**VATARAKTA SAMPRAPTI (ETIOPATHOGENESIS): A CRITICAL REVIEW**

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**ABSTRACT**

Various dietary habits and life style modalities plays an important role in the development of vatarakta vyadhi. When aggravated vata (one of the three basic humors of the body) combines with rakta and the subsequent margavarana results in various symptomatologies of Vatarakta. The main target organ of the disease are the marma, asthi, sandhis i.e madhyama rogamarga. The disease in the initial stages may be limited to uttana(superficial) dhatus(tissues) i.e twak(skin), rakta (blood), mamsa(muscle tissue) and over time progresses to gambheera(deeper) dhatus i.e asthi, majja. Vatarakta is not a single disease. When viewed under the lens of contemporary science it can inferred that vata rakta is a broad term that includes various autoimmune connective tissue disorders like SLE, Scleroderma, Rheumatoid arthritis to metabolic disorders like Gouty arthritis.

**KEYWORDS:** Vatarakta, Avarana, Autoimmune disorders.

**INTRODUCTION**

Vatarakta is a unique illness where there is involvement of both vata and rakta and leads to multitude of disorders. Aadhyavata, Khudavata and Vatabalasa are the other names used in the literature to refer the illness vatarakta based on clinical occurrence, anatomical site and severity of the disease respectively. It is a vyadhi typically affecting the extremities along with the systemic involvement. It is pathologically characterized by mutual as well as interrelated obstruction to the circulation of rakta dhatu as well as vata dosha within the
rakta marga and apparently avarana (obstruction) is the pathological process responsible for the illness.

**NIDANAS (etiologies) OF VATARAKTA**

<table>
<thead>
<tr>
<th>Aharaja (food) hetus</th>
<th>Viharaja (activities) hetus</th>
<th>According to body constitution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excess intake of amla (sour), lavana (salty), katu (pungent), Kshara (alkaline), ushna (hot), snigdha (unctuous)</td>
<td>Divasvapna (sleeping during day time especially after meals)</td>
<td>Sthoulya (obese person)</td>
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<tr>
<td>Nishpava (beans), masha (black gram), pinyaka (oil cake), kulatha (horse gram), moolaka (radish)</td>
<td>Ratrijagarana (keeping late hours or not sleeping during nights)</td>
<td>Sukumara (delicate person who indulge in irregular diet and sedentary habits)(^2)</td>
</tr>
<tr>
<td>Anupa mamsa (flesh of the animals)</td>
<td>Langhana (fasting)</td>
<td></td>
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<tr>
<td>Virudhahara (Incompatible food)</td>
<td>Plavana (Excessive swimming)</td>
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<tr>
<td>Adhyasana (eating before the complete digestion of the previous meal)</td>
<td>Vyavaya (Excessive coitus)</td>
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<tr>
<td>Vishamasana (Irregular food habits)</td>
<td>Adhwa (walking long distances)</td>
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<tr>
<td>Sura sevana (excess alcohol intake)</td>
<td>Vega Sandharana (Suppression of natural urges)</td>
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<td></td>
<td>Avyaama (lack of physical exercise)</td>
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**SAMPRAPTI (etiopathogenesis)**

The samprapti (etiopathogenesis) of a disease explains the process by which the vitiated doshas associate with the dushyas and produce the anatomical and physiological changes in the target organs leading to the disease. All the stages from the very contact of the body with hetus (etiologies) to the development of the disease, including all its avasthas (stages of the disease) are called the Samprati of the disease. Charaka and Vagbhata dedicates a separate chapter for vatarakta because of specific etiological factors, distinct etiopathogenesis and clinical symptomatologies. According to Charaka, the pathway of vata vitiated by its own etiological factors while circulating through its own srotas (channels) is encircled by vitiated rakta and gets more excited resulting in an illness called Vatarakta.\(^3\) Sushruta describes this condition under Vatavyadhi although vata and rakta are simultaneously vitiated presumably vata is more important morbid factor than rakta. According to him the vitiated vata is encircled by the vitiated rakta and produce the pain which is characteristic of Vata rakta.\(^4\) Vagbhata states that due to other exciting causes and encircling (Avarana/Sanga) by the vitiated rakta, the aggravated vata gets more excited. Due to this excess excitement, vata leaves its own channels (Srotas) of circulation enters the other srotases (vimarga gamana) to vitiate the other dhatus (tissues) for the causation of Vatarakta.\(^5\)
• **Vata** and **rakta** are the two main morbid elements.

• **Vata** circulates along with **rakta** in **raktavaha srotas**. In fact **rakta** is the medium of dissemination of the vitiated doshas.

• The vitiated **vata** is encircled (avarana) by **rakta** which is also vitiates by its own etiological factors. There will be mutual and interrelated obstruction to **vata** and **rakta**.

• Obstruction of **vata** in **raktavaha srotas** is due to the srotodusti (deformity in srotas) and because of this obstruction **vata** gets further aggravated and enters into other **dhatuvaha srotases** (Vimarga gamana) and causes disturbance to their functions.

• **Rasadhatu** is functionally disturbed due to the combined circulation with **rakta** from the same sthana i.e hridaya(heart) and is effects are manifested in **twak**(skin), which is the representative of rasa dhatu in sakhas(peripheries).

• Due to the asrayaasrayeebhava(reciprocal relationship) between **rakta** and **pitta**, the latter also gets vitiates during this process.

• There is natural functional disturbance of **kapha** (sleshaka)since the target organs like **sandhis**(joints) are the seats of kapha.

• During the stage of vimarga gamana(flow of contents in wrong/opposite direction) of **vata**, the functions of both **dhatus** and their respective **srotases** are impaired. This ultimately leads to **Ojas dushti** improperly functioning **Ojas** (essence of all dhatus) which confers vyadhiyamata (Immunity) on body.\(^6\)

It can be inferred that the illness **Vatarakta** may arise in two distinct ways. Individual etiological factors of **vata dosha** as well as **rakta dhatu** may result in the development of **vatatakta** and is the usual variety of **Vatarakta**. Here the aggravated **vata** as well as the vitiated **rakta** leads to **raktamargavarana** (Impeded blood circulation)and is the principal pathology of **Vatarakta** where as in the second variety it is the aggravated **kapha** and **medas** (fat)that culminates in accumulation of **kapha** and **medas** in the **rakta marga** leads to **raktamargavarana**.\(^7\)

Depending on the involvement of **dhatus** (tissue elements)or vyadhi awastha(stage of the disease) **vatarakta** is of two types. When it is limited to **twak and mamsa** it is considered as **Uttana**(Superficial) **vata rakta** and when deeper dhatus like **asti, majja** etc are affected it is considered as **Gambheera** or **Avagada** (Deeper) **Vatarakta**. **Uttana vatarakta** produces symptoms like **daha**(burning sensation), **kandu**(itching), **sphurana**(throbbing sensation) etc whereas **Gambhira vatarakta** produces symptoms like **Sotha**(swelling), **sthabda**(stiffness)
kathina (hardness), daha (burning sensation), toda (excruciating pain in the interior of the body), Paka (suppuration of the joints), Angulivakrta (bending of fingers). Samhitas also mention a third variety of vatarakta i.e ubhayashrita where there is involvement of both superficial and deeper dhatus.\[8\] From rogamarga (tract of the disease) perspective also vatarakta can be categorized. Vatarakta lakshanas pertaining to twak, raktadi dhatus fall under the category of Bahya roga marga and when lakshanas related to sandhi, asthi and marma pradesh, the disease falls under the category of madhyama rogamarga.

**SAMPRAPTI GHATAKAS (Components of pathogenesis)**

- Dosa- Vata pradhana tridoshas,(Vyana vata, Pachaka pitta and sleshaka kapha)
- Dusya-Uttana Vatarakta: Rasa, rakta, mamsa; Gambhira: Rasa, rakta, mamsa, medas, asthi and majja: Upadhatu: Sira, kandara, snayu, twak
- Agni: Jatharagnijanya, Dhatuagnijanya
- Srotas: Initially rasavaha, raktavaha and later all dhatuvaha srotas
- Srotodushti prakara: Sanga, Vimargagamana
- Udbhavasthana: Pakwasaya, Amasaya
- Vyaktasthana: Janu, jangha, uru, kati, amsa, hastapadanga sandhi
- Sancharasthana: Sarvasarira
- Vyadhi marga: Bahya and madhyama roga marga
- Prabhava: Sadhya(Curable): Involvement of one dosha in samprapti, recent onset, absence of upadravas(complications), Yapya(palliable): Presence of two doshas, absence of upadravas, disease of one year duration and asadhya: Presence of tridoshas as well as upadravas.

Vatarakta is mainly caused by the vitiation of vata and rakta and the causative factor being multiple. Aggravated vata during the stage of vimargagamana disturbs the functions of dhatus and respective srotases. This disturbance leads to the formation of ojo dushtit(defective ojas). This defective ojas instead of normally protecting the body from decay and disease, actually initiates the pathogenesis of the disease. The body loses its normal capacity to differentiate from self and nonself. The association of ama with the defective ojas leads to the manifestation of chronic and disabling vatarakta.\[9\]

Vatarakta is a broad term when viewed under the lens of contemporary science ranges from autoimmune connective tissue disorders to metabolic disorders.
Vatarakta Vis A Vis Autoimmune Connective Tissue Disorders

Both genetic and environmental factors are responsible for the manifestation of various autoimmune disorders. There will be spontaneous over activity of the immune system that results in the production of auto antibodies in the circulation. The classic collagen vascular diseases include SLE(Systemic lupus erythematosus), RA, Scleroderma, Sjogrens syndrome, Mixed connective tissue disease, Undifferentiated connective tissue disease, Psoriatic arthritis.

Doshas inspite of having opposite qualities like sheeta(cold) guna of vata to ushna(hot) guna of pitta don’t cause any harmful effects. However in some genetically predisposed individuals it may cause harmful effects due to adristha karanas(unknown reasons).\textsuperscript{11} In fact doshas fight each other rather than protecting the body. In the present day context this phenomenon can be correlated with hypersensitivity reactions which are four in number and autoimmunity falls under 3\textsuperscript{rd} category.

Vatarakta Vis A Vis Metabolic Disorders

Certain nidanas mentioned in vata rakta adhyaya like mishtanna sukha bhojan achakramana,. (Indulgence in sedentary habits), madya sevana(Excess alcohol intake), diwaswapna i.e over indulgence in various santarpanokta karanas(etiologies) leads to kapha and medo dushti which causes sangra(obstruction) in rakta marga leads to raktamargaavarna which further aggravates vata and finally resulting in vatarakta vyadhi.

This can be correlated with peripheral vascular occlusive disease in which there will be build up of fatty deposits and calcium in the walls of arteries (atherosclerosis).

Deposition of extra uric acid sharp crystals may form in the big toe or other joints, causing episodes of pain and swelling in the joints called gout attacks. People who are having obesity, Diabetes, Kidney diseases, consume a diet high in animal proteins as well as consumption of significant amount of alcohol are particularly at risk of developing gouty arthritis. Various santarpanokta karanas(excessive nourishing diet) like madya sevana(excess alcohol intake), achakramana(sedentary habits), diwaswapana(Sleeping during day time), ama (product of improper digestion and metabolism) causes vitiation of kapha and medas. Ama in this context should be considered as mala sanchaya. Therefore Deposition of excess uric acid crystals in the joints can be considered as ama due to mala sanchaya. Lakshanarasigns and symptoms)
are sandhi shoola, shotha (pain and swelling in the joints), ruk bhutwa bhutwa nashyati (episodic attacks).

CONCLUSION
The aggravated vata when combines with vitiated rakta may result in an illness called Vatarakta. The disease is pathologically characterized by mutual obstruction to the circulation of rakta dhatu as well as vata dosha within the rakta marg. Two distinct etiopathogenesis may result in vatarakta. Etiological factors responsible for vitiation of vata as well as rakta resulting in vataraka is the usual variety. The second variety of vatarakta is characterized by accumulation of kapha and medas in the raktamarga as a result of indulgence in various santarpanokta hetus. In the present day context it can be correlated with multitude of diseases ranging from autoimmune connective tissues like SLE, scleroderma to metabolic disorders like Gouty arthritis.

REFERENCES