

ROLE OF CHARDHIVEGA DHARANA IN CAUSATION OF ROGA

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ABSTRACT

The human body is a complex system, with a number of ways to balance or eliminate the harmful materials out of the body. In order to facilitate this, body is equipped with urges that appear naturally. They are termed as *Vega*. *Chardi* is one among *Vega*. Our classics very well explained that all kinds of *vegadharana* will definitely produce a disease including different systems. During the act of vomiting contents from the stomach regurgitate upwards and get out to expel through oral cavity to cause gastric emptying. Normally it is a defense mechanism to throw out foreign or undigested material from stomach facilitating gastric cleansing. If the contents are withheld without throwing it out the outcome will be in the form of diseases. Common diseases produced due to *dharana* of *chardi* will be discussed in article.

KEYWORDS: *Chardi, Vega, Roga, Vomiting.***INTRODUCTION**

Chardi is the word used to describe vomiting sickness but the word *Vamana* signifies one of the therapeutic measures. *Charaka* frequently uses the word *Vamana* as the substitute for the word *Chardi* to comply with the chandas of the *shlokas*.

***Rogaha Sarve Api Jayante Vega Uderana Dharana*^[1].....** This *shloka* from *Astangasangraha* clearly suggests that all kinds of diseases are possible from forceful expulsion and withholding of *Vegas*. On the basis of this 2 terms have been used like *Dharaneyya* and *Adharaneyya vegas* i.e one which has to be suppressed and the other which has to be expelled respectively. Any disturbance in this will lead to *utpatti* of *roga*.

AIMS AND OBJECTIVES

To study the role of *Chardi Vegadharana* in *Roga utpatti*.

MATERIALS AND METHODS

Charaka Samhita, Sushruta Samhita, Astanga Hridaya, Astanga Sangraha, Madhava Nidana, Pathology, Internal medicines and other internet sources have been utilized to compile the role of *Chardi Vegadharana* in causation of disease.

DERIVATION

According to Shabdastomanidhi- *Chadayati Mukham Ardhayati Angani Iti Chardi*.

Chad+Arda

Chadayan(Poorayan)- To fill up

Ardhayan(Peedayan)- To compress

Chad Apavarane Arda Himsayam- To fill up with compression.

That which fills up the mouth accompanied by compression and pain during the impulse of vomiting is called *Chardi*.

DEFINITION

*Chadayan Ananam Vegai Ardayan Angabhanjanai |
Niruchyate Chardihi iti Dosho Vaktrat Vinischaran||*^[2]

When the *Dusta doshas* move up in the oral cavity and they are expelled through the mouth distressing the body along with a sensation as if the body parts were being broken, it is therefore called as *Chardi*.

By the above *nirukti* we can conclude that *prakupita doshas* gets accumulated in the *Annavaha Srotas* especially in the *Amashaya*. This is pushed upwards by the aggravated *vata* which cause the expulsion of already accumulated *doshas* from *Amashaya* through *mukha* called as *Chardi*.

Basic Etiology

What is *Karma* ?

Vaak, Mana and *Shareera Pravrutti* is generally termed as *Karma*.

Vegadharana is important and common *Shareera Mithyayoga*.^[3]

So it has to be considered that other than so many causative factors for Chardi Vegadharana *Prajnaparadha* acts as the crucial *Nidana* leading to *Roga utpatti*.

Important diseases due to *Chardi Vega Dharana*

Twak Vikaras

Visarpa kota kusta Akshi Kandu Pandu Amayajwaraha/

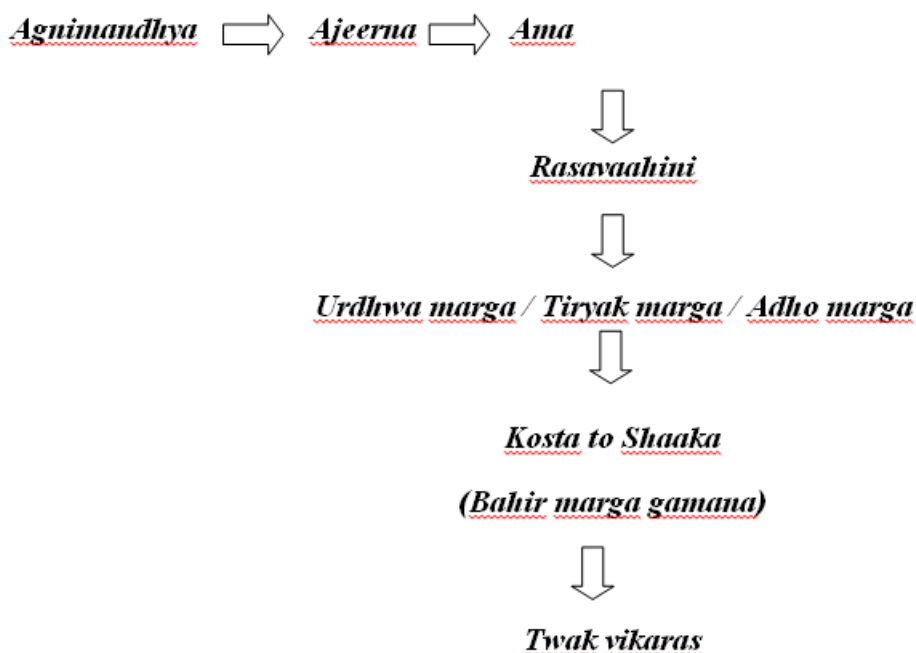
Sa Kasa Shawasa Hrillasa Vyanga Shwayathavo vame/^[4]

Kandu Kota Aruchi Vyanga Shota Pandu Amayajwaraha/

Kusta Hrillasa Visarpa Chardi Nigrahaja Gadaha/^[5]

These references give us an idea that basically and very importantly Skin manifestations are very common due to *Chardi vega dhara* along with other systemic diseases.

Due to the *nidanas* like *Akaala, Atimaatra, Asatmya, Shrama, Udwega, Atidruta bhojana etc*



Twak vikaras

These are based on the quantity of dosha & layer of twacha involved ex: If *Tamra & Vedini* then *Kusta, Kilasa & Visarpa*.

Other possibilities are

Pitta + Rakta- Twak sarpana leads to Visarpa.

Pitta+ Rakta- Twak Avasthana leads to Pidaka.

Pitta+ Rakta- Twak Shoshana leads to Neelika & Vyanga

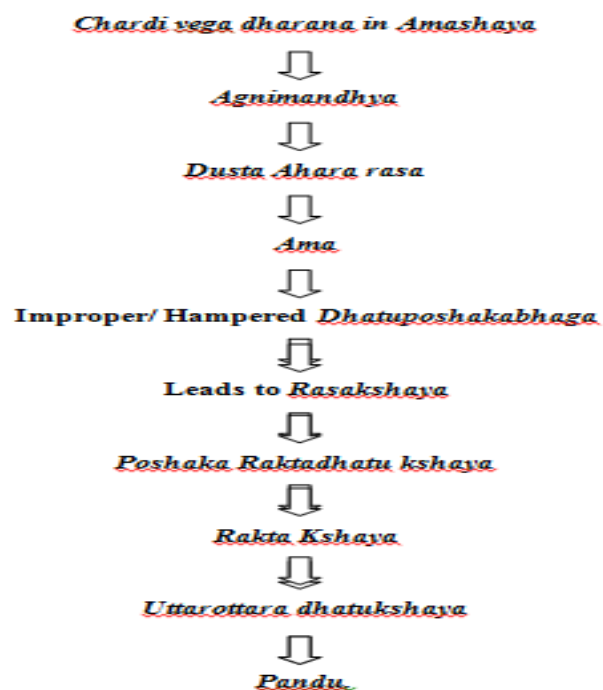
Shotha

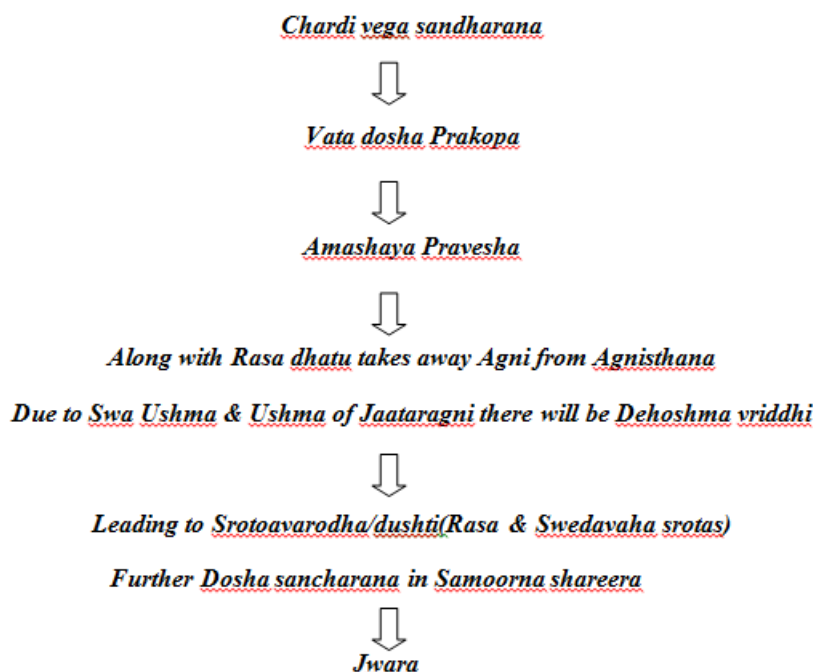
*Bahyaya Siraaha prapya yadaa kapha asrik pittani sandoshayateha vayuhu /
Tairbaddhamargaha sa tada visarpan utsedhalingam shwayathuhu karoti //*^[6]



Chardi vega dharana as a nidana for Nija Shotha is mentioned in Trishothiya adhyaya of Charaka.^[7]

Pandu



Jwara**CONTEMPORARY VIEW**

Vomiting is the abnormal emptying of the stomach & upper part of intestine through Oesophagus & mouth. Center for vomiting during motion sickness & vomiting induced by drugs is on the floor of fourth ventricle which is called chemoreceptor trigger zone. Center for psychic stimuli induced vomiting is in cerebral cortex.

Causes

Presence of irritating contents in the GIT.

Mechanical stimulation of the pharynx.

Excess alcohol intake, pregnancy, nauseating sight, odour or taste.

Unusual stimulation of labyrinthine apparatus as in the case of sea sickness, air sickness etc.

Metabolic disturbances, intake of drugs, UTI's & other GI disorders.

Mechanism of vomiting

3 Stages

1. Nausea- Vomiting is always preceded by nausea. Nausea is the unpleasant sensation which induces the desire for vomiting. It is characterized by secretion of large amount of saliva containing more amount of mucus.

2. Retching- Strong involuntary movements of the GI tract starts even before actual vomiting & intensify the feeling of vomiting. This condition is called retching.

3. Act of vomiting-Series of events occurs here

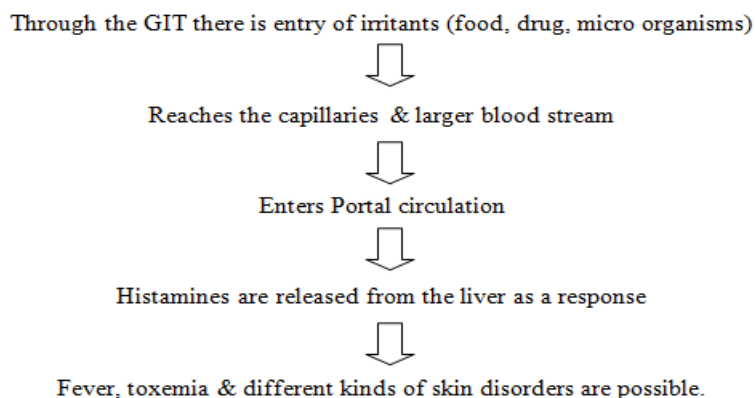
- a) Beginning of antiperistalsis which runs from ileum towards the mouth through the intestine pushing the intestinal contents into the stomach within few minutes. The velocity of antiperistalsis is about 2-3cm/sec.
- b) Deep inspiration followed by temporary cessation of breathing.
- c) Closure of glottis.
- d) Upward & forward movement of larynx & hyoid bone.
- e) Elevation of soft palate.
- f) Contraction of diaphragm & abdominal muscles with a characteristic jerk resulting in elevation of intra abdominal pressure.
- g) Compression of stomach between diaphragm and the abdominal wall leading to rise in intragastric pressure.
- h) Simultaneous relaxation of lower esophagus sphincter, esophagus & upper esophageal sphincter.
- i) Forceful expulsion of the vomitus through the esophagus, pharynx & mouth.

During the entire process of vomiting some movements play an important role by preventing the entry of vomitus through the other routes & thereby prevent the adverse effect of vomitus.

1. Closure of glottis and the cessation of breathing prevent the entry of vomitus into the lungs.
2. Elevation of soft palate prevents the entry of vomitus into nasopharynx.
3. Larynx & hyoid bone move upward & forward and are placed in this position rigidly. This causes the dilatation of the throat which allows free exit of vomitus.

How suppression of vomiting leads to disease?

This can occur basically by different mechanisms



Suppression of vomiting resulting in breathing difficulty & cough

Gastro-oesophageal reflux resulting in heartburn affects approx 30% of the general population & its increasing day by day. Occasional episodes of gastro-oesophageal reflux are common in health (Davidson's) which we can compare with the *vega*.

Reflux is normally followed by oesophageal peristaltic waves which efficiently clear the gullet, alkaline saliva neutralises residual acid and symptoms do not occur.

GERD develops when the oesophageal mucosa is exposed to gastroduodenal contents for prolonged periods of time resulting in oesophagitis and symptoms develops.

Along with heartburn & regurgitation cough and difficulty in breathing also develops.

CONCLUSION

The process of elimination of *Vega* is a chain reaction initiated and carried out by the nervous system. Suppressing or withholding it not only alters the normal physiology but also brings about strain and disorders of different systems leading to manifestation of various forms of diseases.

Suppression of *Adharaniya vega* acts as *viprakrista nidana* mostly rather than *sannikrista nidana* in manifestation of disease. Certain *lakshanas* are definitely possible in acute period.

Present lifestyle and working patterns are main causes for *Vegadharana* in an individual further leading to many irreversible complications.

While mentioning about necessity of *shodhana* even in *swastha acharya* clearly mentions just as silt develops surely, in due course of time even in pure water kept undisturbed in a earthen pot, so also (dirt accumulates) inside the body, hence it should be removed from the body at appropriate times. In the same way *doshas* in *shareera* will go on becoming *leena* due to withholding of urges especially here *Chardi* and will start to show its *lakshanas* on particular occasion. In this way necessity of *Shodhana* therapy is highlighted and also indirectly *nidana parivarjana* which has to be followed is also understood.

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