CONCEPTUAL STUDY ON THE ETIOPATHOGENESIS AND AHARAJA NIDANAS IN VISHVACHI

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ABSTRACT

Ayurveda is the most supreme science of medicine as it deals with all aspects of life, particularly of human beings. It talks about both health and diseased condition and its preventive aspects. Vishvachi is one among Vatavyadhi and has a close resemblance with the signs and symptoms of Cervical Radiculopathy. The lakshanas of Vishvachi is all alone mentioned in classics where in the nidana, purvarupa, samprapti must be considered from the light of samanya vatavyadhi. As a result of urbanization, we most commonly witness people often going for long drives, doing late night jobs, working in computers excessively. On the counterpart daily wage laborers, some occupational postures like in teachers, coolies, drivers, tailors are victim of cervical radiculopathy, are the commonest causes of neck pain. Ayurveda gives first importance to prevention of disease through nidana. Hence here this is an attempt to explain the Nidanapanchakas of the disease Vishvachi and its possible Aharaja nidanas (dietetic etiological factors).

Keywords: Vata vyadhi, Cervical radiculopathy, Visvachi, Samanya vata vyadhi.

INTRODUCTION

As per Aristotle, “The Hand is the organ of organs, the active agent of the passive powers of the entire system”1. Vishvachi is one among the vatavyadhi2 affecting the hand that causes bahuchesta aphanarana (loss of movement of upper limb), shoola (pain) from bahuprushta (arms and shoulder) region to anguli (fingers). Here the kandaras arising from the back of the shoulders and running up to the fingers are affected impairing the adduction, abduction and other functions of the arm.

Cervical Radiculopathy (radix = root) or Cervical spondylotic radiculopathy3 shows compression of a nerve root which occurs when a disc prolapsed laterally which is due to osteophytic encroachment of the inter-vertebral foramina presenting the features of neck pain that may radiate in the distribution of the affected nerve root can be paralleled with Vishvachi.

It is commonly seen in old age, but in present scenario also seen in young and middle-aged people. The annual incidence of cervical radicular symptoms to be 83.2 per 100000 populations and its prevalence is most significant between 50-54-year age group4.

It is most prevalent among the farmers and labor class who lift heavy objects, push or pull heavy objects, operate vibrating equipment, some occupational odd postures, such as tailors, drivers, and daily wage workers who involve in strenuous activities. And today as a result of modernization the most common trend we witness in this busy world is: people often going for long drives in vehicles, working for long hours in front of computers, night outs in call centers ultimately resulting with early or late victims of Vishvachi (Cervical radiculopathy), one of the commonest causes of neck pain.

Nirukti according to different Acharyas

“Viswam anchati iti visvachi”: It is derived from the root word with ‘visha’ as dhatu and ‘anch’ as pratyaya. Vishwa means entire / whole all pervading. Anch means turned to directed towards / to move / to wander about. Thus ‘Vishvachi’ literally means to spread throughout5. According to Shabdakalpadruma (vol.4) – it is mentioned as “Bahu roga vishesha”. In Agni Purana one of the names of Apsaras is Vishvachi. According to the Sanskrit-English Dictionary by M. Monier Williams, which means the Paralysis of Arms and the back.

Types of Vishvachi

According to Nyayachandrika vyakhya of Sushrutha Samhita, this disease can occur in two types6: Vatakaja type is pain predominant. Vatakaphaja type presents with numbness, weakness and loss of appetite along with Vataja Vishvachi features.

Nidana Panchakas of Vishvachi

Nidana

All the etiological factors of Vatavyadhi are taken as nidana of Vishvachi and the same is classified as:

- Aharaja (Dietetic factor)
- Viharaja (Behavioral factor)
- Manasika (Psychic factor)

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Aharaja Nidana

The foods which we consume like rooksha ahara (unctuous food), sheeta ahara (cold foods), laghu ahara (light foods), ati tikta rasa sevana (excessive use of bitter taste foods), ati kashaya rasa sevana (pungent taste foods), alpamatraahara (less quantity food), vishamashana (consuming less or more food), adhyashana (eating before digestion of previously consumed food), pramitashana (intake of nutrition deficient food or consuming very less food), are contributory factors.

Viharaja Nidana

The improper activities like atiprajagarana (excessive awakening), ativyayama (excessive exercise), ativyavaya (excessive sexual intercourse), vega dharana (suppression of natural urges), vega udeerana (premature initiation of natural urges), dukhashayya (improper sleeping posture), dukha asana (uncomfortable postures) are the contributory factors.

Manasika Nidana

Various mental faculties such as kama (desire), chinta (worry), krodha (anger), shoka (sorrow), bhaya (fear) causes vataprakopa.

Poorvarupa

The manifestation of symptoms before the actual manifestation of disease is called as poorvarupa. No specific poorvarupa of vatavyadhi has been mentioned in our classics but is clearly mentioned that Avyakta Lakshanas are the poorvarupa of Vatvyadhi. In Chakrapani commentary he mentions that avyakta means ‘AlpaVyaktam’.

Hence before the actual manifestation of the disease alpa ruk, alpa stabdha, ishat suptata and shrama in bahu after a long period of strain full work can be considered as a stage of Vishvachi poorvarupa.

Rupa

In the commentary by Acharya Dalhana, he says ‘further the disease resembles Gridhrasi’. Lakshanas like Dehasyapipravakrta (scoliosis), janu uru sandhi sphurana (pulsations in knee and thigh) are specially categorized as vatika gridhrasi lakshanas. And this can be considered even for vishvachi but the difference being site and bahu karma kshaya8,9.

Upashaya

Upashaya for Vishvachi is the same as that of any other vata vikara particularly such as Sarpi (Ghee), Vasa (Muscle fat) and Majja (Bone marrow)10. Involvement of dosha, dushya, and mode of samprapti i.e., margarodhaja or dhatu kshayajanya is understood by upashaya (pacifying factors) and anupashaya (provoking factors).

Samprapti

Aharaja Hetu in Vishvachi

The word ‘Nidana’ (etiology) is used in Ayurveda classics in a broad sense. This word is derived from Sanskrit Dhatu ‘Ni’ which carries the meaning to determine (Ni-Nishchaya Deeyate Jnanam). This word either refers to cito-pathogenesis of disease in general or the etiology of the illness11. Since Vishvachi is regarded as Vatavyadya of Nanatmaja type, the factors that precipitate prakopa of vata can also be taken as the Nidana (etiology) for disease Vishvachi (Cervical radiculopathy). Dietetic factors play major role as causative factors for the pathogenicity of various diseases; henceforth will be explaining

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**Figure 1: Samprapti of Vishvachi**

Nidanasevana → Vataprapkopa → Dhatu kshaya → Margaavarodha → Sthanasamshraya at greeva → Shlesha kapha shoshana and kasheruka vikruthi → Bahu kandara dushhi → Vishvachi
in detail regarding possible Aharaja nidanas (dietetic factors) responsible for the pathogenicity of the disease Vishvachi (Cervical radiculopathy).

Aharaja hetu

The causative dietetic factors included under this group have been again subdivided into the following 7 groups:

Dravyatah

In this group all the aharaja dravyas (dietetic factors) responsible for vataprakopa has been included.

Gunatah

This group includes the ahar dravyas (dietetic factors) possessing gunas (quality) like Ruksha (dry), Sheeta (cold) and so on.

Rasatah

The ahar dravyas (dietetic factors) possessing various tastes like Katu (pungent), Tikta (bitter) and Kashaya (astringent) are responsible for vata dosha prakopa.

Karmatah

Excessive use of vishtambhi ahara (food which is cause for constipation) leads to prakopa of vata.

Veeryatah

Ahara Dravyas (dietetic factors) possessing sheeta veerya (cold potency) cause prakopa of vata.

Matratah

The quantity of ahara (food) can be considered.

Kalatah

Vataprakopa occurs at the end of digestion (bhukte jeeryatibhojane cha). The following haraja hetus (dietetic causes) are taken from various classical texts Charaka (C.S), Sushruta Uattartantra (S.U), Astanga sangraha (A.S), Astangahrudaya (A.H), Bhava Prakash (B.P).

<table>
<thead>
<tr>
<th>Table 1: Aharaja Hetu (dietetic causes)</th>
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<tbody>
<tr>
<td>Adhaki (Cajanus cajan)</td>
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<tr>
<td>Bisa (Nelumbo nucifera)</td>
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<tr>
<td>Chanakya (Cicer arietinum)</td>
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<tr>
<td>Chirabhati (Cucumis melo)</td>
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<tr>
<td>Haren (Pisum sativum)</td>
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<td>Jamhavati (Eugenia jambolana)</td>
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<td>Kalaya (Lathyris sativus)</td>
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<td>Karira (Capparis decidua)</td>
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<tr>
<td>Kalinga (Holarrhena antidysenterica)</td>
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<tr>
<td>Koradashas (Paspalam scorbuticum)</td>
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<td>Masura (Lens culinaris)</td>
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<td>Mudgu (Phaseolus mungo)</td>
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<td>Nishpaya (Dolichos lablab)</td>
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<td>Neevara (Hygrophis aristata)</td>
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<td>Shaluka (Nelumbium speciosum)</td>
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<td>Shushkashaka (Dry vegetables)</td>
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<td>Salyamaka (Setaria italica)</td>
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<td>Tinduka (Diospyros tomentosa)</td>
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<td>Trunadhanya (Grassv grains sp.)</td>
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<td>Tumba (Leguminaria vulgaris)</td>
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<td>Uddalaka (A variety of Paspalam scorbuticum)</td>
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<td>Varaka (Carthusius tinctoria)</td>
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<td>Viroodhaka (Germinated seeds)</td>
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</tbody>
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Gunataha

Rukshanna (non unctuous diet)       +   +   +   +   +
Laghvanna (Light diet)              -   +   +   -   -
Gurvanna (Heavy diet)               -   -   +   +   -
Sheetana (Cold diet)                +   -   +   -   -

Rasataha

Kashayanna (Astringent taste)       -   +   +   +   +
Katvanna (Acidic taste)             -   +   +   +   -
Tiktanna (Bitter taste)             -   +   +   +   +

Kalataha

Adhyasana (Eating before digestion of previous food) -   +   -   -   -
Jeernanta (After digestion)          -   +   +   +   -
Pramitasana (Taking less quantity food or less nutritious food) -   -   +   +   +
Matrataha

<table>
<thead>
<tr>
<th>Dravya</th>
<th>Guna</th>
<th>Rasa</th>
<th>Karma</th>
<th>Veerya</th>
<th>Matra</th>
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Karmataha

| Vishtambhi (Diet cause for constipation) | - | - | + | - | - |

Veeryataha

| Sheeta (Cold potency) | - | - | - | - | - |

Table 2: Summary chart of Aharaja Nidanas

DISCUSSION

Present day lifestyle has led to many diseases which though doesn’t kill the person but hampers the day-to-day life. One of such disease is Vishvachi, affecting the upper limbs. Vishvachi is one of the most common types of Vatavyadhi found in clinical practice, in which the prakupitha vata affects kandara of bahu. It is a disorder which is prevalent in the most active period of life. Being a shoola pradhana nanatmaja vyadhi, it deprives the patient’s ability to perform movements of upper limb, which in turn makes them unable to carry their routine work.

CONCLUSION

Vatavyadhis are the disorders caused solely by vitiated vata dosha; also called as vataja nanatmaja vyadhis. They are mostly endogenous (nija roga) disorders of specific type caused by solely aggravated vata dosha on its own accord (vatakara nidana) and not in combination with other doshas. As per the above references the above mentioned aharaja nidanas can be taken as the possible nidanas for the disease Vishvachi.

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