

SURVEY ON THE INCIDENCE OF PURVARUPA IN VATARAKTA

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ABSTRACT

Vataraktha, the disease name itself indicates is caused by aggravated *Vata* and vitiated *Rakta* by their own causative factors. *Vataraktha* is explained after *Vatavyadhi chikitsa* because it is considered as a special type of *Vatavyadhi*. In *Vataraktha* particular etiological factors of *Vata dosha* and *Rakta dhathu* individually cause the vitiation of *Vatadosha*, simultaneously abnormalities of *Raktadhathu*, leading to *prakopa* of *Vata* and *dushti* of *Rakta*. Abnormal state of *Vata* and *Rakta* obstruct the path of each other and both *Vata* and *Rakta* combines each other and the abnormality become more and produces the *lakshanas* of *Vataraktha*. The disorders affecting the locomotor and vascular systems are increasingly seen in present era. These conditions considerably reduce the human activities in terms of social and professional life. The prognosis of this disease is always inclined towards incurability when neglected or not taken care off in its early stages of the disease. If it is not taken care properly it leads to *vaikalya*. So it is very essential to cure this disease in its early stages or in the *purvaroopavastha* only. The *bhrihatrayees* have mentioned distinct *purvaroopas* for this disease. The incidence of this disease very common due to improper life style and improper food habits. Hence the knowledge and sensitization about the earlier signs and symptoms of *vatarakta* become prerequisites in its management. Thus, the present study aims to shed fresh light on the *Purvarupa* of *Vataraktha* for the early and easy diagnosis which ensures the timely treatment of it. A minimum of 80 patients who were fulfilling the criteria for diagnosis and inclusion were selected for the study randomly, irrespective of gender, religion and educational/professional/economic status from the OPD and IPD of Roganidana, SJIM Hospital, Govt. Ayurveda Medical College, Bengaluru during 2020-2021. A special pro forma was prepared with details of history taking, physical signs and symptoms as mentioned in the Ayurvedic classics. This study was done using a structured questionnaire: A checklist of the compendium of the *Purvarupas*, unanimously told by the Bruhatrayes.

KEYWORDS: *Vata, Rakta, Vatarakta, Uttana Vatarakta, gambheera Gambheera Vatarakta.*

INTRODUCTION

Vata dosha is considered as most authoritative among *Tridoshas* with principle function of movement (*Chala Guna*).^[1] Importance of *Vata dosha* is highlighted by explaining *Pangutva* of *Pitta* and *Kapha Dosha*.^[2] The classical texts lay down ample importance to the functions and characteristics of *Vata*. Hence to maintain the normal function of *Pitta* and *Kapha*, *Vata dosha* should be in optimal state. At the same time *Rakta* being the foremost body tissue plays an important role in sustaining health and life of a person. Hence it should be protected judiciously.^[3] The disorders produced by the conjugation of vitiated *Vata* and *Rakta* generate multiple health ailments which in greater term are referred to as *Vatarakta*. The present rapid modernization in developing countries like India, the culture of fastfood, junk foods, eating in standing posture, smoking, alcohol intake and drug addiction habits are spreading even to remote villages. The over indulges in *Viruddhaahara*, especially *Lavana*, *Amla*, *Katu*, *Kshara*, *Ajirna* *bhojana*,

Shuskambu, *Anupamamsa sevana* by *Sukumara* and *Vihara* like travelling in jerk leads to *Vyadhi* called *Vatarakt*.^[4] In *Vataraktha*, *vata* and *rakta* vitiated simultaneously due to their on causative factor and produces the disease. *Vataraktha* is explained after *Vatavyadhi chikitsa* because it is considered as a special type of *vatavyadhi*. In *Vataraktha* particular etiological factors of *vata dosha* and *rakta dhathu* individually cause the vitiation of *vatadosha*, simultaneously abnormalities of *raktadhathu*, leading to *prakopa* of *vata* and *dushti* of *rakta*. Abnormal state of *vata* and *rakta* obstruct the path of each other, then combine together and become more *bala*, produces the *lakshanas* of *Vataraktha*.^[5] *Purvarupas* are a part of the ensemble called *Nidana Panchakas* which help in the accurate understanding and analysis of diseases. *Purvarupas* are the features exhibited in the *Purvarupa Avastha* which is a consequence of *Dosha-Dushya Sammurchana* or *Sthana Samshraya*, wherein the vitiated *Doshas* take shelter in the *Dhatus* and in turn vitiate them to cause

different diseases. It is always better to identify these earlier stages of the disease and treat them soon. *Vatarakta Purvarupas* unlike the *Purvarupas* of other diseases are clear warning signs as they are very much conspicuous and evident and this fact in itself is a testimony to the seriousness of the disease and if it get untreated produces serious conditions.

AIMS AND OBJECTIVES

1. To find out the incidence of *purvarupa* in *Vatarakta*.
2. To assess the incidence and prevalence of types of *Vatarakta*.
3. To develop an algorithm based on *Purvarupas* and *Rupas* that would help in the management of *vatarakta*.

MATERIELS AND METHODS

The patients registered from the OPD and IPD of Sri Jayachamarajendra Institute of Indian Medicine, Bengaluru during the year 2020-2021 were the primary source of data. A minimum of 80 patients suffering from any type of types of *Vatarakta* had selected for the study, irrespective of their religion, social, economic and

educational statuses. A special pro forma was prepared which includes detailed history taking, physical signs and symptoms as mentioned in our classics. Patients were clinically examined, analyzed and selected accordingly. The study being the part of PG study was approved by Institutional Ethical Committee of Government Ayurveda Medical College Bengaluru.

Inclusion criteria

1. Patients from the age groups 18-60 years were considered for the present study.
2. Patients of either sex was taken for study.
3. Patients presenting with the *Lakshanas* of different types of *Vatarakta*

Exclusion criteria

1. Systemic disorders: Subjects with carcinomatous changes and severe systemic diseases.

STUDY DESIGN

Duration of study

Since this is a survey study, the patients will be kept under observation till the evaluation is done.

Checklist of purvarupas in vata rakta roga.

Sl. No.	Purvarupa	Present/ Absent	Generalized	Localized with affected sites	Presence/Absence after Lakshanas	Duration
1.	Atisweda					
2.	Asweda					
3.	Karshnyam					
4.	Sparsajnanatwam					
5.	Kshateatiruk					
6.	Sandhisaitilyam					
7.	Alasyam					
8.	Sadanam					
9.	Pidakodgamana					
10.	Nistoda/spurana/bheda/gurutwa/ Supti in janu / jangha/uru/kati /amsa/hasta/pada/angasandhishu					
11.	Kandu					
12.	Sandhishu ruk bhutwa bhutwa nasyati					
13.	Vaivarnya					
14.	Mandalotpati					

DIAGNOSTIC CRITERIA: Diagnosis were made on the basis of signs and symptoms of *Vatarakta*. The *Purvarupas* form the parameters of this study. The *Purvarupas* that are common in the Bruhatrayees are:

Swedo atyartham- excessive perspiration

- *Na va sweda*- or loss of perspiration
- *Karshnyam*- darkish discolouration
- *Sparshajnatwam*- loss of sensation
- *Kshathe athiruk*- severe pain over injured area
- *Sandhisaidhilyam*- slacking of joints
- *Alasyam*- lassitude
- *Sadanam*- weakness
- *Pidakotgama*- eruptive lesions

- *Janu-jangha-uru-kati-hastha-pada-anga-sandhishu nisthoda*- pain in knee joints, legs, thighs, low back, hands, feet and all over the body
- *Bheda*- breaking pain
- *Gurutwa*- heaviness
- *Supti*- loss of sensation
- *Kandu*- itching
- *Sandhishu ruk bhutwa bhutwa nasyathi*- irregular nature pain in sandhies
- *Vaivarnya*- discolouration
- *Mandalotpathi*- eruption

RESULTS AND DISCUSSION**Table No. 1: Incidence of Uttana and Gambheera type of Vatarakta.**

Type of Vatarakta	No. of Patients	Percentage
Uttana	74	92%
Gambheera	6	8%

Out of 80 patients, 92% were suffering From *Uttana Vatarakta* and 8% were suffering from *Gambheera Vatarakta*.

Table No. 2: Showing Incidence of Doshadhika Vatarakta.

Type of Vatarakta	No. of Patients	Percentage
Vatadhika	74	92%
Pittadhika	0	00%
Kaphadhika	0	00%
Raktadhika	6	8%

Table No. 3: Distribution of Purvarupa in the sample.

Distribution of Purvarupa	Total No-80	Percentage of total patients
Atisweda	58	72.50%
Asweda	4	5.00%
Karshnyam	76	95.00%
Sparsanjatwam	8	10.00%
Kshateatiruk	13	16.25%
Sandhisaithilya	75	93.75%
Alasyam	46	57.50%
Sadanam	46	57.50%
Nistoda/spurana/gurutwa in sandhis	80	100%
Pidakodgama	52	65.00%
Sandhishuruk bhutwa-bhutwa nasyati	78	100%
Kandu	12	15.00%
Vaivarnya	80	100%

Out of 80 patients' maximum patients in *Purvarupa* were suffering from *Vaivarnya*, *sandhishu ruk bhutwa bhutwa nasyathi* and *Sandhinistoda*.

PURVARUPA

As mentioned in graph 34, the *Purvarupas* encountered during the study are denoted in the form of bar graph. With the help of this representation of data, the incidence of *Purvarupas* and their relative incidences as well are known. In this regard the frequencies of each *Purvarupa* are noted as follows:

From the graph, it can be concluded that, of *Purvarupas* and respective frequencies like: there is 100% incidence of two *Purvarupas* such as *Vaivarnya* and pain which

comes and goes (*Sandhishu Ruk Bhutwa Bhutwa Nasyathi Ithi*)

Karshnyam- 95%

Sandhisaithilyam- 93%

Atisweda- 72.5%

Pidakodgamana- 65%

Alasyam- 57.5%

Sadanam- 57.5%

Kshateatiruk- 16.25%

Kandu-15%

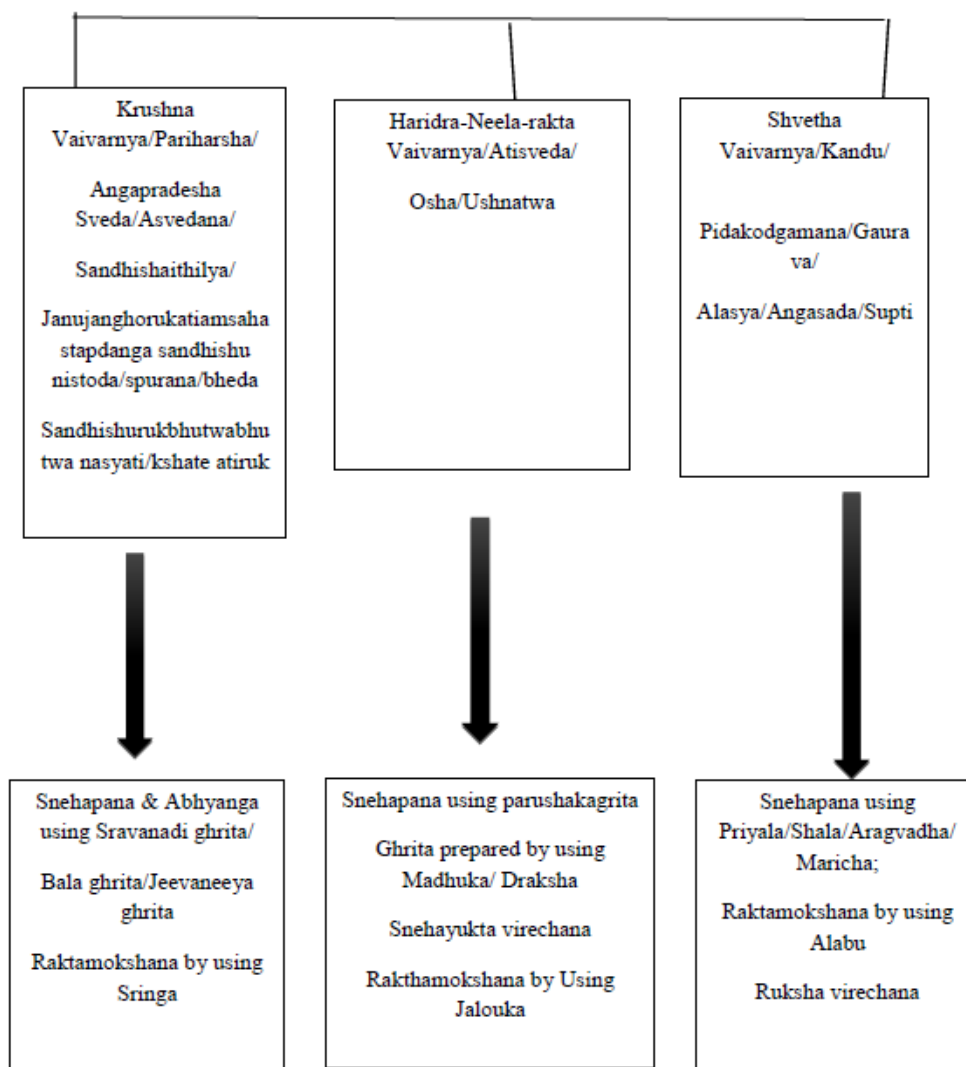
Asweda- 5%

Out of these *Purvarupa*, following probable result can be drawn

Table No.4.

VATA	PITTA	KAPHA	RAKTA
Vaivarnya → Krushna, Aruna	Vaivarnya → Haridra, Neela	Vaivarnya → Shvetha	Vaivarnya → Rakta
Aswedanam	Atisvedana	Kandu	Atiswedanam
Sandhisaithilyam		Katina	Pidakodgama
Janujaghorukatiamsa		Sadana	
Hastapadanga sandhishu nistoda			
Spurana	Osha	Gurutwa	Gurutwa
Bheda		Alasya	
Supti		Supti	
Atimatra vedana			
Sandhishuruk bhutwa bhutwa nasyati			
Kshateatiruk			
Sita	Ushnata	Sita	Aushnyata

ALGORITHM BASED ON VATARAKTA PURVARUPAS ONSET OF PURVARUPAS



CONCLUSION

The aim of the present study was to validate the phenomenon of *Purvarupas* in *Vatarakta* and thereby their incidence. Along with this primary agenda, the prevalence of different types of *Vatarakta* was also assessed. The details of these were utilized in constructing an algorithm for the early detection and treatment of *Vatarakta*. Conclusions drawn from the present study are as follows:

- While analyzing the *Nidana* two distinct set of etiological factors take part in the causation of the illness. One set of etiology leads to the vitiation of *vata-dosha* and the other set separately causes morbidity in *Raktadhatu* leads to *Anyonya avarana* of both.
- The *Nidanas* like *Takra*, *Lavana*, *Katu*, *Masha*, *Ambujamamsa*, *Divaswapna*, *Ratrijagarana*, travelling in two wheeler etc. causes the etiopathogenesis of *Vatarakta*.
- The disease incidence was more in *Vata-Piatta Prakruti* persons.
- The incidence of *Purvarupas* like *Vaivarnya*, *Nistoda* in *Sandhis* and intermittent pain in *Sandhis* were found in all patients in the present study. *Vaivarnya* especially *Syavavarna*, pricking type of pain and intermittent pain are the features of *Vata*. So *Vata* features are more prominent in *Purvarupavasta*. This will help in identifying disease in the *Stanasamsraya* stage itself.
- The incidence of *Uttanavatarakta* was more commonly found when compared to *Gambeeravatarakta*.
- Finally through this particular research study the previous fact about the incidence of *Purvarupas* in *Vatarakta* was revalidated.
- An algorithm is constructed by considering *Purvarupas* and *Rupas* for early treatment of the disease.
- This research work mainly intends to create awareness among the public regarding the disease and to convey a pro-vigilant and prophylactic action from the physicians at the slightest hint of the *Vatarakta Purvarupas*.

REFERENCES

1. Vagbhata, Astangahridaya with commentaries of Arunadatta (sarvangasundari) and Arunadatta (ayurvedarasayana), Choukamba orientalia publication, Varanasi, Reprint on, 2019; 402.
2. Pt Sharangadharacharya, Sharangadhara Samhita; Chaukhambha Surabharathi Prakashana; Varanasi, 2017; 60.
3. Sushruta Samhita with Nibandha Sangraha commentary of Sri Dalhanaacharya and Nyayachandrika Panjika of Sri Gayadasacharya on Sutrasthana edited by Vaidya Yavadaji Trikamji Acharya and published by Chaukhambha Sanskrit Sansthana. Reprint, 2015; 67.
4. Agnivesha, Charaka Samhita, Ayurveda Deepika commentary, edited by Vaidya Yadavji Trimkamji Acharya publication Choukhamba Vishwa Surbharati prakashan Varanasi; UP; 2010; 627.
5. Agnivesha, Charaka Samhita, Ayurveda Deepika commentary, edited by Vaidya Yadavji Trimkamji Acharya publication Choukhamba Vishwa Surbharati prakashan Varanasi; UP; 2010; 628.