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**Review Article** 

# A LITERARY REVIEW ON *ROGANIDAN* BY VAGBHATA: A CURSORY VIEW Abineet Raina<sup>1\*</sup>, Vishal Khanna<sup>2</sup>, Priya Puesh Pargotra<sup>3</sup>

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**KEYWORDS:** Astanga Hridaya, Astanga Sangraha, Kayagni, Pacakamsa, Trividha pariksha.

#### **ABSTRACT**

Vagbhata is one among the three classic writers of Ayurveda, along with Charaka and Sushruta. Vagbhata is believed to be writer of two important works Ashtanga Sangraha and the Ashtanga Hridaya The two texts straightforwardly acknowledge the strength of Samhitas of Caraka and Susruta and closely follow in the footsteps of the earlier masterpieces. Both these books are studied all over in India but they are more popular in South India. These texts are very popular till present era as they are easier to understand and contain essence of earlier treatises with original contribution. If we critically analyze the subject matter related to Ayurvedic diagnostics which has been added by Vagbhata then we will find that it forms important platform. This article deals mainly with the subject matter related to Ayurvedic diagnostics which has been added by the Vagbhata.

**Aims and Objectives:** To enlighten the basic concept of framework of *Nidana sthana* to its full perspective and the importance to the specific concept as well as the number of chapter given in *Nidana sthana*.

**Materials and Methods:** *Astanga Sangraha* and *Astanga Hridaya* are well known *Ayurvedic* compendium of post medieval period. These books were later on translated in many languages. For this present study multiple books have been referred. Causes of *Roga utpati, Nidana* as mentioned in different chapters of *Astanga Hridaya, Astanga Sangraha* have been screened and documented in a comprehensive manner under this study.

**CONCLUSION:** *Vagbhata* felt need of compiling in one treatise all the eight branches of *Ayurveda* and so with this aim *Astanga Sangraha* and *Astanga Hridaya* was written. Diagnostics forms the very backbone of *Ayurveda* and without proper recognition of this branch we cannot treat patient properly.

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#### **INTRODUCTION**

Avurveda science of life is considered to be emerged during post Vedic period. Since then many books have been written regarding concepts of Ayurveda. There are three basic texts Charaka Samhita, Susruta Samhita and Ashtanga Hridaya. These treaties are included under *Brihattrayi* and among these three basic texts Ashtanga Sangraha contains a important place. There are three important medical works associated with the name of Vagbhata. They are Astanga Sangraha, Astanga Hridaya and Rasa Ratna Samucchaya is one and the same. All particulars like work, written, identity, date as well as religion of Vagbhata are a matter of controversy. Hoernle introduced the name Vaabhata I and Vagbhata II for the authors of Astanga Sangraha and Astanga Hridaya respectively. Among all the authors who worked on the identity, authorship, religion and date of Vagbhata, P.V.Sharma has made gross research based on external and internal evidences. P.V.Sharma concluded that the authors of the two works Astanga Sangraha and Astanga Hridaya are different. Based on

various evidences date of Vagbhata I may be about 500 AD and that of Vagbhata II about 600 AD. Vagbhata's works are unique as burdensome material of the earlier Samhitas has been done in easy manner, making them easy to understand. Vagbhata I is the author of Astanga Sangraha. This classical text of Ayurveda were devoted primarily to one branch of Ayurveda and Vagbhata I felt the need of compiling in one treatise all the eight branches of Avurveda. The Astanga Sangraha is a new type of work and it is the last among the ancient classical works and the first amongst compilatory works of medieval period. Earlier to the compiling of Astanga sangraha, each of these branches had its own separate books, written by sages but their study was difficult. Explaining the need for his book Vagbhata says "each one of the texts written by them by it does not describe all the diseases, to study all the texts would require a whole life time, since many things are common to all the texts. This text has been written with emphasis on Kaya Chikitsa. Astanga Hridaya and Ashtanga Sangraha as the name itself suggests explains all the branches and topics in a lucid manner so that it can be easily understood by all. Both these books are famous because of their simple language and detailed explanation. *Vagbhata* has compiled the work as an essence of all earlier classic texts.

# Aims and Objectives

## **Concept of Diagnosis**

Vaabhata is first to describe Panch Nidana in separate chapter 'Sarvaroga Nidana. Astanga Sangraha and Astanga Hridaya in both of these classic Nidana Sthana is placed at 3 rd position next to Sharira Sthana, both of the *Nidana Sthana* are having 16 *Adhayays* each. The names of those *Adhayays* are also same. *Astanga* Hrudya has reduced Adhayays from every Sthana. The Adhayays are of same number. Even the verses of Astanga Hrudya don't reduce much of them. Further the numbers of verses in Astanga Hrudaya (768) are much more than in Astanga Sangraha (628). If both are compared with Charaka Nidana Sthana then it reveals that six diseases are same with that of Charaka, Unmada and Apasmara the last two chapter of Nidana Sthana are given in *Uttara Tantra* by both of *Vagbhata* because they may be classified as two Vyadhi in Bhuta tantra. Except 6 common Adhyayas both have 10 extra Adhyayas though only 10 Adhyayas are extra than Nidana Sthana of Vagbhata. One can say that these are 32 diseases. Thus in Nidana Sthana of Vagbhata describes 28 extra diseases than Charaka Nidana Sthana. First Adhyayas of Sarva Roga Nidana (Vagbhata 1st chapter in Nidana) has major part Nidana Sthana, first and foremost occurrence of diseases given Vagbhata are taken from scattered references in Nidana Sthana Arsha, Vidradhi, Vruddhi, Udara, Visarpa, Vata Vyadhi are common with Sushruta Nidana Sthana.

# **Contribution related to Basic concepts**

Vagbhata also mentioned the important function of each *Dhatu* individually other than giving larger number of functions to each *Dhatu*. Vagbhata has assigned single function of each *Dhatus* like *Preenana*, *Jjivana*, *Lepa*, *Sneha*, *Dharana*, *Purana* and *Garbhotpada* are the functions of the *Dhatus* respectively. These *Dhatus* not only support the body but also provides nutrition to the *Dhatus* throughout the life.

Regarding digestion of food and medicine *Vagbhata* has mentioned that it takes around 4 *Yaam* i.e., 12 hours for digestion of food and medicine digestion takes around 2 *Yaam*. While mentioning regimen for food intake *Ashtanga Sangrah*a has stated that 1/3rd or half of *Kukshi* should be filled by food which is solid in nature whereas *Ashtanga Hridaya* states that *Kukshi* should be divided in 4 parts in which one part should be covered with liquids, one part by air and rest with solid food.

*Vagbhata* is also famous for his contribution in field of Physiology which forms base of *Ayurvedic* Diagnostics. *Vagbhata* other than compiling the earlier ancient material also added his practical research and shared his thoughts. *Vagbhata* was first to mention the names of all the five types of *Vata*, *Pitta* and *Kapha*. Charaka has given

names of five types of *Vata* only and Sushruta has added names of five types of *Pitta*. This was result of gradual development of concepts.

The concept of Vagbhata regarding Pachakansa is of great significance. He states that Kayagni present in its own place has portions of itself present in the *Dhatus* also. The decrease (in quantities, qualities or function) and increase (in quantities, qualities or function) give rise to increase or decrease of *Dhatus* respectively. The preceding *Dhatu* which is either increased or decreased give rise to the succeeding *Dhatu* of the same condition. Generally all diseases are produced by *Mandagni* i.e. from weak digestive activity; it also arises from indigestion, contaminated foods and accumulation of *Malas*.

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Another important concept which Vagbhata has added is regarding *Ashraya Ashrayi Bhava*. *Ashraya Ashrayi Bhava* is considered to be novel contribution of *Vagbhata*. According to him in the *Vata* resides in *Asthi, Pitta* resides in *Sweda and Rakta* and in the remaining *Dhatus* and *Malas* resides *Sleshma* in familiar relation as the *Ashraya* and *Ashrayi* respectively; the medicine/therapies which cause the increase and decrease of the one also cause increase and decrease of the other respectively except in the case of *Asthi* and *Vata*. This concept forms base of treatment principle and thus it is important and precious contribution made by Vagbhata.

#### General causes of disease manifestation

Next chief contribution by Vagbhata in field of Ayujrvedic diagnostics is concept of improperly metabolized substance called Ama, which manifests in Amashaya. In opinion of others Ama is formed after mixing with agitated Dosas like a formation of poison after mixing with various kinds of Kodrava. While briefing Sama condition Vagbhata says that it is a condition which manifests due to amalgamation of Dosha and Dushyas resulting into formation of various kinds of disorders. According to both Astanga Sangraha and Astanga Hridaya, Vegadharana has been considered as the root cause of all diseases. All diseases were supposed to be arising from voluntary suppression of forcible initiation of the urges of the body; the methods of treatment of such diseases have also been indicated. Kasa has been included in place of Udgara in Astanga Sangraha while classifying Navegandharaniya. He says that just as slit develops surely, in course of time, even in pure water kept undisturbed in a earthern pot, in the same manner dirt accumulates inside body, hence it should be removed from the body at appropriate time. The Doshas undergoing increase slowly, in the body of such persons, who are negligent of taking purification measures, produce many diseases quickly which might defy treatment. Number of such diseases are enumerated such as *Ati Sthaulya*, *Agni sadana*, *Meha*, *Kushta*, *Hataujasa*, *Vibhransa*, *Shwasa* etc. All these diseases develop in the body when the channels of *Rasa dhatu* become coated with the increased *Doshas*.

#### Classification of diseases

Vagbhata introduced a different concept of disease classification. According to him diseases manifest either as the chief one or in association or accompanying of another disease, which in terms is known as Anubandhya (leader, major, dominant) and Anubandha (follower, minor, companion) the Anubandhya is independent and has specific, well defined features, cause and diagnosis. The Anubandha is its opposite. Similarly the Doshas are of two kinds Anubandhya and Anubandha. Diseases which are secondary are of two kinds - Purogami (manifesting first) and Anugami (manifesting later). The Anubandhya is also known as Purvarupa and Anubandha is known as Upadrava. They generally subside with the cure of the primary diseases but when they do not subside they should be treated after treating the powerful one. Beside this seven varieties of diseases have been described. These are Sahaja, Garbhaja, Iataja, Pidaja, Kalaja, Prabhayaja and Svabhavaja. This classification is so scientific that it includes almost all the diseases.

#### Contribution in reference to Rogi Roga Pariksha

Vagbhata is first to describe Panch Nidana in separate chapter 'Sarvaroga Nidana". In comparison to Astanga Sangraha, Astanga Hridaya has given new and simple definition covering all aspects regarding Panch *Nidana*. Their importance is proven by the fact that Madhava has given priority to Vagbhata's verses over Charaka. Astanga Samrgaha has added Prashna Pariksha in Trividha Pariksha of Charaka making it clinically more applicable. Rasa pariksha has been excluded in Pratyaksha most probably on practical grounds. Itsing (7th century) in his book 'A record of Buddhist practices in India' writes that during that Shabda and Akriti pariksha were given importance in diagnosis. With the time Rasa, Gandha and Shabda pariksha lost their clinical applicability, Anumana was merged in Prashna Pariksha and new scheme of clinical examination 'Trividha Pariksha' was evolved - Darshan, Sparshan and Prashna *Pariksha*. It is said that patient is to be examined by Darshana (inspection), Sparshana (palpation) and Prashana (interrogation, questioning) etc, the disease is to be examined by its Nidana, Pragrupa, Lakshana, Upashaya and Samprapti.

#### New concepts about Diseases

Vagbhata is first to establish the fact that Kamala can occur independently without Pandu. In Rakta-pitta chapter he stated that root cause is vitiation of Rakta and Yakrita and Pliha are the seat which are still considered to be places of blood formation during embryonic development. Vagbhata has described urinary diseases into two broad categories - Mutra Atipravrittaja and Mutra Apravrittaja roga. Prameha has been kept under Mutra atipravrittaj roga. 20 types of Mutra Apravrittaja

rogas have been told and Ashmari, Mutrakriccha and Mutraghata are kept under this category. Few new diseases have been described by Vagbhata like Haridraka, Ratrika, Purvaratrika jwara, Urdhwaguda etc. Vagbhata has told 36 Kshudra roga (Sushruta - 44), 94 Netraroga (Sushruta - 76), 25 Karnaroga (Sushruta - 28), 18 Nasaroga (Sushruta - 31), 75 Mukharoga (Sushruta - 65), 8 types of Bhagandara adding 3 new types etc.

# **Prognosis of Diseases**

Concept regarding knowledge of prognosis was fully developed in Ancient time. In Charaka Samhita. description of prognosis is available in detail in a separate section- Indriya Sthana. In Sushruta Samhita Arishta Viavan is described only in 6 chapters in Sutra Sthana. With the time 'Arishta Vigyan' or science related to prognosis gradually lost its luster as it was limited to 4 chapters in Sharira sthana of Ashtanga Sangraha and after that only two chapters were devoted in Astanga Hridaya Sharira Sthana. Vaghbhata describes about the role of *Grahas* responsible for causing a disease which clearly indicates towards the relationship between disease and astrology which was well recognized by him. While discussing Sadhya-asadhyata, Vagbhata says that a male patient is easy to cure. This kind of reference is absent in earlier texts. This reference is logical as male have strong constitution and so they can be easily treated.

#### CONCLUSION

From above discussion it is clear that Vagbhata felt need of compiling in one treatise all the eight branches of Ayurveda and so with this aim Astanga Sangraha and Astanga Hridaya was written. Astanga Sangraha was first amongst compilatory works of medieval period. Earlier to the compiling of Astanga sangraha, each of these branches had its own separate books, written by sages but their study was difficult. Astanga Hridaya is another compilation work which is known for its easy language. We cannot assign these great works merely a compilatory work as they are also known for their novel contribution especially in the field of Ayurvedic diagnostics. This list is long and few contributions as discussed above are Ashraya Ashrayi Bhava, Pachakansa, concept of improperly metabolized substance called *Ama*, new concept of disease classification, and description of Panch Nidana in separate chapter, *Trividha Pariksha*, introduction of new diseases etc. Diagnostics forms the very backbone of Ayurveda and without proper recognition of this branch we cannot treat patient properly. It can be concluded that contribution of Vagbhata in field of Ayurvedic Diagnostics is noteworthy.

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