



## Review Article

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### CHIKITSASTHANA THROUGH THE LENS OF ARTHASHRAYA: A CONCEPTUAL STUDY

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#### ABSTRACT

Chikitsasthana, the therapeutic division of Ashtanga Hridaya, offers precise yet layered clinical guidelines that often extend beyond their literal meanings. Interpreting these sutras requires more than direct translation; it necessitates tools that reveal their contextual depth. Arthashraya, one of the Tantraguṇas, serves as a foundational interpretative method that helps uncover the intended meaning of sutras through contextual, linguistic, and logical cues. This conceptual study explores how Arthashraya enhances the understanding of selected sutras in Chikitsasthana. Examples from the text demonstrate applications such as Adilopa, Hetuhetuka dharma, Karyakaran dharma, Samantantra pratyaya, and Prakrut Arthashraya, illustrating how these concepts aid in decoding therapeutic protocols and textual structure. The study concludes that Arthashraya not only clarifies subtle meanings but also safeguards the authentic application of Ayurvedic principles in clinical settings.

**Keywords:** Chikitsasthana, Arthashraya, Tantraguṇa, Ashtang Hridaya, Fundamental tools

#### INTRODUCTION

Ayurveda, the ancient Indian science of life and healing, is a holistic system that integrates the physical, mental, and spiritual dimensions of well-being. Among its foundational classical texts, the Ashtanga Hridaya, composed by Acharya Vaghbata, holds a central place due to its concise and practical approach. The Ashtanga Hridaya is regarded as the essence of the Ashtanga Sangraha. It is a more concise and accessible version that integrates the core teachings of both the Charaka Samhita and the Sushruta Samhita. Even today, the Ashtanga Hridaya serves as a foundational text in Ayurvedic philosophy and clinical practice, offering precise guidance on all aspects of health and well-being.

Free from the flaws commonly found in other treatises (tantra-doṣa-varjita), the Ashtanga Hridaya is composed entirely in padyamaya form (poetic style), with flawless grammar and refined language. However, to preserve the metrical structure of the sutras, the text sometimes omits certain words or uses synonyms, necessitating careful interpretation for accurate understanding.

This Samhita is divided into Sthanas (Sections), one of which, the Chikitsasthana, is dedicated to the therapeutic domain. It addresses the management, prevention, and pathya-apathyā (wholesome and unwholesome diets and regimens) of diseases.

Although the Chikitsasthana offers precise clinical guidance, its layered structure and poetic language require interpretive insight to fully comprehend the intended therapeutic principles. One such interpretive tool is the concept of Arthashraya, a critical element among the Tantraguṇas (fundamental supports for textual understanding).

The term Arthashraya is derived from two Sanskrit words.

Artha – subject or concept

Asharaya – relevance to the subject

It refers to the fundamental tools or methods that help to derive the desired meaning of the subject or sutra, thereby facilitating accurate interpretation in harmony with the author's intention and the text's context.<sup>1</sup> It is also an Asharaya of Kalpana, as explained by Arundatta, the commentator of Ashtanga Hridaya, in his commentary Sarvanganasundara. He enumerates 20 types of Arthashraya.<sup>2</sup> Instead, Shankar Sharma, in his book Tantrayuktī, lists 21.<sup>3</sup> These tools act as guiding principles for understanding the textual structure, metaphors, therapeutic logic, and contextual implications embedded in Ayurvedic literature.

Table 1: Types of Arthashraya explained by Arundatta <sup>4</sup>

SN	Arthashraya	SN	Arthashraya
1.	Adilopa	11.	Samantantra Pratyaya
2.	Madhyalopa	12.	Partantra Pratyaya
3.	Antalopa	13.	Hetu Hetukdharma
4.	Ubhayapada lopa	14.	Karya Karandharma
5.	Adimadhyantalopa	15.	Aadvanya Viparyaya
6.	Varnopajanan	16.	Shabdanyatva
7.	Rishiklishta	17.	Pratyaya Dharmā
8.	Tantrasheel	18.	Upnaya
9.	Tantrasadnya	19.	Sambhav
10.	Prakrut	20.	Vibhav

In the context of Chikitsasthana, the use of Arthashraya becomes valuable in interpreting:

- Polysemous terms (words with multiple meanings)
- Implicit treatment protocols
- Therapeutic choices not directly explained

- The rationale behind the sequence of procedures or formulation choices

Despite its brevity, the Chikitsasthana conveys detailed clinical wisdom. It is neither too short nor too elaborate, rather its composition mirrors the practical needs of contemporary clinical application. An Arhashraya-based study allows for a systematic unpacking of this wisdom, revealing the structural logic, internal coherence, and intertextual references, particularly those drawn

from Charaka Samhita, Sushruta Samhita, and other classical Shastras.

By applying Arhashraya, we gain a clearer insight into Vagbhata's selective integration of classical teachings, personal stylistic choices, and the layered meanings within sutras. Such a study bridges the gap between traditional Ayurvedic knowledge and modern clinical relevance, ensuring the preservation of its dignity and authenticity.

हिक्काश्वासादितं स्निग्धैरादौ स्वेदैरुपाचरेत्।  
आकृतं लवणतैलेन नाडीप्रस्तरसङ्करैः॥७१॥  
तैरस्य ग्रथितः श्लेष्मा स्रोतः स्वभैविलीयते।  
खानि मार्दवमायान्ति ततो वातानुलोभता॥७२॥

- च.चि. 17/71-72

तदार्थं च पर्व स्वेदैरुपाचरेत्॥१॥  
स्निग्धैलवेणतैलाकृततैः खेष ग्रथितः कफः।  
सलीनोऽपि विलीनोऽस्य कोऽठं प्राप्तः सुनिर्हरः॥२॥  
स्रोतसां स्यान्मृदुत्वं च मरुतश्चानुलोभता।

- अ.ह.चि. 4/1-2

Figure 1: Oleation and Sudation in Shwas-hikka patients explained by Charak and Vagbhat <sup>7,8</sup>

कृच्छ्रेव वातध्नतैलाकृतमधोनाभेः समीरजे।  
सुस्निग्धैः स्वेदयेदङ्गं पिण्डसेकावगाहनैः॥१॥

- अ.ह.चि. 11/1

Figure 2: Vataj Mutrakruccha (difficulty in urination) treatment <sup>10</sup>

पितातिसारी सेवेत पितलान्येव यः पनः।  
रक्तातिसारं कुरुते तस्य पितं सतृङ्जवरम्॥८२॥

- अ.ह.चि. 9/82

Figure 3: Treatment of bleeding diarrhoea <sup>12</sup>

लङ्घनं स्वेदनं कालो यवाग्वस्तिकृतको रसः॥२१॥  
मलानां पाचनानि स्युर्यथावस्थं क्रमेण वा।

- अ.ह.चि. 9/82

Figure 4: Order of treatment in Jwar (fever) <sup>14</sup>

ऋर्वगं बलिनोऽवेगमेकदोषानुगं नवम्।  
रक्तपितं सुखे काले साधयेन्निरुपद्रवम्॥१॥

- अ.ह.चि. 2/1

Figure 5: Prognosis of Rakta pitta vyadhi (disease) <sup>16</sup>

## DISCUSSION

### Examples

**Samantantra Pratyaya** - Samantantra pratyaya means to discover a scientific idea or concept from another scientific treatise on the same discipline.<sup>5</sup>

The person suffering from these conditions should be administered sweda (sudation therapy) first, anointing the body with oil mixed with saindhav. By these (oleation and sudation), the solid kapha, though adhering in the channels, gets liquified and moves into the alimentary tract to be expelled out easily, the channels become soft and maruta (Vata) gets its (normal) downward movement.<sup>6</sup>

Charaka has given the same treatment protocol for both Shwas and Hikka patients. Vagbhaṭa has quoted the same sutra from Charaka Chikitsasthana (17/71–72). Although Aṣṭanga Hṛudaya does not specify the exact type of Swedana (sudation) to be performed, Charaka mentions the use of Nadi (herbal steam therapy), Prastara (stone slab sudation), and Sankara Swedana (bolus sudation) for the management of Hikka and Shwas. (Figure 1)

Hence, Samantantra pratyaya can be applied here.

This Arthashraya allows cross-references from other Sthanas (sections) for clarity in Chikitsasthana treatment protocol.

**Adilopa** – Omission of the first word in the sentence.<sup>5</sup> In case of Kruchcha (difficulty) arising from Samira (Vata), the body of the patient should be anointed with medicated oil which mitigates Vata, the region below the umbilicus should be given fomentation either with Pindsweda (Warm bolus drugs), Seka (Pouring warm liquids), and Avgaha (Tub bath)<sup>9</sup>. (Figure 2) In this sutra, only the word kruchchha is mentioned. Arundatta, in his commentary, has explained it in the context of the vataj type of mutrakruchchha (difficulty in urination). Therefore, the word vataja is omitted (lopa).

Hence, the sutra can be understood and interpreted with the help of Adilopa Arthashraya.

This Arthashraya helps to identify and restore missing words, ensuring an accurate understanding of treatment protocol.

**Hetuhetuk Dharma** - To infer the Dharma after hearing or reading both the Hetu and hetuka.<sup>5</sup>

The patient of Pittatisara, who again indulges in things (food, etc.) which increase pitta, the pitta getting further increased, produces Raktatisara.<sup>11</sup> (Figure 3)

Here, Pitta dosha is hetu (major cause) for Rakta Atisara. Intake of Pitta aggravating foods like amla (sour), katu (pungent), vidahi (spicy), items during Pittaj atisara. That Hetuka (Pitta-kara Ahar) increases hetu, that is pitta, which leads to Dharma (phenomenon, characteristic, or Principle) called Rakta Atisara. Therefore, the Physician must remove both pitta-aggravating diet (hetuka) and pacify pitta (hetu) to prevent the progression of Rakta Atisara (bleeding diarrhoea).

Ensures complete understanding of disease causation and layered treatment planning. Avoid partial treatment that only addresses the immediate cause without removing its origin. In the treatment context, understanding both levels helps in root cause eradication rather than symptomatic relief.

**Karyakaran Dharma** - To mention an effect as a cause and cause as an effect in a secondary sense.<sup>5</sup>

Langhana (fasting), Swedana (sudation, diaphoresis), kala (awaiting Time), Yavagu (drinking of thin Gruel), use of Tikta rasa (bitter taste) and pachan Dravya (carminatives) which pacify the doshas, should be administered either as suitable to the stages (of fever) or in successive order.<sup>13</sup> (Figure 4)

Here, Langhana (fasting) is indicated in the Chikitsa Sutra of jwār (fever) for the removal of dosha (bodily humor), which is stated as an effect but treated as a cause.

In actuality, the Karana (cause) is that Langhana improves Agni (digestive fire) and digests Ama (toxins). The Karya (Effect) is that balanced Agni leads to the elimination of dosha. After applying Arthashraya, it becomes clear that Langhana works indirectly by correcting Agni and facilitating the Pachan (digestion) of Ama, which then removes the doshas. Thus, Arthashraya clarifies the Logical chain.

**Prakrut**- The Meaning of the term is to be understood according to the context.<sup>5</sup>

Raktpitta which is of upward direction (bleeding from the upper parts of body such as nose, mouth, ears) seen in a Balwan (strong) person, with mild bouts of bleeding, produced by any one dosha, of recent onset, appearing at a favourable time (Hemant and Shishir Rutu) and having no complications (secondary affections) should be treated.<sup>15</sup> (Figure 5)

In this sutra, the word Nava is mentioned. The term Nava has two meanings: new and nine. In this context, the appropriate meaning to consider is new. Hence, the Prakrut Arthashraya is applied.

From the examples, it becomes evident that sutras often carry layered meanings. These meanings are not always shabdashaḥ (literal or word-to-word); rather, they require interpretation based on syntactic structure, contextual relevance, and intertextual references. This is particularly vital in the Chikitsasthana, where clinical applicability depends heavily on factors such as Desha (region), Kala (time/season), Bala (strength), and Rogibala (patient's vitality).

Although it may appear like other interpretative tools at times, it carries unique applications and implications that justify its separate recognition. While Tantrayukti provides the structural and grammatical framework for textual analysis, Arthashraya delves into the underlying essence and purpose behind the use of specific words or phrases. These tools help in revealing the subtle and often hidden meanings embedded within the sutras. Within Arthashraya, certain applications resemble those of Tantrayukti.

For instance:

Varnopajnana<sup>5</sup> relates to Vakyashesha tantrayukti<sup>17</sup>, which involves understanding the meaning from incomplete sentences. Upanaya<sup>5</sup> reflects Prasanga Tantrayukti<sup>18</sup>, connecting the subject matter to a related context. Adyanta Viparyaya<sup>5</sup> aligns with Pratiloma Vyakhyā<sup>19</sup>, where the order of terms is reversed for interpretative purposes. Sambhava<sup>5</sup> links with Adhikarana tantrayukti<sup>20</sup>, inferring meaning based on context and possibility. Vibhava<sup>5</sup> refers to interpretations where the content is incomplete and requires supplementation.

Beyond these, certain concepts hold even greater practical significance for medical interpretation, such as Karyakarana Dharma (understanding cause-effect relationships), which is not an error, but an intentional stylistic or logical tool to convey a concept. This helps in understanding the therapeutic mechanism correctly, which is vital for clinical application.

Hetu-Hetukadharma (logical reasoning between cause and effect) clarifies layered causation in diseases and prevents the misinterpretation of the cause-and-effect relationship. Tantrashila (mode of exposition followed by the author), Samantantra Pratyaya (parallel references), Paratantra Pratyaya (dependence on other sources), Shabdantya (synonyms), are some of the frequently found Arthashraya in Chikitsasthana.

These tools enhance the physician's ability to interpret sutras in a manner that is contextually accurate, clinically applicable, and aligned with the original intent of the author. Those who attempt to apply Ayurvedic wisdom clinically must equip themselves with these interpretative tools. Mere word-to-word translation is inadequate without understanding and grasping the foundational Artha (meaning) behind the shlokas.

## CONCLUSION

This conceptual study reveals that Arhashraya serves as an indispensable tool in interpreting the multilayered meanings within the Chikitsasthana of Ashtanga Hridaya. It goes beyond conventional, literal exegesis by providing context-sensitive, linguistically coherent, and philosophically aligned interpretations of therapeutic sutras.

Unlike basic grammatical or structural tools such as Tantrayukti, which focus primarily on sentence construction and syntactical arrangement, Arhashraya delves into the Artha, the core intention or essence behind the words. By applying various types of Arhashraya, the practitioner or scholar can uncover the rationale behind therapeutic choices, identify implied instructions, and connect cross-references from parallel treatises like the Charaka Samhita or Sushruta Samhita.

This interpretative method is especially crucial in clinical Ayurveda, where a superficial understanding may lead to inappropriate or incomplete treatment. Understanding the logic behind omitted words (Lopa), context-specific meanings (Prakrut), and intertextual citations (Samantantra Pratyaya) enables a more precise application of therapeutic principles, tailored to the individual patient's Desha (region), Kala (season), and Rogibala (patient strength).

Moreover, the study highlights how Arhashraya safeguards the authenticity of Ayurvedic knowledge by preserving the author's original intent (Tantrashila) and the philosophical coherence of classical texts. It also bridges the gap between ancient wisdom and contemporary clinical needs by offering a systematic framework to interpret Ayurvedic texts in a modern, rational, and scientifically informed manner.

In essence, Arhashraya does not merely assist in understanding Ayurvedic sutras; it transforms how we read, internalize, and apply them. It serves as an intellectual lens that brings clarity to complexity, ensuring that the timeless principles of Ayurveda remain both comprehensible and clinically viable in the ever-evolving field of healthcare.

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