

CLINICAL IMPORTANCE OF VYADHI SANKARA- A REVIEW

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ABSTRACT

The main aim and objective of Ayurveda is to maintain the health of *Swastha Purusha* and to eradicate the diseases of *Atura Purusha*. For this purpose, the diagnosis of diseases is very important and for this purpose *Nidana Panchak* plays a vital role which has been explained elaborately in *Nidanasthana* of Charaka Samhita. In the same section, there is mentioned about the concept of *Sankara* which is one of most ignored, but is very useful tool for diagnosis of a diseased condition as per ayurvedic principles. The concept of *Vyadhi Sankara* which has been explained at the end of *Nidanasthana* of *Charaka Samhita* plays an important role for diagnostic approach for many diseases. The word *Sankara* further explained as *Hetu-Sankara*, *Linga-Sankara*, *Chikitsa-Sankara* & *Vyadhi-Sankara*. Here, out of these four types of *Sankara*,

Vyadhi Sankara has been explained to understand its importance for the differential diagnosis of the various disease as per Ayurveda. *Vyadhi Sankara* is a group or collection of two or more disease showing clinical presentations at a similar time.

KEYWORDS: *Atura, purusha, Nidanpanchak, Vyadhi Sankara.*

INTRODUCTION

In Ayurveda, the healthy as well as diseased state of a person is totally dependent on the fundamental principle of *trisuotra*^[1] i.e. *Hetu*, *Linga*, and *Aushadha* as well explained by

Acharya Charaka in his texts. For better understanding & treating the *Atura Purusha*, *Acharya Charaka* has explained his concepts in different *sthana* (sections) of his text, like the *Nidanasthana*, *Chikitsasthana* and *Siddhisthana*. In *Nidanasthana* he has mainly explained the etiopathogenesis of eight diseases which form basic platform for understanding & curing all those diseased states as explained by *Acharya Charaka* in his texts. While explaining *nidana*, *poorvaka*, *samprapti* (etiopathogenesis) of *Apasmara* in *nidanasthana*, *Acharya Charaka* has also given the concept of *Sankara*^[2] and highlighted the importance of it in understanding and analysing the different diseases in *Chikitsasthana*, but ironically the concept of *sankara* keeps less importance now a days. The word *Sankara* is used by *Acharya Charaka* in different ways as *Hetu-sankara*, *Linga-sankara*, *Vyadhi-sankara* and *Chikitsa-sankara*.^[3] As per *Acharya Charaka*, *Hetu-sankara* helps in better understanding of different aspects of *nidana* in causation of a disease, while *Linga-sankara* helps in analysing differences between symptoms and a disease and how the same or different symptoms are manifested in one or many diseases. *Vyadhi-sankara* has been found helpful in making differential diagnosis when more than two presentations are seen at a time.

What is *Vyadhi Sankara*?

According to *Acharya Chakrapani*, *Vyadhisankara* means *Vyadhimelaka* (mixture or combination or group of two or more diseases) and said as *kricchratama* (most difficult to treat) which happens because of - (1) *prayoga-aparishuddhatwat* (improper treatment strategies) which is seen as –“*Amaatisaare sthambhanamkrutam dosham samsthabhya shoola anaaha adhmanaadi janayet*”^[3] & (2) second causative factor for *Vyadhi Sankara* is *Anyonyasambhavaat* means *parasparakaranaropaatwat* (one causing another or caused from pre-existing condition)^[3] eg-*pratishyaayohi swaropena eva kaasa syakaaranamsa cha rajkshmina*.^[3] As per *Acharya Charaka*, *shuddhastushamyet-yonakopyet* (treatment adopted, should alleviate the present imbalance in *doshas* and *dhatu*s and should never lead to aggravation of another *dosha* or a new disease). So, we can say that if given treatment is not *shuddha*(proper), it can lead *Vyadhi Sankara*. To understand *Vyadhi Sankara*, the knowledge of *nidanarthakararoga* and the concept of *Upadrava* is very essential.

Understanding *Nidanaarthakara Roga*—according to *Acharya Charaka* when one disease become the cause or *Nidana* for another disease i.e, act as *vyadhijanaka* of other disease then it is known as *nidanaarthakararoga* the word *nidanaarthkararoga* as per *chakrapani* means

nidanasyarthamprayojanam, vyadhijananaamtatkarotiitinidanarthkarah which can be seen as follows- (ch.ni.8/16-19)

- **Jwara**→**raktapitta**→**shosha**
- **Plihavrudhi**→**udararoga**→**shosha**
- **Arsha**→**udararoga**→**gulmaroga**
- **Pratishyaya**→**kasa**→**kshya**→**shosha**

The above description also shows that *nidana* is the entity which is responsible for the causation of a disease and when a disease itself becomes a causative factor for some other disease, then it is called as *nidanarthakararoga*.

Concept of *Ekaarthkari* and *Ubhayarthakari* – the primary disease which now exists as *nidana* or *hetu* may or may not continue to exist with the secondary disease. According to *Acharya Chakrapani*, if the *hetu* which causes the *vyadhi* subsides after the onset of secondary disease then it is known as *Ekaarthkari* and if it exists after the onset of secondary disease then it is known as *Ubhayarthakari*.

Concept of *Upadrava* (complications) – the clinical presentations that are found in *roga-uttarkala* (not along with the main disease) are called as *upadrava*. These presentations are due to *dosha-dushyassammurchhna* of the primary disease only, so they also have similar etiological factors as that of the primary disease.^[4] According to *madhavnidana*, “*tatra upadravo rogaarambhka doshaprakopajanyo anyovikara*”.

Also, *upadrava* is an episode which develops after the manifestation of main disease and subsides by giving treatment to main disease. Treatment is not antagonistic to main disease, but in certain cases, *upadrava* needs special attention towards treatment as *upadrava* are much more difficult to treat as they appear in a diseased body severe *upadrava* require immediate care.

Understanding “*prayogaaparishuddhatwat*” with examples

- In context of *navajwara*, *sadyovamana* (emesis) leads to *hrudroga* (heart disease) this is because of *doshaanutklishhta* stage i.e, *dosha* are not ready to be expelled out. “*Kaphapradhanaanutklishhtaandoshaanamashayasthitaan*”^[5] these are the consequences for performing *sadyovamana*, in case of *navajwara*, though there is *dosha* in *amashaya* if

it is not *utklishta* and *chalayamana*, (ready to be expelled and movable), administration of emesis would lead to *hridroga*, *swasroga*, *anah* etc.

- In *Raktapitta*, if *stambhana* is done in *raktadusti* then it will lead to *galagraharoga*.^[6] In the treatment of *Raktapitta*, *langhana* (fasting) is the first line of treatment^[6] because the initial stage of *Raktapitta* may be associated with *Ama* (intermediary component). If *stambhana* is done without *saamadoshapachana* (metabolism), then it will lead to *Galagraha*, *pootinasa*, *moorcha*, *aruchijwara*^[6] and so on.
- In *visarpa* (erysepalis), intake of medicated ghee in *bahudosh*a stage leads to suppuration of *twakmansarudhira*. Andifghee is given without administering suitable purificatory therapies like *vamana/virechana* (based on location and *doshic* dominance), then it will also cause suppuration of *twak* and so on.^[7]

Thus, above discussion reveals that if the given treatment is not *suddha* (proper), it will lead to *vyadhisankara*.

Examples of Anyonyasambhavaat – due to some similarities in *nidana/ dosha/ adhisthana(dushya)* it is the tendency of a disease to cause another disease. E.g., *pratishyaya* leads to many diseased conditions.^[3]

Vyadhisankara is nothing but a presentation of two or more diseases together but these presentations can be mistaken with *nidanarthakararoga* or *upadrava* so it is very essential to differentiate among them, for doing this following points to be considered –

1. Co-existence of two or more diseases may be considered as *nidanarthkararoga*.
2. If primary disease subsides after causing a secondary disease then it is called as *nidanaarthkararoga*.

Explanations of Nidanarthkararoga

1. *Jwarasantapaatraktapittamudeeryate*^[8]– (i.e. *jwara* causes *raktapitta*) but how one can differentiate it from *upadrava*? The answer to this is, as *nidanas* for both of these conditions are *ushnaaaharaviharasewana* and also if in *jwara*, the same *nidanasewana* carried out excessively it also shows some affliction to other *adhisthana* of *rakta* and causes *vigunta* making it more favourable for causing *raktapitta*. So, if a disease targets another *dushya* or *adhisthana* then concept of *nidanarthkararoga* is to be considered.
2. *Arshebhyojathara*^[8]– (i.e *Arsha*, causes *jathararoga*) as we know that *Apanavayudushti* causes *arsharoga* which further causes *apanadushti* creating a vicious circle.^[9]

Apanadushti is an important component in *samprapti* (pathogenesis) in *jathararoga*. Formation of *Arsha* causes a change or *dushti* in *Apanapradesha* (lower abdomen), leading to manifestation of *jathararoga* and finally to *udararoga* (ascites). It is also important to know that a disease can produce another disease only when there is the presence of *sakaharibhava* (supportive/conductive factors) that is why *nidanans* are specific for specific diseases. we have seen the co-existence of two or more diseases in *upadrava* as well, due to continuation of *nidanasewanaupadravas* are caused by dosha-dushya of primary roga only. This differentiates *upadrava* from *nidanarthakararoga*. Nidanasewana if continued, affect *dosha* and *dushya*(upto deeper levels) of the disease leading to complications in terms of severity and prognosis. For example – *Upadrava of vatarakta*^[10] – *aswapnaarochakashwasamamsakothashirograha* and so on, these presentations are the offshoots of same *dosha* and *dushya*. So, by looking at,

1. *Dushya* (*dhatu*, the bodily constituents) involved in primary and secondary roga.
2. *Nidanans* (etiological factors) of the two diseases, one can decide whether the condition is a *nidanarthakararoga* or an *upadrava*.

The importance of this differentiation is necessary as, the concept of *nidanarthakararoga* is important to see the manifestation of the secondary disease.

If it is an *upadrava*, then separate line of treatment need not be planned, as *upadravas* are the only offshoots of the primary disease and will get subside with the subsidence of primary disease unless these are not severe, only worst and complicated forms of *upadrava* need special attention and treatment first, and the primary disease to be attended their after.

Why is the concept of *Sankara* explained in *nidanasthana*?

This probably is based on *trisutrasiddhanta*.^[1] i.e., *Hetu*, *Linga* and *Aushadha* and extended and essential part of *hetu* (cause), *linga* (symptom) is *Vyadhi* And *Acharya Charaka* has clearly mentioned that clear distinction between *linga* (symptom) and *vyadhi* (disease) has to be made.^[11,12] To differentiate symptoms and disease clearly *Vyadhisankara* has been separately mentioned. In *sutrasthana*, *trisutra* has been explained as having importance in healthy as well diseased person. But while dealing with *Sankara* it is exclusively for the diseased conditions. This is the reason why it has been explained in *nidanasthana*.

Also the concept of *nidanarthakararoga* is described before *vyadhisankara*, as there is a thin line of distinction between these two concepts and because of the closeness of these two

concepts, *nidadanarthakararoga* is mentioned first and after that only the tools to understand a disease i.e *Hetu* and *Lingasankara* have been explained.

Highlighting differences between *Nidanarthakararoga* and *Vyadhisankara*

This can be betterly explained by understanding the concept of *Ekaarthakari/Ubhayaarthakariroga*, from above discussion, we have got the idea as if a disease leads to another disease and self gets subsides, then it is *nidanarthakararoga* and if it i.e primary disease exist with secondary disease then this condition is known as *vyadhisankara*.

If *jwara* is caused due to *ushnanidanasevana*, which in presence of supporting factors leads to *Raktapitta*, then *jwara* becomes the *Nidanarthakararoga* of *Raktapitta*, here the *ushnanidanasevana* (causative factors) are common to both diseases along with *sahakaribhava* (supporting/conductive factors) which leads to the menifestations of *Raktapitta*. But, if only *ushna* and *jwaranidas* are continued without the *sahakaribhava* it should have led to *upadrava* of *jwara*. The primary disease i.e, *jwara* affects almost every *adhishthana* of its provocation and due to the presence of specific causative factors and in the presence of *sahakaribhava* (supporting/conductive factors) lead to *Raktapitta*. Concept of *nidanarthakararoga*, mainly helps in diagnosing the disease, thus with the help of concept of *nidanarthakararoga* we can get the idea of present conditions without much bothering of past history of the present disease. Due to the specific *nidanasevana*, *moolavyadhi* (primary disease) will affect another *adhishthana* (*nidana* specific) leading to some other disease. As mentioned earlier it helps in foreseeing the secondary disease.

For example, *pleeha*, *arsha*, *grahani* causing *udararoga*.^[13,14] Differences between *nidanarthakararoga* and *vyadhisankara* are depicted only because of *aparishuddhachikitsa* and *anyonyasambhavaat*. Though mentioned specifically for *vyadhisankara* it is applicable to *nidanarthakararoga* also, because *pratishyayaatbhavetkaasa*^[8] is the example for *anyonyasambhavaat* and *jwarasantaapaatraktapittamudeeryate* or *stambhana* in *amatisaara* leads to *shoola* etc. is for *aparishuddhachikitsa*. By seeing these two conditions, if existence of both diseases at one time happen then it will be *vyadhisankara (ubhayarthakaari)*^[15,16] and if primary one subsides after causing secondary then it is *nidanarthakararoga*. Hence *nidanarthakararoga* can be considered as *ekarthakaari*^[15,16] *roga* and *vyadhisankara* as *ubhayarthakaariroga*.

CONCLUSION

We have seen that *Vyadhisankara* is a collection of two/more presentations. This can be mistaken with either *upadrava* or *nidanarthakararoga*. With the help of present article an attempt has been made to understand the basic classical differences between *vyadhisankara* and *nidanarthakararoga* and to use these concepts clinically, thus *vyadhisankara* can be helpful in prognosis and planning treatment protocol. This *vyadhisankara* can happen due to *nidanarthakararoga* or as a result of *upadrava* differentiating these two concepts gives clarity in planning right treatment strategies.

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