



Review Article

www.ijrap.net

(ISSN Online:2229-3566, ISSN Print:2277-4343)



A REVIEW ON PRESERVATION OF OJAS AS GUIDING PRINCIPLE OF PRAMEHA CHIKITSA

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Received on: 13/11/25 Accepted on: 05/1/26

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DOI: 10.7897/2277-4343.17137

ABSTRACT

In Ayurveda, the concept of Ojas occupies a central position as it sustains vitality, immunity (Vyadhikshamatva) and the integrity of Dhatusara (essence of bodily tissues). Prameha (Diabetes mellitus) is described as a santarpanjanya vyadhi (obesity and metabolic dysfunction oriented tridoshaja vyadhi) with depletion of dhatus (bodily tissues) and Ojas at its core. This paper explores the interface between Ojas and the pathogenesis of Prameha (Diabetes mellitus), proposing that preservation of Ojas should serve as a guiding principle in Prameha Chikitsa (Treatment of Diabetes mellitus). It outlines Ayurvedic understanding of Ojas: its definition, types (para and apara), etiological factors of depletion (Ojokshaya) and its correlation with immunity and vitality. The pathophysiology of Prameha (Diabetes mellitus) is examined with regard to dosha, dhatu (bodily tissues) involvement and srotorodha (Obstruction of body channels), integrating both domains to highlight Ojas depletion as a key pathogenic mechanism. Preservation of Ojas thus informs therapeutic strategies involving nidana- parivarjana (removing the etiological factors of diseases, ahara-vihara (diet and regimen), sodhana (Purificatory therapies), samana (Palliative therapies) and rasayana (rejuvenation) to restore vitality. Specific measures include nourishing diets like snigdha (Unctuous), Madhura (Sweet), laghu ahara (light diet), adequate sleep, use of rasayana (rejuvenative) formulations and appropriate timing of sodhana (Purificatory therapies) to prevent further loss of Ojas. Prameha (Diabetes mellitus) should not be viewed merely as glycaemic or metabolic disorder but as an Ojas- depleting condition requiring an integrative approach. Conservation of Ojas prevents complications and dhatukshaya (Depletion of bodily tissues).

Keywords: Ojas, Ojokshaya, Prameha, Rasayana, Dhatukshaya, Vyayama, Pathya

INTRODUCTION

According to Ayurveda, health is obtained by the balanced functioning of the dosas (Vata, Pitta, Kapha) and dhatus (bodily tissues) and malas (waste products) which are the dushtas and proper functioning of agni (digestive fire). A subtle but vital substratum in this matrix is Ojas, which is the essence or subtle extract of the sapta dhatus (seven bodily tissues) and the repository of bala (strength), immunity and ayus (longevity) in the body¹. On the other hand, Prameha is described as a complex metabolic- urinary disorder (often correlated with type 2 diabetes, obesity, metabolic syndrome) characterized by excessive turbid urine, involvement of medas (adipose tissue), Kleda (moisture) and eventual depletion of dhatus (bodily tissues)². When Prameha (Diabetes mellitus) is left untreated, it will lead to serious complications and becomes difficult to treat. The convergence of these two- Ojas and Prameha (Diabetes mellitus) is associated with dhatukshaya (tissue depletion) and Ojokshaya (loss or derangement of Ojas) which undermines immunity and vital span. Hence this article argues for the principle, preservation and restoration of Ojas as a guiding principle in Prameha chikitsa (Treatment of Diabetes mellitus)

OJAS: CONCEPT, TYPES AND SIGNIFICANCE

Definition and nature of Ojas

In Ayurvedic classics, Ojas is defined as the finest essence of all the dhatus (bodily tissues), residing predominantly in the hrdaya (heart region) and distributed through the ten dhamanis (subtle

channels)³. It is said to be eight bindu (drops) in quantity in its primary form (Para Ojas) and of larger but secondary form (Apara Ojas) in circulation⁴. Ojas is described to have qualities similar to kapha. They are sita (cool), snigdha (unctuous), sthira (stable) with Madhura rasa (sweet) predominance. It supports muscle tissue (mamsa), sensory motor functions, mental stability, complexion and immunity⁵. In Ayurvedic texts it is mentioned that when Para Ojas is lost or vitiated arishta lakshanas (signs of impending death) manifest.

Types and Pathology of Ojas

Ojas is generally classified into two

1. Para Ojas- Eight drops (bindu) located in the heart, the ultimate essence.
2. Apara Ojas- ½ Anjali, flows through the ten subtle channels and supports bodily functions.

Pathologically, the main derangements of Ojas are described⁶.

1. Ojokshaya (reduction in quantity)
2. Ojovisramsa (falling/ weakening of Ojas)
3. Ojovyapad (qualitative derangement of Ojas)

Causative factors include trauma (abhighata), dhatukshaya (depletion of bodily tissues), anger (kopa), excessive exertion (shrama), hunger (kshut), shock (shoka), excessive sexual indulgence among others, excessive physical exercise (vyayama), due to anxiety (cinta), intake of un-unctuous (Ruksha) and less quantity (Alpa) of food, Habitual intake of food having only one taste (Pramitasana), excessive exposure to wind and sun (Vata-

Atapa), due to fear (bhaya), intake of un-unctuous drinks (ruksha panam), night vigilance (Prajagara), excessive excretion of kapha, rakta, sukra and mala, during old age and debilitating period (kala), due to demoniac seizures (Bhutopaghata)⁷. The Ojokshaya lakshanas include indriya daurbalya (weakness of sensory faculties), changes in the appearance of mala, moha (delirium), feeling of fear (bhibheti), extremely weak (durbala), worrying always (abhiksnam dhyayati), deranged luster (Duschyaya), Perversity of mind (Durmana), roughness in the body (ruksha), emaciation (Kshama) along with dhatukshaya (depletion of bodily tissues) symptom⁸.

ROLE OF OJAS IN IMMUNITY AND VITALITY

We can see that one of the modern interpretations of Ojas stresses that it has a significant role in immunity (Vyadhikshamatva) and tissue resilience. Deficient or vitiated Ojas is an important factor in the samprapthi (pathogenesis) of many diseases like Rajayakshma (Tuberculosis) and Madhumeha. Particularly a review on non-communicable diseases states that in Prameha (Diabetes mellitus) there is both quantitative and qualitative kshaya (depletion) of Apra Ojas, which correlates with increased susceptibility to infections and immune dysfunction.

Thus, the preservation of Ojas is not just a theoretical ideal but a practical therapeutic target which includes maintaining integrity

of dhatus (bodily tissues), preventing dhathu kshaya (depletion of bodily tissues), support immunity and enhancing general vitality.

PATHOPHYSIOLOGY OF PRAMEHA: NIDANA TO DHATUKSHAYA

Definition and Classification

In Ayurvedic classics, Prameha which is literally means “excessive urination” is due to over nourishment, sedentary lifestyle, excess kapha/ meda) characterized by prabhuta mootra (excess urine) and avila mootrata (turbid urine). Prameha is correlated with the spectrum of pre- diabetes, diabetes mellitus, metabolic syndrome and its complications.

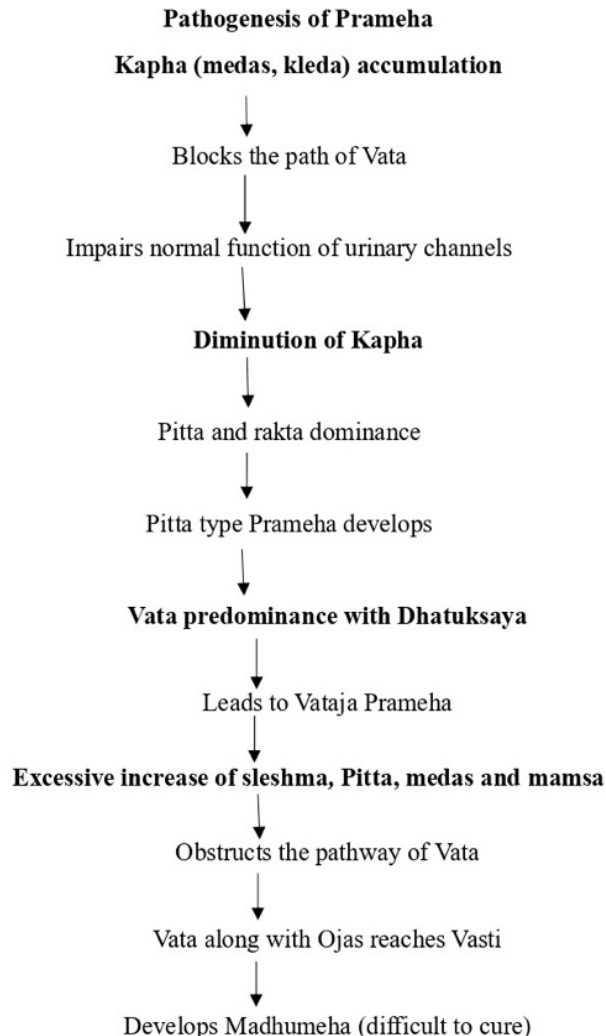
In Charaka Samhita, the disease is classified based on three dosas.

- Kaphaja (10 types)
- Pittaja (6 types)
- Vataja (4 types)

With each type having sub-types⁹.

NIDANA (CAUSATIVE FACTORS), DOSA-DUSHYA-DHATU INVOLVEMENT AND SAMPRAPTI

Causative factors include Sedentary lifestyle, excessive intake of heavy, unctuous, sweet, fatty and liquid foods, excess sleep, lack of exercise etc¹⁰.



In the samprapthi (Pathogenesis) of Vataja Prameha, it is seen that Vata takes along majja (bone marrow), ama (undigested), Ojas, lasika (watery fluid) etc. and drives them into the urinary bladder, thereby manifesting Hasti Meha, Madhu meha etc.

Dushyas include medas (adipose tissue), mamsa (muscle tissue), kleda (moisture), rasa, rakta, majja (bone marrow) and Ojas in advanced stages. Dhatukshaya (especially of shukra, majja) is significant in final stages.

DHATUKSHAYA AND OJAS DEPLETION IN PRAMEHA

There is progressive dhatukshaya (depletion of bodily tissues) and impairment in formation of dhatus (bodily tissues) due to the continuous outflow of dushyas into urine (moothra). At the same time, Ayurveda explains that Ojas is Madhura (sweet) in nature; when due to dryness (raukshya) Vata converts the sweetness of Ojas into astringent taste and carries it into bladder Madhumeha¹¹.

Thus, in Prameha (Diabetes mellitus) there is a dual pathology:

- Accumulation and vitiation of Kapha/ medas (adipose tissue)/kleda (moisture) leading to obstruction and metabolic dysregulation
- Eventual breakdown and loss of tissue and Ojas, leading to diminished immunity, vitality and onset of complications.

Diminution and morbidity of Aparaj Ojas characterize the pathogenesis of Prameha (Diabetes mellitus).

Hence, we can consider Prameha (Diabetes mellitus) in Ayurvedic terms as a disease where the preservation of Ojas is compromised; treatment strategies must therefore aim not just at glycaemic / metabolic control but also at conserving / driving the regeneration of Ojas.

PRESERVATION OF OJAS AS THERAPEUTIC PRINCIPLE IN PRAMEHA CHIKITSA

If we consider that loss/ derangement of Ojas is a key factor in the pathology of Prameha (Diabetes mellitus), then the therapeutic framework should focus on preserving and restoring Ojas. The following components are central.

Nidana- Parivarjana and Pathya- Apathya

The causative factors of Prameha and depletion of Ojas should be addressed for preventing further loss of Ojas.

Pathya includes Laghu (light), ruksha (dry), tikta (bitter)-kashaya (astringent)-katu (pungent) rasa foods; avoidance of heavy, sweet, unctuous, excess oily, regular exercise, avoidance of sedentary life.

Avoidance of apathya (contrary lifestyle) like excess sleep, laziness, overconsumption of sweets, heavy meals, late night habits which aggravate kapha, medas (adipose tissue) and thereby influence Ojas.

One can safeguard Ojas by stabilizing ahara- vihara (diet and regimen), protecting agni (digestive fire) and by allowing proper dhatu (bodily tissues) formation.

Appropriate sodhana (purificatory therapies) and timing

Both sodhana (purificatory therapies) and samana (palliative therapies) are indicated in the management of Prameha (Diabetes mellitus). But indiscriminate excessive sodhana (Purificatory therapies) can further exhaust Ojas and dhatus (bodily tissues). In Prameha (Diabetes mellitus) it is mentioned that after proper snehana (Oleation), Tikshna sodhana (Strong purificatory therapies) is done for balavan (strong), sthula (obese) persons¹². Hence in patients already showing the signs of depletion of Ojas, the physician must carefully do the sodhana (purificatory

therapies) with supportive rasayana (rejuvenation) and possibly reduce repeated excessive purifications so as not to aggravate loss of Ojas.

Rasayana chikitsa (rejuvenation therapy)

Rasayana chikitsa (rejuvenation therapy) is absolutely noted for its role in restoring dhatus (bodily tissues) and Ojas. Rasayana chikitsa (rejuvenation therapy) regulates dhatus (bodily tissues) and Ojas being important therapeutic targets. Diabetic mellitus (Prameha) reduces the strength of all dhatus (bodily tissues) and also reduces Ojas.

Rasayana dravyas (rejuvenative drugs) are necessary in diseases like Prameha (Diabetes mellitus) where dhatusara (essence of tissues) are lost in the form of mutra.

Thus, preservation and enhancement of Ojas in Prameha (Diabetes mellitus) require adjunctive rasayana (rejuvenative) therapy: eg: ghrta (ghee), madhu (Honey), aindra rasayana, nagabala ghrta, punarnavadi arishta and diet/ drugs with Ojovardhaka properties (milk, meat-juice, ghee) as referenced.

Diet, lifestyle and Vyayama (exercise)

Given the role of Agni (digestive fire) and dhatus (bodily tissues) in Ojas formation, diet and lifestyle are analytical.

Stresses on foods which are laghu (light), Snigdha (Unctuous) yet Madhura (sweet)- tikta (bitter) which promotes good digestion and nourishing dhatus (bodily tissues).

Ojo- promoting substances like milk, meat-juice, ghee.

By doing moderate vyayama (exercise) regularly we can reduce kapha-medas (adipose tissue) and thereby circulation and metabolism can be improved¹³. Thus, the stagnation of kleda (moisture) and kapha can be prevented otherwise it will block the formation of dhatu (bodily tissues) and thereby Ojas.

The depletion of Ojas can be prevented by ensuring adequate sleep (nidra) and managing stress (chinta, bhaya).

The balance of agni (digestive fire) and diet is maintained by following dinacharya (daily regimen) and ritucharya (seasonal regimen).

Monitoring lakshanas of Ojas and complications

Therapeutically it is useful to monitor the signs of Ojas status in addition to the metabolic parameters (blood- glucose, lipids): eg: complexion, voice clarity, mental stability, strength (dehabala) and symptoms of Ojokshaya (indriya duarbalaya, mana alasya, rukshata, dravata)

In addition, in Prameha (Diabetes mellitus), early intervention to prevent dhatukshaya (depletion of bodily tissues) and resultant loss of Ojas may reduce the risk of complications (neuropathy, immune suppression) often assigned to immune- metabolic compromise.

DISCUSSION

By highlighting Ojas preservation in the management of Prameha (Diabetes mellitus), several integrative implications emerge. Beyond glycaemic control, while modern medicine and ayurvedic texts stresses metabolic control, if we only focus on urine sugar/ insulin/ glucose without addressing dhatus (bodily tissues) and Ojas, the deeper vitality may still erode, leaving the patient vulnerable to complications. Ojas is often compromised in Prameha (Diabetes mellitus) and rasayana (rejuvenation) approaches may improve outcomes. In patients with advanced Prameha (Diabetes mellitus), the dhatus (bodily tissues) may be depleted; hence, excessive purification without adequate rejuvenation will worsen Ojas. Therefore, therapy sequencing and safety are crucial- agni (digestive fire) should be first stabilized, kapha/ medas (adipose tissue) should be reduced through moderate purification and then rasayana (rejuvenative) therapy is

initiated. Since Ojas is strongly influenced by Ahara-vihara (diet and regimen), lifestyle adherence plays a vital role, underscoring the importance of sustained, patient-centric lifestyle modification rather than relying solely on pharmacotherapy. The preventive dimension of Ojas enhancement- through good digestion, proper diet, exercise and sleep- may help prevent Prameha (Diabetes mellitus) in individuals at risk like those who are obese or sedentary. Although Ojas is subtle and not directly measurable in modern labs, combining Ayurvedic assessments (Dehabala, Indriyabala and satvabala) with modern biomarkers may support a more holistic and integrative approach to Prameha (Diabetes mellitus) management.

CONCLUSION

The concept of Ojas in Ayurveda offers a profound lens through which to view diseases like Prameha (Diabetes mellitus) not simply as metabolic disorders but as conditions of vitality drain; dhatukshaya (depletion of bodily tissues) and immuno metabolic collapse. By articulating a therapeutic framework whose guiding principle is the preservation (and restoration) of Ojas, Ayurvedic practitioners can address not only glycemic/microbial endpoints but the deeper layers of vitality, immunity and lifespan. An Ayurvedic physician may help to arrest progression can improve resilience and reduce complications in Prameha (Diabetes mellitus) by empowering lifestyle, dietary, therapeutic interventions which conserve Ojas. Further empirical research is encouraged to operationalize Ojas- oriented outcomes in Prameha (Diabetes mellitus) management.

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Cite this article as:

Reshma Ajith and Jishnu R. A Review on preservation of Ojas as guiding principle of Prameha Chikitsa. Int. J. Res. Ayurveda Pharm. 2026;17(1):211-214
DOI: <http://dx.doi.org/10.7897/2277-4343.17137>

Source of support: Nil, Conflict of interest: None Declared

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