



## Review Article

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### RELEVANCE OF INDRIYASTHAN IN THE PROGNOSIS OF DISEASES: A REVIEW

Nipane Mayur S<sup>1</sup>, Chouragade Bharat<sup>2</sup>, Chouragade Namrata<sup>3</sup>, Mhaiskar Bhushan<sup>4</sup>

<sup>1</sup>PG Scholar, Department of Sanskrit Samhita Siddhant Mahatma Gandhi Ayurved College, Salod (H) Wardha, Maharashtra, India

<sup>2</sup>Professor Department of Sanskrit Samhita Siddhant Mahatma Gandhi Ayurved College, Salod (H) Wardha, Maharashtra, India

<sup>3</sup>Associate Professor Department of Sanskrit Samhita Siddhant Mahatma Gandhi Ayurved College, Salod (H) Wardha, Maharashtra India

<sup>4</sup>Assistant Professor Department of Sanskrit Samhita Siddhant Mahatma Gandhi Ayurved College, Salod (H) Wardha, Maharashtra, India

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\*Corresponding author

E-mail: mayurnipane.87@gmail.com

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#### ABSTRACT

The knowledge of Ayu is widely described in eight sthana (section) of Charak Samhita. In this context Indriyasthan was designed to provide the knowledge of arishta as well as to teach how to differentiate between death signs and life signs of an individual. Arishta based on varna (color), swara (phonetics tone), gandha (odor), purvarupa of vyaadhi (prodromal signs) and swapna (dreams) were stated in Indriyasthan. Clinical practice of a physician is incomplete without prognosis of disease, still in today's era clinical prognosis is receives less attention. Hence an attempt is made to prove that the ancient technical way for prognosis stated in Charak Samhita is still exist and will help physician for betterment in his clinical practices.

**Key words:** Indriyasthan, Prognosis, Charak Samhita

#### INTRODUCTION

Ayurveda is a systematic knowledge of medicine which defines Ayu(life) as a combination of sharira, indriyas, satva and atmaa with an objective of Dhatu samya kriya (to bring dhatus in their equilibrium state)<sup>[1]</sup>. Each section of Charak Samhita is focusing on the betterment of Ayu. In this context indriyasthan was designed to tell the Ayu(life span) of the diseased person with the help of arishta. Arishtas are the fatal signs of death which definitely occurs in diseased person before death just like flowers indicates upcoming fruit and smoke indicates agni (fire) and cloud indicate srain.<sup>[2]</sup> Different acharyas of ayurveda described them (arishta) in different sthana of their text( sushruta acharya in sutrastha & vagbhata acharya in sharirsthana) and accept its importance. Hence physician must keep a keen observation on such fatal signs. Physician who acquired mastery in arishta vidgyang ets success in his treatment, fame and prosperity.<sup>[3]</sup> Arishtas are wrongly interpreted due to subtle nature of these symptoms, ignorance or stupidity of the physician or because such symptoms are very closely followed by the death of the patient<sup>[4]</sup>.

Arishta are always resulted by death unless warded off by following factors:<sup>[5]</sup>

- Blessings of the holy pure hearted Brahman.
- With the help of divyara sayanaaushdhi (drug).
- With the grace of siddha yogi.

#### Types of arishta<sup>[6]</sup>

Nitya arishta means arishta lakshan which are definite signs of death. For.eg smoke before fire these symptoms associated with physical constituent.

Anitya arishta means arishta lakshan which are not always resulted in diseased; for e.g. Cloud before rain, charakacharya stated sometimes vitiated doshas shows symptoms similar to arishta lakshan but they will disappear with dosha saamyava shtha.

In today's clinical practices estimating prognosis typically receives less attention than diagnosing and treating disease. Yet, many clinical decisions are not fully informed unless the patient's prognosis is considered. Critical prognostic information, physicians will be better equipped to make clinical decisions that are aligned with their patients' values, preferences and goals of care.<sup>[7]</sup>

#### Brief introduction of Indriya Sthana

This is the fifth sthana of Charak Samhita. Along Charak Samhita, Bhela Samhita, Kashyapa Samhita and Harita Samhita also included Indriya sthan. Indriya Sthana deals with the predictors of life, and not just determinants/symptoms of death. There are, therefore, not titled as Arishta Sthana but Indriya Sthana for a reason. Indra means prana (life). This sthana comprises of 12 chapters. In this sthana six types of Prakruti (natural disposition) are mentioned. Sign of imminent death and premonitory sign of sudden death is also discussed. 7 types of dream and their various results and process of manifestation of dreams are also mentioned. Prognosis of diseases and fatal sign are described on the basis of various descriptions regarding Swapna (dream), Swara (voice), Gandha (smell), Prabha (luster), Chaaya (shadow) Pratichaaya (reflected shadow) Rasa (taste) and Sparsha (touch).<sup>[8]</sup>

## DISCUSSION

### Varnaswaarendriya adhyaay

In this chapter imminent death signs depends on varna (coloration) and swara (voice) are describe as follows<sup>9</sup>

**Table 1: Varna Stated in Charak Samhita**

Prakruta Varna	Vikryta Varna
Krushna (blackish)	Harit (greenish)
Shyama (brownish tannedcolored)	Neel (bluish)
Shyamaavadaat( wheatish tone)	Shyaava (darkenlusterless)
Avadaat (fairtone)	Tamravarna (reddish)
	Shukla (pale)

**Table 2: Co-Relation With Modern Probable Prognosis**

Sl. no	Vikruta varna	Modern correlation	Probable prognosis
1.	Shukla	Pale	Severe anemia, chronic diseases
2.	Neel	Bluish	Cyanosis
3.	Shyaav	Bluish grey	Visceral trauma, chronic disease
4.	Tamra varni	Reddish	Skin disease
5.	Harit	Greenish	-----
6.	Haridra	Yellowish	Jaundice

Modern science explained the concept of change in complexion on the basic of blotching pigmentation and this occur due to less blood supply to the skin, it is seen in the patient of old age or suffering from chronic diseases, severe anemia, jaundice, cyanosis, nervous system disorders secondary metastasis etc. are some diseases where change in skin color observed.<sup>[10]</sup>

### Swara of Patients

Acharya charaka stated that if a physician observed change in phonic tone of an individual then it should be considered as an arishta. To give the knowledge of the vikruta swaaracharya stated prakruta as well as vikruta swara of the patient in the following chapter.

According to vocal health expert change in vocal sound may be due to any serious disease.<sup>[11]</sup>

### Prognosis on the basic of skin coloration

- If two different colors appear on the body of the patient (one normal and one abnormal) whether it is on right and left side or over upper and lower extremities or inner and outer region of the body.
- Along with abnormal coloration if glaani (lethargy)and harsha (excitement) or rukshata (dryness) and snigdghata (moistureness)
- If any of the abnormal color occurs on the body it shows bad prognosis about the disease.
- Even if the coloration since the time of birth is changing is also considered as an arishta.

### Pushpitakendriya adhaay

In this chapter Acharya Charak had stated that the physician must have the knowledge of different types of fatal sign and hence in this chapter he explained pushpitalakshana. Pushmitalakshanas are basically termed as imminent death sign which are experienced by theGandha (smelling sensation).

Pushpit termed is used for the person whose body smells like a flower, this smell is fruity or foul odor and experienced by other person who is nearest to the patient.<sup>[12]</sup>

### Modern Co-relation

Gandha can be correlated with bad smell of the breath in uremia<sup>[13]</sup>, this symptom is also found and correlated with the abscess, gangrene or any cancerous growth in the Gastro-intestinal tract, lungs, vocal chords<sup>[14]</sup>. Following table shows smell from body in diseases with their causative factor.

**Table 3: Occurrence of Smell in Diseases with their Causative Factor**

Smell from body	Disease	Causative factor
Uremia fetor( smell of ammonia or urine like smell from the breath) <sup>13</sup>	Chronic kidney disease	Due to breakdown of byproducts of ammonia in the saliva
Fruity smell	Uncontrolled diabetes(type 1,type 2)	Due to keto acidosis
Putrified odor	Skin disease	Bacterial infection
Rotten meat odor	Gangrene	Due to dying tissue
Offensive body odor and bad breath	Serious condition in liver, lung and kidney	Due to hampered metabolic process (Abscess or cancerous growth)
Offensive vaginal odor	Sexual transmitted diseases	Bacterial, Fungal, algal and parasitic infection.
Offensive smell of breath	Hypo-chlorhydria	Food does not digested properly due to lack of stomach acid (HCL)

### Parimarshaniyendriyaadhyaya

In the following chapter charaka acharya focus on how to inspect a dying person by touch sensation. In this context he further stated that Physician who wants to know the life span of the patient mainly by sparshgyan (touching perception), he

should inspect whole body by his prakrutahasta (healthy hand).<sup>[15]</sup> Following signs were stated by Acharya Charak which will be correlated with modern terms and sign. Table 4 shows correlation between prognostic sign perceived by touch sensation stated in Charak Samhita with modern terminology.

**Table 4: Co-relation between prognostic sign perceived by touch sensation**

Sights of examination stated in Charak samhita	Prognostic signs in Charak samhita which are perceived by touch sensation	Modern correlation
Manya (neck region)	(Satata spandamananaam sharire deshanaam aspananam.) Regular momentum of bodily part get stop)	No or feeble pulsation (coronoid artery) <sup>[16,17]</sup>
Ushma (warmth of body)	Nitya ushmano shitibhava (the body part which are warmusally get cold)	Cool extremities <sup>[16,17]</sup>
Sweda (sweating)	Swedanubandha (sweating)	Profuse Sweating
Swasana (breathing)	Ati Jalad or Ati Manda (very fast and/or very slow)	(chyenel stroke breathing ) <sup>[16,17]</sup>
Drusti (eye sight) or vision	Satata unmesha satata nimesh (continues blinking of eyes), hina drusti (diminished eyesight) ashru purna vishama akaar stana chyuta (watering of eye, irregular of size, dislocation from its normal position)	Change in eye (teary ,glassy eyes or half opened eye, diminished vision ) <sup>[18]</sup>
Danta (tooth)	Parikirnaa (gum diseases), Dantsarkara (dental caries), shukladanta (xerostomia),	Dental problem like dental carries xerostomia candidiasis, mucositis <sup>[19]</sup>
Kesh (hairs)	No pain even after by pricking the hair	Unresponsive to pain. <sup>[16]</sup>
Udara (abdomen surface)	Neel, shyaav, haridra varnayukta shira (bluishish greenish colored venation)	Abdomen blotting (ascities due to severe liver, kidney, heart diseases <sup>[20]</sup>
Nakha (nails)	Mamsa rakta kshinata	Muscle wasting in chronic diseases

### Indriyaanikendriya Adhyaaya

In this chapter, signs of indriya dusti (panchanendriya) are explained by Acharaya Charaka. In brief if we summarized the chapter we conclude that if a person, without doing any sadhana or meditation or other yogic practice, start perceiving knowledge through his indriyas beyond their normal limits, it should be consider as an arishta lakshana.<sup>[21]</sup> further acharya Charak stated that indriyas should be examine by Anumanam ( presumption ).<sup>[22]</sup>

Modern medicine also accept the process of hallucination happen as a sign of dying<sup>[23]</sup>, this happen due to involvement of brain tissue or nervous system.

### Purvarupendriya Adhaaya

In this chapter Acharya Charak stated arishta in the purvarupa (prodromals) of asadhya vyaadhi, and further divided these purvarooapa insadhaaran (common) and asadhaaran (uncommon) purvarooparishta. Manifestation of the purvarooapa in their highest gradation are samaanya purvarooparishta which explained by giving example of jwar roga.<sup>[24]</sup> and asadhaaran purvarooapa arishta were stated accordingly with their distinct diseases. Acharya explained that by acquiring the knowledge of arishta in purvarupa, the physician will able to predict the resultant effect of the upcoming disease.<sup>[25]</sup> Swapnagyan (concept of dream) is also described in this chapter. When manovaha strotas get filled by highly vitiated tridoshas, at that time individual saw frightful dreams (nightmares)<sup>[26]</sup>. He mentioned dreams with abnormal content are a predictive sign about the bad prognosis of the upcoming disease.

Today's medical science feels difficult to find the exact pathway of dreams but some evidences were found in the branch of psychology. Following are some evidences which pretend the relationship between dreams and disease.<sup>[27]</sup>

"The beginnings of diseases and other distempers which are about to visit the body...must be more evident in the sleeping state." (Aristotle, cited in Van de Castle, 1994)"

"There are nerves coming to the brain from every part of the body—and they relay the signals of impending illness that the subconscious translates into dreams."

A man [who] experienced a recurring dream in which a rat was gnawing at the lower part of his abdomen... was soon diagnosed with a duodenal ulcer.

Dreams preceding migraines have been reported to include pertinent images, such as being shot or struck by lightning in the head.

### Kathamanishaririyendriya Adhyaaya

In the starting of the chapter a question was asked that "which type of patient should be excluded for the treatment".<sup>[28]</sup> And answer was given that the patient who feels strong pain in the upper region of chest by doing simple talk only, to those who vomit the food which was taken just few minutes before or if their food remains in the stomach undigested, who has no power left in his body, whose thirst is increased and feel pain in the heart region are the types of patient which should remain untreated.<sup>[29]</sup>

Here Acharya Charaka clearly stated that the patient whose general condition is poor and if the symptoms are pointing towards asadhyaata of disease such type of cases should remain untreated.

Similarly in the successive chapters Acharya Charaka stated the sign and symptoms which show worsening of the symptoms and worsening of the symptoms itself indicates bad prognosis of the disease.

Sadyamaarakarishta, fifteen days arishta, arishta of one month and arishta of one year were also described in the 10<sup>th</sup>, 11<sup>th</sup> and 12<sup>th</sup> chapters of Indriyasthan.

Ayulakshana were also stated and if physician see those (ayulakshana) signs and symptoms then without wasting any time a physician should start his treatment. Hence a physician must have a keen observation in identifying the arishtalakshana as well as ayulakshana.

### CONCLUSION

From the above discussion it is conclude that Acharya Charaka stated many different ways for the prognosis of disease in the section of Charak Samhita named as Indriyasthan. Along with vikruta lakshana prakruta lakshana is also described in this sthana. Prognosis on the basis of varna, (coloration of body), swara (voice of the patient), gandha(odor) touch is also stated here. Different arishta which were stated in the indriyasthan still exist and their knowledge will add extra marks in the clinical

practice of the physician. Hence Indriyasthan plays a key role in the prognosis of diseases.

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