *Yakshma*, the word, first appeared in the vedas (Rigveda and Atharvaveda), but a detailed description was missing. In the Ayurvedic treatises, or the Samhitas (1000 BC to 500 AD), a detailed description of *rajayakshma* can be found. An account of its definition, etiology, pathogenesis, general features, management, and the prognosis is found in Charak Samhita, *Sushruta Samhita*, and *Ashtanga Hridaya* with more extensive description is in Charak Samhita. Four etiological factors are described, *sahasa* (over exertion or working beyond one's capacity), *samdharaṇa* (suppression of natural urges), *kshaya* (depletion of tissue element) and *vishamashana* (irregular diet).

The three chapters viz. *Sosha Nidana*, *Rajayakshma Chikitsa* and *Kshatakshina Chikitsa* deal with similar clinical presentation of disease and principles of management. *Dhatukshaya* is common feature in all. Advancement of *dhatukshaya* in *sosha* reaches a stage when immuno-suppression with resulting opportunistic infection occurs and is called *rajayakshma*. In *kshatakshina* or *urakshata* there is chest injury due to direct or indirect trauma along with *dhatukshaya*. *Brimhana* of *dhatu* (nourishment) is the principle line of management.

Thus *upsarga*(additional contact or exposure to) may be considered as *Sannikrishta Nidana* (recent cause) of *rajayakshma*. Sushruta was aware of this fact, and he has described its contagious nature by saying that skin diseases, fever, *rajayakshma* and conjunctivitis are infectious diseases which spread from one man to another man.

Symptomatology of *rajayakshma* has been described in three different categories viz. *trirupa*, *shadruva* and *ekadashrupa*. It seems that *trirupa* denotes the description of early tuberculosis when the disease is of mild nature whereas *shadruva* is the clinical manifestation of the moderately advanced disease. *Shadruva* is the cardinal symptoms of pulmonary tuberculosis which are found in the majority of the patients. *Ekadashrupa* or eleven-fold manifestation may appear in the far advanced stage of tuberculosis or in those patients whose *vyadhikshamatva* (immunity) is *hina* (low). The clinical presentation of disease includes groups of signs with their specific pathogenesis. The increasing number of signs denote severity of disease and spread of disease over body organs.

As far as the treatment is concerned, mild *samshodhana* therapy is indicated in excess aggravation of *dosha*. However drastic purification leading to emaciation is strictly contraindicated especially *virechana* (purgation) therapy. *Samshamana* (pacification) therapy includes treatment of symptoms and treatment of emaciation to increase the declining *dhatus* (tissues) of the body by using various types of meat and wines. Meat having high protein content helps in rebuilding body tissues whereas wine acts as a tonic and appetizer, it also helps open the blocked channels thereby providing proper nutrition to all the tissues of the body. *Rasayana* (rejuvenatives) have a significant role in enhancing immunity and thereby preventing infectious diseases. The formulations described in Rajayakshma Chikitsa enhance immunity as well as an adjuvant therapies to anti-tubercular treatments in current practices.

This chapter underscores the importance of judicious combination of modern drug treatment of infectious diseases with Ayurvedic treatment to achieve better results.[1]

Sanskrit text, Transliteration and English Translation

अथातो राजयक्षमचिकित्सितं व्याख्यास्यामः॥१॥

इति ह स्माह भगवानात्रेयः॥२॥

athātō rājayakṣmacikitsitam vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAto rAjayakShmacikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Rajayakshma Chikitsa”(Management of Wasting Diseases). Thus said Lord Atreya. [1-2]

History of disease

दिवौकसां कथयतामृषिभिर्वै श्रुता कथा| कामव्यसनसंयुक्ता पौराणी शशिनं प्रति॥३॥
रोहिण्यामतिसक्तस्य शरीरं नानुरक्षतः| आजगामाल्पतामिन्दोर्दहः स्नेहपरिक्षयात्॥४॥
दुहितृणामसम्भोगच्छेषाणां च प्रजापतेः| क्रोधो निःश्वासरूपेण मर्तिमान् निःसृतो मुखात्॥५॥ प्रजापतेहि
दुहितृरष्टाविंशतिमंशुमान् भार्यार्थं प्रतिजग्राह न च सर्वास्वर्वर्तते॥६॥ गुरुणा तमवैयातं

भार्यास्वसमवर्तिनम्। रजःपरीतमबलं यक्ष्मा शशिनमाविशत्॥७॥ सोऽभिभूतोऽतिमहता गुरुक्रोधेन
निष्प्रभः। देवदेवर्षिसहितो जगाम शरणं गुरुम्॥८॥ अथ चन्द्रमसः शुद्धां मतिं बृद्ध्वा प्रजापतिः। प्रसादं
कृतवान् सोमस्ततोऽशिवभ्यां चिकित्सितः॥९॥ स विमुक्तग्रहश्चन्द्रो विराज विशेषतः। ओजसा [२]
वर्धितोऽशिवभ्यां शुद्धं सत्त्वमवाप च॥१०॥

divaukasāṁ kathayatāṁśibhirvai śrutā kathā| kāmavyasanasamyuktā paurāṇī śaśināṁ
prati॥३॥ rōhiṇyāmatisaktasya śarīram nānurakṣataḥ| ājagāmālpatāmīndōrdēhaḥ
snēhāparikṣayāt॥४॥ duhitr̄ṇāmasambhōgācchēśānāṁ ca prajāpatēḥ| krōdhō
nihsvāsarūpēna mürtimān nihsṛtō mukhāt॥५॥ prajāpatērhi
duhitr̄aśṭāvīṁśatimāṁśumān bhāryārthām pratijagrāha na ca sarvāsvavartata॥६॥
guruṇā tamavadhyātām bhāryāsvasamavartinam| rajaḥparītamabalaṁ yakṣmā
śaśinamāviśat॥७॥ sō'bhibhūtō'timahatā [1] gurukrōdhēna niṣprabhaḥ|
dēvadēvarṣisahitō jagāma śaraṇām gurum॥८॥ atha candramasaḥ śuddhām matiṁ
buddhvā prajāpatih| prasādām kṛtavān sōmastato'śvibhyām cikitsitah॥९॥ sa
vimuktagrahaścandrō virarāja viśēṣataḥ| ojasā [2] vardhitō'śvibhyām śuddham
sattvamavāpa ca॥१०॥ divaukasAM kathayatAmRuShibhirvai shrutA kathAl
kAmavyasanasamYuktA paurANI shashinaM prati॥३॥ rohiNyAmatisaktasya sharIraM
nAnurakShataH| AjagAmAlpatAmindordehaH snehāparikShayAt॥४॥
duhitRUNAmasambhogAccheShANAM ca prajApateH| krodho niHshvAsarUpeNa
mUrtimAn niHsRuto mukhAt॥५॥ prajApaterhi duhitRUraShTAviMshatimaMshumAn|
bhAryArthaM pratijagrAha na ca sarvAsvavartata॥६॥ guruNA tamavadhyAtaM
bhAryAsvasamavartinam| rajaHparītamabalaM yakShmA shashinamAvishat॥७॥
so abhibhUto atimahatA [1] gurukrodhena niShprabhaH| devadevarShisahito jagAma
sharaNaM gurum॥८॥ atha candramasaH shuddhAM matiM buddhvA prajApatiH|
prasAdaM kRutavAn somastato~ashvibhyAM cikitsitaH॥९॥ sa vimuktagrahaścandro
virarAja visheShataH| ojasA [2] vardhito~ashvibhyAM shuddhaM sattvamavApa ca॥१०॥

The following story – of Chandrama (Moon)’s passionate cohabiting (with Rohini, one of his 28 celestial wives) - was narrated by the Gods to the sages. Because of his excessive sexual indulgence with Rohini, Chandrama soon started neglecting his own health, becoming emaciated due to depletion of his bodily unctuousness (essence or vitality). Besides, his inordinate attention to just one wife in comparison to the others resulted in his not being able to satisfy the desires of his remaining wives – all of whom were the daughters of Daksha Prajapati (Lord of Progeny). This ill-treatment to his daughters made Daksha furious, and his anger came out of his mouth in the form of breath that took a physical form (Yakshma). The now lusterless, afflicted Moon sought clemency from the great Daksha, accompanied by the Gods and Sages. Daksha Prajapati , now realizing Chandrama’s pure state of mind (and therefore, admitting his folly), became cordial to him got him treated by the Ashwin, the celestial physicians. The Ashwins having enhanced his *ojas* (vital essence), Chandrama additionally acquired a great purity of mind. [3-10]

Synonyms of disease and history of *yakshma*

क्रोधो यक्ष्मा ज्वरो रोग एकार्थो दुःखसञ्जकः। यस्मात् स राजः प्रागासीद्राजयक्ष्मा ततो मतः॥११॥ स
यक्ष्मा हुड्कृतोऽशिवभ्यां मानुषं लोकमागतः। लब्ध्वा चतुर्विधं हेतुं समाविशति मानवान्॥१२॥

krōdhō yakṣmā jvarō rōga ēkārthō duḥkhasañjñakah| yasmāt sa rājñah
 prāgāśīdrājayakṣmā tatō mataḥ||11|| sa yakṣmā huṇkṛtōśvibhyāṁ mānuṣam
 lōkamāgataḥ| labdhvā caturvidham hētum samāviśati mānavān||12|| kroḍho yakṣma
 jvaro roga ekArtho duHkhasa_jjakah| yasmAt sa rAj~jaH prAgAsIdrAjayakShmA tato
 mataḥ||11|| sa yakṣma hu_{gkRuto}ashvibhyAM mAnuShaM lokamAgataḥ| labdhvA
 caturvidhaM hetuM samAvishati mAnavAn||12||

Kroḍha(rage), yakṣma (sickness), jwara(fever) and roga (disease suffering) – these terms are synonymous, and indicate misery. Because it afflicted Chandrama, the king of stars, originally, it is called *rajayakṣma*, or the king of diseases. This disease, having been treated by the Ashwin in the celestial world, has come down to the world of mortals (i.e., human beings). Here, it afflicts human beings after being triggered by a four-fold causative factor [11-12]

Four important causative factors of disease

अयथाबलमारम्भं वेगसन्धारणं क्षयम्| यक्षमणः कारणं विद्याच्चतुर्थं विषमाशनम्||१३||

ayathābalamārambhāṁ vēgasandhāraṇāṁ kṣayam| yakṣmaṇāḥ kāraṇāṁ
 vidyāccaturthāṁ viṣamāśanām||13|| ayathAbalamArambhaM vegasandhAraNaM
 kShayam| yakShmaNaH kAraNaM vidyAccaturthaM viShamAshanam||13||

Over-exertion beyond one's capacity, suppression of natural urges, depletion of tissue elements and irregular dietary habits are the etiological factors of *rajayakṣma*. [13]

1. *Sahasaja rajayakṣma (due to over exertion beyond one's capacity)*

युद्धाद्ययनभाराद्वलङ्घनप्लवनादिभिः| पतनैरभिघातैर्वा साहसैर्वा तथाऽपरैः||१४||
 अयथाबलमारम्भैर्जन्तोरुरसि विक्षते| वायुः प्रकुपितो दोषावुदीर्योभौ प्रधावति||१५|| स शिरःस्थः शिरःशूलं
 करोति गलमाश्रितः| कण्ठोद्धृतं च कासं च स्वरभेदमरोचकम्||१६|| पाश्वरशूलं च पाश्वस्थो वर्चोभेदं गुदे
 स्थितः| जूम्भां ज्वरं च सन्धिस्थ उरःस्थचोरसो रुजम्||१७|| क्षणनादुरुसः कोसात् कफं ष्ठीवेत
 सशोणितम्| जर्जरेणोरसा कृच्छ्रमुरःशूलातिपीडितः||१८|| इति साहसिको यक्षमा रूपैरेतैः प्रपद्यते|
 एकादशभिरात्मजो भजेतस्मान्न साहसम्||१९||

yuddhādhyayanabhārādhvalaṅghanaplaṇādibhiḥ| patanairabhighātaivā sāhasairvā
 tathā'paraiḥ||14|| ayathābalamārambhārjantōrurasi vikṣatē| vāyuḥ prakupitō
 dōśāvudīryōbhau pradhāvatī||15|| sa śirahsthaḥ śirahśūlam karōti galamāśritah|
 kaṇṭhōddhvāṁsaṁ ca kāsaṁ ca svarabhēdamarōcakam||16|| pārśvaśūlam ca
 pārśvasthō varcōbhēdaṁ gudē sthitah| jṛmbhāṁ jvaraṁ ca sandhistha urahsthaścōrasō
 rujam||17|| kṣaṇanādurasah kāsāt kaphaṁ śṭhīvēt saśōṇitam| jarjarēṇōrasā
 kṛcchramuraḥśūlātipīḍitah||18|| iti sāhasikō yakṣmā rūpairētaiḥ prapadyatē|
 ēkādaśabhirātmajño bhajettasmānna sāhasam||19||
 yuddhAdhyayanabhArAduhvala~gghanaplaṇAdibhiH| patanairabhighAtairvA
 sAhasairvA tathA~aparaiH||14|| ayathAbalamArambhārjantorurasi vikShate| vAyuH
 prakupito doShAvudIryobhau pradhAvati||15|| sa shiraHsthaH shiraHshUlaM karoti
 galamAshritaH| kaNThoddhvāMsaM ca kAsaM ca svarabhēdamarocakam||16||
 pArshvashUlaM ca pArshvastho varcōbhedaM gude sthitaH| jRumbhAM jvaraM ca

sandhistha uraHsthhashcoraso rujam||17|| kShaNanAdurasaH [1] kAsAt kaphaM
 ShThIvet sashoNitam| jarjareNorasA kRucchramuraHshUIAtipIDitaH||18|| iti sAhasiko
 yakShmA rUpairetaiH prapadyate| ekAdashabhirAtmaj~jo bhajettasmAnna [2]
 sAhasam||19||

When beyond one's capacity, a person indulges in excess battle, reading, weight-lifting, walking, jumping, swimming etc. or falls down - or gets injured -or exerts himself in any action that is beyond his strength or tolerance, leads to chest injury and , vitiates *vata dosha*. This *vata dosha* afflicts the other two (*pitta* and *kapha dosha*). These vitiated *dosha*, along with *vayu*, spread in all direction within body (*pradhavati*) and cause eleven symptoms, with each symptom directly corresponding to the particular part of the body. If the deranged *dosha* enters the head, it causes headache; if the throat, then irritation in throat, cough, hoarseness of voice and anorexia; if the chest, then pain in the sides of the chest; if the anus, then diarrhea; if in the joints, then fever, yawning and pain in the chest.

Injury to the chest and coughing cause the patient to spit out phlegm along with blood. In this case, the patient suffers from unbearable pain in his chest due to pulmonic damage. These eleven symptoms are manifested in the patients suffering from *yakshma* caused by overexertion. [14-19]

2. Vegasandharanaja rajayakshma (due to suppression of natural urges)

हीमत्वाद्‌वा धृणित्वाद्‌वा भयाद्‌वा वेगमागतम्। वातमत्रपरीषाणां निगृहणाति यदा नरः॥२०॥ तदा
 वेगप्रतीघातात् कफपित्ते समीरयेन्। ऊर्ध्वं तिर्यगधश्चैव विकारान् कुरुतेऽनिलः॥२१॥ प्रतिश्यायं च कासं च
 स्वरभेदमरोचकम्। पार्श्वशलं शिरःशूलं ज्वरमसावमर्दनम्॥२२॥ अङ्गमर्दं मुहूर्श्छर्दिं वर्चोभेदं त्रिलक्षणम्।
 रूपाण्येकादशैतानि यक्षमा यैरुच्यते महान्॥२३॥

hrīmattvādvā ghṛṇitvādvā bhayādvā vēgamāgatam| vātamūtrapurīṣāṇāṁ nigr̄hṇāti yadā
 narah||20|| tadā vēgapratīghātāt kaphapittē samīrayan| ūrdhvam̄ tiryagadhaścaiva
 vikārān kurutē'nilah||21|| pratiśyāyāṁ ca kāsaṁ ca svarabhēdamarōcakam|
 pārśvaśūlam̄ śirahśūlam̄ jvaramāṁsāvamardanam||22|| aṅgamardam̄ muhuśchardim̄
 varcōbhēdām̄ trilakṣaṇam̄ rūpāṇyēkādaśaitāni yakṣmā yairucyatē mahān||23||
 hrlmattvAdvA ghRuNitvAdvA bhayAdvA vegamAgatam| vAtamUtrapuriSHANAM
 nigRuhNAti yadA naraH||20|| tadA vegapratlghAtAt kaphapitte samīrayan| Urdhvam̄
 tiryagadhashcaiva vikArAn kurute~anilaH||21|| pratishyAyaM ca kAsaM ca
 svarabhedamarocakam| pArshvashUlaM shiraHshUlaM jvaramaMsAvamardanam||22||
 a~ggamardam̄ muhushchardiM varcobhedaM trilakShaNam̄ rUpAAnyekAdashaitAni
 yakShmA yairucyate mahAn||23||

When due to bashfulness or disgust or fear one suppresses the impelling urge to pass flatus, urine and/or feces, *vata*, due to the obstruction of such urges, propels *kapha* and *pitta* upwards, obliquely and downwards within the body, causing the disorders having symptoms of all three *doshas* such as coryza, cough, hoarseness of voice, anorexia, pain in flank, headache, fever, pain in shoulders, bodyache, frequent vomiting and diarrhea. These are the eleven symptoms of *rajayakshma* caused due to suppression of urges. [20-23]

3. Kshayaja rajayakshma (due to depletion of tissues)

ईर्ष्योत्कण्ठाभयत्रासक्रोधशोकातिकर्शनात् अतिव्यवायानशनाच्छुक्रमोजश्च हीयते॥२४॥ ततः स्नेहक्षयाद्वायुर्वृद्धो दोषावदीरयन् प्रतिश्यायं ज्वरं कासमङ्गमर्दं शिरोरुजम्॥२५॥ श्वासं विड्भेदमरुचिं पार्श्वशूलं स्वरक्षयम् करोति चांससन्तापमेकादशगदानिमान् [१] ॥२६॥ लिङ्गान्यावेदयन्त्येतान्येकादश महागदम् सम्प्राप्तं राजयक्षमाणं क्षयात् प्राणक्षयप्रदम्॥२७॥

Trṣyōtkanṭhābhayatrāsakrōdhaśōkātikarśanāt| ativyavāyānaśanāccchukramōjaśca
hīyatē||२४|| tataḥ snēhakṣayādvāyurvṛddhō dōśāvudīrayan| pratiśyāyam jvaraṁ
kāsamaṅgamardam śirōrujam||२५|| śvāsam viḍbhēdamaruciṁ pārśvaśūlam
svarakṣayam| karōti cāṁsasantāpamēkādaśagadānimān [१] ||२६||
liṅgānyāvēdayantyētānyēkādaśa mahāgadam| samprāptam rājayakṣmāṇam kṣayat
prāṇakṣayapradam||२७|| IrShyotkaNThAbhayatrAsakrodhashokAtikarshanAt|
ativyavAyAnashanAcchukramojashca hlyate||२४|| tataH snehakShayAdvAyurvRuddho
doShAvudIrayan| pratishyAyaM jvaraM kAsama~ggamardaM shirorujam||२५|| shvAsaM
viDhedamaruciM pArshvashUlaM svarakShayam| karoti
cAMsasantApamekAdashagadAnimAn [१] ||२६|| li~ggAnyAvedayantyetAnyekAdasha
mahAgadam| samprAptaM rAjayakShmANaM kShayAt prANakShayapradam||२७||

Excessive envy, eagerness, fever, terror, anger, grief, excessive indulgence in sexual intercourse, and fasting leads to depletion of *shukra* and *ojas*. This, in turn, due to loss of unctuousness, provokes *vata* which further aggravates the other two *doshas* and causes eleven symptoms such as—coryza, fever, cough, bodyache, headache, dyspnea, diarrhea, anorexia, pain in flanks, feeble voice and feeling of warmth in shoulders. These eleven symptoms indicate the advent of the great disease *rajayakshma* due to wasting. [24-27]

4. Vishamashanaja rajayakshma (due to irregular dietary habits)

विविधान्यन्नपानानि वैषम्येण समश्नतः| जनयन्त्यामयान् घोरान्विषमान्मारुतादयः॥२८॥ स्रोतांसि
रुधिरादीनां वैषम्यादविषमं गताः| रुद्ध्वा रोगाय कल्पन्ते पुष्यन्ति च न धातवः॥२९॥ प्रतिश्यायं प्रसेकं च
कासं छर्दिमरोचकम् ज्वरमंसाभितापं च छर्दनं रुधिरस्य चौ॥३०॥ पार्श्वशूलं शिरःशूलं स्वरभेदमथापि च।
कफपित्तानिलकृतं लिङ्गं विद्यादयथाक्रमम्॥३१॥ इति व्याधिसमूहस्य रोगराजस्य हेतुजम्।
रूपमेकादशविधं हेतुश्चोक्तश्चतुर्विधः॥३२॥

vividhānyannapānāni vaiśamyēṇa samaśnataḥ| janayantyāmayān
ghōrānviśamānmarutādayah॥२८॥ srōtāṁsi rudhirādīnāṁ vaiśamyādvīśamāṁ gatāḥ|
ruddhvā rōgāya kalpantē puṣyanti ca na dhātavah॥२९॥ pratiśyāyam prasēkam ca
kāsaṁ chardimarōcakam| jvaramāṁsābhītāpam ca chardanām rudhirasya ca॥३०॥
pārśvaśūlam śiraḥśūlam svarabhēdamathāpi ca| kaphapittānilakṛtam liṅgam
vidyādyathākramam॥३१॥ iti vyādhisamūhasya rōgarājasya [१] hētujam|
rūpamēkādaśavidham hētuścōktaścaturvidhah॥३२॥ vividhAnyannapAnAni
vaiShamyeNa samashnataH| janayantyAmayAn ghorAnviShamAnmArutAdayaH॥२८॥
srotAMsi rudhirAdInAM vaiShamyAdviShamaM gatAH| ruddhvA rogAya kalpante
puShyanti ca na dhAtavaH॥२९॥ pratishyAyaM prasekaM ca kAsaM chardimarocakam|
jvaramaMsAbhitApaM ca chardanaM rudhirasya ca॥३०॥ pArshvashUlaM shiraHshUlaM
svarabhedamathApi ca| kaphapittAnilakRutaM li~ggaM vidyAdyathAkramam॥३१॥ iti

vyAdhisamUhasya rogarAjasya [1] hetujam| rUpamekAdashavidhaM
hetushcoktashcaturvidhaH||32||

Irregular intake of dietary articles, or irregular dietary habits lead to vitiation of *doshas*, causing severe *amavisha* disorders. These vitiated *doshas* obstruct the channels of blood etc. leading to weaning away of *dhatu*s and causing the 11 symptoms of *rajayakshma* caused due to irregular dietary habit:

1. Due to vitiated *kapha*: coryza, excessive salivation, cough, vomiting and anorexia,
2. Due to vitiated *pitta*: fever, distress in shoulder and haemoptysis, and
3. Due to vitiated *vata*: pain in flanks, headache and hoarseness of voice.[28-31]

Premonitory signs

पूर्वरूपं प्रतिश्यायो दौर्बल्यं दोषदर्शनम्। अदोषेष्वपि भावेषु काये बीभत्सदर्शनम्॥३३॥
घृणित्वमश्नतश्चापि बलमांसपरिक्षयः। स्त्रीमद्यमांसप्रियता प्रियता चावगुणठने॥३४॥ मक्षिकाघुणकेशानां
तृणानां पतनानि च। प्रायोऽन्नपाने केशानां नखानां चाभिवर्धनम्॥३५॥ पतांत्रिभिः पतङ्गैश्च
श्वापदैश्चाभिर्धर्षणम्। स्वप्ने केशास्थिराशीनां भस्मनश्चाधिरोहणम्॥३६॥ जलाशयानां शैलानां वनानां
ज्योतिषामपि। शुष्यतां क्षीयमाणानां पततां यच्च दर्शनम्॥३७॥ प्राग्रूपं बहुरूपस्य तज्ज्ञेयं राजयक्षमणः॥३८॥

pūrvarūpam pratiśyāyō daurbalyam dōṣadarśanam| adōṣēṣvapi bhāvēṣu kāyē¹
bībhatsadarśanam||33|| ghṛṇitvamaśnataścāpi balamāṁsaparikṣayah|
strīmad�amāṁsapriyatā priyatā cāvaguṇṭhanē||34|| makṣikāghuṇakēśānāṁ tṛṇānāṁ
patanāni ca| prāyō'nnapānē kēśānāṁ nakhānāṁ cābhivardhanam||35|| patatribhiḥ
pataṅgaiśca śvāpadaiścābhidharsanam| svapnē kēśāsthiraśīnāṁ
bhasmanaścādhirōhaṇam||36|| jalāśayānāṁ śailānāṁ vanānāṁ jyotiṣāmapi| śuṣyatāṁ
kṣīyamāṇānāṁ patatāṁ yacca darśanam||37|| prāgrūpam bahurūpasya tajjñēyam
rājayakṣmaṇah||38| pUrvarUpaM pratishyAyo daurbalyaM doShadarshanam|
adoSheShvapi bhAveShu kAye blbhatsadarshanam||33|| ghRuNitvamashnatashcApi
balamAMsaparikShayaH| strladyamAMsapriyatA priyatA cAvaguNThane||34||
makShikAghuNakeshAnAM tRuNAAnAM patanAni ca| prAyo~annapAne keshAnAM
nakhAnAM cAbhivardhanam||35|| patatribhiH pata~ggaishca
shvApadaishcAbhidharShaNam| svapne keshAsthirAshInAM
bhasmanashcAdhirohaNam||36|| jalAshayAnAM shailAnAM vanAnAM jyotiShAmapi|
shuShyatAM kShlyamANAnAM patatAM yacca darshanam||37|| prAgrUpaM
bahurUpasya tajj~jeyaM rAjayakShmaNaH||38|

The premonitory symptoms (of *rajayakshma*) are coryza, debility, nitpicking (or an inclination to find faults where there is no reason to), morbid appearances on the body; feeling of disgust, loss of strength and flesh (inspite of consuming adequate food), craving for women, wine and meat, desire to be always covered by something (feeling of cold), imagined feeling of one's food being infested with insects, flies, hair,, rapid growth of hairs and fingernails, imagined feeling of being attacked by birds, wasps, and animals, seeing dreams of climbing heaps of hair, bones, and ashes, and dreaming of

dried or withered ponds, mountains, and forests- these are to be known as premonitory symptoms of *rajayakshma* of various types.[33-38]

Pathogenesis and clinical features

रूपं त्वस्य यथोददेशं निर्देक्ष्यामि [१] सभेषजम्॥३८॥ यथास्वेनोष्मणा पाकं शारीरा यान्ति धातवः| स्रोतसा च यथास्वेन धातुः पुष्यति धातुतः॥३९॥ स्रोतसां सन्निरोधाच्च रक्तादीनां च सङ्क्षयात् धातूष्मणां चापचयाद्राजयक्षमा प्रवर्तते॥४०॥ तस्मिन् काले पचत्यग्निर्यदन्नं कोष्ठसंश्रितम् मलीभवति तत् प्रायः कल्पते किञ्चिदोजसे॥४१॥ तस्मात् पुरीषे संरक्ष्यं विशेषाद्राजयक्षिमणः| सर्वधातुक्षयार्तस्य बलं तस्य हि विड्बलम्॥४२॥ रसः स्रोतःसु रुद्धैषु स्वस्थानस्थो विदह्यते [२] | स ऊर्ध्वं कासवैगेन बहुरूपः प्रवर्तते॥४३॥ जायन्ते व्याधयश्चातः षडेकादशं वा पुनः| येषां सङ्घातयोगेन राजयक्षमेति कथयते॥४४॥ कासोऽसतापो वैस्वर्यं ज्वरः पाश्वशिरोरुजा| छर्दनं रक्तकफयोः श्वासवर्चोगदोऽरुचिः॥४५॥ रूपाण्येकादशैतानि यक्षमणः षडिमानि वा| कासो ज्वरः पाश्वशलं स्वरवर्चोगदोऽरुचिः॥४६॥ सर्वरूपैस्त्रिभिर्वाऽपि लिङ्गैर्मासबलक्षये| युक्तो वर्जयेश्चकित्स्यस्तु सर्वरूपोऽप्यतोऽन्यथा॥४७॥

rūparām tvasya yathōddēśam nirdēkṣyāmi [1] sabhēṣajam||38|| yathāsvēnōṣmaṇā pākarām śārīrā yānti dhātavah| srōtasā ca yathāsvēna dhātuh puṣyati dhātutah||39|| srōtasāṁ sannirōdhācca raktādīnāṁ ca saṅkṣayat| dhātūṣmaṇāṁ cāpacayādrājayakṣmā pravartatē||40|| tasmin kālē pacatyagniryadannāṁ kōṣṭhasaṁśritam| malībhavati tat prāyah kalpatē kiñcidōjasē||41|| tasmāt puriṣāṁ saṁrakṣyām viśēṣādrājayakṣmīnah| sarvadhātukṣayārtasya balaṁ tasya hi viḍbalam||42|| rasah srōtaḥsu ruddhēsu svasthānasthō vidahyatē [२] | sa ūrdhvam kāsavēgēna bahurūpah pravartatē||43|| jāyantē vyādhayaścātah ṣaḍēkādaśa vā punah| yēṣāṁ sahghātayōgēna rājayakṣmēti kathyatē||44|| kāsōṁsatāpō vaisvaryām jvaraḥ pārśvaśirōrūjā| chardanāṁ raktakaphayoh śvāsavarcōgadō'ruciḥ||45|| rūpānyēkādaśaitāni yakṣmaṇah ṣaḍimāni vā| kāsō jvaraḥ pārśvaśūlam svaravarcōgadō'ruciḥ||46|| sarvairardhaistribhirvā'pi liṅgairmāṁsabalakṣayē yukto varjyaścikitsyastu sarvarūpō'pyatō'nyathā||47|| rUpaM tvasya yathoddeshaM nirdekShyAmi [1] sabheShajam||38|| yathAsvenoShmaNA pAkAM shArIrA yAnti dhAtavaH| srotasA ca yathAsvena dhAtuH puShyati dhAtutaH||39|| srotasAM sannirodhAcca raktAdInAM ca sa~gkShayAt| dhAtUShmaNAM cApacayAdrAjayakShmA pravartate||40|| tasmin kAle pacatyagniryadannaM koShThasaMshritam| mallbhavati tat prAyaH kalpate ki~jcidojase||41|| tasmAt purIshaM saMrakShyaM visheShAdrAjayakShmiNaH| sarvadhAtukShayArtasya balaM tasya hi viDbalam||42|| rasaH srotaHsu ruddheShu svasthAnastho vidahyate [२] | sa Urdhvam kAsavegena bahurUpaH pravartate||43|| jAyante vyAdhayashcAtaH ShaDekAdasha vA punaH| yeShAM sa~gghAtayogena rAjayakShmeti kathyate||44|| kAsoM~asatApo vaisvaryāM jvaraH pArshvashirorujA| chardanaM raktakaphayoH shvAsavarcogado~aruciH||45|| rUpAAnyekAdashaitAni yakShmaNaH ShaDimAni vA| kAso jvaraH pArshvashUlaM svaravarcogado~aruciH||46|| sarvairardhaistribhirvA~api li~ggairmAMsabalakShaye| yukto varjyashcikitsyastu sarvarUpo_{apyato}anyathA||47||

Now we will describe the pathogenesis, clinical features and management in brief.

Normally, the *dhatus* of the body get metabolised (being acted upon) by their own *ushmas* or *dhatvagnis* (transforming enzymes in the tissue elements). From these *dhatus*, (nutrient tissue elements), the other *dhatus* (next *dhatu* to it that which receive

nourishment) gets nourished through their respective *srotas* (channels of circulation). (For example, a *poshaka rasa dhatu* would nourish the *rakta dhatu*).

Once, however, there is any obstruction to *srotas* or if there is diminution of stable tissue elements like *rakta* or if there is diminution of *dhatu-ushmas* or *dhatvagnis* then *rajayakshma* is manifested. In such a case, whatever food is digested in the gastrointestinal tract by *jatharagni* is mostly reduced to waste products and very little of it contributes to the formation of *ojas* (nourishment). The patient is depleted of all tissue elements and strength. The patient's stool should be preserved and it is the only source of strength left with him. Because of the obstruction to the *srotas*, *rasa dhatu* becomes *vidagdha* (improperly metabolized) in its own location (heart) and this vitiated *rasa* comes out through the upper passages in different forms by way of coughing. Subsequently, six or eleven symptoms (or forms of diseases) are manifested, and their aggregation is the syndrome called *rajayakshma*. Cough, distress in shoulder, change of voice, fever, pain in flanks, headache, vomiting of *rakta* and *kapha*, dyspnea, diarrhea and anorexia are the eleven symptoms of *rajayakshma*; or they are also six viz., cough, fever, pain in flanks, hoarseness of voice diarrhea and anorexia. With eleven, six or even three of the symptoms, a patient is incurable if he is losing *mamsa* (flesh tissues) and strength, but he is curable if he is behaving otherwise in spite of showing all the symptoms. [39-47]

Signs of *pratishyaya*

घ्राणमुले स्थितः श्लेष्मा रुधिरं पित्तमेव वा| मारुताध्मातशिरसो मारुतं श्यायते प्रति||४८|| प्रतिश्यायस्ततो
घोरो ज्योयते देहकर्शनः| तस्य रूपं शिरःशूलं गौरवं घ्राणविप्लवः||४९|| ज्वरः कासः कफोत्क्लेशः
स्वरभेदोऽरुचिः क्लमः| इन्द्रियाणामसामर्थ्यं यक्ष्मा चातः [१] प्रजायते||५०||

ghrāṇamūlē sthitah ślēṣmā rudhiram pittamēva vā| mārutādhmātaśirasō mārutaṁ
śyāyatē prati||48|| pratiśyāyastatō ghōrō jāyatē dēhakarśanah| tasya rūpam śirahśūlam
gauravam ghrāṇaviplavah||49|| jvarah kāsaḥ kaphōtklēśah svarabhēdō'ruciḥ klamah|
indriyāṇāmasāmarthyam yakṣmā cātah [1] prajāyatē||50|| ghrANamUle sthitaH
shleShmA rudhiram pittameva vA| mArutAdhmAtashiraso mArutaM shyAyate prati||48||
pratishyAyastato ghoro jAyate dehakarshanaH| tasya rUpaM shiraHshUlaM gauravaM
ghrANaviplavaH||49|| jvaraH kAsaH kaphotkleshaH svarabhedo~aruciH klamaH|
indriyANAmasAmarthyam yakShmA cAtaH [1] prajAyate||50||

The *kapha* or blood or *pitta* located at the root of the nasal passage cause nasal catarrh in the patients whose head is afflicted with *vayu*. This results in severe *pratishyaya* (coryza) affecting entire body of the patient, This leads to emaciation of the body; its signs and symptoms are headache, heaviness in the head, loss of smell, fever, cough, increase of mucous secretion, change of voice, anorexia fatigue and asthenia of the senses and then *rajayakshma* manifests. [48-50]

Appearance of sputum

पिच्छिलं बहलं विसं हरितं श्वेतपीतकम्| कासमानो रसं यक्ष्मी निष्ठीवति [१] कफानुगम्||५१||

picchilaṁ bahalaṁ visraṁ haritaṁ śvētāpītakam| kāsamānō rasam yakṣmī niṣṭhīvati [1] kaphānugam||51|| picchilaM bahalaM visraM haritaM shvetapItakam| kAsamAno rasaM yakShml niShThlvati [1] kaphAnugam||51||

Expectorates resulting from coughing (when afflicted with *rajayakshma*) contain slimy, thick, putrid, greenish or white-yellowish matter along with *kapha*. [51]

Clinical features of *rajayakshma*

अंसपाश्वर्भितापश्च सन्तापः करपादयोः| ज्वरः सर्वाङ्गगच्छेति लक्षणं राजयक्षमणः||५२||

aṁsapāśvābhītāpaśca santāpah karapādayoh| jvaraḥ sarvāṅgagaśceti lakṣaṇam
rājayakṣmaṇah||52|| aMsapArshvAbhitApashca santApaH [1] karapAdayoH| jvaraH
sarvA~ggagashceti lakShaNaM rAjayakShmaNaH||52||

The typical characteristics of *rajayakshma* include a feeling of warmth (or burning sensation) in the shoulders and flanks, burning sensation in hands, and feet, and raised temperature all over the body.[52]

Swarabheda (hoarseness of voice) and characteristics as per *dosha* affliction

वातात्पित्तात्कफाद्रक्तात् कासवेगात् सपीनसात् स्वरभेदो भवेद्वाताद्रूक्षः क्षामश्चलः स्वरः||५३||
तालुकण्ठपरिप्लोषः पित्ताद्वक्तुमसूयते| कफादभेदो विबद्धश्च स्वरः खुरखुरायते ||५४|| सन्नो
रक्तविबद्धत्वात् स्वरः कृच्छात् प्रवर्तते| कासातिवेगात् कषणः पीनसात्कफवातिकः||५५|| पाश्वर्शूलं
त्वनियतं सङ्कोचायामलक्षणम्| शिरःशूलं ससन्तापं यद्द्विमणः स्यात्सगौरवम्||५६||

vātātpittātkaṁphādraktāt kāsavēgāt sapīnasāt| svarabhēdō bhavēdvātādrūkṣah
kṣāmaścalah svaraḥ||53|| tālukanṭhapariplōṣah pittādvaktumasūyatē| kaphādbhēdō
vibaddhaśca svaraḥ khurakhurāyatē ||54|| sannō raktavibaddhatvāt svaraḥ kṛcchrāt
pravartatē| kāsātivēgāt kaṣaṇah pīnasātkaṁphavātikah||55|| pārśvaśūlāṁ tvaniyatāṁ
saṅkōcāyāmalakṣaṇam| śirahśūlāṁ sasantāpāṁ yakṣmīnah syātsagauravam||56||
vAtAtpittAtkaphAdraktAt kAsavegAt sapInasAt| svarabhedo bhavedvAtAdrUkShaH
kShAmashcalaH svaraH||53|| tAlukaNThapariploShaH pittAdvaktumasUyate|
kaphAdbhedo [1] vibaddhashca svaraH khurakhurAyate [2] ||54|| sanno
raktavibaddhatvAt svaraH kRucchrAt pravartate| kAsAtivegAt kaShaNaH [3]
pInasAtkaphavAtikaH||55|| pArshvashUlaM tvaniyatāM sa~gkocAyAmalakShaNam|
shiraHshUlaM sasantApaM yakShmiNaH syAtsagauravam||56||

Hoarseness of voice is engendered by morbid *vata*, *pitta* or *kapha* or blood or by, strain of coughing or by coryza. The voice becomes husky, feeble and unstable if caused by *vata*; if by *pitta*, there will be burning of the palate and throat and the patient will refrain from talking; and if due to *kapha*, the voice is low, choked and is marked with a wheezing sound; owing to the obstruction to the flow of blood, the voice becomes low and comes out with difficulty; the throat becomes injured by the strain of exorbitant coughing and in case of coryza, the characteristics of the voice resemble the condition in *vata* and *kapha* afflictions.

The *rajayakshma* patient is afflicted with pain in the sides of the chest (flanks) which is inconsistent and manifests during constriction and expansion of chest during breathing, with headache, burning and heaviness.[53-56]

Rakta shthivana (hemoptysis)

अभिसन्ने शरीरे तु यक्षिमणो विषमाशनात् कण्ठात्प्रवर्तते रक्तं श्लेष्मा चोत्क्लिष्टसञ्चितः||५७||

abhisannē śarīrē tu yakṣmiṇō viṣamāśanāt| kanṭhātpravartatē raktam ślēṣmā cōtkliṣṭasañcitatḥ||57|| abhisanne [1] sharlre tu yakShmiNo viShamAshanAt| kaNThAtpravartate raktam shleShmA cotkliShTasa~jcitaH||57||

In the emaciated condition of *rajayakshma* patients' indulgence in irregular diet causes expectoration of blood. The *kapha* too, having been vitiated, is expectorated from the throat. [57]

Causes of depletion of tissues

रक्तं विबद्धमार्गत्वान्मांसादीन्नानुपदयते | आमाशयस्थमुत्क्लिष्टं बहृत्वात् कण्ठमेति च||५८||
वातश्लेष्मविबद्धत्वादुरसः श्वासमृच्छते| दोषैरुपहते चार्गनौ सपिच्छमैतिसार्यते||५९||

raktam vibaddhamārgatvānmāṁsādīnna nūpadyatē | āmāśayasthamutkliṣṭam bahutvāt
kanṭhamēti ca||58|| vātaślēṣmavibaddhatvādurasaḥ śvāsamṛcchatī| dōṣairupahatē
cāgnau sapicchamatisāryatē||59|| raktam vibaddhamArgatvAnmAMsAdInnAnupadyate
[2] | AmAshayasthamutkliShTaM bahutvAt kaNThameti ca||58||
vAtashleShmavibaddhatvAdurasaH shvAsamRucchatī doShairupahate cAgnau
sapicchamatisAryate||59||

Owing to obstruction in the circulation, the blood does not nourish the flesh tissues and other body elements. The blood staying in the stomach, getting agitated owing to incremented quantity, passes to the throat. Due to the obstruction of *vata* and *kapha* in the chest, there occurs dyspnea and the *agni*, being impaired by the morbid humors, causes the patient to pass loose and slimy stools.[57-59]

Cause of anorexia

पृथग्दोषैः समस्तैर्वा जिह्वाहृदयसंश्रितैः| जायतेऽरुचिराहारे द्विष्टैरर्थैर्च मानसैः||६०||
कषायतिक्तमधुरैर्विद्यान्मुखरसैः क्रमात् वाताद्यैररुचिं जातां मानसीं दोषदर्शनात्||६१||

prthagdōṣaiḥ samastairvā jihvāhṛdayasamśritaiḥ| jāyatē'ruciरāhārē dviṣṭairarthaiśca
mānasaiḥ||60|| kaṣāyatiktamadhurairvidyānmukharasaiḥ kramāt| vātādyairaruciṁ jātāṁ
mānasīṁ dōṣadarśanāt||61|| pRuthagdoShaiH samastairvA jihvAhRudayasaMshritaiH|
jAyate~arucirAhAre dviShTairthaishca mAnasaiH||60||
kaShAyatiktamadhurairvidyAnmukharasaiH kramAt| vAtAdyairaruciM jAtAM mAnasIM
doShadarshanAt||61||

Anorexia or dislike for food is caused by morbidity of one or all the three *doshas* in the tongue or heart or by repugnant perceptions. By knowing the astringent, bitter or sweet

taste in the mouth, anorexia is to be diagnosed as caused due to dominance of *vata*, *pitta* or *kapha* respectively. Anorexia due to morbid perceptions is psychosomatic, caused due to visually observing disturbing or morbid visuals. [60-61]

Cause of vomiting

अरोचकात् कासवेगाद्दोषोत्क्लेशादभ्यादपि। छर्दिर्या सा विकाराणामन्येषामप्युपद्रवः॥६२॥

arōcakāt kāsavēgāddōṣōtklēśādbhayādapi| chardiryā sā
vikārāṇāmanyēṣāmapyupadravah||62|| arocakAt kAsavegAddoShotkleshAdbhayAdapi|
chardiryA sA vikArANAmanyeShAmapyupadravaH||62||

Regurgitating or vomiting is caused by anorexia, bouts of coughing, and the precipitation of morbid *dosha* and as a result of fear; it occurs as a complication of other diseases additionally. [62]

Management of *rajayakshma*

सर्वस्त्रिदोषजो यक्षमा दोषाणां तु बलाबलम् परीक्ष्यावस्थिकं वैद्यः शोषिणं समुपाचरेत्॥६३॥ प्रतिश्याये
शिरःशूले कासे श्वासे स्वरक्षये पाश्वर्शूले च विविधाः क्रियाः साधारणीः शृणु॥६४॥

sarvastridōṣajō yakṣmā dōṣāṇāṁ tu balābalam| parīkṣyāvasthikam vaidyah śōṣināṁ samupācarēt||63|| pratiśyāyē śirahsūlē kāsē śvāsē svarakṣayē| pāśvraśūlē ca vividhāḥ kriyāḥ sādhāraṇīḥ śṛṇu||64|| sarvastridoShajo yakShmA doShANAM tu balAbalam| parIkShyAvasthikaM vaidyaH shoShiNaM samupAcaret||63|| pratishyAye shiraHshUle kAse shvAse svarakShaye| pArshvashUle ca vividhAH kriyAH sAdhAraNIH shRuNu||64||

All types of *rajayakshma* are caused due to vitiated three *doshas* and hence the physician should treat the patient after examining the degree of intensity of the morbid *dosha* and the vigor of the patient. The physician should carefully observe the status (of patient) – by the symptoms such as coryza, headache, cough, dyspnea, asthenia of the voice and pain in flanks. [63-64]

Various dietary articles in treatment

पीनसे स्वेदमध्यङ्गं धूममालेपनानि च। परिषेकावगाहांश्च यावकं [१] वाट्यमेव च॥६५॥
लवणाम्लकटूष्णांश्च रसान् स्नेहोपबृहितान् लावतितिरिदक्षाणां वर्तकानां च कल्पयेत्॥६६॥ सपिष्पलीकं
सयवं सकुलत्थं सनागरम् दाडिमामलकोपेतं स्निग्धमाजं रसं पिबेत्॥६७॥ तेन षड्विनिवर्तन्ते विकाराः
पीनसादयः। मूलकानां कुलत्थानां यूषैर्वा सूपकल्पितैः [२] ॥६८॥ यवगोधूमशाल्यनैर्यथासात्म्यमुपाचरेत्
पिबेत्प्रसादं वारुण्या जले वा पाञ्चमूलिकम्॥६९॥ धान्यनागरसिद्धं वा तामलक्याऽथवा शृतम्।
पर्णिनीभिंश्चतस्रूभिस्तेन चान्नानि कल्पयेत्॥७०॥

pīnasē svēdamabhyāṅgam dhūmamālēpanāni ca| pariṣēkāvagāhāṁśca yāvakam
vātyamēva ca||65|| lavaṇāmlakaṭūṣṇāṁśca rasān snēhōpabṛhmhitān| lāvatittiridakṣāṇāṁ
vartakānāṁ ca kalpayēt||66|| sapippalīkam sayavam sakulattham sanāgaram|
dādimāmalakōpētam snigdhamājam rasam pibēt||67|| tēna ṣadvinivartantē vikārāḥ
pīnasādayah| mūlakānāṁ kulatthānāṁ yūṣairvā sūpakalpitaiḥ ||68||

yavagōdhūmaśālyannairyathāsātmyamupācarēṭ| pibētprasādaṁ vāruṇyā jalaṁ vā
 pāñcamūlikam||69|| dhānyanāgarasiddhaṁ vā tāmalakyā'thaवā śṭtam|
 parṇinībhīścatasṛbhīstēna cānnāni kalpayēṭ||70|| plnase svedamabhyā~ggaM
 dhUmamAlepanAni ca| pariShekAvagAhAMshca yAvakaM [1] vATyameva ca||65||
 lavaNAmlakaTUShNAMshca rasAn snehopabRuMhitAn| IAvatittiridakShANAM
 vartakAnAM ca kalpayet||66|| sapippallkaM sayavaM sakulatthaM sanAgaram|
 dADimAmalakopetaM snigdhamAjaM rasaM pibet||67|| tena ShaDvinivartante vikArAH
 plnasAdayaH| mUlakAnAM kulatthAnAM yUShairvA sUpakalpitaiH [2] ||68||
 yavagodhUmashAlyannairyathAsAtmyamupAcaret| pibetprasAdaM vAruNyA jalaM vA
 pA~jcamUlikam||69|| dhAnyanAgarasiddhaM vA tAmalakyA~athavA shRutam|
 parNinlbhishcatasRubhistena cAnnAni kalpayet||70||

In coryza, sudation, inunction, smoke application, effusion, bath, cooked barley and barley gruel, meat juices of quail, partridge, chicken and *vartaka* quail prepared with salt, acid, pungent, sultry and unctuous articles should be given. The patient should imbibe the juice of goat-meat prepared with long pepper, barley, horse gram, dry ginger, pomegranate or emblic myrobalan and unctuous articles. By taking this, the hexad of coryza and other disorders vanishes. The patient should be treated with a suitable diet of soups made up of radish or horse gram or out of staple food composed of barley, wheat or shali rice. A potion made up of the clear supernatant part of *varuni* wine or water, prepared with pentaradix, or with coriander and dry ginger or with feather-foil, or with the tetrad of herbs called *parnini* is advised. Articles of diet may additionally be consumed with these decoctions.[65-70]

Swedana (sudation)

कृशरोत्कारिकामाषकलत्थयवपायसैः| सङ्करस्वेदविधिना कण्ठं पाश्वमरः शिरः||७१॥ स्वेदयेत्
 पत्रभङ्गेण शिरश्च पौरिषेचयेत्| बलागुड्यीमधुकश्तैर्वा वारिभिः सुखैः||७२॥ बस्तमत्स्यशिरोभिर्वा
 नाडीस्वेदं प्रयोजयेत्| कण्ठे शिरसि पाश्वे च पयोर्भिर्वा सवातिकैः||७३॥ औदकानूपमांसानि सलिलं
 पाञ्चमलिकम्| सस्नेहमारनालं वा नाडीस्वेदे प्रयोजयेत्||७४॥ जीवन्त्याः शतपृष्णाया बलाया मधुकस्य च
 वचाया वेशवारस्य विदार्या मलकस्य च||७५॥ औदकानूपमांसानामुपनाहाः सुसस्कृताः| शस्यन्ते
 सचतुःस्नेहाः शिरःपाश्वासशूलिनाम्||७६॥

kṛśarōtkārikāmāṣakulatthayavapāyasaiḥ| saṅkarasvēdavidhinā kanṭhaṁ pārśvamurah
 śirah||71|| svēdayēṭ patrabhaṅgēṇa śiraśca pariṣēcayēṭ| balāguḍūcīmadhukaśrtairvā
 vāribhiḥ sukhaiḥ||72|| bastamatsyaśrōbhīrvā nāḍīsvēdaṁ prayōjayēṭ| kanṭhē śirasi
 pārśvē ca payōbhīrvā savātikaiḥ||73|| audakānūpamāṁsāni salilāṁ pāñcamūlikam|
 sasnēhamāraṇālāṁ vā nāḍīsvēdē prayōjayēṭ||74|| jīvantyāḥ śatapuṣpāyā balāyā
 madhukasya ca| vacāyā vēśavārasya vidāryā mūlakasya ca||75||
 audakānūpamāṁsānāmupanāhāḥ susaṁskṛtāḥ| śasyantē sacatuḥsnēhāḥ
 śirahpārśvāṁsaśūlinām||76|| KRusharotkArikAmAShakulatthayavapAyasaiH|
 sa~gkarasvedavidhinA kaNThaM pArshvamuraH shiraH||71|| svedayet
 patrabha~ggeNa shirashca pariShecayet| balAguDUclmadhukashRutairvA vAribhiH
 sukhaiH||72|| bastamatsyashirobhīrvA nADIsvedaM prayojayet| kaNThe shirasi pArshve
 ca payobhīrvA savAtikaiH||73|| audakAnUpamAMsAni salilaM pA~jcamUlikam|
 sasnehamAranAlaM vA nADIsvede prayojayet||74|| jIvantyAH shatapuShpAyA balAyA

madhukasya ca| vacAyA veshavArasya vidAryA mUlakasya ca||75||
 audakAnUpamAMsAnAmupanAhAH susaMskRutAH| shasyante sacatuHsnehAH
 shiraHpArshvAMsashUlinAm||76||

The throat, the flanks, the chest and the head regions should be made to sweat by a commixed type of lump sudation prepared using *krushara* (a type of gruel), *utkarika* (hot poultice), ebony gram, horse gram, barley and milk pudding; or the head should be effused genially with warm decoction prepared using the leaves of heart leaved *sida*, *guduchi* and liquorice; or the steam kettle sudation prepared with the decoctions of the heads of goat and fish or with *vata* pacifying decoctions should be utilized for sweating the throat, head and sides of the chest. The flesh of aquatic and wet land animals, the decoction of pentaradix or sour *conjee* with unctuous articles may be utilized in steam kettle sudation. The poultices well prepared with cork swallow wort, heart of dil seeds, leaved *sida*, liquorice, saccharine flag cooked meat, white yam, radish, the flesh of aquatic and wet land creatures and commixed with all the four kinds of unctuous articles should be applied to persons suffering from pain applied to persons suffering from pain in the head, side of the chest and shoulder region.[71-76]

Alepana (local applications)

शतपुष्पा समधुकं कुष्ठं तगरचन्दने। आलेपनं स्यात् सघृतं शिरःपाश्वासशूलनुत्॥७७॥
 śatapuṣpā samadhukam kuṣṭham tagaracandanē| ālēpanam syāt saghṛtam
 śiraḥpāśvāṁsaśūlanut||77|| shatapuShpA samadhukaM kuShThaM tagaracandane|
 AlepanaM syAt saghRutaM shiraHpArshvAMsashUlanut||77||

Dil, liquorice, costus, Indian valerian and sandalwood with ghee make an effective curative for pain in the head, sides of the chest and shoulder regions. [77]

बला रास्ना तिला: सर्पिर्मधुकं नीलमुत्पलम्| पलङ्कषा देवदारु चन्दनं केशरं घृतम्॥७८॥ वीरा बला विदारी
 च कृष्णगन्धा पुनर्नवा| शतावरी पयस्या च कत्तुणं मधुकं घृतम्॥७९॥ चत्वार एते श्लोकार्थः प्रदेहाः
 परिकीर्तिताः| शस्ता: संसृष्टदोषाणां शिरःपाश्वासशूलिनाम्॥८०॥

balā rāsnā tilāḥ sarpirmadhukam nīlamutpalam| palaṅkaṣā dēvadāru candanam
 kēśaram gṛtam||78|| vīrā balā vidārī ca kr̄ṣṇagandhā punarnavā| śatāvarī payasyā ca
 kattṛṇam madhukam gṛtam||79|| catvāra ētē ślōkārdhaiḥ pradēhāḥ parikīrtitāḥ| śastāḥ
 saṁśr̄ṣṭadōṣāṇām śiraḥpāśvāṁsaśūlinām||80|| balā rAsnA tilAH sarpirmadhukaM
 nllamutpalam| pala~gkaShA devadAru candanaM kesharaM ghRutam||78|| vlrA balA
 vidArl ca kRuShNagandhA punarnavA| shatAvarI payasyA ca kattRuNaM madhukam
 ghRutam||79|| catvAra ete shlokArdhaiH pradehAH parikIrtitAH| shastAH
 saMsRuShTadoShANAM shiraHpArshvAMsashUlinAm||80||

1. Heart leaved *sida*, Indian groundsel, *til*, ghee, liquorice and blue water-lily;
2. gum , *guggulu*, *deodar*, sandalwood, fragrant poon and ghee;
3. climbing asparagus, heart leaved *sida*, white yam, drumstick and hog's weed;
4. climbing asparagus, milky yam, ginger grass, liquorice and ghee: these four groups of drugs, described one in each half verse for preparation of application

are propitious in conditions of pain in the head, side of the chest and the shoulder region arising from bi-dosha discordance. [78-80]

Beneficial procedures of purification

नावनं धूमपानानि स्नेहाश्चौतरभक्तिकाः| तैलान्यभ्यङ्गयोगीनि [१] बस्तिकर्म तथा परम्॥८१॥
शृङ्गालाबुजलौकोभिः प्रदुष्टं व्यधनेन वा| शिरःपार्श्वासूलेषु रुधिरं तस्य निर्हरेत्॥८२॥

nāvanarṁ dhūmapānāni snēhāscauṭṭarabhaktikāḥ| tailānyabhyāṅgayogīni [1] bastikarma
tathā param||81|| śrṅgālābujalaukōbhiḥ praduṣṭam vyadhanēna vā|
śirahpārśvāmsaśūlēṣu rudhiram tasya nirharēt||82|| nAvanaM dhUmapAnAni
snehAshcauṭṭarabhaktikAH| tailAnyabhyā~ggayogIni [1] bastikarma tathA param||81||
shRu~ggAlAbujalaukobhiH praduShTaM vyadhanena vA| shiraHpArshvAMsashUleShu
rudhiraM tasya nirharet||82||

Nasal errhines, medicated smokes, post prandial unctuous potions, inunctions with medicated oils, and enemata are very useful options to help ease pain. In conditions of pain in the head, flanks and shoulder region, the vitiated blood should be depleted by betokens of the horn, bottle gourd, application of leeches or venesection.[81-82]

External applications

प्रदेहः सघृतश्चेष्टः पद्मकोशीरचन्दनैः| दूर्वामधुकमञ्जिष्ठाकेशरैर्वा घृताप्लुतैः॥८३॥
प्रपौण्डरीकनिर्गुणीपद्मकेशरमुत्पलम् [२] | कशेरुकाः पयस्या च ससर्पिष्कं प्रलेपनम्॥८४॥ चन्दनाद्येन
तैलेन शतधौतेन सर्पिषा| अभ्यङ्गः, पयसा सेकः शस्तश्च मधुकाम्बुना॥८५॥ माहेन्द्रेण सुशीतेन
चन्दनादिशृतेन वा| परिषेकः प्रयोक्तव्य इति संशमनी क्रिया॥८६॥

pradēhaḥ sagṛ̥taścēṣṭaḥ padmakōśīracandanaiḥ| dūrvāmadhukamañjishthākēśarairvā
ghṛ̥tāplutaiḥ||83|| prapaṇḍarīkanirguṇḍīpadmakēśaramutpalam [2] | kaśerukāḥ payasyā
ca sasarpīṣkāṁ pralēpanam||84|| candanādyēna tailēna śatadhautēna sarpiṣāḥ
abhyāṅgah, payasā sēkah śastaśca madhukāmbunā||85|| māhēndrēṇa suśītēna
candanādiśīrtēna vā| pariṣekah prayōktavya iti saṁśamanī kriyā||86|| pradehaH
saghRutashceShTaH padmakoshIracandanaiH|
dUrvAmadhukama~jjishThAkesharairvA ghRutAplutaiH||83||
prapauNDarlkanirguNDIpadmakesharamutpalam [2] | kasherukAH payasyA ca
sasarpishkaM pralepanam||84|| candanAdyena tailena shatadhautena sarpiShA|
abhyā~ggaH, payasA sekah shastashca madhukAmbunA||85|| mAhindreNa sushtilena
candanAdishRutena vA| pariShekaH prayoktavya iti saMshamanI kriyA||86||

The application of Himalayan cherry, cucus grass and sandal wood with ghee is salutary; or the application of scitch grass, liquorice, Indian madder and fragrant poon soaked in ghee; or the application composed of tubers of white lotus chaste tree, red lotus, fragrant poon, blue water lily, rushnut and milky yam with ghee. Inunction with the compound sandal oil or ghee processed for hundred times and affusion with milk or liquorice water are recommended. Effusion with cold rainwater or the sandalwood group should be given. Thus the pacification treatment has been described.. [83-86]

Indications of *shodhana* (purification)

दोषाधिकानां वमनं शस्यते सविरेचनम्| स्नेहस्वेदोपपन्नानां स्सनेहं यन्न कर्शनम्||८७|| शोषी मुञ्चति
गात्राणि पुरीषसंसनादपि अबलापेक्षिणीं मात्रां किं पुनर्यो विरिच्यते||८८||

dōṣādhikānāṁ vamanāṁ śasyatē savirēcanam| snēhasvēdōpapannānāṁ sasnēhaṁ
yanna karśanam||८७|| śōṣī muñcati gātrāṇi purīṣasraṁsanādapi| abalāpēkṣiṇīṁ mātrāṁ
kiṁ punaryō viricyatē||८८|| doShAdhikAnAM vamanāM shasyate savirecanam|
snehasvedopapannAnAM sasnehaM yanna karshanam||८७|| shoShI mu~jcati gAtrANi
purlShasraMsanAdapi| abalApekShiNIM mAtrAM kiM punaryo viricyate||८८||

In cases of excessively aggravated *dosha*, mild therapeutic emesis and purgation therapies after proper *snehana* (oleation) and *swedana* (sudation) which do not cause emaciation can be administered. The emaciated man (consumptive) may suffer death even on loosening of stools. Then what can be said if a strong dose of purification is given in *rajayakshma* patient beyond his tolerance? [87-88]

Various formulations for *nasya* (nasal errhines)

योगान् संशुद्धकोष्ठानां कासे श्वासे स्वरक्षये| शिरःपाश्वासशूलेषु सिद्धानेतान्प्रयोजयेत्||८९||
बलाविदारिंगन्धादर्यैविदार्या [१] मधुकेन वा| सिद्धं सलवणं सर्पिन्स्यं स्यात्स्वर्यमुत्तमम्||९०||
प्रपौण्डरीकं मधुकं पिप्पली बृहती बला| क्षीरं [२] सर्पिश्च तत्सिद्धं स्वर्यं स्यान्नावनं परम्||९१||

yōgān saṁśuddhakōṣṭhānām kāsē śvāsē svarakṣayē| śiraḥpārśvāmsaśūlēsu
siddhānētānprayōjayēt||८९|| balāvidārigandhādyairvidāryā [१] madhukēna vā| siddham
salavaṇām sarpirnasyām syātsvaryamuttamam||९०|| prapaunḍarīkaṁ madhukaṁ
pippalī bṛhatī balā| kṣīram [२] sarpiśca tatsiddham svaryām syānnāvanām param||९१||
yogAn saMshuddhakoShThAnAM kAse shvAse svarakShaye|
shiraHpArshvAMsashUleShu siddhAnetAnprayojayet||८९||
balAvidArigandhAdyairvidAryA [१] madhukena vA| siddhaM salavaNaM sarpirnasyaM
syAtsvaryamuttamam||९०|| prapaunNDarlkaM madhukaM pippall bRuhatl balA| kShIraM
[२] sarpishca tatsiddhaM svaryaM syAnnAvanaM param||९१||

When the alimentary system is well purified, the following tested recipes should be utilized for the remedy of cough, dyspnea, loss of voice and pain in the head, sides of the chest and shoulder region:

- Ghee admixed with heart-leaved *sida* and tick-trefoil group of drugs or with white yam or with liquorice and salted, makes good nasal medication for the amelioration of voice.
- Ghee admixed with the tubers of white lotus, liquorice long pepper, Indian nightshade, heart leaved *sida* and milk is an excellent nasal medication for the amendment of the voice. [89-91]

Various unctuous formulations

शिरःपाश्वासशूलघ्नं कासश्वासनिर्बहणम्| प्रयुज्यमानं बहशो घृतं चौतरभक्तिकम्||९२|| दशमूलेन पयसा
सिद्धं मांसरस्सन च| बलागर्भं घृतं सद्यो रोगानेतान् प्रबाध्यते||९३|| भक्तस्योपरि मध्ये वा

यथाग्न्यभ्यवचारितम्| रास्नाघृतं वा सक्षीरं सक्षीरं वा बलाघृतम्||१४|| लेहान् कासापहान् स्वर्योज् श्वासहिक्कानिबहुणान्| शिरःपाश्वासशूलधनान् स्नेहांश्चातः परं शृणु||१५|| घृतं खर्जूरमृदवीकाशर्कराक्षोद्रसंयुतम् [3] | सैपिप्पलीकं वैस्वर्यकासश्वासज्वरापहम्||१६|| दशमूलशूतात् क्षीरात् सर्पिर्यदुदियान्वरम्| सैपिप्पलीकं सक्षोद्रं तत् परं स्वरबोधनम्||१७|| शिरःपाश्वासशूलधनं कासश्वासज्वरापहम्| पञ्चभिः पञ्चमूलैर्वा शूताद्यदुदियादघृतम्||१८|| पञ्चानां पञ्चमूलानां रसे क्षीरचतुर्गुणो| सिद्धं सर्पिर्जयत्येतदयक्षमणः सप्तकं बलम्||१९|| खर्जूरं पिप्पली द्राक्षा पथ्या शृङ्गी दुरालभा| त्रिफला पिप्पली मुस्तं शृङ्गाटगडशर्करा:||१००|| वीरा शटी पुष्कराख्यं सुरसः शर्करा गुडः| नागरं चित्रको लाजाः पिप्पल्यामलकं गुडः||१०१|| श्लोकार्थविहितानेतांलिलहयान्ना मधुसर्पिषा| कासश्वासापहान्स्वर्यान्पाश्वर्षशूलापहास्तथा||१०२||

śraḥpārśvāṁsaśūlaghnāṁ kāsaśvāsanibarhaṇam| prayujyamānam् bahuśō ghṛtam
cauttarabhaktikam||१२|| daśamūlēna payasā siddham māṁsarasaṇēna ca| balāgarbham
ghṛtam sadyō rōgānētān prabādhatē||१३|| bhaktasyōpari madhyē vā
yathāgnyabhyavacāritam| rāsnāghṛtam vā sakṣīram sakṣīram vā balāghṛtam||१४|| lēhān
kāsāpahān svaryāñ śvāsahikkānibarhaṇān| śraḥpārśvāṁsaśūlaghnān snēhāṁścātāḥ
param śṛṇu||१५|| ghṛtam kharjūramdrvīkāśarkarākṣaudrasaṁyutam [3] | sapippalīkaṁ
vaisvaryakāsaśvāsajvarāpaham||१६|| daśamūlaśṛtāt kṣīrāt sarpiryadudiyānnavam|
sapippalīkaṁ sakṣaudram tat param svarabōdhanam||१७|| śraḥpārśvāṁsaśūlaghnām
kāsaśvāsajvarāpaham| pañcabhiḥ pañcamūlairvā śṛtādyadudiyādghṛtam||१८||
pañcānām pañcamūlānām rasē kṣīracaturguṇē| siddham sarpirjayatyētadyakṣmaṇah
saptakam balam||१९|| kharjūram pippalī drākṣā pathyā śṛṅgī durālabhā| triphalā pippalī¹
mustam śṛṅgātaguḍaśarkarāḥ||१००|| vīrā śatī puṣkarākhyam surasaḥ śarkarā guḍaḥ|
nāgarām citrakō lājāḥ pippalyāmalakam guḍaḥ||१०१|| ślōkārdhairvihitānētāṁlihyānnā
madhusariṣāḥ| kāsaśvāsāpahānsvaryānpārśvaśūlapahāṁstathā||१०२||
shiraHpArshvAMsashUlaghnaM kAsashvAsanibarhaNam| prayujyamAnaM bahusho
ghRutaM cauttarabhaktikam||१२|| dashamUlena payasA siddhaM mAMsaraseNa ca|
balAgarbhaM ghRutaM sadyo rogAnetAn prabAdhate||१३|| bhaktasyopari madhye vA
yathAgnyabhyavacAritam| rAsnAghRutaM vA sakShIraM sakShIraM vA
balAghRutam||१४|| lehAn kAsApahAn svaryA~j shvAsahikkAnibarhaNAn|
shiraHpArshvAMsashUlaghnaN snehAMshcAtaH paraM shRuNu||१५|| ghRutaM
kharjUramRudvIkAsharkarAkShaudrasaMyutam [3] | sapippallkaM
vaisvaryakAsashvAsajvarApaham||१६|| dashamUlashRutAt kShIraT
sarpiryadudiyAnnavam| sapippallkaM sakShaudraM tat paraM svarabodhanam||१७||
shiraHpArshvAMsashUlaghnaM kAsashvAsajvarApaham| pa~jcabhiH pa~jcamUlairvA
shRutAdyadudiyAdghRutam||१८|| pa~jcAnAM pa~jcamUIAnAM rase kShIracaturguNe|
siddhaM sarpirjayatyetadyakShmaNaH saptakaM balam||१९|| kharjUraM pippall
drAkShA pathyA shRu~ggl durAlabhA| triphala pippall mustaM
shRu~ggATaguDasharkarAH||१००|| vlrA shaTI puShkarAkhyam surasaH sharkarA
guDaH| nAgaraM citrako lAjAH pippalyAmalakaM guDaH||१०१||
shlokArdhairvihitAnetAMlihyAnnA madhusariShA|
kAsashvAsApahAnsvaryAnpArshvashUIApahAMstathA||१०२||

- The frequent utilization of ghee as a post prandial potion remedies the pain in the head, sides of the chest and shoulder region in addition to curing cough and dyspnea.

- Ghee prepared with the decoction of *dashamula* (group of ten roots), milk, meat juice and the pulp of heart leaved *sida* is a quick remedy for all these disorders.
- The Indian groundsell ghee should be administered with milk or heart-leaved *sida* ghee or should be administered with milk (in the above complaints) either after or during the course of meals, in a dose considering the *agni* of the patient.
- Listen hereafter the description of the linctuses and unctuous preparations that are curative of cough, improving quality of voice, dyspnea, hiccup and pain in the head, flanks and shoulder region. Ghee prepared of dates and grapes and commixed with sugar, honey and long pepper is curative of hoarseness of voice, cough, dyspnea and fever.
- Fresh ghee prepared from the milk in which the *dashamula* (group of ten roots) has been decocted and commixed with long pepper and honey, is an excellent tonic for the voice, is curative of pain in the head, sides of the chest and shoulder region, and remedies cough, dyspnea and fever.
- Another effective remedy is fresh ghee prepared from the milk in which have been decocted the roots of all the five varieties of *panchamula*. The ghee, prepared in the decoction of all the five varieties of *panchamula* with four times its quantity of milk, subdues the rigor of the syndrome of seven of the key symptoms of *rajayakshma*.
- Dates, long pepper, grapes, chebulic myrobalans, galls, and cretan prickly clover ; (2) the three myrobalans , long pepper, nut-grass, Indian water-chestnut, gur and sugar; (3) climbing asparagus, zedoary orris root, holy basil, sugar and *gur*, (4) dry ginger, white-flowered leadwort roasted paddy, long pepper, emblic myrobalan and *gur*. of any of these groups of drugs mentioned in each of the hemistichs, a lincture may be made and taken with honey and ghee. They are curative of cough, dyspnea and pain in flanks, and as voice-tonics.[92-102]

Sitopaladi formulation

सितोपलां तुगाक्षीरीं पिप्पलीं बहुलां त्वचम्| अन्त्यादूर्ध्वं दविगुणितं लेहयेन्मधुसर्पिषा||१०३|| चूर्णितं
प्राशयेद्वा तच्छ्वासकासकफातुरम् [१] | सुप्तजिह्वारोचकिनमल्पाग्निं पाश्वर्शूलिनम्||१०४||

sitōpalāṁ tugākṣīrīṁ pippalīṁ bahulāṁ tvacam| antyādūrdhvaram dviguṇitam
lēhayēnmadhusarpiṣā||103|| cūrnītāṁ prāśayēdvā tacchvāsakāsakaphātūram [1] |
suptajihvārōcakinamalpāgnīm pārśvaśūlinam||104|| sitopalAM tugAkShIrI M pippalIM
bahulAM tvacam| antyAdUrdhvam dviguNitaM lehayanmadhusarpiShA||103|| cUrNitaM
prAshayedvA tacchvAsakAsakaphAturam [1] | suptajihvArocakinamalpAgniM
pArshvashUlinam||104||

Sugar candy, bamboo manna, long pepper, cardamom and cinnamon - each taken in double the quantity of the preceding one (in the order mentioned here) should be ground into a powder and admixed with honey and ghee, and administered as a lincture; or the powder may be taken by itself. This remedies dyspnea, cough and excess of *kapha*. It can be given to the patients suffering from anesthesia of tongue, anorexia, poor digestive fire and pleurodynia.[103-104]

Vasa ghee and shatavari ghee

हस्तपादाङ्गदाहेषु ज्वरे रक्ते तथोर्धवर्गे| वासाघृतं शतावर्या सिद्धं वा परमं हितम्||१०५||

hastapādāṅgadāhēṣu jvarē raktē tathōrdhvagē| vāsāghṛtam̄ śatāvaryā siddham̄ vā paramam̄ hitam||105|| hastapAdA~ggadAheShu jvare rakte tathordhvage| vAsAghRutaM shatAvaryA siddhaM vA paramaM hitam||105||

In cases of burning sensations in the hands, feet and limbs, fever and hemorrhage from the upper orifices of the body, *vasa ghee* or *shatavari ghee* proves very beneficial.[105]

Duralabhadhi ghee

दुरालभां श्वदंष्ट्रां च चतसः: पर्णीनीर्बलाम् भागान्पलोन्मितान् कृत्वा पलं पर्षटकस्य च||१०६||
पचेददशगुणो तोये दशभागावशेषिते| रसे सुपूते द्रव्याणामेषां कल्कान् समावपेत्||१०७|| शत्याः
पुष्करमूलस्य पिप्पलीत्रायमाणयोः| तामलक्याः किरातानां तिक्तस्य कटजस्य च||१०८|| फलानां
सारिवायाश्च सपिष्टान् कर्षसम्मितान् ततस्तेन घृतप्रस्थं क्षीरदविगणितं पचेत्||१०९|| ज्वरं दाहं अमं
कासमंसपाश्वेशिरोरुजम् तृष्णां छर्दिमतीसारमेतत् सर्पिर्व्यपोहति||११०||

durālabhāṁ śvadamśtrāṁ ca catasraḥ parnīrbalāṁ bhāgānpalōnmitān kṛtvā palam̄
parpaṭakasya ca||106|| pacēddaśaguṇē tōyē daśabhāgāvaśēṣitē rasē supūtē
dravyāṇāmēśāṁ kalkān samāvapēt||107|| śatyāḥ puṣkaramūlasya
pippalītrāyamāṇayōḥ| tāmalakyāḥ kirātānāṁ tiktasya kuṭajasya ca||108|| phalānāṁ
sāriवायास्चa supiṣṭān karṣasammitān| tatastēna ghṛtaprasthām kṣīradvigunītām
pacēt||109|| jvaraṁ dāham bhramām kāsamāṁsapārśvaśirōrujam| ṭṛṣṇāṁ
chardimatīsāramētat sarpirvyapōhati||110|| durAlabhAM shvadaMShTrAM ca catasraH
parNinIrbalAm| bhAgAnpalonmitAn kRutvA palaM parpaTakasya ca||106||
paceddashaguNe toye dashabhAgAvasheShite| rase supUte dravyANAmeshAM
kalkAn samAvapet||107|| shaTyAH puShkaramUlasya pippalltrAyamANayoH|
tAmalakyAH kirAtAnAM tiktasya kuTajasya ca||108|| phalAnAM sArivAyAshca
supiShTAn karShasammitAn| tatastena ghRutaprasthāM kShIradvigunitaM pacet||109||
jvaraM dAhaM bhramaM kAsamaMsapArshvashirujam| tRuShNAM
chardimatlsArametat sarpirvyapohati||110||

Decoct 48 gram each of cretan prickly clover, diminutive caltrops, and the tetrad of the drugs called *parnini*, *sida* and trailing *rungia*, in ten times the quantity of water. When it is reduced to one tenth of its quantity, the solution should be filtered and a medicated ghee should be prepared by mixing these into a solution along with the paste of one *tola* each of zedoary, orris root, long pepper, *zalil*, feather foil, chiretta, *kurchi* seeds, and Indian sarsaparilla and 64 *tolas* of ghee and double this quantity of milk. This ghee is effective in healing fever, burning sensations, giddiness, cough, headache, pain in flanks and shoulder region, thirst, regurgitating and diarrhea. [106-110]

Jivantyadi ghee

जीवन्तीं मधुकं द्राक्षां फलानि कुटजस्य च| शटीं पुष्करमूलं च व्याघ्रीं गोक्षुरकं बलाम्||१११|| नीलोत्पलं तामलकीं त्रायमाणां दुरालभाम्| पिप्पलीं च समं पिष्ट्वा धृतं वैदयो विपाचयेत्||११२||
एतद्व्याधिसमूहस्य रौगेशस्य समुत्थितम् रूपमेकादशविधं सर्पिरग्यं व्यपोहति||११३||

jīvantīṁ madhukam̄ drākṣāṁ phalāni kuṭajasya ca| śatīṁ puṣkaramūlāṁ ca vyāghrīṁ
gōkṣurakam̄ balām||111|| nīlotpalam̄ tāmalakīṁ trāyamāṇāṁ durālabhām| pippalīṁ ca
samāṁ piṣṭvā ghṛtam̄ vaidyō vipācayēt||112|| ētadvyādhisamūhasya rōgēśasya
samutthitam| rūpamēkādaśavidham̄ sarpiragryam̄ vyapōhati||113|| jīvantīM madhukaM
drAkShAM phalAni kuTajasya ca| shaTIM puShkaramUlaM ca vyAghriM gokShurakaM
balAm||111|| nllotpalaM tAmalakIM trAyamANAM durAlabhAm| pippalIM ca samaM
piShTvA ghRutaM vaidyo vipAcayet||112|| etadvyAdhisamUhasya rogeshasya
samutthitam| rUpamekAdashavidhaM sarpiragryAM vyapohati||113||

The physician may prepare a medicated ghee by integrating pastes of equal quantities of cork swallow-wort, liquorice, grape, *kurchi* seeds, zedoary, orris roots, Indian night-shade, diminutive caltrops, heart leaved *sida*, blue water-lily, feature foil, zalil, cretan prickly clover and long pepper. This excellent medicated ghee remedies the eleven symptoms of *rajayakshma*.[111-113]

Baladi medicated milk

बलां स्थिरां पश्निपर्णीं बृहतीं सनिदिग्धिकाम्| साधयित्वा रसे तस्मिन्पयो गव्यं सनागरम्||११४||
द्राक्षाखर्जूरसर्पिभिः पिप्पल्या च शृतं सहा सक्षोद्रं ज्वरकासधनं स्वर्यं चैतत् प्रयोजयेत्||११५|| आजस्य
पयसश्चैव प्रयोगो जाङ्गला रसाः| यूषार्थं चणका मुद्गा मकुष्ठाश्चोपकल्पिताः||११६||

balām̄ sthirām̄ prśniparṇīm̄ bṛhatīm̄ sanidigdhikām̄| sādhayitvā rasē tasminpayō gavyam̄
sanāgaram||114|| drākṣākhārjūrasarpirbhīḥ pippalyā ca śṛtam̄ saha| sakṣaudram̄
jvarakāsaghnaṁ svaryam̄ caitat prayōjayēt||115|| ājasya payasaścaivaṁ prayōgō
jāngalā rasāḥ| yūṣārthē caṇakā mudgā makuṣṭhāścōpakalpitāḥ||116|| balAM sthirAM
pRushniparNIM bRuhatIM sanidigdhikAm| sAdhayitvA rase tasminpayo gavyaM
sanAgaram||114|| drAkShAkharjUrasarpirbhIH pippalyA ca shRutaM saha|
sakShaudraM jvarakAsaghnaM svaryaM caitat prayojayet||115|| Ajasya
payasashcaivaM prayogo ja~ggalA rasAH| yUShArthe caNakA mudgA
makuShThAshcopakalpitAH||116||

Decoct in water the heart-leaved *sida* tick-trefoil, painted leaved uraria and yellow berried night- shade and prepare a medicated ghee by integrating to this decoction cow's milk, the pulp of dry ginger, dates, ghee and long pepper. This milk, taken with honey, remedies fever and cough and amends the voice.

Similarly, goat's milk along with the meat-juice of *jungala* animals and chick pea, green gram and math gram, prepared in the form of soup, may additionally be utilized as wholesome diet.[114-116]

Treatment of burning sensation

ज्वराणां शमनीयो यः पूर्वमुक्तः क्रियाविधिः| यक्षिमणां ज्वरदाहेषु सर्पिष्कः प्रशस्यते॥११७॥

jvarāṇāṁ śamanīyō yaḥ pūrvamuktah kriyāvidhiḥ| yakṣmināṁ jvaradāhēṣu sasarpīṣkah
praśasyatē॥११७॥ jvarANAM shamanlyo yaH pUrvamuktaH kriyAvidhiH| yakShmiNAM
jvaradAheShu sasarpishkaH prashasyate॥११७॥

Medicinal pacification measures described earlier (in Jwara Chikitsa) are employed with ghee for the treatment of fever and burning sensations in the cases of patients suffering from *rajayakshma*. [117]

Treatment of productive cough/excessive expectoration and vomiting

कफप्रसेके बलवाऽ श्लैष्मिकश्छर्द्येन्नरः| पयसा फलयुक्तेन माधुकेन [१] रसेन वा॥११८॥ सर्पिष्मत्या
यवाग्वा वा वमनीयोपसिद्ध्याया| वान्तोऽन्नकाले लघ्वन्नमाददीत् सदीपनम्॥११९॥

यवगोधममाध्वीकसिध्वरिष्टसुरासवान्| जाङ्गलानि च शूल्यानि सेवमानः कफं जयेत्॥१२०॥
श्लैष्मणोऽतिप्रसेकेन वायः श्लैष्माणमस्यति| कफप्रसेकं ते विद्वान् स्निग्धोष्णोनैव निर्जयेत्॥१२१॥
क्रिया कफप्रसेके या वम्यां सैव प्रशस्यते| हृद्यानि चान्नपानानि वातघ्नानि लघूनि च॥१२२॥

kaphaprasēkē balavāñ ślaiṣmikaśchardayēnnarah| payasā phalayuktēna mādhukēna
[1] rasēna vā॥११८॥ sarpiṣmatyā yavāgvā vā vamanīyōpasiddhayā| vāntō'nnakālē
laghvannamādadīta sadīpanam॥११९॥ yavagōdhūmamādhvīkasidhvariṣṭasurāsavān|
jāṅgalāni ca śūlyāni sēvamānah kapham jayēt॥१२०॥ ślēṣmaṇō'tiprasēkēna vāyuḥ
ślēṣmaṇamasyati| kaphaprasēkam tam vidvān snigdhōṣṇēnaiva nirjayēt॥१२१॥ kriyā
kaphaprasēkē yā vamyāṁ saiva praśasyatē| hṛdyāni cānnapānāni vātaghnāni laghūni
ca॥१२२॥ kaphaprāseke balavāj ślaiṣmikashchardayennarah| payasā phalayuktēna
mAdhukena [1] rasena vA॥११८॥ sarpiṣmatyā yavAgvA vA vamanīyōpasiddhayA|
vAnto~annakAle laghvannamAdadīta sadīpanam॥११९॥
yavagodhUmamAdhvīkasidhvariṣṭasurāsavān| jA~ggalAni ca shUlyAni sevamAnaH
kapham jayet॥१२०॥ shleShmaNo~atiprāsekena vAyuH shleShmANamasyati|
kaphaprāsekaM taM vidvAn snigdhoShNenaiva nirjayet॥१२१॥ kriyA kaphaprāseke yA
vamyAM saiva prashasyate| hRudyAni cAnnappAnAni vAtaghnAni laghUni ca॥१२२॥

In cases of excessive expectoration of phlegm in a strong patient and kapha dominant condition, he should be treated with emesis by a draught of milk mixed with emetic nut or with liquorice decoction mixed with emetic nut, or gruel prepared with emetic drugs and mixed with ghee. And after proper emesis, light diet along with digestive stimulants should be given in meals.

The person who is taking the diet consisting of barley and wheat, honey wine, *sidhu* wine, medicated wine and the spit roasted meat of animals of arid habitat will subdue his *kapha dosha*.

When there is excessive formation of phlegm, the *vata* expels this phlegm out of the body. This type of excessive phlegm expectoration should be treated with unctuous and hot medications.

This line of treatment for excess expectoration is also recommended for vomiting. A diet consisting of food and beverages that are *hridya* (liked by mind), alleviate *vata* and light to digest are advised. [118-122]

Treatment of diarrhea

प्रायेणोपहताग्नित्वात् सपिच्छमतिसार्यते| प्राप्नोति चास्यवैरस्यं न चान्नमभिनन्दति||१२३||
 तस्याग्निन्दीपनान् योगानतीसारनिर्बहृणान् वक्त्रशुदधिकरान् कुर्यादरुचिप्रतिबाधकान्||१२४||
 सनागरानिन्द्रयवान् पाययेतण्डुलाम्बुना| सिद्धां यवागं जीर्णं च चाङ्गेरीतक्रदाडिमैः||१२५|| पाठा बिल्वं
 यमानी च पातव्यं तक्रसंयुतम् दुरालभा शृङ्गवेरं पाठा च सुरया सह||१२६|| जम्ब्वाममर्द्यं बिल्वं च
 सकपित्थं सनागरम् पेयामण्डेन पातव्यमतीसारनिवृत्तये||१२७|| एतानेव च योगास्त्रीन् पाठादीन् कारयेत्
 खडान् ससूप्यधान्यान्सन्हेनान् [२] साम्लान्सङ्गहणान् परम्||१२८|| वेतसार्जुनजम्बूनां
 मृणालीकृष्णगन्धयोः| श्रीपर्ण्या मदयन्त्याश्च यूथिकायाश्च पल्लवान्||१२९|| मातुलङ्गस्य धातक्या
 दाडिमस्य च कारयेत् स्नेहाम्ललवणोपेतान् खडान साङ्गाहिकान् परम्||१३०|| चाङ्गेरीश्चुक्रिकायाश्च
 दुग्धिकायाश्च कारयेत् खडान्दधिसरोपेतान् ससपिष्कान्सदाडिमान्||१३१|| मासानां लघुपाकानां रसाः
 साङ्गाहिकैर्यताः| व्यञ्जनार्थं प्रशस्यन्ते भोज्यार्थं रक्तशालयः||१३२|| स्थिरादिपञ्चमलेन पाने शस्तं शृतं
 जलम् तक्रं सुरा सचुक्रिका दाडिमस्याथवा रसः||१३३|| इत्युक्तं भिन्नशकृतां दीपनं ग्राहि भेषजम्||३४||

prāyēñōpahatāgnitvāt sapicchamatisāryatē| prāpnōti cāsyavairasyam na
 cānnamabhinandati||123|| tasyāgnidīpanān yōgānatīsāraniabarhañān| vaktraśuddhikarān
 kuryādarucipratibādhakān||124|| sanāgarānindrayavān pāyayēttāñdulāmbunā| siddhāṁ
 yavāgūm jīrñē ca cāṅgērītakradāḍimaiḥ||125|| pāṭhā bilvarām yamānī ca pātavyam
 takrasamīyutam| durālabhā śṝhgavēram pāṭhā ca surayā saha||126||
 jambvāmramadhyām bilvarām ca sakapitthām sanāgaram| pēyāmañḍēna
 pātavyamatīsāraniवृttayē||127|| ētānēva ca yōgāṁstrīn pāṭhādīn kārayēt khaḍān|
 sasūpyadhānyānsasnēhān sāmlānsaṅgrahañān param||128|| vētasārjunajambūnāṁ
 mṛñālīkṛṣṇagandhayōḥ| śrīparṇyā madayantyāśca yūthikāyāśca pallavān||129||
 mātuluṅgasya dhātakyā dāḍimasya ca kārayēt| snēhāmlalavañopētān khaḍān
 sāṅgrāhikān param||130|| cāṅgēryāścukrikāyāśca dugdhikāyāśca kārayēt|
 khaḍāndadhisarōpētān sasarpīskānsadāḍimān||131|| māṁsānāṁ laghupākānāṁ rasāḥ
 sāṅgrāhikairyutāḥ| vyañjanārthām praśasyantē bhōjyārthām raktaśālayāḥ||132||
 sthirādipañcamūlēna pānē śastām śītaṁ jalām takraṁ surā sacukrīkā dāḍimasyāthavā
 rasāḥ||133|| ityuktām bhinnaśakṛtām dīpanām grāhi bhēṣajam||134||
 prAyeNopahatAgnitvAt sapicchamatisAryate| prApnoti cAsyavairasyaM na
 cAnnamabhinandati||123|| tasyAgnidīpanAn yogAnatīsAranibarhaNAn|
 vaktrashuddhikarAn kuryAdarucipratibAdhakAn||124|| sanAgarAnindrayavAn
 pAyayettaNDulAmbunA| siddhAM yavAgUM jIrnE ca cA~ggerItakradADimaiH||125||
 pAThA bilvaM yamAnI ca pAtavyaM takrasaMyutam| durAlabhA shRu~ggaveraM
 pAThA ca surayA saha||126|| jambvAmramadhyāM bilvaM ca sakapitthaM sanAgaram|
 peyAmaNDena pAtavyamatīsAranivRuttaye||127|| etAneva ca yogAMstrIn pATHAdIn
 kArayet khaDAAn| sasUpyadhAnyAnsasnehAn [2] sAmlAnsa~ggrahaNAn param||128||
 vetasArjunajambUnAM mRuNAllkRuShNagandhayoH| shrIparNyA madayantyAshca
 yUthikAyAshca pallavAn||129|| mAtulu~ggasya dhAtakyA dADimasya ca kArayet|
 snehAmlalavaNopetAn khaDAAn sA~ggrAhikAn param||130||
 cA~ggeryAshcukrikAyAshca dugdhikAyAshca kArayet| khaDAndadhisaropetAn

sasarpiShkAnsadADimAn||131|| mAMsAnAM laghupAkAnAM rasAH
 sA~ggrAhikairyutAH| vya~jjanArthaM prashasyante bhojyArthaM raktashAlayaH||132||
 sthirAdipa~jcamUlena pAne shastaM shRutaM jalam| takraM surA sacukrlkA
 dADimasyAthavA rasaH||133|| ityuktaM bhinnashakRutAM dlpanaM grAhi
 bheShajam|134|

- Due to the impairment of *agni*, diarrhea accompanied with mucus occurs in patients of *rajayakshma*. Further distaste in the mouth (*asyavairasya*) and aversion towards food occurs. The following recipes to stimulate digestion, treat diarrhea, cleanse up mouth to enhance taste and counteract anorexia are described. *Indrayava* (*Wrightia tinctoria*) with *nagara* (*Zingiber officinale*) admixed with *tandulambu* (rice water), and *yavagu* (thick gruel) cooked along with *changeri* (*Oxalis corniculata*), butter-milk, and pomegranate (*Punica granatum*)
- Potion made up of *patha* (*Cyclea peltata*), *bilva* (*Aegle Marmelos*), and *yavani* (*Carum copticum*) mixed with buttermilk.
- *Duralabha* (*Fagonia cretica*), *sringavera* (*Zingiber officinale*), and *patha* (*Cyclea peltata*) taken along with *sura* (wine).
- Pulp of the seeds of *jambu* (*Syzygium cumini*) and *amra* (*Mangifera Indica*), *bilva* (*Aegle marmelos*), *kapitha* (*limonia acidissima*) and *nagara* (*Zingiber officinale*) mixed with *manda* of *peya* (i.e. cream of a thin gruel)
- The last two recipes could also be prepared in the form of *khada* (a type of sour drink) by adding fats, sour ingredients, and pulses. These are also very effective recipes to cure diarrhea. Some of the recipes for preparing *khada* include:
 - Mixing the leaves of *vetasa* (*Garcinia pedunculata*), *arjuna* (*Terminalia arjuna*), *jambu* (*Syzygium cumini*), *mrinali*, *krishnagandha*, *sriparni* (*Gmelina arborea*), *madayanti* (*Lawsonia inermis*), and *yuthika* (*Jasminum auriculatum*) mixed with *matulunga* (*Citrus medica*), *dhataki* (*Woodfordia fruticosa*), *dadima* (*Punica granatum*), fats, sour ingredients, and salt.
 - *Changeri* (*Oxalis corniculata*), *chukrika* (*Rumex vesicarius*), and *dugdhika* (*Euphorbia thymifolia*) mixed with cream of curd, ghee, and *dadima* (*Punica granatum*)
 - Soups of different types of meat (light to digest), mixed with astringent ingredients, consumed with *shali* rice - are effective remedies for counteracting diarrhea.
 - Water boiled with *laghupanchamula* (*shalaparni*, *prishnaparni* (*Uraria picta*)), *brihati* (*Solanum indicum*), *kantakari* (*Solanum xanthocarpum*) and *goksur* (*Tribulus terrestris*), butter, *sura*, *chukrika* (*Rumex vesicarius*) and the juice of *dadima* (*Punica granatum*) makes for an excellent digestive stimulant and *grahi* (constipative) for patients of tuberculosis suffering from bouts of diarrhea [123-134]

Formulations for treatment of anorexia

परं मुखस्य वैरस्यनाशनं रोचनं शृणु [3] ||१३४|| दक्षौ कालौ दन्तपवनं भक्षयेन्मुखधावनम्| तद्वत् प्रक्षालयेदास्यं धारयेत् कवलग्रहान्||१३५|| पिबेदधूमं ततो मृष्टमदयाटदीपनपाचनम्| भेषजं पानमन्नं च हितमिष्टोपकल्पितम्||१३६|| त्वङ्मस्तमेला धान्यानि मस्तमामलकं त्वचम्| दार्वीत्वचो यवानी च तेजोहवा पिप्पली तथा||१३७|| यवानौ तिन्तिडीकं च पञ्चैते मुखधावनाः| श्लोकपादेष्वभिहिता रोचना मुखशोधनाः||१३८|| गुटिकां धारयेदास्ये चर्णैर्वा शोधयेन्मुखम्| एषामालोडितानां वा धारयेत् कवलग्रहान्||१३९|| सुरामाध्वीकसीधूनां तैलस्य मधुसर्पिषोः| कवलान् धारयेदिष्टान् क्षीरस्येक्षुरसस्य च||१४०||

param mukhasya vairasyanāśanam rōcanam śṛṇu [3] ||134|| dvau kālau dantapavanaṁ bhakṣayēnmukhadhāvanam| tadvat prakṣālayēdāsyam dhārayēt kavalagrahān||135|| pibēddhūmarṁ tatō mr̄ṣṭamadyāddīpanapācanam| bhēṣajarṁ pānamannarṁ ca hitamiṣṭōpakalpitam||136|| tvañmustamēlā dhānyāni mustamāmalakaṁ tvacam| dārvītvacō yavānī ca tējōhvā pippalī tathā||137|| yavānī tintidīkam ca pañcaitē mukhadhāvanāḥ| ślōkapādēṣvabhihitā rōcanā mukhaśōdhanāḥ||138|| guṭikāṁ dhārayēdāsyē cūrnairvā śōdhayēnmukham| ēśāmālōqdītānāṁ vā dhārayēt kavalagrahān||139|| surāmādhvīkasīdhūnāṁ tailasya madhusarpiṣōḥ| kavalān dhārayēdiṣṭān kṣīrasyēkṣurasasya ca||140|| paraM mukhasya vairasyanAshanaM rocanāM shRuNu [3] ||134|| dvau kAlau dantapavanaM bhakShayenmukhadhAvanam| tadvat prakShAlayedAsyaM dhArayet kavalagrahAn||135|| pibeddhUmaM tato mRuShTamadyAddIpanapAcanam| bheShajaM pAnamannaM ca hitamiShTopakalpitam||136|| tva~gmustamelA dhAnyAni mustamAmalakaM tvacam| dArvItvaco yavAnI ca tejohvA pippall tathA||137|| yavAnI tintidIkam ca pa~jcaite mukhadhAvanAH| shlokapAdeShvabhihitA rocanA mukhashodhanAH||138|| guTikAM dhArayedAsye cUrNairvA shodhayenmukham| eShAmAloDitAnAM vA dhArayet kavalagrahAn||139|| surAmAdhvIkasIdhUnAM tailasya madhusarpiShoH| kavalAn dhArayedisHTAn kShIrasyekShurasasya ca||140||

Now, hear this description of remedies for the removal of distaste in the mouth and for enhancing appetite. These are as follows:

- Tooth-twigs should be used twice a day for brushing one's teeth and then use *mukhadhavana* (drugs chewed for alleviating vitiated *doshas* in the mouth).
- Wash the mouth and use *kavala graha* (keeping mouthful of medicinal preparations in a thin paste form in the oral cavity), and
- Smoke medicated cigars and, thereafter, take digestive stimulant drugs, and wholesome food, and drinks. The recipe for *mukhadhavana* are:
 - (1)Cinnamon, nut-grass, cardamom and coriander; (2) nut- grass, emblic myrobalan and cinnamon; (3) Indian berberry and cinnamon; (4) Indian tooth-ache tree and long pepper; (5) bishop's weed and tamarind- these five groups of mouthwashes mentioned one in each quarter verse, act as taste stimulant and relish-givers and mouth- cleansers.

- Pills prepared of these may be kept in the mouth; or the mouth may be cleansed with these powders; or a mouthful of water commixed with these powders may be kept for a time in the mouth.
- Mouthfuls of *sura*, *madhvika* or *sidhu* wines, oil, honey ghee, milk or sugar-cane juice may be utilized as found beneficial. [134-140]

Yavani shadava formulation

यवार्नो तिन्तिडीकं च नागरं साम्लवेतसम्| दाडिमं बदरं चाम्लं कार्षिकं चोपकल्पयेत्||१४१||
धान्यसौवर्चलाजाजीवराङ्गं चार्धकार्षिकम्| पिप्पलीनां शतं चैकं दवे शते मरिचस्य च||१४२|| शर्करायाश्च
चत्वारि पलान्येकत्र चूर्णयेत्| जिहवाविशोधनं हृदयं तच्चूर्णं भक्तरोचनम्||१४३|| हृत्प्लीहपाश्वर्शूलघ्नं
विबन्धानाहनाशनम्| कासश्वासहरं ग्राहि ग्रहण्यर्थोविकारनुत्||१४४|| इति यवानीषाडवम्

yavānīṁ tintidīkam ca nāgaram sāmlavētasam| dādimam̄ badaram̄ cāmlam̄ kārsikam̄
cōpakalpayēt||141|| dhānyasauvarcalājājīvarāṅgam̄ cārdhakārṣikam̄ pippalīnām̄ śatam̄
caikam̄ dvē śatē maricasya ca||142|| śarkarāyāśca catvāri palānyēkatra cūrṇayēt|
jihvāviśōdhanam̄ hr̄dyam̄ taccūrṇam̄ bhaktarōcanam||143|| hr̄tplīhapārśvaśūlaghnam̄
vibandhānāhanāśanam| kāsaśvāsaharam̄ grāhi grahaṇyarśōvikāranut||144|| iti
yavānīśāḍavam yavAnIM tintiDIkAM ca nAgaraM sAmlavetasam| dADimAM badaraM
cAmlaM kArShikAM copakalpayet||141|| dhAnyasauvarcalAjAjIvarA~ggAM
cArdhakArShikAM pippallInAM shataM caikaM dve shate maricasya ca||142||
sharkarAyAshca catvAri palAnyekatra cUrNayet| jihvAvishodhanaM hRudyaM
taccUrNaM bhaktarocanam||143|| hRutplIhapArshvashUlaghnaM
vibandhAnAhanAshanam| kAsashvAsaharaM grAhi grahaNyashovikAranut||144|| iti
yavAnIShADavam

Bishop's weed, tamarind, dry ginger, country sorrel, pomegranate, sour jujube - take one *tola* each of these and half *tolas* of coriander, rock-salt, cumin seeds, cinnamon, one hundred pieces of long pepper, 200 ebony pepper grains and 16 *tolas* of sugar: all these should be powdered and commixed together. This powder is tongue-detergent, cordial, and refreshing, curative of pain in the stomach, splenic region and flanks, and remedies constipation, tympanitis, cough and dyspnea. It is an astringent and is curative of assimilative disorders and hemorrhoids. Thus has been described the *shadava* preparation of bishop's weed. [141-144]

Talisadi formulation

तालीशपत्रं मरिचं नागरं पिप्पली शुभा| यथोत्तरं भागवृद्ध्या त्वगेले चार्धभागिके||१४५|| पिप्पल्यष्टगुणा
चात्र प्रदेया सितशर्करा| कासश्वासारुचिहरं तच्चूर्णं दीपनं परम्||१४६||
हृत्पाण्डुग्रहणीदोषशोषप्लीहज्वरापहम्| वम्यतीसारशूलघ्नं मुढवातानुलोमनम्||१४७|| कल्पयेदगटिकां
चैतच्चूर्णं पक्त्वा सितोपलाम्| गुटिका हयग्निसंयोगाच्चूर्णाल्लघुतराः स्मृताः||१४८|| इति तालीशादयं चूर्णं
गुटिकाश्च

tālīśapatram̄ maricam̄ nāgaram̄ pippalī śubhā| yathōttaram̄ bhāgavṛddhyā tvagēlē¹
cārdhabhāgikē||145|| pippalyaṣṭaguṇā cātra pradēyā sitaśarkarā| kāsaśvāsāruciharam̄
taccūrṇam̄ dīpanam̄ param||146|| hr̄tpāṇḍugrahaṇīdōṣāśōṣaplīhajvarāpaham̄
vamyatīsāraśūlaghnam̄ mūḍhavātānulōmanam||147|| kalpayēdguṭikām̄ caitaccūrṇam̄

paktvā sitōpalām| guṭikā hyagnisam̄yōgāccūrṇāllaghutarāḥ smṛtāḥ||148|| iti tālīśādyam̄ cūrṇam̄ guṭikāśca tAllshapatraM maricaM nAgaraM pippall shubhA] yathottaraM bhAgavRuddhyA tvagele cArdhabhAgike||145|| pippalyaShTaguNA cAtra pradeyA sitasharkarA] kAsashvAsArucihaM taccUrNaM dlpanaM param||146|| hRutpANDugrahaNIdoShashoShapllhajvarApaham] vamyatlsArashUlaghnaM mUDhavAtAnulomanam||147|| kalpayedguTikAM caitaccUrNaM paktvA sitopalAm̄ guTikA hyagnisaMyogAccUrNAllaghutarAH smRutAH||148|| iti tAllshAdyaM cUrNaM guTikAshca

Take Himalayan silver fir, ebony pepper, dry ginger and long pepper and in proportions of 1,2,3 and 4 chunks/pieces respectively; cinnamon and cardamom in the proportion of ½ part each and white sugar eight times the quantity of long pepper (32 components). This powder is curative of cough, dyspnea and anorexia and is an excellent digestive stimulant, alleviative of stomach disorders anemia, assimilation disorders, *rajayakshma*, splenic disorders, fever, regurgitating, diarrhea, colic and alleviate aggravated *vata*. Pills can also be prepared from this formulation after processing it with sugar water on fire. The pills are light to digest because of they are processed on fire. [145-148]

Importance of meat in emaciation

शृज्यतां क्षीणमांसानां कल्पितानि विधानवित्। दद्यान्मांसादमांसानि बृहणानि विशेषतः॥१४९॥ शोषिणे बौर्हिणं दद्यादबैर्हिशब्देन चापरान्। गृध्रानुलूकांश्चाषांश्च विधिवत् सूपकल्पितान्॥१५०॥ काकांस्तितिरिशब्देन वर्मिशब्देन चोरगान्। भृष्टान् मत्स्यान्त्रशब्देन दद्याद् गण्डपदानपि॥१५१॥ लोपाकान् स्थूलनकलान् बिडालांश्चोपकल्पितान्। शृगालशावांश्च भिषक् शशशब्देन दापयेत्॥१५२॥ सिंहानृक्षांस्तरक्षूंश्च व्याघ्रानेवंविधांस्तथा। मांसादान् मृगशब्देन दद्यान्मांसाभिवृद्धये॥१५३॥ गजखड्गितुरड्गाणां वेशवारीकृतं भिषक्। दद्यान्महिषशब्देन मांसं मांसाभिवृद्धये॥१५४॥ मांसेनोपचिताङ्गानां मांसं मांसकरं परम्। तीक्ष्णोष्णलाघवाच्छस्तं विशेषान्मृगपक्षिणाम्॥१५५॥

śuṣyatāṁ kṣīṇamāṁsānāṁ kalpitāni vidhānavit| dadyānmāṁsādamāṁsāni bṛṁhaṇāni viśēṣataḥ||149|| śōṣinē bārhiṇāṁ dadyādbarhiśabdēna cāparān| grdhṛānulükāṁścāśāṁśca vidhivat sūpakalpitān||150|| kākāṁstittiriśabdēna varmiśabdēna cōragān| bhr̄ṣṭān matsyāntraśabdēna dadyādgandūpadānapi||151|| lōpākān sthūlanakulān biḍālāṁścōpakalpitān| śrgālaśāvāṁśca bhiṣak śāśaśabdēna dāpayēt||152|| simhānṛksāṁstarakṣūṁśca vyāghrānēvarṁvidhāṁstathā| māṁsādān mṛgaśabdēna dadyānmāṁsābhivṛddhayē||153|| gajakhaḍgituraṅgānāṁ vēśavārīkṛtaṁ bhiṣak| dadyānmahiṣāabdēna māṁsām māṁsābhivṛddhayē||154|| māṁsēnōpacitāṅgānāṁ māṁsām māṁsakaram param| tīkṣṇōṣṇālāghavācchastam viśēśān mṛgapakṣīṇām||155|| shuShyatAM kShINamAMsAnAM kalpitAni vidhAnavit| dadyAnmAMsAdamAMsAni bRuMhaNAni visheShataH||149|| shoShiNe bArhiNaM dadyAdbarhishabdena cAparAn| gRudhrAnulUkAMshcAShAMshca vidhivat sUpakalpitAn||150|| kAkAMstittirishabdena varmishabdena coragAn| bhRuShTAn matsyAntrashabdena dadyAdgaNDUpadAnapi||151|| lopAkAn sthUlanakulAn biDAIAMshcopakalpitAn| shRugAlashAvAMshca bhiShak shashashabdena dApayet||152|| siMhAnRukShAMstarakShUMshca vyAghrAnevaMvidhAMstathA| mAMsAdAn mRugashabdena dadyAnmAMsAbhivRuddhaye||153|| gajakhaDgitura~ggANAM veshavArlkRutaM bhiShak| dadyAnmahiShashabdena

mAMsaM mAMsAbhivRuddhaye||154|| mAMsenopacitA~ggAnAM mAMsaM
mAMsakaraM param| tlkShNoShNalAghavAcchastaM
visheShAnmRugapakShiNAm||155||

The patient who are emaciated and depleted with *mamsa dhatus* (flesh), should be prescribed with dishes of the meats of carnivorous animals intended for special nourishment therapy.

The flesh of peacock should be given to the patient, and that of vultures, owls and blue jays, well prepared in the prescribed manner, should be given in the denomination of peacock's flesh.

In the denomination of partridge, give the flesh of crows; in the denomination of the snake fish, give the flesh of snakes, and in the designation of the intestines of fish, give fried earth-worms.

The physician may give dressed meats of the fox, astronomically immense mongoose, feline and jackal-cubs in the designation of rabbit-flesh.

The flesh of lion, bear, hyena, tiger, and such other carnivorous animals may be given in the denomination of the flesh of deer for strengthening the patient.

The meats of elephant, rhinoceros and horse well-seasoned with spices should be given in the denomination of buffalo-flesh, for promoting the flesh of the patient. The flesh of birds and animals that have grown plump on flesh diet is an excellent flesh-enhancing food. because of its quick action, hot potency and light to digest nature. [149-155]

Administration of meats in disguised form (or without telling the patient)

मांसानि यान्यनभ्यासादनिष्टानि प्रयोजयेत् तेषुपृथा, सुखं भोक्तं तथा शक्यानि तानि हि॥१५६॥
जानञ्जुगुप्सन्नैवाद्याज्जग्धं वा पुनरुल्लिखेत् ते स्माच्छद्मोपसैद्धानि मांसान्येतानि दापयेत्॥१५७॥

mār̄ṣāni yānyanabhyāsādaniṣṭāni prayōjayēt| tēṣūpadhā, sukhāṁ bhōkturūṁ tathā
śakyāni tāni hi||156|| jānañjugupsannaivādyājjagdharū vā punarullikhēt|
taṣmācchadmōpasiddhāni mār̄ṣānyētāni dāpayēt||157|| mAMsAni
yAyanabhyAsAdaniShTANi prayojayet| teShUpadhA, sukhāM bhoktuM tathA shakyaAni
tAni hi||156|| jAna~jjugupsannaivAdyAjjagdhaM vA punarullikhet|
taṣmAcchadmopasiddhAni mAMsAnyetAni dApayet||157||

When the patient is not used to consume meats and that are not relished, it may cause harm to patient. Then considering the benefit towards patient's health and making him suitable to eat, meat should be given trickily in other disguised forms (or under dissimulated designations without telling the patient).

If the patient comes to know that meat is being given to him, then he would not eat the meat or if eaten, would vomit it. (Hence, in these patients, the recipe should not be shared with patients). [156-157]

Best animal meats in *rajayakshma*

बहितिरिदक्षाणां हंसानां श्वरोष्टयोः| खरगोमहिषाणां च मांसं मांसकरं परम्॥१५८॥ योनिरष्टविधा
चोक्ता मांसानामन्नपानिके तां परीक्ष्य भिषग्विद्वान् दद्यान्मांसानि शोषिणे॥१५९॥

barhitittiridakṣāṇāṁ haṁsānāṁ śūkarōṣṭrayoḥ| kharagōmahiṣāṇāṁ ca māṁsaṁ
māṁsakaraṁ param||158|| yoniraṣṭavidhā cōktā māṁsānāmannapānikē| tāṁ parīkṣya
bhiṣagvidvān dadyānmāṁsāni śōṣiṇē||159|| barhitittiridakShANAM haMsAnAM
shUkaroShTrayoH| kharagomahiShANAM ca mAmsaM mAmsakaraM param||158||
yoniraShTavidhA coktA mAmsAnAmannapAnike| tAM parlkShya bhiShagvidvAn
dadyAnmAMsAni shoShiNe||159||

The fleshes of peacock, partridge, chicken, swan, hog, camel, ass, bull, and buffalo are best to enhance flesh tissues in the patient. A wise physician should take meticulous note of the eight groups of creatures, described in the chapter on ‘eats and drinks’, and then cull the opportune flesh for the patient. [158-159]

Types of meats for alleviation of specific *dosha*

प्रसहा भूशयानुपवारिजा वारिचारिणः| आहारार्थं प्रदातव्या मात्रया वातशोषिणे॥१६०॥ प्रतुदा विष्किराश्चैव
धन्वजाश्च मृगेद्विजाः| कफपित्परीतानां प्रयोज्याः शोषरोगिणाम्॥१६१॥ विधिवत्सूपसिद्धानि
मनोजानि मृदूनि च| रसवन्ति सुगन्धीनि मांसान्येतानि भक्षयेत्॥१६२॥

prasahā bhūśayānūpavārijā vāricāriṇāḥ| āhārārthaṁ pradātavyā mātrayā
vātaśoṣiṇē||160|| pratudā viṣkirāścaiva dhanvajāśca mrgadvijāḥ| kaphapittaparītānāṁ
prayojyāḥ sōṣarōgiṇām||161|| vidhivatsūpasiddhāni manōjñāni mṛdūni ca| rasavanti
sugandhīni māṁsānyētāni bhakṣayēt||162|| prasahA bhUshayAnUpavAriJ
vAricAriNaH| AhArArthaM pradAtavyA mAtryA vAtashoShiNe||160|| pratudA
viShkirAshcaiva dhanvajAshca mRugadvijAH| kaphapittaparItAnAM prayojyAH
shoSharogiNAM||161|| vidhivatsUpasiddhAni manoj~jAni mRudUni ca| rasavanti
sugandhIni mAmsAnyetAni bhakShayet||162||

The flesh of the tearer group of creatures , wet land and aquatic animals and wading birds should be given in large measures as food to one suffering from the *vata* dominance in *rajayakshma*. The flesh of peckers, gallinaceous birds and *jangala* beasts and birds should be given to those consumptives who are predominantly affected with *kapha* and *pitta*. After preparing these fleshes well in the prescribed manner and having rendered them soft, palatable, ambrosial and fragrant, they should be given to the *rajayakshma* patient. [160-162]

Prescription of wines in *rajayakshma*

मांसमेवाशनतः शोषो माध्वीकं पिबतोऽपि च| नियतानल्पचित्स्य चिरं काये न तिष्ठति॥१६३॥
वारुणीमण्डनित्यस्य बहिर्मार्जनसेविनः| अविधारितवेगस्य यक्षमा न लभतेऽन्तरम्॥१६४॥ प्रसन्नां वारुणीं
सीधमरिष्टानासवान्मधुं यथाहमनुपानार्थं पिबेन्मांसानि भक्षयन्॥१६५॥ मदयं
तैक्षण्यौष्ण्यवैशद्यसूक्ष्मत्वात् स्रोतसां मुखम्| प्रमथ्य विवृणोत्याशु तन्मोक्षात् सप्त धातवः॥१६६॥
पुष्यन्ति धातुपोषाच्च शीघ्रं शोषः प्रशाम्यति|

māṁsamēvāśnataḥ śōśō mādhvīkarṁ pibatō’pi ca| niyatānalpacittasya ciram kāyē na
tiṣṭhati||163|| vāruṇīmaṇḍanityasya bahirmārjanasēvinah| avidhāritavēgasya yakṣmā na
labhatē’ntaram||164|| prasannāṁ vāruṇīṁ sīdhumariṣṭānāsavānmadhu|
yathārhamanupānārtharṁ pibēnmāṁsāni bhakṣayan||165|| madyāṁ
taikṣṇyauṣṇyavaiśadyasūkṣmatvāt srōtasāṁ mukham| pramathyā vivṛṇōtyāśu
tanmōkṣāt sapta dhātavah| 166|| puṣyanti dhātupōṣācca śīghram śōśah praśāmyati|
mA MsamevAshnataH shoSho mA dhvIkAM pibato~api ca| niyatAnalpacittasya cirAM
kAye na tiShThati||163|| vAruNlmaNDanityasya bahirmArjanasevinaH|
avidhAritavegasya yakShmA na labhate~antaram||164|| prasannAM vAruNIM
sldhumariShTAnAsavAnmadhu| yathArhamanupAnArthaM pibenmAMsAni
bhakShayan||165|| madyAM taikShNyauShNyavaishadyasUkShmatvAt srotasAM
mukham| pramathyā vivRuNotyAshu tanmokShAt sapta dhAtavaH||166|| puShyanti
dhAtupoShAcca shIghraM shoShaH prashAmyati|

Only meat shall be consumed in *rajayakshma* with *madhvika* (wine prepared from honey). The disease does not persist long in one who is well disciplined and with good mental strength (control over mind), who daily drinks *varuni* wine, regularly follows the external cleansing of the body and who does not suppress the natural urges.

The *rajayakshma* patient shall take *prasanna*, *varuni* or *sidhu* wine or simple medicated wines as per suitability after taking a meat-diet. Wine owing to its qualities of quickly acting, hot potency, cleansing effect, and subtle action, churns up obstructions in the orifices of the body channels and soon dilates them. As a result of this re-establishment of the liberation of circulation in the vessels, all the seven body- elements get nourished, and the wasting due to *rajayakshma* soon gets cured. [163-167]

Various ghee formulations

मांसादमांसस्वरसे सिद्धं सर्पिः प्रयोजयेत् ॥१६७॥ सक्षौद्रं, पयसा सिद्धं सर्पिर्दशगुणेन वा। सिद्धं
मधुरकैर्द्रव्यैर्दशमूलकषायकैः ॥१६८॥ क्षीरमासरसोपेतैर्घृतं शोषहरं परम्।
पिप्पलीपिप्पलीमलचव्यचित्रकनागरैः ॥१६९॥ सयावशकैः सक्षीरैः स्रोतसां शोधनं घृतम्।
रास्नाबलागोक्षुरकस्थिरावर्षाभुसाधितम् ॥१७०॥ जीवन्तीपिप्पलीगर्भं सक्षीरं शोषनुद्घृतम्। यवाग्वा वा
पिबेन्मात्रां लिह्यादवा मधुना सह ॥१७१॥ सिद्धानां सर्पिषामेषामद्यादन्नेन वा सह। शुष्यतामेष निर्दिष्टो
विधिराभ्यवहारिकः ॥१७२॥

māṁsādamāṁsasvarasē siddham̄ sarpiḥ prayōjayēt||167|| sakṣaudraṁ, payasā
siddham̄ sarpirdaśaguṇēna vā| siddham̄
madhurakairdravyairdaśamūlakaśāyakaiḥ||168|| kṣīramāṁsarasōpētairghṛtam̄
śōśaharam̄ param| pippalīpippalīmūlacavyacitrakanāgaraiḥ||169|| sayāvaśūkaiḥ
sakṣīraiḥ srōtasāṁ śōdhanam̄ ghṛtam̄
rāsnābalāgōkṣurakasthirāvarśābhusādhitam||170|| jīvantīpippalīgarbham̄ sakṣīram̄
śōṣanudghṛtam̄ yavāgvā vā pibēnmātrāṁ lihyādvā madhunā saha||171|| siddhānāṁ
sarpiśāmēśāmadyādannēna vā saha| śuṣyatāmēṣa nirdiṣṭō vidhirābhyavahārikāḥ||172||
mA MsAdamAMsasvarase siddhaM sarpiH prayojayet||167|| sakShaudraM, payasA
siddhaM sarpirdashaguNena vA| siddhaM
madhurakairdravyairdashamUlakaShAyakaiH||168|| kShIramAMsarasopetairghRutaM

shoShaharaM param| pippallippallimUlacavyacitrakanAgaraiH||169|| sayAvashUkaiH
 sakShIraiH srotasAM shodhanaM ghRutam|
 rAsnAbalAgokShurakasthirAvarShAbhusAdhitam||170|| jIvantIpippallgarbhaM
 sakShIraM shoShanudghRutam| yavAgvA vA pibenmAtrAM lihyAdvA madhunA
 saha||171|| siddhAnAM sarpiShAmeShAmadyAdannena vA saha| shuShyatAmeSha
 nirdiShTo vidhirAbhyavahArikaH||172||

The ghee prepared with the meat-juice of carnivorous animals may be administered with honey to the *rajayakshma* patient or the ghee prepared in ten times the quantity of milk may be given to the patient. The medicated ghee prepared in the decoction of *dashamula*, milk and meat-juice with the paste of drugs of the *madhura* (sweet) group is an excellent remedy for *rajayakshma*.

The medicated ghee prepared with the paste of long pepper, roots of long pepper, *chaba* pepper, white flowered leadwort, dry ginger, barley, alkali and milk is a cleanser of body channels.

The medicated ghee prepared in the decoction of Indian ground *sel*, heart-leaved sida, small caltrop, tick trefoil, fog weed and milk along with the paste of cork swallow wort and long pepper, is curative of *rajayakshma*.

These medicated ghees may be taken with gruel or licked with honey or eaten commixed with the food in the suitable dose. Thus has been described the dietetic regimen for the *rajayakshma*.[167-172]

External treatments

बहिःस्पर्शनमाश्रित्य वक्ष्यतेऽतः परं विधिः। स्नेहक्षीराम्बुकोष्ठेषु स्वभ्यक्तमवगाहयेत्॥१७३॥
 स्रोतोविबन्धमोक्षार्थं बलपुष्ट्यर्थमेव च। उत्तीर्ण मिश्रकैः स्नेहैः पुनराकृतैः सुखैः करैः॥१७४॥ मृदूनीयात्
 सुखमासीनं सुखं चोत्सादयेन्नरम्। जीवन्तीं शतवीर्या च विकसा सपुनर्नवाम्॥१७५॥ अश्वगन्धामपामार्गं
 तर्करीं मधुकं बलाम्। विदारीं सर्षपं कृष्ठं तण्डलानतसीफलम्॥१७६॥ माषांस्तिलांश्च किणवं च सर्वमेकत्र
 चर्णयेत्। यवचूर्णत्रिगणितं दद्धना यक्तं समाक्षिकम्॥१७७॥ एतदुत्सादनं कार्यं पष्टिवर्णबलप्रदम्।
 गौरसर्षपकल्कनं कल्कैश्चापि सुगोन्धभिः॥१७८॥ स्नायाद्वितुसुखैस्तोयैर्जीवनीयोषधैः शृतैः॥१७९॥

bahihsparšanamāśritya vakṣyatē'tah param vidhiḥ| snēhakṣīrāmbukōṣṭhēṣu
 svabhyaktamavagāhayēt||173|| srōtōvibandhamōkṣārtham balapuṣṭyarthamēva ca
 uttīrṇam̄ miśrakaiḥsnēhaiḥ punarāktaiḥ sukhaiḥ karaiḥ||174|| mṛdnīyāt sukhamāśinam̄
 sukham̄ cōtsādayēnnaram̄ jīvantīm̄ śatavīryām̄ ca vikasām̄ sapunarnavām||175||
 aśvagandhāmapāmārgam̄ tarkārīm̄ madhukam̄ balām̄ vidārīm̄ sarsaparī kuṣṭham̄
 tanḍulānatasīphalam||176|| māśām̄stilām̄śca kiṇvam̄ ca sarvamēkatra cūrnayēt|
 yavacūrnātriguṇitam̄ dadhnā yuktam̄ samākṣikam||177|| ētadutsādanam̄ kāryam̄
 puṣṭivarnābalapradam̄ gaurasarṣapakalkēna kalkaiścāpi sugandhibhiḥ||178||
 snāyādṛtusukhaistoyairjīvanīyauṣadhaiḥ śṛtaiḥ||179| bahiHsparshanamAshritya
 vakShyate~ataH paraM vidhiH| snehakShIraMBukoShTheShu
 svabhyaktamavagAhayet||173|| srotovibandhamokShArthaM balapuShTyarthameva ca
 uttīrNaM mishrakaiHsnehaiH punarAktaiH sukhaiH karaiH||174|| mRudnlyAt
 sukhamAsInaM sukhaM cotsAdayennaram| jIvantIM shatavIryAM ca vikasAM

sapunarnavAm||175|| ashvagandhAmapAmArgaM tarkArIM madhukaM balAm| vidArIM sarShapaM kuShThaM taNDulAnataslphalam||176|| mAshaMstilAMshca kiNvaM ca sarvamekatra cUrNayet| yavacUrNatriguNitaM dadhnA yuktaM samAkShikam||177|| etadutsAdanaM kAryaM puShTivarNabalapradam| gaurasarShapakalkena kalkaishcApi sugandhibhiH||178|| snAyAdRutusukhaistoyairJivanlyauShadhaiH shRutaiH||179|

The patient, after being proper therapeutic massage, should be given a tub- bath with unctuous liquid, milk and water in order to mitigate the constriction of the channels and to enhance vigor and plumpness. After tub-bath, the patient should be made to sit at his ease and once again be treated with a gentle massage lightly with hands utilizing *mishraka sneha* (mixed forms of *sneha*), and then with a massage mixed with powder and unctuous matter as described below. Take cork swallow wort, scotch grass, *mudar*, hog-weed, winter cherry, rough chaff, wind killer, liquorice, heart-leaved *sida*, white yam, rape seed, costus, rice, linseed, ebony gram, *til* and yeast, and powder the mixture . Co-mix this with thrice its quantity of barley powder and integrate curds and honey; this should be utilized for massage for promoting plumpness, complexion and vitality. Then the patient should take a bath in water in which have been boiled vitality-enhancing herbs, the paste of white mustard and the paste of fragrant substances, cooling the water to the degree of temperature found congenial in the particular season. [173-179]

Lifestyle treatments

गन्धैः समाल्यैर्वासोभिर्भूषणैश्च विभूषितः॥१७९॥ स्पृश्यान् संस्पृश्य सम्पूज्य देवताः सभिषग्दविजाः। इष्टवर्णरसस्पर्शगन्धवत् पानभोजनम्॥१८०॥ इष्टमिष्टेरुपहितं सुखमद्यात् [१] सुखप्रदम्। समातीतानि धान्यानि कल्पनीयानि शुष्यताम्॥१८१॥ लघून्यहीनवीर्याणि स्वादनि गन्धवन्ति च | यानि प्रहर्षकारीणि तानि पथ्यतमानि हि॥१८२॥ यच्चोपदेक्ष्यते पथ्यं [२] क्षतक्षीणचिकैकित्सिते। यक्षिमणस्तत् प्रयोक्तव्यं बलमांसाभिवदध्ये॥१८३॥ अभ्यङ्गोत्सादनैश्चैव वासोभिरहतैः प्रियैः। यथर्तविहितैः। स्नानैरवगाहैर्विमार्जनैः॥१८४॥ बस्तिभिः क्षीरसर्पिर्भिर्मासैर्मासरसौदनैः। इष्टमर्दयैर्मनोजानां गन्धानामुपसेवनैः॥१८५॥ सुहृदां रमणीयानां प्रमदानां च दर्शनैः। गीतवादित्रशब्दैश्च प्रियश्रुतिभिरेव च॥१८६॥ हर्षणाशवासनैनित्यं गुरुणां समपासनैः। ब्रह्मचर्येण दानेन तपसा देवतार्चनैः॥१८७॥ सत्येनाचारयोगेन मङ्गल्यैरप्यहिंसया। वैद्यविप्रार्चनाच्चैव रोगराजो निवर्तते॥१८८॥ यया प्रयुक्ततया चेष्ट्या राजयक्षमा पुरा जितः। तां वेदविहितामिष्टमारोग्यार्थो प्रयोजयेत्॥१८९॥

gandhaiḥ samālŷairvāsōbhīrbhūṣaṇaiśca vibhūṣitah||179|| spr̄syān sam̄spr̄syā sampūjya dēvatāḥ sabhiṣagdvijāḥ| iṣṭavarmarasasparśagandhavat pānabhōjanam||180|| iṣṭamiṣṭairupahitāṁ sukhamadyāt [1] sukhapradam| samātītāni dhānyāni kalpanīyāni śuṣyatām||181|| laghūnyahīnavīryāni svādūni gandhavanti ca| yāni praharṣakārīṇi tāni pathyatamāni hi||182|| yaccōpadēkṣyatē pathyām [2] kṣataksīṇacikitsitē| yakṣmiṇastat prayōktavyām balamāṁsābhivṛddhayē||183|| abhyaṅgotsādanaiścāiva vāsōbhīrahataih priyaiḥ| yathartuvihitaiḥ snānairavagāhairvimārjanaiḥ||184|| bastibhiḥ kṣīrasarpīrbhīrmāṁsairmāṁsarasaudanaiḥ| iṣṭairmadyaīrmanōjñānāṁ gandhānāmupasēvanaiḥ||185|| suhṛdāṁ ramaṇīyānāṁ pramadānāṁ ca darśanaiḥ| gītvādītraśabdaiśca priyaśrutibhirēva ca||186|| harṣaṇāśvāsanairnityām gurūṇāṁ samupāsanaiḥ| brahmacyāṇā dānēna tapasā dēvatārcanaiḥ||187|| satyēnācārayōgēna maṅgalyairapyahirṁsayā| vaidyaviprārcanāccāiva rōgarājō nivartatē||188|| yayā prayuktayā cēṣṭyā rājayakṣmā purā jitah| tāṁ

vēdavihitāmistimārōgyārthī [3] prayōjayēt||189|| gandhaiH
 samAlyairvAsobhirbhUShaNaiShca vibhUShitaH||179|| spRushyAn saMspRushya
 sampUjya devatAH sabhiShagdvijAH| iShTavarNarasasparshagandhavat
 pAnabhojanam||180|| iShTamiShTairupahitaM sukhapradam|
 samAtItAni dhAnyAni kalpanlyAni shuShyatAm||181|| laghUnyahInavIryAni svAdUni
 gandhavanti ca| yAni praharShakArINi tAni pathyatamAni hi||182|| yaccopadekShyate
 pathyaM [2] kShatakShINacikitsitel yakShmiNastat prayoktavyaM
 balamAMsAbhivRuddhaye||183|| abhya~ggotsAdanaishcaiva vAsobhirahataiH priyaiH|
 yathartuvihitaiH snAnairavagAhairvimArjanaiH||184|| bastibhiH
 kShirasarpirbhirmAMsairmAMsarasaudanaiH| iShTairmadyarmanoj~jAnAM
 gandhAnAmupasevanaiH||185|| suhRudAM ramaNlyAnAM pramadAnAM ca
 darshanaiH| gltavAditrashabdaishca priyashrutibhireva ca||186||
 harShaNAshvAsanairnityaM gurUNAM samupAsanaiH| brahmaccaryeNa dAnena
 tapasA devatArcanaiH||187|| satyenAcArayogena ma~ggalyairapyahiMsayA|
 vaidyaviprArcanAccaiva rogarAjo nivartate||188|| yayA prayuktayA ceShTyA
 rAjayakShmA purA jitaH| tAM vedavihitAmiShTimArogyArthI [3] prayojayet||189||

The consumptive patient should then adorn himself with perfumes, flower garlands, habiliments and ornaments, touch auspicious articles, worship the gods, the *Brahmins* and the *Vaidya*. He should eat suitable food and drink with favorite color, taste, feel and odor, prepared by agreeable persons and leading to comfort. Those grains, which are a year old, are to be utilized in the preparation of food for the patients of *rajayakshma*. Those which are light to digest , which have not lost their nutritive quality and which are dainty, fragrant and virilific, are the most wholesome. The *rajayakshma* patients, in order to amend their vigor and flesh must utilize those articles that are prescribed as wholesome in the treatment of *kshata-kshina*(chapter 11). It is a recourse to inunction (applying oil), massage, congenial and unton garments, effusions, baths immersion baths, internal and external cleansing which are congruous to the prevailing season, enemata, milk ghee, meat-foods cooked rice commixed with meat juices, suitable wines, delectable perfumes, optical discernment of friends, comely things and adolescent women, the congenial sound of musical compositions and the musical instruments , cheering and comforting words, constant accommodation to preceptors and elders, practice of *brahmacharya*, charity, austerity, worship of the gods, truth, rectitudinous, conduct, auspicious rites, nonviolence and deference to the physician and Brahmins, that one gets liberate from *rajayakshma* , the king of disease. The patient desirous of regaining his health should perform the same spiritual therapies enjoined by the *vedas* as those by the performance of which this king of diseases was subdued in the first instance. [179-189]

Summary

तत्र श्लोकौ- प्रागुत्पतिर्निमित्तानि प्रागृपं रूपसङ्ग्रहः। समासाद् व्यासतश्चोक्तं भेषजं राजयक्षमणः॥१९०॥
 नामहेतुरसाध्यत्वं साध्यत्वं कृच्छ्रसाध्यता। इत्युक्तः सङ्ग्रहः कृत्स्नो राजयक्षमचिकित्सिते॥१९१॥

tatra ślōkau- prāgutpattirnimittāni prāgrūpam rūpasaṅgrahaḥ| samāsād vyāsataścōktarṁ
 bhēṣajam rājayakṣmaṇah||190|| nāmahēturasādhyatvarṁ sādhyatvarṁ kṛcchrasādhyatā|

ityuktaḥ saṅgrahāḥ krtsnō rājayakṣmacikitsitē||191|| tatra shlokau- prAgutpattirnimittAni
 prAgrUpaM rUpasa~ggraHaH| samAsAd vyAsatashcoktaM bheShajaM
 rAjayakShmaNaH||190|| nAmaheturasAdhyatvaM sAdhyatvaM kRucchrasAdhyatA|
 ityuktaH sa~ggraHaH kRutsno rAjayakShmacikitsite||191||

Concerning *rajayakshma*, the protogenesis, etiological factors, premonitory symptoms and syndromes of designations and symptoms have been described in brief and methods of treatment extensively. Explanations of the designation of *rajayakshma*, incurable, curable, and formidable conditions: these have been addressed in this chapter on the ‘ Therapeutics of *rajayakshma* ’. [190-191]

Tattva Vimarsha (Fundamental Principles)

- Over-exertion beyond one’s capacity, suppression of natural urges, depletion of tissue elements and irregular dietary habits are the etiological factors of *rajayakshma*.
- The symptoms are manifested where the vitiated *dosha* are lodged and interact with the *dhatus*.
- One shall know his own capacity or tolerance before starting any kind of activity. Otherwise the activities done beyond one’s capacity leads to depletion of *dhatus*, vitiation of *vata* and *rajayakshma*.
- One shall not suppress the natural urge to prevent vitiation of *vata dosha* and *rajayakshma*.
- The *samprapti* (pathogenesis) of *rajayakshma* includes obstruction in channels and depletion of *dhatus*.
- Normally, the *dhatus* of the body get metabolized (being acted upon) by their own *ushmas* or *dhatvagnis* (transforming enzymes in the tissue elements). From these *dhatus*, (nutrient tissue elements), the other *dhatus* (next *dhatus* to it that which receive nourishment) gets nourished through their respective *srotas* (channels of circulation). (For example, a *poshaka rasa dhatu* would nourish the *rakta dhatu*).
- *Rajayakshma* is manifested if there is any obstruction to a *srotas* or if there is diminution of stable tissue elements like *rakta* or if there is diminution of *dhatu-ushmas* or *dhatvagnis* then.
- In coryza, sudation, inunctions, medicated smoke application, effusion, bath are the modes of treatment.
- Nasal errhines, medicated smokes, post prandial unctuous potions, inunctions with medicated oils, enemata and blood letting are indicated to release pain in head and shoulder region.
- In cases of excessively aggravated *dosha*, mild therapeutic emesis and purgation therapies after proper *snehana* (oleation) and *swedana* (sudation) which do not cause emaciation can be administered.

- The signs like diarrhea, anorexia manifest due to impairment of the *agni*. Treatment shall be planned to improve functioning of *agni*, stopping diarrhea and promoting taste in mouth.
- The nourishment therapies with ghee, linctus, milk processed with the herbs having properties of sweet, bitter taste and cold potency are used in treatment of *rajayakshma*.
- Meat and *madhvika* (wine prepared from honey) are considered the best diet in *rajayakshma*.
- The disease does not persist long in one who is well disciplined and with good mental strength (control over mind), who daily drinks *varuni* wine, regularly follows external cleansing of the body (maintains cleanliness) and who does not suppress the natural urges.
- Lifestyle treatments intended to enhance mental strength and comfort for patient are administered in *rajayakshma*.

Vidhi Vimarsha (Applied Inferences)

General pathogenesis

800px

Pathogenesis of various types of *rajayakshma*

800px 800px 1050px

Contemporary Treatments

Priniciples of treatments: *Deepana, Srotoshodhana, Balya and Brimhana*

Main drugs: *Bala, Abhraka, Suvarna, Kushmanda*

Medicine formulations used

1. **Sahasaja rajayakshma /urakshata:**
 1. *Laksha* mixture 10 to 20 grams frequently with *vasavaleha*
 2. *Amritaprasha* 10 to 20 grams after meals with milk
2. **Vishamashanaja :**
 1. *Swarna vasanta* 250 to 500 mg between two meals with milk
 2. *Drakshasava* 10 to 20 ml after meals with water
3. **Vegarodhaja:**
 1. *Chaturbhaja kalpa* 125 to 250 mg before meals with milk and *chyavana prasha*
 2. *Chaturmukha rasa* 60 to 120 mg after meals with *brahmi prasha*
4. **Kshayaja rajayakshma :**
 1. *Laksmivilasa rasa* 250 to 500 mg between two meals with milk
 2. *Vanga* mixture 500 to 1000mg between two meals with milk

Cautions for purification treatments

Panchakarma(therapeutic purification) treatments are indicated only in strong patients with excess aggravation of *doshas* in *rajayakshma*. In a patient with low strength, purification is not done. If at all, it needs to be done due to excess *dosha*, then mild purification is prescribed after taking every care of strength of the patient.

Role of *rasayana* in enhancing the immunity

Rasayana drugs have got an important role in the management of *rajayakshma*. *Mandagni* (at the level of *jatharagni* and *dhatvagni* both) and *srotovarodha* play an important role in the pathogenesis of this disease. *Rasayana* drugs act at various levels to promote nutrition. Some of them work at the level of *rasa* (enriching nutrient plasma) while others work at the level of *agni* (improve digestion and metabolism). Some other work at the level of *srotas* by promoting the competence of microcirculatory channels in the body leading to better bio-availability of nutrients to the tissues and improved tissue perfusion.[2] Hence, *rasayana* acting at all three levels may prove beneficial in the management of *rajayakshma*. *Rasayana* drugs also improve the status of *ojas* in the body by their immunomodulatory action. Thus these drugs are used as an adjuvant to anti-tubercular drugs and they enhance efficacy of treatment at various levels. Details about *rasayana* drugs have already been described in first chapter of Chikitsa Sthana. *Nidana parivarjana* (removal of the causes) is yet another aspect of treatment.

Research on Ayurveda treatment in tuberculosis patients

As we look back to the history of tuberculosis treatment, the immune-boost up was the main treatment. Ayurvedic treatment of tuberculosis was initiated in 1933 by the establishment of Patipukur TB Hospital, Kolkata. Later on, a full-fledged research unit was commissioned with exclusive budget. Treatment guidelines were adopted on Ayurvedic principles for therapeutic management which was a unique effort of its kind in pre-independence India. This regimen was discontinued from 1st November 1947 on the introduction of synthetic ATDs. Drugs containing mercury, gold, calcium was prepared at the in-house pharmacy and was administered to the patients with fresh juice of herbs cultivated in the hospital garden. Formulations like *vasantamalati*, *kanchanabhra rasa*, *rajamriganka rasa* were under use including *bhallataka* (Semicarpus anacardium) rasayana, *mallasindura*, *vasa* (Adatoda vasica) etc. The statistics on the treatment of pulmonary tuberculosis using Ayurvedic medicine for over a period of 13 years is of immense value.[1]

Research outcome relevant for public health from the Indian systems of medicine on tuberculosis at The Patipukur TB Hospital: Modern TB-drugs were administered to about 2766 patients and the cure rate turned out to be 11.42% and the death rate 40.9%. When a group of patients on modern anti-TB drugs received supplementary Ayurvedic drugs, the cure rate was 41.3% and the death rate was 3.8%. Studies have also been conducted to assess the role of Ayurvedic treatment in resistant cases. [1]

Related Chapter

- Shosha Nidana

Further reading

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2. Singh, RH and Rastogi, S. Rasayana Therapy and Rejuvenation. In Evidence based practice of CAM, PP 177-190. Springer, Germany. 2012

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Unmada Chikitsa

Chikitsa Sthana Chapter 9. Management of Unmada (Psychosis Disorders)

Abstract

Unmada Chikitsa describes the management of *unmada* (insanity). The approach to the management of individual types of *unmada* have been elaborately described. The uniqueness of the chapter lies in the broad description of all three forms of therapies described in Ayurvedic System i.e. *yukti-vyapashraya* (rational treatment) to *daiva-vyapashraya* (spiritual therapy) and *sattvavajaya chikitsa* (psychotherapy) for the management. Apart from these three types, the fourth type of therapy, called *upayabhipluta* (consolation, mental support) *chikitsa*, which incorporates a variety of non-pharmacological methods of treatment has also been described. *Unmada* is the only disease entity in the entire classical Ayurvedic literature, which requires such an extensive and broad spectrum of management principles, techniques, drugs, counseling, psychotherapy and therapeutic modalities, which are to be judiciously utilized by the clinicians based on their specific indications and the state of the disease.

Keywords: *unmada*, *manas*, schizophrenia, manic psychosis, psychotic depression / major depressive disorder, treatment of psychiatric disorders

Introduction

The *unmada* covers a wide range of major mental disorders and is considered synonymous with madness and mental derangement, in which a person loses his/her contact from reality and loses the ability to regulate his/her actions and conduct according to norms of the society. In *unmada* there is upward movement of *doshas* leading to disturbance in the functions of *manas* causing *mada* (delusional/ intoxicated state) in an individual. The factual clinical picture of the mental status of psychotic patients is vividly described. This description suggests that a patient of *unmada* develops derangement of all the activities of *manas* (mind), *buddhi*(intellect), *ahamkara* (conceit of self-individuality) and *indriyas* (senses). He develops thought disturbances in the form of abnormalities of *chintana* (thinking), *vichara*(discrimination) and *uhya* (analysis), derangement of memory in the form of *smriti nasha* (loss of memory) and *smriti bramsha* (impairment of memory), behavioral, social and emotional disturbances in the form of abnormalities of *achara* (behaviour), *dharma* (eternal duties) and *bhavas* (mental factors) along with functional derangement of *indriyas* which is manifested clinically as disturbed speech and its various presentations like incoherence (*abaddha vakyama*), thought blocking (*hridaya shunyata*), loosening of associations, neologism, echolalia etc. and various psycho-motor disturbances .

Thus, *unmada* is not a lone clinical entity comparable to a single modern diagnostic category, rather it is a syndrome describing a group of psychotic disorders. It is a common and broader entity, which provides guidance to the line of management for almost all psychiatric disorders in Ayurveda. In this ailment, the intellect, mind and memory get perverted. *Unmada* can be described as the disordered state of mind, in

which an individual loses the ability of regulating his/her actions and conduct according to the rules of society. As the psychotic disorders cover almost all the major mental illnesses, the different types and sub-types of *unmada* can be separately correlated with different psychotic disorders. The clinical features of the different types of *unmada* resemble various types of schizophrenia, manic psychosis, psychotic depression / major depressive disorder. *Unmada* is divided into two broad categories –

- (1) *Nija*- those caused by internal imbalance of body humors i.e. *vata*, *pitta*, *kapha* and the *sannipataja* and the
- (2) *Agantunimitta*- those caused by exogenous factors.

The medicated *ghrita*, the most preferred dosage form for the management, enhances intellect, memory and plays an important role in the treatment of *unmada*. Hence many *ghrita* formulations have been described for the management. *Anjana* and *nasya* are other treatment modalities indicated in *unmada*. Vaghata emphasizes upon their importance by saying that if all medications for *unmada* like *vamana*, *virechana* etc. fail, one should do *teekshna anjana* and *nasya karma*.

Sanskrit text, Transliteration and English Translation

अथात उन्मादचिकित्सितं व्याख्यास्यामः॥१॥

इति ह स्माह भगवानात्रेयः॥२॥

athāta unmādacikitsitaṁ vyākhyāsyāmaḥ॥1॥

iti ha smāha bhagavānātrēyah॥2॥

athAta unmAdacikitsitaM vyAkhyAsyAmaH॥1॥

iti ha smAha bhagavAnAtreyaH॥2॥

Now we shall expound the chapter “*Unmada Chikitsa*” (Management of psychosis disorders). Thus said Lord Atreya. [1-2]

Specifications of Punarvasu

बुद्धिस्मृतिजानतपोनिवासः पुनर्वसुः प्राणभृतां शरण्यः।

उन्मादहेत्वाकृतिभेषजानि कालेऽग्निवेशाय शशंस पृष्टः॥३॥

buddhismṛtijñānatapōnivāsaḥ punarvasuḥ prāṇabhṛtām śaraṇyah|

unmādahētvākṛtibhēṣajāni kālē'gnivēśāya śāśaṁsa pṛṣṭah॥3॥

buddhismRutij~jAnataponivAsaH punarvasuH prANabhRutAM sharaNyaH|

unmAdahetvAkRutibheShajAni kAle~agniveshAya shashaMsa pRuShTaH॥3॥

Punarvasu, the abode of intellect, memory, knowledge, penance and saviour of living beings, timely described the etiology, symptoms and treatment of *unmada* to Agnivesha as queried. [3]

Causes of *unmada*

विरुद्धदुष्टाशुचिभोजनानि प्रधर्षणं देवगुरुद्विजानाम् । उन्मादहेतुर्भयहर्षपूर्वो मनोऽभिघातो विषमाश्च
चेष्टाः॥४॥

viruddhaduṣṭāśucibhōjanāni pradharaṣṇam dēvagurudvijānām|
unmādahēturbhayaharṣapūrvō manō'bhighātō viṣamāśca cēṣṭāḥ||4||
viruddhaduShTAshucibhojanAni pradharShaNaM devagurudvijAnAm|
unmAdaheturbhayaharShapUrvo mano~abhighAto viShamAshca ceShTAH||4||

Food with incompatible, contaminated and unclean properties; possession by spirits like gods, teachers and *brahmanas*; mental trauma due to recurrent exposure to fear or exhilaration and adopting difficult posture are the general causes of *unmada*.[4]

Pathogenesis of *unmada*

तैरल्पसत्त्वस्य मलाः प्रदुष्टा बुद्धेनिवासं हृदयं प्रदूष्य| सोतांस्यधिष्ठाय मनोवहानि प्रमोहयन्त्याशु
नरस्य चेतः॥५॥

tairalpasattvasya malāḥ praduṣṭā buddhērnivāsam hṛdayam pradūṣya|
srōtāṁsyadhiṣṭhāya manōvahāni pramōhayantyāśu narasya cētaḥ||5|| tairalpasattvasya
malAH praduShTA buddhernivAsaM hRudayaM pradUShya| srotAMsyadhiShThAya
manovahAni pramohayantyAshu narasya cetaH||5||

By the above causative factors, the *doshas* get vitiated in the person possessing low level of sattva guna (weak minded people) in turn vitiate hridaya (mind), which is the seat of intellect. There from the channels carrying mental factors (*mano-vaha srotasas*), quickly delude the mind of the person. [5]

Clinical features

धीविभ्रमः सत्त्वपरिप्लवश्च पर्याकुला दृष्टिरधीरता च| अबद्धवाक्त्वं हृदयं च शून्यं
सामान्यमुन्मादगदस्य लिङ्गम्॥६॥ स मूढचेता न सुखं न दुःखं नाचारधर्मो कुर्ते एव शान्तिम्|
विन्दत्यपास्तस्मृतिबुद्धिसञ्ज्ञो भ्रमत्यये चेत इतस्ततश्च॥७॥

dhīvibhramah sattvapariplavaśca paryākulā dṛṣṭiradhīratā ca| abaddhvāktvam
hṛdayam ca śūnyam sāmānyamunmādagadasya liṅgam||6|| sa mūḍhacētā na sukham
na duḥkham nācāradharmau kuta ēva śāntim| vindatyapāstasmṛtibuddhisañjñō
bhramatyayam cēta itastataśca||7|| dhīvibhramah sattvapariplavashca paryAkulA
dRuShTiradhlratA ca| abaddhvAktvaM hRudayaM ca shUnyaM
sAmAnyamunmAdagadasya li~ggam||6|| sa mUDhacetA na sukhaM na duHkhaM
nAcAradharmau kuta eva shAntim| vindatyapAstasmRutibuddhisa_{jj}o bhramatyayam
ceta itastatashca||7||

Perverted intellect, psychic agitation, restlessness in eyes, impatience, incoherent speech and feeling of emptiness in *hridaya* (mind), these are the general features of *unmada*.

Thus, the person with deranged mind does not know pleasures, pain, ethics and eternal duties and does not get peace anywhere. Therefore, he lets the mind wander here and there due to loss of memory, intellect and perceptions. [6-7]

Types of *unmada*

समुद्भ्रमं बुद्धिमनः स्मृतीनामुन्मादमागन्तुनिजोत्थमाहुः। तस्योद्भवं पञ्चविधं पृथक् तु वक्ष्यामि
लिङ्गानि चिकित्सितं च॥८॥

samudbhramaṁ buddhimanaḥsmṛtīnāmunmādamāgantunijōtthamāhuḥ| tasyōdbhavaṁ
pañcavidhaṁ pṛthak tu vakṣyāmi liṅgāni cikitsitaṁ ca||8|| samudbhramaM
buddhimanaHsmRutInAmunmAdamAgantunijotthamAhuH| tasyodbhavaM
pa~jcavidhaM pRuthak tu vakShyAmi li~ggAni cikitsitaM ca||8||

Unmada refers to excessive affliction of intellect, mind and memory. This is of two types – *nija* (endogenous) and *agantuja* (exogenous). According to origin, it is of five types.(I) will describe their symptoms and treatment separately.[8]

Vata dominant *unmada*

रुक्षाल्पशीतान्नविरेकधातुक्षयोपवासैरनिलोऽतिवृद्धिः। चिन्तादिजुष्टं हृदयं प्रदूष्य बुद्धिं स्मृतिं
चाप्युपहन्ति शीघ्रम्॥९॥ अस्थानहासस्मितनृत्यगीतवागङ्गविक्षेपणरोदनानि।
पारुष्यकाश्यरुणवर्णताश्च जीर्णे बलं चानिलजस्य रूपम्॥१०॥

rūkṣālpaśītānnavirēkadhātukṣayōpavāsairanilō'tivrddhah| cintādijuṣṭam hṛdayam
pradūṣya buddhiṁ smṛtiṁ cāpyupahanti śīghram||9||
asthānahāsasmitanṛtyagītavāgaṅgavikṣēpaṇarōdanāni| pāruṣyakārśyārunāvaraṇatāśca
jīrnē balaṁ cānilajasya rūpam||10||
rUkShAlpashItAnnavirekadhuAtukShayopavAsairanilo~ativRuddhaH| cintAdijuShTaM [1]
hRudayaM pradUShya buddhiM smRutiM cApyupahanti shlghram||9||
asthAnahAsasmitanRutyagItavAga~ggavikShepaNarodanAni|
pAruShyakArshyAruNavarNatAshca jlrNe balaM cAnilajasya rUpam||10||

Vata gets aggravated by the intake of rough, deficient in quantity and cold in property food, excessive evacuation of *doshas*, depletion of body tissues and fasting. This aggravated *vata* affects the *hridaya* (site of mind), which is already afflicted with anxiety etc. and thus quickly deranges intellect and memory.

Laughing, smiling, dancing, singing, speaking, abnormal movement of body parts, weeping at improper places and improper time, roughness, emaciation, reddish discoloration of body parts and aggravation of the disease after digestion of food; are the clinical features of the *vata* dominant *unmada* .[9-10]

Pitta dominant unmada

अजीर्णकट्वम्लविदाहयशीतैर्भौज्यैश्चितं पित्तमुदीर्णवेगम्| उन्मादमत्युग्मनात्मकस्य हृदि श्रितं पूर्ववदाशु कुर्यात्||११|| अमर्षसंरम्भविनग्नभावाः सन्तर्जनातिद्रवणौष्ण्यरोषाः | प्रच्छायशीतान्नजलाभिलाषाः पीता च भाः पित्तकृतस्य लिङ्गम्||१२||

ajīrṇakaṭvamlavidāhyaśītairbhōjyaiścitar̄ pittamudīrṇavēgam|
unmādamatyugramanātmakasya hṛdi śritam pūrvavadāśu kuryāt||11||
amarṣasāṁrambhavinagnabhbhāvāḥ santarjanātidravaṇauṣṇyarōṣāḥ |
pracchāyaśītānnajalābhilāṣāḥ pītā ca bhāḥ pittakṛtasya liṅgam||12||
ajīrṇakaṭvamlavidāhyaśītairbhōjyaiścitaM pittamudīrṇavegam|
unmādamatyugramanātmakasya hRudi shritaM pUrvavadAsha kuryAt||11||
amarShasaMrambhavinagnabhbhAvAH santarjanAtidravaNauShNyaroShAH |
pracchAyashItAnnajalAbhilAShAH pltA ca bhAH pittakRutasya li~ggam||12||

The already accumulated *pitta* gets aggravated due to indigestion, by the intake of pungent, sour food, those articles causing burning sensation, and hot in potency. It takes shelter in the *hridaya* (site of mind) in the person without self restraint and thus suddenly gives rise to severe episode of *unmada* as per the above mentioned pathogenesis.

Intolerance, agitation, nakedness, terrorizing, excessive movements, (running), heat, wrath (anger), yellowish luster and desire for dense shady places, cold food - are the clinical features of *pitta dominant unmada*. [11-12]

Kapha dominant unmada

सम्पूरणौर्मन्दविचेष्टितस्य सोष्मा कफो मर्मणि सम्प्रवृद्धः| बद्धिं स्मृतिं चाप्यपहत्य चितं प्रमोहयन् सञ्जनयेद्विकारम्||१३|| वाक्येष्टितं मन्दमरोचकश्च नारीविवेकतप्रियताऽतिनिद्रा| छर्दिश्च लाला च बलं च भुड्कते नखादिशौकल्यं च कफात्मकस्या||१४||

sampūraṇairmandaviceṣṭitasya sōṣmā kaphō marmaṇi sampravṛddhaḥ| buddhiṁ smṛtiṁ cāpyupahatya cittar̄ pramōhayana sañjanayēdvikāram||13|| vākcēṣṭitar̄ mandamarōcakaśca nārīviviktapriyatā’tinidrā| chardiśca lālā ca balaṁ ca bhuṇktē nakhādiśauklyam ca kaphātmakasya||14|| sampUraNairmandaviceShTitasya soShmA kapho marmaNi sampravRuddhaH| buddhiM smRutiM cApyupahatya cittam pramohayan sa~jjanayedvikAram||13|| vAkceShTitam mandamarocakashca nArlviviktapriyatA~atinidrA| chardishca lAIA ca balaM ca bhu~gkte nakhAdishauklyam ca kaphAtmakasya||14||

In the persons taking excessive food and doing slow activities (having sedentary habits), *kapha* along with heat (*pitta*) increases in their vital organ (*hridaya*), impairing intellect and memory and thereby deranging their mind produces insanity. Slow speech and movements, anorexia, and liking for women and loneliness, excessive sleep, vomiting, salivation, aggravation of the disease after taking meals and whiteness of nails etc.– these are the clinical features of the *kapha* dominant *unmada*. [13-14]

Sannipata unmada (due to vitiation of all doshas)

यः सन्निपातप्रभवोऽतिघोरः सर्वे: समस्तैः स च हेतुभिः स्यात्। सर्वाणि रूपाणि बिभर्ति
तादग्विरुद्धभैषज्यविधिर्विवर्जयः॥१५॥

yah sannipātaprabhavō'tighōrah sarvaiḥ samastaiḥ sa ca hētubhiḥ syāt| sarvāṇi rūpāṇi
bibharti tādṛgvirudghabhaiṣajyavidhirvivarjyah||15|| yaH sannipAtaprabhavo~atighoraH
sarvaiH samastaiH sa ca hetubhiH syAt| sarvANi rUpANi bibharti
tAdRugvirudghabhaiShajyavidhirvivarjyaH||15||

The severe type of *unmada* arising from *sannipata* (aggravation of all three *doshas*) is caused by all the above etiological factors. It presents with all the above characters in mixed form and because of antagonistic therapeutic principles, it is difficult to treat and therefore should be rejected. [15]

Agantu unmada (exogenous type)

देवर्षिगन्धर्वपिशाचयक्षरक्षःपितृणामभिधर्षणानि। आगन्तुहेतुर्नियमव्रतादि मिथ्याकृतं कर्म च
पूर्वदेहे॥१६॥

dēvarṣigandharvapiśācayakṣarakṣahpītṛṇāmabhidharṣaṇāni| āgantuhēturniyamavratādi
mithyākṛtaṁ karma ca pūrvadēhē||16||
devarShigandharvapishAcyakSharakShaHpitRUNAmabhidharShaNAni|
AgantuheturniyamavratAdi mithyAkRutaM karma ca pUrvadehe||16||

Possession by the gods, sages, *gandharvas* (celestial choristers), *pishachas* (devils), *yakshas* (living supernatural being/spiritual apparition), *rakshasas* (demons) and *pitru*(forefathers/ancestors spirits); unmethodical performance of spiritual rituals and vows etc. and the deeds of past life are the causes of the exogenous type of *unmada*. [16]

Signs of bhutonmada (affliction of evil spirits)

अमर्यवाग्विक्रमवीर्यचेष्टो ज्ञानादिविज्ञानबलादिभिर्यः। उन्मादकालोऽनियतश्च यस्य
भूतोत्थमुन्मादमुदाहरेत्तम्॥१७॥

amartyavāgvikramavīryacēṣṭo jñānādivijñānabalādibhiryah| unmādakālō'niyataśca
yasya bhūtōtthamunmādamudāharēttam||17|| amartyavAgvikramavIryaceShTo
jJAnAdivijjAnabalAdibharyaH| unmAdakAlo~aniyatashca yasya
bhUtotthamunmAdamudAharettam||17||

Persons presenting with superhuman speech, valor, power and activities along with superhuman knowledge, understanding, strength etc. and having irregular time of aggravation of the disease, are the clinical features of *unmada* caused by exogenous causes (evil spirits). [17]

अदूषयन्तः पुरुषस्य देहं देवादयः स्वैस्तु गुणप्रभावैः। विशन्त्यद्यश्यास्तरसा यथैव च्छायातपौ
दर्पणसर्यकान्तौ॥१८॥ आघातकालो हि सं पूर्वरूपः प्रोक्तो निदानेऽथ सुरादिभिश्च। उन्मादरूपाणि
पृथङ्गिनिबोध कालं च गम्यान् पुरुषांश्च तेषाम्॥१९॥

adūsayantah purusasya dēharṁ dēvādayah svaistu gunaprabhāvaiḥ।
 viśantyadṛśyāstarasā yathaiva cchāyātapau darpaṇasūryakāntau॥18॥ āghātakālō hi sa
 pūrvarūpah prōktō nidānē'tha surādibhiśca] unmādarūpāṇi pṛthaṇibōdha kālam ca
 gamyān puruṣāṁśca tēśām॥19॥ adUShayantaH puruShasya dehaM devAdayaH
 svaistu guNaprabhAvaiH| vishantyadRushyAstarasA yathaiva cchAyAtapau
 darpaNasUryakAntau॥18॥ AghAtakAlo hi sa pUrvarUpaH prokto nidAne~atha
 surAdibhishca] unmAdarUpANi pRutha~gnibodha kAlaM ca gamyAn puruShAMshca
 teShAm॥19॥

Celestial beings invisibly and swiftly enter into the body of a person by their own supernatural effect without affecting the body of the individual. This simulates with as image enter the mirror and sunlight enters the sun-stone. [18]

As said earlier in the diagnosis -section, prodromal features coincide with the entry of celestial beings. Now listen about the symptoms of various types separately, time of affliction and susceptible person. [19]

Various types of *agantu unmada*

Affliction by God

तद्यथा-

सौम्यदृष्टिं गङ्गभीरमधृष्यमकोपनमस्वप्नभोजनाभिलाषिणमल्पस्वेदमूत्रपुरीषवातं
 शुभगन्धंफुल्लपदमवदनमिति देवोन्मत्तं विद्यात्;

tadyathā-

saumyadṛṣṭimgambhīramadhṛṣyamakōpanamasvapnabhōjanābhilāśinamalpasvēdamūt
 rapurīśavātām śubhagandhamphullapadmavadanamiti dēvōnmattām vidyāt;

tadyathA-

saumyadRuShTiMgambhIramadhRuShyamakopanamasvapnabhojanAbhilAShiNamalp
 asvedamUtrapuriShavAtaM shubhagandhaM phullapadmavadanamiti devonmattaM
 vidyAt;

Gentle look, serious, unassailable, unwrathful, having no desire for sleep and food, with decreased sweat, urine, stool and flatus, auspicious smell and face like blossomed lotus flower- are the characters of unmada caused due to affliction by gods.

Affliction by unmada due to affliction of guru etc.

गुरुवृद्धसिद्धर्षीणामभिशापाभिचाराभिध्यानानुरूपचेष्टाहारव्याहारं तैरुन्मत्तंविद्यात्;

guruvṛddhasiddharṣīnāmabhiśāpābhicārābhidhyānānurūpacēṣṭāhāravyāhāram
 tairunmattām vidyāt;

guruvRuddhasiddharShINAmbhishApAbhicArAbhidhyAnAnurUpaceShTAhAravyAhAra
 M tairunmattaMvidyAt;

One having movements, diet and speech corresponding to type of *abhishapa* (curse), *abhichara* (magical spell) or *abhidhyana* (desire to transform by willpower), meditation of teacher, elders, accomplished person (*siddhas*) and sages should be known as *unmada* caused due to affliction by them (*rishis* etc.) respectively.

Unmada due to affliction of ancestors or forefathers

अप्रसन्नदृष्टिमपश्यन्तं निद्रालुं प्रतिहतवाचमनन्नाभिलाषमरोचकाविपाकपरीतं च पितृभिरुन्मत्तं विद्यात्;

aprasannadṛṣṭimapāśyantarṁ nīdrālum
pratihatavācamanannābhilāṣamarōcakāvipākaparītarṁ capitrbhirunmattarṁ vidyāt;

aprasannadRuShTimapashyantaM
nindrAluMpratihatavAcamanannAbhilAShamarocakAvipAkparitaM ca
pitRubhirunmattaM vidiyAt;

Unhappy look, inability to see, drowsiness, interrupted speech, lack of desire for food, anorexia and indigestion are the characteristics of the person suffering from *unmada* caused due to affliction by *pitrīs*(manes).

Unmada due to affliction of gandharva (celestial musicians)

(चण्डं साहसिकं तीक्ष्णं गम्भीरमधृष्यं)

मुखवाद्यनृत्यगीतान्नपानस्नानमाल्यधूपगन्धरतिं रक्तवस्त्रबलिकर्महास्यकथानुयोगप्रियंशुभगन्धं च गन्धर्वोन्मत्तं विद्यात्;

(caṇḍam sāhasikam tīkṣṇam gambhīramadhrṣyam)

mukhavādyanṛtyagītānnapānasnānamālyadhūpagandharatiMraktavastrabalikarmahāsy
akathānuyogapriyam śubhagandham ca gandharvōnmattam vidiyāt;

(caNDaM sAhasikaM tlkShNaM gambhIramadhRuShyaM)

mukhavAdyanRutyagItAnnapAnasnAnamAlyadhUpagandharatiMraktavastrabalikarmah
AsyakathAnuyogapriyaM shubhagandhaM ca gandharvonmattaM vidiyAt;

Violent acts, over courageousness, sharpness, seriousness, invincibility, liking for vocal music, instrumental music played by mouth, dancing, singing, good food and drinks, garlands, incense, perfume, red apparels, *bali* (offerings of sacrifices), laughing, humorous talks and pleasant aroma from the body are the features of the patients suffering from *unmada* caused due to affliction by *gandharvas* (celestial musicians).

Unmada due to affliction of yaksha

असकृत्स्वप्नरोदनहास्यं नृत्यगीतवाद्यपाठकथान्नपानस्नानमाल्यधूपगन्धरतिरक्तविष्लुताक्षं द्विजातिवैद्यपरिवादिनं रहस्यभाषिणं च यक्षोन्मत्तं विद्यात्;

asakṛtsvapnarōdanahāsyarṁ
nṛtyagītavādyapāṭhakathānnapānasnānamālyadhūpagandharatiṁraktaviplutākṣarṁ
dvijātivaidyaparivādinam̄ rahasyabhāsiṇam̄ ca yakṣōnmattam̄ vidyāt;

asakRutsvapnarodanahAsyaM
nRutyagItavAdyapAThakathAnnapAnasnAnamAlyadhUpagandharatiMraktaviplutAkSha
M dvijAtivaidyaparivAdinaM rahasyabhAShiNaM ca yakShonmattaM vidyAt;

Frequent sleep, cry and laugh, liking for dancing, singing, playing instruments, reciting sacred scriptures, liking for stories, good food and drinks, garlands, incense, perfume, red & tearful eyes ,despising *dvijas* (persons of families of *brahmana*, *kshatriya* and *vaishyas*.) and physicians, disclosing the secrets are the features of the patients suffering from *unmada* caused due to affliction by *yakshas* (demigods, semi-divine celestial beings, attendants of *Kubera*, the celestial physician).

Unmada due to affliction of rakshasa (demons)

नष्टनिद्रमन्नपानद् वेषिणमनाहारमप्यतिबलिनं शस्त्रशोणितमांसरक्तमाल्याभिलाषिणं सन्तर्जकं च
राक्षसोन्मत्तं विद्यात्;

naṣṭanidramannapānadveṣinamanāhāramapyatibalinam̄
śastraśōṇitamāṁsaraktamālyābhilāsiṇāṁsantarjakaṁ ca rākṣasōnmattam̄ vidyāt;

naShTanidramannapAnadveShiNamanAhAramapyatibalinaMshastrashoNitamAMsarakt
amAlyAbhilAShiNaM santarjakaM ca rAkShasonmattaM vidyAt;

Sleeplessness, hatred for food and drinks, and excessive strength in spite of aversion for food, liking for weapons, blood, meat and red garlands and ferociousness are the features of the patients suffering from *unmada* caused due to affliction by *rakshasas* (demons).

Unmada due to affliction of brahma-rakshasa (a class of evil demons)

प्रहासनृत्यप्रधानं देवविप्रवैद्यद्वेषावजाभिः स्तुतिवेदमन्त्रशास्त्रोदाहरणौः काष्ठादिभिरात्मपीडनेन च
ब्रह्मराक्षसोन्मत्तंविद्यात्;

prahāsanṛtyapradhānam̄
dēvavipravайдyadvēṣāvajñābhīḥstutivēdamantraśāstrōdāharanaiḥ
kāṣṭhādibhirātmapīḍanēna ca brahmarākṣasōnmattam̄ vidyāt;

prahAsanRutyapradhAnaM devavipravайдyadveShAvaj~jAbhiH
stutivedamantrashAstrodAharaNaiHkAShThAdibhirAtmapIDanena ca
brahmarAkShasonmattaM vidyAt;

Excessive laughter, dance, hatred and disobedience to Gods, *brahmins* and physicians, reciting sacred scriptures and illustrations from hymns, the *Vedas* and *mantras* (incantations), injuring himself by pieces of wood etc. are the features of the patients suffering from *unmada* caused due to affliction by *brahma-rakshasas* (a class of evil demons).

Unmada due to affliction of pishacha

अस्वस्थचित्तं स्थानमलभमानं नृत्यगीतहासिनं
बद्धाबद्धप्रलापिनं सङ्करकटमलिनरथ्याचेलतणाशमकाष्ठाधिरोहणरतिं भिन्नरूक्षस्वरं नग्नं विधावन्तं
नैकत्रं तिष्ठन्तं दुःखान्यावेदयेन्तं नष्टस्मृतिं च पिशाचोन्मत्तं विद्यात्॥२०॥

asvasthacittam̄ sthānamalabhamānam̄ nṛtyagītahāsinam̄
baddhābaddhapralāpiṇam̄saṅkarakūṭamalinarathyācēlatrṇāśmakāṣṭhādhirōhaṇaratim̄
bhinnarūksasvaram̄ nagnam̄ vidhāvantam̄naikatra tiṣṭhantam̄ duḥkhānyāvēdayantam̄
naṣṭasmṛtim̄ ca piśācōnmattam̄ vidyāt॥२०॥

asvasthacittaM sthAnamalabhamAnaMnRutyagItahAsinaM
baddhAbaddhapralApinaMsa~gkarakUTamalinarathyAcelatRuNAshmakaSHThAdhiroha
NaratiM bhinnarUkShasvaraM nagnaMvidhAvantaM naikatra tiShThantaM
duHkhAnyAvedayantaM naShTasmRutiM ca pishAconmattaMvidyAt॥२०॥

One who has impaired mind (fickle minded), does not find peace anywhere, dances, sings and laughs frequently, delirious with coherent or incoherent speech, fond of climbing on garbage, dirty lanes, cloth, grass, stone and wood, has hoarse and rough voice, remains naked, running and not standing at a place, always complaining of his miseries and sorrows before others and has lost his memory should be known as *unmada* caused due to affliction by *pishacha* (a class of demons). [20]

Days, time and susceptible persons for affliction

तत्र चौक्षाचारं तपःस्वाध्यायकोविदं नरं प्रायः शुक्लप्रतिपदि त्रयोदश्यां च छिद्रमवेक्ष्याभिधर्षयन्ति
देवाः, स्नानशुचिविविक्तसेविनं धर्मशास्त्रश्रतिवाक्यकुशलं प्रायः षष्ठ्यां नवम्यां चर्ष्ण्यः,
मातृपृष्ठगुरुवृद्धसिद्धाचार्योपसेविनं प्रायोदशम्न्याममावस्यायां च पितरः, गन्धर्वाः स्तुतिगीतवादित्ररतिं
परदारगन्धमाल्यप्रियं चौक्षाचारं प्रायो दवादश्यां चतुर्दश्यां च, सत्त्वबलरूपगर्वशौर्ययुक्तं
माल्यानुलेपनहास्यप्रियमतिवाक्करणं प्रायः शुक्लैकादश्यां सप्तम्यां च
यज्ञाः, स्वाध्याययतपोनियमोपवासब्रह्मचर्यदेवयतिगुरुपूजाऽरतिं भष्टशौचं ब्राह्मणमब्राह्मणं वा
ब्राह्मणवादिनं शरमानिनंदेवागारसलिलक्रीडनरतिं प्रायः शुक्लपञ्चम्यां पूर्णचन्द्रदर्शने च ब्रह्मराक्षसाः,
रक्षःपिशाचास्तु हौनसत्त्वं पिशनं स्त्रैणं लुब्धंशठं प्रायो द्वितीयातृतीयाष्टमीषु; इत्यपरिसङ्ख्येयानां
ग्रहाणामाविष्कृततमा हयष्टावेते व्याख्याताः॥२१॥

tatra caukṣācāram̄ tapahsvādhyāyakōvidam̄ naram̄ prāyah̄ śuklapratipadi trayodaśyām̄
cachidramavēkṣyābhidharṣayanti [1] dēvāḥ, snānaśuciviktaśevinam̄
dharmaśāstraśrutivākyakuśalam̄ prāyah̄ṣaṣṭhyām̄ navamyām̄ carṣayaḥ,
mātṛpitṛguruvrddhasiddhācāryōpasēvinam̄ prāyō daśamyāmamāvasyāyām̄ca pitaraḥ,
gandharvāḥ stutigītavāditrataratim̄ paradāragandhamālyapriyaṁ caukṣācāram̄ prāyō
dvādaśyām̄caturdaśyām̄ ca, sattvabalarūpagarvaśauryayuktam̄
mālānulēpanahāsyapriyamativākkaraṇāri [2] prāyah̄śuklaikādaśyām̄ saptamyām̄ ca
yakṣāḥ,
svādhyāyatapōniyamōpavāsabrahmacaryadēvayatigurupūjā'ratimbhraṣṭaśaucam̄
brāhmaṇamabrāhmaṇam̄ vā brāhmṇavādinam̄ śūramāninaṁ
dēvāgarasalilakrīḍanaratiṁprāyah̄ śuklapañcamyām̄ pūrṇacandrādarśanē ca
brahmarākṣasāḥ, rakṣah̄piśācāstu hīnasattvam̄ piśunam̄straiṇam̄ [3] lubdhām̄ śaṭham̄

prāyō [4] dvitīyātṛtīyāṣṭamīsu; ityaparisaṅkhyēyānāṁ grahāṇāmāviśkratamāhyastāvētē vyākhyātāḥ||21||

tatra caukShAcAraM tapaHsvAdhyAyakovidāM naraM prAyaH shuklapratipadi trayodashyAM cachidramavekShyAbhidharShayanti [1] devAH, snAnashuciviviktasevinaMdharmashAstrashrutivAkyakushalaM prAyaH ShaShThyAM navamyAM carShayaH,mAtRupitRuguruvRuddhasiddhAcAryopasevinaM prAyo dashamyAmamAvasyAyAM ca pitaraH, gandharvAHstutigltavAditraratiM paradAragandhamAlyapriyaM caukShAcAraM prAyo dvAdashyAM caturdashyAM ca,sattvabalarUpagarvashauryayuktaM mAlyAnulepanahAsyapriyamativAkkaraNaM [2] prAyaHshuklaikAdashyAM saptamyAM ca yakShAH,svAdhyAyataponiyamopavAsabrahmacaryadevayatigurupUjA~aratiM bhraShTashaucāMbrAhmaNamabrAhmaNaM vA brAhmNavAdinaM shUramAninaM devAgArasalilakrIDanaratiM prAyaHshuklapa~jcamyAM pUrNacandrardarshane ca brahmaRakShasAH, rakShaHpishAcAstu hlnasattvaMpishunaM straiNaM [3] lubdhaM shaThaM prAyo [4] dvitlyAtRutlyAShTamiShu; ityaparisa~gkhyeyAnAMgrahANAmAviShkRutatamA hyaShTAve vyAkhyAtAH||21||

The Gods (*deva*) attack the person with purity and good conduct and engage in austerity and study of religious scriptures by finding an opportunity to afflict often on the first or thirteenth day of the bright fortnight.

The Sages (*rishis*) possess the person who is fond of bath, purity and loneliness and is conversant with religious scriptures and *vedic* sentences often on sixth or ninth day of fortnight by finding an opportunity to afflict.

The forefathers (*pitrīs*) enter into the person who is engaged in the service of mother, father, and teacher, elders, *siddhas* (who have accomplished spiritual perfection) and preceptors often on tenth day of the dark fortnight or new moon by finding an opportunity to afflict.

The *gandharvas* (celestial musicians) enter into person who is fond of hymns (praising verses), vocal and instrumental music; has liking for others wife, perfume and garland, and has purity and good conduct often on twelfth and fourteenth day of the fortnight (by finding an opportunity to afflict in them).

Yakshas possess a person endowed with mental and physical strength, good complexion, ego and valor, who are fond of garlands, unctuous substances and laughter, who is talkative generally during the seventh and twelfth day of bright fortnight (by finding an opportunity to afflict in them).

Brahma-rakshasa enters into the person who has disliking for study, austerity, religious practices and rules, fasting celibacy and worship of god, ascetics and preceptors(*gurus*); lost interest in cleanliness, whether *brahmana* or not but says himself as *brahmana*, regards himself as brave, has fondness for playing in temples and water tanks often on the fifth day of the bright fortnight (*shukla paksha*) or full moon day

Rakshasa (demons) and *pishachas* (a class of evil demons) attack the person who has inferior psyche (devoid of will power), has back-biting tendency, fond of women, thief, greedy and wicked often on the second, third and eighth day of the fortnight. These are the eight prominent ones among innumerable *grahas* (seizures), which are described.

[21]

Untreatable *unmada*

सर्वेष्वपि तु खल्वेषु यो हस्तावृद्यम्य रोषसंरम्भान्निःशङ्कमन्येष्वात्मनि वा निपातयेत् स ह्यसाध्यो
ज्ञेयः; तथा यः साश्रनेत्रोमेद्धप्रवृत्तरक्तः क्षतजिह्वः प्रस्रतनासिकश्छिद्यमानचर्माऽप्रतिहन्यमानवाणिः
सततं विकूजन् दुर्वर्णस्तृष्टार्तः पूतिगन्धश्च सहिंसार्थिनोन्मतो ज्ञेयः; तं परिवर्जयेत्॥२२॥

sarvēṣvapi tu khalvēṣu yō hastāvudyamya rōṣasāṁrambhānnīḥśāṅkamanyēṣvātmani
vā nipātayēt sahyasādhyō jñēyah; tathā yah sāśrunētrō mēḍhrapravṛttaraktaḥ
kṣatajihvahprasrutānāsikaśchidyamānacarmā'pratihanyamānavāṇīḥ satatām vikūjan
durvarṇastrṣṭārtaḥ [1]pūtigandhaśca sa hirṇsārthinōnmattō jñēyah; tam parivarjayēt॥२२॥

sarveShvapi tu khalveShu yo hastAvudyamya
roShasaMrambhAnniHsha~gkamanyeShvAtmani vAnipAtayet sa hyasAdhyo j~jeyaH;
tathA yaH sAshrunetro meDhrapravRuttaraktaH
kShatajihvaHprasutanAsikashchidyamAnacarmA~apratihanyamAnavANiH satataM
vikUjan durvarNastRuShArtaH [1]pUtigandhashca sa hiMsArthinonmatto j~jeyaH; taM
parivarjayet॥२२॥

Of the above varieties of *unmadas*, he who strikes at others or himself, without hesitation raising his hands with wrath and agitation should be considered as incurable. He who has tearful eyes, hemorrhage from penis, wounded tongue, running nose, a bruised skin, uninteractable hands, constantly groaning, deranged complexion, excessive thirst and foul smell should be known as maddened by a violent type of spirits (*grahas*) and should not be treated. [22]

Management principles

रत्यर्चनाकामोन्मादिनौ तु भिषगभिप्रायाचाराभ्यां बुद्ध्वा तदङ्गोपहारबलिमिश्रेण।
मन्त्रभैषज्यविधिनोपक्रमत्॥२३॥

Those madden by the types of spirits possessing due to longing for pleasure and worship, should be ascertained as such by the liking (intentions) and behavior (conduct) of the patients and should be treated with administration of the mantras (incantations/hymns) and drugs mixed with the respective gifts and offerings. [23]

तत्र दवयोरपि निजागन्तुनिमित्योरुन्मादयोः समासविस्तराभ्यां भेषजविधिमनव्याख्यास्यामः॥२४॥
उन्मादे वातजे पूर्व स्नेहपानं विशेषवित् कर्यादावृतमार्गं तु सस्नेहं मृदु शोधनम्॥२५॥
कफपितोदभवेऽप्यादौ वमनं सविरेचनम् स्निग्धस्विन्नस्य कर्तव्यं शुद्धे संसर्जनक्रमः॥२६॥ निरुहं
स्नेहबस्ति च शिरसश्च विरेचनम् ततः कर्यादयथादोषं तेषां भूयस्त्वमाचरेत्॥२७॥ हृदिन्द्रियशिरःकोष्ठे
संशुद्धे वमनादिभिः। मनःप्रसादमाप्नोति स्मृतिं सञ्जां च विन्दति॥२८॥ शद्धस्याचारविभ्रंशे तीक्ष्णं
नावनमञ्जनम् ताडनं च मनोबद्धिदेहसंवेजनं हितम्॥२९॥ यः सक्तोऽविनये पट्टैः संयम्य सदृढैः सुखैः।
अपेतलोहकाष्ठादये संरोध्यश्च तमोगृहे॥३०॥ तर्जनं त्रासनं दानं हर्षणं सान्त्वनं भयम् विस्मयौ

विस्मृतेर्हतोर्नयन्ति प्रकृतिं मनः||३१|| प्रदेहोत्सादनाभ्युग्धुमा: पानं च सर्पिषः| प्रयोक्तव्यं
मनोबुद्धिरस्मृतिसञ्जाप्रबोधनम्||३२|| सर्पिषःपानादिरागन्तोमेन्त्रादिश्चेष्यते विधिः||३३|

ratyarcanākāmōnmādinau tu bhiṣagabhiprāyācārābhyaṁ buddhvā
tadaṅgōpahārabalimīrēṇa] mantrabhaiṣajyavidhinōpakramēt||२३|| tatra dvayōrapi
nijāgantunimittayōrunmādayōḥ
samāsavistarābhyāṁbhēṣajavidhimanuvyākhyāsyāmaḥ||२४|| unmādē vātajē pūrvam
snēhapānāṁ viśeṣavit] kuryādāvṛtamārgē tu sasnēhaṁ mṛdu śodhanam||२५||
kaphapittōdbhavē'pyādau vamanāṁ savirēcanam| snigdhasvinnasya kartavyāṁ śuddhē
saṁsarjanakramah||२६|| nirūhaṁ snēhabastiṁ ca śirasaśca virēcanam| tataḥ
kuryādyathādōṣāṁ tēṣāṁ bhūyastvamācarēt||२७|| hṛdindriyaśiraḥkōṣṭhē saṁsuddhē
vamanādibhiḥ] manaḥprasādamāpnōti smṛtiṁ sañjñāṁ ca vindati||२८||
śuddhasyācāravibhraṁsē tīkṣṇāṁ nāvanamañjanam| tādanāṁ ca
manōbuddhidēhasaṁvējanāṁ [3] hitam||२९|| yaḥ saktō'vinayē [4] paṭṭaiḥ saṁyamya
sudṛḍhaiḥ sukhaiḥ] apētalōhakāṣṭhādyē saṁrōdhyaśca tamōgr̥hē||३०|| tarjanāṁ
trāsanāṁ dānāṁ harṣaṇāṁ sāntvanāṁ bhayam| vismayō vismṛtērhētōrnayanti prakṛtiṁ
manah||३१|| pradēhōtsādanābhyāṅgadhūmāḥ pānāṁ ca sarpiṣah| prayōktavyāṁ
manōbuddhismṛtisañjñāprabōdhanam||३२|| mantrabhaiShajyavidhinopakramet||२३||
tatra dvayorapi nijAgantunimittayorunmAdayoH
samAsavistarAbhyAMbheShajavidhimanuvyAkhyAsyAmaH||२४|| unmAde vAtaje
pUrvaM snehapAnaM visheShavit] kuryAdAvRutamArge tu sasnehaM mRudu
shodhanam||२५|| kaphapittodbhavē~apyAdau vamanāM savirecanam|
snigdhasvinnasya kartavyāM shuddhe saMsarjanakramaH||२६|| nirUhaM snehabastiM
ca shirasashca virecanam| tataH kuryAdyathAdoShaM teShAM bhUyastvamAcaret||२७||
hRudindriyashiraHkoShThe saMshuddhe vamanAdibhiH| manaHprasAdamApnoti
smRutiM sajjAM ca vindati||२८|| shuddhasyAcAravibhraMshe tlkShNaM
nAvanama~jjanam| tADanaM ca manobuddhidēhasaMvejanaM [3] hitam||२९|| yaH
sakto~avinaye [4] paTTaiH saMyamya sudRuDhaiH sukhaiH] apetalohakAShThAdye
saMrodhyashca tamogRuhe||३०|| tarjanaM trAsanaM dAnaM harShaNaM sAntvanaM
bhayam| vismayo vismRuterhetornayanti prakRutiM manah||३१||
pradehotsAdanAbhya~ggadhUmAH pAnaM ca sarpiShaH| prayoktavyāM
manobuddhismRutisajjAprabodhanam||३२|| sarpiHpAnAdirAgantormantrAdishceShyate
vidhiH||३३|

Now I will describe in brief and detail the treatment of both the endogenous and exogenous types of *unmada*.

In *vata* dominant type, first of all one should prescribe intake of oils and *ghritas* (*sneha*) substance but if there is obstruction in channels, mild unctuous evacuatives in small quantities should be administered.

If the insanity is caused by *kapha* and *pitta*, emesis and purgation should be given after unction and sudation. Post- evacuation dietetic regimen should be prescribed (gradually from lighter to heavier diet as per prescribed procedure). Thereafter non-unctuous (*niruha*) and unctuous (*anuvasana*) enema and nasal errhines (*shiro-virechana*) should be administrated.

Depending upon the predominance of *doshas*, one or the other of the above measures should be repeatedly applied.

By the administration of these therapeutic measures, heart, sense organs, head and bowels (*koshtha*) get cleansed as a result of which the mind gets refreshed and the patient regains memory as well as consciousness.

Even after the completion of above cleansing procedure, if the abnormal behaviour persists, the application of irritant snuffing, collyrium and beating should be done, which are useful for stimulating his mind, intellect and body.

One who is non-submissive and strong in physique, should be bound with firm and soft cotton bandage and should be confined in a dark room free from irons rods, wooden pieces etc.

Verbal teasing or threatening/shouting with anger (*tarjana*), terrorizing (*trasanam*), gifts /donations(*danam*), gladdening and exhilaration(*hanshanam*), consolation (*santwanam*), frightening(*bhayam*) and astonishing/exhibition of surprising acts (*vismaya*) restore the mind to normalcy by diverting it and counteracting the causes of loss of memory.

The patients suffering from *unmada* should be administered thick ointment (*pradeha*), anointing (*utsadana*), massage (*abhyanga*), fumigation (*dhuma*) and intake of ghee to arouse mind, intellect, memory and consciousness.

In exogenous type of *unmada*, intake of ghee (*sarpih pana*) etc. along with chanting of hymns (mantras) is recommended for the benefit of the patient. [24-32]

Various formulations

Hingvadi ghee

अतः सिद्धतमान्योगाञ्छृणून्मादविनाशनान्॥३॥ हिङ्गुसौवर्चलव्योषेद्विपलांशैर्घृताढकम्। चतुर्गुणे
गवां मूत्रे सिद्धमुन्मादनाशनम्॥३४॥

ataH siddhatamAnyogA~jchRuNUnmAdavinAshanAn||33||
hi~ggusauvarcalavyoShairdvipalAMshairghRutADhakam| caturguNe gavAM mUtre
siddhamunmAdanAshanam||34|| sarpihpānādirāgantōmantrādiścēsyatē vidhiḥ||33|| atah
siddhatamānyōgāñchṛṇūnmādavināśanān||33||
hiṅgusauvarcalavyōśairdvipalāṁśairghṛtāḍhakam| caturguṇē gavāṁ mūtrē
siddhamunmādanāśanam||34||

Now listen, some of the most efficacious formulations for alleviating the *unmada*.

Hingu, sauvarchala and *trikatu* (*shunthi , maricha* and *pippali*) each 80 gm (two *palas*) should be made to paste and cooked with one *adhaka* of ghee (2.56 kg) and four times cow's urine is a tested destroyer of *unmada*.[33-34]

Kalyanaka ghee

विशाला त्रिफला कौन्ती देवदार्वेलवालुकम् स्थिरा नतं रजन्यौ द्वे सारिवे द्वे प्रियङ्गुका॥३५॥
 नीलोत्पलैलामञ्जिष्ठादन्तीदाडिमकेशरम् तालीशपत्रं बृहती मालत्याः कसमं नवम्॥३६॥ विडङ्गं
 पृश्नेपर्णीं च कष्ठं चन्दनपद्मकौं अष्टाविंशतिभिः कल्कैरतैरक्षसमन्वितैः॥३७॥ चतुर्गणे जले
 सम्यग्धृतप्रस्थं विपाचयेत् अपस्मारे ज्वरे कासे शोषे मन्देऽनले क्षये॥३८॥ वातरक्ते प्रतिश्याये
 तृतीयकचतुर्थके छर्द्यशेमूत्रकूच्छेषु विसर्पोपहतेषु च॥३९॥ कण्डूपाण्डवामयोन्मादविषमेहगदेषु च
 भूतोपहतचित्तानां गट्गदानामचेसाम्॥४०॥ शस्तं स्त्रीणां च वन्ध्यानां धन्यमार्यबलप्रदम्
 अलक्ष्मीपापरक्षोधनं सर्वग्रहविनाशनम्॥४१॥ कल्याणकमिदं सर्पिः श्रेष्ठं पुंसवनेषु चैति कल्याणकं घृतम्

vishA triphalA kauntl [7] devadArvelavAlukam| sthirA nataM rajanyau dve sArive dve
 priya~ggukA॥35॥ nilotpalailAma~jjiShThAdantIdADimakesharam| tAllshapatraM
 bRuhatl mAlyatAH kusumaM navam॥36॥ viDa~ggaM pRushniparNI ca kuShThaM
 candanapadmakau| aShTAviMshatibhiH kalkairetairakShasamanvitaiH॥37॥ caturguNe
 [8] jale samyagghRutaprasthaM vipAcayet| apasmAre jvare kAse shoShe mande~anale
 kShaye॥38॥ vAtarakte pratishyAye tRutlyakacaturthake|
 chardyarshomUtrakRucchreShu visarpopahateShu ca॥39॥
 kaNDUpANDvAmayonmAdaviShamehagadeShu ca| bhUtopahatacittAnAM
 gadgadAnAmacesAm॥40॥ shastaM strINAM ca vandhyAnAM
 dhanyamAyurbalapradam| alakShmlpAparakShoghnaM sarvagrahavinAshanam॥41॥
 kalyANakamidaM sarpiH shreShThaM puMsavaneShu caiti kalyANakaM ghRutam
 viśālā triphalā kauntī dēvadārvēlavālukam| sthirā natāM rajanyau dvē sārivē dvē
 priyaṅgukā॥35॥ nīlōtpalailāmañjīṣṭhādantīdāqimakēśaram| tālīśapatram bṛhatī mālatyāḥ
 kusumāM navam॥36॥ viḍāṅgarāM prśniparnī ca kuṣṭham candanapadmakau|
 aşṭāvīṁśatibhiḥ kalkairētairakṣasamanvitaiḥ॥37॥ caturguṇē jalē samyagghRutaprasthaṁ
 vipācayēt| apasmārē jvarē kāsē sōsē mandē'nalē kṣayē॥38॥ vātaraktē pratiśyāyē
 tṛṭīyakacaturthakē| chardyarśomūtrakrcchrēṣu visarpopahatēsu ca॥39॥
 kanḍūpāṇḍvāmayōnmādaviśamēhagadēṣu ca| bhūtōpahatacittānāṁ
 gadgadānāmacēsām॥40॥ śastāM strīnāM ca vandhyānāM dhanyamāyurbalapradam|
 alakṣmīpāparakṣōghnāM sarvagrahavināśanam॥41॥ kalyāṇakamidaM sarpiH śrēṣṭham
 puṁsavānēṣu caiti kalyāṇakaM gṛtam ratyarcanAkAmonmAdinau tu
 bhiShagabhiprAyAcArAbhyAM buddhvA tada~ggopahArabalimishreNa|

Vishala, triphala, harenuka, devadaru, elevaluka, shalaparni, tagara, two types of haridra (haridra and dahu haridra), two types of sariva, priyangu, nilotpala, ela, manjishtha, danti, dadima, nagakeshara, talisapatra, brahati, fresh flower of jati, vidanga, prishnaparni, kushtha, chandana and padmaka, (total 28 drugs) each 10 gm, and ghee 640 gm, should be cooked well with four times water.

This ghee is useful in epilepsy, fever, cough, poor digestion, wasting, *vatarakta*, coryza, tertian and quaternary fever, vomiting, piles, dysuria, erysipelas, itching, anemia, *unmada*, poisoning, *prameha*, mental affection by supernatural beings (evil spirits), stammering voice, loss of consciousness and female sterility. It promotes life span, wealth and strength. It alleviates inauspiciousness, sins and micro-organism including all the *grahas* (seizures). This *kalyanaka ghrita* is also excellent for *punsavana* (*samskara* for formation of fetus). [35-41,1/2]

Mahakalyanaka ghee

एभ्य एव स्थिरादीनि जले पक्तवैकविंशतिम्॥४२॥ रसे तस्मिन् पचेत् सर्पिर्गृष्टिक्षीरे चतुर्गुणे।
वीरार्द्धमाषकाकोलीस्वयङ्गपृष्ठभर्धिभिः॥४३॥ मेदया च समैः कल्कैस्तत् स्यात् कल्याणकं महत् बृहणीयं
विशेषेण सन्निपातहरं परम्॥४४॥ इति महाकल्याणकं घृतम्

ēbhya ēva sthirādīni jalē paktvaikavimśatim॥42॥ rasē tasmin pacēt sarpirgrstiksīrē caturguṇē| vīrārdramāṣakākōlīsvayaṅguptarśabhardhibhiḥ॥43॥ mēdayā ca samaiḥ kalkaistat syāt kalyāṇakam mahat| bṛmhāṇīyam viśēṣēṇa sannipātaharam param॥44॥ iti mahākalyāṇakam ghṛtam ebhya eva sthirAdIni jale paktvaikaviMshatim॥42॥ rase tasmin pacet sarpirgrShTikShlre caturguNe| vlrArdramAShakAkollsvaya~gguptarShabhardhibhiH॥43॥ medayA ca samaiH kalkaistat syAt kalyANakaM mahat| bRuMhaNlyaM visheSheNa sannipAtaharaM param॥44॥ iti mahAkalyANakaM ghRutam

In the same way, the twenty one drugs beginning with *sthira* (*shalparni*) are boiled in water. With this decoction ghee is cooked adding four times milk of *primi para* cow (milk collected from the cow after its first delivery) and paste of *vira*, two types of *masha* (*masha* and *rajmasha*), *kakoli*, *kapikacchu*, *rishabhaka* and *riddhi*. This *mahakalyanaka ghrita* is particularly nourishing (bulk promoting) and an excellent alleviator of *sannipata* (simultaneous vitiation of all three *doshas*). [42 1/2-44]

Mahapaishachika ghee

जटिलां पूतनां केशीं चारटीं मर्कटीं वचाम् त्रायमाणां जयां वीरां चोरकं कटुरोहिणीम्॥४५॥ वयःस्थां शकरीं छत्रामतिच्छत्रां पलङ्कषाम् महापुरुषदन्तां च कायस्थां नाकलीद्रवयम्॥४६॥ कटम्भरां वृशिकालीं स्थिरां चाहृत्य तैर्घतम् सिद्धं चातुर्थकोन्मादग्रहापस्मारनाशनम्॥४७॥ महापैशाचिकं नाम घृतमेतद्यथाऽमृतम् बुद्धिस्मृतिकरं चैव बालानां चाङ्गवर्धनम्॥४८॥ इति महापैशाचिकं घृतम्

jatilāṁ pūtanāṁ kēśīṁ cāraṭīṁ markatīṁ vacām| trāyamānāṁ jayāṁ vīrāṁ cōrakam
kaṭurōhiṇīm||45|| vayaḥsthām śūkarīm chatrāmaticchatrām palaṅkaśām|
mahāpuruṣadantām ca kāyasthām nākulīdvayam||46|| kaṭambharām vṛścikālīm sthirām
cāhṛtya tairghṛtam| siddharām cāturthakōnmādagrahāpasmāranāśanam||47||
mahāpaīśācikam nāma ghṛtamētadyathā'mṛtam| buddhismṛtikaram caiva bālānām
cāṅgavardhanam||48|| iti mahāpaīśācikam ghṛtam jaTilAM pUtanAM keshIM cAraTIM
markaTIM vacAm| trAyamANAM jayAM vlrAM corakaM kaTurohiNlM||45|| vayaHsthAM
shUkarIM chatrAmaticchatrAM pala~gkaShAM| mahApuruShadantAM ca kAyasthAM
nAkulldvayam||46|| kaTambharAM vRushcikAlIM sthirAM cAhRutyta tairghRutam|
siddhaM cAturthakonmAdagrahApasmAranAshanam||47|| mahApaishAcikaM nAma
ghRutametadyathA~amRutam| buddhismRutikaram caiva bAlAnAM
cA~ggavardhanam||48|| iti mahApaishAcikaM ghRutam

Ghee processed with drugs like *jatamansi*, *haritaki*, *bhutkeshi*, *charati*, *kapikacchu*, *vacha*, *trayamana*, *jaya* (*jayanti*), *vira(kshirakakoli)*, *choraka*, *katurohini*, *vayastha*, *varahi*, *chhatra*, *atichhatra*, *palankasha*, *shatavari*, *kayastha*, two types of *nakuli* (*nakuli* and *gandha nakuli*), *katabhi* and *shalaparni*, is known as *mahaipaishachika ghrita*. It is like ambrosia and alleviates quartan fever, *unmada*, epilepsy. It also promotes intellect

and memory and help in development of children. This is *maha paishachika ghrita*.
[45-48]

Lashunadya ghee

लशुनानां शतं त्रिंशदभयास्त्यूषणात् पलम्। गवां चर्ममसीप्रस्थो दव्याढकं क्षीरमूत्रयोः॥४९॥ पुराणसर्पिषः
प्रस्थं एभिः सिद्धं प्रयोजयेत् हिङ्गचूर्णपलं शीते दत्त्वा च मधुमाणिकाम्॥५०॥
तटदोषागन्तुसम्भूतानुन्मादान् विषमज्वरान् अपस्मारांश्च हन्त्याशु पानाम्यज्जननावनैः॥५१॥ इति
लशुनादयं घृतम्लशुनस्याविनष्टस्य तुलार्थं निस्तुषीकृतम्। तदर्थं दशमूलस्य दव्याढकेऽपां
विपाचयेत्॥५२॥ पादशेषे घृतप्रस्थं लशनस्य रस तथा। कोलमूलकवृक्षाम्लमातुलुडगार्दकै रसैः॥५३॥
दाडिमाम्बुसरामस्तकाज्जिकाम्लैस्तदर्थिकैः। साधयेत्त्रिफलादारुलवणत्योषदीप्यकैः॥५४॥
यवानीचव्योहिङ्गवम्लवेत्सैश्च पलार्थिकैः। सिद्धमेतत् पिबेच्छूलगुल्मार्शोजठरापहम्॥५५॥
ब्रद्धनपाण्डवामयप्लीहयोनिदोषज्वरकृमीन्। वातश्लेष्मामयान् सर्वनिनुन्मादांश्चापकर्षति॥५६॥ इत्यपरं
लशुनादयं घृतम्

laśunānāṁ śatāṁ triṁśadabhayāstryūṣanāt palam| gavāṁ carmamasīprasthō
dvyādhakāṁ kṣīramūtrayōḥ||49|| purāṇasarpiṣah prastha ēbhiḥ siddham prayojayēṭ|
hiṅgucūrṇapalam śītē dattvā ca madhumāṇikām||50|| taddōṣāgantusambhūtānunmādān
viśamajvarān| apasmārāṁśca hantyāśu pānābhyañjananāvanaiḥ||51|| iti laśunādyāṁ
ghṛtamlaśunasyāvinaṣṭasya tulārdhaṁ nistuṣīkṛtam| tadardhaṁ daśamūlasya
dvyādhakē'pāṁ vipācayēṭ||52|| pādaśēṣē ghṛtraprasthaṁ laśunasya rasaṁ tathā|
kōlamūlakavṛkṣāmlamātuluṅgārdrakai rasaiḥ||53||
dāḍimāmbusurāmaстukāñjikāmlaistadardhikaiḥ|
sādhayēttriphalādārulavaṇavyōṣadīpyakaiḥ||54|| yavānīcavyahiṅgvamlavētasaiśca
palārdhikaiḥ| siddhamētat pibēcchūlagulmārśōjaṭharāpaham||55||
bradhnapāñḍvāmayaplīhayōnidōṣajvarakṛmīn| vātaślēṣmāmayān
sarvānummādāṁścāpakarṣati||56|| ityaparam laśunādyāṁ ghṛtam laśunAnAM shataM
triMshadabhyAstryUShaNAt palam| gavAM carmamaslprasto dvyADhakaM
kShIramUtrayoH||49|| purANasariShaH prastha ebhiH siddhaM prayojayet|
hi~ggucUrNapalaM shite dattvA ca madhumANikAm||50||
taddoShAgantusambhUtAnunmAdAn viShamajvarAn| apasmArAMshca hantyAshu
pAnAbhya~jjananAvanaiH||51|| iti laśunAdyaM ghRutamlaśunasyAvinaShTasya
tulArdhaM nistuShIkRutam| tadardhaM dashamUlasya dvyADhake~apAM
vipAcayet||52|| pAdasheShe ghRutaprasthaM laśunasya rasaM tathA|
kolamUlakavRukShAmlamAtulu~ggArdrakai rasaiH||53||
dADimAmbusurAmastukA~jjikAmlaistadardhikaiH|
sAdhayettriphalAdArulavaNavyoShadIpyakaiH||54||
yavAnlcavyahi~ggvamlavetasaiśca palArdhikaiH| siddhamētat
pibecchUlagulmArshojaTharApaham||55||
bradhnapANDvAmayaplīhayonidoShajvarakRumIn| vAtashleShmAmayAn
sarvAnunmAdAMshcApakarShati||56|| ityaparam laśunAdyaM ghRutam

One hundred dehusked bulbs of garlic, 30 fruits of *haritaki*, *trikatu* 40 gm ,ash of cow leather 640 gm, cow milk and cow urine 5.12kg should be well cooked with ten year old cow ghee 640 gm .After it is well cooked and cooled, 40 gms of powder of *hingu*(asafoetida) and honey 320gm should be added .This *lashunadya ghrita* applied in

the form of intake, massage and snuffing alleviates quickly all types of *unmada*, both endogenous and exogenous, intermittent fever and epilepsy. [49-51]

Second formulation of lashunadya ghrita

Undamaged garlic decorticated -200gm, *dashamula* -100gm should be boiled in 5.12 liters of water and reduced to one fourth. Thereafter ghee -640 gm garlic juice -640 gm along with the juice of *kola* (jujube), radish, *vrikshamla*, *matulunga* and fresh ginger, pomegranate, *sura*, curd water and sour gruel -each 320 ml and the past of *triphalas*, *devadaru*, rocksalt, *trikatu*, *ajamoda*, *yavani*, *chavya*, *hingu* and *amlavetasa* -each 20 gm should be cooked. This medicated ghee by intake alleviates colic, *gulma*, piles, *udara*, inguinal hernia, anemia, spleen enlargement, female genital disorders, fever, worms, disorder of *vata*, *kapha* and all types of *unmada*. [52-56]

Different useful recipes of medicated ghee

हिङुना हिङुपण्या च सकायस्थवयःस्थया| सिद्धं सर्पिर्हितं तदवदवयःस्थाहिङुचोरकैः||५७|| केवलं सिद्धमभिर्वा पुराणं पाययेद्घृतम्| पाययित्वोत्तमां मात्रां शब्दे रुन्धयाद्गृहेऽपि वाऽ॒५८॥ विशेषतः पुराणं च घृतं तं पाययेद्भैषक्| त्रिदोषधनं पवित्रत्वादविशेषाद्ग्रहनाशनम्||५९॥ गणकर्माधिकं पानादास्वादात् कटुतिक्तकम्| उग्रगन्धं पुराणं स्याददशवर्षस्थितं घृतम्||६०॥ लाक्षारसैनिभं शीतं तदधि सर्वग्रहापहम्| मेद्यं विरेचनेष्वग्र्यं प्रपुराणमतः परम्||६१॥ नासाध्य नाम तस्यास्ति यत् स्यादवर्षशतस्थितम्| दृष्टं स्पृष्टमथाद्यातं तदधि सर्वग्रहापहम्||६२॥ अपस्मारग्रहोन्मादवतां शस्तं विशेषतः||६३।

hiṅgunā hiṅguparnyā ca sakāyasthavayaḥsthayā| siddham sarpirhitam
tadvadvayaḥsthāhiṅgucōrakaiḥ||57|| kēvalam siddhamēbhīrvā purāṇam pāyayēdgṝtam|
pāyayitvōttamāṁ mātrāṁ śvabhrē rundhyādgr̄hē'pi vā||58|| viśēṣataḥ purāṇam ca
ghṝtam tam pāyayēdbhiṣak| tridōṣaghnam pavitravādvīśēṣādgrahanāśanam||59||
guṇakarmādhikam pānādāsvādāt kaṭutiktakam| ugragandham purāṇam
syāddasavarṣasthitam ghṝtam||60|| lākṣārasanibhāṁ ūtāṁ taddhi sarvagrahāpaham|
mēdhyāṁ virēcanēṣvagryāṁ prapurāṇamataḥ param||61|| nāsādhyāṁ nāma tasyāsti
yat syādvarṣaśasthitam| dṝṣṭāṁ spr̄ṣṭamathāghrātāṁ taddhi sarvagrahāpaham||62||
apasmāragrahōnmādavatāṁ ūstāṁ viśēṣataḥ||63| hi~ggunA hi~gguparNyA ca
sakAyasthavayaHsthayA| siddhaM sarpirhitaM tadvadvayaHsthAhi~ggucorakaiH||57||
kevalaM siddhamebhīrvA purANaM pAyayedghRutam| pAyayitvottamAM mAtrAM
shvabre rundhyAdgRuhe~api vA||58|| visheShataH purANaM ca ghRutaM taM
pAyayedbhiShak| tridoShaghnaM pavitravAdvisheShAdgrahanAshanam||59||
guNakarmAdhikaM pAnAdAsvAdAt kaTutiktakam| ugragandhaM purANaM
syAddashavarShasthitam ghRutam||60|| IAkShArasanibhāM shItaM taddhi
sarvagrahApaham| medhyaM virecaneShvagryaM prapurANamataH param||61||
nAsAdhyaM nAma tasyAsti yat syAdvarShashasthitam| dRuShTaM
spRuShTamathAghrAtaM taddhi sarvagrahApaham||62|| apasmAragrahanomAdavatAM
shastaM visheShataH||63|

1. Ten year old ghee cooked with *hingu*, *hinguparni*, *kayastha*, *vayastha* is useful.
2. Similar is the ghee cooked with *vayastha*, *hingu* and *choraka*. The old ghee alone or cooked with the above drugs be administered.

After administrating the maximum dose the patient should be kept in isolation in some underground ditch or room. Particularly old ghee should be administrated to the patients of *unmada*. [57-58]

Therapeutic utility of old ghee

Old ghee alleviates *tridosha*, particularly destroys demonic seizures because of being pure/sacred nature, by intake is more potent in properties and is pungent- bitter in taste. The ghee stored for ten years is taken as old (*puraana ghrita*). It is irritant in smell. In color it is like solution of lacquer in appearance, cold and destroys all *grahas*. It promotes intellect and is an excellent purgative.

Ghee kept beyond ten years is called as *pra-purana* (extremely old). There is no disease, which is incurable for the ghee which is old by one hundred years. It destroys all the *grahas* by seeing, touching, inhaling and is particularly recommended for those suffering from epilepsy (*apasmara*), *grahas* (demonic seizures) and *unmada* . [59-62]

External applications in *vata-kapha* dominant *unmada*

एतानौषधयोगान् वा विधेयत्वमगच्छति॥६३॥ अञ्जनोत्सादनालेपनावनादिषु योजयेत् शिरीषो मधुकं हिङु लशुनं तगरं वचा॥६४॥ कष्ठं च बस्तमूत्रेण पिष्टं स्यान्नावनाञ्जनम् तद्वद्व्योषं हरिद्रे द्वे मञ्जिष्ठाहिङ्गसर्षपाः॥६५॥ शिरीषबीजं चोन्मादग्रहापस्मारनाशनम् पिष्टवा तुल्यमपामार्गं हिङ्गवालं हिङुपत्रिकाम्॥६६॥ वार्तिः स्यान्मरिचार्धांशा पित्ताभ्यां गोशृगालयोः। तयाऽञ्जयेदपस्मारभूतोन्मादज्वरादितान्॥६७॥ भ्रातार्तानमरात्तर्शच नरांशैव द्वगमये। मरिचं चातपे मांसं सपितं स्थितमञ्जनम्॥६८॥ वैकृतं पश्यतः कार्यं दौषभूतहतस्मृतेः। सिद्धार्थको वचा हिङ्ग करञ्जो देवदारु च॥६९॥ मञ्जिष्ठा त्रिफला श्वेता कटभीत्वक कटुत्रिकम् समांशानि प्रियहिङ्गश्च शिरीषो रजनीदवयम्॥७०॥ बस्तमूत्रेण पिष्टोऽयमगदः पानमञ्जनम् नस्यमालेपनं चैव स्नानमुद्वर्तनं तथा॥७१॥ अपस्मारविषोन्मादकृत्यालक्ष्मीज्वरापहः। भूतेभ्यश्च भयं हन्ति राजद्वारे च शस्यते॥७२॥ सपिरेतेन सिद्धं वा सगोमूत्रं तदर्थकृता प्रसेके पीनसे गन्धैर्धमवर्तिं कृतां पिबेत्॥७३॥ वैरेचनिकधमोक्तैः श्वेताद्यैर्वा सहिङ्गुभिः। शल्लकोलूकमार्जारजम्बूकवृक्कबस्तौः॥७४॥ मूत्रपित्तशकूल्लोमनखैश्चमैभिरेव च। सेकाञ्जनं प्रधमनं नस्यं धूमं च कारयेत्॥७५॥ वातश्लेष्मात्मके प्रायः ...॥७६॥

ētānauṣadhyōgān vā vidhēyatvamagacchatī॥६३॥ añjanōtsādanālēpanāvanādiṣu yōjayēt̄ śirīṣō madhukarṁ hiṅgu laśunam tagaram vacā॥६४॥ kuṣṭham ca bastamūtrēṇa piṣṭam syānnāvanāñjanam| tadadvyōṣam haridrē dvē mañjishthāhiṅgusarṣapāḥ॥६५॥ śirīṣabījam cōnmādagrahāpasmāranāśanam| piṣṭvā tulyamapāmārgam [1] hiṅgvālam hiṅgupatrikām॥६६॥ vārtih syānmaricārdhāṁśā pittābhyaṁ gōśṛgālayōḥ| tayā'ñjayēdapasmārabhūtōnmādajvarārditān॥६७॥ bhūtārtānamarārtāmśca narāmścaiva dṛgāmayē| maricam cātāpē māṁśam sapittam sthitamañjanam॥६८॥ vaikṛtam paśyataḥ kāryam dōshabhūtahatasmṛtēḥ| siddhārthakō vacā hiṅgu karañjō dēvadāru ca॥६९॥ mañjishthā triphalā śvētā katabhītvak kaṭutrikam| samāṁśāni priyaṅguśca śirīṣō rajañdvayam॥७०॥ bastamūtrēṇa piṣṭo'yamagadah pānamañjanam| nasyamālēpanam caiva snānamudvartanam tathā॥७१॥ apasmāraviṣōnmādakṛtyālakṣmīvarāpahāḥ| bhūtēbhyaśca bhayaṁ hanti rājadvārē ca śasyatē॥७२॥ sarpirētēna siddham vā sagōmūtram tadarthakṛt| prasēkē pīnasē gandhairdhūmavartim kṛtāṁ pibēt॥७३॥ vairēcanikadhūmōktaiḥ śvētādyairvā sahiṅgubhiḥ|

śallakōlūkamārjārajambūkavṛkabastajaiḥ||74|| mūtrapittaśakṛllōmanakhaiścarmabhirēva
 ca] sēkāñjanāṁ pradhamanāṁ nasyāṁ dhūmarāṁ ca kārayēt||75|| vātaślēśmātmakē
 prāyah ...|76| etAnauShadHayogAn vA vidheyatvamagacchatī||63||
 a~jjanotsAdanAlepanAvanAdiShu yojayet] shirlSho madhukaM hi~ggu lashunaM
 tagaraM vacA||64|| kuShThaM ca bastamUtreNa piShTaM syAnnAvanA~jjanam|
 tadadvyoShaM haridre dve ma_{jjishThAhī}ggusarShapAH||65|| shirlShabljaM
 conmAdagrahApasmAranAshanam| piShTvA tulyamapAmArgaM [1] hi~ggvAlaM
 hi~ggupatrikAm||66|| vArtiH syAnmaricArdhAMshA pittAbhyAM goshRugAlayoH|
 tayA_ajjayedapasmArabhUtonmAdajvarArditAn||67|| bhUtArtAnamarArtAMshca
 narAMshcaiva dRugAmaye] maricaM cAtape mAMsaM sapittaM sthitama~jjanam||68||
 vaikRutaM pashyataH kAryaM doShabhUtahatasmRuteH| siddhArthako vacA hi~ggu
 kara~jjo devadAru ca||69|| ma~jjiShThA triphala shvetA kaTabhItvak kaTutrikam|
 samAMshAni priya~ggushca shirlSho rajaṇIdvayam||70|| bastamUtreNa
 piShTo~ayamagadaH pAnama~jjanam| nasyamAlepanaM caiva snAnamudvartanaM
 tathA||71|| apasmAraviShonmAdakRutyAlakShmljvarApahaH| bhUtebhyaShca bhayaM
 hanti rAjadvAre ca shasyate||72|| sarpiretena siddhaM vA sagomUtraM tadarthakRut|
 praseke plnase gandhairdhUmavartiM kRutAM pibet||73|| vairescanikadhUmoktaiH
 shvetAdyairvA sahi~ggubhiH| shallakolUkamArjArajamBukRukabastajaiH||74||
 mUtrapittashakRullomanakhaishcarmabhireva ca] sekA~janaM pradhamanaM nasyaM
 dhUmaM ca kAreyt||75|| vAtashleShmAtmake prAyaH ...|76|

If the patient does not come under control, the following formulations should be use as collyrium (*anjana*), anointing (*utsadana*), paste (*alepa*), inhalation therapy (*navana*) etc. [63 1/2]

Shirisha, madhuka, hingu, lashuna, tagara, vacha and *kushtha* powdered and triturated with goat's urine are useful for snuff and collyrium.

Likewise, *trikatu*, two types of *haridra*, *manjishta*, *hingu*, *sarshapa*, seeds of *shirisha* used as snuff and collyrium, alleviate *unmada*, *grahas* and epilepsy. [641/2-1/2 66]

Apamarga, hingu, haratala, and *hingupatrika-* in equal quantity, *maricha* in half quantity are powdered with bile of cow and jackal and made into wick (varieties). This stick is applied to eyes in epilepsy, *unmada*, caused by evil spirits, possession by evil spirits and gods and in eye disease. [661/2-1/2 68]

Maricha impregnated with (the above) bile and kept in the sun for a month makes a collyrium which is useful in defects of vision and loss of memory caused by vitiated *doshas* and demonic seizures. [681/2-1/2 69]

Siddharthakadi Agada

White mustard, *vacha*, *hingu*, *karanja*, *devadaru*, *manjishta*, *triphala*, *shveta*, *katabhi* (bark), *trikatu*, *priyangu*, *shirisha* and two types of *haridra* – all taken in equal quantity are powdered with goat's urine. This is an anti-poison formulation and used as intake, collyrium, snuff, paste, bath and anointing. It alleviates epilepsy, poisoning, *unmada*,

magical spells, inauspiciousness and fever. It averts fear from the spirits and also protects in royal place.

Ghee cooked with these drugs along with cow's urine serves the same therapeutic purpose. [691/2-1/2 73]

- If there is excessive salivation and chronic coryza, the smoking cigar (medicated cigar) made of aromatic substances should be given for smoking. These fragrant and aromatic substances are described under the *vairechanika dhuma* (medicated smoking)[*Cha.Sa.Sutra Sthana chapter 5*] . [731/2-1/2 74]
- Similarly, the patient should be given medicated cigar prepared from *shweta* along with *hingu*.
- In the *unmada* caused by *vata* and *kapha*, sprinkling collyrium(*anjana*), blowing(*pradhamana*), snuffing(*nasya*) and smoking(fumigation) should be done with application of urine, bile, feces, skin, hairs, nails and hide of porcupine (*shallaka*), owl (*uluka*), cat (*marjara*), jackal (*jambuka*), wolf (*vrika*) and goat (*basta*). [741/2-1/2 76]

Treatment of *pitta* dominant *unmada*

... पैतिके तु प्रशस्यते। तिक्तकं जीवनीयं च सर्पिः स्नेहश्च मिश्रकः॥७६॥ शीतानि चान्नपानानि मधुराणि मृदूनि च। शङ्खकेशान्तसन्धौ वा मोक्षयेऽज्ञो भिषक् सिराम्। उन्मादे विषमे घैव ज्वरेऽपस्मार एव च॥७७॥

... paittikē tu praśasyatē| tiktakam jīvanīyam ca sarpiḥ snēhaśca miśrakah||76|| śītāni cānnapānāni madhurāṇi mṛdūni ca| śaṅkhakēśantasandhau vā mōkṣayējjñō bhiṣak sirām| unmādē viṣamē caiva jvarē'pasmāra ēva ca||77|| ... paittike tu prashasyatē| tiktakaM jlvanlyam ca sarpiH snehashca mishrakaH||76|| shltAni cAnnapAnAni madhurAni mRudUni ca| sha~gkhakeshAntasandhau vA mokShayejj~jo bhiShak sirAm| unmAde viShame caiva jvare~apasmAra eva ca||77||

In *pitta* dominant type of *unmada*, the patients should be given *tikta*, and *jivaniya ghrita* (ghee cooked with bitter and vitalisers e.g. *maha tiktaka ghrita* [*Cha. Sa.Chikitsa Sthana 7*] and *jivaniya ghrita* [*Cha. Sa.Chikitsa Sthana 29*] and *mishraka sneha*[*Cha. Sa.Chikitsa Sthana 5*] are efficacious. Moreover, the patient should be given cold, sweet and soft food and drinks or the physician should perform blood-letting vein situated at the joining place of temple and the end of hair line in *unmada*, irregular fever and epilepsy. [76-77]

Isolation of *unmada* patients

घृतमांसवितृप्तं वा निवाते स्थापयेत् सुखम्। त्यक्त्वा मतिस्मृतिभंशं सञ्ज्ञां लब्ध्वा प्रमुच्यते ||७८||

ghṛtamāṁsa vitṛptam vā nivātē sthāpayēt sukham| tyaktvā matismṛtibhraṁśam sañjñām labdhvā pramucyatē [1] ||78|| ghRutamAMsavitRuptaM vA nivAtē sthApayet sukham| tyaktvA matismRutibhraMshaM sajjAM labdhvA pramucyate [1] ||78||

The patient should be restricted to wind-free place after taking meat and ghee in his diet to his satisfaction as a result, the patient overcomes the loss of intellect and memory and regains sense and consciousness. Thus, he becomes free from disease. [78]

Psychotherapy and other therapies

आश्वासयेत् सुहृदवा तं वाक्यैर्धर्मार्थसंहितैः। ब्रूयादिष्टविनाशं वा दर्शयेददभुतानि वा॥७९॥ बद्धं
सर्षपतैलाक्तं न्यसेदवोत्तानमातपे। कपिकच्छवाऽथवा तप्तैलैहृतैलजलैः स्पृशेत्॥८०॥ कशाभिस्ताडयित्वा
वा सबद्धं विजने गृहो। रुन्ध्याच्चेतो हि विभ्रान्तं व्रजत्यस्य तथा शमम्॥८१॥ सर्षणोदधृतदंष्ट्रेण दान्तैः
सिंहैर्गजैश्च तम्। त्रासयेच्छस्त्रहस्तैर्वा तस्करैः शत्रभिस्तथा॥८२॥ अथवा राजपुरुषा बहिर्नीत्वा सुसंयतम्।
त्रासयेयर्वद्धेनैनं तर्जयन्तो नृपाजया॥८३॥ देहदुःखभयेभ्यो हि परं प्राणभयं स्मृतम्। तेन याति शमं तस्य
सर्वतो वैप्लुतं मनः॥८४॥

āśvāsayēt suhrdvā tam vākyairdharmārthasamhitaiḥ| brūyādiśṭavināśam vā
darśayēdadbhutānī vā॥७९॥ baddham sarṣapatailāktam nyasēdvōttānamātāpē|
kapikacchvā'thavā taptairlōhatalajalaiḥ spr̄sēt॥८०॥ kaśābhīstādayitvā vā subaddham
vijanē gr̄hē| rundhyāccētō hi vibhrāntarām vrajatyasya tathā śamam॥८१॥
sarpeṇōddhṛtadāṁśṭrēna dāntaiḥ siṁhaigajaiśca tam| trāsayēcchastrahastairvā
taskaraiḥ śatrubhistathā॥८२॥ athavā rājapurushā bahirnītvā susamyatam|
trāsayēyurvadhēnainaṁ tarjayantō nṛpājñayā॥८३॥ dēhaduḥkhabhayēbhyō hi param
prāṇabhayaṁ smṛtam| tēna yāti śamam tasya sarvatō viplutā manah॥८४॥ AshvAsayet
suhRudvA taM vAkyairdharmArthasaMhitaiH| brUyAdiShTavinAshaM vA
darshayedadbhutAni vA॥७९॥ baddhaM sarShapataiAktaM nyasedvottAnamAtape|
kapikacchvA~athavA taptairlohatalajalaiH spRushet॥८०॥ kashAbhistADayitvA vA
subaddhaM vijane gRuhe| rundhyAcceto hi vibhrAntaM vrajatyasya tathA shamaM॥८१॥
sarpeNoddhRutadaMShTreNa dAntaiH siMhairgajaishca tam| trAsayecchastrahastairvA
taskaraiH shatrubhistathA॥८२॥ athavA rAjapurushA bahirnltvA susaMyatam|
trAsayeyurvadhēnainaM tarjayanto nRupAj~jayA॥८३॥ dehaduHkhabhayebhyo hi paraM
prANabhayaM smRutam| tena yAti shamaM tasya sarvato viplutaM manaH॥८४॥

The patients should be assured by a friend and consoled with religious, moral statements and purposeful words. They should tell him the loss of some extremely favorite person or thing or show him some astonishing and surprising things(to subside the episode of insanity). [79]

After massaging with mustard oil, the patient should be tied (with ropes) and lay prostrate in the sun, or should touch him with bristles of *kapikacchu* or heated iron rods or burnt with hot oil or water. [80]

Having tied him well, he should be beaten with whips (hunter) and put him in a confined to a lonely room. Thus his perturbed mind gets pacified. [81]

He should be terrorized by biting of snakes with their fangs removed or by well-trained lions or elephants, or armed criminals or enemies. [82]

Alternatively, he should be terrorized by royal personnel (police) having taken him outside well-tied, arrested and terrorize him intimidating to kill (execution) by the order of king. [83]

The danger to the life is above that of the fear of injury to the body. Therefore, the perverted mind of the patient as such gets distracted from all directions and gets pacification and regains normalcy through the above mentioned measures. [84]

Therapies in mental trauma patients

इष्टद्रव्यविनाशात् मनो यस्योपहन्यते । तस्य तत्सद्शप्राप्तिसान्त्वाश्वासैः शमं नयेत्॥८५॥
कामशोकभयक्रोधहर्षर्ष्यालोभसम्भवान् परस्परप्रतिद्वन्द्वैरभिरेव शमं नयेत्॥८६॥

iṣṭadravyavināśāttu manō yasyōpahanyatē| tasya tatsadṛśaprāptisāntvāśvāsaiḥ śamarṁ nayēt||85|| kāmaśōkabhaya krodhaharṣērṣyālōbhasambhavān| parasparapratidvandvairēbhīrēva śamarṁ nayēt||86|| iShTadravyavinAshAttu mano yasyopahanyate| tasya tatsadRushaprAptisAntvAshvAsaiH shamaM nayet||85|| kAmashokabhaya krodhaharSherShyAlobhasambhavAn| parasparapratidvandvairebhīreva shamaM nayet||86||

If the mental derangement is due to the loss of some dearly loved object, he should be pacified by consoling and assuring him by providing a similar thing. Simultaneously, he should be consoled by pleasant assurances (by family members and friends) as a result of which he recovers from illness.

If the mental derangement is due to the passion (*kama*), grief (*shoka*), fear (*bhaya*), anger (*krodha*), exhilaration (*harsha*), envy (*irshya*), and greed (*lobha*), they should be pacified by their mutually antagonizing and contradictory factors . [85-86]

Spiritual therapies in exogenous type of *unmada*

बुद्ध्वा देशं वयः सात्म्यं दोषं कालं बलाबले| चिकित्सितमिदं कर्यादुन्मादे भूतदोषजे॥८७॥
देवर्षिपितृगन्धर्वेन्मत्स्य तु बुद्धिमान्| वर्जयेदञ्जनादीनि तौक्षणानि क्रूरकर्म च॥८८॥ सर्पिष्पानादि
तस्येह मृदु भैषज्यमाचरेत्| पूजा बल्युपहारांश्च मन्त्राञ्जनविर्धीस्तथा॥८९॥ शान्तिकर्मष्टिहोमांश्च
जपस्वस्त्ययनानि च| वेदोक्तान् नियमांश्चापि प्रायशिचितानि चाचरेत्॥९०॥ भूतानामधिपं देवमीश्वरं
जगतः प्रभम्| पजयन् प्रयतो नित्यं जयत्यन्मादजं भयम्॥९१॥ रुद्रस्य प्रमथा नाम गणा लोके चरन्ति ये|
तेषां पूजां च कुर्वेण उन्मादेभ्यः प्रमुच्यते॥९२॥ बलिभिर्मङ्गलैर्हैमेरोषद्यगदधारणैः|
सत्याचारतपौजानप्रदाननियमव्रतैः॥९३॥ देवगोब्रह्मणानां च गरुणां पूजनेन च| आगन्तुः प्रशमं याति
सिद्धैर्मन्त्रौषधैस्तथा॥९४॥ यच्चोपदेक्ष्यते किञ्चिदपस्मारचिकित्सिते| उन्मादे तच्च कर्तव्यं
सामान्यादधेतुदृष्ययोः॥९५॥

buddhvā dēśam vayah sātmyam dōṣam kālam balābalē| cikitsitamidam kuryādunmādē bhūtadōṣajē॥८७॥ dēvarṣipitṛgandharvairunmattasya tu buddhimān| varjayēdañjanādīni tīkṣṇāni krūrakarma ca॥८८॥ sarpiṣpānādi tasyēha mṛdu bhaiṣajyamācarēt| pūjāṁ balyupahārāṁśca mantrāñjanavidhīṁstathā॥८९॥ śāntikarmēṣṭihōmāṁśca japaśvastyayanāni ca| vēdōktān niyamāṁścāpi prāyaścittāni cācarēt॥९०॥ bhūtānāmadhipam dēvamīśvaraṁ jagataḥ prabhum| pūjayan prayatō nityam jayatyunmādajam bhayam॥९१॥ rudrasya pramathā nāma gaṇā lōkē caranti yē| tēśāṁ

pūjāṁ ca kurvāṇa unmādēbhyaḥ pramucyatē||92||
 balibhirmaṅgalairhōmairōśadhyagadadhāraṇaiḥ|
 satyācāratapōjñānapradānaniyamavrataiḥ||93|| dēvagōbrahmaṇānāṁ ca gurūṇāṁ
 pūjanēna ca āgantuḥ praśamar̄ yāti siddhairmantrauṣadhaistathā||94||
 yaccōpadēkṣyatē kiñcidapasmāracikitsitē| unmādē tacca kartavyaṁ
 sāmānyāddhētudūṣayōḥ||95|| buddhvA deshaM vayaH sAtmyaM doShaM kAlaM
 balAbale| cikitsitamidaM kuryAdumAde bhUtadoShaje||87||
 devarShipitRugandharvairunmattasya tu buddhimAn| varjayeda~jjanAdIni tlkShNAni
 krUrakarma ca||88|| sarpiShpAnAdi tasyeha mRudu bhaiShajyamAcaret| pUjAM
 balyupahArAMshca mantra~jjanavidhIMstathA||89|| shAntikarmeShTihomAMshca
 japaśvastyayanAni ca| vedoktAn niyamAMshcApi prAyashcittAni cAcaret||90||
 bhUtaNAmadhipaM devamIshvaraM jagataH prabhumi| pUjayan prayato nityaM
 jayatyunmAdujaM bhayam||91|| rudrasya pramathaM nAma gaNA loke caranti ye|
 teShAM pUjAM ca kurvANa unmAdebhyaH pramucyate||92||
 balibhirma~ggalairhomairoShadhyagadadhAraNaiḥ|
 satyAcAratapoj~jAnapradAnaniyamavrataiḥ||93|| devagobrahmaNAnAM ca gurUNAM
 pUjanena ca| AgantuH prashamaM yAti siddhairmantrauShadhaistathA||94||
 yaccopadekShyate ki~jcidadpasmAracikitsite| unmAde tacca kartavyaM
 sAmAnyAddhetudUShyayoḥ||95||

Physician should administer the treatment of *unmada*, caused by spirits or *dosha*, after examining place, age, suitability, morbidity, time and strength or otherwise. [87]

In the *unmada* caused by gods, sages, forefather or *gandharvas*, the wise physician should avoid irritant collyrium etc. and other harsh measures. Instead he should use intake of ghee and other mild medicament. Moreover, worship, offering (*bali*), gifts (*upahara*), recitation of hymns(*mantra*), collyrium (*anjana*), pacificatory rituals (*shanti karma*) and acts, sacrifices, offering oblation to the fire (*homa*), repetition of hymns/incantations(*japa*), auspicious rituals /blessings (*swastyayana*), vedic rites and expiations (*prayaschita*) are useful for these patients . [88-90]

If one worships Lord Shiva daily, the supreme controller of all *bhutas* (supernatural beings) and lord of the world with sincerity and the all powerful gods with devotion, he overcomes the fear from attack of *unmada*.[91]

Pramathas, attendants of Lord Rudra, move around the world, if worshipped, they help in recovery from *unmada*. [92]

The exogenous *unmada* is pacified by offerings (*bali*), auspicious acts (*mangal karma*), oblation (*homa*), wearing herbs roots (*aushadhi-dharana*), anti poison drugs (*agada-dharana*), good conduct (*satya-achara*), austerity (*tapa*), knowledge (*jnana*), gifts (*pradana*), spiritual duties (*niyama*), vows (*vrata*); worship of god, cows, *brahmanas* and preceptors (*guru*), by sacred hymns and drugs. [93-94]

Because of similarity in etiology and substratum of morbidity, the remedial measures prescribed for epilepsy (*pasma*) should also be adopted for *unmada*. [95]

निवृत्तामिषमद्यो यो हिताशी प्रयतः शुचिः। निजागन्तुभिरुन्मादैः सत्त्ववान् न स युज्यते॥९६॥

nivṛttāmiṣamadyō yō hitāśī prayataḥ śuciḥ| nijāgantubhirunmādaiḥ sattvavān na sa yujyatē॥९६॥ nivRuttAmiShamadyo yo hitAshl prayataH shuciH| nijAgantubhirunmAdaiH sattvavAn na sa yujyate॥९६॥

The person having preponderance of *sattva* (strong mental strength), abstaining from meat and wine, taking wholesome diet, sincere and disciplined and observing purity of mind and body is not affected by either endogenous or exogenous type of *unmada*. [96]

Signs of complete cure of *unmada*

प्रसादश्चेन्द्रियार्थनां बुद्ध्यात्ममनसां तथा। धातूनां प्रकृतिस्थत्वं विगतोन्मादलक्षणम्॥९७॥

prasādaścēndriyārthanāṁ buddhyātmamanasāṁ tathā| dhātūnāṁ prakṛtisthatvam
vigatōnmādalakṣaṇam॥९७॥ prasAdashcendriyArthanAM buddhyAtmamanasAM tathA|
dhAtUnAM prakRutisthatvaM vigatonmAdalakShaNam॥९७॥

Blissful feeling (in perception) of sense objects and also of intellect, self and mind along with normalcy of tissue elements (*dhatus*) are the signs of having recovered from *unmada*. [97]

Summary

तत्र श्लोकः-

उन्मादानां समुत्थानं लक्षणं सचिकित्सितम्। निजागन्तुनिमित्तानामुक्तवान् भिषगुत्तमः॥९८॥

tatra ślōkaḥ-

unmādānāṁ samutthānam lakṣaṇāṁ sacikitsitam| nijāgantunimittānāmuktavān
bhiṣaguttamaḥ॥९८॥ tatra shlokaH-

unmAduAnAM samutthAnaM lakShaNaM sacikitsitam| nijAgantunimittAnAmuktavAn
bhiShaguttamaH॥९८॥

Now summing, up verses-

(Punarvasu) the best of physician told about the etiology, symptoms and treatment of the types of *unmada* caused by endogenous or exogenous factors. [98]

Thus, ends ninth chapter on the treatment of *unmada* in Chikitsa Sthana in the treatise composed by Agnivesha, redacted by Charak and reconstructed by Dridhbala as it was unavailable.[9]

Tattva Vimarsha (Fundamental Principles)

- The diet poor in qualities, behavioral abnormalities, frequent psychological trauma mainly due to fear or exhilaration and irregular postures play important role in causing *unmada*.

- The individual with low mental strength (level of *sattva guna* as in weak minded people) are more susceptible for *unmada*.
- *Hridaya* (seat of mind) also holds the site of intellectual functions and it is vitiated in patho-physiology of *unmada*.
- *Unmada* involves excessive affliction of intellect, mind and memory. This may be due to either endogenous causes or exogenous causes.
- The endogenous causes include vitiation of *dosha* resulting in variety of *unmada* with their dominance. *Sharira dosha* can afflict the psyche, intellect and memory to cause a psycho-somatic disorder.
- External social, psychological and spiritual factors can also lead to exogenous *unmada* in similar way.
- Diagnosis of exogenous *unmada* is based upon the behavior pattern of afflicted person. The treatment includes assessment of intention of the spirits in terms of pleasure and worship. It should be ascertained as such by the liking (intentions) and behavior (conduct) of the patients and should be treated with administration of the *mantras* (incantations/hymns) and drugs mixed with the respective gifts and offerings. This is immaterialistic treatment.
- Various purification procedures are administered as per the *dosha* dominance, strength of the patient.
- In order to prevent from getting afflicted by *unmada*, the person shall have preponderance of *sattva* (strong mental strength), abstaining from meat and wine, taking wholesome diet, sincere and disciplined and observing purity of mind and body.
- The objective of cure in *unmada* includes blissful feeling (in perception) of sense objects and also of intellect, self and mind along with normalcy of tissue elements (*dhatus*) are the signs of having recovered from *unmada*.

Vidhi Vimarsha (Applied Inferences)

Similar conditions observed in contemporary psychiatry

Nija unmada (endogenous psychoses)

1. *Vata* dominant *unmada* is similar to excited catatonic type of schizophrenia and is acute form of schizophrenia. These patients present with the symptoms of catatonic excitement with general symptoms of *unmada*. It is produced due to vitiation of *vata* along with *rajas* and *tamas doshas*. Due to excess of *rajas* and *vata*, catatonic excitement occurs.
2. The *pitta* dominant *unmada* is similar to maniac psychosis. The patients and mania, show a generalised functional overactivity or increased psychomotor activity, excitability of mood, constant movement, increased talkativeness, aggressive behavior, irritability as the prominent symptoms.
3. The Features of *kaphaja unmada* resemble closely with stuporous catatonic schizophrenia and major depressive disorder and thus they can be correlated.

4. There are clinical conditions in which alternating phases of depression and mania, known as bipolar disorders or maniac depressive psychosis. Similarly, there are forms of schizophrenia, in which excited catatonia and stuporous catatonia are alternatively present (periodic catatonia). These conditions, based upon particular *doshic* combination in the pathogenesis, as indicated by *kapha* is aggravated along with *pitta*.
5. All types of chronic, incapacitating psychotic conditions are included under the category of *sannipatika / tridoshaja unmada*. Hebephrenic schizophrenia, chronic schizophrenia and residual schizophrenia come under this category, again the difference being predominance of the *doshas* involved in the psychopathogenesis.

Agantuja unmada (exogenous psychoses)

1. Various psychoses due to possession of *grahas* and *bhutas* (supernatural beings) are included under *agantuja unmada*, which should be regarded as suffering from paranoid schizophrenia, paranoia and various other paranoid states. Paranoid schizophrenia is characterized by predominance of delusions.
2. It is important to mention that *grahas* have been christened only on the basis of the resemblance of the clinical features of the afflicted individual with the activities of those *grahas* e.g. gods, gandharvas etc. It is not that these have entered into the body of the afflicted individual. This is just the way of presentation and the writing style in Ayurveda to personify an event/process. This form of presentation is somewhat similar to syndromic classification in conventional modern medicine. Because of similarity of clinical symptoms, the patients are said to be suffering from some *graha*. These individual syndromes can also be correlated to a single disease entity from modern perspective.

Management of unmada

Yuktivyapashraya Chikitsa (rational treatment)

The purification procedures prescribed in *unmada* are :(1) *Nasya* (2) *Vamana* (3) *Virechana* (4) *Niruha basti* (5) *Anuvasana basti*. Besides these five chief *karmas*, two other preparatory and axillary *karmas* are indicated i.e. *snehana karma* and *swedana karma*. *Snehana karmas* are also carried out as *shamana* (pacification) therapy with low dose *sneha*. Especially in major psychiatric illness it is considered as a separate therapy. The other measures like *pradeha*, *utsadana*, *abhyanga*, *dhuma*, *snehapana*, etc. are also administered which stimulates the mind, intellect, memory and consciousness of the patient.

Siravedha (venesection): Besides the above methods, surgical techniques like *siravedha* (venesection) are also advocated in the treatment of mental disorders and hysteria.

In *vataja unmada*, *snehapana* has to be done. If the passage of *vayu* is obstructed laxative along with *sneha* should be given. In *kaphaja unmada*, *vamana* must be done. In *pittaja unmada*, *virechana* must be done. After completing purification, *samsarjana*

karma (lighter to heavier diet gradually) must be given. The purification of body also leads to blissful state of mind and sense organs.

Even after the body is cleansed, if the patient exhibits perversion of conduct, he should be given strong *navanam*, *anjanam*, *taadanam*.

Concept and rationale of ghrita-pana/ shamana sneha pana

Snehapana is specially indicated in *unmada*. *Shamana sneha* includes the measures that bring down the increased *doshas* to normal stage without expelling them out and without disturbing balance of other normal *doshas*. The properties like *sukshma*, *snigdha*, *picchila* and *manda* operate pharmacologically to pacify *unmada*.

Recommended therapies for dosha dominant unmada

1. *Snehana* (oleation)
2. *Swedana* (fomentation)
3. *Vamana* (emesis)
4. *Virechana* (purgation)
5. *Asthapana* and *anuvasana* bastis.
6. *Upashamana* (alleviation therapies)
7. *nasya* (errhines)
8. *dhooma* (smoking)
9. *dhoopana* (fumigation)
10. *anjana* (collyrium)
11. *avapida* (a type of nasal errhines with juice of herb) and *pradhamana* (type of snuff)
12. *abhyanga* (oil massage)
13. *pradeha* (Ointment)
14. *parisheka*(affusion)
15. *anulepana* (unction)
16. *vadha* (assault)
17. *bandha* (tying)
18. *avarodha* (confinement)
19. *vithrasana* (frightening)
20. *vismapana* and *vismarana* (inducing astonishment and forgetfulness)
21. *apatarpana* (depletion)
22. *sira vedha* (venesection) .

Specific therapies by dosha dominant unmada , and prescribed medicines

- ***Vata dominance:*** *Snehapana*, *mrudu shodhana*, *Samsarjana*, *swedana*, *niruha*, *shirovirechana*, *dhupana*, *anjana*, *dhuma*, *lepana*, *snana*.

Medicines: *Kalyanaghrita*, *maha kalyanaghrita*, *phalaghrita*, *hinguvadi ghrita*, *maha paishachakaghrita*, *lasunadighrita*, *vyosadvarti*, *sirishadvarti*, *apamargadi varti*,

marichadivarti, siddharthakadyagada, shallakyadyagada, srugaladiyoga, brahmyadivarti.

- **Pitta dominance:** *Snehana, swedana, rechana, raktamokshna, samsarjana, sirovirechana, sheeta, madhura, laghu annapana.*

Medicines: Tiktaghrita, jivanthyadighrita. mishrak sneha.

- **Kapha dominance:** *Sneha, sweda, vamana, rechana, sirovirechana, samsarjana, shirobasti, abhyanga, dhupana, anjana, dhuma, parisechana, pradeha, dhmapana.*

Medicines: *Shrigaladiyoga, lasunadighrita, katur taila, brahmyadivarti.*

1. **Daivavyapashraya Chikitsa:** One who worships Lord shiva, the supreme controller of all the *bhutas*, and the omnipotent master of whole universe regularly with devotion becomes free from attack of *unmada*. Worshipping *pramathas*, attendants of Rudra also cures *unmada*. *Bali, mangala* (recitation of mantras), *homa, aushadha agadadhaarana*, observing truth fullness, maintaining good conduct, *tapas*, charity, offering prayers to gods, cows, *brahmins*, and teachers and by using *siddha mantras* and *aushadhis* one can cure *unmada*.

Useful single drugs mentioned in unmada

Shankapushpi, Amalaki, . Mandukaparni , Sarpagandha, Brahmi , Rasona, Vacha, Devadaru, Jyotishmati, Jatiphala, Jatamansi, Mochaka, Kushtha, Karpura, Tagara ,Haritaki ,Parasikyavani, Vibhitaki, Palandu, Ashwagandha, Hingu, Kushmanda, Shatavari, Hema (gold)

Compound Formulations

1. Ghrita- Medicated ghee preparations:

1. Kalyanakaghrita
2. Mahakalyanaka ghrita ,
3. Panchagavya ghrita
4. Chetasa ghrita
5. Mahapanchagavya ghrita
6. Siva ghrita
7. Nishadi ghrita
8. Lasunadi ghrita
9. Ksheerakalyana ghrita
10. Siddhartaka ghrita
11. Tiktaka ghrita.
12. Phala ghrita
13. Brahmi ghrita
14. Dhatriyadi ghrita
15. Jivantyadi ghrita

16. Vachadi ghrita
 17. Hingvadi ghrita
 18. Mishraksneha
2. Churna (Powder):
 1. Saraswata churna
 2. Drakshadi churna
 3. Kalyanachurna
 3. Asava/Arishta:
 1. Sarasvatarishta
 2. Bhringarajasava
 3. Draksharishta
 4. Ashwagandharishta
 4. Rasoushadha (Herbo-mineral compounds):
 1. Chandabhairasava
 2. Chaturnakharasa
 3. Unmadagajakesari
 4. Unmadabhanjnaraasa
 5. Unmadaparpatirasa
 6. Sarveshvara rasa
 7. Smritisagara rasa
 8. Manasmitra
 9. Muktapishti
 5. Gutika (pills):
 1. Shivagutika
 6. Tailas (medicated Oils):
 1. Lakshadi taila
 2. Nirgundyadi taila
 3. Chandanadi taila
 4. Shiva taila
 5. Tungadrumadi taila
 6. Himasagara taila
 7. Brihatryadi taila
 8. Triphaladi taila
 9. Manjishtadi taila
 10. Chandanadi taila
 11. Bhringamalakadi taila
 12. Sahacharadi taila
 13. Balashwagandhalakhadi taila
 7. Vartis (tablets/pills):
 1. Marichadi varti

2. Apamargadi varti
3. Vyoshadi varti
4. Shirishadivarti
5. Brahmyadivarti
6. Kayasthadivarti
8. Others:
 1. Pippalyadi pradhamana
 2. Brahmi rasnadiyoga
 3. Srugalyadiyoga
 4. Siddharthakayoga
 5. Shallakyadiagada
 6. Krishnadyanjana
 7. Darvyadianjana
 8. Mahadhupa
 9. Nimbahatryadi dhupa
 10. Marichadyanjana

Pathya Apathya (Dietary Indications and contraindications)

Pathya

It is said that he who suffers from unmada should maintain cleanliness and consume food and drink, that are relishing and easily digestible, the following articles have been recommended in unmada:

1. Shakavarga (Vegetables)- Patola, brahmi, kakamachi vastuka, tanduliyaka, kushmanda.
2. Dhanyavarga (cereals/pulses):- Rakta shali, godhuma, mudga
3. Phala varga :- Draksha, panasa, matulunga, narikela, kapiththa
4. Mamsavarga:- kurmamsa (tortoise meat)
5. Gorasvarga - Kshira, navnita (butter) ghrita (ghee)
6. Paniyavarga - drink/beverages gangambu (rain water) madya (alcohol) rasala (Sugar cane) Kulmasatarpana (gruel of kulmasa)

Satvavajaya

The methods of yuktivyaprasraya treatment have been prescribed in the treatment of mental diseases. But in the derailment of manasika doshas, it is essential that the line of treatment of mental diseases should be specific and based on the theory of balancing the mental doshas (rajas and tamas). Taking into consideration all these factors, most probably in Ayurveda a separate classification of satvavajaya treatment has been specially mentioned. Charak defines it as a mind control therapy in which stress will be laid on restraining the mind from unwholesome arthas (objects). Certain techniques have been mentioned for this therapy.

The inclusion of satvavajaya chikitsa, within these primary classifications of treatment of diseases, clearly indicates that this therapy of mano-nigraha was adopted in those days as a practical therapy to over come the psychological and psychosomatic diseases.

While describing the principles of treatment, Charak prescribes the following methods of treatment for mental diseases:

1. Jnana (knowledge of spiritual scriptures)
2. Vijnana (scientific knowledge)
3. Dhairyta (sustaining courage in adverse conditions)
4. Smrti (good memories)
5. Samadhi (meditation and contemplation).

In another reference, Charak prescribes the following treatment for the mental diseases, which resembles the above lines of treatment:

1. Trivarga anveshana: Contemplation of the three objectives of life- dharma, artha, and kama
2. Tadvidyaseva : Service of those who are well versed in the treatment of mental diseases.
3. Atmajnana : Self-realization.
4. Kula-kala, desha, bala jnana: The knowledge about ones own self, country, family, age, vitality and ability.

Summary

Manovahasrotas can be understood as the channels conducting various factors that regulate behavior. Vitiation of these srotas at different levels produce abnormal behavioral patterns thereby bringing about the psychological & behavioural symptoms of unmada vis-à-vis psychosis. A number of formulations, treatment modalities, procedures and therapeutic techniques have been described with predominance of lipid predominant dosage forms esp. ghritas & tailas, which seems to be so formulated as to exert maximum effect on neural tissue by increasing bio-availability of formulation by increased ability to cross blood –brain barrier. All the preventive measures mentioned by Acaryas are aimed at bestowing relaxation and mental balance, which are the basic prerequisites of a sound mind. It may be mentioned here that sharira shuddhi is needed before attaining manasika shuddhi. The nourishing medhya medications described are particularly relevant to our times when we are forced to battle continuously against stress and strain. Need of the hour is to find practically useful formulations and treatment procedures, scrutinize them thoroughly, which would help to effectively treat the psychotic states. It may not be exaggeration to say that unmada is the only disease entity in the entire classical Ayurvedic literature where such a comprehensive management has been described and almost all the prevailing methods & forms of therapy have been used hand in hand.

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Related Chapter

- Unmada Nidana

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Apasmara Chikitsa

“Chikitsa Sthana Chapter 10. Management of Apasmara (Seizure disorders) ””

“Abstract””

The tenth chapter deals with specific features of types of “apasmara” and its management. In continuation with the earlier explanation about causative factors, patho-physiology and clinical features have been described in Apasmara Nidana, with another definition provided here in this chapter in greater detail. Specific features of dominance of “vata, pitta” and “kapha doshas” are explained and involvement of exogenous factors is mentioned. Management of “apasmara” depending on the predominance of “doshas”, influence of “agantu” (exogenous) factors are explained. Special preparations like “panchagavya ghrita, mahapanchagavya ghrita, jeevaneya ghrita,” various preparations for nasal administrations etc are given. Etiological factors, pathogenesis, features and management of an important disease called “atattvabhinivesha” (a disease of perversion of intellect) are narrated. Importance of “rasayana” (rejuvenation) and protection of patient of “unmada” and “apasmara” are also emphasized.

“Keywords””.:“Apasmara”, memory, consciousness, epilepsy, “atattvabhinivesha, unmada”, seizure disorders.

Introduction

All psychiatric and psycho-somatic diseases find their roots in the two chapters of “unmada” and “apasmara”. These diseases are caused by similar etiological factors and both manifest as “manasika vikara” (psychiatric diseases). Therefore these two chapters are placed in succession. “Manas” (mind), “buddhi” (intellect), and “smriti” (memory) are integral parts combined with “atma” (self) in understanding Ayurvedic psychiatry. The series of pathological events that take place to occlude consciousness in heart and loss of memory is distinctive feature of “apasmara”. As mentioned earlier in Apasmara Nidana, first the aggravation of “doshas” at somatic level occurs by improper and impure/foul food and excess affliction of negative emotions like worries, passion, fright, anger, grief etc at psychic level. The disease precipitates in the form of paroxysmal attack, then the negative psychological emotions occlude the consciousness at heart and thereafter leading to loss of memory.

There is always a possibility of food contamination as a causative factor for epilepsy. A case in point is of endrin-laced taquitos causing seizures in the United States Waller K, Prendergast TJ, Slagle A, Jackson RJ. Seizures after eating a snack food contaminated with the pesticide endrin. The tale of the toxic taquitos. Western Journal of Medicine. 1992;157(6):648-651.. Balance between “sattva, rajas” and “tamas” is important by avoiding the stressors that precipitate the episode of “apasmara”. Various animal products like ghee processed with medicinal herbs are utilized for medicine preparation.

“Atattvabhinivesha” is another disease specially mentioned in this chapter. It is termed as the single major disease ,i.e., “mahagada,” leading to affliction of mind and intellect. Its management is also mentioned in this context.

Sanskrit text, Transliteration and English Translation

अपस्मारचिकित्सितोपक्रमः

अथातोऽपस्मारचिकित्सितं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātō'pasmāracikitsitam vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAto~apasmAracikitsitaM vyAkhyAsyAmaH||1|| iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Apasmara Chikitsa”(Management of Epilepsy and other disorders). Thus said Lord Atreya. [1-2]

Definition of “apasmara”

स्मृतेरपगमं प्राहुरपस्मारं भिषग्विदः। तमःप्रवेशं बीभत्सचेष्टं धीसत्त्वसम्प्लवात्॥३॥

smṛtērapagamaṁ prāhurapasmāraṁ bhiṣagvidah| tamahpravēśaṁ bībhatsacēṣṭaṁ dhīsattvasamplavāt||3||

smRuterapagamaM prAhurapasmAraM bhiShagvidaH| tamaHpraveshaM
blbhatsaceShTaM dhIsattvasamplavAt||3||

The expert physicians call “apasmara” as ‘going away of memory’ characterized by black-outs (feeling of entering into darkness) and revolting movements caused by conglomeration of the intellect and the mind. [3]

Etiopathology

विभ्रान्तबहुदोषाणामहिताशुचिभोजनात् [१] | रजस्तमोऽन्यां विहते सत्त्वे दोषावृते हृदि॥४॥

चिन्ताकामभयक्रोधशोकोद्वेगादिभिस्तथा। मनस्यभिहते नृणामपस्मारः प्रवर्तते॥५॥

vibhrāntabahudōṣāñāmahitāśucibhōjanāt [1] | rajastamōbhyaṁ vihatē sattvē dōṣāvṛtē hṛdi॥4॥

cintākāmabhayakrōdhaśōkōdvēgādibhistathā| manasyabhihatē nṛṇāmapasmārah
pravartatē॥5॥

vibhrAntabahudoShANAmahitAshucibhojanAt [1] | rajastamobhyAM vihate sattve
doShAvRute hRudi||4||

cintAkAmabhaya krodhashokod vegAdibhistathA| manasyabhihate nRUNAmapasmAraH
pravartate||5||

"Apasmara" occurs in those persons, in whom: #The "doshas" are excessively aggravated and have spread to other sites ("vibhranta") due to (habitual) intake of improper/harmful and impure/contaminated food. #In whom, the "sattva" (one of the attributes of mind representing purity and consciousness) is suppressed by "rajas" (attribute of the mind representing energy and dynamism) and "tamas" (attribute of the mind representing passivity and ignorance); #The heart (site of consciousness) is obscured by aggravated "doshas"; and #Mind is distressed or annihilated by (affliction of negative emotions like) worry, passion, fright, anger, grief, anxiety etc. [4-5]

Pathogenesis and features of pre-ictal phase

धमनीभिः श्रिता दोषा हृदयं पीडयन्ति हि। सम्पीड्यमानो व्यथते मूढो भान्तेन चेतसा॥६॥

पश्यत्यसन्ति रूपाणि पतति प्रस्फुरत्यपि। जिह्वाक्षिभूः स्रवल्लालो हस्तौ पादौ च विक्षिपन्॥७॥

dhamanībhīḥ śrītā dōṣā hr̥dayam pīḍayanti hi| sampīḍyamānō vyathatē mūḍhō
bhrāntēna cētasā||6||

paśyat�asanti rūpāṇi patati prasphuratyapi| jihvākṣibhrūḥ sravallālō hastau pādau ca
vikṣipan||7||

dhamanlbhiH shritA doShA hRudayaM pIDayanti hi| sampIDyamAno vyathate mUDho
bhrAntena cetasA||6||

pashyat�asanti rUpANI patati prasphuratyapi| jihvAkShibhrUH sravallAlo hastau pAdau
ca vikShipan||7||

(By the above mentioned factors) "doshas" located in the vessels (or "dhamani", channels that carry nutrients) afflict the heart. Thus person suffers due to bewildered mind.[6]

He visualizes non-existent forms (visual hallucinations), falls down, his tongue, eyes and eyebrows become tremulous, saliva discharges from his mouth, his hands and legs are extended / bent.[7]

Post-ictal phase of "apasmara"

दोषवेगे च विगते सुप्तवत् प्रतिबुद्ध्यते।

dōṣavēgē ca vigatē suptavat pratibuddhyatē|

doShavege ca vigate suptavat pratibuddhyate|

When the surge of “doshas” is over, he wakes up as if he is getting up from sleep (regains consciousness). [8]

Types of “apasmara”

पृथगदोषैः समस्तैश्च वक्ष्यते स चतुर्विधः||८||

pr̥thagdōṣaiḥ samastaiśca vakṣyatē sa caturvidhah||8||

pRuthagdoShaiH samastaishca vakShyate sa caturvidhaH||8||

“Apasmara” is of four types including those due to separate “doshas” (“vata, pitta” and “kapha”) and due to combination of all (“sannipatika”). [8]

Features (Ictal phase)

“Apasmara” with “vata” dominance

कम्पते प्रदशेद्दन्तान् फेनोद्वामी श्वसित्यपि। परुषारुणकृष्णानि पश्येद्रूपाणि चानिलात्॥९॥

kampatē pradaśēddantān phēnōdvāmī śvasityapi| paruṣāruṇakṛṣṇāni paśyēdrūpāṇi
cānilāt||9||

kampate pradasheddantAn phenodvAml shvasityapi| paruShAruNakRuShNANi
pashyedrUpANI cAnilAt||9||

“Vatika apasmara” is characterized by trembling, grinding of teeth, frothing from the mouth, and gasping. The patient gets visual hallucinations of objects which are rough, reddish brown or black in color. [9]

“Apasmara” with “pitta” dominance

पीतफेनाङ्गवक्त्राक्षः पीतासृगूपदर्शनः। सतृष्णोष्णानलव्याप्तलोकदर्शी च पैतिकः॥१०॥

pītaphēnāṅgavaktrākṣah pītāsṛgrūpadarśanah| satṛṣṇōṣṇānalavyāptalōkadarśī ca
paittikah||10||

pltaphenA~ggavaktrAkShaH pltAsRugrUpadarshanaH|
satRuShNoShNAAnalavyAptalokadarshI ca paittikaH||10||

“Paittika apasmara” is characterized by yellowish froth, body, face and eyes. He gets visual hallucinations of yellow or blood-red objects. He has thirst, hot sensation (sensation of heat), and sees fire all over his surroundings. [10]

“Apasmara” with “kapha” dominance

शुक्लफेनाङ्गवकत्राक्षः शीतो हृष्टाङ्गजो गुरुः। पश्यञ्छुकलानि रूपाणि श्लैष्मिको मुच्यते चिरात्॥११॥

śuklaphēnāṅgavaktrākṣah śītō hṛṣṭāṅgajō guruḥ| paśyañchuklāni rūpāṇi ślaiśmikō mucyatē cirāt||11||

shuklaphenA~ggavaktrAkShaH shItO hRuShTA~ggajo guruH| pashya~jchuklAni rUpANi shlaiShmiko mucyate cirAt||11||

The “shlaishmika apasmara” is characterized by whitish froth (from the mouth), body, face and eyes, (feeling of) cold, heaviness due to stiff body. The patient gets hallucinations of white objects and recovers late. [11]

“Apasmara” with mixed features of all “dosha” dominance and prognosis

सर्वैरेतैः समस्तैस्तु लिङ्गैर्ज्ञेयस्त्रिदोषजः। अपस्मारः स चासाध्यो यः क्षीणस्यानवश्च यः॥१२॥

sarvairētaiḥ samastaistu liṅgairjñēyastridōṣajah| apasmārah sa cāsādhyō yaḥ kṣīṇasyānavaśca yaḥ||12||

sarvairetaIH samastaistu li_{ggairj}neyastridoShajaH| apasmAraH sa cAsAdhyo yaH kShINasyAnavashca yaH||12||

“Tridoshaja apasmara” is characterized by manifestation of all of above features at the same time. This type of “apasmara” is incurable. The “apasmara”, which occurs in emaciated person and in chronic stage, is also incurable. [12]

Diagnosis as per frequency of seizures

पक्षाद्वा द्वादशाहाद्वा मासाद्वा कुपिता मलाः। अपस्माराय कुर्वन्ति वेगं किञ्चिदथान्तरम्॥१३॥

pakṣādvā dvādaśāhādvā māsādvā kupitā malāḥ| apasmārāya kurvanti vēgam kiñcidathāntaram||13||

pakShAdvA dvAdashAhAdvA mAsAdvA kupitA malAH| apasmArAya kurvanti vegaM ki~jcidaThAntaram||13||

The vitiated “doshas” lead to paroxysms of “apasmara” once in fifteen days, twelve days or a month. The paroxysm may occur even after a shorter period.[13]

Management of “apasmara”

तैरावृतानां हृत्स्रोतोमनसां सम्प्रबोधनम्। तीक्ष्णैरादौ भिषक् कुर्यात् कर्मभिर्वमनादिभिः॥१४॥

tairāvṛtānāṁ hṛtsrōtōmanasāṁ samprabōdhanam| tīksṇairādau bhiṣak kuryāt
karmabhirvamanādibhiḥ||14||

tairAvRutAnAM hRutsrotomanasAM samprabodhanam| tlkShNairAdau bhiShak kuryAt
karmabhirvamanAdibhiH||14||

The heart, channels and mind which are obstructed by “doshas” shall rouse up or cleared first by strong remedial measures like “vamana” (emetic therapy) etc. [14]

Purification based on “dosha” dominance

वातिकं बस्तिभूषिष्ठैः पैत्तं प्रायो विरेचनैः। श्लैष्मिकं वमनप्रायैरपस्मारमुपाचरेत्॥१५॥

vātikāṁ bastibhūyiṣṭhaiḥ paittāṁ prāyō virēcanaiḥ| ślaiṣmikāṁ
vamanaprāyairapasmāramupācarēt||15||

vAtikaM bastibhUyiShThaiH paittaM prAyo virecanaiH| shlaishmikaM
vamanaprAyairapasmAramupAcaret||15||

“Vatika apasmara” shall be treated mainly with “basti” (medicated enema) therapy; “Paittika apasmara” shall mainly be treated with “virechana” (purgation) therapy and “shlaishmika apasmara” shall mainly be treated with “vamana” (emesis) therapy.[15]

Assurance and counselling therapy

सर्वतः सुविशुद्धस्य सम्यगाश्वासितस्य च। अपस्मारविमोक्षार्थं योगान् संशमनाञ्छृणु॥१६॥

sarvataḥ suviśuddhasya samyagāśvāsitasya ca| apasmāravimōkṣārthaṁ yōgān
saṁśamanāñchṛṇu||16||

sarvataH suvishuddhasya samyagAshvAsitasya ca| apasmAravimokShArthaM yogAn
saMshamanA~jchRuNu||16||

After proper purification is done by all above therapies and well assurance is given, the pacification formulations for relief from “apasmara” are described henceforth.[16]

“Panchagavya ghee”

गोशकृद्रसदृद्यम्लक्षीरमूत्रैः समैर्घृतम्। सिद्धं पिबेदपस्मारकामलाज्वरनाशनम्॥१७॥

इति पञ्चगव्यं घृतम्

gōśakṛdrasadadhyaṁlakṣīramūtraiḥ samairghṛtam| siddham
pibēdapasmārakāmalājvaranāśanam||17||

iti pañcagavyam ghṛtam

goshakRudrasadadhylakShIramUtraiH samairghRutam| siddhaM
pibedapasmArakAmalAjvaranAshanam||17||

iti pa~jcagavyaM ghRutam

Ingredients of “panchagavya ghee”

Juice of cow dung, sour curd prepared out of cow’s milk, cow’s urine in equal quantity and cow’s ghee.

Indications

The medicated ghee shall be taken for treating “apasmara, kamala” (jaundice) and “jwara”. [17]

“Mahapanchagavya ghee”

द्वे पञ्चमूल्यौ त्रिफला रजन्यौ कुटजत्वचम्। सप्तपर्णमपामार्गं नीलिनीं कटुरोहिणीम्॥१८॥

शङ्खाकं फल्गुमूलं च पौष्करं सदुरालभम्। द्विपलानि जलद्रोणे पक्त्वा पादावशेषिते॥१९॥

भार्गीं पाठं त्रिकटुकं त्रिवृतां निचुलानि च। श्रेयसीमाढकीं मूर्वा दन्तीं भूनिम्बचित्रकौ॥२०॥

द्वे सारिवे रोहिषं च भूतीकं मदयन्तिकाम्। क्षिपेत्पिष्टवाऽक्षमात्राणि तेन प्रस्थं घृतात् पचेत्॥२१॥

गोशकृद्रसदृश्यम्लक्षीरमूत्रैश्च तत्समैः। पञ्चगत्यमिति ख्यातं महतदमृतोपमम्॥२२॥

अपस्मारे तथोन्मादे शवयथावुदरेषु च। गुल्मार्शःपाण्डुरोगेषु कामलायां हलीमके॥२३॥

शस्यते घृतमेतत्तु प्रयोक्तव्यं दिने दिने। अलक्ष्मीग्रहरोगधनं चातुर्थकविनाशनम्॥२४॥

इति महापञ्चगत्यं घृतम्

dvē pañcamūlyau triphalā rajanyau kuṭajatvacam| saptaparṇamapāmārgam nīlinīm
kaṭurōhiṇīm||18||

śampākam phalgumūlam ca pauṣkaram sadurālabham| dvipalāni jaladrōṇē paktvā
pādāvaśēṣitē||19||

bhārgīm pāṭhām trikaṭukam trivṛtām niculāni ca| śrēyasīmāḍhakīm mūrvām dantīm
bhūnimbacitrakau||20||

dvē sārivē rōhiṣam ca bhūtīkam madayantikām| kṣipētpiṣṭvā'kṣamātrāṇi tēna [1]
prastham pacēt||21||

gōśakṛdrasadadhylakṣīramūtraiśca tatsamaiḥ| pañcagavyamiti khyātam
mahattadamṛtōpamam||22||

apasmārē tathōnmādē [2] śvayathāvudarēsu ca| gulmārśahpāṇḍurōgēsu kāmalāyāṁ halīmakē||23||

śasyatē ghṛtamētattu prayōktavyāṁ dinē dinē| alakṣmīgraharōgaghnaṁ cāturthakavināśanam||24||

iti mahāpañcagavyāṁ ghṛtam

dve pa~jcamUlyau triphalA rajanyau kuTajatvacam| saptaparNamapAmArgaM nlinIM kaTurohiNIm||18||

shampAkAM phalguM UlaM ca pauShkaraM sadurAlabham| dvipalAni jaladroNe paktvA pAdAvasheShite||19||

bhArgIM pAThAM trikaTukaM trivRutAM niculAni ca| shreyasImADhakIM mUrvAM dantIM bhUnimbacitrakau||20||

dve sArive rohiShaM ca bhUtlkaM madayantikAm| kShipetpiShTvA~akShamAtrAni tena [1] prasthaM ghRutAt pacet||21||

goshakRudrasadadhylakShIramUtraishca tatsamaiH| pa~jcagavyamiti khyAtaM mahattadamRutopamam||22||

apasmAre tathonmAdē [2] shvayathAvudareShu ca| gulmArshaHpANDurogeShu kAmalAyAM hallmake||23||

shasyate ghRutamētattu prayoktavyaM dine dine| alakShmlgraharogaghnaM cAturthakavinAshanam||24||

iti mahApa~jcagavyaM ghRutam

Ingredients of “mahapanchagavya ghee”

Two “palas” (80 gms) of each of :

Bilva, shyonaka, gambhari, patali, ganikarika, shalaparni, prishniparni, brihati, kantakari, gokshura, haritaki, bibhitaki, amalaki, haridra, daruharidra, Bark of kutaja, saptaparna, apamarga, nilini, katurohini, Shampaka (aragvadha), root of phalgu (kasthodu-mbarika), pushkaramula and duralabha should be added with two dronas (in the recipe actually one drona is described; it has to be taken double in quantity according to definition) of water, boiled and reduced to one fourth. One aksha [12 gm each of]: The paste of bharangi, patha, shunthi, maricha, pippali, trivrita, nichula (hijjala), shreyasi (hastipippali), adhaki, murva, danti, bhunimba; chiraka, shveta sariva, krishna sariva, rohisha, bhutika and madayantika along with prior said decoction, two prasthas [640 ml] of cow’s ghee should be cooked by adding two prasthas of each of the juice of cow-dung, sour curd prepared of cow’s milk, cow’s milk and cow’s urine, This medicated ghee, known as mahapancagavya is like ambrosia in the treatment (of following)[18-22]

Indications

Apasmara (epilepsy), unmada (insanity), shvayathu (edema), udara (obstinate abdominal diseases including ascitis), gulma (abdominal lumps), arshas (piles), pandu (anemia), kamala (jaundice) and halimaka (a serious type of jaundice). This medicated ghee should be used regularly every day to dispel inauspiciousness and evil effects of bad planets. It also cures chaturthaka (quartan) type of vishama jwara (irregular fever).[23-24]

“Brahmi ghee”

ब्राह्मीरसवचाकुष्ठशङ्खपुष्पीभिरेव च। पुराणं घृतमुन्मादालक्ष्म्यपस्मारपापनुत्॥२५॥

brāhmīrasavacākuṣṭhaśaṅkhaśpūṣpiḥbhirēva ca| purāṇam
ghṛtamunmādālakṣmyapasmārapāpanut||25||

brAhmlrasavacAkuShThasha~gkhapuShplbhireva ca| purANaM
ghRutamunmAdAlakShmyapasmArapApanut||25||

Cow's ghee processed with the juice of "brahmi,vacha, kushtha" and "shankhapushpi" cures "unmada, alaksmi" (inauspiciousness), "apasmara" and "papa" (effects of sins, or evil deeds). [25]

“Saindhava hingu ghee”

घृतं सैन्धवहिङ्गुभ्यां वार्ष बास्ते चतुर्गुणे। मूत्रे सिद्धमपस्मारहृदग्रहामयनाशनम्॥२६॥

ghṛtam saindhavahiṅgubhyāṁ vārṣē bāstē caturguṇē| mūtrē
siddhamapasmāraḥṛdgrahāmayanāśanam||26||

ghRutaM saindhavahi~ggubhyAM vArShe bAste caturguNe| mUtre
siddhamapasmAraḥRudgrahAmayanAshanam||26||

Cow's ghee (one part) should be cooked by adding (in total) four parts of the urine of bull and goat and the paste of rock salt and asafoetida (1/4th part in total). This medicated ghee cures "apasmara" (epilepsy), heart diseases and diseases caused by the evil effects of planetary misalignment.[26]

“Vacha-shampakadi ghee”

वचाशम्पाककैटर्यवयःस्थाहिङ्गुचोरकैः। सिद्धं पलङ्कषायुक्तैर्वातश्लेष्मात्मके घृतम्॥२७॥

vacāśampākakaiṭaryavayaḥsthāhiṅgucōrakaiḥ| siddham
palaṅkaśāyuktairvātaślēṣmātmakē ghṛtam||27||

vacAshampAkakaiTaryavayaHsthAhi~ggucorakaiH| siddhaM
pala~gkaShAyuktairvAtashleShmAtmake ghRutam||27||

Ghee (one part) should be cooked with the paste of “vacha, shampaka, kaitarya” (“parvata nimba”), “vayastha” (“guduchi”), “hingu, choraka” and “palankasha” or “guggulu” (1/4th part in total). (Four parts of water should be added according to the general rule, because in present recipe, there is no liquid). This medicated ghee is useful in the treatment of “vatika” and “shlaishmika” types of epilepsy. [27]

“Jivaniya Yamaka Sneha”

तैलप्रस्थं घृतप्रस्थं जीवनीयैः पलोन्मितैः। क्षीरद्रोणे पचेत् सिद्धमपस्मारविनाशनम्॥२८॥

tailapraستham ghrtapraستham jīvanīyaiḥ palōnmitaiḥ| kṣīradrōṇē pacēt
siddhamapasmāravināśanam||28||

tailaprasthaM ghRutaprasthaM jlvanlyaiH palonmitaiH| kShIadroNe pacet
siddhamapasmAravinAshanam||28||

Two “prasthas” (in the text actually one “prastha” is mentioned; double the quantity is taken according to the general rules of definition) of each of oil and cow’s ghee should be added with the paste of one “pala” of each of the ten drugs belonging to “jivaniya gana” (vide Sutra 4: 9) and two “dronas” (in the text one “drona” is prescribed; double the quantity is taken according to general rules of definition) of milk, and cooked. This medicated ghee is an effective recipe for the cure of “apasmara” (epilepsy). [28]

कंसे क्षीरेक्षुरसयोः काशमर्येष्टगुणे रसे। कार्षिकैर्जीवनीयैश्च घृतप्रस्थं विपाचयेत्॥२९॥

kaṁse kṣīrekṣurasayoh kāśmaryēṣṭagunē rasē| kārṣikairjīvanīyaiśca ghṛtapraستham
vipācayēt||29||

kaMse kShIrekShurasayoh kAshmarye~aShTaguNe rase| kArShikairjlvanlyaishca
ghRutaprasthaM vipAcayet||29||

Two “prasthas” of ghee should be added with one “kamsa” of each of milk and sugarcane juice; sixteen “prasthas” of the decoction of “kasmarya” and one “karsa” of each of the ten drugs belonging to “jivaniya” group (vide Sutra 4: 9) and cooked. This medicated ghee instantaneously cures epilepsy caused by “vata” and “pitta”.[29]

वातपित्तोद्भवं क्षिप्रमपस्मारं नियच्छति। तद्वत् काशविदारीक्षुकुशक्वाथशृतं घृतम्॥३०॥

vātappittōdbhavaṁ kṣipramapasmāraṁ niyacchatī| tadvat
kāśavidārīksukuśakvāthaśṛtam ghṛtam||30||

vAtapittodbhavaM kShipramapasmAraM niyacchatī| tadvat
kAshavidArlkShukushakvAhashRutaM ghRutam||30||

Similarly, ghee cooked by adding the decoction of “kasha” and “kusha” and the juice of “vidari” and sugarcane is useful in the treatment of this ailment. [30]

मधुकद्विपले कल्के द्रोणे चामलकीरसात्। तदवत् सिद्धो घृतप्रस्थः पित्तापस्मारभेषजम्॥३१॥

madhukadvipalē kalkē drōṇē cāmalakīrasāt| tadvat siddhō ghṛtaprasthaḥ
pittāpasmārabhbēṣajam||31||

madhukadvipale kalke droNe cAmalakIrasAt| tadvat siddho ghRutaprasthaH
pittApasmArabheShajam||31||

Two “prasthas” of ghee should be cooked by adding two “dronas” of juice of “amalaki” and two “palas” of the paste of “madhuka”. This medicated ghee instantaneously cures the “paitika” type of “apasmara” (epilepsy). [31]

Drugs for external application

अश्यड्गः सार्षपं तैलं बस्तमूत्रे चतुर्गुणे। सिद्धं स्यादगोशकून्मूत्रैः स्नानोत्सादनमेव च॥३२॥

कटभीनिम्बकट्वडगमधुशिग्रुत्वचां रसे। सिद्धं मूत्रसमं तैलमश्यड्गार्थं प्रशस्यते॥३३॥

पलड्कषावचापथ्यावृश्चिकाल्यकर्सर्षपैः। जटिलापूतनाकेशीनाकुलीहिङ्गुचोरकैः॥३४॥

लशुनातिरसाचित्राकुष्ठैर्विड्भिश्च पक्षिणाम्। मांसाशिनां यथालाभं बस्तमूत्रे चतुर्गुणे॥३५॥

सिद्धमश्यञ्जनं तैलमपस्मारविनाशनम्। एतैश्चैवौषधैः कार्यं धूपनं सप्रलेपनम्॥३६॥

abhyaṅgah sārṣapam tailam̄ bastamūtrē caturguṇē| siddham̄ syādgōśakrmūtraiḥ
snānōtsādanamēva ca||32||

kaṭabhīnimbaṭaṭvāṅgamadhuśigrutvacām rasē| siddham̄ mūtrasamam̄
tailamabhyāṅgarthē praśasyatē||33||

palaṅkaśāvacāpathyāvṛścikālyarkasarṣapaiḥ| jaṭilāpūtanākēśīnākulīhiṅgucōrakaiḥ||34||

laśunātirasācitrākuṣṭhairviḍbhīśca pakṣinām| māṁsāśinām yathālābham̄ bastamūtrē
caturguṇē||35||

siddhamabhyāñjanam̄ tailamapasmāravināśanam| ētaīścaivauṣadhaiḥ kāryam̄
dhūpanam̄ sapralēpanam||36||

abhyā~ggaH sArShapaM tailaM bastamUtre caturguNe| siddhaM
syAdgoshakRunmUtraiH snAnotsAdanameva ca||32||

kaTabhInimbakaTva~ggamadhushigrutvacAM rase| siddhaM mUtrasamaM
tailamabhyā~ggArthe prashasyate||33||

pala~gkaShAvacApathyAvRushcikAlyarkasarShapaiH|
jaTilApUtanAkeshInAkullhi~ggucorakaiH||34||

lashunAtirasAcitrAkuShThairviDbhishca pakShiNAm| mAMsAshinAM yathAlAbhaM
bastamUtre caturguNe||35||

siddhamabhya~jjanam tailamapasmAravinAshanam| etaishcaivauShadhaiH kAryaM dhUpanaM sapralepanam||36||

Mustard oil cooked with four times of goat-urine is useful for massage for a patient suffering from epilepsy. Such a patient should use cow-dung for the purpose of unction and cow's urine for the purpose of "snana" (bath).[32]

(Sesame) oil (one part) should be cooked with (goat's) urine (one part) and the decoction of the barks of "katabhi, nimba, katvanga" and "madhushigru" (three parts). This medicated oil is very effective for massage.[33]

Prepare "siddha taila" with the pastes of "palankasha" ("guggulu"), "vacha, pathya, vrischikali, arka, sarshapa, jatila, putanakesi" ("golomi"), "nakuli, hingu," and "choraka". [34]

"Lasuna, atirasa" ("jalaja yastimadhu"), "chitra, kustha" and the stool of meat-eating birds according to their availability.[35]

Sesame oil should be cooked by adding four times of goat's urine and the paste (1/4th of the oil) of the drugs. This medicated oil is very effective in curing "apasmara" (epilepsy). The above mentioned drugs (ingredients prescribed to be used as paste) should also be used for "dhupana" (fumigation) and "pralepana" (external application in paste form) (for curing patients suffering from epilepsy).[36]

पिप्पलीं लवणं चित्रां हिङु हिङुशिवाटिकाम्। काकोलीं सर्षपान् काकनासां कैटर्यचन्दने॥३७॥

शुनःस्कन्धास्थिनखरान् पर्शुकां चेति पेषयेत्। बस्तमूत्रेण पुष्यक्षें प्रदेहः स्यात् सधूपनः॥३८॥

pippalīṁ lavaṇāṁ citrāṁ hiṅgu hiṅguśivāṭikām| kākōlīṁ sarṣapān kākanāsāṁ kaitaryacandanē॥37॥

śunahskandhāsthinakharān parśukām cēti pēṣayēt| bastamūtrēṇa puṣyarkṣē pradēhah syāt sadhūpanah॥38॥

pippalIM lavaNaM citrAM hi~ggu hi~ggushivATikAm| kAkoliM sarShapAn kAkanAsAM kaiTaryacandane॥37॥

shunaHskandhAsthinakharAn parshukAM ceti peShayet| bastamUtreNa puShyarkShe pradehaH syAt sadhUpanaH॥38॥

"Pippali", rock-salt, "chitra" ("danti"), "hingu, hingushivatika" ("vamsa-patrika"), "kakoli, sarshapa, kakanasa, kaitarya, chandana" and shoulder bones, nails and ribs of the dog should be made to a paste by triturating with goat's urine in the constellation of "pusya" (8th "nakshatra", or constellation, per Vedic astrology). Use of this for "pradeha" (external application in the form of thick paste) and "dhupana" (fumigation) cures epilepsy.[37-38]

अपेतराक्षसीकुष्ठपूतनाकेशिचोरकैः। उत्सादनं मूत्रपिष्टैर्मूत्रैरेवावसेचनम्॥३९॥

apētarākṣasīkuṣṭhapūtanākēśicōrakaiḥ| utsādanāṁ
mūtrapiṣṭairmūtrairēvāvasēcanam||39||

apetarAkShasIkuShThapUtanAkeshicorakaiH| utsAdanaM
mUtrapiShTairmUtrairevAvasecanam||39||

Juice of “apetarakshasi” (“tulasi”), “kushtha, putanakeshi” (“jatamansi”) and “choraka” should be triturated by adding (cow’s or goat’s) urine and made to a paste. This should be used as unction (for the treatment of epilepsy). The body of the patient should be sprinkled with the urine (of cow or goat).[39]

Different unction formulations

जलौकःशकृता तद्वद्दग्धैर्वा बस्तरोमभिः। खरास्थिभिर्हस्तिनखैस्तथा गोपुच्छलोमभिः॥४०॥

jalaukaḥśakṛtā tadvaddagdhairvā bastarōmabhiḥ| kharāsthibhirhastinakhaistathā gopucchalōmabhiḥ||40||

jalaukaHshakRutA tadvaddagdhairvA bastaromabhiH| kharAsthibhirhastinakhaistathA gopucchalomabhiH||40||

Similarly, unction should be done with the help of the following:

#stool of leeches; #ashes of the small hair of the goat.

#ashes of the bone of ass; #ashes of the nails of elephant; and #ashes of the hair in the tail of the cow. [40]

Drugs for “nasya” (nasal errhines)

कपिलानां गवां मूत्रं [१] नावनं परमं हितम्। श्वशृगालबिडालानां सिंहादीनां च शस्यते॥४१॥

kapilānāṁ gavāṁ mūtram [1] nāvanam paramam hitam| śvaśr̥gālabiḍālānāṁ simhādīnāṁ ca śasyatē||41||

kapilAnAM gavAM mUtraM [1] nAvanaM paramaM hitam| shvashRugAlabiDAIAnAM siMhAdInAM ca shasyate||41||

Inhalation of the urine of cow having reddish brown (“kapila”) color is extremely useful for the cure of epilepsy. Similarly, inhalation of the urine of the dog, jackal, cat, lion etc., is useful in this condition. [41]

भार्गी वचा नागदन्ती श्वेता श्वेता विषाणिका। ज्योतिष्मती नागदन्ती पादोक्ता मूत्रपेषिताः॥४२॥

योगास्त्रयोऽतः षड् बिन्दून् पञ्च वा नावयेद्भिषक्।

bhārgī vacā nāgadantī śvētā śvētā viṣāṇikā| jyotiṣmatī nāgadantī pādōktā mūtrapēṣitāḥ||42||

yogastrayO'tah shaq bindun pañca vā nāvayedbhiṣak|

bhArgI vacA nAgadantI shvetA shvetA viShANikA| jyotiShmatI nAgadantI pAdoktA mUtrapeShitAH||42||

yogAstrayo~ataH ShaD bindUn pa~jca vA nAvayedbhiShak|

#“Bhargi, vacha” and “nagadanti” (“kasthapatala”) triturated with cow’s urine; #“shveta” (“shveta aparajita”) and “shveta vishanika” (“shatavari”) triturated with cow’s urine; #“jyotishmati” and “nagadanti” triturated with cow’s urine. Inhalation of five or six drops of the foregoing three recipes is useful (in the treatment of epilepsy); [42-43]

त्रिफलाव्योषपीतद्रुयवक्षारफणिजङ्गकैः॥४३॥

श्यामापामार्गकारञ्जफलैर्मूत्रेऽथ बस्तजे| साधितं नावनं तैलमपस्मारविनाशनम्॥४४॥

triphalāvyaōṣapītadruuyavakṣāraphanijjhakaiḥ||43||

śyāmāpāmārgakārañjaphalairmūtrē’tha bastajē| sādhitam nāvanam
tailamapasmāravināśanam||44||

triphalAvyoShapItadruuyavakShAraphaNijjhakaiH||43||

shyAmApAmArgakAra_{japhalairmUtre}atha bastaje| sAdhitaM nAvanaM
tailamapasmAravinAshanam||44||

Oil (one part) should be cooked with goat’s urine (four parts) and the paste of “haritaki, bibhitaki, amalaki, shunthi, pippali, maricha, pitadru” (“devadaru”), “yavakshara, phaninhjaka, shyama, apamarga” and fruits of “karanja”. (One fourth part in total). Inhalation of this medicated oil cures “apasmara” (epilepsy).[43-44]

“Pradhamana nasya” formulation

पिप्पली वृश्चिकाली च कुष्ठं च लवणानि च| भार्गी च चूर्णितं नस्तः कार्यं प्रधमनं परम्॥४५॥

pippalī vrścikālī ca kuṣṭham ca lavaṇāni ca| bhārgī ca cūrnitam nastah kāryam
pradhamanam param||45||

pippall vRushcikAll ca kuShThaM ca lavaNAni ca| bhArgI ca cUrNitaM nastaH kAryaM
pradhamanaM param||45||

The powder of “pippali, vrishchikali, kushtha, saindhava, lavana, sauvarchala lavana, samudra lavana, vida lavana, audbhida lavana” (vide sutra 1:88-89) and “bhargi” should be administered in the form of “pradhamana nasya” (in which powders of drugs are blown into the nostrils of the patient.) This is an excellent recipe (for curing epilepsy).[45]

Medicated wicks

कायस्थां शारदान्मुद्गान्मुस्तोशीरयवांस्तथा| सव्योषान् बस्तमूत्रेण पिष्ट्वा वर्तीः प्रकल्पयेत्॥४६॥

अपस्मारे तथोन्मादे सर्पदण्डे गरार्दिते। विषपीते जलमृते चैता: स्युरमृतोपमा:॥४७॥

kāyasthāṁ śāradānmudgānmustōśīrayavāṁstathā| savyōṣān bastamūtrēṇa piṣṭvā
vartīḥ prakalpayēt||46||

apasmārē tathōnmādē sarpadaṣṭē garārditē| viṣapītē jalāmṛtē caitāḥ
syuramṛtōpamāḥ||47||

kAyasthAM shAradAnmudgAnmustoshIrayavAMstathA| savyoShAn bastamUtreNa
piShTvA vartIH prakalpayet||46||

apasmAre tathonmAde sarpadaShTe garArdite| viShaplte jalamRute caitAH
syuramRutopamAH||47||

“Kayastha, sharada mudga” (“harita mudga”), “musta, ushira, yava, sunthi, pippali” and
“maricha” should be made to a paste by triturating with goat’s urine. From out of this
paste, “vartis” (elongated pills/wicks) should be prepared. [46]

Application of this thin paste (prepared by rubbing with water) in the eyes (as collyrium)
works like ambrosia in (curing) “apasmara” (epilepsy), “unmada” (insanity), snake-bite,
Afflictions by poisonous beverages, internal poisonings and to regain consciousness
after drowning [47]

मुस्तं वयःस्थां त्रिफलां कायस्थां हिङ्गु शाद्वलम्। व्योषं माषान् यवान्मूत्रैर्बास्तमैषार्षभैस्त्रिभिः॥४८॥

पिष्टवा कृत्वा च तां वर्तिमपस्मारे प्रयोजयेत्। किलासे च तथोन्मादे ज्वरेषु विषमेषु च॥४९॥

mustam̄ vayaḥsthāṁ triphalāṁ kāyasthāṁ hiṅgu śādvalam| vyōṣam̄ māṣān
yavānmūtrairbāstamaiṣārṣabhaistribhiḥ||48||

piṣṭvā kṛtvā ca tāṁ vartimapasmārē prayōjayēt| kilāsē ca tathōnmādē jvarēṣu viṣamēṣu
ca||49||

mustaM vayaHsthAM triphalAM kAyasthAM hi~ggu shAdvalam| vyoShaM mAshaN
yavAnmUtrairbAstamaiShArShabhaistribhiH||48||

piShTvA kRutvA ca tAM vartimapasmAre prayojayet| kilAse ca tathonmAde jwareShu
viShameShu ca||49||

“Musta, vayastha, triphala, kayastha, hingu, shadwal, vyosha, masha, yava” should be
made to a paste by triturating in urines of goat, sheep and bull.

From this paste, “vartis” (elongated pills) should be prepared. (These “vartis” should be
rubbed over a stone by adding water, and the thin paste, thus obtained, should be used
as collyrium). This is used in treatment of “apasmara” (epilepsy), “kilasa” (a type of
leucoderma), “unmada” (insanity) and “vishama jwara” (irregular fever).[48-49]

पुष्योद्धृतं शुनः पित्तमपस्मारच्छन्मञ्जनम्। तदेव सर्पिषा युक्तं धूपनं परमं मतम्॥५०॥

puṣyoddhṛtam̄ śunah pittamapasmāraghnamañjanam| tadēva sarpiṣā yuktam̄
dhūpanam̄ paramam̄ matam||50||

puShyoddhRutaM shunaH pittamapasmAraghnama~jjanam| tadeva sarpiShA yuktaM dhUpaNaM paramaM matam||50||

Dog-bile, collected during “pushya” constellation, should be used as collyrium for the cure of “apasmara” (epilepsy). This (bile) mixed with ghee should be used for fumigation which is excellent (for curing epilepsy).[50]

नकुलोलूकमार्जारगृधकीटाहिकाकजैः। तुण्डैः [१] पक्षैः पुरीषैश्च धूपनं कारयेदभिषक्॥५१॥

nakulolūkamārjāragrdhrakīṭāhikākajaiḥ| tuṇḍaiḥ [1] pakṣaiḥ purīṣaiśca dhūpanam kārayēdbhiṣak||51||

nakulolUkamArjAragRudhrakITAhikAkajaiH| tuNDaiH [1] pakShaiH purIShaishca dhUpaNaM kArayedbhiShak||51||

(For the treatment of epilepsy), the physician should give fumigation therapy with the help of the beaks, feather and stool of mongoose, owl, cat, vulture, “kita” (scorpion etc), snake and crow. [51]

Effects of therapy

आभिः क्रियाभिः सिद्धाभिर्हृदयं सम्प्रबुद्ध्यते| स्रोतांसि चापि शुद्ध्यन्ति ततः [२] सञ्जां स विन्दति॥५२॥
ābhiḥ kriyābhiḥ siddhābhīrhṛdayam samprabudhyatē| srōtāṁsi cāpi śudhyanti tataḥ [२] sañjñāṁ sa vindati॥52॥

AbhiH kriyAbhiH siddhAbhirhRudayaM samprabudhyate| srotAMsi cApi shudhyanti tataH [2] sajjAM sa vindati॥52॥

With the help of these therapies, the heart of the patient gets stimulated and the channels get cleansed as a result of which the patient regains consciousness.[52]

Treatment of “Aagantu apasmara”

यस्यानुबन्धस्त्वागन्तुर्दोषलिङ्गाधिकाकृतिः। दृश्येत तस्य कार्यं स्यादागन्तून्मादभेषजम्॥५३॥
yasyānubandhastvāganturdōṣaliṅgādhikākṛtiḥ| dṛśyēta tasya kāryam syādāgantūnmādabhēṣajam||53||

yasyAnubandhastvAganturdoShali~ggAdhikAkRutiH| dRushyeta tasya kAryaM syAdAgantUnmAdabheShajam||53||

In some patients of epilepsy, exogenous factors are secondarily involved and in such cases signs and symptoms are manifested over and above those of the “doshas” (endogenous factors). Such patients should be treated on the lines suggested for exogenous types of “unmada” (insanity) (refer to Chapter 9 of this section, i.e., Unmada Chikitsa).[53].

“Mahagada chikitsa” (management of “atattvabhinivesha”)

अनन्तरमुवाचेदमग्निवेशः कृताञ्जलिः। भगवन् प्राक् समुद्दिष्टः १६ोकस्थाने महागदः॥५४॥

अतत्वाभिनिवेशो यस्तदपेत्वाकृतिभेषजम्। तत्र नोक्तमतः श्रोतुमिच्छामि तदिहोच्यताम्॥५५॥

शुश्रूषवे वचः श्रुत्वा शिष्यायाह पुनर्वसुः। महागदं सौम्य! शृणु सहेत्वाकृतिभेषजम्॥५६॥

anantaramuvācēdamagnivēśah kṛtāñjaliḥ| bhagavan! prāk samuddiṣṭah ślōkasthānē mahāgadah||54||

atattvābhinivēśo yastaddhētvākṛtibhēṣajam| tatra nōktamataḥ śrōtumicchāmi tadihōcyatām||55||

śuśrūṣavē vacaḥ śrutvā śiṣyāyāha punarvasuḥ| mahāgadāṁ saumya! śṛṇu sahētvākṛtibhēṣajam||56||

anantaramuvAcedamagniveshaH kRutA~jjaliH| bhagavan! prAk samuddiShTaH shlokasthAne mahAgadaH||54||

atattvAbhinivesho yastaddhetvAkRutibheShajam| tatra noktamataH shrotumicchAmi tadihocyatAm||55||

shushrUShave vacaH shrutvA shiShyAyAha punarvasuH| mahAgadaM saumya! shRuNu sahetvAkRutibheShajam||56||

Thereafter, Agnivesha with folded hands [in salutation] said, “O Lord! In Sutra Sthana (Sutra 19 : 3) you have mentioned in brief as a “mahagada” (grave disease), that is “atattvabhinivesha” (pervaded by false principles). But its etiology, signs and symptoms and treatment are not described there. I want to hear these descriptions. Kindly narrate them in the present context”.[54-55]

Having heard this, Lord Punarvasu addressed his disciple who was desirous of hearing and said, “My child, hear about this “mahagada” (grave disease) along with its etiology, signs and symptoms and treatment”. [56]

Etiopathology and clinical features of “atattvabhinivesha”

मलिनाहारशीलस्य वेगान् प्राप्तान्निगृहणतः। शीतोष्णस्निग्धरूक्षाद्यैर्हेतुभिश्चातिसेवितैः॥५७॥

हृदयं समुपाश्रित्य मनोबुद्धिवहाः सिराः। दोषाः सन्दूष्य तिष्ठन्ति रजोमोहावृतात्मनः॥५८॥

रजस्तमोभ्यां वृद्धाभ्यां बुद्ध्यौ [१] मनसि चावृतो। हृदये व्याकुले दोषैरथ मूढोऽल्पचेतनः [२] ||५९॥

विषमां कुरुते बुद्धिं नित्यानित्ये हिताहिते। अतत्वाभिनिवेशं तमाहुराप्ता महागदम्॥६०॥

malināhāraśīlasya vēgān prāptānnigrhnataḥ|
śītōśṇasnidharūkṣādyairhētubhiścātisēvitaiḥ||57||

hṛdayam samupāśritya manōbuddhivahāḥ sirāḥ| dōṣāḥ sandūṣya tiṣṭhanti
rajōmōhāvṛtātmanāḥ||58||

rajastamobhyāṁ vṛddhābhyaṁ buddhau [1] manasi cāvṛtē| hṛdayē vyākulē dōṣairatha
mūḍhō’lpacētanaḥ [2] ||59||

viśamāṁ kurutē buddhim nityānityē hitāhitē| atattvābhinivēśam tamāhurāptā
mahāgadām||60||

malinAhArashllasya vegAn prAptAnnigRuhNataH|
shltoShNasnigdharUkShAdyairhetubhishcAtisevitaiH||57||

hRudayaM samupAshritya manobuddhivahAH sirAH| doShAH sandUShya tiShThanti
rajomohAvRutAtmanaH||58||

rajastamobhyAM vRuddhAbhyAM buddhau [1] manasi cAvRute| hRudaye vyAkule
doShairatha mUDho~alpacetanaH [2] ||59||

viShamAM kurute buddhiM nityAnitye hitAhite| atattvAbhiniveshaM tamAhurAptA
mahAgadām||60||

If a person is indulged in habitual intake of impure food, due to suppression of manifested natural urges, excessive intake of cold, hot, unctuous, un-uncctuous food (incompatible food with contradictory properties) etc, the (vitiated) “doshas” afflict channels of mind and intellect and abide into heart. The “rajas” (one of the attributes of the mind) and “moha” or “tamas” (another attribute of mind), occlude the person’s self. Excessively aggravated “rajas” and “tamas” cover mind and intellect, disturbing the functions of heart, making the person stupid and mentally weak. This leads to improper judgment regarding eternal and ephemeral events and wholesome and unwholesome objects. The expert physicians call this “mahagada” (grave disease) as “atattvabhinivesha”. [57- 60]

Management of “atattvabhinivesha”

स्नेहस्वेदोपपन्नं तं संशोध्य वमनादिभिः| कृतसंसर्जनं मेध्यैरन्नपानैरुपाचरेत्॥६१॥

ब्राह्मीस्वरसयुक्तं यत् पञ्चगव्यमुदाहतम्| तत् सेव्यं शङ्खपुष्पी च यच्च मेध्यं रसायनम्॥६२॥

सुहृदश्चानुकूलास्तं स्वाप्ता धर्मार्थवादिनः| संयोजयेयुर्विजानधैर्यस्मृतिसमाधिभिः [3] ||६३||

प्रयुञ्ज्यातैललशुनं पयसा वा शतावरीम्| ब्राह्मीरसं कुष्ठरसं वचां वा मधुसंयुताम्॥६४॥

snēhasvēdōpapannam tam saṁśōdhya vamanādibhiḥ| kṛtasamśarjanam
mēdhyairannapānairupācarēt||61||

brāhmīsvarasayuktāṁ yat pañcagavyamudāhṛtam| tat sēvyāṁ śāṅkhapuspī ca yacca
mēdhyāṁ rasāyanam||62||

suhṛdaścānukūlāstāṁ svāptā dharmārthavādinah|
saṁyōjayēyurvijñānadhairyasmṛtisamādhibhiḥ [3] ||63||

prayuñjyāttailalaśunāṁ payasā vā śatāvarīm| brāhmīrasāṁ kuṣṭharasāṁ vacāṁ vā
madhusaṁyutām||64||

snehasvedopapannaM taM saMshodhya vamanAdibhiH| kRutasaMsarjanaM
medhyairannapAnairupAcaret||61||

brAhmlsvarasayuktaM yat pa~jcagavyamudAhRutam| tat sevyam sha~gkhapuShpl ca
yacca medhyaM rasAyanam||62||

suhRudashcAnukUIAstam svAptA dharmArthavAdinaH|
saMyojayeyurvij~jAnadhairyasmRutisamAdhibhiH [3] ||63||

prayu~jjyAttailalashunaM payasA vA shatAvarIm| brAhmlrasaM kuShTharasaM vacAM
vA madhusaMyutAm||64||

This (disease) shall be treated with oleation and fomentation therapies followed by purification therapies like therapeutic emesis etc. Then after doing “samsarjana krama” (observing specific dietary regimen after purification), diet and drinks which are promoters of intellect should be administered. Juice of “brahmi” mixed with “panchagavya ghrita” described above (refer to verses 16-17) should be administered. Similarly, other “medhya rasayanas” (promoters of intellect) like “shankhapushpi” should be given. [61- 62]

Friends, sympathizers, preceptors preaching religious sermons, philosophers should inculcate into him knowledge, understanding, patience, memory and the power of meditation. [63]

Following medicines shall be administered:

#garlic with oil; #“shatavari” with milk; #juice of “brahmi” with honey; #juice or decoction of “kushtha” with honey; and #powder of “vacha” with honey.[64]

Prognosis

दुश्चिकित्स्यो ह्यपस्मारश्चिरकारी कृतास्पदः [१] | तस्माद्रसायनैरेनं प्रायशः समुपाचरेत्॥६५॥

duścikitsyō hyapasmāraścirakārī kṛtāspadah [1] | tasmādrasāyanairēnaṁ prāyaśah
samupācarēt||65||

dushcikitsyo hyapasmArashcirakArl kRutAspadaH [1] | tasmAdrasAyanairenaM
prAyashaH samupAcaret||65||

If the disease “apasmara” is resistant to conventional modes of treatment, if it is chronic and if it has acquired a firm footing, then it should be generally treated with the foregoing recipes of rejuvenating drugs. [65]

Protection of patients and precautionary measures

जलाग्निद्रुमशैलेभ्यो विषमेभ्यश्च तं सदा। रक्षेदुन्मादिनं चैव सद्यः प्राणहरा हि ते॥६६॥

jalāgnidrumaśailēbhyo viṣamēbhyaśca tam sadā| rakṣēdunmādinam caiva sadyah
prāṇaharā hi tē||66||

jalAgnidrumashailebhyo viShamebhyashca taM sadA| rakShedunmAdinaM caiva
sadyaH prANaharA hi te||66||

The patient suffering from “apasmara” and “unmada”, should be specially protected from water, fire, trees, mountains and uneven places. These may cause instantaneous death of the patient.[66]

तत्र श्लोकौ-

हेतुं कुर्वन्त्यपस्मारं दोषाः प्रकुपिता यथा। सामान्यतः पृथक्त्वाच्च लिङ्गं तेषां च भेषजम्॥६७॥

महागदसमुत्थानं लिङ्गं चोवाच सौषधम्। मुनिर्व्याससमासाभ्यामपस्मारचिकित्सिते [१] ||६८॥

tatra ślōkau-

hētuṁ kurvanyapasmāram dōṣāḥ prakupitā yathā| sāmānyataḥ pṛthaktvācca liṅgam
tēṣām ca bhēṣajam||67||

mahāgadasamutthānam liṅgam cōvāca sauṣadham|
munirvyāsasamāsābhȳāmapasmāracikitsitē [1] ||68||

tatra shlokau-

hetuM kurvanyapasmAraM doShAH prakupitA yathA| sAmAnyataH pRuthaktvAcca
li~ggaM teShAM ca bheShajam||67||

mahAgadasamutthAnaM li~ggaM covAca sauShadham|
munirvyAsasamAsAbhyAmapasmAracikitsite [1] ||68||

#Etiological factors of epilepsy; #the mode of vitiation of “doshas”; #signs and symptoms in general and of different varieties of epilepsy;
#treatment of different types of epilepsy; and #etiology, signs and symptoms of “mahagada” (grave disease). Thus, in this chapter, the sage has described treatment of “apasmara”, in brief as well as in detail as above said.[68]

Thus, ends the tenth Chapter dealing with the treatment of “apasmara” in the section on therapeutics of Agnivesha’s work as redacted by Charak, and not being available, restored by Dridhabala. [69]

Tattva Vimarsha (Fundamental Principles)

#“Apasmara” is a disease in which faculties of mind like memory/consciousness, intellect and purest quality of mind are afflicted. #Diet plays significant role in pathophysiology of psychiatric diseases. #Improper and impure diet is considered to affect mental functions adversely leading to formation of background for disease. The dietary causative factors may act on gut-brain axis to affect the neuro-pathology in case of psychiatric diseases like “apasmara”. #When this afflicted person is confronted with distressful adverse situation including negative emotions like worries, passion, fright, anger, grief, anxieties, he suffers from “apasmara”. #The pathophysiology clearly indicates role of somatic imbalances and psychic disturbances as sequential events. The inter-communication between physical entities and psychological entities is very important for continuation of health. Consciousness flows through this co-ordination to make a person alive. Therefore, when this co-ordination is disturbed, it presents as disturbance of psychological faculties. The pathology of “apasmara” starts with vitiated “dosha” and ends into bewildered state of mind. #Heart (center of consciousness and emotional intelligence) and brain (center of memory and logical intelligence) together form “manovaha srotas” (functional system of mind). The co-ordination of these two centers is important for normal functioning of mind. If this is afflicted, it leads to psychiatric diseases.

#Removal of obstruction of “dosha” in the heart-brain connection, channels and mind by strong purification therapies is management principle of “apasmara”. #“Basti” (therapeutic enema) in “vata” dominant “apasmara, virechana” (therapeutic purgation) in “pitta” dominant “apasmara” and “vamana” (therapeutic emesis) in “kapha” dominant “apasmara” are specific therapies. #“Ashwasana” (assurance therapy) and psychological counseling are advised to remove psychological stressors that provoke “apasmara vega”(episode).

Vidhi Vimarsha (Applied Inferences)

The first principle of Ayurveda states that life is continuum of healthy coordination between body, mind, soul and sensory-motor organs. Ayurveda considers the mind and body work in symbiotic relationship with each other. When one is affected, other is also affected. Both are emphasized as abode for sensation of pain. The mind and body can't be separated in water tight compartment.

Relation between diet, “dosha” specificity and “apasmara”

Role of pure diet is important, because it nourishes mind, enriches senses and motor organs. The “Panchakosha” theory of Yoga states that the sheath of mind (“manomaya kosha”) is nourished through sheath of food (“annamaya kosha”) only. Therefore,

following proper, pure diet and dietary habits is necessary for preventing psychiatric disorders.

The physical “doshas” like “vata, pitta” and “kapha” are assigned certain psychological functions also. Their rise and accumulation takes place at different stage after taking food. Therefore, the type of disease depending upon type of dominant “dosha,” evoked due to dominant diet specific to a particular “dosha”. “Apasmara” is also caused due to vitiation of “dosha” owing to improper diet. This clarifies link between diet, “dosha,” mental functions, memory and consciousness.

Memory and consciousness

The profound relation between memory and consciousness is clearly indicated in “apasmara”. In Ayurveda, memory is termed as fundamental knowledge based upon experiences acquired through sense and motor organs. In psychology, memory is the mental capacity with which information is encoded, stored, and retrieved. Consciousness is the state of awareness of internal events and external environment. Available from glossary of psychological terms retrieved from <http://www.apa.org/research/action/glossary.aspx?tab=3> on August 22, 2017. In “apasmara”, consciousness is affected leading to transient loss of memory.

The forbearance of mind is based upon intellect (“dhi”) and pure quality of mind (“sattva”). “Dhi” discriminates between right and wrong things. “Sattva” is pure quality that might be named as “mental immunity” which protects mind in all adverse conditions. In “apasmara”, both the intellect and pure quality of mind are afflicted leading to poor forbearance.

Brain and heart connection Neurocardiology

Heart (cardiac region) has been considered as site of consciousness and emotions. The heart in context of “apasmara” is essentially meant by the abode of consciousness and it doesn’t signify anatomical heart. This is functional heart which is involved in emotions, feelings of the self. Brain (head region) is considered as origin of all sensory and motor organs. The term “dhamani” has been used to denote abode of aggravated “doshas”. This literally means the artery, vein, nerves which carry impulses. This is very important as it channelizes consciousness from site of consciousness i.e. heart to site of intelligence i.e. brain. This canal of heart-brain connection is “manovaha srotas”. The brain and heart work in co-ordination with each other for maintaining equilibrium between logical intelligence and emotional intelligence. If these are hampered, the consciousness, memory, sensory and motor co-ordination as well as emotional behavior will be affected. This establishes the theory that disturbance in cardiac functions can result into neurological disorders. The heart-brain connection has been authenticated by many researches on neuro-cardiology. Martin A. Samuels, Contemporary Reviews in

Cardiovascular Medicine, The Brain–Heart Connection. Circulation.2007; 116: 77-84 doi: 10.1161/CIRCULATIONAHA.106.678995

The theory of heart-brain connection has been well known to Ayurveda scholars in context of “apasmara”.

Signs and symptoms of “apasmara”

Transient nervous system collapse of a person which leads to various signs and symptoms enlisted in the verses 7 to 13. The cluster describes features of paroxysmal stage of “apasmara”. The features include somatic as well as psychological subjective symptoms experienced by patients self. The dreams specific to predominance of “dosha” can be important measures for diagnosis of predominance of “dosha”. The symptomatology has been described elaborately in context of Apasmara Nidana.

Gut-brain connection in “apasmara”

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Gut-brain dysfunction is proved to play role in many psychiatric disorders like depression, anxiety, autism,
[schizophrenia.<https://www.psychologytoday.com/blog/evolutionary-psychiatry/201404/the-gut-brain-connection-mental-illness-and-disease>](https://www.psychologytoday.com/blog/evolutionary-psychiatry/201404/the-gut-brain-connection-mental-illness-and-disease) accessed on 13/09/2016

The figure shows physiology of gut-brain connection. As discussed earlier in Apasmara Nidana, many of the somatic symptoms are related with the dysfunction of gastrointestinal tract. Therefore the possibility of gut-brain dysfunction cannot be denied.

Similarly, as seen above, many of the animal products like medicines formulated with cow's urine, cow's ghee, goat urine that are rich in micro-organisms are enlisted in management of “apasmara”. The exact pharmacodynamic behind action of these medicines in management of “apasmara” with focus on gut-brain axis needs to be investigated.

Etio-Pathogenesis of “Atattvabhinivesha”

The grave disease “atattvabhinivesha” is considered as affliction of discrimination power of intellect leading to severe perversion of mental functions. The pathophysiology includes affliction of mind and intellect simultaneously. Therefore this disease comprises disturbance of mind and intellectual functioning. Decisive and discriminative power of the afflicted person is completely lost. This leads to improper judgment regarding eternal and ephemeral events and wholesome and unwholesome objects. Coordination of mind, intellect, sense-motor organs is disturbed.

Patho-physiology of “atattvabhinivesha”

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Differential diagnosis

The diseases with convulsive movements of the body and loss of memory can be considered for differential diagnosis for “apasmara”. Though “apasmara” is a “manasa vikara”, the diseases with presentation of “kampa” (tremors), “gatra vikshepa” (abnormal body movements), “vepathu” (trembling), etc in the form of paroxysms can be thought of for discussion under differential diagnosis. They include “akshepaka” (“vata vyadhi”), “dandaka” (stiffness), “ardita” (facial palsy or hemiparesis), “apatanaka” (status epilepticus), “apatantraka” (opisthotonus) and “vepathu” (“kampavata”, or tremors).

“Akshepaka” is explained as a “vata vyadhi” in Vatavyadhi Chikitsa, characterized by repeated convulsive movements of body when vitiated “vata” affects muscles and tendons of hands and legs. (Verses 51, 52)

“Dandaka” is denoted in the same context as “stambha” (stiffness) manifested in “pani” (hands), “pada” (legs), “shira” (head), “prishtha” (back) and “shroni” (pelvis) making body stiff like wooden log. (verse52)

“Ardita” caused when “vayu” does “upashoshana” (dries up) of “bahu” (arm), “pada” (leg) and “janu” (knees), is characterized by “vakrata” (curved) of “mukhardha bhaga” (half face) and also “shareerardha” (torso). The attacks of “ardita” do not include convulsions as presenting feature. (Verses 38 to 42)

“Apatanaka” is also a disease caused by vitiated “vata” either independently or due to “avarana” (obstruction) caused by “kapha” characteristically manifests with frequent unconsciousness, “antarayama” (forward bending of the body) and “bahirayama” (backward bending of the body). Because of this bending the disease is otherwise known as “dhanustambha”. (Verses 43 to 48)

“Veopathu” or “kampa vata” are characterized by “kampa” (tremor) of either single part/multiple parts/entire body.

In any of the above explained conditions either the involvement of “hridaya” (heart) or “manas” (mind) are not specified. Hence they implicate more of neurological pathology rather than psychological disorder.

“Apatantraka”, explained in Trimarmiya Siddhi(verses 12 to 15), is very similar to the description of apasmara here in its clinical presentation. “Avarana” of “hridaya” by “doshas” lead to paroxysm of the “vyadhi” with pain in “shira, shankha” body bending like a bow, “akshepa” (convulsions), dyspnea, hoarse expiratory cry like that of a

pigeon, unconsciousness, etc. Once the “avarana” to “hridaya” by the “doshas” is clear the person looks healthy.

“Apatantraka” is a “hridaya marmashrita vyadhi” which indicates variation in emotional intelligence of the person. The theory of neuro-cardiology differentiates “apatantraka” from “apasmara” the latter being a disorder of logical intelligence (“smriti budhi sattva samplavat”- ch. Ni. 8/5)

“Apasmara” is emphasized as “manasa vikara” due to loss of “smriti” (power of recollection), “buddhi vyapoha” (declining of logical and analytical understanding). The person becomes “moodha” (stupid). This holds appropriate to say “the loss of logical intelligence in the person”.

Management of “apasmara”

The holistic management of “apasmara” includes three stages as discussed below:

I. Purification therapies

“Apasmara” is to be treated with strong elimination therapies like Panchakarma. The strength here directs towards deeper level of penetrability of the therapies to remove the toxins from micro-channels.

Important pathological milestone is occlusion of consciousness. Therefore to remove obstruction at heart (site of consciousness), channels of heart-brain connection, and mind is the treatment objective. “Vata” dominant “apasmara” is to be treated with medicated enema, “pitta” dominant with purgation therapies and “kapha” dominant with therapeutic emesis.

Role of these purification treatments like “vamana”, etc. in normalizing functioning of heart (consciousness mechanism and emotional intelligence), heart-brain connection, and mental functions is important to be studied. This may prove a major breakthrough in prevention and management of psychiatric disorders. The changes in memory/awareness level, mind functioning, emotional quotient, improvement in forbearance power are bio-markers for the assessment.

II. Assurance and consolation therapies

The episodes of “apasmara” occur on exposure of distressful events or psychological trauma due to negative emotions like worries, passion, fright, anger, grief, anxieties etc. This indicates poor emotional quotient. Affliction of mental “dosha” like “[rajas” and “tamas” also need to be corrected basically. Therefore it is important to improve the emotional intelligence through positive training and programming of mind and brain to cope with the adverse situation. If the mental immunity is good, then “apasmara” episode will not occur, even if, the bodily “doshas” are aggravated. Cognitive Behaviour

Therapy (CBT), REBT (Rational Emotive Behaviour Therapy) can be useful supportive treatments for management of “apasmara” to reduce frequency of episodes as well as effective management of disorder.

III. Pacification (“shamana”) therapy

After purification and consolation therapies are done, various formulations useful in treatment of “apasmara” have been enlisted. If we see the general medicines prescribed by Charak, all of the formulations are either ghee based or oil based formulations. Ghee is considered as best vehicle for management of “vata-pitta” dominant disorders. Oil is the best for “vata-kapha” dominant disorders. Ghee has been proved to be effective in treatment of many neurological disorders owing to its capacity of maintaining cellular integrity.

The animal products like ghee, urine, bile are used in most of the formulations. Cow’s ghee and goat’s urine is widely used as processing media for formulations. The route of administration is “nasya” (nasal drug delivery), “anjana” (for intra-ocular drug delivery through conjunctivae), and “dhupana” (fumigation). The properties of drugs used are mainly pungent to ensure higher penetrability in lower dosages. The possibility of crossing blood brain barrier with these routes might be higher for the herbs used in “apasmara” treatment.

The formulations used in treatment are enlisted below:

“Panchagavya ghrita”

```
{  
! scope="col"  
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-  
1  
"Go Shakrid Rasa"(cow-dung)  
1  
Ghee preparation  
  
-  
2  
"Dadhi Amla" (curd made from cow-milk)  
1  
  
-
```

{

3

"Ksheera" (cow-milk)

1

-

4

"Mutra" (cow-urine)

1

-

5

"Ghritam" (cow-ghee)

1

}

""Mahapanchagavya ghrita"" {| class="wikitable" |- ! scope="col" | S.No ! scope="col" | Ingredient ! scope="col" | Part Proportion ! scope="col" | Process ! scope="col" | Indications |- | 1 | "Bilva" | Two "Pala" | Ghee preparation | rowspan = "8"|"apasmara" (epilepsy), "unmada" (insanity), "shvayathu" (edema), "udara" (obstinate abdominal diseases including ascites), "gulma" (abdominal lumps), "arshas" (piles), "pandu" (anemia), "kamala" (jaundice) and "halimaka" (an advanced stage of jaundice)

|- | 2 | "Shyonaka"

| Two "Pala" | |- | 3 | "Gambhari" | Two "Pala" | |- | 4 | "Patali" | Two "Pala" | |- | 5 | "Ganikarika" | Two "Pala" | |- | 6 | "Shalaparni" | Two "Pala" | |- | 7 | "Prishiparni" | Two "Pala" | |- | 8 | "Brihati" | Two "Pala" | |- | 9 | "Kantakari" | Two "Pala" | | should be used regularly every day to dispel inauspiciousness and evil effects of bad planets |- | 10 | "Gokshura" | Two "Pala" | | |- | 11 | "Haritaki" | Two "Pala" | | |- | 12 | "Bibhitaki" | Two "Pala" | | |- | 13 | "Amalaki" | Two "Pala" | | |- | 14 | "Haridra" | Two "Pala" | | |- | 15 | "Daruharidra" | Two "Pala" | | |- | 16 | Bark of "Kutaja" | Two "Pala" | | |- | 17 | "Saptaparna" | Two "Pala" | | |- | 18 | "Apamarga" | Two "Pala" | | |- | 19 | "Nilini" | Two "Pala" | | |- | 20 | "Katurohini" | Two "Pala" | | |- | 21 | "Shampaka" ("Aragvadha") | Two "Pala" | | |- | 22 | Root of "Phalgu" ("kasthodumbarika") | Two "Pala" | | |- | 23 | "Puskaramula" | Two "Pala" | | |- | 24 | "Duralabha" | Two "Pala" | | |- | 25-42 | "Bharangi, Patha, Shunthi, Maricha, Pippali, Trivrita, Nichula (Hijjala), Shreyasi (Hastipippali), Adhaki, Murva, Danti, Bhunimba; Chitraka, Shveta Sariva, Krishna Sariva, Rohisha, Bhutika and Madayantika" | One "Aksha" | | |- | 43 | Cow ghee | Two "Prastha" | | |}

””Brahmi Ghrita”” {| class=“wikitable” |- ! scope=“col”| S.No ! scope=“col”| Ingredient ! scope=“col”| Part Proportion ! scope=“col”| Process ! scope=“col”| Indications |- | 1 | Cow ghee | 4 | Ghee Preparation |rowspan = “4”|“unmada, alaksmi” (inauspiciousness), “apasmara” and “paapa” (effects of evil deeds) |- | 2 | Juice of “brahmi” | 1 ||- | 3 | “Vacha” | 1 ||- | 4 | “Kushtha” | 1 ||- | 5 | “Shankhapushpi” | 1 ||| } ””Saindhava hingvadi ghrita”(verse 26)”” {| class=“wikitable” |- ! scope=“col”| S.No ! scope=“col”| Ingredients with botanical names ! scope=“col”| Part Proportion ! scope=“col”| Indications |- | 1 | Cow ghee | 1 |“apasmara” (epilepsy), heart diseases, diseases caused by the evil effects of bad planets |- | 2 | Urine of bull (“Varsha mutra”) and goat (“Bast mutra”) | 4 parts in total |- | 3 | Paste of rock salt and asafoetida | 1/4th part in total ||| }

””Vata shlaishma apasmarahara vacha – shampakadi ghrita”” {| class=“wikitable” |- ! scope=“col”| S.No ! scope=“col”| Ingredient with botanical name ! scope=“col”| Part Proportion ! scope=“col”| Indications |- | 1 | Ghee | 1 part |rowspan=“2”|“Vatika” and “shlaishma” type of epilepsy |- | 2 | “Vacha” |rowspan=“7”| 1/4th part in total |- | 3 | “Sampaka” | |- | 4 | “Kaitarya” (“parvata nimba”) | |- | 5 | “Vayastha (guduchi)” | |- | 6 | “Hingu” | |- | 7 | “Choraka” | |- | 8 | “Palankasa” or “guggulu” | |- | 9 | Water | 4 Parts | |}

””Jeevaniya dravyasiddha yamaka sneha”(Verse 28)”” {| class=“wikitable” |- ! scope=“col”| S.No ! scope=“col”| Ingredient ! scope=“col”| Part Proportion ! scope=“col”| Indications |- | 1 | Oil | 1 “prastha” |“apasmaravinashanam” |- | 2 | Ghee | 1 “prastha” | |- | 3 | “Jeevania dravya”[Cha.Su. 4/9(1)] |rowspan = “11”| 1 “Pala” | |- | 4 | “Jeevaka” | |- | 5 | “Rishabaka” | |- | 6 | “Meda” | |- | 7 | “Mahamedha” | |- | 8 | “Kakoli” | |- | 9 | “Ksheerakakoli” | |- | 10 | “Mudgaparni” | |- | 11 | “Mashaparni” | |- | 12 | “Jeevanti” | |- | 13 | “Madhuka” | |- | 14 | Milk | 1 “drona” | |}

””Kashmaryadi ghrita”(verse 29)”” {| class=“wikitable” |- ! scope=“col”| S.No ! scope=“col”| Ingredients ! scope=“col”| Part Proportion ! scope=“col”| Indications |- | 1 | Milk | rowspan = “2”| 1 “kamsa” in total | rowspan = “3”| Instantaneously cures epilepsy caused by “vata” and “pitta” |- | 2 | Sugarcane juice |- | 3 | “Kashmari” juice | 8 parts |- | 4 | “Jeevaniya” drugs (as mentioned in verse 28) | 1 “karsha” | |- | 5 | Ghee | 1 “prastha” | |}

{

Ghee

1 “prastha”

“vataja pittaja apasmara”

-

decoction of “kusha kasha vidari” and “ikshu moolas”

1 “prastha”

{

-

Milk

1 "adhaka"

-

Sugarcane Juice

1 "adhaka"

}

""Amalaki-madhuka ghee"" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredients ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Ghee | 2 "Prasthas" | Instantaneously cures the "paittika" type of "apasmara" (epilepsy) |- | 2 | Juice of "amalaki" | 2 "dronas" | |- | 3 | Paste of "madhuka" | 2 "palas" | |}

"External Application"

""Sarshapa taila"" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Mustard oil | 1 | External massage |- | 2 | Goat urine | 4 | |- | 3 | Cow-dung | | For unction |- | 4 | Cow urine | | For bath |}

""Katabhyadi oil"" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Sesame oil | 1 part | External massage |- | 2 | goat urine | 1 part | |- | 3 | Decoction of the barks of "Katabhi, Nimba, Katvanga" and "Madhusigru" | 3 parts | |} ""Palankashadi" oil (verse 34-36)" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Pastes of "Palankasa, Vacha, Pathya, Vrishchikali, Arka, Sarshapa, Jatila, Putanakesi (golomi), Nakuli. Hingu, Choraka, Lashuna, Atirasa (Jalaja Yastimadhu), Chitra, Kushtha" and the stool of meat-eating birds as per availability | 1/4th part in total | Massage in "apasmara" (epilepsy), same paste for "dhupana" (fumigation) and "pralepana" (external application in paste form) |- | 2 | Sesame oil | 1 part | |- | 3 | goat urine | 4 parts | |}

""Pippalyadi pradeha"" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | "Pippali", Rock-salt, "Chitra" ("Danti"), "Hingu, Hingusivatika" ("Vamsha-patrika"), "Kakoli, Sarshapa, Kakanasa, Kaitarya, Chandana" | Paste as required | "pradeha" (external application in the form of thick paste) and "dhupana" (fumigation) |- | 2 | Shoulder

bones, nails and ribs of the dog should be made to a paste by triturating with Goat's urine in the constellation of Pushya (8th "nakshatra") | | | - | 3 | Goat urine | | |}

""Paste of "apetarakshyadi yoga" (verse 39)"\"{| class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Paste of "Apetaraksasi, Kushtha, Putanakeshi" and "Choraka" triturated by adding (cow's or goat's) urine | | Unction |- | 2 | cow or goat urine | | Sprinkling over body
|}

""Different unction formulations, (verse 40)"\"{| class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Stool of leeches | QS | Unction |- | 2 | Ashes of the hair of the goat | | | - | 3 | Ashes of the bone of the ass | | | - | 4 | Ashes of the nails of the elephant | | | - | 5 | Ashes of the hair in the tail of the cow | | |}

""Different formulations for "nasya" (nasal drug delivery) (verse 41)"\"{| class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Urine of cow having reddish brown ("Kapila") color | QS | "Nasya" (nasal delivery)- Exceedingly useful for the cure of epilepsy |- | 2 | Urine of dog | | "Nasya" (nasal delivery) |- | 3 | Urine of Jackal | | "Nasya" (nasal delivery) |- | 4 | Urine of Cat | | "Nasya" (nasal delivery) |- | 5 | Urine of Lion | | "Nasya" (nasal delivery)
|}

"""Nasya" formulations (verse 42-43)"\"{| class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | "Bhargi, Vacha" and "Nagadanti" ("Kasthpatala") triturated with cow's urine | QS | Nasal delivery of five or six drops of the foregoing three formulations |- | 2 | "Shveta" ("Shveta Aparajita") and "Shveta Vishanika" ("Shatavari") triturated with cow's urine | | | - | 3 | "Jyotishmati" and "Nagadanti" triturated with cow's urine | | |}

"""Nasya" formulations (verse 43-44)"\"{| class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Part Proportion ! scope="col"! Indications |- | 1 | Oil | 1 part | "Nasya" |- | 2 | "Triphala" | All ingredients, 1/4th in part | | - | 3 | "Vyosha" ("shunthi", "pippali", and "maricha") | In equal proportions | | - | 4 | "Pitadru" ("devadaru") | | |}

"""Pradhamana nasya" formulations (verse 45)"\"{

! scope="col"
! scope="col"
! scope="col"
! scope="col"

{

Powder of "Pippali, Vrishchikali, Kushtha, Saindhava Lavana, Sauvarchala lavana, Samudra lavana, Vida lavana, Audbhida lavana" (vide sutra 1:88-89) and "Bhargi"

In the form of "pradhamana nasya" (in which powders of drugs are blown into the nostrils of the patient)

}

"Drugs for intra-ocular delivery/ delivery through conjuntival membrane"

""Kayasthadi Yoga"(verse 46-47)" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredients ! scope="col"! Application ! scope="col"! Indications |- | 1 | "Kayasta, Sharada Mudga" (Harita mudga), "Musta, Ushira, Yava, Shunthi, Pippali" and "Maricha" made to a paste by triturating with Goat's urine | "Varti" (wick) to be rubbed in water and used as ointment to apply in inner side of eyelids | Works as ambrosia to regain consciousness in "apasmara, unmada," snake bite, different types of poisoning and after drowning |}

""Mustadi Anjana"(verse 48-49)" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Application ! scope="col"! Indications |- | 1 | "Musta, Vayastha, Triphala, Kayastha, Hingu, Shadwal, Vyosha, Masha, Yava" made to a paste by triturating in goat's urine, sheep's urine and bull's urine. | "varti" (wick) to be rubbed in water and used as ointment to apply in inner side of eyelids | "apasmara" (epilepsy), "kilasa" (a type of leucoderma), "unmada" (insanity) and "visama jwara" (irregular fever) |- | 2 | Goat's urine, sheep's urine and bull's urine | | |}

"Dog's bile for"anjana"(verse 50)" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Application ! scope="col"! Indications |- | 1 | Dog-bile, collected during "Pushya" constellation | "Anjana" | "Apasmara" |- | 2 | Dog's bile collected in "Pushya" constellation mixed with ghee | "Dhupana" (fumigation) | "Apasmara" |}

"Fumigation of animal products (verse 51)" {} class="wikitable" |- ! scope="col"! S.No ! scope="col"! Ingredient ! scope="col"! Application ! scope="col"! Indications |- | 1 | Beaks, feathers and stool of Mongoose, Owl bird, Cat, Vulture, "Kita" (scorpion etc), Snake and Crow | "Dhupana" (fumigation) | "Apasmara" |}

Researches on Apasmara

Apasmara (epilepsy) and its management with maha-panchagavya ghrita

In a clinical study, maha panchagavya ghrita was given orally in a dose of 10 gms two times a day in first group (group A) of patients diagnosed with apasmara (epilepsy). In other group B, 3 gm of vachadi vati was given three times in a day with water in control group. The patients were enrolled and randomly categorized into two groups. The results of group A showed significant relief in the ictal features and post-ictal features of amnesia (61.3%) and drowsiness (50%). The frequency of attacks was significantly reduced from average of 1.75 times/week to 0.96 time/week. The overall effect showed that 25% patients had complete remission in group A. In the group B, significant relief was obtained in each of the pre-ictal features of loss of sleep. Relief in total post-ictal features (55.6%) was also significant. During follow up, the frequency of attacks was reduced to 50% in 33% of the patients, to 25% in 41.7% of the patients of group B. The above results imply that the maha panchagavya ghrita was comparatively better on the main clinical event, i.e., the ictal stage, and on the frequency, duration, and severity of attacks. It was more effective in maintaining the seizure threshold.Usha K. S. (2001). A clinical study on apasmara (epilepsy) and its management with Maha-Panchagavya Ghrita. Department of Kayachikitsa. IPGT & RA, Jamnagar.

Review of kushmanda ghrita in the management of Generalized Tonic-Clonic Seizures (GTCS)

Kushmanda ghrita is mentioned in Ashtanga Hridaya for the management of Epilepsy (Apasmara). It is one of the best anti-epileptics (apasmara-hara) drug consisting of mainly three drugs such as kushmanda (*Benincasa hispida*), yashtimadhu (*Glycyrrhiza glabra L.*) and cow's ghee (go-ghrita). It possesses digestive stimulant, anti-convulsant, strength promoting, and memory enhancing properties. Antiepileptic drugs appear to act primarily by blocking the initiation or spread of seizures. This occurs through a variety of mechanisms that modify the activity of ion channels or neurotransmitters. Experimental studies have proven that kushmanda swarasa (fruit extract) has antioxidant activity on the human brain. Vitamin-B present in kushmanda has a direct impact on energy levels, brain functioning, and cell metabolism. It also reduces fatigue and boosts mood. The seeds of *Benincasa hispida* (Thunb.) Cogn. is enriched with GABA and helps in seizure control action. The antioxidant and neuroprotective effect root of yashtimadhu protects susceptible brain cells from oxidative stress, resulting in reduced brain damage and improved neuronal function with improvement in memory. The ketone bodies, β -hydroxybutyrate, aceto-acetate, and acetone are synthesized and are able to cross the blood-brain barrier to provide an alternative source of energy for the brain. Compared to the conventional AEDs, a similar action can be obtained through this synergism in

Kushmanda ghrita. Kushmanda Ghrita is a unique combination that can be practiced in chronic cases of GTCS and acts as a rasayana. Ghee preparations are considered the foremost medium for delivering the active principles in neurological conditions affecting the brain because of their ability to cross the blood-brain barrier. Ghee is a good processing medium since it will carry the active principles of the processed drugs to the target tissue, also it will act as medicine by itself with its innate property called 'yogavahi'. Ghee obtained from cow's milk consists of short-chain and medium-chain fatty acids. Ketone bodies produced as a secondary metabolite from fat metabolism are proven to have anticonvulsant activity. As all three drugs present in kushmanda ghrita are memory boosting (medhya) and kushmanda act as alleviates diseases of brain (cheto-vikaranashaka). The GABA rich property of kushmanda, Na⁺ K⁺ channel inhibition property of yashtimadhu, and the ketogenic effect of ghrita act as a perfect trio in generalized tonic-clonic seizure management and thereby highlighting its uniqueness.Krishna Priya G., Vijay Bhaskar S. A Critical Review of Kushmanda ghrita in the management of Generalized Tonic-Clonic Seizures. International Journal of Advanced Research (IJAR). 2022; 10 (07), 479-483.

Ayurvedic management of apasmara w.s.r. to epilepsy- A Case Report

This study is regarding a case report of a 17-year-old male patient having 'apasmara' (epilepsy) came with symptoms such as mental irritation, disturbed sleep, mental impairment (dhee), grasping (dhriti), and memory (smriti). Previously, the patient used to get 2- 3 seizure attacks per day, which gradually increased in 10 years. The patient also complained of frequent jerking movements of both arms and neck, and loss of consciousness during attack. For treatment, both purificatory therapy (shodhana) and palliative therapy (shamana) was planned. For shodhana, medicated enema (matra basti) with 120 ml narayana oil for 20 days, nasal instillation of medicated drugs in powder form (pradhaman nasya) with vacha (Acorus calamus Linn.) and shunthi (*Zingiber officinale*) powder, twice a day for 20 days. For shamana, oral administration of different formulations was given such as juice of *benincasa hispida* (kushmanda swarasa) with yashtimadhu churna (*Glycyrrhiza glabra*) - 40 ml × twice a day for 8 days, further combination of smrutiisagara rasa + juice of *Centella asiatica* (mandukaparni rasa) with honey- 500 mg, twice a day for 8 days, combination of chaturbhaja rasa + smrutiisagara rasa + bramhi vati + saraswata vati with mahakalyanaka ghruta- 500 mg, twice a day for 30 days and raupya suvarna sutshekharra rasa 250 mg, twice a day for 30 days. In this case study, the treatment included ayurvedic medications, bio-purification (panchakarma) and shamana with yoga, pranayama, and asana. Panchakarma and internal ayurveda medicines work surprisingly with remarkable improvement in this patient. Shamana treatment along with pradhmana nasya, and matra basti, are observed safe without any interactions and adverse effects in the treatment in apasmara in this case study.Srajan Madhur Jain, Harish Garge, Shripad

Therapeutic potential of ayurveda treatment (panchakarma and herbal medicine) in epilepsy in children

This case study is reported on a child suffering from epilepsy for the last 12 years. The first episode of seizure developed at age 1 year and 6 months, since then anti-epileptic medicines were started. Treatment modalities adopted for this case are as follows; digestive power stimulant and digestant (deepana-pachana) with chitrakadi vati- 1 BD before meal and avipattikar powder- 1 tsf with warm water at night for 1 day only. Further whole body massage (sarvanga snehana) by bala oil and whole body sudation (sarvanga swedana) and medicated unctuous enema (matra basti) for 7 days by 20 ml of kalyanaka ghrita was given. Small amount of vacha (acorus calamus) was added with kalyanaka ghrita for matra basti. Afterwards internal medicines such as dhandhanyadi decoction (kashaya) TID orally and brihatvata-chintamani rasa-1 tab.BD and siddharthaka tablet-1 tab BD. Previous ongoing allopathic medicine Epilex (Sodium Valproate) 200mg 1 tsp BD after meal for 30 days, then syrup. epilex were stopped. Above treatment was again repeated with gap of 15 days and oral medication are continued for 2 months. In short for 2 Months this treatment was done i.e., 4 times with 15 days follow up. Deepana- pachana was given to control the formation of ama in the initial stage, which is very important in preventing the manifestation of the disease. Acharya Charak has mentioned bio-purification (shodhana) as a line of treatment, so in this case study matra basti with kalyanaka ghrita and shiroabhyanga with bramhi ghrita chikitsa has been chosen. They showed good results. Special scoring pattern were made to assess the efficacy of treatment, the details of which are as follows; the severity of attack and duration of convulsion reduced from score 2 before treatment to score zero i.e., complete relief in symptoms of epilepsy. The frequency of convulsion and ictal features were reduced from score 1 before treatment to score zero i.e., complete relief in symptoms of epilepsy. It means panchakarma treatment and internal ayurvedic medicine were given and proves to be effective in the management of apasmara and to improve the quality of life of the affected children. This treatment modality found to be significantly effective in this case of paediatric epilepsy and patient got relief. Lowkesh Chandravanshi, Aparna Singh. Therapeutic potential of Ayurvedic Treatment (Panchkarma and Herbal Medicine) in Pediatric Epilepsy: A Case Report. International Journal of Health and Rehabilitation Sciences. Volume 7, Issue 3, Sep. 2018; 155-160.

Efficacy of Shatavari taila nasya and internal administration of brahmi ghrita in the management of apasmara

Apasmara (epilepsy) is a disease affecting the higher center, i.e., the brain, so just oral administration is not possible to get the desired result. So, management of this disorder should be done through various modalities and routes of drug administration. One such non-oral route is nasya i.e., that is administering of powdered or liquid medicament into the nostrils. Shatavari (*Asparagus Racemosus*) oil was selected for this study which has different herbs like seeds of eranda (*Ricinus communis*), ashwagandha (*Withania somnifera*), and ksheeravidari kanda (*Prureria tuberosa*). All these are indicated in management of apasmara. The ingredients of brahmi ghrita are brahmi (*Bacopa monieri*), vacha (*Acorus calamus*), kushtha (*Saussurea lappa*), shankhapushpi (*Convolulus pluricaulis*) and age old ghee (*purana ghrita*). These herbs are also individually proven better in internal medication (shamana aushadhi). Total 34 diagnosed patients of apasmara fulfilling the inclusion criteria and willing to register for study were enrolled for this study for the duration of 2 months. Assessment was done before and after the study period the clinical features of epilepsy by International League against Epilepsy (ILAE), patients were screened and selected according to the diagnostic criteria and a single group study was conducted. They were administered nasya with shatavari taila for seven days and later subjected to shamana therapy by brahmi ghrita. The patients were analysed after nasya at the end of seven days and later on every consecutive 15th day, for a period of two months. Frequency of the attacks were reduced after seven days of nasya. Consequently, improvements were observed in the complaints of loss of consciousness, where 93.3% reported them before treatment and after nasya it was found to be just 3.3% of the patient and later after the shamana treatment, it was found to have reduced in 76% of the patient. Convulsive movements were reported by 96% of the patient, which at the end of total therapy was found to reduce to 16.7%. Fall, epileptic cry, frothing from mouth and chattering of teeth were significantly ($p < 0.001$) reduced by the end of follow up period of 2 months. Similar observations were made in case of duration and severity of attacks. Epilepsy (apasmara) is an extensively researched disease and its management has just reached a stage where only seizures can be controlled. Some difficulties arise, in terms of the route of drug administration during the active state of convulsion where the conventional routes are difficult to access or inaccessible. Hence in this study, an easier route of administration i.e., nasal route was explored, for providing management with better outcome, for epilepsy. Sharmitesh R Tripathi, Savitha HP, Suhas Kumar Shetty. Efficacy of Shatavari taila Nasya and Brahmi gritha in the management of Apasmara. J Pharm Sci Innov. 2016;5(6), 181-18.

Related Chapter

Apasmara Nidana, Manas, Aatma, Smriti, Indriya, Psychiatric diseases, Neurological diseases

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Kshatakshina Chikitsa

Chikitsa Sthana Chapter 11. Management of Kshata-kshina (Emaciation due to Trauma)

Abstract

Kshatakshina is a condition with *kshaya* (wasting, debility, emaciation) due to injury/trauma. Trauma is usually from external injury but in the present context this term signifies rupture of lung tissue due to exogenous as well as endogenous causes. The etiology includes significant exertion beyond one's capacity. The disease shows close resemblance with *rajayakshma* in pathogenesis, as both involve *anuloma kshaya* (the depletion of *dhatus* takes place in the direction of their nourishment i.e. *rasa* then *rakta* then *mamsa* and so on) and *pratiloma kshaya* (depletion of *dhatus* in the direction opposite to their nourishment i.e. *shukra* then *majja* then *asthi* and so on). Nourishment therapy is the principle of management in *kshatakshina*. Various formulations to regain strength and replenishment of depleted tissues are described in this chapter.

Keywords: *Kshatakshina*, adventures, occupational disease, pneumo-thorax, tuberculosis, nourishment therapy.

Introduction

In Ayurveda, rather than disease, mainly the syndromes are described and *kshatakshina* is also a syndrome. *Kshata* means injury and *kshina* means depletion of tissue. The term literally means depletion of tissues due to injury. It includes various pathologies leading to depletion of tissues in the body as a result of external and internal injuries. It shows close resemblance with tuberculosis, however the cardinal cause in *kshatakshina* is injury. Hemoptysis (symptom of pulmonary tuberculosis), hematuria (symptom of renal tuberculosis) and diarrhea (symptom of intestinal tuberculosis) all have cardinal symptoms of tuberculosis which are described as the symptom of *kshatakshina*. It refers to those dreaded complications of tuberculosis that appear suddenly and require prompt treatment just as acute onset of chest-pain in patient of tuberculosis who suddenly develops pneumothorax due to rupture of subpleural blebs and massive painless hematuria in the patient of genitourinary tuberculosis. Similar to tuberculosis, there is impaired immunity in *kshatakshina* patients also. *Kshatakshina* refers to cluster of diseases like spontaneous pneumothorax and

renal tuberculosis, whereas presence of hemoptysis and hematuria in a single disease suggests a pulmonary-renal syndrome (eg, Goodpasture's syndrome, Wegener's granulomatosis). The diseases due to excess exertion during work or occupational hazards can also be referred to *kshatakshina*.

Sanskrit text, Transliteration and English Translation

अथातः क्षतक्षीणचिकित्सितं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātaḥ kṣatakṣīṇacikitsitam vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAtaH kShatakShINacikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Kshatakshina Chikitsa (Management of emaciation due to trauma). Thus said Lord Atreya. [1-2]

उदारकीर्तिर्ब्रह्मर्षिरात्रेयः परमार्थवित्। क्षतक्षीणचिकित्सार्थमिदमाह चिकित्सितम्॥३॥

udārakīrtirbrahmarśirātrēyah paramārthavit| kṣatakṣīṇacikitsārthamidamāha
cikitsitam||3|| udArakIrtirbrahmarShirAtreyaH paramArthavit|
kShatakShINacikitsArthamidamAha cikitsitam||3||

Atreya, the illustrious sage, the brahmin-seer and the knower of ultimate truth, (thereafter) expounded therapeutics for the treatment of *kshatakshina*, as given below. [3]

Nidana (Etiology) of *kshatakshina*

धनुषाऽयस्यतोऽत्यर्थं भारमुद्वहतो गुरुम् पततो विषमोच्चेभ्यो बलिभिः सह युद्यतः||४|| वृषं हयं वा धावन्त दम्यं वाऽन्यं निगृहणतः। शिलाकाष्ठाश्मनिर्घातान्क्षपतो निघ्नतः परान्॥५॥ अधीयानस्य वाऽत्युच्चर्यैर्दूरं वा व्रजतो द्रुतम्। महानदीं वा तरतो हयैर्वा सह धावतः॥६॥ सहसोत्पततो दूरं[१] तूर्णं चातिप्रनृत्यतः। तथाऽन्यैः कर्मभिः क्रौरैर्भृशमभ्याहतस्य च॥७॥ विक्षते वक्षसि व्याधिर्बलवान् समुदीर्यते। स्त्रीषु चातिप्रसक्तस्य रुक्षाल्पप्रमिताशिनः॥८॥

dhanuṣā”yasyatō’tyarthaṁ bhāramudvahatō gurum| patatō viṣamōccēbhyō balibhiḥ saha yudhyataḥ||4|| vṛṣam̄ hayam̄ vā dhāvantam̄ damyam̄ vā’nyam̄ nigṛhṇataḥ| śilākāṣṭhāśmanirghātān kṣipatō nighnataḥ parān||5|| adhīyānasya vā’tuccairdūram̄ vā vrajatō drutam| mahānadīm vā taratō hayairvā saha dhāvataḥ||6|| sahasōtpatataḥ dūram [1] tūrṇam̄ cātipranītyataḥ| tathā’nyaiḥ karmabhiḥ krūraibhṛśamabhyāhatasya ca||7|| vikṣatē vakṣasi vyādhirbalavān samudīryatē| strīṣu cātiprasaktasya rūkṣalpapramitāśināḥ||8|| dhanuṣāyasyato~atyarthaM bhāramudvahato gurum| patato viṣamoccebhyo balibhiH saha yudhyataH||4|| vRuShaM hayaM vA dhAvantaM damyam vA~anyaM nigRuhNataH| shilAkAShThAshmanirghAtAn kShipato nighnataH

parAn||5|| adhlyAnasya vA~atyuccairdUraM vA vrajato drutam| mahAnadIM vA tarato hayaivA saha dhAvataH||6|| sahasotpatato dUraM tUrNaM cAtipranRutyataH| tathA~anyaiH karmabhiH krUrairbhRushamabhyAhatusya ca||7|| vikShate vakShasi vyAdhirbalavAn samudIryate| strIShu cAtiprasaktasya rUkShAlpapramitAshinaH||8||

The person who (beyond his own power) subjects himself to following activities:

1. Straining in excess with a hard bow
2. Carrying heavy weight
3. Falling or jumping over uneven place or from high altitude.
4. Wrestling or fighting with stronger persons.
5. Restraining a running bull, stallion or any other strong animal requiring control
6. Throwing heavy stones, wooden blocks, or equipment made of stone or beating others with these
7. Reciting scriptures loudly
8. Running a long distance or walking too fast.
9. Crossing a big river by swimming
10. Running along with horse
11. Sudden long and high jump
12. Practicing violent dance for a long time; and
13. Being excessively injured by other violent and cruel acts.
14. One who indulges excessively in sexual intercourse
15. Who indulges in excess dry, less quantity food or limited food

Kshatakshina, the formidable disease, gets manifested, as a result of the injury to the chest due to the above causative factors. [4-8]

Pathogenesis and clinical features

उरो विरुज्यते तस्य भिद्यतेऽथ विभज्यते| प्रपीडयेते ततः पाश्वे शष्यत्यङ्गं प्रवेपते||९|| क्रमादवीर्यं बलं वर्णं रुचिरग्निश्च हीयते| ज्वरो व्यथा मनोदैन्यं विडभेदोऽग्निवधादपि||१०|| दृष्टः श्यावः सुदुर्गन्धः पीतो विग्रथितो बहुः| कासमानस्य च[१] श्लेष्मा सरक्तः सम्प्रवर्तते||११|| स क्षतः क्षौयतेऽत्यर्थं तथा शुक्रौजसोः क्षयात्||१२||

urō virujyatē tasya bhidyatē'tha vibhajyatē| prapīdyētē tataḥ pārśvē śuṣyatyaṅgam
pravēpatē||९|| kramādvīryam balaṁ varṇo ruciragniśca hīyatē| jvarō vyathā
manōdainyam viḍbhēdō'gnivadhādapi||१०|| duṣṭah śyāvah sudurgandhah pītō vigrathitō
bahuh| kāsamānasya ca [१] ślēṣmā saraktaḥ sampravartatē||११|| sa kṣataḥ
kṣīyatē'tyartham tathā śukraujasōḥ kṣayatē uro virujyate tasya bhidyate~atha vibhajyate|
prapīdyete tataḥ pArshve shuShyati~ggam pravepate||९|| kramAdvīryam balaṁ
varNo ruciragnishca hīyatē jvaro vyathā manodainyam viḍbhēdo~agnivadhAdapi||१०||
duShTaH shyAvaH sudurgandhaH plto vigrathito bahuH| kAsamAnasya ca shleShmā
saraktaḥ sampravartate||११|| sa kShataḥ kShīyate~atyartham tathā shukraujasoḥ
kShayat||१२||

Because of the above mentioned causative factors, the chest gets broken, punctured and cracked; sides of the chest get pressed and there is emaciation as well as tremor in the limbs. Gradually the potency, strength, complexion, appetite and agni (the power of digestion) of the patient get reduced. The patient suffers from fever, pain, mental depression and diarrhea even with the diminution of *agni* (decreased power of digestion).

While coughing, the patient spits out phlegm which is putrid, grayish in color, foul smelling, and yellow and knotty, in large quantities along with blood. The person suffering from *kshatakshina* becomes excessively emaciated due to further wastage of *shukra* and *ojas*. [9-12]

Prodromal signs and symptoms

अव्यक्तं लक्षणं तस्य पूर्वरूपमिति स्मृतम्॥१२॥ उरोरुकशोणितच्छर्दिः कासो वैशेषिकः क्षते| क्षीणे सरक्तमूत्रत्वं पार्श्वपृष्ठकटिग्रहः॥१३॥

avyaktam̄ lakṣaṇam̄ tasya pūrvarūpamiti smṛtam||12|| urōrukśōṇitacchardih kāsō vaiśeṣikah kṣatē| kṣīṇē saraktamūtratvam̄ pārśvapṛṣṭhakatigrahaḥ||13|| avyaktaM̄ lakShaNaM̄ tasya pUrvarUpamiti smRutam||12|| urorukshoNitacchardiH kAso vaisheShikaH kShate| kShINe saraktamUtratvaM pArshvapRuShThakaTigrahaH||13||

Signs and symptoms in unmanifested form (less manifested) constitute the premonitory signs and symptoms of this disease. (There is no appearance of premonitory sings).

However, if there is *kshata* (injury), pain in the chest, blood vomiting and cough are specially manifested, and if there is *kshaya* (diminution of tissue elements), then hematuria and stiffness of the sides of the chest, back and lumbar region are specially manifested [121/2-13]

Prognosis

अल्पलिङ्गस्य दीप्ताग्ने: साध्यो बलवतो नवः| परिसंवत्सरो याप्यः सर्वलिङ्गं तु वर्जयेत्॥१४॥

alpaliṅgasya dīptāgnēḥ sādhyō balavatō navah| parisamvatsarō yāpyah sarvaliṅgam tu varjayēt||14|| alpali~ggasya dIptAgneH sAdhyo balavato navaH| parisaMvatsaro yApyaH sarvali~ggaM tu varjayet||14||

If the signs and symptoms are mild, the power of digestion (of the patient) is strong, patient has enough strength and if the disease is new (freshly occurred), then it is curable. If the disease is chronic i.e. more than one year, then it is *yapya* (palliable). If however, all the signs and symptoms of the disease are simultaneously manifested, then such a patient should not be treated, because the condition is incurable.[14]

Management

उरो मत्वा क्षतं लाक्षां पयसा मधुसंयुताम्| सद्य एव पिबेज्जीर्ण पयसाऽद्यात् सशर्करम्॥१७॥
पार्श्वबस्तिरुजी चाल्पपित्ताग्निस्तां सुरायुताम्| भिन्नविट्कः समुस्तातिविषापाठां सवत्सकाम्॥१६॥ लाक्षां

सर्पिमधूच्छज्जं जीवनीयगणं सिताम् त्वक्कीरों समितां क्षीरे पक्त्वा दीप्तानलः पिबेत्॥१७॥
 इक्ष्वालिकाबिसग्रन्थिपदमकेशरचन्दनैः। शतं पयो मधुयुतं सन्धानार्थं पिबेत् क्षती॥१८॥ यवानां
 चूर्णमादाय क्षीरसिद्धं घृतप्लुतम् ज्वरे दाहे सिताक्षौद्रसक्तून् वा पयसा पिबेत्॥१९॥
 मधूकमधुकद्राक्षात्वक्कीरीपिप्पलीबलाः। कासी पार्श्वस्थिशूली च लिहयात्सघृतमाक्षिकाः॥२०॥

urō matvā kṣatam lākṣām payasā madhusaMyutām| sadya ēva pibējjīrṇē payasā'dyāt
 saśarkaram||15|| pārvabastirujī cālpapittāgnistām surāyutām| bhinnaviṭkaḥ
 samustātivisāpāṭhām savatsakām||16|| lākṣām sarpirmadhūcchiṣṭām jīvanīyagaṇām
 sitām| tvakkṣīrīm samitām kṣīrē paktvā dīptānalaḥ pibēt||17||
 ikṣvālikābisagranthipadmakēśaracandanaiḥ| śītām payō madhuyutām sandhānārthām
 pibēt kṣatī||18|| yavānām cūrṇamādāya kṣīrasiddham ghṛataplutam| jvarē dāhē
 sitākṣaudrasaktūn vā payasā pibēt||19|| madhūkamadhukadrākṣātvakkṣīrīpippalībalāḥ|
 kāsī pārvvāsthiśūlī ca lihyātsaghṛtamākṣikāḥ||20|| Uro matvA kShataM IAkShAM
 payasA madhusaMyutAm| sadya eva pibējjīrNe payasA~adyAt sasharkaram||15||
 pArshvabastirujI cAlpapittAgnistAM surAyutAm| bhinnaviTkaH samustAtiviShApAThAM
 savatsakAm||16|| IAkShAM sarpirmadhUcchiShTaM jIvanlyagaNaM sitAm| tvakkShIrI
 samitAM kShIre paktvA dlptAnalaH pibet||17||
 ikShvAlikAbisagranthipadmakesharacandanaiH| shRutaM payo madhuyutaM
 sandhAnArthaM pibet kShatl||18|| yavAnAM cUrNamAdAya kShIrasiddhaM
 ghRutaplutam| jvare dAhe sitAkShaudrasaktUn vA payasA pibet||19||
 madhUkamadhukadrAkShAtvakkShIrIpippallbalAH| kAsI pArshvAstishUll ca
 lihyAtsaghRutamAkShikAH||20||

If there is fresh injury to the chest, then the patient should be given *laksha* (lac) along with milk and honey. After the potion is digested, he should be given food along with milk and sugar.

If there is pain in the sides of the chest or in the region of the urinary bladder, and if there is less of *pitta* and *agni* (digestive power), then the patient should be given *laksha* (lac) along with *sura* (alcoholic drink).

If there is diarrhea, then the patient should be given *laksha* along with *musta*, *ativisha*, *patha* and *vatsaka*.

If the patient has strong power of digestion, then he should be given milk cooked with *laksha*, ghee, bee's wax, and drugs belonging to *jivaniya* group, sugar and *tvaksiri*.

For healing of the injury, the patient should take milk boiled with *ikshuvalika*, *bisagranthi*, *padma kesara* and *chandana* with added honey.

If there is fever and burning sensation in the body, then the patient should take barley powder cooked with milk and added ghee. Alternatively, such a patient should take sugar, honey and *saktu* (roasted corn-flour) mixed with milk.

If the patient is suffering from cough and pain in the sides of the chest as well as bones, then he should take linctus prepared of the powder *madhuka* (flower), *madhu*, *draksha*, *tvakshiri*, *pippali* and *bala* mixed with ghee and honey. [15-20]

Eladi gutika

एलापत्रत्वचोऽर्धक्षाः पिप्पल्यर्धपलं तथा। सितामधुकखर्जूरमृदवीकाश्च पलोन्मिताः॥२१॥ सञ्चूर्ण्य मधुना युक्ता गुटिकाः सम्प्रकल्पयेत्। अक्षमात्रां ततश्चैका भक्षयेन्ना दिने दिने॥२२॥ कास श्वासे ज्वरं हिक्कां छद्मि मूर्च्छां मदं भ्रमम्। रक्तनिष्ठीवनं तृष्णां पार्श्वशलमरोचकम्॥२३॥ शोषप्लीहाद्यवातांश्च स्वरभेदं क्षतं क्षयम्। गुटिका तर्पणी वृष्या रक्तपित्तं च नाशयेत्॥२४॥ इत्येलादिगुटिका।

elāpatratvacō'rdhākṣāḥ pippalyardhapalam tathā| sitāmadhukakharjūramṛdvīkāśca palōnmitāḥ॥21॥ sañcūrṇya madhunā yuktā guṭikāḥ samprakalpayet| akṣamātrāṁ tataścaikāṁ bhakṣayēnnā dinē dinē॥22॥ kāsaṁ śvāsaṁ jvaraṁ hikkāṁ chardiṁ mūrcchāṁ madaṁ bhramam| raktaniṣṭhīvanaṁ ṛṣṇāṁ pārśvaśūlamarōcakam॥23॥ śōṣaplīhādhyavātāṁśca svarabhēdaṁ kṣatāṁ kṣayam| guṭikā tarpanī vṛṣyā raktaipiṭṭam ca nāśayet॥24॥ ityēlādigutikā elApatratvaco~ardhAkShAH pippalyardhapalaM tathA| sitAmadhukakharjUramRudvIkAshca palonmitAH॥21॥ sa~jcUrNya madhunA yuktA guTikAH samprakalpayet| akShamAtrAM tatashcaikAM bhakShayennA dine dine॥22॥ kAsaM shvAsaM jvaraM hikkAM chardiM mUrcchAM madaM bhramam| raktaniShThIvanaM tRuShNAM pArshvashUlamarocakam॥23॥ shoShaplIhADhyavAtAMshca svarabhedaM kShataM kShayam| guTikA tarpaNI vRuShyA raktaipiṭṭam ca nAshayet॥24॥ ityelAdiguTikA|

Half *aksha* (five grams) each of *ela*, *patra* and *tvak*, half *pala* (twenty grams) of *pippali*, one *pala* each of *sita*(forty grams), *madhuka*, *kharjura* and *mridvika* should be made to a powder. Honey should be added to this powder to make a paste. From this paste, pills of one *aksha* each should be prepared. One such pill should be taken every day. It cures *kasa* (cough), *shvasa* (dyspnea), *jwara* (fever), hiccup, vomiting, fainting, hemoptysis, morbid thirst, pain in the sides of the chest, anorexia, consumption, splenic enlargement, *adhyavata* (rheumatoid arthritis), hoarseness of voice, *kshata* (injury to the chest), *kshaya* (diminution of tissues elements) and *raktaipiṭṭa* (a condition charcterised by bleeding from different parts of the body). This pill is refreshing and aphrodisiac. [21-24]

Treatment of excessive bleeding

रक्तेऽतिवृते दक्षाण्डं यूषैस्तोयेन वा पिबेत्। चटकाण्डरसं वापि रक्तं वा छागजाङ्गलम्॥२५॥ चूर्णं पौनर्नवं रक्तशालितण्डुलशर्करम्। रक्तष्ठीवी पिबेत् सिद्धं द्राक्षारसपयोघृतैः॥२६॥

raktē'tivṛttē dakṣāṇḍāṁ yūṣaistōyēna vā pibēt| caṭakāṇḍarasāṁ vā'pi raktāṁ vā chāgajāṅgalam॥25॥ cūrṇāṁ paunarnavāṁ raktaśālitaṇḍulaśarkaram| raktaṣṭhīvī pibēt siddham drākṣārasapayōghṛtaiḥ॥26॥ rakte~ativRutte dakShANDaM yUShaiystoena vA pibet| caTakANDarasaM vA~api raktaM vA chAgajA~ggalam॥25॥ cUrNaM paunarnavaM raktashAlitaNDulasharkaram| raktaShThIvl pibet siddhaM drAkShArasapayoghRutaiH॥26॥

If there is excessive bleeding, then the patient should take eggs of *daksha* (wild hen) along with green gram soup or water. He may also take the soup of eggs of sparrow or (preparations) of the blood of goat or wild animals (like deer, etc).

The patient having hemoptysis should take the powder of *punarnava*, red variety of shali rice and sugar cooked along with grape juice, milk and ghee. [25-26]

Various formulations

मधुकमधुकक्षीरसिद्धं वा तण्डुलीयकम्। मद्वातस्त्वजामेदः सुराभूष्टं ससैन्धवम्॥२७॥ क्षामः क्षीणः क्षतीरस्कस्त्वनिद्रः सबलेऽनिले। शृतक्षीरसरेणादयात् सक्षोद्रघृतशर्करम्॥२८॥ शर्करां यवगोधूमौ जीवकर्षभक्तौ मधु। शृतक्षीरानुपानं वा लिह्यात् क्षोणः क्षती कृशः॥२९॥ क्रव्यादमांसनिर्यूहं घृतभृष्टं पिपेच्च सः। पिप्पलीक्षोद्रसंयक्तं मांसशोणितवर्धनम्॥३०॥ न्यग्रोधोटम्बराश्वत्थप्लक्षशालप्रियड्गुभिः। तालमस्तकजम्बूत्वक्षिप्रयालैश्च सपदमकैः॥३१॥ साश्वकर्णः शृतात् क्षीरादद्याज्जातेन सर्पिषा। शाल्योदनं क्षतोरस्कः क्षीणशुक्रश्च मानवः॥३२॥ यष्ट्याहवनागबलयोः क्वाथे क्षीरसम् घृतम्। पयस्यापिप्पलीवाशीकल्कसिद्धं क्षते शुभम्॥३३॥ कोललाक्षारसे तद्वत् क्षीराष्टगुणसाधितम्। कलकैः कट्वड्गदार्वात्वगवत्सकत्वकफलैर्घृतम्॥३४॥

madhūkamadhu kākṣīrasiddham vā taṇḍulīyakam| mūḍhavātastvajāmēdah surābhṛṣṭam
sasaindhavam||27|| kṣāmaḥ kṣīnah kṣatōraskastvanidraḥ sabalē’nilē|
śṛtakṣīrasarēñādyāt sakṣaudraghr̄taśarkaram||28|| śarkarām yavagōdhūmau
jīvakarṣabhakau madhu| śṛtakṣīrānupānam vā lihyāt kṣīnah kṣatī kṛṣah||29||
kravyādamāṁsaniryūham ghṛtabhṛṣṭam pibēcca sah| pippalīkṣaudrasaṁyuktam
māṁsaśōnitavardhanam||30|| nyagrōdhōdumbarāśvatthaplakṣāśālapriyaṅgubhiḥ|
tālamastakajambūtvakpriyālaisca sapadmakaiḥ||31|| sāsvakarṇaiḥ śṛtāt
kṣīrādadyājjātēna sarpiṣāl sālyōdanam kṣatōraskah kṣīnaśukraśca mānavah||32||
yaṣṭyāhvanāgabalayōḥ kvāthē kṣīrasamām ghṛtam| payasyāpippalīvāṁśīkalkasiddham
kṣatē śubham||33|| kōlalākṣārasē tadvat kṣīrāṣtaguṇasādhitam| kalkaiḥ
kaṭvaṅgadārvītvagvatsakatvakphalaigṛtam||34|| madhUkamadhu kākṣīrasiddhaM vA
taNDullyakam| mUDhavAtastvajAmedaH surAbhRuShTaM sasaindhavam||27||
kShAmaH kShI NaH kShatoraskastvanidraH sabale~anile| shRutakShIrasareNAdyAt
sakShaudraghRutasharkaram||28|| sharkarAM yavagodhUmau jlvakarShabhakau
madhu| shRutakShI AnupAnaM vA lihyAt kShI NaH kShatī kRushaH||29||
kravyAdamAMsaniryUhaM ghRutabhuShTaM pibecca saH|
pippallīkShaudrasaMyuktaM mAMsashoNitavardhanam||30||
nyagrodhodumbarAshvatthaplakShashAlapriya~ggubhiH|
tAlamastakajambUtvakpriyAlaishca sapadmakaiH||31|| sAshvakaRNaI H shRutAt
kShI rAdadyAjjAtena sarpiShA| shAlyodanaM kShatoraskaH kShI Nashukrashca
mAnavaH||32|| yaShTyAhvanAgabalayoH kvAthe kShIrasamaM ghRutam|
payasyApippalīvAMshI kalkasiddhaM kShate shubham||33|| kolalAkShArase tadvat
kShI rAShTaguNasAdhitam| kalkaiH kaTva~ggadArvītvagvatsakatvakphalaigṛhRuta
||34||

Milk should be boiled with the paste of *madhooka* and *madhuka*. With this milk, *tanduliyaka* should be cooked (which is useful for the patient suffering from the hemoptysis).

If there is *mudhavata* (claudication of *vata*), the patient should take the fat of goat fried with *sura* (type of liquor) and mixed with rock salt.

If the patient is weak, emaciated and having injury in the chest, sleeplessness and excessive aggravation of *vayu*, then he should take goat's fat boiled with the cream of milk and added with honey, ghee and sugar.

If the patient is emaciated, having injury in the chest and cachectic, he may be given sugar, barley, wheat, *jivaka*, *rushabhaka* and honey in linctus form. Thereafter, he should take boiled milk.

The above mentioned patient should take the decoction of the meat of carnivorous animal sizzled with ghee and added with *pippali* and honey. This potion promotes muscles tissues and blood.

The patient having injury to the chest and diminution of semen, should take *sali* rice mixed with ghee which latter is prepared of the milk boiled with *nyagrodha*, *udumbbara*, *ashvattha*, *plaksha*, *sala*, *priyangu*, tuft of *tala*, bark of *jambu*, *priyala*, *padmaka* and *asvakarna*.

Yashtyavahadi ghrita

Ghee should be cooked with equal quantity of milk, the decoction of *madhuyashti* and *nagabala* (four times of ghee in total), and the paste of *payasya*, *pippali* and *vamshi* (one fourth in total of ghee). The medicated ghee is useful in the treatment of *kshata* (injury to chest).

Koladi ghrita

Similarly, ghee should be cooked with the decoction of *kola* and *laksha* (four times in total of ghee), eight times of milk, and the paste of the bark of *kaivanga*, bark of *darvi*, bark of *kutaja* and fruit of *kutaja* (one fourth in total of ghee). This medicated ghee is useful in the treatment of *kshata*.[27-34]

Amritaprasha ghee

जीवकर्षभक्तौ वीरां जीवन्तीं नागरं शटीम्| चतसः पर्णिनीर्भदे काकोल्यौ द्वे निदिग्धिके॥३५॥ पुनर्नवे द्वे मधुकमात्मगप्तां शतावरीम् ऋदधिं परूषकं भार्गी मृद्वीकां बृहतीं तथा॥३६॥ शृङ्गाटकं तामलकीं पर्यस्यां पिप्पलीं बलाम् बदराक्षोटखर्जूरवातामाभिषुकाण्यपि॥३७॥ फलानि चैवमादीनि कल्कान कर्वीत कार्षिकान् धात्रीरसविदारीक्षुच्छागमासरसं पयः॥३८॥ कुर्यात् प्रस्थोन्मितं तेन घृतप्रस्थं विपाचयेत्। प्रस्थार्थं मधुनः शीते शर्कराधैतुलां तथा॥३९॥ द्विकार्षिकाणि [१] पत्रैलाहेमत्वड्मरिचानि च। विनीय चूर्णितं तस्माल्लिहयान्मात्रां सदा नरः॥४०॥ अमृतप्राशमित्येतन्नराणाममृतं घृतम्। सुधामृतरसं प्राशयं क्षीरमासरसाशिना॥४१॥ नष्टशुक्रक्षतक्षीणदुर्बलव्याधिकर्शितान्। स्त्रीप्रसक्तान् कृशान् वर्णस्वरहीनांश्च बृहयेत्॥४२॥ कासहिककाज्वरश्वासदाहतृष्णासपितनुत्। पुत्रं वमिमूर्च्छाहृदयोर्निमूत्रामयापहम्॥४३॥ इत्यमृतप्राशघृतम्।

jīvakarṣabhakau vīrām jīvantīm nāgaram śatīm| catasrah parṇinīrmēdē kākōlyau dvē nidigdhikē॥३५॥ punarnavē dvē madhukamātmaguptām śatāvarīm| ṛddhirīm parūṣakam bhārgīm mrdvīkām bṛhatīm tathā॥३६॥ śṛṅgāṭakam tāmalakīm payasyām pippalīm balām| badarākṣōṭakharjūravātāmābhishukāṇyapि॥३७॥ phalāni caivamādīni kalkān kurvīta kārṣikān| dhātrīrasavidārīksucchāgamāṁsarasaṁ payah॥३८॥ kuryāt

prasthōnmitāṁ tēna ghṛtaprasthāṁ vipācayēṭ| prasthārdhāṁ madhunah śītē
 śarkarārdhatulāṁ tathā||39|| dvikārṣikāṇi [2] patraiḥhēmatvaṇmaricāni ca| vinīya
 cūrṇitāṁ tasmāllihyānmātrāṁ sadā narah||40|| amṛtaprāśamityētannarāṇāmamṛtam
 ghṛtam| sudhāmṛtarasāṁ prāsyāṁ kṣīramāṁsarasaśinā||41||
 naṣṭaśukrakṣatakṣīnadurbalavyādhikarśitān| strīprasaktān kṛśān varṇasvarahīnāṁśca
 bṛmhayēṭ||42|| kāsaḥikkājvaraśvāsadāhaṭṣṇāsrapittanut| putradāṁ
 vamimūrcchāhṛdyōnimūtrāmayāpaham||43|| ityamṛtaprāśaghṛtam jivakarShabhakau
 vīrAM jlvantIM nAgaraM shaTIm| catasraH parNinIrmede kAkolyau dve nidigdhike||35||
 punarnave dve madhukamAtmaguptAM shatAvarlM RuddhiM parUShakaM bhArgIM
 mRudvIkAM bRuhatIM tathA||36|| shRu~ggATakaM tAmalakIM payasyAM pippalIM
 balAm| badarAkShoTakharjUravAtAmAbhiShukANyapi||37|| phalAni caivamAdIni kalkAn
 kurvita kArShikAn| dhAtrIrasavidArlkShucchAgamAMsarasaM payaH||38|| kuryAt
 prasthonmitāM tena ghRutaprasthāM vipAcayet| prasthArdhāM madhunaH shlte
 sharkarArdhatulAM tathA||39|| dvikArShikANi patraiḥhematva~gmaricAni ca| vinlyā
 cUrNitaM tasmAllihyAnmAtrAM sadA narah||40||
 amRutaprAshaṁityetannarANAmamRutaM ghRutam| sudhAmRutarasaM prAshyaM
 kShIramAMsarasaShinA||41|| naShTashukrakShatakShINadurbalavyAdhikarshitAn|
 strīprasaktAn kRushAn varNasvarahInAMshca bRuMhayet||42||
 kAsahikkAjavarashvAsadAhatRuShNArapittanut| putradāM
 vamimUrcchAhRudyonimUtrAmayApaham||43|| ityamRutaprAshaghRutam|

Two *prasthas* of ghee should be cooked with the juice *dhatri* (two *prasthas*), juice of *vidari* (two *prasthas*), sugarcane juice (two *prasthas*), soup of the meat of goat (two *prasthas*), milk (two *prasthas*), and the paste (one *karsha* each) of *jivaka*, *rsabhaka*, *vira*, *livanti*, *nagara*, *shati*, *shalaparni*, *prushniparni*, *mashaparni*, *mudgaparni*, *meda*, *mahameda*, *kakoli*, *kshirakakoli*, *kantakari*, *bruhati*, *shveta punarnava*, *rakta punarnava*, *madhuka*, *atmagupta*, *shatavari*, *riddhi*, *parushaka*, *bharangi*, *mridvika*, *brihati*, *shringataka*, *tamalaki*, *payasya* (*kshiravidari*), *pippali*, *badara*, *akshota*, *kharjura*, *vatama*, *abhishuka* (*pista*) and such other fruits which alleviate *vata* and *pitta*. After cooking when the the recipe is cooled, one *prastha* of honey, half *tula* of sugar, and the powder (two *karshas* each) of *patra*, *ela*, *hema*, *tvak* and *maricha* should be added to it. This medicated ghee should be taken by a person in appropriate dose regularly. This is called *amrita prasa ghrita* and it is like *amrita* (ambrosia) for human beings. This linctus is like *sudha* (ambrosia worth the consumption of worldly creatures) and the *amrita* (ambrosia worth the consumption of the gods). It should be taken along with milk and meat soup. It promotes nourishment of persons who had depleted *shukra* (as in azoospermia or oligospermia), who are suffering from *kshatakshina*, who are weak, who are emaciated because of chronic diseases, who are cachectic and who have lost their complexion and voice. It cures cough, hiccup, fever, asthma, burning sensation, morbid thirst, *rakta-pitta*, vomiting, fainting and diseases of the heart, female genital tract and urinary tract. It helps in the treatment of infertility. [35-43]

Shvadamshtadi ghee

श्वदंष्ट्रोशीरमञ्जिष्ठाबलाकाशमर्यकतृणम्| दर्भमूलं पृथक्पर्णो पलाशर्षभकौ स्थिराम्||४४|| पलिंकं साधयेतेषां रसे क्षीरचतुर्गणे| कल्कः स्वगुप्ताजीवन्तीमेदर्षभकजीवकैः||४५||
शतावर्यृदधिमृदवीकाशकराश्रावणीबिसैः| प्रस्थः सिद्धो घृताद्वातपितहृद्र(द्भ)वशूलनुत्||४६||
मूत्रकृच्छ्रप्रमेहाशःकासशोषक्षयापहः| धनुःस्त्रीमद्यभाराद्वखिन्नानां बलमासदः||४७|| इति
श्वदंष्ट्रादिघृतम्|

śvadarṁṣṭrōśīramañjiṣṭhābalākāśmaryakatṛṇam| darbhamūlāṁ pṛthakparṇīṁ
palāśarṣabhadrau sthirām||44|| palikāṁ sādhayēttēśāṁ rasē kṣīracaturguṇē| kalkah
svaguptājīvantīmēdarṣabhadrau kajīvakaiḥ||45|| śatāvaryṛddhimṛdvīkāśarkarāśrāvanībisiāḥ|
prasthaḥ siddhō ghṛtādvātāpittahṛddra(dbha)vaśūlanut||46||
mūtrakṛcchrāpramēhārṣahkāsaśōṣakṣayāpahāḥ|
dhanuhstrīmadhyabhārādhvakhinnānāṁ balamāṁsadaḥ||47|| iti śvadarṁṣṭrādighṛtam
shvadaMSH TroshIrama~jjjI ShThAbalAkAshmaryakattRuNam| darbhamUlaM
pRuthakparNIM palAsharShabhakau sthirAm||44|| palikaM sAdhayetteShAM rase
kShIracaturguNe| kalkaH svaguptAjlvantImedarShabhakajIvakaiH||45||
shatAvaryRuddhimRudvIkAsharkarAshrAvaNIbisaiH| prasthaH siddho
ghRutAdvAtapittahRuddra(dbha)vashUlanut||46||
mUtrakRucchrāpramehArshaHkAsashoShakShayApahaH|
dhanuHstrīmadhyabhArAdhvakhinnAnAM balamAMsadaH||47|| iti
shvadaMSH TrAdighRutam|

One *pala* of each of *shvadamshtra*, *ushira*, *manjishta*, *bala*, *kashmarya*, *katrna*, the root of *darbha*, *prithak parni*, *palasha*, *rishabhaka*, and *sthira* should be made to decoction. Two *prasthas* of ghee should be mixed with the above mentioned decoction, eight *prasthas* of milk, and the paste of *svagupta*, *jivanti*, *meda*, *rishabhaka*, *jivaka*, *shatavari*, *riddhi*, *mridvika*, *sharkara*, *shravani* and bias (lotus stalk), (half *prastha* in total) and cooked. This medicated ghee cures *hridaya shula* caused by *vata* and *pitta*, *mutrakrucchra* (dysuria), *prameha* (diabetes mellitus), piles, bronchitis, and consumption and *kshatakshina*. It promotes strength of muscles tissues of persons emaciated because of indulgence in archery, women, alcohol, carrying heavy weight and walking a long distance. [44-47]

Samasaktu ghee

मधुकाष्टपलद्राक्षाप्रस्थक्वाथे घृतं पचेत्| पिप्पल्यष्टपले कल्के प्रस्थं सिद्धे च शीतले||४८|| पृथग्ष्टपलं
क्षौद्रेशर्कराऽऽयां विमिश्रयेत्| समसक्तु क्षतक्षीणे रक्तगुल्मे च तद्धितम्||४९||

madhukāṣṭapaladrākṣāprasthakvāthē ghṛtam pacēṭ| pippalyaṣṭapale kalkē prasthaṁ
siddhē ca śītalē||48|| pṛthagaṣṭapalaṁ kṣaudraśarkarābhyaṁ vimiśrayēṭ| samasaktu
kṣatakṣīṇē raktagulmē ca taddhitam||49|| madhukAShTapaladrAkShAprasthakv the
ghRutaM pacet| pippalyaShTapale kalke prasthaM siddhe ca shltale||48||
pRuthagaShTapalaM kShaudrasharkarAbhyAM vimishrayet| samasaktu kShatakShINe
raktagulme ca taddhitam||49||

Two *prasthas* of ghee should be cooked by adding the decoction of *madhuka* (eight *palas*) and *draksha* (one *prastha*), and the paste of *pippali* (eight *palas*). After it is cooked and cooled, eight *palas* of each of honey and sugar should be added and mixed well. This medicated ghee should be administered by adding *saktu* (roasted barley flour) in equal quantity. It is useful in the treatment of *kshatakshina* and *rakta gulma*. [48-49]

Sarpi-gud

धात्रीफलविदारीक्षुजीवनीयरसैर्घृतम्| अजागोपयसोशैव सप्त प्रस्थान् पचेदभिषक्॥५०॥ सिद्धशीते
सिताक्षौद्रद्विप्रस्थं विनयेच्च तत्| यक्षमापस्मारपितासक्कासमेहक्षयापहम्॥५१॥ वयःस्थापनमायुष्यं
मांसशुक्रबलप्रदम्| घृतं तु पित्तेऽभ्यधिके लिहयाद् वातेऽधिके पिबेत्॥५२॥ लीढं निर्वापयेत्
पित्तमल्पत्वाद् धन्ति नानलम्| आक्रामत्यनिलं पीतमष्माणं निरुणदधि च॥५३॥
क्षामक्षीणकृशाङ्गानामेतान्येव घृतानि ता त्वकक्षीरीश्वरकरालाजचूर्णः स्त्यानानि योजयेत्॥५४॥ सर्पिंगुडान्
समध्वंशाङ्गद्वा चानु पयः पिर्बत् रेतो वीर्यं बलं पुष्टिं तैराशुतरमाप्नुयात्॥५५॥ इति सर्पिंगुडाः|

dhātrīphalavidārīksujiwanīyarasairghṛtam| ajāgōpayasōścaiva sapta prasthān
pacēdbhiṣak||50|| siddhaśītē sitākṣaudradvīprasthaṁ vinayēcca tat|
yakṣmāpasmārapittāśrkkāsamēhakṣayāpaham||51|| vayaḥsthāpanamāyuṣyam
māṁsaśukrabalapradam| ghṛtam tu pittē'bhyadhikē lihyādvātē'dhikē pibēt||52|| līḍham
nirvāpayēt pittamalpatvāddhanti nānalām| ākrāmatyanilām pītamūṣmāṇām niruṇaddhi
ca||53|| kṣāmakṣṭānakṛśāṅgānāmētānyēva ghṛtāni tu tvakkṣīrīśarkarālājacūrṇaiḥ [3]
styānāni yojayēt||54|| sarpirguḍān samadhvamśāñjagdhvā cānu payaḥ pibēt| rētō
vīryām balaṁ puṣṭīm tairāśutaramāpnuyāt||55|| iti sarpirguḍāḥ
dhAtrIphalavidArlkShujIvanlyarasairghRutam| ajAgopayasoshcaiva sapta prasthAn
pacedbhiShak||50|| siddhashalte sitAkShaudradvīprasthaM vinayecca tat|
yakShmApasmArapittAsRukkAsamehakShayApaham||51|| vayaHsthApanamAyuShyaM
mAMsashukrabalapradam| ghRutaM tu pitte~abhyadhike lihyAdvAte~adhike pibet||52||
IDhaM nirvApayet pittamalpatvAddhanti nAnalām| AkrAmatyanilaM pltamUShmANaM
niruNaddhi ca||53|| kShAmakShINakRushA~ggAnAmetAnyeva ghRutAni tu|
tvakkShIrlsharkarAIJacUrNaiH styAnAni yojayet||54|| sarpirguDA
samadhvaMshA~jjagdhvA cAnu payaH pibet| reto vIryaM balaM puShTiM
tairAshutaramApnuyAt||55|| iti sarpirguDAH|

Two *prasthas* of ghee should be added with the juice of *amalaka* (two *prasthas*), *vidari* (two *prasthas*) and *ikshu* (two *prasthas*) decoction of drugs belonging to *jivaniya* group (two *prasthas*), goat's milk (two *prasthas*) and cow's milk (two *prasthas*) and cooked. After the cooking is over and the recipe is cooled, sugar (one *prastha*) and honey (two *prasthas*) should be added and mixed well. This medicated ghee is useful in the treatment of *rajayaskhma*, *apasma*, *raktapitta*, *prameha*, and *kshaya*. It prevents aging, promotes longevity and endows the person with muscle tissues, semen as well as strength. If the disease is caused by excess of *[/pitta]*, then this recipe should be used as linctus. If, however, the disease is caused by the excess of *vata/pitta*, then this recipe should be used as linctus. If, however, the disease is caused by the excess of *vata*, then it should be taken as a drink.

When this medicated ghee is used (licked) in the form of a linctus, it alleviates *pitta*. Since it is in small quantity, it however, doesn't suppress the *agni* (power of digestion).

When it is used in the form of a drink, it alleviates *vata* and obstructs *pitta ushma*.

This and such other medicated ghee should be made to a thick paste by adding the powder of *tvakkshiri*, sugar and *lajja* (fried paddy), which should then be given to persons who are tired, weak and emaciated.

This and such other recipes of *sarpigud* [recipes of medicated ghee in which sugar, honey etc. are added] should be added with honey (which should be equal in quantity with the powder of *tvak-kshiri*, etc.) and taken. Thereafter, the patient should drink milk. This instantaneously promotes semen, potency, strength and nourishment. [50-55]

Sarpi gud (second recipe)

बला विदारी ह्रस्वा च पञ्चमूली पुनर्नवा। पञ्चानां क्षीरिवृक्षाणां शुडगा मुष्ट्यंशका अपि॥५६॥ एषां कषाये दविक्षीरे विदार्याजरसांशिके। जीवनीयैः पचेत् कल्कैरक्षमात्रैर्घृताद्कम्॥५७॥ सितापलानि पूते च शीते दवात्रिंशतं क्षिपेत्। गोधूमपिप्पलीवांशीर्चूर्ण शुडगाटकस्य च॥५८॥ समाक्षिकं कौडविकं तत् सर्वं खजमच्छितम्। स्त्यानं सर्पिर्गुडान् कृत्वा भूर्जपत्रेण वेष्टयेत्॥५९॥ ताज्जग्धवा पलिकान् क्षीरं मदयं वाऽनुपैषेत् कफे। शोषे कासे क्षते क्षीणे श्रमस्त्रीभारकर्शिते॥६०॥ रक्तनिष्ठीवने तापे पीनसे चोरसे स्थिते। शस्ता: पाश्वर्वशिरःशूले भेदे च स्वरर्वण्योः॥६१॥ इति दवितीयसर्पिर्गुडाः।

balā vidārī hrasvā ca pañcamūlī punarnavaḥ pañcānām kṣīrivṛksāñām śuṅgā muṣṭyamśakā api॥५६॥ ēśām kaśayē dvikṣīrē vidāryājarasāṁśikē| jīvanīyaiḥ pacēt kalkairakṣamātrairghṛtādhakam॥५७॥ sitāpalāni pūtē ca śītē dvātrimśatām kṣipēt| gōdhūmapippalīvāṁśīcūrṇām śṛṅgātakasya ca॥५८॥ samākṣikām kauḍavikām tat sarvām khajamūrcchitam| styānam sarpirguḍān kṛtvā bhūrjapatrēna vēṣṭayēt॥५९॥ tāñjagdhvā palikān kṣīram madyām vā'nupibēt kaphē| śōṣē kāsē kṣatē kṣīṇē śramastrībhārakarśitē॥६०॥ raktaniṣṭhīvanē tāpē pīnasē cōrasi sthitē| śastāḥ pārśvaśiraḥsūlē bhēdē ca svaravarṇayōḥ॥६१॥ iti dvitīyasarpirguḍāḥ balā vidAri hrasvā ca pa~jcamUll punarnavA| pa~jcAnAM kShIrvRukShANAM shu~ggA muShTyaMshakA api॥५६॥ eShAM kaShAye dvikShIre vidAryAjarasAMshike| jIvanlyaiH pacet kalkairakShamAtrairghRutADhakam॥५७॥ sitApalAni pUte ca shlte dvAtriMshataM kShipet| godhUmapippallvAMshlcUrNaM shRu~ggATakasya ca॥५८॥ samAkShikAM kauDavikAM tat sarvāM khajamUrcchitam| styAnAM sarpirguDAn kRutvA bhUrjapatrēNa veShTayet॥५९॥ tA~jjagdhvA palikAn kShIraM madyāM vA~anupibet kaphe| shoShe kAse kShate kShINe shramastrIbhArakarshite॥६०॥ raktaniShThIvane tApe plnase corasi sthite| shastAH pArshvashiraHshUle bhede ca svaravarNayoH॥६१॥ iti dvitīyasarpirguDAH|

*Bala, vidari, hrasva panchamula (shalaparni, prsniparni, brihati, kantakari and gokshura), punarnava, and the *sungas* (terminal buds) of five *kshirivrikshas* (*nyagrodha, udumbara, asvattha, madhuka* and *plaksha*)- one *pala* of each of these drugs should be made to a decoction. To this, milk (two parts, i.e., double the quantity of the decoction), juice of *vidari* (one part), soup of goat meat (one part), ghee (two *adhakas*) (in the text, actually one *adhaka* is mentioned. But in practice, it is to be taken double the quantity*

according to the general rule), and the paste of drugs belonging to the *jivaniya* group (one *aksa* each) should be added and cooked. When it is well cooked and cooled, thirty two *palas* of sugar should be added. Thereafter, one *kudava* of each of the powder of *godhuma*, *pippali*, *vamsha lochana*, *shringataka* and honey should be added. All of them should be stirred with the help of a stirrer. When it becomes dense, cakes (*sarpigud*) should be prepared and each of them should be wrapped with thin bark of *bhurja* tree. Having taken this cake one *pala* in weight, the patient should take milk or alcohol as post-prandial drink. These are useful in the treatment of disease caused by *kapha*, *sosha*, *kasa* and *kshatakshina*. These are also helpful for persons who are emaciated because of excessive exertion, overindulgence in sex and exhaustion by lifting excessive weight. These cakes are efficacious in the treatment of *rakta-nishthivana* (hemoptysis), burning sensation, chronic rhinitis (*pinasa*), having residual infection in the chest, pain in the sides of the chest, headache, hoarseness of voice and loss of complexion. [56-61]

Sarpi gud(third recipe)

त्वक्क्षीरीश्रावणीद्राक्षामूर्वर्षभक्जीवकैः। वीरर्धिक्षीरकाकोलीबृहतीकपिकच्छुभिः॥६२॥ खर्जूरफलमेदाभिः
क्षीरपिष्टैः पलोन्मितौः। धात्रीविदारीक्षुरसप्रस्थैः प्रस्थं घृतात् पचेत्॥६३॥ शर्करार्धतुला शीते
क्षौद्रार्धप्रस्थमेव च दत्त्वा सर्पिर्गुडान् कुर्यात्कासहिक्काज्वरापहान्॥६४॥ यक्ष्माण तमकं श्वासं रक्तपितं
हलीमकम् शुक्रनिद्राक्षयं तृष्णा हन्युः काश्यं सकामलम्॥६५॥ इति तृतीयाः सर्पिर्गुडाः।

tvakkṣīrīśrāvaṇīdrākṣāmūrvārṣabhabhakajīvakaiḥ|
vīrardhikṣīrakākōlībṛhatīkapikacchubhiḥ||62|| kharjūraphalamēdābhiḥ kṣīrapiṣṭaiḥ
palōnmitaiḥ| dhātrīvidārīkṣurasaprasthaiḥ prastham għrtāt pacēt||63|| śarkarārdhatulāṁ
śītē kṣaudrārdhaprasthamēva ca| dattvā sarpirguḍān kuryātkāsahikkājvarāpahān||64||
yakṣmāṇāṁ tamakaṁ śvāsāṁ raktapittāṁ halīmakam| śukranidrākṣayāṁ tṛṣṇāṁ
hanyuḥ kārṣyāṁ sakāmalam||65|| iti tṝtiyāḥ sarpirguḍāḥ
tvakkShIrlshrAvaNIdrAkShAmUrvarShabhakajīvakaiH|
vlrardhikShIrkAkollbRuhatlkapikacchubhiH||62|| kharjUraphalamedAbhiH
kShIrapiShTaiH palonmitaiH| dhAtrividArlkShurasaprasthaiH prasthaM ghRutAt
pacet||63|| sharkarArdhatulAM shlte kShaudrArdhaprasthameva ca| dattvA sarpirguDA
kuryAtkAsahikkAjvarApahAn||64|| yakShmANaM tamakaM shvAsaM raktapittaM
hallmakam| shukranidrAkShayaM tRuShNAM hanyuH kArshyaM sakAmalam||65|| iti
tRutlyAH sarpirguDAH|

One *pala* of each of *tvak-kshiri*, *shravani* (*munditika*), *draksha*, *murva*, *rushabhaka*, *jivaka*, *vira* (*vidari**kanda*), *riddhi*, *kshirakakoli*, *brihati*, *kapikacchu*, fruit of *kharjura* and *meda* should be made into paste by triturating with milk. This paste, juice of *dhatri* (two *prasthas*), juice of *vidari* (two *prasthas*), sugarcane juice (two *prasthas*), and ghee (two *prasthas*) should be cooked together. After the ghee is well cooked and cooled, half *tulas* of sugar and one *prastha* of honey should be added, out of which cakes (*sarpi gud*) should be prepared. These cakes cures cough, hiccup, fever, *rajayakshma*, *tamaka svasa*, *rakta-pitta*, *halimaka* (a serious type of jaundice), *shukra kshaya* (diminution of *shukra*), insomnia, *trishna* (morbid thirst), *karshya* (emaciation) and

kamala (jaundice). (In transalation liquids, ghee and honey are taken double the prescribed quantity according to the rule) [62-65]

Sarpi gud (fourth recipe)

नवमामलकं द्राक्षामात्मगुप्तां पुनर्नवाम् शतावरीं विदारीं च समङ्गां पिप्पलीं तथा॥६६॥ पृथगदशपलान् भागान् पलान्यष्टौ च नागरात् यष्टयाहवसौवर्चलयोर्द्विपलं मरिचस्य च॥६७॥ क्षीरतैलघृतानां च त्याद्धके शर्कराशते। क्वथिते तानि चूर्णानि दत्त्वा बिल्वसमानं गडान्॥६८॥ कुर्यात्तानं भक्षयेत् क्षीणः क्षतः शुष्कश्च मानवः। तेन सद्यो रसादीनो वृद्ध्या पुष्टिं स विन्दते॥६९॥ इति चतुर्थसर्पिंगुडाः।

navamāmalakam drākṣāmātmaguptām punarnavām śatāvarīm vidārīm ca samaṅgām pippalīm tathā॥६६॥ pṛthagdaśapalān bhāgān palānyaṣṭau ca nāgarāt yaṣṭyāhvassauvarcalayōrdvipalam maricasya ca॥६७॥ kṣīratailaghṛtānām ca tryādhakē śarkarāsatē kvathitē tāni cūrṇāni dattvā bilvasamān guḍān॥६८॥ kuryāttān bhakṣayēt kṣīṇah kṣataḥ śuṣkaśca mānavah। tēna sadyō rasādīnām vṛddhyā puṣṭim sa vindati॥६९॥ iti caturthasarpigudāḥ navamAmalakaM drAkShAmAtmaguptAM punarnavAm shatAvarIM vidArIM ca sama~ggAM pippalIM tathA॥६६॥ pRuthagdashapalAn bhAgAn palAnyaShTau ca nAgarAt yaShTyAhvasauvarcalayordvipalaM maricasya ca॥६७॥ kShIrlatailaghRutAnAM ca tryADhake sharkarAshate] kvathite tAni cUrNAni dattvA bilvasamAn guDAn॥६८॥ kuryAttAn bhakShayet kShINaH kShataH shuShkashca mAnavaH] tena sadyo rasAdInAM vRuddhyA puShTiM sa vindati॥६९॥ iti caturthasarpigudAH]

Freshly collected and dried *amalaki* (ten *palas*), *draksha* (ten *palas*), *atmagupta* (ten *palas*), *punarnava* (ten *palas*), *shatavari* (ten *palas*), *vidari* (ten *palas*), *samanga* (ten *palas*), *pippali* (ten *palas*), *nagara* (eight *palas*), *madhuyashti* (one *palas*), *saurvachala* (one *pala*) and *maricha* (two *palas*) – all these drugs should be made to powders. Milk (two *adhakas*), *tila taila* (two *adhakas*), ghee (two *adhakas*) and sugar (one hundred *palas*) should be cooked together. Thereafter, the above mentioned powder should be added to it. Out of this, cakes of one *bilva* or *pala* each should be prepared. These cakes should be taken by the person suffering from *kshatakshina* and consumption. Intake of these cakes instantaneously promote tissues elements like *rasa* etc. as a result of which the individual gets nourished. [66-69]

Sarpi modaka (fifth recipe)

गोक्षीरार्धाढकं सर्पिः प्रस्थमिक्षुरसाढकम् विदार्याः स्वरसात्प्रस्थं रसात्प्रस्थं च तैतिरात्॥७०॥ दद्यात् सिद्ध्यति तस्मिंस्त पिष्टानिक्षुरसैरिमान्। मधुकपुष्पकुडवं प्रियालकुडवं तथा॥७१॥ कुडवार्धं तुगाक्षीर्याः खर्जूराणां च विंशतिम्। पृथग्निभीतकानां च पिंपल्याश्च चतुर्थिकाम्॥७२॥ त्रिंशत्पलानि खण्डाच्च मधुकात् कर्षमेव च। तथाऽर्धपलिकान्यत्र जीवनीयानि दापयेत्॥७३॥ सिद्धेऽस्मिन् कडवं क्षौद्रं शीते क्षिप्त्वाऽथ मोदकान्। कारयेन्मरिचाजाजीपलचूर्णावच्छूर्णितान्॥७४॥ वातासृक्षिप्तरोगेषु क्षतकासक्षयेषु च। शुष्यतां क्षीणशुक्राणा रक्ते चोरसि संस्थिते॥७५॥ कशदुर्बलवृद्धाना पुष्टिवर्णबलार्थिनाम्। योनिदोषकृतसावहतानां चापि योषिताम्॥७६॥ गर्भार्थिनीनां गर्भश्च सवेद्यासां म्रियेत वा। धन्या बल्या हितास्ताभ्यः शुक्रशोणितवर्धनाः॥७७॥ इति पञ्चमसर्पिमोटकाः।

gōkṣīrārḍhāḍhakam sarpiḥ prasthamikṣurasāḍhakam| vidāryāḥ svarasātprastham rasātprastham ca taittirāt॥७०॥ dadyāt sidhyati tasmir̄stu piṣṭānikṣurasairimān|

madhūkapuspakuḍavaṁ priyālakudavaṁ tathā||71|| kuḍavārdhaṁ tugākṣīryāḥ
 kharjūrāṇāṁ ca viṁśatim| pṛthagbibhītakānāṁ ca pippalyāśca caturthikām||72||
 triṁśatpalāni khaṇḍācca madhukāt karṣamēva ca| tathā'rdhapalikānyatra jīvanīyāni
 dāpayēṭ||73|| siddhē'smin kuḍavaṁ kṣaudraṁ śīṭē kṣiptvā'tha mōdakān|
 kārayēnmaricājājīpalacūrṇāvacūrṇitān||74|| vātāsṛkpittarōgēṣu kṣatakāsakṣayēṣu ca|
 śuṣyatāṁ kṣīṇaśukrāṇāṁ raktē cōrasi samsthitē||75|| kṛśadurbalavṛddhānāṁ
 puṣṭivarṇabalārthinām| yonidōṣakṛtasrāvahatānāṁ cāpi yōṣitām||76|| garbhārthinīnāṁ
 garbhaśca sravēdyāsāṁ mriyēta vā| dhanyā balyā hitāstābhyah
 śukraśōṇitavardhanāḥ||77|| iti pañcamasarpirmōdakāḥ gokShlrArdhADhakaM sarpiH
 prasthamikShurasADhakam| vidAryAH svarasAtprasthaM rasAtprasthaM ca
 taittirAt||70|| dadyAt sidhyati tasmiMstu piShTArikShurasairimAn|
 madhUkapuShpakuDavaM priyAlakuDavaM tathA||71|| kuDavArdhaM tugAkShIryAH
 kharjUrANAM ca viMshatim| pRuthagbibhItakAnAM ca pippalyAshca caturthikAm||72||
 triMshatpalAni khaNDAcca madhukAt karShameva ca| tathA~ardhapalikAnyatra
 jīvanlyAni dApayet||73|| siddhe~asmin kuDavaM kShaudraM shlte kShiptvA~atha
 modakAn| kArayenmaricAjAjlpalacUrNAvacUrNitAn||74|| vAtAsRukpittarogeShu
 kShatakAsakShayeShu ca| shuShyatAM kShINashukrANAM rakte corasi
 saMsthite||75|| kRushadurbalavRuddhAnAM puShTivarNabalArthinAm|
 yonidoShakRutasrAvahatAnAM cApi yoShitAm||76|| garbhArthinInAM garbhashca
 sravedyAsAM mriyeta vA| dhanyA balyA hitAstAbhyaH shukrashoNitavardhanAH||77||
 iti pa~jcamasarpirmodakAH|

Cow's milk (one *adhaka*), ghee (two *prasthas*), sugar cane juice (two *adhakas*), juice of *vidari* (two *prasthas*) and soup of meat of *tittira* (two *prasthas*) should be cooked together. During the final stage of cooking, the paste of *madhuka pushpa* (one *kudava*), *priyala* (one *kudava*), *tugakshiri* (half *kudava*), *kharjura* (twenty fruits), *bibhitaki* (twenty fruits), *pippali* (one *pala*), sugar (thirty *palas*), *madhuka* (one *karsa*) and drugs belonging to *jivaniya* group (half *pala* each) should be added. The above mentioned drugs should be made to a paste by triturating with sugarcane juice before adding to the recipe. After the recipe is fully cooked and cooled, honey (two *kudavas*) should be added and from it, *modaka* (large size pills) should be prepared. Over these *modakas*, one *pala* of the powder of *maricha* and *ajaji* should be sprinkled. These *modakas* cure *vatasruka*, diseases caused by *pitta*, *kshatakshina*, *kasa* and *kshaya*. These are useful for persons suffering from emaciation, who have reduced semen, whose blood is blocked in the chest, who are thin, weak and old, and also for those desirous of having nourishment, complexion and strength. These *modakas* are also helpful for ladies suffering from exudations through the vitiated genital tract, who desire conception and who suffer from miscarriages and death of the fetus in the womb. By the use of these pills, ladies are endowed with auspiciousness strength and wholesomeness. These are promoters of *shukra* (sperm) and *shonita* (ovum). [70-77]

Recipes

बस्तिदेशे विकर्वाणे स्त्रीप्रसक्तस्य मारुते| वातघ्नान् बृहणान् वृष्यान् योगांस्तस्य प्रयोजयेत्॥७८॥
 शर्करापिष्पलींचूर्णः सर्पिषा माक्षिकेण च| संयुक्तं वा शृतं क्षीरं पिबेत् कासज्वरापहम्॥७९॥ फलाम्ल

सर्पिषा भृष्टं विदारीक्षुरसे शृतम् स्त्रीषु क्षीणः पिबेदयूषं जीवनं बृहणं परम्॥८०॥ सक्तनां वस्त्रपूतानां मन्थं क्षौद्रघृतान्वितम् यवान्नसात्म्यो दीप्ताग्निः क्षतक्षीणः पिबेन्नरः॥८१॥ जीवनीयोपसिद्धं वा जाङ्गलं घृतभर्जितम् रसं प्रयोजयेत् क्षीणे व्यञ्जनार्थं सशक्तरम्॥८२॥ गोमहिष्यश्वनागाजैः क्षीरैर्मासरसैस्तथा यवान्नं भोजयेदयषैः फलाम्लैर्धृतसंस्कृतैः॥८३॥ दीप्तेऽग्नौ विधिरेषः स्यान्मन्दे दीपनपाचनः| यक्षिमणां विहितो ग्राहौ भिन्ने शकृतिं चेष्यर्ते॥८४॥

bastidēśē vikurvānē strīprasaktasya mārutē| vātaghnān bṛṁhaṇān vṛṣyān yōgāṁstasya prayōjayēt||78|| śarkarāpippalīcūrṇaiḥ sarpiṣā mākṣikēṇa ca] saṁyuktāṁ vā śītaṁ kṣīraṁ pibēt kāsajvarāpaham||79|| phalāmlāṁ sarpiṣā bhr̄ṣṭāṁ vidārīkṣurasē śītaṁ| strīṣu kṣīṇāḥ pibēdyūṣāṁ jīvanām bṛṁhaṇām param||80|| saktūnāṁ vastrapūtānāṁ manthaṁ kṣaudraghṛtānvitam| yavānnasātmyo [4] dīptāgnīḥ kṣatakṣīṇāḥ pibēnnarah||81|| jīvanīyōpasiddham vā jāngalaṁ ghṛtabharjitaṁ rasāṁ prayōjayēt kṣīṇē vyāñjanārthaṁ saśarkaram||82|| gōmahiṣyaśvanāgājaiḥ kṣīrairmāṁsarasaistathā| yavānnām [5] bhōjayēdyūṣaiḥ phalāmlairghṛtasāṁskṛtaiḥ||83|| dīptēgnau vidhirēṣaḥ syānmandē dīpanapācanāḥ| yakṣmiṇāṁ vihitō grāhī bhinnē śakṛti cēsyatē||84|| Bastideshe vikurvĀNe strīprasaktasya mArute| vAtaghnAn bRuMhaNAn vRuShyAn yogAMstasya prayojayet||78|| sharkarApippallcUrNaiH sarpiShA mAksHikeNa ca] saMyuktaM vA shRutaM kShIraM pibet kAsajvarApaham||79|| phalAmlaM sarpiShA bhRuShTaM vidArlkShurase shRutam| strīShu kShINaH pibedyUSham jlvanaM bRuMhaNaM param||80|| saktUnAM vastrapUtAnAM manthaM kShaudraghRutAnvitam| yavAnnasAtmyo dIptAgniH kShatakShINaH pibennaraH||81|| jlvanlyopasiddhaM vA jA~ggalaM ghRutabharjitaṁ rasāM prayojayet kShINe vyā~jjanArthaM sasharkaram||82|| gomahiShyashvanAgAjaiH kShIrairmAMsarasaistathA| yavAnnaM bhojayedyUShaiH phalAmlairghRutasaMskRutaiH||83|| dIpte~agnau vidhireShaH syAnmande dIpanapAcanaH| yakShmiNAM vihito grAhI bhinne shakRuti ceShyatē||84||

In person indulging in excess sexual intercourse with women, (vitiated) *vata* afflicts pelvic region. To such patients, recipes which are alleviators of *vata*, promoters of nourishment and aphrodisiacs are to be administered.

Sugar, powder of *pippali* ghee and/or honey should be added to milk and given to patient to drink for the cure of cough and fever. These ingredients can be added to milk after or before boiling, appropriately. (Whenever honey is to be used, it should be added to the milk after it is boiled and cooled.)

Phalamla should be fried in ghee and boiled with the juice of *vidari* and sugar-cane. The vegetable soup, thus prepared, is useful for a patient who is emaciated because of excessive indulgence in women. This is an excellent recipe for the promotion of longevity and nourishment.

Roasted barley flour should be sieved through a cloth, and *mantha* (thin gruel) should be prepared out of it. This gruel should be added with honey and ghee, and given to a patient suffering from *kshatakshina*, provided that he is accustomed to taking barley as one of the ingredients of the food and if he has strong power of digestion.

Alternatively, meat of animal inhabiting arid zone (*jangala*) should be boiled with the drugs belonging to the *jivaniya* group. The meat soup, thus prepared, should be sizzled

with ghee, added with sugar and used as a said dish (*vyanjana*) for a patient suffering from *kshatakshina*.

Boiled barley should be given to a patient suffering from *kshatakshina* along with the milk of buffalo, mare, elephant and goat or with the meat soup or with vegetable soup or with *phalamla* sizzled with ghee.

The above mentioned recipes should be given to a patient having strong power of digestion. If the power of digestion is suppressed, then the patient should be given recipes which are stimulants of digestion and carminative. If there is diarrhea in a patient suffering from *kshatakshina*, then the bowel – binding recipes prescribed for the treatment of *rajayakshma* (chapter-8) should be used. [78-84]

Saindhavadi churna

पलिकं सैन्धवं शुण्ठी द्रवे च सौवर्चलात् पले। कुडवांशानि वृक्षाम्लं दाडिमं पत्रमर्जकात्॥८५॥ एकैकं मरिचाजाज्योधीन्यकाद् द्रवे चतुर्थिके। शर्करायाः पलान्यन्त्र दश द्रवे च प्रदापयेत्॥८६॥ कृत्वा चर्णमतो मात्रामन्नपाने प्रयोजयेत्। रोचने दीपनं बल्यं पाश्वर्वार्तिं श्वासकासनुत्॥८७॥ इति सैन्धवादिचूर्णम्।

palikam saindhavam shunthi dvē ca sauvarcalāt palē| kuḍavāṁśāni vṛkṣāmlam dāḍimam patramarjakāt||85|| ēkaikam maricājājyōrdhānyakāddvē caturthikē śarkarāyah palānyatra daśa dvē ca pradāpayēt||86|| kṛtvā cūrṇamatō mātrāmannapānē prayōjayēt rōcanam dīpanam balyam pārśvārtiśvāsakāsanut||87|| iti saindhavādicūrṇam palikaM saindhavaM shuNThI dve ca sauvarcalAt pale| kuDavAMshAni vRukShAmlaM dADimaM patramarjakAt||85|| ekaikaM maricAjAjjordhAnyakAddve caturthike sharkarAyAH palAnyatra dasha dve ca pradApayet||86|| kRutvA cUrNamato mAtrAmannapAne prayojayet| rocanam dlpanam balyam pArshvArtishvAsakAsanut||87|| iti saindhavAdicUrNam|

Saindhava (one *pala*), *shunthi* (one *pala*), *sauvarchala* (two *pala*), *vrikshamla* (one *kudava*), *dadima* (one *kudava*), leaf of *arjaka* (one *kudava*), *maricha* (one *pala*), *ajaji* (one *pala*), *dhanyaka* (two *pala*) and sugar (twelve *pala*) should be made in to powder and mixed together. In appropriate quantity, this powder should be added to food and drinks. It is appetizer, stimulant of digestion and promoter of strength. It cures *parshvashula* (pain in the sides of the chest), *shvasa* (respiratory disorders including asthma) and *kasa* (cough). [85-87]

Shadava recipe

एका षोडशिका धान्याद् द्रवे द्रवेऽजाज्यजमोदयोः। ताभ्यां दाडिमवृक्षाम्लं द्विर्विः सौवर्चलात्पलम्॥८८॥ शुण्ठ्याः कर्ष दधित्थस्य मैथ्यात् पञ्च पलानि च। तच्चूर्णं षोडशपले शर्करायाविमिश्रयेत्॥८९॥ षाडवोऽयं प्रदैयः स्यादन्नपानेषु पूर्ववत्। मन्दानले शकृद्भेदे यद्विमेणामग्निवर्धनः॥९०॥ इति षाडवः।

ēkā šōdaśikā dhānyāddvē dvē'jājyajamōdayōḥ| tābhyaṁ dāḍimavṛkṣāmlam dvirdvih sauvarcalātpalam||88|| śunthyaḥ karṣam dadhitthasya madhyāt pañca palāni ca| taccūrṇam šōdaśapalē śarkarāyā vimiśrayēt||89|| šāḍavō'yam pradēyah syādannapānēṣu pūrvavat| mandānalē šakṛdbhēdē yakṣmiṇāmagnivardhanah||90|| iti šāḍavaḥ ekA ShoDashikA dhAnyAddve dve~ajAjajamodayoH| tAbhyAM

dADimavRukShAmlaM dvirdviH sauvarcalAtpalam||88|| shuNThyAH karShaM dadhitthasya madhyAt pa~jca palAni ca] taccUrNaM ShoDashapale sharkarAyA vimishrayet||89|| ShADavo~ayaM pradeyaH syAdannapAneShu pUrvavat] mandAnale shakRudbhede yakShmiNAmagnivardhanaH||90|| iti ShADavaH|

Powders of *dhanyaka* (one *pala*), *ajaji* (two *palas*), *ajamoda* (two *palas*), *dadima* (four *palas*), *vrikshamla* (four *palas*), *sauvarchala* (one *pala*), *shunthi* (one *karsa*), pulp of *kapittha* (five *palas*) and sugar (sixteen *palas*) should be mixed together. Like the other recipe, the present *shadava* (delicious recipe having sweet and sour tastes) should be administered along with food and drinks for the treatment of *mandanala* (suppression of the power of digestion) and diarrhea. It promotes the digestive power of patients suffering from *rajayakshma*. [88-90]

Nagabala kalpa

पिबेन्नागबलामलमर्धकर्षविवर्धितम् । पलं क्षीरयुतं मासं क्षीरवृत्तिरनन्नभक्॥९१॥ एष प्रयोगः पुष्ट्यायुर्बलारोग्यकरः परः। मण्डूकपर्ण्याः कल्पोऽयं शुणठीमधुक्योस्तथा॥९२॥

pibennāgabalāmūlamardhakarśavivardhitam [6] | palam kṣīrayutam māsam kṣīravṛttiranannabhuk||91|| ēṣa prayogaḥ puṣṭyāyurbalārōgyakarah paraḥ| maṇḍūkaparnyāḥ kalpō'yaṁ śuṇṭhīmadhukayōstathā||92||
pibennAgabalAmUlamardhakarShavivardhitam| palam kShīrayutaM mAsaM kShīravRuttiranannabhuk||91|| eSha prayogaH puShTyAyurbalArogyakaraH paraH| maNDUkaparNyAH kalpo~ayaM shuNThImadhukayostathA||92||

Half *karsha* of the root (bark) of *nagabala* should be boiled with milk and given to the patient on the first day. Thereafter, the powder of *nagabala* root (bark) should be increased by half *karsha* every day, and given by boiling with milk. On eighth day, the quantity of *nagabala*- root will be one *pala*. Thereafter the patient should continue to take this drug in the dose of one *pala* for one month. While taking this drug boiled with milk, the patient should refrain from taking any cereals. Whenever he feels hungry, he should take only milk. The recipe is excellent for the promotion of nourishment, longevity, strength and immunity to diseases.

In the above mentioned manner, *mandukaparni*, *sunthi* and *madhuka* should be administered for therapeutic effects described above.[91-92]

Diet and Drinks

यदयत् सन्तर्पणं शीतमविदाहि हितं लघुं अन्नपानं निषेव्यं तत्क्षतक्षीणैः सखार्थिभिः॥९३॥ यच्चोक्तं यक्षिमणां पथ्यं कासिनां रक्तपित्तिनाम् तच्च कुर्यादवेक्ष्याग्निं व्याधिं सात्म्यं बलं तथा॥९४॥

yadyat santarpaṇam sītamavidāhi hitaṁ laghu] annapānām niṣevyam tatksatakṣīṇaiḥ sukhārthibhiḥ||93|| yaccōktām yaksminām pathyām kāsinām raktapittinām] tacca kuryādavēkṣyāgnim vyādhim sātmyām balaṁ tathā||94|| Yadyat santarpaṇaM shItamavidAhi hitaM laghu] annapAnaM niShevyam tatkShatakShINaiH sukhArthibhiH||93|| yaccoktaM yakShmiNAM pathyaM kAsinAM raktapittinAm] tacca kuryAdavekShyAgniM vyAdhiM sAtmyaM balaM tathA||94||

Food and drinks which are nourishing, cooling, *avidahi* (which do not cause burning sensation), wholesome and light to digest, should be used by the patient suffering from *kshatakshina* and who is desirous of regaining health. With due regard to the *agni* (power of digestion), nature of disease, wholesomeness of diet, and regimens prescribed for *rajayakshma*, *kasa* and *raktapitta*.[93-94]

Need for prompt attention

उपेक्षिते भवेत्स्मिन्ननुबन्धो हि यक्षमणः| प्रागेवागमनात्तस्य तस्मात् त्वरया जयेत्॥९५॥

upēkṣitē bhavēttasminnanubandhō hi yakṣmaṇah| prāgēvāgamanāttasya tasmāttam
tvarayā jayēt||95|| upēkShite bhavettasminnanubandho hi yakShmaNaH|
prAgevAgamanAttasya tasmAttaM tvarayA jayet||95||

If the patient suffering from *kshatakshina* is not given appropriate treatment on time, then this may lead to *rajayakshma*. Therefore well before the appearance of *rajayakshma*, the *kshatakshina* should be treated, subdued (cured). [95]

Summary

तत्र श्लोकौ- क्षतक्षयसमत्थानं सामान्यपूर्थगाकृतिम्| असाध्ययाप्यसाध्यत्वं साध्यानां सिद्धिमेव
च॥९६॥ उक्तवाऽज्येष्ठौशेष्याय क्षतक्षीर्णचिकित्सिते| तत्वार्थविद्वीतरजस्तमोदोषः[१] पुनर्वेसुः॥९७॥

tatra ślōkau- kṣataksayasamutthānam sāmānyaprthagākṛtim|
asādhyayāpyasādhyatvāṁ sādhyānāṁ siddhimēva ca||96|| uktavāñjyēṣṭhaśisyāya
kṣataksīṇacikitsitē| tattvārthavidvitarajastamōdōṣah [7] punarvasuh||97|| tatra shlokau-
kShatakShayaSamutthAnaM sAmAnyapRuthagAkRutim| asAdhyayApyasAdhyatvaM
sAdhyAnAM siddhimeva ca||96|| uktavA~jjyeShThashiShyAya kShatakShINacikitsite|
tattvArthavidvitarajastamodoShaH punarvasuH||97||

To sum up:

In this chapter, on the treatment of *kshatakshina*, Lord Punarvasu who is conversant with truth and who is free from *rajas* (one of the three attributes representing fickle mindedness including passion) and *tamas* (one of the three attributes representing slackness including ignorance) imparted instincts to the senior disciple on the following points:

1. Etiology of *kshatakshina*;
2. Signs and symptoms of *kshatakshina* in general and of each variety;
3. Incurability, palliability and curability of *kshatakshina*; and
4. Successful treatment of curable variety of *kshatakshina*. [96-97]

इत्यग्निवेशकृते तन्त्रेऽप्राप्ते दृढबलपूरिते चिकित्सितस्थाने क्षतक्षीर्णचिकित्सितं
नामैकादशोऽध्यायः॥११॥

ityagnivēśakṛtē tantrē'prāptē dṛḍhabalapūritē cikitsitasthānē kṣataksīṇacikitsitam
nāmaikādaśo'dhyāyah||11||

ityagniveshakRute tantre~aprApte dRuDhabalapUrite cikitsitasthAne
kShatakShINacikitsitaM nAmaikAdasho~adhyAyaH||11||

Thus, ends the eleventh chapter (on the treatment of *Kshatakshina*) of the Chikitsa Sthana; in the section on the therapeutics of Agnivesha's work as redacted by Charak and not being available, restored by Dridhabala.

Tattva Vimarsha (Fundamental Principles)

- In *Kshatakshina*, *kshata* (injury) is caused due to indulgence in various physical activities beyond one's capacity. *Kshina* is a consequence of that injury with improper dietary habit and excess sexual intercourse.
- The *dhatu kshaya* (depletion of tissues) is major pathological event in this disease. Hence *brimhana*(nourishment) and replenishment of depleted tissues is principle of management.
- The onset is acute without appearance of any premonitory symptom.
- If the manifestation of disease is mild, the power of digestion (of the patient) is strong, patient has enough strength and if the disease is new (freshly occurred), then it is curable. The disease is *yanya* (palliable), if the disease is chronic i.e. more than one year. If however, all the signs and symptoms of the disease are simultaneously manifested, then the condition is incurable.
- Milk, meat, ghee and honey processed with *jivaniya* herbs have significant role in treatment of *kshatakshina*. Fresh blood of animals is also used in treatment of excess bleeding.
- Food and drinks which are nourishing, cooling, *avidahi* (which do not cause burning sensation), wholesome and light to digest, should be used by the patient suffering from *kshatakshina*.
- With due regard to the *agni* (power of digestion), nature of disease, wholesomeness of diet, and regimens prescribed for *rajayakshma*, *kasa* and *raktapitta*.
- *Kshatakshina* , if untreated, results in *rajayakshma*. Therefore, treatment at appropriate time is necessary to prevent *rajayakshma*.

Vidhi Vimarsha (Applied Inferences)

Kshatakshina is a disease characterized by depletion of body tissues due to chest injury. In present era, the condition occurs due to over exertion, strenuous work beyond one's capacity, direct or indirect injury to the chest. The conditions like pneumothorax, pleural effusion and related respiratory conditions need to be addressed simultaneously by the surgical team to prevent progression of emaciation and complications of injury to vital lung tissues.

Etiopathology

The etiological factors can be divided into two categories viz. (1) Exogenous factors related to over-exertion/ strenuous physical activity that causes trauma to the lung

tissues, excess weight lifting and excess sexual intercourse. Studies showed that strenuous athletic activities like vigorous swimming, heavy weight lifting, jolting, etc. can cause pneumothorax (PTX), pleural effusion and pneumomediastinum (PTM) etc. (2) Endogenous factors related to malnutrition that cause depletion of body tissues and excess intake of food having dry properties (less intake of unctuous dietary substances like ghee, oil, fats. Lipids leading to dryness in body) The etiological factors described for *kshata* are related to those that cause spontaneous lung injury.

Pathogenesis

The disease has acute onset without any premonitory signs. This shows sudden appearance of clinical features due to traumatic etiology. As disease progresses, it leads to depletion of body tissues causing emaciation.

- *Dosha* : *Vata-pitta* aggravation, *kapha* depletion
- *Dhatu*: *Rasa*, *shukra*, *mamsa* and *ojas*
- *Samprapti* type: *Atipravritti* and *dhatukshaya janya*
- Clinical features and conditions resembling the disease

The patient suffers from fever, pain, mental depression, diarrhea, anorexia, indigestion, cough with putrid sputum grayish in color, foul smelling, and yellow and knotty, in large quantities, with blood.

- Subjective and objective parameters (scales with references)
- Clinical examination: Chest auscultation for added sounds, decreased air entry, Body mass index. Lung function tests including spirometry
- Pathological/radiological/ investigations: Sputum test for presence of Acid fast bacilli, RBCs, Chest X ray for fracture of ribs, opacity in lungs, pneumonia patch, pneumothorax, plural effusion etc.
- Differential diagnosis:Pulmonary tuberculosis, Carcinoma of lungs, oesophageal varieces
- Complications
 - Pulmonary tuberculosis
- Prognosis: Curable if newly developed, and mildly emaciated, palliable in chronic stage, incurable in advanced stage and severely emaciated with multiple system involvement

Management of disease

- Experience based clinical practices:
 - Applied principles in management of disease conditions
 - Styptic agents to stop bleeding
 - Binding agents for union of bones and injured tissues
 - Nourishing regimen for depletion of body tissues
 - Rejuvenation therapies

Shodhana chikitsa (body purification treatments) and procedures

Purification treatments are not indicated in this disease.

Therapeutic massage with *kshirabala* oil, *Bala-ashwagandha lakshadi* oil is done.

Chest physiotherapy for improving lung functions is advised.

Shamana chikitsa (pacification treatments) with list of formulations and medicines

S.No.	Name of Medicine	Dose	Time of Administration	Mode of Administration (Anupana)
1	<i>Laksha Mixture</i>	10-20 grams	Frequently	<i>Vasavaleha</i>
2	<i>Amritaprash a ghee</i>	10-20 grams	After meals	Milk
3	<i>Suvarna malini vasanta</i>	120-240 mg	In between two meals	Milk
4	<i>Lakshmi Vilasa</i>	60-120 mg	In between two meals	Milk
5	<i>Vanga mishrana</i>	250-500 mg	In between two meals	Milk

- *Pathya* or recommended diet: Light to digest food like *shali* rice, wheat, green gram, pomegranate, dry grapes, mango, *amalaka*, goat milk and ghee prepared of it, medicated milk, meat juice of goat
- *Pathya* or recommended activity: Total bed rest
- *Apathya* or contraindicated diet: Excess hot, pungent, salty food causing burning sensation, heavy to digest food.
- *Apathya* or contraindicated activity: Over exertion, strenuous exercise, weight lifting etc.

Parallel management of chest injury

Use of *sandhaniya* drugs like *laksha* (mainly indicated for the healing of fracture of bone) and *madhuyashti* clearly indicates that in *kshatakshina* there is external trauma (ribs fracture leading to pneumothorax) that should be managed with quick remedies. As only conservative management for the *kshatakshina* is described, it excludes the possibility of surgical interventions in *kshatakshina* in that era. However nowadays the surgical procedures like tube drainage with or without medical pleurodesis, vacuum-assisted thoracostomy (VATS) with pleurodesis and/or closure of leaks and bullectomy, and open surgical procedures such as thoracotomy for pleurectomy or pleurodesis) are conducted to decrease the chances of incurability of *kshatakshina*. At

the present time, it is necessary to elaborate the management of acute dreaded complications like pneumothorax and hematuria in separate chapter.

Future Scope for Research

- Exploring the clinical evidences for the immunomodulator and hemostatic properties of *Sida Veronicaefolia Lam. (Nagabala)*.
- In-vitro and in-vivo evaluation of hemostatic property of *Boerhavia diffusa* and clinical demonstration of its use in hemoptysis.
- Exploring the role of auto-antibodies in the pathogenesis of tuberculosis and its relation with genetic susceptibility.
- Evaluating the role of *laksha* (*Laccifer lacca*) and *madhuyasti* (*Glycyrrhiza glabra*) in rehabilitating pulmonary tissues in acute pulmonary injury.
- Evaluating role of anti-oxidant drugs [like *amalaki* (*Emblica officinalis*)] and vitamin C in the management of chronic inflammatory as well as infectious pulmonary diseases.

Further reading

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Shvayathu Chikitsa

Chikitsa Sthana Chapter 12. Management of Shvayathu (Various types of Swellings) Abstract

This chapter deals with the treatment of various types of swellings like generalized edema and local eruptions including pustules, nodules and tumors. The etiological factors for these swellings can be endogenous (*nija*) or exogenous (*agantuja*). In all types of swellings, three *doshas* are involved but it is named according to the dominance of the *dosha*. After describing general symptoms and signs of the swelling, specific symptoms and signs of *vata*, *pitta* and *kapha* as well as of incurable and curable swellings are explained. Line of treatment depends upon type of swelling as well as involved parts of the body; wholesome and unwholesome diet and lifestyle for the benefit of the patient is explained. Detailed treatments along with drug preparations, internal and external therapeutic measures are discussed according to *vata*, *pitta* and *kapha* types of swelling. Local swellings occurring in the various parts of the body in the form of papules, pustules, nodules, tumors etc are described in the last part of the chapter. It includes *shaluka* (quinsy), *Bidalika* (Ludwig's angina), *Taluvidradhi* (palatal abscess), *Upajihivika* (superficial glossitis), *Upakusha* (gingivitis) and *Danta-Vidradhi* (dental abscess) which occurs in buccal cavity and generally included in Śālākya specialty. *Galaganda* is goiter and *gandamala* and *granthi* are mainly related with various types of swellings of lymph nodes. *Arbuda* (tumor), *alaji* (inflammation of eye), *akshata* (whitlow), *vidarika* (lymphadenitis), *visphotaka* (eruption), *kaksha* (herpes zoster), *romantika* (measles), *masurika* (chickenpox), *bradhna* (hernia), *bhagandara* (fistula-in-ano), *shleepada* (elephantiasis), *jalakagardabha* (acute spreading inflammation), *abhigatajata* (traumatic) and *vishaja* (poisonous) swellings along with their medical treatment and wherever necessary surgical measures are also described. Difference and similarity between *granthi* and *arbuda* are also mentioned. **Keywords:** *Shvayathu*, *shotha*, *shopha*, edema, swelling, *langhana*, *amapachana*, *shodhana*.

Introduction

This chapter on Shvayathu Chikitsa (treatment of swelling) follows the chapter on *kshata-kshina* because in both the diseases vital organs are involved. *Charaka* defines *shvayathu* as bulging (*utsedha*) from the skin and this chapter mainly deals with the management of various types of general swellings and local swellings such as *pidika* (papules and pustules), nodules (including *gandhamala*), large swellings like *galaganda* (goiter), tumor etc are also described.

Chapter 18th of Sutra Sthana deals with diagnostic aspects of swelling under the name of *trishothiya*. Therein the word *shopha* is frequently used for shotha. Thus, the words *shvayathu*, *shotha* and *shopha* are used as synonyms and all denote edema or swelling. For inflammatory swelling Sushruta has used the word *vrana-shotha*.

In the Sutra Sthana, Charaka classified *shotha* in many ways but in this chapter which is mainly on the treatment, only those classifications are given which are important from

treatment point of view, such as three types according to *dosha* viz, *vata*, *pitta* and *kapha*; two types viz. *nija* (endogenous) and *agantuja* (exogenous) as well as *ekanga* (local) and *sarvanga* (generalized) types.

Sanskrit text, Transliteration and English Translation

अथातः श्वयथुचिकित्सितं व्याख्यास्यामः||१||

इति ह स्माह भगवानात्रेयः||२||

athātaḥ śvayathucikitsitaṁ vyākhyāsyāmaḥ||1||

iti ha smāha bhagavānātrēyah||2||

athAtaH shvayathucikitsitaM vyAkhyAsyAmaH||1||

iti ha smAha bhagavAnAtreyaH||2||

Now we shall expound the chapter “Shvayathu chikitsa” (Management of different types of swelling). Thus said Lord Atreya. [1-2]

भिषग्वरिष्ठं सुरसिद्धजुष्टं मुनीन्द्रमत्यात्मजमग्निवेशः। महागदस्य श्वयथोर्यथावत्
प्रकोपरूपप्रशमानपृच्छत्॥३॥

bhiṣagvariṣṭhaṁ surasiddhajuṣṭaṁ munīndramatyātmajamagnivēśaḥ| mahāgadasya
śvayathōryathāvat prakōparūpapraśamānapṛcchat||3|| bhiṣagvariṣṭhaM
surasiddhajuṣṭhaM munīndramatyātmajamagniveshaḥ| mahāgadasya
shvayathoryathāvat prakoparUpaprashamAnapRucchat||3||

Agnivesha approached the best physician and great sage, the son of Atri sitting midst of gods and saints and requested him to elaborate on the etiology, signs and symptoms and treatment of the major disease- *shvayathu* [3]

तस्मै जगादागदवेदसिन्धुप्रवर्तनाद्रिप्रवरोऽत्रिजस्तान् वातादिभेदात्त्रिविधस्य
सम्यङ्गनिजानिजैकाङ्गजसर्वजस्य॥४॥

tasmai jagādāgadavēdasindhupravartanādripravarō’trijastān| vātādibhēdātrividhasya
samyaññijānijāiakāṅgajasarvajasya||4|| tasmai
jagAdAgadavedasindhupravartanAdripravaro~atrijastAn| vAtAdibhedAttrividhasya
samyagnijānijāiakāṅgajasarvajasya||4||

Sage Atreya who is like Himalaya from which flows out the Indus of the science of healing, fully expounded the subject of swellings of three types based on *tridosha*, *nija* and *agantuja* based on etiology and *ekanga* and *sarvanga* type according to location [4]

Causative factors of *nija* (endogenous) swelling/edema

शुद्ध्यामयाभक्तकृशाबलानां क्षाराम्लतीक्ष्णोष्णगुरुपसेवा।
दद्याममृच्छाकविरोधिदृष्टगरोपसृष्टान्ननिषेवण च॥५॥ अर्शास्यचेष्टा न च देहशुद्धिर्मर्मोपघातो विषमा
प्रसूतिः। मिथ्योपचारः प्रतीकर्मणां च निजस्य हेतुः श्वयथोः प्रदिष्टः॥६॥

śuddhyāmayābhaktakrśābalānāṁ kṣārāmlatīksṇōṣṇagurūpasēvā|
 dadhyāmamṛcchākavirōdhiduṣṭagarōpaṣṭānnaniṣēvaṇāṁ ca||5|| arśāṁsyacēṣṭā na ca
 dēhaśuddhirmarmōpaghātō viṣamā prasūtiḥ mithyōpacāraḥ pratikarmaṇāṁ ca nijasya
 hētuḥ śvayathōḥ pradiṣṭahḥ||6|| shuddhyAmayAbhaktakRushAbalAnAM
 kShArAmlatIkShNoShNagurUpasevA|
 dadhyAmamRucchAkavirodhiduShTagaropasRuShTAnnaniShevaNaM ca||5||
 arshAMsyaceShTA na ca dehashuddhirmarmopaghAto viShamA prasUtiH|
 mithyopacAraH pratikarmaNAM ca nijasya hetuH shvayathoH pradiShTaH||6||

Excessive use of *kshara* (alkali) or food articles having sour, sharply acting, hot and heavy properties by an emaciated or weak person due to excessive *shodhana*, fasting or disease.

Excessive intake of curd, raw food articles, soil, leafy vegetables, mutually contradictory food articles (*virodhi*), spoiled or mixed with toxic substance (such as pesticide), or a person suffering from piles, having sedentary life style, nonperforming of *shodhana* therapy even if indicated, injury to vital organs (*marma*), abnormal delivery, due to improper treatment and as complication of improper purification treatment [5-6]

Causative factors of *agantuka* (exogenous) swelling

बाह्यास्त्वचो दूषयिताऽभिघातः काष्ठाश्मशस्त्राग्निविषायसाद् यैः [१] |
 आगन्तुहेतुः त्रिविधो निजश्च सर्वार्थगत्रावयवाश्रितत्वात् ||७||
 bāhyāstvacō dūṣayitā'bhīghātaḥ kāṣṭhāśmaśastrāgnivisāyasādyaiḥ [1] |
 āgantuhētuḥ trividhō nijaśca sarvārdhagātrāvayavāśritatvāt||7||
 bAhyaAstvaco dUShayitA~abhighAtaH kASHThAshmashastrAgniviShAyasAdyaiH |
 AgantuhetuH trividho nijashca sarvArdhagAtrAvayavAshritatvAt||7||

External causative factors of swelling are trauma to skin with wood, stone, weapon, fire, poison etc.

Endogenous swelling is of three types i.e. of whole body, half body or limited to one part or organ [7]

Pathogenesis of swelling

बाह्याः सिराः प्राप्य यदा कफासूक्षिप्तानि सन्दूषयतीह वायुः | तैर्बद्धमार्गः स तदा विसर्पन्नुत्सेधलिङ्गं
 श्वयथं करोति ||८|| उरः स्थितैरुर्ध्वमधस्तु [१] वायोः स्थानस्थितैर्मध्यगतैस्तु मध्ये | सर्वाङ्गगः सर्वगतैः
 क्वचित्स्थैर्दैषैः क्वचित् स्याच्छवयथुस्तदाख्यः ||९||

bāhyāḥ sirāḥ prāpya yadā kaphāsūkpittāni sandūṣayatīha vāyuḥ | tairbaddhamārgaḥ sa
 tadā visarpannutsēdhaliṅgaṁ śvayathurū karōti ||8|| uraḥsthitairūrdhvamadhastu [1]
 vāyōḥ sthānasthitairmadhyagataistu madhyē | sarvāṅgagagah sarvagataih
 kvacitsthairdōṣaiḥ kvacit syācchvayathustadākhyah ||9|| bAhyaAH sirAH prApya yada

kaphAsRukpittAni sandUShayatIha vAyuH| tairbaddhamArgaH sa tadA visarpannutsedhali~ggaM shvayathuM karoti||8|| uraHsthitairUrdhvamadhastu [1] vAyoH sthAnasthitairmadhyagataistu madhye| sarvA~ggagaH sarvagataiH kvacitsthairdoShaiH kvacit syAcchvayathustadAkhyaH||9||

Morbid *vata* is obstructed by vitiated *kapha*, *rakta* and *pitta* aggravated at the site of peripheral superficial vessels. This vitiated *vata* (due to obstruction) spreads to the various places causing swelling as its cardinal symptom.

If the *vata* lodges in the chest, then it causes edema of upper parts of the body; if it lodges in its own place i.e. lower parts then it causes edema of lower parts and if it lodges in middle then it causes edema of middle parts.

If *vata* spreads in the entire body then it causes edema all over the body but if it lodges in one place then it causes local swelling of that part or organ. These swellings are named after the particular region that it affects [8-9]

Prodromal symptoms of edema

ऊष्मा तथा स्याद् दवथुः सिराणामायाम इत्येव च पूर्वरूपम्।

ūṣmā tathā syāddavathuḥ sirāṇāmāyāma ityēva ca pūrvarūpam।

UShmA tathA syAddavathuH sirANAmAyAma ityeva ca pUrvarUpam|

Rise in temperature, burning sensation as if burnt by fire and dilation of the vessels are the prodromal symptoms of swelling [9½]

Tridosha nature of all swellings

सर्वस्त्रिदोषोऽधिकदोषलिङ्गैस्तच्छब्दमभ्येति भिषग्निजतं च॥१०॥

sarvastridōśo'dhikadōṣaliṅgaistacchabdamabhyēti bhiṣagjitaṁ ca||10||

सर्वास्त्रिदोषोऽधिकदोषलिङ्गैस्तच्छब्दमभ्येति भिषग्निजतं च॥१०॥

All types of swelling are produced by involvement of all the three *dosha* but they are named based on the predominance of that particular *dosha*. The line of treatment is also according to the dominant *dosha* [10]

General symptoms of swelling

सगौरवं स्यादनवस्थितत्वं सोत्सेधमुष्माऽथ सिरातनुत्वम्। सलोमहर्षाङ्गविवर्णता च सामान्यलिङ्गं श्वयथोः प्रदिष्टम्॥११॥

sagauravaṁ syādanavasthitatvaṁ sōtsēdhamuṣmā'tha sirātanutvam| salōmaharṣāṅgavivarṇatā ca sāmānyaliṅgam śvayathōḥ pradiṣṭam||11|| sagauravaM syAdanavasthitatvaM sotsedhamuShmA~atha sirAtanutvam| salomaharShA_oggavivarNatA ca sAmAnyali~ggaM shvayathoH pradiShTam||11||

Heaviness, movability, bulging, heat, thinning of the vessels, horripilation and discoloration of the affected skin are the general signs and symptoms of edema [11]

Symptoms of *vata* dominant edema/swelling

चलस्तनुत्वकपरुषोऽरुणोऽसितः प्रसुप्तिहर्षार्तियुतोऽनिमित्ततः। प्रशास्यति प्रोन्नमति प्रपीडितो दिवाबली च श्वयथुः समीरणात्॥१२॥

calastanutvakparuṣo’ruṇo’sitah prasuptiharṣārtiyuto’nimittataḥ| praśāmyati prōnnamati
prapīḍitō divābalī ca śvayathuh samīraṇāt||12|| calastanutvakparuṣo_{aruNo}asitaH
prasuptiharShArtiyuto~animittataH| prashAmyati pronnamatiprapIDito divAbal ca
shvayathuH samIraNAt||12||

Skin of the effected part in *vata* dominant swelling becomes thin and rough and dry (*parusha*), dusky-brown colored with horripilation and feeling of numbness and discomfort. The swelling is moveable and pitting on pressure but it attains normal position immediately, increases during the day time and often subsides without appreciable reason [12]

Symptoms of *pitta* dominant swelling (inflammation)

मृदुः सगन्धोऽसितपीतरागवान् भ्रमज्वरस्वेदतृष्णामदान्वितः। य उष्यते स्पर्शरुगक्षिरागकृत् [१] स पित्तशोथो भृशदाहपाकवान्॥१३॥

mṛduḥ sagandhō’sitapītarāgavān bhramajvarasvēdatr̄ṣāmadānvitah| ya uṣyatē
sparśarugakṣirāgakṛt [1] sa pittaśōthō bhṛśadāhapākavān||13|| mRuduH
sagandho~asitapītarAgavAn bhramajvarasvedatRuShAmadAnvitaH| ya uShyate
sparsharugakShirAgakRut [1] sa pittashotho bhRushadAhpAkavAn||13||

The *pitta*-dominant swelling is soft, painful to touch, with specific odor and blackish, yellow or red colored skin and has tendency of turning to abscess. It is accompanied with excessive burning sensation, fever, perspiration, giddiness, thirst, redness in eyes and intoxication [13]

Symptoms of *kapha*-dominant edema

गरुः स्थिरः पाण्डुररोचकान्वितः प्रसेकनिद्रावमिवहिनमान्द्यकृत् स कृच्छ्रजन्मप्रशमो निपीडितो न चौन्नमेद्रात्रिबली कफात्मकः॥१४॥

guruḥ sthirah pāṇḍurarōcakānvitah prasēkanidrāvamivahnimāndyakṛt| sa
kr̄cchrajanmapraśamō nipīḍitō na cōnnamēdrātribalī kaphātmakah||14|| guruH sthiraH
pANDurrocakAnvitaH prasekanidrAvamivahnimAndyakRut| sa
kRucchrajanmaprashamo nipIDito na connamedrAtriball kaphAtmakaH||14||

Kapha-dominant swelling is heavy and firm/immovable. It is associated with anemia, anorexia, low digestion, water-brash, vomiting and sleepiness. It appears and disappears very slowly and on pressing it takes long time to attain its normal position and increases at the night time [14]

Symptoms of bad prognostic of edema

कृशस्य रोगैरबलस्य यो भवेदुपद्रवैर्वा वमिपूर्वकैयुतः। स हन्ति मर्मानुगतोऽथ राजिमान् परिस्वेदधीनबलस्य सर्वगः॥१५॥

kṛśasya rōgairabalasya yō bhavēdupadravairvā vamipūrvakairyutah| sa hanti marmānugatō'tha rājimān parisravēddhīnabalasya sarvagah||15|| kRushasya rogairabalasya yo bhavedupadravairvA vamipUrvakairyutaH| sa hanti marmAnugato~atha rAjimAn parisraveddhInabalasya sarvagaH||15||

The edema/swelling of the patient, whose body is emaciated and weakened by a disease or is debilitated, or having complications or associated with vomiting, involving vital organs or whole body or spread with prominent vessels or in which profuse discharge oozes out, leads to death [15]

Symptoms of easily curable swelling

अहीनमांसस्य य एकदोषजो नवो बलस्थस्य सुखः स साधने। निदानदोषर्तुविपर्ययक्रमैरुपाचरेत् बलदोषकालवित्॥१६॥

ahīnamāṁsasya ya ēkadōṣajō navō balasthasya sukhaḥ sa sādhanē| nidānadōṣartuviparyayakramairupācarēttarṁ baladōṣakālavit||16|| ahInamAMsasya ya ekadoShajo navo balasthasya sukhaH sa sAdhane| nidAnadoShartuviparyayakramairupAcarettam baladoShakAlavit||16||

The swelling of a patient who is neither emaciated nor weak; that involved single *dosha* or is of recent origin is easily curable. The physician expert in the knowledge of strength, *dosha* and proper time of treatment should treat the curable patients by prescribing such measures which are opposite to cause, *dosha* and season [16]

Principles of treatment of edema/swelling

अथामजं लङ्घनपाचनक्रमैर्विशोधनैरुल्बणदोषमादितः। शिरोगतं शीर्षविरेचनैरधो [४] विरेचनैरुद्धर्वहैस्तथोद्धर्वजम्॥१७॥ उपाचरेत् स्नेहभवं विरुक्षणैः प्रकल्पयेत् स्नेहविधिं च रुक्षजो विबद्धविट्केऽनिलजे निरुहणं घृतं तु पित्तानिलजे सतिक्तकम्॥१८॥ पयश्च मर्च्छारतिदाहतर्षिते विशोधनीये तु समूत्रमिष्यते। कर्फात्तिथितं क्षारकटूष्णासंयुतैः समूत्रतक्रासवयुक्तिभिर्जयेत्॥१९॥

athāmajam laṅghanapācanakramairviśodhanairulbaṇadōṣamāditah| śirōgataṁ śīrṣavirēcanairadhō [4] virecanairūrdhvaharaistathōrdhvajam||17|| upācarēt snēhabhavaṁ virūkṣaṇaiḥ prakalpayēt snēhavidhim ca rūkṣajē vibaddhaviṭkē'nilajē nirūhaṇam gṛtam tu pittānilajē satiktakam||18|| payaśca mūrcchāratidāhatarṣitē viśodhanīyē tu samūtramiṣyatē kaphōthitarṁ kṣārakaṭuṣṇasārahyutaiḥ samūtratakrāsavayuktibhirjayēt||19|| athAmajaM la~gghanapAcanakramairvishodhanairulbaNadoShamAditaH| shirogataM shIrShavirecanairadho [4] virecanairUrdhvaharaistathordhvajam||17|| upAcaret snehabhavaM virUkShaNaiH prakalpayet snehavidhiM ca rUkShaje vibaddhaviTke~anilaje nirUhaNaM ghRutaM tu pittAnilaje satiktakam||18|| payashca

mUrcchAratidAhatarShite vishodhanlye tu samUtramiShyate| kaphotthitaM
kShArakaTUShNasaMyutaiH samUtratakrAsavayuktibhirjayet||19||

If swelling is associated with *ama* it should be managed first by prescribing lightening therapy (*langhana*) and digestive drugs and only then *shodhana* therapy should be undertaken according to dominant *dosha*. General lines of treatment of *doshaja* swelling are as follows:

- If it involves head then *shiro-virechana* is prescribed;
- If it involves lower parts of the body then *virechana* (therapeutic purgation) is prescribed;
- If it involves upper parts of the body then *vamana* (therapeutic emesis) is prescribed;
- If it is caused by unctuous then *rukshana* (drying) therapy is done;
- If it is caused by un-unctuous (*ruksha*) then unctuous (*snehana*) therapy is done;
- If *vata* swelling is associated with constipation then it should be treated with *niruha basti*;
- If it is caused by *vata-pitta* then it should be treated with ghee prepared with bitter drugs;
- If the patient is suffering from associated symptoms such as fainting, pain, burning sensation and thirst then it should be treated with intake of milk;
- If the patient is suffering from swelling where *shodhana* is required then milk mixed with cow's urine should be given.
- If the patient is suffering from *kapha* swelling then *kshara* or pungent and hot articles mixed in cow's urine or buttermilk or *asava* are given [17-19]

Apathya (unwholesome) for swelling/edema

ग्राम्याब्जानूपं पिशितमबलं शुष्कशाकं नवान्नं गौडं पिष्टान्नं दधि तिलकृतं [५] विजलं [६]
मद्यमम्लम् धाना वल्लूरं समशनमथो गुर्वसात्म्यं विदाहि स्वप्नं चारात्री श्वयथुगदवान् वर्जयेन्मैथुनं
च॥२०॥

grāmyābjānūpam piśitamabalam śuṣkaśākam navānnam gauḍam piṣṭānnam dadhi
tilakṛtam [5] vijjalam [6] madyamamlam| dhānā vallūram samaśanamathō
gurvasātmyam vidāhi svapnarām cārātrau śvayathugadavān varjayēnmaithunām ca॥20॥
grAmyAbjAnUpaM pishitamabalaM shuShkashAkaM navAnnaM gauDaM piShTAnnaM
dadhi tilakRutaM [5] vijjalaM [6] madyamamlam| dhAnA vallUraM samashanamatho
gurvasAtmyaM vidAhi svapnaM cArAtrau shvayathugadavAn varjayenmaithunaM
ca॥20॥

Meat of domestic, aquatic and wet-land animals or weak animals; dry vegetables, fresh grains, molasses, fine flour products, curd, products of sesame, slimy and sour food articles, wine, roasted barley, dried meat, *samashana* (taking of mixture of wholesome and unwholesome food), taking of unwholesome, heavy and irritant diet articles, day sleep and sexual acts should be avoided by the patient of edema/swelling [20]

Vyoshadi churna for kapha swelling/edema

व्योषं त्रिवृतिक्तकरोहिणी च सायोरजस्का त्रिफलारसेन। पीतं कफोत्थं शमयेत् शोफं गव्येन मूत्रेण हरीतकी च॥२१॥

vyōṣam trivṛttiktakarohiṇī ca sāyōrajaskā triphalārasenā| pītam kaphōttham̄ śamayēttu
śōpham̄ gavyēna mūtrēṇa haritakī ca||21|| vyoShaM trivRuttiktakarohiNI ca sAyorajaskA
triphalArasena| pItaM kaphotthaM shamayettu shophaM gavyena mUtreNa harItakI
ca||21||

Mixture of powders of *trikatu*, *trivrit*, *katuka* and *lauha-bhasma* taken with juice of *triphala*; or *haritaki* powder taken by mixing with cow's urine relieves *kapha* edema/swelling [21]

Remedy for tridoshaja edema

हरीतकीनागरदेवदारु सुखाम्बुयुक्तं सपुनर्नवं वा। सर्वं पिबेत्त्रिष्वपि मूत्रयुक्तं स्नातश्च जीर्णं पयसाऽन्नमद्यात्॥२२॥

harītakīnāgaradēvadāru sukhāmbuyuktam̄ sapunarnavaṁ vā| sarvaṁ pibēttriṣvapi
mūtrayuktam̄ snātaśca jīrṇē payasā'nnamadyāt||22|| harItakInAgaradevadAru
suKhAmbuyuktaM sapunarnavaM vA| sarvaM pibettriShvapi mUtrayuktaM snAtashca
jIrnNe payasA~annamadyAt||22||

Mixture of *haritaki*, dried ginger and *devadaru* taken with lukewarm water, or *punarnava* mixed with all the above drugs taken with cow's urine relieves swelling produced by all the three *dosha*. On digestion of the drug and after taking bath, the patient should take food with milk [22]

Remedy for vata edema/swelling

पुनर्नवानागरमुस्तकल्कान् प्रस्थेन धीरः पयसाऽक्षमात्रान्। मयूरकं मागधिकां समूलां सनागरां वा प्रपिबेत् सवाते॥२३॥

punarnavānāgaramustakalkān prasthēna dhīraḥ payasā'kṣamātrān| mayūrakam̄
māgadhikām̄ samūlām̄ sanāgarām̄ vā prapibēt savātē||23||
punarnavAnAgaramustakalkAn prasthena dhIraH payasA~akShamAtrAn| mayUrakaM
mAghadhiKAM samUlAM sanAgarAM vA prapibet savAte||23||

The 500 ml of milk prepared with paste of 10 gm each *punarnava*, dried ginger and *mustaka*; or milk prepared with *mayuraka*, *pippalimula* and dried ginger taken orally relieves swelling due to *vata* [23]

Remedy for vata-pitta swelling/edema

दन्तीत्रिवृत्त्यूषणचित्रकैर्वा पयः शृतं दोषहरं पिबेन्ना। द्विप्रस्थमात्रं तु पलार्धिकैस्तैरर्धावशिष्टं पवने सपिते॥२४॥

dantītrivṛttryūṣaṇacitrakairvā payah śṛṭam dōṣaharam pibēnnā| dviprasthamātram tu
palārdhikaistairardhāvaśiṭam pavanē sapittē||24|| dantItrivRuttryUShaNacitrakairvA
payaH shRutaM doShaharaM pibennA| dviprasthamAtraM tu
palArdhikaistairardhAvashiShTaM pavane sapitte||24||

One liter of milk prepared with 20 gm each of *danti*, *trivrit*, *trikatu* and *chitraka* added with one liter of water reduced to half, taken orally relieves edema caused by combination of *vata* and *pitta* [24]

General remedies for edema

सशण्ठिपीतद्रुरसं प्रयोज्यं श्यामोरुबूकोषणसाधितं वा| त्वग्दारुवर्षाभुमहौषधैर्वा
गुडूचिकानागरदन्तिभिर्वा||२५||

saśuṇṭhipītadrurasam prayōjyam śyāmōrubūkōṣaṇasādhitam vā|
tvagdāruvarṣābhumaḥauṣadhairvā guḍūcikānāgaradantibhirvā||२५||
sashuNThipladrurasam prayojyaM shyAmorubUkoShaNasAdhitam vA|
tvagdAruvarShAbhumahauShadhairvA guDUCikAnAgaradantibhirvA||२५||

Milk prepared with dry ginger and *daruharidra* or prepared with *shyama*, castor root and black pepper, or prepared with cinnamon, *devadaru*, *punarnava* and dry ginger; or prepared with *guduchi*, dry ginger and *danti*; taken orally relieves edema [25]

सप्ताहमौष्ट्रं त्वथवाऽपि मासं पयः पिबेद्भोजनवारिवर्जीं| गव्यं समूत्रं महिषीपयो वा क्षीराशनो मूत्रमथो
गवां वा||२६||

saptāhamauṣṭram tvathavā'pi māsam payah pibēdbhōjanavārivarjī| gavyam samūtram
mahiṣīpayo vā kṣīrāśanō mūtramatō gavāṁ vā||२६|| saptAhamauShTraM tvathavA~api
mAsoM payaH pibedbhajanavArivarjI| gavyaM samUtraM mahiShlpayo vA kShlrAshano
mUtramatoh gavAM vA||२६||

The patient by avoiding all other food and drinks if remains only on camel's milk for a week or month or similarly remains on cow's milk mixed with equal quantity of cow's urine or on buffalo's milk mixed with an equal quantity of cow's urine or other milk with cow's urine, then edema is cured [26]

तक्रं पिबेद् वा गरुभिन्नवर्चा: सव्योषसौवर्चलमाक्षिकं च| गुडाभयां वा गुडनागरं वा
सदोषभिन्नामावेद्धवर्चा:||२७||

takram pibēdvā gurubhinnavarcāḥ savyōṣasauvarcalamākṣikam ca| guḍābhayāṁ vā
guḍanāgaram vā sadōṣabhinnāmavibaddhavarcāḥ||२७|| takraM pibedvA
gurubhinnavarcAH savyoShasauvarcalamAkShikaM ca| guDAbhayAM vA
guDanAgaraM vA sadoShabhinnAmavibaddhavarcAH||२७||

Patient of edema if passes heavy (with mucous) and loose stools may drink butter milk mixed with *trikatu*, *sauvarchala*-salt and honey; or if the stool is morbid, loose, with *ama* or hard stool, then jaggery and *haritaki* or jaggery with dry ginger are given [27]

विड्वात्सङ्गे पयसा रसैर्वा प्राग्भक्तमद्यादुरुबूकतैलम् [७] |

स्रोतोविबन्धेऽग्निरुचिप्रणाशे मदयान्यरिष्टांश्च पिबेत् सुजातान्॥२८॥

viḍvātasaṅgē payasā rasairvā prāgbhaktamadyādurubūkatailam [7] |

srōtōvibandhē'gnirucipranāśē madyānyariṣṭāṁśca pibēt sujātān||28||

viDvAtasa~gge payasA rasairvA prAgbhaktamadyAdurubUkatailam [7] |

srotovibandhe~agnirucipraNAshe madyAnyariShTAMshca pibet sujAtAn||28||

If there is retention of feces and flatus, the patient may be given castor oil with milk or with meat-soup before meal; and if there is occlusion of channels or loss of digestion power and appetite, then the patient may be given simple or medicated wines [28]

Gandeeradyarishta

गण्डीरभल्लातकचित्रकांश्च व्योषं विडङ्गं बृहतीदवयं च। द्विप्रस्थिकं गोमयपावकेन द्रोणे पचेत् कूर्चिकमस्तनस्तु [८] ||२९॥ त्रिभागशेषं च सपूतशौतं द्रोणेन तत् प्राकृतमस्तुना च। सितोपलायाश्च शतेन युक्तं लिप्ते घटे चित्रकपिप्पलीनाम्॥३०॥ वैहायसे स्थापितमादशाहात् प्रयोजयंस्तद्विनिहन्ति शोफान्। भूगन्दराशःक्रिमिकुष्ठमेहान् वैवर्ण्यकाश्यानिलहिक्कनं च॥३१॥ इति गण्डीराद्यरिष्टः

gaṇḍīrabhallātakacitrakāṁśca vyōṣam viḍaṅgam bṛhatīdvayaṁ ca| dviprasthikam gōmayapāvakēna drōṇē pacēt kūrcikamastunastu [8] ||29|| tribhāgaśēṣam ca supūtaśītarṁ drōṇēna tat prākṛtamastunā ca| sitōpalāyāśca śatēna yuktarṁ liptē ghaṭē citrakapippalīnām||30|| vaihāyasē sthāpitamādaśāhāt prayōjayaṁstadvinihanti śōphān| bhagandarārśāḥkrimikuṣṭhamēhān vaivarṇyakārśyānilahikkanaṁ ca||31|| iti gaṇḍīrādyarisṭah gaNDIrbhallAtakacitrakAMshca vyoShaM viDa~ggaM
bRuhatIdvayaM ca| dviprasthikaM gomayapAvakena droNe pacet kUrcikamastunastu [8] ||29|| tribhAgasheShaM ca supUtashitaM droNena tat prAkRutamastunA ca| sitopalAyAshca shatena yuktam lipte ghaTe citrakapippallnAm||30|| vaihAyase sthApitamAdashAhAt prayojayaMstadvinihanti shophAn| bhagandarArshaHkrimikuShThamehAn vaivarNyakArshyAnilahikkanaM ca||31|| iti gaNDIAdyariShTaH

Take 1.280 Kg of *gandeera*, *bhallataka*, *chitraka*, *trikatu*, *vidnaga*, *kantakari* and *brihati* and add 1.024 Kg of *kurchika-mastu* (prepared by adding hot water in curd) and boil on cow-dung fire till one-third remains and then filter. On cooling add to it 1.024 Kg natural-*mastu* (prepared by adding water in curd), 4 kg of sugar-candy and put in a pitcher lined with paste of *chitraka* and *pippali* and leave this pot at a high-open place for 10 days for fermentation to prepare *arishta*.

Oral administration of *gandeeradyarishta* cures edema, fistula-in-ano, piles, helminthiasis, *kushtha*(obstinate skin diseases), polyuria, discoloration, emaciation and hiccup due to *vata*. Thus *gandeeradyarishta* is described [29-31]

Ashtashato arishta

काशमर्यधात्रीमरिचाभयाक्षद्राक्षाफलानां [१] च सपिप्पलीनाम्| शतं शतं जीर्णगडात्तुलां [१०] च सङ्क्षुद्य कुम्भे मधुना प्रलिप्ते॥३२॥ सप्ताहमुष्णे दविगुणं तु शीते स्थितं जलद्रोणयुतं पिबन्ना| शोफान् विबन्धान् कफवातजाश्च निहन्त्यरिष्टोऽष्टशतोऽग्निकृच्च॥३३॥ इत्यष्टशतोऽरिष्टः

kāśmaryadhātrīmaricābhayākṣadrākṣāphalānām [9] ca sapippalīnām| śatāṁ śatāṁ jīrṇaguḍāttulām [10] ca saṅkṣudya kumbhē madhunā praliptē॥३२॥ saptāhamuṣṇē dviguṇām tu śītē sthitāṁ jaladrōṇayutāṁ pibēnnāl śōphān vibandhān kaphavātajāṁśca nihantyariṣṭō'śtaśatō'gnikṛcca॥३३॥ ityaśtaśatō'riṣṭah
kAshmaryadhAtrImaricAbhayAkShadrAkShAphalAnAM [9] ca sapippallInAm| shataM shataM jIrnaguDAttulAM [10] ca sa~gkShudya kumbhe madhunA pralipte॥३२॥ saptAhamuShNe dviguNaM tu shlte sthitAM jaladroNayutaM pibennA| shophAn vibandhAn kaphavAtajAMshca nihantyariShTo_{aShTashato}agnikRucca॥३३॥ ityaShTashato~ariShTaH

Take 100 *pala* each of *kashmarya*, *amalaki*, black pepper, *haritaki*, *vibhitaki*, *pippali* and grapes, add to it 100 *pala* of old jaggery and two *drona* of water, then put the mixture in a vessel lined with honey for 7 days in summer or for 14 days in winter for fermentation. Thus fermented *asava* is known as *ashtashato-arishtha*. Its oral administration cures edema and constipation due to *kapha* and *vata* and stimulates digestion and metabolism (*agni*). Thus *ashthato-arishta* is described [32-33]

Punarnavadi arishta

पुनर्नवे दवे च बले सपाठे दन्तीं [११] गुडचीमथ चित्रकं च निदिग्धिकां च त्रिपलानि पक्त्वा द्रोणावशेषे सलिले ततस्तम्॥३४॥ पूत्वा रस दवे च गुडात् पुराणात्तुले मधुप्रस्थयुतं सशीतम्| मासं निदै॒या॑द॒घृ॒तभा॒जनस्थ॑ पल्ले यवाना॑ परतस्तु मासात्॥३५॥ चर्णोक्ते॒रधै॒पलांशि॑कैस्तं पत्रत्वगेलामरिचाम्बुलोहैः [१२] | गन्धान्वितं क्षौद्रघृतप्रदिग्धे जीर्णं पिबेद् व्याधिबलं समीक्ष्य॥३६॥ हृत्पाण्डुरोगं श्वयथुं प्रवृद्धैः प्लौहज्वरारोचकमेहग्लमान्| भगन्दरं षड्जठराणि कासं श्वासं ग्रहण्यामयकृष्ठकण्डूः॥३७॥ शाखानिलं बद्धपुरीषतां च हिक्कां किलासं च हलीमकं च| क्षिप्रं जयेद्वर्णबलायुरोजस्तेजोन्वितो मांसरसान्भोजी॥३८॥ इति पुनर्नवाद्यरिष्टः

punarnavē dvē ca balē sapāṭhē dantīm [11] guḍūcīmatha citrakām ca| nidigdhikām ca tripalāni paktvā drōṇāvaśēṣē salilē tatastam॥३४॥ pūtvā rasam dvē ca guḍāt purāṇāttulē madhuprasthayutām suśītam| māsam nidadhyādghṛtabhājanastham pallē yavānām parastasu māsat॥३५॥ cūrñīkṛtairardhapalāṁśikaistām patratvagēlāmaricāmbulōhaiḥ [12] | gandhānvitām kṣaudraghṛtrapradigdhē jīrṇē pibēd vyādhibalām samīkṣya॥३६॥ hṛtpāṇḍurōgaṁ śvayathūm pravṛddham plīhajvarārōcakamēhagulmān| bhagandaramaṁ ṣadjaṭharāṇi kāsam śvāsam grahaṇyāmayakuṣṭhakaṇḍūḥ॥३७॥ śākhānilaṁ baddhapurīṣatām ca hikkām kilāsam ca halīmakām ca| kṣipram jayēdvarṇabalāyurojastējōnvitō māṁsarasānnaṁbhōjī॥३८॥ iti punarnavādyariṣṭah
punarnave dve ca bale sapAThe dantIM [11] guDUclmatha citrakaM ca| nidigdhikAM ca tripalAni paktvA droNAvasheShe salile tatastam॥३४॥ pUtvA rasaM dve ca guDAt purANAttule madhuprasthayutaM sushItam| mAsam nidadhyAdghRutabAjanasthaM palle yavAnAM parastasu mAṣAt॥३५॥ cUrNIkRutairardhapalAMshikaistaM

patratvagelAmaricAmbulohaiH [12] | gandhAnvitaM kShaudraghRutapradigdhe jIrNe
pibed vyAdhibalaM samIkShya ||36|| hRutpANDurogaM shvayathuM pravRuddhaM
pllhajvarArocakamehagulmAn| bhagandaraM ShaDjaTharANI kAsaM shvAsaM
grahaNyAmayakuShThakaNDUH ||37|| shAkhAnilaM baddhapuriShatAM ca hikkAM
kilAsaM ca hallmakaM ca| kShipraM jayedvarNabalAyurojastejonvito
mAmsarasAnnabhojI||38|| iti punarnavAdyariShTaH

Make a decoction of 120 gm each of two types of *punarnavā, balā, pāṭhā, dantī, guḍūchī, chitraka, kantakārī* and *triphalā* by adding water (about 4.1 liters) and reducing it to 1.024 liter. Add to this decoction 8 kg of jaggery and 640 gm of honey and keep it in a vessel lined with ghee and place it in a heap of barley for a month. Thereafter to make it fragrant, add 20 gm powders each of *tejapatra*, cinnamon, cardamom, black pepper, coucous and iron *bhasma* and store in a pot lined with honey and ghee. It is to be taken after the digestion of the meal in a dose according to the strength of the disease. In diet, food with meat soup may be given.

It provides quick cure in heart disease, anemia, severe edema, splenic disorders, fever, anorexia, polyuria, *gulma*, fistula-in-ano, six types of *udararoga*, cough, dyspnea, assimilation disorders (*grahani*), dermatosis (*kushtha*), pruritis, *vata* disorders of limbs, constipation, hiccup, leukoderma and *halimaka* (greenish coloration of skin). It also improves complexion, strength, ojas and vitality. Thus *punarnavadi arishta* is described [34-38]

Triphaladyarishta

फलत्रिकं दीप्यकचित्रकौ च सपिष्पतीलोहरजो विडङ्गम् चूर्णाकृतं कौडविकं दविरंशं क्षौद्रं पुराणस्य तुलां
गडस्या॥३९॥ मासं निदध्यादघृतभाजनस्थं यवेष तानेव निहन्ति रोगान् ये चार्शसां पाण्डुविकारिणां च
प्रौक्ता हिता: शोफिषु तेऽप्यरिष्टाः॥४०॥ इति त्रिफलाद्यरिष्टः-

phalatrikam dīpyakacitrakau ca sapippalīlōharajō vīdaṅgam cūrṇīkṛtam kauḍavikam
dvirāṁśam kṣaudram purāṇasya tulāṁ guḍasya||39|| māsam
nidadhyādghṛtabhājanastham yavēṣu tānēva nihanti rōgān| yē cārśasām
pāṇḍuvikārinām ca prōktā hitāḥ śōphiṣu tē'pyariṣṭāḥ||40|| iti triphalādyarisṭāḥ
phalatrikaM dlpyakacitrakau ca sapippalloharajo viDa~ggam| cUrNIkRutaM
kauDavikaM dviraMshaM kShaudraM purANasya tulAM guDasya||39|| mAṣaM
nidadhyAdghRutabhAjanasthaM yaveShu tAneva nihanti rogAn| ye cArshasAM
pANDuvikAriNAM ca proktA hitAH shophiShu te~apyariShTAH||40|| iti
triphalAdyariShTaH

Make decoction from the coarse powder of 160 gm each of *triphalā, ajawan, chitraka, pippali*, iron *bhasma* and *vidanga*. To this decoction add 320 ml of honey and 4 kg of jaggery and put it in a vessel lined with ghee and place in a heap of barley for a month. Its oral administration cures all the diseases mentioned above. Thus *triphaladyarishtā* is described.

The *asava* and *arishta* mentioned for the treatment of piles and anemia are also beneficial for relieving the edema [39-40]

Powder preparations for edema

कृष्णा सपाठा गजपिप्पली च निदिग्धिका चित्रकनागरे च| सपिप्पलीमूलरजन्यजाजीमुस्तं च चूर्णं
सुखतोयपीतम्||४१|| हन्यात्तिर्दोषं चिरजं च शोफं कल्कशं भूनिम्बमहौषधस्य।
अंयोरजस्त्यूषणयावशूकचूर्णं च पीतं त्रिफलारसेन।||४२॥

kṛṣṇā sapāṭhā gajapippalī ca nidigdhikā citrakanāgarē ca|
sapippalīmūlarajanyajājīmustam ca cūrṇam sukhatoyapītam||41|| hanyāttridōṣam
cirajaṁ ca sōpharṇ kalkaśca bhūnimbamahauṣadhasya|
ayōrajastryūṣaṇayāvaśūkacūrṇam ca pītam triphalārasēna||42|| kRuShNA sapAThA
gajapippall ca nidigdhikA citrakanAgare ca| sapippallmUlarajanyaAjImustaM ca
cUrNaM sukhatoyapItam||41|| hanyAttridoShaM cirajaM ca shophaM kalkashca
bhUnimbamahauShadhasya| ayorajastryUShaNayAvashUkacUrNaM ca pltaM
triphalArasena||42||

Use of any one of the following powder preparations cures chronic edema caused by all the three *dosha*:

The mixture of the powders of *pippali*, *pippalimula*, *pāṭhā*, *gajapippali*, cumin, *kantakāri*, *chitraka*, dried ginger, turmeric, cumin and *mustaka* taken with lukewarm water, or paste of *bhumyāmalaki* and dried ginger taken with lukewarm water or *bhasma* of iron, *trikatu* and *yavakshara* taken with decoction of *triphalā* [41-42]

Ksharagudika

क्षारदवयं स्याल्लवणानि चत्वार्योरजो व्योषफलत्रिके च| सपिप्पलीमूलविडग्गसारं
मुस्ताजमोदामरदारुबिल्वम्||४३|| कलिङ्गकाशिचत्रकमूलपाठे यष्ट्याहवयं सातिविषं पलांशम्|
सैङ्घिकर्षं त्वणशुष्कचूर्णं द्रोणं तथा मूलकशुण्ठकानाम्||४४|| स्यादभस्मनस्तत् सलिलेन साध्यमालोड्य
यावदघेनमप्रदग्धम् स्त्यानं ततः कोलसमां ते मात्रां कृत्वा सुशष्कां विधिनोपयुज्ज्यात्||४५||
प्लीहोदरश्वित्रहलीमकार्शःपाण्डवामयारोचकशौषशोफान् विसौचिकागुल्मगराश्मरीश्च सश्वासकासाः
प्रणुदेत् सकुष्ठाः||४६|| इति क्षारगुडिका

ksāradvayaṁ syāllavaṇāni catvāryayōrajō vyōṣaphalatrikē ca|
sapippalīmūlaviḍāṅgasāraṁ mustājamōdāmaradārubilvam||43||
kaliṅgakāścitrakamūlapāṭhē yaṣṭyāhvayāṁ sātiviṣāṁ palāṁśam| sahiṅgukarṣam
tvāṇuśuṣkacūrṇam drōṇāṁ tathā mūlakaśuṇṭhakānām||44|| syādbhasmanastat salilēna
sādhyamālōḍya yāvadghanamapradagdham| styānaṁ tataḥ kōlasamāṁ tu māṭrāṁ
kṛtvā suśuṣkāṁ vidhinōpayuñjyāt||45||
plihōdaraśvitrahalīmakārśahpāṇḍvāmayārōcakaśōṣāśōphān|
visūcikāgulmagarāśmarīśca saśvāsakāsāh praṇudēt sakuṣṭhāḥ||46|| iti ksāraguḍikā ||
kShAradvayaM syAllavaNA ni catvAryayorajo vyoShaphalatrike ca|
sapippallmUlaviDa~ggasAraM mustAjamodAmaradArubilvam||43||
kali~ggakAshcitrakamUlapAThe yaShTyAhvayaM sAtiviShaM palAMsham|
sahi~ggukarShaM tvaNushuShkacUrNaM droNaM tathA mUlakashuNThakAnAm||44||
syAdbhasmanastat salilena sAdhyamAloDya yAvadghanamapradagdham| styAnaM
tataH kolasamAM tu mAtrAM kRutvA sushuShkAM vidhinopayu~jjyAt||45||
plihodarashvitrahallmakArshaHpANDvAmayArocakashoShashophAn|

visUcikAgulmagarAshmarlshca sashvAsakAsAH praNudet sakuShThAH||46|| iti
kShAraguDikA

Take 40 gm fine powder each of *svarajjikā* and *yava-kshara*, four varieties of salt, iron *bhasma*, *trikatu*, *triphalā*, *pippalimula*, peeled seeds of *vidanga*, *mustaka*, *ajamodā*, *devadāru*, *bilva*, *indrayava*, root of *chitraka*, *pāthā*, *ativishā* and liquorice; 10 gm of asafetida and 1.024 Kg of dried radish and dried ginger. Add water to it and heat the mixture till it becomes thick taking care that it should not seared and from it make pills of 5 gm each and dry them.

Properly administered pills cure splenomegaly, leukoderma, *halimaka* (greenish coloration of the skin), piles, anemia, anorexia, emaciation, edema, gastroenteritis, *gulma*, synthetic poisoning, lithiasis, dyspnea, cough and dermatosis. Thus *ksharagudika* is described [43-46]

Course of *gud-adraka*

प्रयोजयेदार्द्रकनागरं वा तुल्यं गुडेनार्धपलाभिवृद्ध्या। मात्रा परं पञ्चपलानि मासं जीर्णं पयो यषरसाश्च
भक्तम्॥४७॥ गुल्मोदराशःश्वयथुप्रमेहाज् श्वासप्रतिश्यालसकाविपाकान्। सकामलाशोषमनोविंकारान्
कासं कफं चैव जयेत् प्रयोगः॥४८॥

prayōjayēdārdrakanāgaram vā tulyam guḍēnārdhapalābhivṛddhyā| mātrā param
pañcapalāni māsam jīrnē payo yūśarasāśca bhaktam||47||
gulmōdarāśahśvayathupramēhāñ śvāsapratiśyālasakāvipākān|
sakāmalāśōṣamanōvikārān kāsam kapham caiva jayēt prayogaḥ||48||
prayojayedArdrakanAgaraM vA tulyaM guDenArdhapalAbhivRuddhyA| mAtrA paraM
pa~jcapalAni mAṣaM jIṛNe payo yUSharasAshca bhaktam||47||
gulmodarArshaHshvayathupramehA~j shvAsapratishyAlasakAvipAkAn|
sakAmalAshoShamanovikArAn kAsaM kaphaM caiva jayet prayogaH||48||

Mix equal quantity of jaggery and ginger and take it in 20 gm dose initially and then increase its dose by 20 gm daily till the dose becomes 200 gm per day. Then this dose is to be continued for the remaining days of the month. During this treatment, on digestion of the drug, rice gruel and milk or meat soup should be given to eat.

The one month course cures *gulma*, *udararoga*, piles, edema, polyuria, dyspnea, coryza, cough, *alasaka*, indigestion, jaundice, consumption, mental disorders and kapha disorders [47-48]

Course of *shilajatu*

रसस्तथैवार्द्रकनागरस्य पेयोऽथ जीर्णं पयसाऽन्नमद्यात्। जत्वश्मजं [१३] च त्रिफलारसेन हन्यात्त्रिदोषं
श्वयथुं प्रसहय॥४९॥ इति शिलाजतुप्रयोगः-

rasastathaivārdrakanāgarasya pēyō'tha jīrnē payasā'nnamadyāt| jatvaśmajam [13] ca
triphalārasēna hanyāttridōṣam śvayathum prasahya||49|| iti śilājatuprayogaḥ
rasastathaivArdrakanAgarasya peyo~atha jIṛNe payasA~annamadyAt| jatvashmajaM

[13] ca triphalArasena hanyAttridoShaM shvayathuM prasahya||49|| iti
shilAjatuprayogaH

Similarly juice of ginger may be taken with *shilajatu* for one month in the doses and manner mentioned above. On getting the hunger food should be taken with milk.

A month's course of *shilajatu* with juice of *triphalā* will completely cure the edema/swelling caused by all the three *dosha*. Thus course of *shilajatu* is described [49]

Kamsa haritaki

दविपञ्चमूलस्य पचेत् कषाये कंसेऽभयानां च शतं गडस्या लेहे सुसिद्धेऽथ विनीय चर्णं व्योषं
त्रिसौगन्ध्यमषास्थिते च॥५०॥ प्रस्थार्धमात्रं मधुनः सुशीते किञ्चिच्च चूर्णादपि यावशैकात् एकाभयां
प्राश्य ततश्च लेहाच्छक्तिं निहन्ति श्वयथुं प्रवृद्धम्॥५१॥
श्वासज्वरारोचकमेहगुल्मप्लीहत्रिदोषोदरपाण्डुरोगान्।
काश्यामवातावसृगम्लपित्तवैवण्यमूत्रानिलशुक्रदोषान्॥५२॥ इति कंसहरीतकी

dvipañcamūlasya pacēt kaśāyē kaṁsē'bhayānām ca śatāṁ guḍasya| lēhē susiddhē'tha
vinīya cūrṇāṁ vyōṣāṁ trisaugandhyamuśāsthiti ca||50|| prasthārdhamātrāṁ madhunaḥ
suśītē kiñcicca cūrṇādapi yāvaśūkāt| ēkābhayāṁ prāśya tataśca lēhācchuktīṁ nihanti
śvayathuṁ pravṛddham||51|| śvāsaṁvarārōcakamēhagulmaplīhatridōśodarapāṇḍurōgān|
kārśyāmavātāvasrgamlapittavaivarṇyamūtrānilaśukradōśān||52|| iti kaṁsaharītakī
dvipa~jcamUlasya pacet kaShAye kaMse~abhayAnAM ca shataM guDasya| lehe
susiddhe~atha vinlya cUrNaM vyoShaM trisaugandhyamuShAsthite ca||50||
prasthArdhamAtraM madhunaH sushlte ki~jcicca cUrNAdapi yAvashUkAt| ekAbhayAM
prAshya tatashca lehAcchukiM nihanti shvayathuM pravRuddham||51||
shvAsajvarArocakamehagulmaplīhatridoShodarapANDurogAn|
kArshyAmavAtAvasRugamlapittavaivarNyamUtrAnilashukradoShAn||52|| iti
kaMsaharItakI

Make 2.56 liter decoction of *dashamula* and add to it *haritaki* 100 in number and 4.0 kg of jaggery and powder of *trikatu* and *trijata* (three aromatics- leaves and bark of cinnamon and cardamom). Leave it overnight and next morning on cooling adds 320 gm of honey and little quantity of *yavakshara*.

Take it in the dose of 10 gm along with one *haritaki*. It will cure severe edema and also dyspnea, fever, anorexia, polyuria, *gulma*, splenic-disorders, *sannipātika-udararoga*, anemia, emaciation, rheumatoid arthritis, bleeding disorders, hyperchlorhydria, discoloration of skin and *vata* disorders of urine and semen. Thus *kaṁsaharītakī* is described [50-52]

Patoladi kashaya

पटोलमूलामरदारुदन्तीत्रायन्तिपिष्पल्यभयाविशालाः| यष्ट्याहवयं तिक्तकरोहिणी च सचन्दना
स्यान्निंचुलानि दार्वी॥५३॥ कर्षोन्मितैस्तैः क्वथितः कषायो घृतेन पेयः कडवेन युक्तः|
वीसर्पदाहज्वरसन्निपाततृष्णाविषाणि श्वयथुं च हन्ति॥५४॥

paṭolamūlāmaradārudantītrāyantipippalyabhayāviśālāḥ| yastyāhvayam tiktakarohinī ca
 sacandanā syānniculāni dārvī||53|| karṣonmitaistaiḥ kvathitah kaṣāyō ghṛtēna pēyah
 kuḍavēna yuktaḥ| vīsarpadāhajvarasannipātatrṣṇāviśāṇi śvayathum ca hanti||54||
 paTolamUIAmaradArudantItrAyantipippalyabhayAvishAIHAḥ| yaShTyAhvayaM
 tiktakarohiNI ca sacandanA syAnniculAni dArvi||53|| karShonmitaistaiH kvathitaH
 kaShAyo ghRutena peyaH kuDavena yuktaH|
 vlsarpadAhajvarasannipAtatRuShNAviShANi shvayathuM ca hanti||54||

Make decoction of 10 gm each of roots of *patola*, *devadāru*, *danti*, *trāyamānā*, *pippali*, *haritaki*, *indrāyana*, liquorices, sandal wood, *katukā*, *dāruhridrā* and *samudraphala*. This decoction should be taken with 160 gm of ghee. It cures *visarpa* (erysipelas), burning sensation, fever, *sannipāta* thirst, poisoning and edema [53-54]

Chitraka ghrita

सचित्रकं [१४] धान्ययवान्यजाजीसौवर्चलं त्र्यष्णवेत्साम्लम् बिल्वात् फलं दाडिमयावश्कौ
 सपिष्पलीमूलमथापि चव्यम् ||५५|| पिष्टवाऽक्षेमात्राणि जलादकेन पक्त्वा घृतप्रस्थमथ प्रेयुज्ज्यात्
 अर्शासि गुल्मं श्वयथुं कृच्छ्रं निहन्ति वह्निं च करोति दीप्तम् ||५६||

sacitrakam [14] dhānyayavānyajājīsauvarcalam tryūṣaṇavētasāmlam| b0ilvāt phalam
 dāḍimayāvaśukau sapippalīmūlamathāpi cavyam||55|| piṣṭvā'kṣamātrāṇi jalāḍhakēna
 paktvā ghṛtaprasthamatha prayuñjyāt| arśāṁsi gulmaṁ śvayathum ca kṛcchram nihanti
 vahnim ca karōti dīptam||56|| sacitrakaM [14] dhAnyayavAnyajAjsauvarcalam
 tryUShaNvetasAmlam| bilvAt phalaM dADimayAvashUkau sapippallmUlamathApi
 cavyam||55|| piShTvA~akShamAtrANi jalADhakena paktvA ghRutaprasthamatha
 prayu~jjyAt| arshAMsi gulmaM shvayathuM ca kRucchraM nihanti vahniM ca karoti
 diptam||56||

Make paste of 10 gm each of *chitraka*, coriander, ajawan, cumin, *sauvarchala*-salt, *trikatu*, *amlavetasa*, *bilva*, pomegranate, *yavakṣāra*, *pippalimula* and *chavya*; add to it 640 gm of ghee and 2.56 liter of water. Prepare *ghrita* as per *sneha pāka* method.

Oral administration of *chitraka* ghee cures edema/swelling even if it is difficult to cure as well as piles and *gulma* and stimulate the digestion and metabolism (*agni*). [55-56]

पिबेद्घृतं वाऽष्टगुणाम्बुसिद्धं सचित्रकक्षारमुदारवीर्यम् कल्याणकं वाऽपि सपञ्चगव्यं तिक्तं
 महद्वाऽप्यथ तिक्तकं वा ||५७||

pibēdghṛtam vā'ṣṭagunāmbusiddham sacitrakakṣāramudāravīryam| kalyāṇakam vā'pi
 sapañcagavyam tiktam mahadvā'pyatha tiktakam vā||57|| pibedghRutaM
 vA~aShTaguNAmbusiddhaM sacitrakakShAramudAravIryam| kalyANakaM vA~api
 sapa~jcagavyaM tiktam mahadvA~apyatha tiktakam vA||57||

Prepare a *ghrita* with eight times of water with paste of *chitraka* and *yavakshara*. It has great potency. The patient may also take the *kalyānaka* *ghrita* or *panchagavya* *ghrita* or *mahātikta* *ghrita* or *tikta* *ghrita* [57]

क्षीरं घटे चित्रककल्कलिप्ते दृद्यागतं साधु विमथ्य तेन। तज्जं घृतं चित्रकमूलगर्भं तक्रेण सिद्धं श्वयथृष्णमन्यम्॥५८॥ अर्शोऽतिसारानिलगुल्ममेहांश्चैतन्निहन्त्यग्निबलप्रद [१५] च। तक्रेण चाद्यात् सघृतेन तेन भोज्यानि सिद्धामथवा यवागूम्॥५९॥ इति चित्रकघृतम्

kṣīram ghaṭē citrakakalkaliptē dadhyāgataṁ sādu vimathyā tēna| tajjaṁ ghṛtam
citrakamūlagarbhāṁ takrēṇa siddham śvayathughnamagryam||58||
arśo'tisārānilagulmamēhāṁścaitannihantyagnibalapradam [15] ca| takrēṇa cādyāt
saghṛtēna tēna bhōjyāni siddhāmathavā yavāgūm||59|| iti citrakaghṛtam kShlraM ghaTe
citrakakalkalipte dadhyAgataM sAdhu vimathyā tena| tajjaM ghRutaM
citrakamUlagarbhaM takreNa siddhaM shvayathughnamagryam||58||
arsho~atisArAnilagulmamehAMshcaitannihantyagnibalapradam [15] ca| takreNa cAdyAt
saghRutena tena bhojyAni siddhAmathavA yavAgUm||59|| iti citrakaghRutam

Put milk in a pot coated with paste of *chitraka* and curdle it. Churn this curd well to get butter which is heated to ghee. Add to the ghee all the buttermilk (which contains mixed *chitraka* also) from the pot and prepare the medicated *ghrita*. It is best to cure edema. It also provides relief in piles, diarrhea, *vata-gulma*, polyuria and stimulates digestion and metabolism (*agni*).

During the treatment the diet should be taken with buttermilk prepared as above with *chitraka* along with ghee prepared from the above butter or gruels prepared with this butter milk and ghee. Thus *chitraka ghrita* is described [58-59]

Yavagu preparations

जीवन्त्यजाजीशटिप्ष्कराहृवैः सकारवीचित्रकबिल्वमध्यैः। सयावशूकैर्बदरप्रमाणौर्वक्षाम्लयक्ता
घृततैलभृष्टा॥६०॥ अर्शोऽतिसारानिलगुल्मशोफह्वद्रोगमन्दाग्निहितो यवागृः। या पञ्चकोलैर्विधिनैव [१६]
तेन सिद्धा भवेत् सा च समा तयैव॥६१॥

jīvantyajājīśatipṣkarāhṛvaiḥ sakāravīcitrakabilvamadhyaiḥ|
sayāvaśūkairbadarapramāṇairvṛkṣāmlayuktā ghṛtatailabhr̥ṣṭā||60||
arśo'tisārānilagulmaśōphahṛdrōgamandāgnihitā yavāgūḥ| yā pañcakōlairvidhinaiva [16]
tēna siddhā bhavēt sā ca samā tayaiva||61|| jīvantyajAjlshaTipuShkarAhvaiH
sakAravlcitrakabilvamadhyaiH| sayAvashUkairbadarapramANairvRukShAmlayuktA
ghRutatailabhRuShTA||60|| arsho~atisArAnilagulmashophahRudrogamandAgnihita
yavAgUH| yA pa~jcakolairvidhinaiva [16] tena siddhA bhavet sA ca samA tayaiva||61||

Take 5 gm each of *javanti*, cumin, *satī*, *pushkarmula*, *karvi* (celery), *chitraka*, *bilva* and *yavakashara*, make a medicated gruel (*yavāgu*) and then fry it in ghee and oil. This gruel taken by adding *vrikshamla* cures piles, diarrhea, *vata gulma*, edema, heart disease and low digestion.

The medicated *yavāgu* (gruel) similarly prepared with *panchakola* also gives the same relief as mentioned above (60-61).

Pathya (wholesome food) for *shotha*

कलत्थयषश्च सपिप्पलीको मौद्गश्च सत्र्यूषणयावशूकः। रसस्तथा विष्किरजाङ्गलानां
संकूर्मगोधाशिखिशल्लकानाम्॥६२॥ सुवर्चला गृञ्जनकं पटोलं सवायसीमूलकवेनिम्बम्। शाकार्थिनां
शाकमिति प्रशस्तं भोज्ये पुराणश्च यवः सशालिः॥६३॥

kulatthayūshaśca sapippalīkō maudgaśca satryūṣanayāvaśūkah| rasastathā
viśkirajāṅgalānāṁ sakūrmagōdhāśikhiśallakānām||62|| suvarcalā gr̄ñjanakam paṭolam
savāyasīmūlakavētranimbam| śākārthināṁ śākamiti praśastarāṁ bhōjyē purāṇaśca yavaḥ
saśāliḥ||63|| kulatthayUShashca sapippallko maudgashca satryUShaNayAvashUkaH|
rasastathA viShkirajA~ggalAnAM sakUrmagodhAshikhishallakAnAm||62|| suvarcalA
gRu~jjanakaM paTolaM savAyasImUlakavetranimbam| shAkArthinAM shAkamiti
prashastaM bhojye purANashca yavaH sashAliH||63||

Followings diet articles are wholesome for the patient of edema/swelling:

- Soup of *kulattha* mixed with long piper
- Soup of *munga* mixed with *trikatu* and *yavakshara*
- Meat soup of gallinaceous and wild creatures,
- Meat soup of tortoise, iguana, peacock and pangolin,
- Vegetables such as heliotrope, turnip, *makoya* (wild snake gourd), radish, *vetra*, *neem* and *patola*
- Old *shali rice* and old barley [62-63]

External applications

आभ्यन्तरं भेषजमुक्तमेतद्बहिर्हितं यच्छृणु तद्यथावत्। स्नेहान् प्रदेहान् परिषेचनानि स्वेदांश्च
वातप्रबलस्य कुर्यात्॥६४॥

ābhyantraram bhēṣajamuktamētadbarhirhitam yacchṛṇu tadyathāvat| snēhān pradēhān
pariṣēcanāni svēdāṁśca vātaprabalasya kuryāt||64|| AbhyantaraM
bheShajamuktametadbarhirhitam yacchRuNu tadyathAvat| snehAn pradehAn
pariShecanAni svedAMshca vAtaprabalasya kuryAt||64||

Thus internal preparations have been described. Now external preparations beneficial for the patient of swelling will be described. *Snehana*, *swedana*, smearing with pastes and effusions should be done in a patient having dominance of *vata* swelling [64]

Shaileyadi taila

शैलेयकष्ठागुरुदारुकौन्तीत्वकपदम्कैलाम्बुपलाशमुस्तैः।
प्रियङ्गुथौणेयकहेममांसीतालीशपत्रप्लवपत्रधान्यैः॥६५॥ श्रीवेष्टकद्यामकपिप्पलीभिः स्पृक्कानखैश्चैव
यथोपलाभम्। वातान्वितेऽश्यङ्गमुशन्ति तैलं सिद्धं सुपिष्टैरपि च प्रदेहम्॥६६॥

sailēyakuṣṭhāgurudārukauntītvakpadmakailāmbupalāśamustaiḥ|
priyaṅguthauṇeyakahēmamāṁśitālīśapatraplavapatradhānyaiḥ||65||
śrīvēṣṭakadhyāmakapippalībhiḥ sprkkānakhaiścaiva yathōpalābham|
vātānvitēbhyaṅgamuśanti tailam siddham supiṣṭairapi ca pradēham||66||

shaileyakuShThAgurudArukauntIvakpadmakailAmbupalAshamustaiH|
 priya~gguthauNeyakahemamAMsItAllshapatraplavapatradhAnyaiH||65||
 shrIveShTakadhyAmakapippallbhiH spRukkAnakhaishcaiva yathopalAbham|
 vAtAnvite_{abhy}ggamushanti tailaM siddhaM supiShTairapi ca pradeham||66||

Take *kuṣṭha*, *aguru*, *devadāru*, *kaunti*, cinnamon, *padmaka*, cardamom, *sugandhabālā*, *palāśa*, *mustaka*, *priyangu*, *thauneyaka*, *nāgakeśara*, *jatāmāmsi*, *tālisapatra*, *plava*, *tejapatra*, coriander, *sriveshtaka*, *dhyāmaka*, piper longum, *sprikkā* and *nakha*. Make paste of all or as much as drugs available and prepare medicated oil from it. In *vata* edema, do massage with this oil. Alternatively make paste of the entire drugs and apply on the body of the patient as smear [65-66]

Medicated water for bath

जलैश्च वासार्ककरञ्जशिगुकाशमर्यपत्रार्जकजैश्च सिद्धैः। स्विन्नो मृदूष्णौ रवितप्ततोयैः स्नातश्च
 गन्धैरनुलेपनीयः॥६७॥

jalaiśca vāsārkkakarañjaśigrukāśmaryapatrārjakajaiśca siddhaiḥ| svinnō mṛdūṣṇai
 ravitaptatoyaiḥ snātaśca gandhairanulēpanīyah||67|| jalaishca
 vAsArkakara~jjashigrukAshmaryapatrArjakajaishca [17] siddhaiḥ| svinnō mRudUShNai
 [18] ravitaptatoyaiḥ snAtashca gandhairanulepanlyah||67||

Add leaves of *vāsā*, *arka*, *karanja*, *sigru*, *kashmarya* and holy basil in hot water and take sudation with this tolerably hot water. Then the patient should take bath with water heated in sun and apply aromatics on the body [67]

External application in *pitta* dominance

सवेतसा: क्षीरवतां द्रुमाणां त्वचः समञ्जिष्ठलतामृणालाः। सचन्दनाः पद्मकवालकौ च पैते प्रदेहस्तु
 सतैलपाकः॥६८॥ आक्तस्य तेनाम्बु रविप्रतप्तं सचन्दनं साभयपद्मकं च। स्नाने हितं क्षीरवतां कषायः
 क्षीरोदकं चन्दनलेपनं च॥६९॥

savētasāḥ kṣīrvatāṁ drumāṇāṁ tvacāḥ samañjiṣṭhalatāmṛṇālāḥ| sacandanāḥ
 padmakavālakau ca paittē pradēhastu satailapākah||68|| āktasya tēnāmbu
 raviprataptāṁ sacandanāṁ sābhaya padmakāṁ ca| snānē hitāṁ kṣīrvatāṁ kaṣāyah
 kṣīrōdakāṁ candanalēpanāṁ ca||69|| savetasAH kShlravatAM drumANAM tvacaH
 sama~jjiShThalatAmRuNAIAH| sacandanAH padmakavAlakau ca paitte pradehastu
 satailapAkaH||68|| Aktasya tenAmbu raviprataptaM sacandanaM sAbhayapadmakaM
 ca| snAne hitaM kShlravatAM kaShAyaH kShrodakaM candanalepanaM ca||69||

Prepare medicated oil from *vetasa*, *manjiṣṭhā*, *mṛināla*, sandal, *padmaka* and *khasha* and bark of latex-exuding plants. Apply this oil on the body to relieve *pitta* swelling. Thereafter, bathing with medicated water prepared with sandal, *khaśa* and *padmaka* and heated by sun rays or with water prepared with latex-exuding plants or water mixed with milk is beneficial. Smearing with paste of sandalwood is also beneficial [68-69]

External application in *kapha* dominance

कफे तु कृष्णासिकतापुराणपिण्याकशिग्रुत्वगुमाप्रलेपः। कुलत्थशुण्ठीजलमूत्रसेकश्चण्डागुरुभ्यामनुलेपनं च॥७०॥

kaphē tu kṛṣṇāsikatāpurāṇapīṇyākaśigrutvagumāpralēpaḥ|
kulatthaśuṇṭhījalamūtrasēkaścaṇḍāgurubhyāmanulēpanaṁ ca||70|| kaphe tu
kRuShNAsikatApurANapiNyAkashigrutvagumApralepaH|
kulatthashuNThjalamUtrasekashcaNDAgurubhyAmanulepanaM ca||70||

In *kapha* dominant edema, application of paste of long pepper, sand, old oil-cake, bark of drum-stick and linseed is advised. Effusion with decoction of *kulattha* (hoarse gram), dry ginger and cow's urine followed by anointing of the body with paste of sandal and *aguru* is also beneficial (70).

External application in burning sensation

बिभीतकानां फलमध्यलेपः सर्वेषु दाहार्तिहरः प्रदिष्टः। यष्ट्याहवमुस्तैः सकपित्थपत्रैः
सचन्दनैस्तत्पिडकासु लेपः॥७१॥

bibhītakānāṁ phalamadhyalēpaḥ sarvēsu dāhārtiharaḥ pradiṣṭaḥ| yaṣṭyāhvamustaiḥ
sakapitthapatraiḥ sacandanaistatpiḍakāsu lēpaḥ||71|| bibhītakAnAM phalamadhyalepaH
sarveShu dAhArtiharaH pradiShTaH| yaShTyAhvamustaiH sakapitthapatraiH
sacandanaistatpiDakAsu lepaH||71||

In all types of swelling, smearing with paste of fruit of *vibhitaka* is recommended to cure burning sensation and discomfort. The topical application of paste of leaves of *kapittha* (wood apple), sandal, liquorices and *mustaka* provides relief in papules [71]

रास्नावृषार्कत्रिफलाविडङ्गं शिग्रुत्वचो मूषिकपर्णिका च। निम्बार्जकौ व्याघ्रनखः सटुर्वा सवर्चला
तिक्तकरोहिणी च॥७२॥ सकाकमाची बृहती सकुष्ठा पुनर्नवा चित्रकनागरे च। उन्मदनं शौफिषु मूत्रपिष्टं
शस्तस्तथा मूलकतोयसेकः॥७३॥

rāsnāvṛṣārkartriphalāviḍaṅgaṁ śigrutvacō mūṣikaparnikā ca| nimbārjakau
vyāghranakhaḥ sadūrvā suvarcalā tiktakarohiṇī ca||72|| sakākamācī bṛhatī sakuṣṭhā
punarnavā citrakanāgarē ca| unmardanāṁ śōphiṣu mūtrapiṣṭāṁ śastastathā
mūlakatoyasēkah||73|| rAsnAvRuShArkartriphalAviDa~ggam shigrutvaco
mUShikaparNikA ca| nimbArjakau vyAghranakhaH sadUrvA suvarcalA tiktakarohiNI
ca||72|| sakAkamAcl bRuhatl sakuShThA punarnavA citrakanAgare ca| unmardanaM
shophiShu mUtrapiShTaM shastastathA mUlakatoyasekaH||73||

Take *rāsnā*, *vāsā*, *arka*, *triphalā*, *vidanga*, bark of *sigru*, *mushakaparni*, *neem*, holy basin, nails of *vyāghra* (shell), *durvā*, sunflower, *katukā*, *kākamāchi*, *brihati*, *kuṣṭha*, *punarnavā*, *chitraka* and dry ginger and make paste with cow's urine. *Unmardana* type of massage with it is beneficial for swelling. Also effusion done with water boiled with above drugs is beneficial [72-73]

Various types of local swellings

शोफास्तु गात्रावयवाश्रिता ये ते स्थानदूष्याकृतिनामभेदात्। अनेकसङ्ख्याः कतिचिच्च तेषां निर्दर्शनार्थं गदतो निंबोधा॥७४॥

śōphāstu gātrāvayavāśritā yē tē sthānadūṣyākṛtināmabhēdāt| anēkasaṅkhyāḥ katicicca
tēśāṁ nidaśanārthaṁ gadatō nibōdha||74|| shophAstu gAtrAvayavAshritA ye te
sthAnadUShyAkRutinAmabhedAt| anekasa~gkhyAH [19] katicicca teShAM
nidarshanArthaM gadato nibodha||74||

The swelling occurring in one limb or organ is of many types owing to their different classifications based on involved site, *dushya*, shape and name. Listen to the descriptions of some of them being given as illustration [74]

Shira Shopha (cellulitis of head) and *Salūka* (quinsy)

दोषास्त्रयः स्वैः कपिता निदानैः कर्वन्ति शोफं शिरसः सुघोरम्। अन्तर्गले घुर्धुरिकान्वितं च
शालूकमुच्छ्वासोनिरोधकारि॥७५॥

dōśāstrayah svaiH kupyati nidānaiH kurvanti śōpham śirasah sughoram| antargale
ghurghurikānvitam ca śālūkamucchvāsanirōdhakāri||75|| doShAstrayaH svaiH kupyati
nidAnaiH kurvanti shophaM shirasaH sughoram| antargale ghurghurikAnvitam ca
shAIUkamucchvAsanirodhakAri||75||

All the three dosha, provoked by indulging in their etiological factors produce severe inflammation of head. When it affects inside of the throat, it produces *sālūka*, which is accompanied with stertorous breathing and obstruction to expiration [75]

Bidalika (Ludwig's angina)

गलस्य सन्धौ चिबुके गले च सदाहरागः २वसनासु चोगः। शोफो भृशार्तिस्तु बिडालिका स्याद्धन्याद्गले
चेद्वलयीकृता सा॥७६॥

galasya sandhau cibukē galē ca sadāharāgah śvasanāsu cōgrah| śōphō bhṛśārtistu
bidālikā syāddhanyādgale cēdvalayīkṛtā sā||76|| galasya sandhau cibuke gale ca
sadAharAgaH shvasanAsu [20] cograh| shopho bhRushArtistu biDALikA [21]
syAddhanyAdgale cedvalayIkRutA sA||76||

Acute swelling at the junction of throat behind the chin i.e. in trachea with redness and burning sensation in throat and causes obstruction to breathing with very much discomfort is known as *bidālikā*. It kills the patient if folds are formed in throat [76]

Talu-vidradhi (palatal abscess), *upajihvika* (superficial glossitis) and *adhijihvikā* (sub-lingual glossitis)

स्यात्तालुविद्रध्यपि दाहरागपाकान्वितस्तालुनि सा त्रिदोषात्। जिह्वोपरिष्टादुपजिह्विका स्यात्
कफाद्धस्तादधिजिह्विका च॥७७॥

syāttāluvidradhyapi dāharāgapākānvitastāluni sā tridōśat| jihvōparistādupajihvikā syāt kaphādadadhastādadhijihvikā ca||77|| syAttAluvidradhyapi dAharAgapAkAnvitastAluni sA tridoShAt| jihvopariShTAdupajihvikA syAt kaphAdadhastAdadhijihvikA ca||77||

Abscess in palate caused by *tridosha* with burning sensation, redness and pus formation is known as *tālu-vidradhi*.

Swelling due to *kapha* occurring on the upper part of tongue is called *upajihvikā* (acute superficial glossitis) and which occurs sublingual part is called *adhijihvikā* (sub lingual glossitis) [77]

Upakusha (gingivitis) and danta-vidradhi (dental abscess)

यो दन्तमांसेषु तु रक्तपित्तात् पाको भवेत् सोपकुशः प्रदिष्टः। स्याद्दन्तविद्रूप्यपि दन्तमांसे शोफः कफाच्छोणितसञ्चयोत्थः॥७८॥

yō dantamāṁsēṣu tu raktapittāt pākō bhavēt sōpakuśah pradiṣṭah|
syāddantavidradhyapi dantamāṁsē śōphah kaphācchōnitasañcayōtthah||78|| yo
dantamAMseShu tu raktapittAt pAko bhavet sopakushaH pradiShTaH|
syAddantavidradhyapi dantamAMse shophah kaphAcchoNitasa~jcayotthaH||78||

Provoked *rakta* and *pitta* causes suppuration of the gums and it is called *upakusha*. Accumulation of *kapha* and *rakta* produces elevated swelling in gums and it is known as *danta-vidradhi* [78]

Galaganda (goiter),gandamala (cervical adenitis) and its management

गलस्य पाश्वे गलगण्ड एकः स्याद्गण्डमाला बहुभिस्तु गण्डैः। साध्याः स्मृताः पीनसपाश्वरशूलकासज्वरच्छर्दियुतास्त्वसाध्याः॥७९॥

galasya pārśvē galaganda ēkaḥ syādgandamālā bahubhistu gaṇḍaiḥ| sādhyāḥ smṛtāḥ pīnasapārśvaśūlakāsajvaracchardiyutastvasādhyāḥ||79|| galasya pArshve galagaNDa ekaH syAdgaNDamAIA bahubhistu gaNDaiH| sAdhyAH smRutAH plnasapArshvashUlakAsajvaracchardiyutAstvasAdhyAH||79||

Single glandular swelling on the (middle) of neck is called *galaganda* (goiter) but if there are many nodular swellings making a chain like appearance, is known as *gandamālā*. Generally they are curable but if accompanied with coryza, pain in side of the chest, cough, fever and vomiting then they are incurable [79]

तेषां सिराकायशिरोविरेका धूमः पुराणस्य घृतस्य पानम्। स्याल्लङ्घनं वक्त्रभवेषु चापि प्रघर्षणं स्यात् कवलग्रहश्च॥८०॥

tēṣāṁ sirākāyaśirōvirekā dhūmaḥ purāṇasya ghṛtasya pānam| syāllaṅghanam
vaktrabhaveṣu cāpi pragharṣaṇam syāt kavalagrahaśca||80|| teShAM
sirAkAyashirovirekA dhUmaH purANasya ghRutasya pAnam| syAlla~gghanaM
vaktrabhaveShu cApi pragharShaNaM syAt kavalagrahashca||80||

In all the above mentioned conditions blood-letting, purgation, *nasya*, *dhuma* (medicated smoking therapy) and intake of old ghee is beneficial.

For the conditions specially affecting mouth, the line of treatment is *langhana* and rubbing with medicated powders and mouth washes (*kavala*) are beneficial [80]

Granthi (nodule) and its management

अङ्गैकदेशेष्वनिलादिभिः स्यात् स्वरूपधारी स्फुरणः सिराभिः। ग्रन्थिर्महान्मांसभवस्त्वनर्तिर्मदोभवः स्निग्धतमश्चलश्च॥८१॥

aṅgaikadēśēshvanilādibhiḥ syāt svarūpadhārī sphuraṇah sirābhiḥ।
granthirmahānmāṁsabhadvastvanartirmēdōbhavaḥ snigdhatamaścalāśca॥८१॥
a~ggaikadesheShvanilAdibhiH syAt svarUpadhArl sphuraNaH sirAbhiH|
granthirmahAnmAMsabhadvastvanartirmedobhavaH snigdhatamashcalashca॥८१॥

Swelling occurring in one organ or region due to *vata* or other *dosha* may be diagnosed on the basis of their characteristic symptoms. The swelling occurring in vessels are pulsating in nature. The nodular swelling occurring in muscles is large in size. Swelling of the adipose tissues is excessively unctuous and movable [81]

Surgical management of granthi

संशोधिते स्वेदितमश्मकाष्ठैः साङ्गुष्ठदण्डैर्विलयेदपक्वम्। विपाट्य चोद्धृत्य भिषक् सकोशं शस्त्रेण दग्ध्वा व्रणवच्चिकित्सेत्॥८२॥

samśōdhite svēditamaśmakāṣṭhaiḥ sāṅguṣṭhadanḍairvilayēdapakvam| vipāṭya cōddhṛtya bhiṣak sakōśam ūastrēṇa dagdhvā vraṇavaccikitsēt||82|| saMshodhite sveditamashmakAShThaiH sA~gguShThadaNDairvilayedapakvam| vipATya coddhRutyA bhiShak sakosham shastreNa dagdhvA vraNavaccikitset||82||

If the tumor is non-suppurative then after purification therapy, local sudation of the swelling should be done. Then the physician should try to dissolve the swelling by rubbing with stone or wooden apparatus or with manipulation of thumb or of a rod. Then it should be cut open and take out the tumor with its capsule. Then it should be cauterized and treatment of regular wound should be adopted [82]

अदग्ध ईषत् परिशेषितश्च प्रयाति भूयोऽपि शनैर्विवृद्धिम्। तस्मादशेषः कशलैः समन्ताच्छेद्यो अवेदवीक्ष्य शरीरदेशान्॥८३॥ शेषे कृतै पाकवशेन शीर्योत्ततः क्षतोत्थः प्रसरैद्विसर्पः। उपद्रवं तं प्रविचार्य तज्जनस्तैर्भेषजैः पर्वतरैर्यथोक्तैः॥८४॥ निवारयेदादित एव यत्नादविधानवित् स्वस्वविधिं विधाय। ततः क्रमेणास्य यथाविधानं व्रणं व्रणजस्त्वरया चिकित्सेत्॥८५॥

adagdha ṫ̄sat pariśeṣitaśca prayāti bhūyō'pi śanairvivṛddhim| tasmādaśeṣah kuśalaiḥ samantācchēdyō bhavēdvikṣya śarīradēśān||83|| śeṣe kṛtē pākavaśēna śīryāttataḥ kṣatōtthah prasarēdvisarpaḥ| upadravam tam pravicārya tajjñastairbhēṣajaiḥ [22] pūrVātarairyathōktaiḥ||84|| nivārayēdādita [23] ēva yatnādvidhānavit svasvavidhim vidhāya| tataḥ kramēṇāsyā yathāvidhānam vraṇam vraṇajñastvarayā cikitsēt||85|| adagdha IShat parisheShitashca prayAti bhUyo~api shanairvivRuddhim|

tasmAdasheShaH kushalaiH samantAcchedyo bhavedvIkShya sharIrareshAn||83||
sheShe kRute pAkavashena shlryAttataH kShatotthaH prasaredvisarpaH| upadravaM
taM pravicArya tajj~jastairbheShajaiH [22] pUrvatarairyathoktaiH||84|| nivArayedAdita
[23] eva yatnAdvidhAnavit svasvavidhiM vidhAya| tataH krameNAsya yathAvidhAnaM
vraNaM vraNaj~jastvarayA cikitset||85||

If the tumor is not properly cauterized or if some of its part is left out then it starts gradually increasing again. In that case it should be removed completely by opening from all sides by the skillful surgeon keeping in view the regional anatomy. If some portion is still left then it may suppurate and slough and may lead to complication of *visarpa* (erysipelas). The surgeon considering it as the severe complication first should try to treat it with great care by appropriate remedies described earlier. Therefore the wound specialist should quickly treat it in the prescribed manner following the appropriate line of treatment [83-85]

विवर्जयेत् कुक्ष्युदराश्रितं च तथा गले मर्मणि संश्रितं च। स्थूलः खरश्चापि भवेद्विवर्ज्यो यश्चापि
बालस्थविराबलानाम्॥८६॥

vivarjayēt kukṣyudarāśritam ca tathā galē marmaṇi saṁśritam ca| sthūlah kharaścāpi
bhavēdvivarjyō yaścāpi bālasthavirābalānām||86|| vivarjayet kukShyudarAshritaM ca
tathA gale marmaNi saMshritaM ca| sthUlaH kharashcApi bhavedvivarjyo yashcApi
bAlasthavirAbalAnAm||86||

The tumors occurring in flanks, abdomen, in the throat and in vital organs are incurable. Similarly tumors of big size and indurated which occurs in children, aged and weak are also incurable [86]

Differential diagnosis of *arbuda* (tumor)

ग्रन्थ्यर्बदानां च यतोऽविशेषः प्रदेशहेत्वाकृतिदोषदूष्यैः। ततश्चिकित्सेदभिषगर्बुदानि
विधानविद्यग्निथचिकित्सितेन॥८७॥

granthyarbudānām ca yato'viśeṣah pradēśahētvākṛtidōṣadūṣyaiḥ|
tataścikitsēdbhiṣagrabudāni vidhānavidgranthicikitsitēna||87|| granthyarbudAnAM ca
yato~avisheShaH pradeshahetuAkRutidoShadUShyaiH| tatashcikitsedbhiShagarbudAni
vidhAnavidgranthicikitsitenā||87||

There is no much difference in nodules and tumors with regards to site, causative factors, shape, *dosha* morbidity and *dushya* (susceptible tissues). Therefore, tumor specialist should treat the tumor on the line of nodules described above [87]

Alaji and *akshata* (whitlow)

ताम्रा सशूला पिडका भवेद्या सा चालजी नाम परिसुत्ताग्रा| शोफोऽक्षतश्चर्मनखान्तरे स्यान्मांसास्त्रदूषी
भृशशीघ्रपाकः॥८८॥

tāmrā saśūlā piḍakā bhavēdyā sā cālajī nāma parisutāgrā|
śōphō'kṣataścarmanakhāntarē syānmāṁsāsradūṣī bhṛśaśīghrapākah||88|| tAmrA

sashUIA [25] piDakA bhavedyA sA cAlajI nAma parisrutAgrA|
shopho~akShatashcarmanakhAntare [26] syAnmAMsAsradUShI
bhRushashlghrapAkaH||88||

Appearing of copper colored papules with acute pain from which pus oozes out is known as alaji. The severe inflammation occurring by vitiating flesh and blood in the skin adjoining nail which suppurates quickly is known as akṣata [88]

Vidarika (lymphadenitis) and its management

ज्वरान्विता वडक्षणकक्षजा या वर्तिनिरर्तिः कठिनायता च। विदारिका सा कफमारुताभ्यां तेषां
यथादोषमुपक्रमः स्यात्॥८९॥ विसावणं पिण्डिकयोपनाहः पक्वेषु चैव व्रणवच्चिकित्सा।

jvarānvitā vañkṣanakakṣajā yā vartirnirartih kañhināyatā ca| vidārikā sā
kaphamārūtābhyaṁ tēśām yathādōśamupakramah syāt||89|| visrāvaṇam
piṇḍikayōpanāhaḥ pakvēṣu caiva vraṇavaccikitsā| jvarAnvitA va~gkShaNakakShajA yA
vartirnirartiH kaThinAyatA ca| vidArikA sA kaphamArutAbhyAM teShAM
yathAdoShamupakramaH syAt||89|| visrAvaNaM piNDikayopanAhaH pakveShu caiva
vraNavaccikitsA|

Painless cylindrical and hard swelling in the groin or axillary region accompanied with fever is known as *vidārikā*. It occurs due to vitiation of *kapha* and *vata* and should be managed according to the treatment of these *dosha*, which include bloodletting, *pinda sweda*, *upanāha* and on suppuration it should be treated on the line of abscess [89]

Visphotaka (eruption)

विस्फोटका: सर्वशरीरगास्तु स्फोटा: [२७] सरागज्वरतर्षयुक्ताः॥९०॥

visphōṭakāḥ sarvaśarīragāstu sphōṭāḥ [27] sarāgajvaratarṣayuktāḥ॥९०॥

visphoTakAH sarvasharIragAstu sphoTAH [27] sarAgajvaratarShayuktAH॥90॥

Red colored eruptions occurring all over the body along with fever and thirst are known as *visphōṭaka* (90).

Kaksha (herpes zoster)

यज्ञोपवीतप्रतिमा: प्रभूता: पितानिलाभ्यां जनितास्तु कक्षा: [२८] |

याश्चापरा: स्युः पिङ्का: प्रकीर्णा: स्थूलाणुमध्या अपि पित्तजास्ताः॥९१॥

yajñōpavītpratimāḥ prabhūtāḥ pittānilābhyaṁ janitāstu kakṣāḥ [28] |

yāścāparāḥ syuḥ piḍakāḥ prakīrṇāḥ sthūlāṇumadhyā api pittajāstāḥ॥91॥

yaj~jopavItpratimAH prabhUtAH pittAnilAbhyAM janitAstu kakShAH [28] |

yAshcAparAH syuH piDakAH prakIrNAH sthUIANumadhyA api pittajAstAH||91||

Multiple eruptions occurring on the trunk due to *pitta* and *vata* where usually Hindu holy thread is worn, is known as *kakṣā*.

Other such types of eruptions (*pidikā*) whether big, medium or small are also due to *pitta* [91]

Romantika (measles)

क्षुद्रप्रमाणाः पिडकाः शरीरे सर्वाङ्गगाः सज्वरदाहतृष्णाः। कण्डूयुताः सारुचिसप्रसेका रोमान्तिकाः पित्तकफात् प्रदिष्टाः॥९२॥

kṣudrapramāṇāḥ piḍakāḥ śarīrē sarvāṅgagāḥ sajvaradāhatr̥ṣṇāḥ| kaṇḍūyutāḥ sārucisaprasēkā rōmāntikāḥ pittakaphāt pradiṣṭāḥ||92|| kShudrapramANAH piDakAH sharlre sarvA~ggagAH sajvaradAhatRuShNAH| kaNDUyutAH sArucisaprsekA romAntikAH pittakaphAt pradiShTAH||92||

Small sized eruption all over the body due to *pitta* and *kapha* along with fever, burning sensation, thirst, itching, anorexia and salivation are known as *romāntikā* (measles) [92]

Masurika (chickenpox) and its management

याः सर्वगात्रेषु मसूरमात्रा मसूरिकाः पित्तकफात् प्रदिष्टाः। वीसर्पशन्त्यै विहिता क्रिया या तां तेषु कुष्ठे च हितां विदृश्यात्॥९३॥

yāḥ sarvagātrēṣu masūramātrā masūrikāḥ pittakaphāt pradiṣṭāḥ| vīsarpaśāntyai vihitā kriyā yā tāṁ tēṣu kuṣṭhē ca hitāṁ vidadhyāt||93|| yAH sarvagAtreShu masUramAtrA masUrIkAH pittakaphAt pradiShTAH| vlsarpashAntyai vihitA kriyA yA tAM teShu [29] kuShThe ca hitAM vidadhyAt||93||

Eruptions similar to size and shape of lentil (*masura*) occurring all over the body due to *pitta* and *kapha* is known as *masurikā*; the treatment described for *visarpa* should is also adopted for it. For *visphotaka* etc., treatment described for *kuṣṭha* should be adopted [93]

Bradhma (hernia) and its management

ब्रद्जोऽनिलाद्यैर्वृषणे स्वलिङ्गैरन्त्रं निरेति प्रविशेन्महश्च। मूत्रेण पर्णं मूदु मेदसा चेत् स्निग्धं च विद्यात् कठिनं च शोथम्॥९४॥ विरेचनाभ्युग्निरुहलेपाः पक्वैषु चैव व्रणवच्चकित्सा। स्यान्मूत्रसेकः कफजं विपात्य विशोध्य सीव्येदव्रणवच्च पक्वम्॥९५॥

bradhno'nilādyairvṛṣaṇe svалиङ्गैरन्त्रं nirēti pravishenmuhuśca| mūtrēṇa pūrṇam
mrdu mēdasā cēt snigdham ca vidyāt kaṭhinam ca śōtham||94||
virēcanābhyaṅganirūhalēpāḥ pakvēṣu caiva vraṇavaccikitsāḥ syānmūtrasēkaḥ
kaphajam vipāṭya viśodhya sīvyēdvraṇavacca pakvam||95||
bradhno~anilAdyairvRuShaNe [30] svali~ggairantraM nireti pravishenmuhushca|
mUtreNa pUrNaM mRudu medasA cet snigdhaM ca vidyAt kaThinaM ca shotham||94||
virecanAbhya~gganirUhalepAH pakveShu caiva vraNavaccikitsA| syAnmUtrasekaH [31]
kaphajaM vipATya vishodhya slyvedvraNavacca pakvam||95||

Due to *vata* or other *dosha*, the intestine frequently enters into scrotum and comes out and this condition is known as bradhna (hernia).

If liquid (*mutra*) accumulates in scrotum then the swelling is soft (hydrocele).

If fat accumulates in scrotum it is hard and unctuous.

Its treatment is *virechana karma*, oil massage, *niruha basti* and smearing of paste. If it suppurates then treatment of ulcer (*vrana*) should be adopted.

If there is oozing of liquid (*mutra*) and the swelling is due to *kapha*, then it should be open up, cleaned and sutured as per line of treatment of ulcer [94-95]

Bhagandara (fistula-in-anus) and its management

क्रिम्यस्थिसूक्ष्मक्षणनव्यवायप्रवाहणान्युत्कटकाश्वपृष्ठेः | गुदस्य पार्श्वे पिडका भृशार्तिः पक्वप्रभिन्ना तु अगन्दरः स्यात् || १६ || विरेचनं चैषणपाटने च विशुद्धमार्गस्य च तैलदाहः | स्यात् क्षारसूत्रेण सुपाचितेन छिन्नस्य चास्य व्रणवच्चिकित्सा || १७ ||

krimyasthisūkṣmakṣaṇanavyavāyapravāhaṇānyutkāṭakāśvapṛṣṭhaiḥ | gudasya pārśvē
piḍakā bhṛśārtih pakvaprabhinnā tu bhagandarah syāt || 96 || virēcanāṁ caīṣaṇapāṭanāṁ
ca viśuddhamārgasya ca tailadāhah | syāt kṣārasūtrēṇa supācītēna chinnasya cāsyā
vraṇavaccikitsā || 97 ||

krimyasthisUkShmakShaNanavyavAyapravAhaNAnyutkaTakAshvapRuShThaiH [33] |
gudasya pArshve piDakA bhRushArtiH pakvaprabhinnA tu bhagandaraH syAt||96||
virecanam caiShaNapATanaM ca vishuddhamArgasya ca tailadAhaH| syAt
kShArasUtreNa supAcitena [34] chinnasya cAsya vraNavaccikitsA||97||

On the lateral side of anus, a very painful pustule (*pidika*) occurs which suppurates and opens up; it is known as *bhagandara* (fistula-in-anus). It is caused by infection (*krimi*), injury with pointed object like bone leading to minute erosion, excessive sex, straining at defecation and friction due to sitting on hard seat of a horse or moving object.

Its treatment is *virechana*, probing, cutting and after cleansing cauterization with hot oil. If surgery is contraindicated then *kshara-sutra* should be applied and during and after cutting the track, routine line of management of ulcer is adopted [96-97]

Shlipada (elephantiasis) and its management

जङ्घासु पिण्डीप्रपदोपरिष्टात् [३५] स्याच्छ्लीपदं मांसकफास्तोषात् | सिराकफध्नश्च विधिः
समग्रस्त्रेष्यते सर्षपलेपनं च || १८ ||

jaṅghāsu piṇḍīprapadōpariṣṭāt [35] syācchlīpadam māṁsaṅkapahāśradōśat |
sirākaphaghnaśca vidhiḥ samagrastatrēṣyatē sarṣapalēpanam ca || 98 || ja~gghAsu
piNDIprapadopariShTAt [35] syAcchllpadaM mAMsakaphAsradoShAt |
sirAkaphaghnaśca vidhiH samagrastatreShyate sarShapalepanaM ca || 98 ||

The provoked *kapha* and *rakta* by involving flesh causes edema which begins from the upper part of the foot and spreads up to calf-muscle or shank; it is known as *shlipada*

(elephantiasis). Its treatment is vene-section and local application of paste of mustard-seed as well as all other anti-*kapha* treatment [98]

Jalakagardabha and its management

मन्दास्तु पित्तप्रबला: प्रदुष्टा दोषाः सुतीवं तनरक्तपाकम् कर्वन्ति शोथं ज्वरतर्षयुक्तं विसर्पणं जालकगर्दभाख्यम्॥९९॥ विलङ्घनं रक्तविमौक्षणं च विरुक्षेणं कायविशोधनं च। धात्रीप्रयोगात् शिशिरान् प्रदेहान् कुर्यात् सदा जालकगर्दभस्य॥१००॥

mandāstu pittaprabalāḥ praduṣṭā dōṣāḥ sutīvraṁ tanuraktapākam| kurvanti śōtham
jvaratarṣayuktāṁ visarpaṇāṁ jālakagardabhākhyam||99|| vilaṅghanāṁ
raktavimōkṣaṇāṁ ca virūkṣaṇāṁ kāyaviśōdhanāṁ ca| dhātrīprayōgāñ śiśirān pradēhān
kuryāt sadā jālakagardabhasya||100|| mandAstu pittaprabalaH praduShTA doShAH
sutlvraM tanuraktapAkam| kurvanti shothaM jvaratarShayuktaM visarpaNaM
jAlakagardabhAkhyam||99|| vila~ghhanaM raktavimokShaNaM ca virUkShaNaM
kAyavishodhanaM ca| dhAtrIprayogA~j shishirAn pradehAn kuryAt sadA
jAlakagardabhasya||100||

Mildly provoked *dosha* with dominance of *pitta* causes very acute inflammation which slightly bleeds and suppurates, has a tendency of quick spreading and is accompanied by fever and thirst is known as *jalakagardabha*.

Its treatment is *langhana* (lightening therapy), blood-letting, un-unctuous therapy, *virechana*, use of *amalaki* and application of paste of drugs having cold potency [99-100]

एवंविधांश्चाप्यपरान् परीक्ष्य शोथप्रकाराननिलादिलिङ्गैः। शान्तिं
नयेद्दोषहरैर्यथास्वमालेपनच्छेदनभेददाहैः॥१०१॥

ēvaṁvidhāṁścāpyaparān parīkṣya śōthaprakārānanilādiliṅgaiḥ। śāntim
nayēddōṣaharairyathāsvamālēpanacchēdanabhēdadāhaiḥ॥101॥
evaMvidhAMshcApyaparAn parIkShya shothaprakArAnanilAdili~ggaiH| shAntiM
nayeddoShaharairyathAsvamAlepanacchedanabhedadAhaiH॥101॥

Other types of inflammatory swellings may be diagnosed on the basis of the characteristic symptoms of the involved *vata* and other *dosha*. It may also be managed by prescribing the treatment of involved *dosha* as well as by application of paste, incision and excision [101]

General guidelines of management

प्रायोऽभिघातादनिलः सरक्तः शोथं सरागं प्रकरोति तत्र। वीसर्पनुन्मारुतरक्तनुच्च कार्यं विषद्धं विषजे च
कर्म॥१०२॥

prāyō’bhīghātādanilah saraktaḥ śōtham sarāgam prakarōti tatra|
vīsarpanunmārutaraktanucca kāryam viṣaghnam viṣajē ca karma||102||
prAyo~abhighAtAdanilaH saraktaH shothaM sarAgaM prakaroti tatra|
vlsarpanunmArutaraktanucca kAryaM viShaghnaM viShaje ca karma||102||

Generally external trauma causes reddish swelling due to provocation of *vata* and *rakta*. It should be treated with drugs used for the treatment of *visarpa* and provoked *vata* and *rakta*.

If the swelling is caused by poisonous substances then it should be treated with anti-poison measures [102]

Summary

तत्र श्लोकः-

त्रिविधस्य दोषभेदात् सर्वार्धवयवगात्रभेदाच्च। श्वयथोर्द्विविधस्य तथा लिङ्गानि चिकित्सितं
चोक्तम्॥१०३॥

tatra ślōkaḥ-

trividhasya dōṣabhēdāt sarvārdhāvayavagātrabhēdācca| śvayathōrvividhasya tathā
liṅgāni cikitsitam cōktam||103|| tatra shlokaH-

trividhasya doShabhedAt sarvArdhAvayavagAtrabhedAcca| shvayathordvividhasya [36]
tathA li~ggAni cikitsitaM coktam||103||

Re-capitulatory verses-

Three types of swelling as per involvement of dosha; classification of swelling according to involvement whole or half body or one part; exogenous and endogenous swelling; their symptoms and treatment have been described [103]

इत्यग्निवेशकृते तन्त्रेऽप्राप्ते दृढबलसम्पूरिते चिकित्सास्थाने श्वयथुचिकित्सितं नाम
द्वादशोऽध्यायः॥१२॥

ityagnivēśakṛtē tantrē'prāptē dṛḍhabalasampūritē cikitsāsthānē śvayathucikitsitam nāma
dvādaśo'adhyāyah॥12॥

ityagniveshakRute tanre~aprApte dRuDhabalasampUrIte cikitsAsthAne
shvayathucikitsitaM nAma dvAdasho~adhyAyaH॥12॥

Thus 12th chapter named Shvayathu Chikitsa in Chikitsa Sthana of treatise compiled by Agnivesha, revised by Charaka and unavailable part restored by Dridhabala is completed (12).

Tattva Vimarsha (Fundamental Principles)

- *Shotha* is caused by dietary causes like excessive use of *kshara* (alkali) or food articles having sour, sharply acting, hot and heavy properties by an emaciated or weak person due to excessive *shodhana*, fasting or disease; excessive intake of curd, raw food articles, soil, leafy vegetables, mutually contradictory food articles (*virodhī*), spoiled or mixed with toxic substance (such as pesticide), or a person suffering from piles, having sedentary life style, nonperforming of *shodhana*

therapy even if indicated, injury to vital organs (*marma*), abnormal delivery, due to improper treatment and as complication of improper purification treatment.

- Exogenous causes include trauma or injuries of various types and have acute pathogenesis.
- The pathogenesis of *nija shotha* includes obstruction of morbid vāta by vitiated *kapha*, *rakta* and *pitta* at the site of peripheral superficial vessels. This vitiated *vata* (due to obstruction) spreads to the various places causing swelling as its cardinal symptom.
- Rise in temperature, burning sensation as if burnt by fire and dilation of the vessels are the prodromal symptoms of swelling.
- All types of swelling are produced by involvement of all the three *dosha* but they are named based on the predominance of that particular *dosha*. The line of treatment is also according to the dominant *dosha*.
- The swelling in a patient who is neither emaciated nor weak; that involved single *dosha* or is of recent origin is easily curable.
- If swelling is associated with *ama* it should be managed first by prescribing lightening therapy (*langhana*) and digestive drugs. Only after that *shodhana* therapy should be undertaken according to dominant *dosha*. General lines of treatment of *doshaja* swelling are as follows:
 - If it involves head then *shiro-virechana* is prescribed;
 - If it involves lower parts of the body then *virechana* (therapeutic purgation) is prescribed;
 - If it involves upper parts of the body then *vamana* (therapeutic emesis) is prescribed;
 - If it is caused by unctuous then *rukshana* (drying) therapy is done;
 - If it is caused by un-uncuous (*ruksha*) then unctuous (*snehana*) therapy is done;
 - If *vata* swelling is associated with constipation then it should be treated with *niruha basti*;
 - If it is caused by *vata-pitta* then it should be treated with ghee prepared with bitter drugs;
 - If the patient is suffering from associated symptoms such as fainting, pain, burning sensation and thirst then it should be treated with intake of milk;
 - If the patient is suffering from swelling where *shodhana* is required then milk mixed with cow's urine should be given;
 - If the patient is suffering from *kapha* swelling then *kshara* or pungent and hot articles mixed in cow's urine or buttermilk or *asava* are given.
 - Generally external trauma causes reddish swelling due to provocation of *vata* and *rakta*. It should be treated with drugs used for the treatment of *visarpa* and provoked *vata* and *rakta*. If the swelling is caused by poisonous substances then it should be treated with anti-poison measures (102).

Vidhi Vimarsha (Applied Inferences)

Derivation of term

The word *Shvayathu* is derived from root *Tuoshchi-Gati-Vriddhyoh*. *Tuo* is converted to *Shvi* indicating to increase (*Vriddhi*) and by adding *Athuc Pratyaya* the word *Shvayathu* is derived which literally means increased (3).

Pathogenesis

In pathogenesis of *shotha* there is involvement of superficial veins (*Bahya shira*). Involvement of circulatory or lymphatic system is must in producing the *shotha*.

Types of *shotha*

Vata shotha is shifting in nature, pitting on pressure and increases in the day time and may vanish without visible cause. Further *vata* causes edema of the lower part of the body i. e feet and legs. All these characteristics of *vata shotha* are indicative cardiac edema.

In day time due to various activities and fatigue *vata* gets increased leading to increase in the edema. From modern point of view, cardiac edema increases in the evening which is *vata kala* due to the day activities. *Vata shotha* is pitting on pressure but on removing the pressure it immediately takes its original shape.

Pitta sopha begins from middle parts of the body and then spreads to the other parts and has yellow-reddish color¹¹⁴. Yellowish coloration indicates involvement of liver. Inflammatory swelling is related to *pittaja shotha* .

Kapha Shotha slightly pits on pressure but takes long time to attain its original position after removing the pressure and increases at night. It develops slowly and also takes long time to subside. *Kapha shotha* occurs in upper part of the body and the treatment of edema occurring on the upper part is *vamana* i.e. of *kapha*. On this basis it can be said that which mainly includes face. Renal edema occurs on the face in the morning (noticed on awakening though increased in the night). Other important sign is it is hard and the serous discharge comes out on scratching the skin ¹¹⁵. This indicates that hard non-pitting edema of elephantiasis may also be included under it. Other symptom mentioned for *kaphaja shotha* that the patient like warm touch indicates towards edema found in hypothyroidism (14).

¹¹⁴ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 33. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

¹¹⁵ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 35-36. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

Complications

Complications of *shotha* are vomiting, dyspnea, anorexia, thirst, fever, loose motions and weakness (Cha. Sa. Sutra Sthana chapter 18/18]. Sushruta mentions two additional complications viz. cough and hiccups.¹¹⁶(15)

Sushruta classify general edema in five types viz., *vata*, *pitta*, *kapha*, *sannipata* and *vishaja*¹¹⁷ but does not consider local swelling as the part of *shopha* because while defining swelling it is clearly mentioned that which occurs in the large part under the skin and flesh etc but is other than nodules (*granthi*), abscess (*vidradhi*), *alaji* etc is known as *shopha*¹¹⁸

Ashtangahridaya describes *shopha* in the chapter on *panduroga* (anemia) because it is a main complication of anemia. Nine types of *shopha* described therein are three single *dosha* type, three *samsarga* types, one *tridoshaja* and one each due to trauma and poison. In addition three new types of *shopha* viz. *prithu* (extensive), *unnata* (elevated) and *grathita* (compact) are also mentioned.¹¹⁹.

Madhava Nidana followed Ashtangahridaya and describes nine types of *shotha* and does not describe localized *shotha* in this chapter on *shotha*¹²⁰.

Charaka considers bulging (*utsedha*) from the skin as *shvayathu* therefore local swellings such as *pidika* (papules and pustules), nodules (including *gandhamala*), *galagandha* (goiter), tumor etc are also described in this chapter. The probable modern equivalents are given in the bracket while describing these conditions in the text (74-100).

¹¹⁶ Sushruta. Chikitsa Sthana, Cha.23 Sophia Chikisitam Adhyaya verse 8-9. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

¹¹⁷ Sushruta. Chikitsa Sthana, Cha.23 Sophia Chikisitam Adhyaya verse 3. In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

¹¹⁸ Sushruta. Sutra Sthana, Cha.17 Amapkweshaneeya Adhyaya verse 3 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

¹¹⁹ Vaghbata. Nidana Sthana, Cha.13 Pandurogasophavisarpa Nidana Adhyaya verse 21-42. In: Harishastri Paradkar Vaidya, Editors. Ashtanga Hridayam. 1st ed. Varanasi: Krishnadas Academy;2000.p.4.

¹²⁰ Madhavakara. Madhava Nidanam (Roga vinischaya). Translated from Sanskrit by K. R. Srikantha Murthy. 8th ed. Varanasi: Chaukhambha orientalia;2007.pp-

Sushruta defines *arbuda* as a round and immovable growth produced by vitiated *dosha* by afflicting *mamsa* with mild pain but having deep roots and located in extensive area at the expense of tissue and causes swelling of the *mamsa* extensively. This *arbuda* (tumor) grows slowly and does not suppurate ¹²¹. But Charaka being a clinician does not consider much difference in the management of *arbuda* and *granthi* as their site, causative factors, shape, *dosha* morbidity and *dushya* (susceptible tissues) are about the same. However, it is clearly mentioned that *arbuda* should be managed by the expert surgeon only (87).

Line of treatment, various procedures and preparations mentioned in this chapter for the management of various types of swellings are easy to administer and practical so should be practiced (16-73).

Shat-kriya-kala of shotha

1. *Sanchaya* (Accumulation): This is the first stage of the disease where due to indulgence into the causative factors accumulation of concerned *dosha* occurs. During this stage increase in the normal functions of the *dosha* is noticed.
2. *Prakopa* (Provocation): If the accumulated *dosha* are not properly taken care then they may go to the next stage of provocation. During this stage the *prakopa* symptoms of the involved *dosha* appear.
3. *Prasara* (Spreading): In the stage of *prasara* the *dosha* leaves their normal site and starts circulating all over the body.
4. *Sthana-Smashrya* (Localization): The circulating *dosha* interacts with such tissues which have some problem in their channels which may be anatomical, physiological or pathological. This phenomenon is *dosha-dushya-samurchchhana*. This localization of *dosha* leads to beginning of the pathogenesis of the disease and during this stage prodromal symptoms (*purva-rupa*) of the disease are produced. The prodromal symptoms of edema are heat, burning sensation and dilation of the vessels.
5. *Vyakti* (Manifestation): If the disease is not managed at the stage of localization then the disease manifest with its specific symptoms. The symptoms of various types of edema are mentioned in the verses from 11 to 16 of this chapter. All or few symptoms mentioned for the disease may appear but if all the symptoms appear then the disease may become incurable and if few then it is easily curable. Moderate appearance of the symptom indicates its moderate prognosis.
6. *Bheda* (Complications): If the disease is not properly treated even after it is fully manifestation then the complications may appear and the disease becomes difficult to cure or incurable. The seven complications of edema are vomiting, thirst, anorexia, dyspnea, fever, diarrhea and weakness [Cha. Sa. Sutra Sthana 18/18].

¹²¹ Sushruta. Nidana Sthana, Cha.11 Grandhiapachiarbudagalaganda Nidana Adhyaya verse 13-14 In: Jadavaji Trikamji Aacharya, Editors. Sushruta Samhita. 8th ed. Varanasi: Chaukhambha Orientalia;2005. p.1.

Differential Diagnosis of *shotha*

Ayurveda is a clinical science, therefore the classifications are also planned so that the disease can systematically be diagnosed on the basis of the symptoms. *Shotha* is a good example for it.

Shotha has been defined as any abnormal elevation from the skin. First question to be asked to the patient whether there is any history of trauma, biting etc and if yes, then it is an *agantuja shotha*. If there is a history of contact or taking poisonous substance then it is *vishaja*.

Hereafter it is to be confirmed that whether the swelling is localized or all over the body. If *shotha* is localized in single organ or site then it can be diagnosed on the basis of nature of the lesion such as papules, pustules, nodules, tumor etc. It is further diagnosed on the basis of shape, site etc. For example *gandhamala* is garland like and *galagandha* is scrotum like swelling in neck. *Romantika* has minute papules while *masurika* has lentil like papules and so on. Associated general features such as fever, thirst etc also helps in differential diagnosis.

If *shotha* is generalized swelling then the point of its beginning is important e.g. *pitta shophya* starts from middle part of the abdomen, *vata* from the lower parts and *kapha* from upper parts of the body. The consideration of other characteristic features mentioned above will help in reaching the final diagnosis.

For example moving, pitting on pressure, increasing in the day time and sometime subsides without appreciable cause etc help in reaching the diagnosis for *vata shophya*.

Swelling which is firm, slight pitting on pressure, increases in the night, takes long time to subside and is associated with low digestion, vomiting, anemia indicates towards *kapha shotha*.

Swelling which is soft, tender on touch, associated with change to yellow color, fever etc is *pitta shotha*.

Similarly causative factors can also be sorted out by asking whether it relates to food articles (curd, unripe fruits, spoiled, leafy vegetables) or its properties (excessive use of *kshara*, sour, sharp, hot and heavy food articles), diet habit (fasting), sedentary life style, emaciation or weakness due to a disease or excessive *shodhana*, contact to poisonous substances etc.

Chikitsa Sutra (Principles of treatment)

Ayurveda gives very importance to *ama*. Therefore, if *ama* is associated with swelling then first it should be managed by prescribing lightening therapy (*langhana*) and digestive drugs. After getting the *nirama* symptoms, *shodhana* therapy can be done according to dominant *dosha*. It is the general rule for all types of swellings.

Shiro-virechana is the choice of therapy for *dosha* situated in head. Therefore if the swelling involves the head then first *nasya* should be done.

Chest and the upper parts are the main sites of *kapha* and for its removal, *vamana* therapy is best. Therefore if swelling is situated in upper parts or begins from upper parts and then spreads to other parts or it is *kapha* type then first of all *vamana* (emesis) therapy is prescribed. *Kshara* or pungent and hot articles mixed in cow's urine or buttermilk or *asava* are indicated after *vamana* therapy. If *vamana* therapy is not possible in the patient suffering from *kapha* swelling then these drugs may be given directly.

Generally *basti* is not preferred for the treatment of swelling, but if *vata* swelling is associated with constipation then it should be treated with *niruha basti*. Otherwise *virechana* is indicated for the swelling of lower part as well as of *vata*. The local swellings with symptom of inflammation may be treated by following the general line of treatment as mentioned above and other measures mentioned while describing their treatment in this chapter. If it belongs to *shalya* or *shalakya* type specialties, then let it be treated by the experts of the specialty.

Clinical practices

Formulation				
Type		Dosage	Time	
<i>Vata</i> dominant	<i>Harina shrunga</i> mixture	60-120 mg	In between two meals	<i>Anupana</i> Honey + <i>Dashamulari</i> <i>shta</i> + <i>Punarnavasa</i>
<i>Pitta</i> dominant	<i>Aarogya</i> Mixture	120-250 mg	In between two meals	Milk + <i>saravadyasa</i> <i>va</i> + <i>punarnavasa</i> <i>ava</i> + "vasakasava",
<i>Kapha</i> dominant	<i>Gomutra</i> <i>Haritaki</i>	1-3 grams	In between two meals	Cow urine, honey
	<i>Punarnava</i> <i>mandura</i>	250-500 mg	In between two meals	<i>Punarnavasa</i>
	<i>Gudadraka</i> <i>Yoga</i>	120-250 mg	In between two meals	Honey

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