



Review Article

FROM TARKA TO ANUMANA: A RATIONAL JOURNEY OF KNOWLEDGE

Shivangi A. Thumar^{1*}, Ajitsinh K. Gohil², Bhargav N. Raval¹, Hetvi V. Ladani¹, Harshilkumar Himmatbhai Patel¹

¹PG Scholar, Department of Samhita and Siddhant, ²Assistant Professor, Department of PG Samhita and Siddhant, Government Akhandanand Ayurveda College, Ahmedabad, Gujarat, India.

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ABSTRACT

Anumana (inference) is recognized as one of the principal *Pramanas* (means of valid knowledge) in Ayurveda epistemology. *Tarka* (logical reasoning), integral to the *Nyaya* philosophical system, serves as a critical cognitive and argumentative tool that supports the validity of *Anumana* by establishing and maintaining *Vyapti* (invariable concomitance). **Aim:** This review aims to enable postgraduate scholars to: (1) elucidate the definition and typology of *Tarka* as presented in *Nyaya Sutra* and *Tarkasamgraha*; (2) clearly distinguish between *Tarka* as *Apramana* and as an auxiliary instrument in *Anumana*; (3) explain and support the essential role of *Tarka* in the process of *Anumana*; and (4) identify and illustrate the practical applications of *Anumana Pariksha* in *Sarira*, *Nidana*, *Chikitsa*, and research methodology, with reference to modern scientific approaches. **Materials and Methods:** This classical review article is based on a systematic examination of primary Ayurveda *Samhitas*, including *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*, as well as Indian philosophical texts such as the *Nyaya Sutra* of *Gautama* and *Tarkasamgraha* of *Annambhatta*. Contemporary peer-reviewed literature was sourced from PubMed, Google Scholar, AYUSH Research Portal, and the DHARA digital repository. Relevant *Sanskrit slokas* are provided with transliteration and interpretation. **Discussion:** *Tarka* functions as an *Apramana*, a non-independent means of knowledge, whose primary role is to eliminate contradictory alternatives and confirm *Vyapti*, the logical foundation of inferential reasoning. The five types - *Pramanabadhita*, *Atmasraya*, *Anyonyasraya*, *Cakrakasraya*, and *Anavastha* - serve to identify and exclude flawed logical structures. **Conclusion:** The systematic application of *Anumana Pariksha* in both clinical and research contexts highlight the fundamentally rationalist structure of Ayurveda.

INTRODUCTION

Ayurveda, as a system of medicine rooted in the *Darsana* (philosophical inquiry) tradition of India, employs a rigorous epistemological framework for acquiring, validating, and communicating medical knowledge. Central to this framework is the doctrine of *Pramana* the legitimate means by which valid knowledge (*Prama*) is obtained. Classical *Acharyas* such as *Caraka*, *Susruta*, and *Vagbhaṭa* explicitly

accepted *Trividha Pramana*: *Aptopadesa* (authoritative instruction), *Pratyaksa* (direct perception), and *Anumana* (inference) as the three cardinal instruments of knowing.^[1]

Among these, *Anumana* holds a position of distinctive clinical significance because the very objects of Ayurveda inquiry- *Dosas*, *Dhatus*, *Agni*, *Srotas*, *Ojas*, *Tejas*, and *Prana* are functionally imperceptible, known only through their observable effects. Establishes that *Anumana* is the appropriate tool for understanding entities that lie beyond the scope of direct sensory perception.^[2] This recognition renders *Anumana* not merely a philosophical construct, but a clinically deployed reasoning tool integral to Ayurveda diagnostics and therapeutics.

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Tarka, defined in *Nyaya Sutra* as "*Uha*" (deliberate inquiry based on causal justification), is a unique logical operation that functions as a preparatory and auxiliary instrument within the *Anumana* process.^[3] Although *Tarka* is not considered an independent means of valid knowledge, it plays an important role in establishing and protecting invariable relation, which is the essential basis of valid inference. Without the rigour of *Tarkic* examination, inferential conclusions remain epistemologically vulnerable to *Hetvabhasa* (fallacious reasoning).

The present review undertakes a systematic classical analysis of *Tarka* as expounded in *Nyaya Sutra* and *Tarkasamgraha*, examines its relationship to *Anumana*, and demonstrates the broad spectrum of practical applications of *Anumana Pariksha* in *Sarira*, *Nidana*, *Cikitsa*, and *Anusandhana* with correlations to contemporary research methodologies.

Classical Review

Definition of *Tarka* According to *Nyaya Sutra*

The *Nyaya Sutra* of Maharsi Gautama, the foundational text of the *Nyaya* school of Indian philosophy, provides the earliest systematic treatment of *Tarka*:^[3]

"*Avijnatatattve'rthe karanopapattitas tattva-jnanartham uhas tarkah*"

Meaning: *Tarka* is the process of hypothetical reasoning (*uha*) based on causal justification (*karanopapatti*), undertaken with the aim of knowing the true nature (*tattva*) of an object whose reality has not yet been ascertained.^[3]

This definition reveals three essential characteristics of *Tarka*: (1) it presupposes an object of unknown nature (*avijnatatattva*); (2) it proceeds through causal reasoning (*karanopapatti*); and (3) its terminal aim is *Tattva-jnana*, the correct cognition of reality. *Annambhatta* explains in the *Tarkasamgraha* that reasoning is used to test the relationship between the reason and the thing to be proved by showing that the opposite conclusion leads to an impossible result.^[4]

Types of *Tarka*

Both *Nyaya Sutra* and *Tarkasamgraha* enumerate five types of fallacious or problematic logical structures that *Tarka* is employed to identify and reject:

***Pramanabadhita Tarka*- Reasoning Contradicted by Valid Evidence**

Pramanabadhita Tarka refers to a mode of reasoning whose conclusion is directly refuted by an established *Pramana*. By demonstrating that the opponent's hypothesis is incompatible with validated evidence, one indirectly establishes one's own thesis. The paradigmatic Ayurveda example: if *Agni* were absent, the observed processes of *Ahara* transformation and *Dhatu* nourishment would be

inexplicable. Since these are demonstrably present, the existence of *Agni* must be inferred.

***Atmasraya Tarka* - Self-Dependent Reasoning**

Atmasraya denotes an argument in which the proposition to be proved is covertly assumed in its own proof the classical fallacy of begging the question. In Ayurveda pharmacological reasoning: "*Guduchi* reduces fever because it has *Jvarahara* property, and *Jvarahara* property means it reduces fever." Such circular reasoning fails to provide genuinely new epistemic content.

***Anyonyasraya Tarka* - Mutual Dependence**

Anyonyasraya is the logical error of reciprocal dependence, wherein two propositions each derive their justification exclusively from the other. In Ayurveda theoretical discussions, arguments that attempt to establish *Dosa* primacy exclusively through *Dhatu* dysfunction and vice versa without reference to an independent standard exemplify this fallacy.

***Cakrakasraya Tarka* - Circular Reasoning**

Cakrakasraya extends the *Anyonyasraya* defect across three or more propositions arranged in a closed logical loop. In research methodology, this manifests as a circular experimental design in which the outcome measure is also used as a predictor, invalidating the statistical independence required for causal inference.

***Anavastha Tarka* - Infinite Regress**

Anavastha is the logical error of infinite regress, wherein any proposed justification itself requires further justification, ad infinitum. In Ayurveda research, this underscores the need for axiomatic foundations in evidence-based medicine.

Tarka* as *Apramana

A philosophically significant designation of *Tarka* in *Nyaya* epistemology is its status as *Apramana* an instrument that does not independently generate *Prama* (valid knowledge). *Tarka* does not produce direct cognition (*Anubhava*) of a fact; rather, it operates in the hypothetical register, entertaining contrary suppositions to test their logical survivability.^[4]

As *Annambhatta* clarifies in *Tarkasamgraha*, *Tarka* proceeds by entertaining the opposite of the proposition under consideration "suppose smoke existed without fire" and demonstrating that such a supposition leads to contradiction with established *Vyapti* and observed experience. By eliminating the contrary, *Tarka* does not produce knowledge of what is true; it only removes the logical obstacle preventing the inference from being conclusive. Final valid knowledge is generated by *Anumana* itself.

Role of *Tarka* in Establishing *Vyapti*

Vyapti the invariable, universal, and unconditional concomitance between *Hetu* (reason) and *Sadhya* (probandum) is the epistemic cornerstone of every valid *Anumana*. The establishment of *Vyapti* is the most philosophically challenging task in the *Anumana* process because universal propositions cannot be confirmed by any finite set of observations alone.^[5]

Tarka plays an important role in establishing *Vyapti* through the method of proving by contradiction: by assuming the absence of *Vyapti*, examining its consequences, and showing that they oppose both direct perception and accepted knowledge, the impossibility of denying *Vyapti* is established. This logical necessity not merely empirical regularity constitutes the philosophical strength of *Anumana* as a *Pramana*.

Relation between *Tarka* and *Anumana*

The relationship between *Tarka* and *Anumana* is best characterized as instrumental and preparatory: *Tarka* clears the epistemic path; *Anumana* traverses it.^[6] The classical *Nyaya* analogy:

Tarka is like cleaning spectacles; *Anumana* is the act of seeing. Cleaning does not constitute vision, but vision is impaired without it.

The logical flow: *Samsaya* (doubt) → Hypothesis of contrary (*Tarka* operation) → *Vyaghata* (contradiction) → Rejection of contrary → Confirmation of *Vyapti* → *Paramarsa* (cognition of *Hetu* qualified by *Vyapti*) → *Anumiti* (inferential cognition of *Sadhya*).^[7]

Comparative Analytical Discussion

Table 1: Comparative Analysis of *Tarka* and *Pramana*

Aspect	<i>Tarka</i>	<i>Pramana</i>
Epistemic status	Not an independent means of knowledge (<i>Apramana</i>)	Independent and valid means of knowledge
Nature	Hypothetical and negative reasoning	Positive and direct cognition
Function	Eliminates wrong alternatives	Generates new valid knowledge
Result	No direct cognition (<i>Gyana</i>)	Valid and certain knowledge
Role in <i>Anumana</i>	Supportive tool- clears path for inference	Actual source of inferential knowledge
Example	"If fire is absent, smoke can't exist."	Perception of smoke – inference of fire
Classical analogy	Cleaning spectacles (removes obstruction)	Seeing the object through clean spectacles

Tarka as a Supportive Tool in *Anumana*

Tarka's supportive function in *Anumana* operates at five distinct levels: (1) it establishes *Vyapti* through falsification of the contrary; (2) it removes *Samsaya* (doubt) by eliminating rival hypotheses; (3) it prevents *Hetvabhasa* by scrutinizing the logical relationship between *Hetu* and *Sadhya*; (4) it provides logical necessity to inferential conclusions; and (5) it renders *Anumana* epistemically secure against skeptical challenges.

In the absence of *Tarka*, inference may appear psychologically convincing but remains philosophically unjustified, analogous to what modern epistemology terms a 'true belief' lacking sufficient justification for knowledge. *Tarka* provides the justificatory component that elevates inference from belief to knowledge. For example, a physician may observe symptoms and intuitively suspect a particular disease; however, only after conducting a thorough differential diagnosis to exclude alternative explanations a process analogous to *Tarka* can the diagnosis be considered firmly established. Similarly, in research, initial statistical associations may seem persuasive, but without rigorous testing for alternative hypotheses and confounders, the findings lack robust justification. Therefore, *Tarka*'s function parallels systematic reasoning and critical scrutiny in contemporary clinical and research practice, thereby reinforcing the reliability of conclusions.

Difference between *Tarka* and *Pramana*

In table presents a systematic comparative analysis of *Tarka* and *Pramana* across key epistemological parameters:

Philosophical Interpretation with Examples

A physician observing a patient with progressive generalized weakness, pallor, cold extremities, and reduced digestive capacity hypothesizes *Pandu Roga* (Ayurveda analogue of anemia). This clinical reasoning process can be broken down into the following steps:

1. **Observation:** The physician notes objective signs such as generalized weakness, pallor, cold extremities, and lowered digestive capacity in the patient.
2. **Hypothesis:** Based on these observations, the physician forms the initial diagnostic hypothesis of *Pandu Roga*.
3. **Tarka (Logical Testing):** The physician employs *Tarka* to challenge the hypothesis. For example, "If *Pitta Dosa* were not deranged, would such pallor and metabolic dysfunction be explicable?"
4. **Contradiction:** Through this logical testing, the contrary hypothesis is shown to contradict the established *Vyapti* as recorded in *Charaka Samhita Cikitsasthana* 16.^[8]
5. **Anumana (Inference):** Having ruled out the contrary possibilities, the physician conclusively infers the diagnosis through *Anumana*.

Here, the contradiction is exposed through *Tarka*, and the diagnosis is established by the inferential certainty of *Anumana*.

Practical Applications of Anumana Pariksha

In *Charaka Samhita*, unequivocally states that *Anumana* is among the three means of knowledge by which the physician acquires understanding of disease and its treatment.^[2] *Sushruta Samhita* and *Ashtanga Hridaya* similarly acknowledge and reinforce this concept.^[9,10] The practical ramification is that Ayurveda clinical practice is, to a preponderant degree, inference-based, owing to the inherent imperceptibility of the *Dosic* and *Dhatvic* substrates of health and disease.

Anumana in Sarira (Physiology)

At the level of *Sarira Kriya* (physiology), *Anumana Pariksha* enables the physician to understand the functional status of invisible physiological systems:

Dosa Karma Vijnana: The actions of *Vata*, *Pitta*, and *Kapha* are inferred from their observable systemic effects. Increased *Vata* is inferred from signs of dryness, emaciation, and neurological hyperexcitability; *Pitta* excess from inflammatory signs and metabolic acceleration; *Kapha* excess from heaviness, oedema, and sluggish metabolism.

Avasthapaka Vijnana: The three stages of digestive transformation (*Madhuravastha*, *Amlavastha*, and

Katu-avastha) are inferred from sequential objective changes in the patient during the post-meal period.

Agni Pariksha: Digestive fire (*Agni*) is assessed inferentially through the rate, quality, and completeness of food digestion, bowel habits, and post-meal comfort.^[11]

Immunological reserve (*Ojas*) and physical strength (*Bala*) are inferred from exercise tolerance, disease susceptibility, and wound healing capacity.

Anumana in Nidana (Diagnostics)

In *Charaka Samhita*, *Vimanasthana*, elaborates extensively on the inferential diagnosis of mental and physical states:^[2]

Purvarupa-based Inference: Disease can be inferred in its pre-manifest stage before the full clinical picture emerges. Specific prodromal signs (e.g., mild thirst and polyuria as *Purvarupa* of *Prameha*) enable early inferential diagnosis.

Gudhalinga Vyadhi Nidana: Diseases with hidden signs are diagnosed through *Anumana*. The classical example ants congregating around a patient's urine indicating glycosuria represents an early clinical application of inferential reasoning, anticipating modern dipstick urinalysis.

Arista Laksana Vijnana: The inference of incurability and impending mortality from *Arista* (inauspicious) signs as described in *Indriya Sthana* of *Charaka Samhita* represents a sophisticated application at the interface of prognosis and ethics.

Inference of Mental States: Explicitly lists inferential indicators *Rajas* inferred from attachment (*Sanga*), *Moha* from delusion, *Krodha* from aggression, *Soka* from depression, and *Smrti* from the power of recollection.^[2]

Anumana in Chikitsa (Therapeutics)

Samprapti Vijnana: The pathogenetic process (*Samprapti*) is inferred from the observable symptom complex. Treatment protocols are designed based on this inferred pathogenesis.

Pathya-Apathya Nirdharana: Decisions regarding wholesome (*Pathya*) and unwholesome (*Apathya*) dietary and lifestyle regimens are made by inferring the patient's *Prakrti*, current *Vikrti*, and anticipated response to various inputs combining *Anumana* with *Yukti* (rational deliberation).

Treatment Response Assessment: Therapeutic efficacy is evaluated by inferring internal changes reduction of *Ama*, restoration of *Agni*, normalization of *Dosa* balance from observable clinical improvements.

The *Karma* (action) of medicinal substances on imperceptible targets (*Dosas*, *Dhatu*s, *Agni*) is established through inference from observable clinical

outcomes in both classical pharmacopoeia and contemporary clinical trials.

Anumana in Anusandhana (Research Methodology)

Table 2: Correspondence between Classical Anumana Types and Modern Research Methodologies

Type of Anumana	Modern research equivalent	Clinical example in Ayurveda
<i>Purvavat</i> (inference of effect from cause)	Prospective Cohort Study	Administering <i>Rasayana</i> and predicting improvement in <i>Ojas</i> and <i>Bala</i> .
<i>Sesavat</i> (inference of cause from effect)	Retrospective Cohort study	Observing <i>Amavata</i> symptoms and inferring <i>Ama</i> accumulation as causative factor.
<i>Samanyato-dr̥ṣṭa</i> (general inference)	Cross-Sectional Study	Correlation of <i>Kapha Prakrti</i> with higher BMI across a population sample.
<i>Parathanumana</i> (communicable inference)	Scientific Research Reporting/Publication	Five-membered syllogism (<i>Panchavayavi Vakya</i>) paralleling IMRAD research formal.

Parathanumana inference communicated for the benefit of another is structurally equivalent to the scientific publication process, wherein a researcher communicates a valid inferential conclusion through the five-membered syllogistic structure (*Pancavayavi Vakya*): *Pratijna* (hypothesis), *Hetu* (evidence), *Udaharana* (example), *Upanaya* (analysis), and *Nigamana* (conclusion). This structure closely aligns with the IMRAD format of modern scientific reporting.^[12]

Correlation with Modern Research Methodologies

Prospective Studies and Purvavat Anumana

Purvavat Anumana, defined as the inference of an effect from the cognition of its cause, structurally corresponds to prospective cohort research design. In a prospective study, participants with defined causal exposures are followed forward in time to observe anticipated outcomes identical to *Purvavat*: cognition of *Hetu* (cause) → inference of forthcoming *Sadhya* (effect) through *Vyapti*.^[13] Contemporary Ayurveda clinical trials investigating prophylactic effects of *Rasayana* drugs exemplify this design.^[14]

Retrospective Studies and Sesavat Anumana

Sesavat Anumana, the inference of cause from observed effect, is the classical analogue of retrospective cohort and case-control research designs. In *Amavata* research, the observed disease pattern (articular inflammation, *Ama* accumulation) is used to infer the causative constellation of *Viruddha Ahara* (incompatible foods) and *Mandagni* a classically *Sesavat* inferential process.^[15]

Cross-Sectional Studies and Samanyato-dr̥ṣṭa Anumana

Samanyato-dr̥ṣṭa Anumana inference based on generally observed associations corresponds to a cross-sectional research design. Epidemiological studies correlating *Kapha*-dominant *Prakrti* with higher body mass index, or *Pitta Prakrti* with elevated

In below table presents the structural correspondence between classical types of *Anumana* and modern research designs:

inflammatory biomarkers, exemplify the cross-sectional application of *Samanyato-dr̥ṣṭa* reasoning.^[16]

Clinical Reasoning and Evidence-Based Medicine

The epistemological framework of *Anumana* bears significant structural correspondence to evidence-based medicine (EBM). Bayesian clinical reasoning proceeds by updating prior probabilities (analogous to *Aptopadesa*-based prior knowledge) with new evidence (analogous to *Pratyakṣa* observations) to arrive at posterior diagnostic probabilities (analogous to *Anumiti*) a triadic structure mirroring Ayurveda's *Trividha Pramana* framework.^[17] The *Tarkic* process of excluding alternative diagnoses by showing that they lead to contradictions is formally similar to the clinical method of differential diagnosis, which is a fundamental part of evidence-based clinical practice.^[18] This correspondence suggests that the rational infrastructure of Ayurveda epistemology is not merely historically significant, but practically consonant with contemporary standards of clinical reasoning.

DISCUSSION

Critical Analytical Interpretation

The foregoing review reveals that the *Nyaya-Vaisesika* epistemological framework particularly its treatment of *Tarka* and *Anumana* represents a sophisticated and internally consistent system of rational inquiry that anticipates several methodological principles of modern philosophy of science and evidence-based medicine. The *Nyaya* principle that valid inference requires *Vyapti* anticipates David Hume's problem of induction and its solution through Karl Popper's theory of falsification. In this context, the role of *Tarka* as a method of testing and rejecting false assumptions is structurally similar to Popper's hypothetical-deductive method.

However, critical analysis must acknowledge the limitations of applying classical inferential

categories unreflexively to modern research contexts. *Vyapti*, in classical *Nyaya*, was posited as a universal, necessary relationship a claim that sits in tension with the probabilistic and statistical foundations of modern clinical research. Integration of *Anumana* into contemporary research methodology must be undertaken as a conceptual enrichment rather than a literal substitution.

Contemporary Relevance

As Ayurveda increasingly engages with regulatory bodies, peer-reviewed publications, and international scientific communities, the articulation of its epistemological foundations becomes essential. The demonstrated parallels between *Anumana* types and established research designs provide a framework for designing methodologically robust Ayurveda clinical trials that are grounded in the classical philosophical tradition while meeting modern scientific standards.^[19]

Furthermore, the five types of *Tarka* understood as five major categories of logical fallacy

Table 3: Summary of Practical Applications of *Anumana Pariksha*

Domain	<i>Anumana</i> application	Clinical / research example
<i>Sarira</i> (Physiology)	Infer <i>Dosa</i> actions, <i>Dhatu</i> formation, <i>Agni</i> status	Slow digestion - <i>Mandagni</i> inferred; <i>Ojas</i> depletion-immune decline inferred.
<i>Nidana</i> (Diagnostics)	Infer Disease from <i>Purvarupa</i> , <i>Arista</i> and indirect signs	Ants at urine- <i>Prameha</i> inferred, Pallor+ fatigue- <i>Pandu roga</i> inferred.
<i>Cikitsa</i> (Therapeutics)	Infer treatment efficacy from clinical improvement signs	Reduced <i>Ama</i> by improvement in <i>Agni</i> and lightness of body.
<i>Anusandhana</i> (Research)	Design and interpret clinical studies logically	Prospective trial on <i>Triphala</i> for <i>Prameha</i> using <i>Vyapti</i> -based hypothesis.

CONCLUSION

This review has shown that *Tarka*, as explained in the *Nyaya Sutra* and *Tarkasamgraha*, is an essential but dependent tool in the process of inference. Its five types serve as a taxonomy of logical fallacies that, when systematically identified and eliminated, protect the integrity of inferential reasoning in both clinical and research contexts. The relationship between *Tarka* and *Anumana* is that of a preparatory logical instrument to a *Pramana*: the former clears the epistemic path; the latter traverses it to yield valid knowledge.

The practical applications of *Anumana Pariksha* in *Sarira*, *Nidana*, *Cikitsa*, and *Anusandhana* affirm that Ayurveda clinical practice is, at its foundation, a rationally structured inferential enterprise. The correspondence between classical types of *Anumana* and modern research designs provides a principled framework for integrating Ayurveda epistemology with contemporary research standards.

As Ayurveda continues its engagement with global scientific communities, a revitalized understanding of its inferential foundations, grounded in *Tarka* and

constitute a quality-control checklist for Ayurveda research reasoning. A research proposal premised on *Atmasraya*, *Anyonyasraya*, or *Cakrakasraya* can be identified and corrected through systematic *Tarkic* scrutiny, improving logical rigor before the experimental phase.

Clinical Importance

At the bedside, the distinction between *Tarka* and *Anumana* has direct implications for the quality of clinical decision-making. The physician who conflates the exploratory phase of clinical reasoning (*Tarka*: generating and testing differential hypotheses) with the conclusive phase (*Anumana*: arriving at a diagnosis) risks either premature closure or diagnostic paralysis. Formal training in *Tarka-Anumana* reasoning can therefore serve as a curricular foundation for developing systematic and intellectually rigorous clinical thinkers in Ayurveda medicine.

Anumana, can serve not merely as a tribute to its philosophical heritage, but as a generative resource for its future as a rigorous, evidence-informed system of medicine. It is recommended that *Tarka-Anumana* reasoning be accorded greater prominence in Ayurveda postgraduate curricula, research design training, and clinical education.

To implement this, specific curricular steps can be taken to integrate *Tarka-Anumana* systematically into postgraduate training. For example:

1. Develop case-based modules in which students apply *Tarka-Anumana* reasoning to classical and contemporary clinical scenarios, encouraging active engagement and discussion.
2. Incorporate objective structured clinical examinations (OSCEs) or written assessments that require demonstration of *Tarka*-based hypothesis testing and inferential reasoning.
3. Integrate structured debates and peer-reviewed presentations focused on identifying logical fallacies, improving student's abilities to critically assess evidence and arguments.

4. Embed instruction on *Tarka-Anumana* within research methodology courses, guiding students in applying these principles to protocol design and data interpretation.
5. Create interactive workshops and seminars featuring experienced clinicians and researchers who model the application of *Tarka-Anumana* in real-world decision making.

By institutionalizing these steps in postgraduate curricula, educators can equip future *Ayurveda* practitioners and researchers with robust tools for critical thinking, clinical reasoning, and scientific inquiry.

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*Address for correspondence

Dr. Shivangi A. Thumar

PG Scholar,
Samhita and Siddhant Department,
Government Akhandanand Ayurveda
College, Ahmedabad.

Email: thumarshivangi5812@gmail.com

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