



Review Article

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CLINICAL APPLICATION OF DASAVIDHA PARIKSHA IN PANCHAKARMA PRACTICE: A REVIEW

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ABSTRACT

In Ayurveda, the commonly used term is *Pariksha*. *Pariksha* means viewing or examining an object from all sides and aspects. There are different synonyms for *Pariksha* like *Pramana*, *Jnana*, *Upalabdhi*. Before prescribing medicine or treatment for an individual, the examination is the basic primary tool used to define both *Rogabala* and *Rogibala*. The purpose of *Pariksha* is to obtain knowledge regarding the line of treatment that should be adopted to correct the morbidity. Hence, a patient should be examined with the help of *Prakruti*, *Vikruti*, *Sara*, *Samhanana*, *Pramana*, *Satmya*, *Satwa*, *Aharashakti*, *Vyayamashakti* and *Vaya*. These ten factors are considered *Dashavidha Pariksha*, which helps determine the *Rogabala* and *Rogibala* of the individual. *Pariksha* should be done systemically to get the outcome effectively. It is essential to know the individual's condition to carry out proper treatment modalities.

Keywords: *Pariksha*, *Rogabala*, *Rogibala*, *Dashavidha Pariksha*, *Panchakarma*

INTRODUCTION

Pariksha is an essential clinical tool used to assess *Roga* and *Rogi Bala*. *Pariksha* is derived from the root “*Iksh*”, which means- to view, to consider, with the preposition “*Pari*” fixed before the root, which means from all sides. Thus, *Pariksha* means viewing or examining an object from all sides and aspects.

The purpose of *Pariksha* is to obtain knowledge regarding the line of treatment that should be adopted to correct the morbidity. ¹ The treatment should be decided after proper diagnosis of the patient's condition. After that, they should administer the therapy applying the knowledge of the medical science. If a physician initiates treatment without proper diagnosis of the disease, it may accomplish the desired object only by chance. The fact that he/she is well acquainted with the knowledge of medicine application does not necessarily guarantee his success. On the other hand, the physician who is knowledgeable in diagnosing disease, capable of administering medicines, and knows about treatment modalities to be used is sure to achieve the ideal result without any doubt. ²

A patient constitutes the *Karyadesa* or the site for administering therapies to bring about *Dhatu Samyavastha*. The patient should be examined to learn the life span, strength, and intensity of morbidity. Here, the purpose of the examination is to obtain the knowledge related to the *Rogabala* and *Rogibala* of the individual.

Dashavidha Pariksha includes *Prakruti*, *Vikruti*, *Sara*, *Samhanana*, *Pramana*, *Satmya*, *Satwa*, *Aharashakti*, *Vyayamashakti* and *Vaya*.

1. PRAKRUTI

Before employing *Panchakarma* treatment, considering *Prakruti* is essential. *Prakruti* helps assist the type of *Koshta*.

Application of *Prakruti*

Snehana Karma- In *Vata Pitta Prakruti*, *Ghrita* and *Taila* is advised for administration. But *Ghrita* is ideal *Sneha* in conditions of *Pitta Prakruti*. In individuals of *Vata* or *Pitta*, *Prakruti* administration of *Sneha* is recommended during *Nishi* (Nighttime) and in *Kapha Prakruti* individuals during *Diva* (Daytime). ³

Svedana Karma- *Svedana* is contraindicated in *Pitta Prakruti* individuals. *Svedana* is contraindicated in these individuals when used as part of *Shamana Chikitsa*. *Mridu Svedana* is given after proper *Snehana* of the body when intended for *Shodhana* therapy.

Vamana Karma- In *Kapha Prakruti* individuals, if *Kapha Dosh*'s aggravation, *Shodhana* with *Tikshna dravyas* can be performed. In *Vata Prakruti* individuals, if there is an aggravation of *Vata Dosh*, *Shodhana* with *Mrudu Dravyas* should be administered.

Dhoomapana, commonly administered as *Paschat Karma* in *Vamana*, can also be prescribed based on the *Prakruti* of an individual. In the case of *Vataja*, *Pittaja* and *Kaphaja* individuals, *Snaihika*, *Upashamaniya* and *Vairechanika*, respectively.

Virechana Karma- For *Pitta Prakruti* individuals, *Virechana* is the best line of treatment. In *Vata Prakruti*, individuals *Snigdha Virechanopaga Dravyas* can be used, and in *Kapha Prakruti*, individuals *Tikshna Virechanopaga Dravyas* can be used.

Basti Karma- *Basti* is the best treatment for *Vataja Vikara*, but excessive use of *Niruha* causes its aggravation. Care must be taken to prevent its aggravation. *Niruha Basti* should be administered to *Vata Prakruti* individuals, followed by *Anuvasana Basti*. For this purpose, *Basti* therapy should be used in *Karma*, *Kala* and *Yoga Basti*.

Nasya Karma- Selection of medicine for Nasya as Paschat Karma for Shirovirechana Nasya is made according to Prakruti of the individual. Ghritha is used for Nasya in Pitta individuals, and medicated Taila should be used in Vata individuals.

Raktamokshana- When excessive blood has been drained during Raktamokshana, Samsarjana should be advised based on Prakruti of the individual. Mamsa rasa, Ksheera or Yusa should be given for Vata, Pitta and Kapha Prakruti, respectively.

2. VIKRUTI

Examination of the patient should be done concerning Vikruti as well. Different factors like Hetu, Dosha, Dushya, Prakruti, Desha, Kala and the Lakshanas helps in assessing the Rogabala and intensity of the disease. The disease having common Dushya, Prakruti, Desha and Kala along with strong cause and severity of symptoms are more, then such diseases are severe. The contrary is mild. Vikruti Pariksha is done based on Panchavidha Nidana which includes Nidana, Purvarupa, Rupa, Upashaya, Samprapti.

Application of Vikruti

Snehana Karma- According to the Dosha involved in disease manifestation, Snehana is advised. In Pittaja disorders, Ghritha should alone be consumed. In Vataja disorders, Ghritha with Saindhava should be consumed, and in Kaphaja disorders, Ghritha mixed with Vyosha and Kshara should be consumed.⁴

Swedana Karma- Among all four types of Swedana mentioned in Susrutha Samhitha, Tapasweda and Ushmasweda are Kapha Shamaka. Upanahasweda is Vata Shamaka. Dravasweda is indicated when Vata is associated with Pitta. When Prakupita Vata is associated with Kapha and Medas, Anagni Sweda is shown.⁵

Vamana Karma & Virechana Karma- Vamana is administered in Kaphaja Vikaras and Virechana in Pittaja Vikaras either alone or in association with other Doshas.

Basti Karma- Basti is considered the best line of treatment for Vataja Vikaras. It helps treat Vata, Pitta, Kapha Doshas, and even the Rakta Dushiti. It is also effective in combining two or all the three Doshas.⁶

3. SARA

There are eight types of Sara explained in classics, Tvak, Rakta, Mamsa, Medas, Asthi, Majja, Shukra, Satwa. Sara Pariksha helps the physician select the most appropriate treatment and medicine to avoid any complications during treatment.

Application of Sara

In general, Tvak Sara, Rakta Sara and Meda Sara individuals are Sukumara in nature while Mamsa Sara, Asthi Sara, Majja Sara, Shukra Sara and Sattva Sara are strong by nature. So, Panchakarma procedures like Vamana, Virechana, Niruha Basti and Raktamokshana should be done cautiously in Sukumara individuals because these procedures strongly affect the body. Meda Sara individuals are subjects for milder therapies. So, Niragni Sweda, Mrudu Virechana and Jaloukavacharana should be preferred. In Vriddha, Bala, Sukumara, Mandagni etc., conditions Snehapana in Hrsva Matra is advised.⁷ Vamana is contraindicated in Sukumara individuals as due to strain of the procedure, they may suffer from discomfort in the chest region, severe bleeding may occur through upper and lower channels.

4. SAMHANANA

The patient should also be examined by Samhanana, which means compactness of the body. Samhati and Samyojana are synonyms of Samhanana. A well compact body is known for evenly well-demarcated bones, well-bound joints, well-formed muscles, and blood. Persons with the compact body are strong. Others may be weak or moderate according to their compactness of the body.

Samhanana- Krsha individuals are subject to Brimhana, and Sthula individuals are subjected to Karshana.

Snehana Karma- In Sthula, individuals Snehapana should be avoided as there will be Srotavarodha. The Sneha indicated in Sthula individuals is Taila. The Sneha indicated in Krsha individuals is Brimhana Sneha which should be mixed with food. In Krsha individuals, Pravicharana Sneha is indicated.

Swedana Karma- Swedana is contraindicated in Sthula persons as it may cause Medovilayana and thereby cause Atyantasharirakshobha. In Sthula persons, Mrudu Sweda or Niragni Sweda should be administered in an emergency or before the Shodhana Karma.

Vamana & Virechana Karma- Vamana and Virechana are contraindicated in Atisthula and Atikrsha individuals as they cannot tolerate the effect of Shodhana dravyas. If administered, it may cause risk to the life of the individual.

Niruha & Anuvasana Basti- Niruha Basti comprises Shodhana and Lekhana properties, whereas Sneha Basti comprises Brimhana property. Niruha Basti is not administered in Krsha individuals, but it can be administered along with Anuvasana Basti. Whereas in Sthula individuals, Niruha Basti can be administered alone, Snehana therapy is not continuously administered.

Raktamokshana- In a Krsha person, Raktamokshana is contraindicated as loss of blood may be dangerous for their lives. In the case of Vatarakta, Raktamokshana is contraindicated when there is a loss of muscle mass in that particular body part.

5. PRAMANA

Pramana is determined by measuring the Utsedha, Vistara, Ayama of the body part, taking the Anguli Pramana of that individual as the unit of measurement. For clinical assessment it can be subdivided into Pravara, Madhyama and Avara Pramana. The person having Ayama and Vistara equal is Sama Purusha (Anatomically proportionate and healthy person).

Application of Pramana

Pramana in the classics has been given mainly for assessing Ayu. But it also has clinical value in the treatment aspect. The suitable therapy from the Shadvidhopa krama like Langhana, Brimhana etc., depends on the individual's height, weight, etc. In Panchakarma, it is helpful for dose fixation, site localisation for therapy and dimensions of instruments used for treatment.

Snehana Karma- While administering Snehapana, Pramana plays a prominent role in dose fixation. In the same way, the length of the Droni used for the Panchakarma procedure should be 4 Hasta in length and 1 Hasta in width, which is ideal. This ensures proper posture of the person during the therapies like Abhyanga, Udwartana etc.

Swedana Karma- Considering the *Pramana* is necessary for some of the *Swedana Karmas* like *Prastara Sweda* in which rock used for *Swedana* should be of the same size as that of the patient. For *Kupa Sweda*, the length and depth of the well should be double and equal to the height of the patient. So, for getting more benefit from the *Swedana Karma*, proper planning is needed according to the measurement of the body.

Vamana Karma- Dose of *Madanaphala* seeds required for *Vamana Karma* is one of the examples for *Pramana* where *Antarnakha Mushti Pramana* is considered as ideal dose. During *Vamana Karma*, the height of the chair used for sitting should be up to the patient's knee, which is the comfortable posture during *Vamana Karma*.

Basti Karma- The length of *Basti Netra* is measured in units of *Angula*. This length is fixed according to *Vaya*. The dosage of *Basti* varies in every individual.

Nasya Karma- The dose of *Nasya Karma* is considered in *Bindu Pramana*. A *Bindu* is the quantity of liquid that falls from the index finger after dipping its first two digits in a liquid. Ex- 2 *Bindu Pramana* in *Pratimarsha Nasya*

Raktamokshana- The site for *Raktamokshana* is measured in *Anguli Pramana* as per the finger of the individual, which may vary in every individual.

Uttara Basti- The dimensions and length of *Uttara Basti Netra* are different for males and females, i.e., 12 *Angulas* in males and 10 *Angulas* in females. The dose of *Uttara Basti* is considered in *Prasrita Pramana*, which will be altered according to *Vaya*.

6. SATMYA

Satmya stands for the wholesome factors to the individual even when continuously used. Persons habituated to regular consumption of *Ghritha*, *Ksheera*, *Taila*, *Mamsa rasa* and *Dravyas* having *Shadhrasas* are endowed with strength, resistance to face difficult situations and longevity. Persons accustomed to *Ruksha Dravyas*, *Ekarasa Satmya* mainly possess less power, less resistance to face complex problems and less life span. Persons who are *Satmya* to both types will have moderate strength.

Application of Satmya

Snehana- *Ghritha* is best among all the *Chatur sneha* as it *Satmya* for all. *Shodhananga Snehapana* is given for a maximum of 7 days; if it exceeds, *Sneha* becomes *Satmya*.

Vamana & Virechana- Drugs accustomed to extended use are not administered either for *Vamana* or *Virechana* because such drugs get digested and do not eliminate the *Doshas*.⁸

Basti Karma- In a *Rukshanitya* person, *Sneha Basti* can be given daily. In *Sukumara*, *Baala*, *Vridhdha* conditions, *Matra Basti*, *Madhutailika Basti* can be given.

7. SATWA

Satwa is the mind, and it regulates the body because of its association with the *Atma*. Depending upon its strength *Satwa* is of 3 types, i.e., *Pravara*, *Madhyama*, *Avara*.

Application of Satwa

Satwa is one of the conclusive factors for deciding a particular therapy and medicine for treatment. Performing *Satwa Pariksha*

in advance helps minimize the chances of complications that may lead to *Avara Satwa* of the individual.

Snehana Karma- Based on the *Satwa* of a person, *Sneha Dravya* for *Snehapana* should be selected. *Ghritha* is suitable for all individuals, but *Vasa* and *Majja* are heavy to digest. So, individuals who can resist stress, sun heat and wind are ideal for the intake of *Vasa* and *Majja*.

Vamana & Virechana Karma- *Vamana* and *Virechana* is administered to a stable mind.⁹ *Vamana* is the process that depends much more upon the *Satwa* of the patient. It progresses effortlessly when the patient will be satisfied with several doubts about the process and prepared mentally for the same.

Basti Karma- *Madhutailika Basti* or *Matra Basti* can be administered to individuals who cannot follow *Pathya* during *Basti karma*. If *Niruha* and *Anuvasana Basti* are given to a person suffering from *Kopa*, *Shoka* and *Bhaya*, it leads to discomfort.

Nasya Karma- *Shirovirechana Nasya* is not given with *Churna Dravyas* to *Bheeru*, *Krsha*, *Sukumara* individuals. In these conditions, *Nasya* with *Taila* is advised.

Raktamokshana- In *Avara Satwa* persons, *Raktamokshana* with *Jalouka* is mainly preferred. Other non-surgical methods like *Ghata* and *Alabu* can also be used based on suitability.

8. AHARASHAKTI

Aharashakti can be assessed based on *Abhyavaranashakti* and *Jaranashakti* that depends upon *Jataragni*. Based on this, *Jataragni* is classified into *Samagni*, *Vishamagni*, *Tikshnagni* and *Mandagni*.

Application of Agni

Before performing any *Panchakarma* treatment in an individual, assessment of *Jataragni* is essential, and it plays a vital role in each level of treatment, i.e., *Purvakarma*, *Pradhanakarma* and *Paschatkarma*. *Dipana* and *Pachana Dravyas* should be given to an individual before administering *Snehapana* to stimulate digestive activity. In *Mandagni* and *Teekshnagni* persons, *Snehapana* is contraindicated. In persons who have *Pravara Agnibala*, *Vasa* and *Majja* can be administered for *Snehapana*.

In the case of *Mandagni* individuals, *Vamana* is the choice of treatment. *Virechana* and *Basti Karma* are contraindicated as the person may not tolerate the effect of the medicine. In *Pravaragnibala* conditions, *Anuvasana Basti* can be given.

After the administration of *Shodhana* therapies, *Agni* of the individual diminishes. So, *Samsarjana Krama* is advised in this condition to get *Agni* to its normalcy. *Agni* helps assess the type of *Koshta* in every individual.

9. VYAYAMASHAKTI

Bala of an individual is assessed based on *Vyayamashakti*. It helps in knowing the *Bala* of the patient whether he is having *Pravara*, *Madhyama* or *Avarabala*.

Application of Vyayamashakti

Sneha Matra can be decided based on the *Bala* of the individual. *Shodhananga Sneha* is contraindicated in persons with *Avarabala*. *Vasa* can be given in *Snehapana* to persons who indulge in physical activities. *Swedana Karmas* like *Jentaka*, *Kuti*

and *Sankara, Nadi* can be planned based on the individualistic *Bala* for *Pravara* and *Avarabala*, respectively. *Shodhana* therapies like *Vamana* and *Virechana* are contraindicated in *Sukumaras*, and if necessary, *Mridu Shodhana* can be adopted. *Basti Karma* like *Prasrita Basti* and *Madhutailika Basti* are advised in *Sukumara*. In persons with *Avarabala*, *Nasya* with *Kalka* or *Sneha* is advised. The duration of *Samsarjana Krama* can also be decided based on *Bala* and the outcome of *Shodhana*.

10. VAYA

Vaya is defined as the state of the body corresponding to the length of time that has passed since birth. It is broadly divided into *Baala*, *Madhyama*, *Jirna*.

Application of Vaya

Shodhana Karma is avoided in *Bala* and *Vridhdha* as they will have *Avarabala*. *Mridu Shodhana* can be administered if necessary. *Brimhana* type of *Sneha* is indicated in *Bala* and *Vridhdha*. *Sadhyosneha* is administered as *Shodhana* procedure in them. In *Balavastha* of age four months and six years, *Hastasweda* and *Patasweda* should be used. In *Vridhdhavastha*, *Yapana Basti* is preferable. According to the age, *Bastinetra Pramana* and *Agrachidra Pramana* has been explained in *Charaka Samhitha*. He also mentioned a detailed dose of *Niruha Basti* of a particular period.

The dose of the *Niruha Basti* in children of age one year up to 12 years can be maintained with $\frac{1}{2}$ *Prasrita* and then increasing with $\frac{1}{2}$ *Prasrita* for each completing year. The dose of the *Niruha Basti* of 12 years of age should be raised with 1 *Prasrita* for each completing year will be maintained till 18 years of age and continued up to the age of 70 years 10 *Prasrita* should be maintained.¹⁰ In both *Bala* and *Vridhdha*, *Pratimarsha Nasya* is advisable. Due to immature and weak body tissues, *Siravyadha* is contraindicated in *Bala* and *Vridhdha*, and *Jaloukavacharana* can be selected instead, if essential.

CONCLUSION

*Vibhramsho Vishavatsamyagyogo Yasyamritopamaha
Kaaleavashyam Prayojyam Ca Yasmat Yatnena Tat Pibet (A.S
Su 27/60)*

Improperly administered *Shodhana* are like *Visha*. So, *Shodhana* must be appropriately administered at the appropriate time with all due precautions. Hence, understanding *Rogabala* and *Rogibala* through *Dashavidha Pariksha* play a vital role in selecting functional treatment modalities.

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