DEFINITION OF NIDĀNA PANCAKA (FIRST CHAPTER OF MĀDHAVANIDĀNA)

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ABSTRACT

This is in continuation of the previous article published in this Bulletin of the Indian Institute of History of Medicine, Volume, XXVII, No.2, July 1997. P.Nos 163 to 171, under the title of "Definition of Nidana Panchaka (First Chapter of Madhava Nidana"). It deals with Nidana, Purvarupa, Rupa, Upashaya and Samprapti as described in the first Chapter of Madhavanidana.

The dosas sometimes move into the vital organs, bones and joints and cause Pakṣavadha, Apatānaka and Ardita etc. This is called "Madhyama Roga Mārga (Intermediate path of diseases)."

(g) The vitiated dosas should also be known with regard to their being accompanied by or being devoid of āmadosa (immature matter). As it has been said "The adva rasadhatu (First element of the body) not being brought to a mature state because the agni (heat of the transforming fire) is of a slight force being corrupted and staying in the amasaya (receptacle of undigested food), is called āma (immature nutrient fluid). The dosas and the dusyas (corruptible constituents) which have come into contact with that āmadosa and have been corrupted (by it). are taught to be sama (accompanied by āmadosa) and so are the diseases arising from them are called sama roga, samajvara and samatisara etc. Obstruction of the channels, subsidence of bodily force, heaviness, a confused state of the Vata,

inertia, absence of maturative processes, ejection of saliva, retention of impure matter, the inability to eat and weariness are the signs of the dosas accompanied by āma, when they are devoid of āmadoṣa, the opposite (signs are present)."

(A.H.Sut. 13/23-27)

The dosas, intimately connected with each other are of sixty two types as mentioned in susruta samhitā "These three dosas allow of three individual combinations (with aggravation of one dosa only, i.e. aggravated Vata - with normal pitta and Kapha; aggravated Pitta - with normal Vata and Kapha; and aggravated Kapha - with normal Vata and Pitta). Taken doubly at a time, both of them aggravated. equally or one more (aggravated) than the other, the number of combinations would be nine. Taken three at a time - all of them either equally aggravated, disproportionately - the number of combinations would be thirteen (a total of 25 combinations of aggravation i.e. 3 singles, 9 doubles and 13 triads). There are thus fifty combinations in all, when

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counted with an equal number of combinations of diminution (a similar total of 25 combinations of diminution of dosas) of the dosas (taken one, two or three at a time).

The number of combinations (Taken one, two and three at a time), with the aggravated and diminished dosas juxtaposed, would be twelve only thus they all are compiled to be sixty two in number (Uttara tantra Chapter 66, 10-12/1). Concerning more and most (serious degrees of excitement) etc., as Caraka says "the predominance of the dosas is described in terms of the comparative and superlative degrees. The comparative (a more serious degree) is used with reference to (excitement of) two and with reference to (excitement of) all the three dosas the superlative (most serious degree) is used (Nidāna, Chapter-1/12(3).

Thus, the above mentioned distinctions with regard to to hetus (causes) and dosabhedas have been summarized as follows:

"The following distinctions with regard to the cause have been described: four (types) as to its being subordinate, distant, near or predominant; three types with regard to (its subdivision into) inadequate junction of the senses with their objects, transformation (bytime) and errors in judgement; also (three) with regard to (its being a) cause of a disease, a morbific entity or botn; two (types with regard to the distinction of) a (cause) of manifestation

and a (cause), bringing about the production and also (two) with regard to the distinction of an external and an internal (cause).

Distinctions of the dosas (are made) with regard to their being natural or deviated, chief or adjunctory, with regard to their being correlated with (the morbific entity dominating in) the prakṛti (constitution) or with another (morbific entity) with regard to their receptacle or their being dragged away (from it) and with regard to their mode of being Sāma and Nirāma."

Thus, the object of studying Nidana (Etiology) is primarily to know the cause or causes of a particular disease. It facilitates treatment if the cause or causes of the diseases are definitely traced out. Further, in most cases, when the cause of the disease is removed, the disease subsides naturally. According to Ayurveda the best method of curing disease is to avoid all those things that act as causes of that disease, as Suśruta says - "In brief, the management essentially consists in the avoidance of the etiological factors; and specifically, in detail, it implies counteracting the increased Vata and other dosas."9

1, 5d - 6: Purvarupa (a group of premonitory symptoms or the symptom complex) is that by which an impending illness, not (yet) assignable to the specific (characteristics of a) dosa (morbific entity) is characterised. It is a mild (an undeveloped) sign on account of the

^{8 -} The Madhava Nidana and its chief commentary (Chapters 1-10) by G.Jan.Meulenbeld (1974) P.Nos. 37 & 43.

^{9 -} Ophthalmic & otorhinolaryngological considerations in Ancient Indian Surgery (based on Śālākya Tantra Portion of Uttara Tantra of Suśruta Samhifa, Chapter 1/25, by G.D. Singhal & K.R. Sharma (1976), Published by Dr.G.D. Singhal, Singhal Publisations, 14, Sammelan Marg. Allahabad - 211003, India, P.No.10.

slightness of the ailment, in accordance with each (particular disease).

(A.H.Nid. 1, 3d - 4)

The Purvarupas have been given just after the Nidana because, they immediately follow upon it. To put it shortly the characteristic (of a prodrome) is (as follows): "A prodrome is a sign that only makes (one) aware of an impending illness." And the prodromes are verily the signs of an illness though it is not (vet) present, in the same way as the coming up of specific clouds of rain. 10 Such as there may be symptoms of impending rain Viz... a black cloud, a cool breeze and lighting. These three may be taken as Pūrvarūpas or premonitory indications of impending rain. But, at this stage one cannot be certain that this rain is sure to come. So, it can be said that, the Purvarupas are the Premonitory signs and symptoms which appear before an illness being about to arise. These Pūrvarūpas may give a clue to the disease but, at this stage one cannot be certain whether any disease will manifest itself or whether the disease may subside. These signs and symptoms may be few and may not be very pronounced but an intelligent physician may be able to guess the advent of the disease very often. Although the prodromal symptoms should not be considered as actual symptoms of the disease as study of these symptoms is of great value in detecting the onset of a particular disease well before hand and even in preventing it by taking the necessary steps.

The Purvarupas are of two kinds. Viz. Samanya (general) and Visista (special). Samanya Purvarupas are those which indicate the disease to some extent without giving any indication of the Dosa derangement, Visista Purvarupas are those which give an idea of the Dosa also in addition to some idea about the disease. It is from the Rupa (signs and symptoms) That, we can have a clear and definite idea of the disease and of the Dosas, e.g. excessive vaning occurring before fever may be taken as Visista Purvarupa of Vata type of fever; burning sensation in the eyes as a Visista Purvarupa of pitta type of fever and disgust for food as Visista Pūrvarūpa of Kapha type of fever.

Another point of distinction pointed out between sāmānya and Viśista Pūrvarūpas is that the Sāmānva Pūrvarūpas generally disappear before the onset of the disease whereas Visista Pūrvarūpas are likely to continue after the disease commences. It is further stated that if a large number of premonitory symptoms mentioned in the case of a disease, persist also after the disease manifests itself, the prognosis is considered to be grave. As it is mentioned in Caraka Samhita "If all the purvarupas of fever as have already been spoken of, are seen in a man with excessive intensity death makes it entry in to him preceded by fever. If all the premonitory symptoms of any other disease find a place in a man, similarly with excessive intensity, death is certain to be fall him consequet upon that particular disease (Indriva sthana, 5 / 4-5).

^{10 -} The Madhava Nidana and its chief commentary by G.Jan Meulenbeld (1974) P.Nos. 43 & 47.

¹¹⁻ Ayurveda Siksha (A Text - Book of Ayurveda) Volume IV-Section I. "Principles of Diagnosis" (Roga Vijnānam), edited by Dr.A.Lakshmipathi (1945) Circus Maidan, Governorpet Bezwada, P.Nos. 35-38.

1: 7: When this same (Phenomenon, i.e. the group of premonitory symptoms) has reached a developed state then it is called Rūpa (signs and symptoms), Samsthāna (Shape), Vyanjana (manifestation), Linga (signs), Laksanā (charactertisctics), Cinha (indication) and Ākrti (form)

(A.H.Nid. 1,5)

When the Purvarupas, are manifested in the disease, then they are called Rupas. As mentioned in Caraka Samhita "The symptoms are characteristic manifestations which develop during the course of the disease. Here linga, Akrti, Laksana Cinha, Samsthana, Vyanjana and Rupa are synonymous (Nidana, 1/9).12 All these synonyms of the word Rupa indicate the signs and symptoms by which a disease is identified! In this definition, it is intended to state definitely that Purvarupas, which existed before the onset of disease, are not Rupas and only those tokens that indicate a disease are called Rupas. The question now arises whether the sum total of Rupas is in itself a disease or not,? Ordinarily when we speak of Jvara (fever) we intend by that term Jvara, all the signs and symptoms by which the jvara is expressed or manifested. Here, Jvara is taken as a disease and not as a symptoms. In other cases, i.e. in pravahika (Dysentery) or Kustha (Leprosy), Jvara may exist along with other predominant symptoms of Dysentary or Leprosy, then we consider ivara as one of the symptoms of the disease and not the disease itself. Arocaka (anorexia) may be one of the symptoms of jvara but, Arocaka may sometimes exist

without any jvara at all and may be the only symptoms, then it (Arocaka) is considered as a disease.

It is said that, the symptoms are not the disease but the abnormal condition of the body which causes these symptoms, is the disease. A name given to the group of symptoms, or to one symptom alone, is accepted as the name of the disease. Caraka himself has given his consent for using such nomenclature for purposes of corvenience in the identification and treatment of a disease, such as "In this epitome of description and treatment of a disease, such as "In this epitome of description of the diseases, some of those that have been mentioned as the symptoms of diseases appear as independent diseases; as long as they exist secondarily, they are called symptoms and not diseases" (Nidana, 8/ 40).

It often happens that, for the sake of easy understanding, symptoms by themselves are spoken of as disease in the section on Nidana. This was done for the sake of convenience but the symptoms are only symptoms and they can never be diseases. The purpose of treatment should be to break the Dosa Dūshya Sammurchana (the abnormal interaction - between dosas and dusyas). Although, for purposes of convenience symptomatic treatment is sometimes given, the original object of the treatment should never be forgotten. For this purpose a knowledge of minute details of Rupas (Signs and symptoms) becomes essential 13.

^{12 -} The Madhava Nidana & its chief Commentary (Chapters 1-10), by G.Jan. Meulenbeld (1974), 1st Chapter, P.No. 48.

1,8-9: The use of medicines, foods and rules of conduct, opposite to cause and disease or both, providing the result of that which is opposite (to cause and disease or both) and conducive to well being should be known as Upasya (therapeutic diagnosis) of a disease, which is traditionally called Satmya i.e. adequate (treatment). The opposite (of it), Anupasya (adverse therapeutic diagnosis), is technically called Asatmya i.e. inadequate (treatment) with regard to the disease

(A.H.Nid. 1, 6-7).

Next is order comes, what is termed as Upasaya, which is really a form of diagnosis by applied therapeutics. As it has been mentioned in Caraka Samhita that. "Such of the medicines, foods and rules of conduct as bring about happiness either by acting directly against the cause of the disease, and or the disease itself or by producing such effects indirectly are called Upasya." "In other words: "The homologatory signs are those which indicate what kinds of medicine, food and behaviour are antagonistic directly or in effect to disease and its causative factors and what are agreeable to the patient's system" (Nidana, 1/10).

Thus, the use of a medicine, a diet or the hygienic conduct, which has given relief is called Upasaya. Its synonym is Sātmya, i.e. adequate (treatment), when otherwise it is Asātmya, i.e. inadequate (treatment) or adverse therapeutic diagnosis with regard to the ailment. In this case it is said, medicines, foods and rules of conduct constitute an implicative expression including place and time also, as it is given in Caraka Samhitā that: "The knowers of the principles of homologation advise habitual use of such foods (including drugs)

and rules of conduct having opposite qualities of the country (the habitat of the individuals) and the causative factors of the ailments prevalent there" (Sūtra, 6/50).

Upasya is divided into two broad groups such as (i) the remedial agents etc, which are actually antagonistic to the cause of the disease and / or disease itself and (ii) the remedial agents etc., which are actually not antagonistic either to the cause of the disease or to the disease itself but when employed, they actually alleviate the condition by counteracting either the disease and/or the cause of it.

Upasaya provides diagnostic aid for ailments which are otherwise difficult for diagnosis, as it has been stated in Caraka Samhitā:

"The following among others are the factors to be observed by inference............ diseases with latent symptoms by the administration of such therapics as would alleviate or aggravate the condition........." (Vimāna, 4/8). For example as given in the Caraka Samhitā, that: "The edema which is reddish in appear, which is lessened at night due to rest and which disappears when massaged with unctuous and hot substances is also due to vata (Sūtra, 18/10).14

Following are the various types of Upasaya: 1- Hetuviparita (Those things which are contrary to cause of the disease:

(a) Medicines: The administration of Medicines having usnatva quality heating effect) like sunthi (Zingiber officinale Rosc.) in fever caused by cold regimen and also by the vitiation of Kaphadosa. As it has been given in the Caraka Samhitā that,

"The intelligent physicians administer

^{13 -} Ayurveda Siksha, Vol.IV - Section - 1, "Principles of Diagnosis, edited by Dr.A.Lakshmipathi (1945), Circus Maidan Governor Pet, Bezawada (Vijayawada), P.No. 39-41.

^{14 -} The Madhava Nidana & its chief Commentary (Chapters 1-10) by Jan Meulenbeld (1974), 1st chapter, P.Nos. 52-53.

cold things to cure diseases caused by hot things; and for those diseases that are caused by cold things, hot medicines are useful" (Vimāna, 3/41)

- (b) Foods: The administration of rice boild in meat-broth (a form of food) in a fever caused by fatigue and also by the Vitiation of vata, to remove the fatigue, the cause of fever, i.e. Vata.
- (c) Rules of Conduct: The act of remaining awake in the night in a disease of Kapha to counter act the Kapha which is caused by excessive sleep in the daytime.

As it is mentioned in Caraka Samhitā that, "sleeping during the day time in the seasons other than summer is not advisable as it causes vitiation of Kapha and Pitta" (Sūtra, 21/44).

- 2. Vyādhiviparīta (those things which are contrary to the disease):-
- (a) Medicines: The administration of Pāthā (Cissampelos pareira Linn.) and Kutaja (Holrrhana antidysenterica wall.) as astringents in diarrhoea; in the same way sirisa (Albizzia lebbeck Benth.) in Viṣa (poison) (a specific like) to destroy it Khadira (Acacia catechu willed.) In Kuṣṭha (Skin disease) and Haridrā (Curcuma longa Linn.) in Prameha (Urinary diseases) are administered. Here the medicine is given as a specific in the particular disease in a routine manner irrespective of the nature of the deranged dosas.
- (b) Foods: Intake of bowel binding foods like Masura (*Lens Culinaris* Medic.) in diarrhoea.
- (c). Rules of conduct: Pravahana (Strained evacuation by causing downward pressure in abdomen) in Udāvarta (a retentive disease with pain in abdomen due to misperistalsis) as a therapeutic measure.

- 3. Hetuvyādhiviparīta (those things which are contrary to both the disease and its causative factors):-
- (a) Medicines: In Vatika sotha (swelling caused by the Vitiation of Vata) administration of the Dasmula (roots of Aegle marmelos corr, Oroxylum indicum arborea vent... Gmelina Linn: Stereospermum suaveolens D.C., Cleroden-drum phlomidis Linn. f.of Desmodium caneticum D.C., Uraria gicta Desv., Solannum indicum Linn., Solanum xanthocarpum Schrad, wendl., and Tribulus terrestris Linn., which eliminate both the Vata as well as the swelling.
- (b) Foods: The administration of Takra (buttermilk) in grahani (disorder) arisen from Vata and Kapha. Here Takra checks Vāta kapha and it is also a specific for Grahani, and the administration of a hot and antipyretic peya (a thin gruel) in vātika fever caused by the cold things for it destroys Vāta by its hot potency and fever by its special faculty.

As it is stated in the Caraka Samhitā that "............ and being wholesome in fever, they act as febriguge. Therefore, the wise physician should treat the fever-patient with gruels from the very beginning except in case where the fever is due to alcoholism" (Cikitsā, 3/153.)

- (b) Rules of Conduct: Remaining awake during night which causes roughness, for the treatment of drowsiness caused by the sleep during day time, which is unctuous. Thus it is the opposite to both the cause and disease.
- 4. Hetuviparitarthakari (those things which work against the causative factors of disease; even though they are not antagonistic):-
 - (a) Medicines: Application of upanaha

sweda (hot poultics) which normally aggravates pitta. for the treatment of oedema dominated by the vitiated pitta.

- (b) Foods: Intake of foods which cause burning sensation, by a patient suffering from oedema dominated by vitiated pitta. Here the disease is caused by pitta, the agents employed to effect the cure also promote pitta.
- (c) Rules of Conduct: Terrorising a patient suffering from Vatika Unmada (insanity caused by the vitiated vata). Fear, which is one of the causes of promoting insanity, increases Vata, but, here, it helps the patient as an amliorative measure.
- 5. Vyādhiviparitarthakāri (those things which work against the disease; even though they are not antagonistic):-
- (a) Medicines: Administration of the Madan phala (*Randia-dumetorum* Lam), which itself is an emetic for the treatment of vomiting.
- (b) Foods: Intake of milk (as) a purgative in diarrhoea.
- (c) Rules of: Tickling (of the throat) for bringing about upward pressure in abdomen in order to (provoke) vomiting for the treatment of vomiting.
- 6- Hetuvyādhiviparitārthakāri (those things which work against the disease and its causative factors; even though they are not antagonistic): -
- (a) Medicines: Application of ointment prepared of aguru (Aquilaria agallocha Roxb.) etc. for the cure of burns caused by fire, both the disease and its causative factors are hot and the medicine applied

- over it, is also hot. In this way, the administration of poison to cure a case of poisoning also.
- (b) Foods: Administration of intoxicating alcohol for the treatment of alcoholism caused by the intake of alcohol.
- (c) Rules of conduct: Physical exercise, in the form of swimming, for the treatment of Sandhigata vata (gout) caused by excessive physical exercise swimming here is recommended as an ameliorative measure.

In this way, each of the six type of Upasya is divided into three classes according to the use of Medicines, Foods and Rules of conduct thus, making eighteen varieties of the Upasaya as mentioned above.

Anupasaya, which also helps in diagnosing a discase by its negative effect is included under etiological factors, hence, not to be mentioned separately.

1, 10: The process of manifastation of an ailment by a dosa (morbific entity), in accordance with the (particular manner of its) corruption and the (particular manner of its) spreading is called Samprapti (pathogenesis) or jati (emersion) or Agati (origination).

(A.H.Nid. 1,8) 15 & 16

Samprapti means the description of the pathology of the dosas, dhatus and malas etc., or in other words, it is the description, in detail of all the morbid processes that take place in different diseases or in different stages of the same disease. The accumulation of the dosas, their movements and the particular form which the disease takes, are included in samprapti.

Caraka Samhita, with English Translation and critical exposition by Dr. R.K. Sharma & Vol. Bhagwan Dash (1985) Vol. II. Published by Chowkhamba Sanskrit series office, Varanasi - 221001 (India), P.Nos. 9-11.

The Madhava Nidana & its Chief Commentary, (Chapters 1-10) by G.Jan Meulenbeld (1974)
 P.Nos. 53-58

The words Jati and Agati are its synonyms.¹⁷

Some scholars are of the opinion that, the factor which finally determines the manifestation of a disease is Samprapti. According to them, like Nidana etc., Samprapti is not indicative of the unmanifested disease but of the manifested on. Some other scholars do not agree with this view because in that case Samprapti does not materially help in the diagnosis of the disease. It is also not necessary, according to them that a disease should be diagnosed only when it is fully manifested because even in unmanifested stage. disease are diagnosed by the help of Nidana and Purvarupa. Therefore, the genesis of the disease by the specific action of vitiated dosas responsible for its causation is called Samprapti. Thus, the synonym Agati which means the course of a disease right from the affection by the causative factors upto its manifestation, is justified. This Samprapti helps in the comprehension of the specific feature of a disease. For example, the Samprapti of Jvara (fever) indicates that, the dosas vitiated by various causes enter into Amasaya (Stomach including Small intestines) and expelling the Jatharagni out of its place (suppression of the power of digestion as well as metabolism) extend themselves into the Rasa Dhatu (Plasma and other fluid contents of the body) and cause Jvara. No doubt, afflication of Amasaya etc. are manifested due to the dosas and as such should be comprehended by the mention

of causative factors. But in view of the specific purpose served by these manifestations of causative factors, they are mentioned separately under Samprāpti. Similarly pūrvarūpa, which forms a part of Rūpa has been stated separately because it helps in the diagnosis of a disease before its manifestation. 18

1.11: This (Samprāpti) is distinguished (into various kinds) on the basis of specification regarding Sankhyā (number) Vikalpa (discrimination), Pradhānya (Predominance), Bala (force) and kāla (time), in a way as in this very (book) it will be said "there are eight (types of) fever" (This is called Sankhyā samprāpti).

1.12: Vikalpa (discrimination) (Samprāpti), is the settling of each component of the united morbific entities, responsible for the manifestation of a disease; the pradhānya (pre-dominance) of a disease will be indicated by its independence or dependence.

1.13: Bala (the specific force or weakness of a disease) is known by the completeness of the (presence of) sub-divisions of the (series consisting of the cause etc...) Kala (the time) of a disease (will be determind) by the component parts of night, day, season and the (digestive process of the) ingested food, in accordance with the (particular) dosa (impurity-involved). 19.

(A.H.Nid. 1, 9-11).

On the basis of certain specific characteristics the smaprapti has been subdivided here into following five kinds:

1. Sankhyā samprāpti: It is the number of varieties or types in which diseases may manifest themselves e.g., there are eight types of fever, As it has been also mentioned in Caraka Samhitā that:

^{17. &}quot;Ayurveda Siksha" Volume IV - Section 1, principles of Diagnosis (Roga Vijnan), edited and published by Dr. A Lakshmipathi (1945) P.No. 47.

 [&]quot;Caraka Samhita" with English Translation and Critical Exposition by Dr. R.K. Sharma and Vd.Bhagwan Dash, Vol. II, Published by Choukhamba Sanskrit Series office, Varanasi - 221001 (India), P.No. 11-12.

^{19. &}quot;The Madhava Nidana and its chief commentary; (chapters 1-10,) by G.J. Meulenbeld (1974) P.No.60.

"The number of the (Type of the disease is responsible for the variation of the samprāpti., e.g. eight kinds of jvara (Fever), five kinds of gulma (Abdominal tumour), seven varieties of Kuṣṭha (Dermatosis) and so on" (Nidāna, 1/12 (2)

- 2. Vikalpa Samprāpti: Vikalpa or discrimination is the settling of one or the other component (dryness, etc of the Vāta etc.) of the united morbific entities. It can also be expresed as, the measure in which the dosas are excited in the dosic triad or the measure in which the dosas gunas that excite the dosas, exist. As it has also been mentioned in Caraka Samhitā that: "Vikalpa in this context is used to signify precise minute pathological changes of each of the three dosas "(Nidāna. 1/12 (5).
- 3. Pradhānya Samprāpti: The predominance of a particular dosa or dosas or the aiscertainment whether a disease is independent (primary) or dependent (secondary to or complicating the primary disease) is the Pradhānya samprāpti. The predominance results from independence and non-predominance from dependence, moreover non-predominance should also be understood, here which is not explained because it it easily understood.

In Caraka samhitā also it is said that "The Predominance of morbid humors described in terms of the comparative and superlative degrees. If two out of the three dosas get vitiated, the comparative term "tara" is used to indicate the predominant one. If, however, all the three dosas get vitiated then superlative term "Tama" is used to indicate the most predominant one (Nidāna, 1/12 (3))

4. Bala Samprapti: It is the specific force or weakness of a disease. The force of a disease is known by the completness

of the presence of the cause, prodromata and symptoms, its weakness results from the presence of subdivisions i.e., fragments of these (cause etc.) Thus, Bala Samprapti is the strength of a disease, known by its severity or mildness depending upon presence or absence of all the cause, prodromes and symptoms.

Kāla Samprāpti: It is to signify that a disease is severe, moderate or mild during a particular time factor, i.e., the night, day, season and the (digestive process of the) ingested food, in accordance with the particular dosa involved. As it has been said in Aṣṭānga hṛdaya that, "Though being pervasive, they (Vāta, Pitta Kapha) are residing under, between and above the Cardiac and umblical regions, they belong to the end, middle part and beginning of life, day, night and (the digestive process of) the ingested food in due order" (Sūt. 1/7cd-8 ab).

In Caraka Samhitā Bala Samprāpti has not been given separately, but, it is described along with the kāla samprāpti, and one Vidhi (mode) samprāpti has also been described. Thus according to Caraka the Samprāpti is of five types only. In Madhāva Nidāna the Vidhi Samprāpti has not been described, for which Vijayaraksita says, that, the term Sankhyā includes the Vidhi because the latter is invariably connected with Sankhyā (number)

That are the characteristics of the Samprapti.

1, 14 a b: Thus has been proclaimed what is meant by nidana; it will be elaborated later.

(A.H.Nid. 1, 12 ab)

In this way a general description of the Nidāna etc. (the five means of getting knowledge about a disease) has been given uo till now. Hereafter, the Nidāna etc.,

belonging to each particular disease together with the specific particulars of each of the disease have been described elaborately.

1, 14 cd - 15 ab: The excited dosas are really the root cause of all disease and the cause of the excitement of the dosas again is proclaimed to be the indulgence in different kinds of unwholesome foods or activities in several ways.

(A.H.Nid.1, 12 cd -13ab)

Generally, the causes of diseases are twofold, viz. Viprakrsta (distant) and Sannikrsta (near), and with regard to this distinction, unwholesome foods etc. (i.e. inadequate conjunction of the senses with their objects, errors in judgement and transformation by time) are Viprakrsta and vitiated Vata etc. are the Sannikṛṣṭa causes. All diseases are invariably caused by the vitiated dosas, as it is mentioned in Susruta samhitā that. "As a disease cannot occur without involvement of dosas, hence even if the disease is not (specifically) mentioned, the intelligent physician should treat the disease as manifested by the signs and symptoms of vitiated dosas" (sūtra, 35/ 19).

Although excitement of a dosa does not occur in the production of adventitious illness, nevertheless this excitement will necessarily come about immediately after the production, in the same way as the connection with its qualities in a medical substance which has been produced. As it is given in Caraka Samhitā that, "The exogenous one (disease) begins with pain and later on leads to the discordance of Vāta, Pitta and Kapha" (Sūtra, 20 7(1).

Diseases as causative factors for other diseases:

 1, 15 cd : Diseases also act as the causative factors of other diseases,

- 1,16: For example, Raktapitta (hemothermia) is produced as the result of the general glowing heat of Jvara (Fever) and Jvara is also produced by Raktapitta; from both these (Jvara and Raktapitta) sosa (consumption) also arises;
- 1,17: Jathara (abdominal affections ascitis) may result from the enlargement of spleen and from Jathara, certainly sotha (edema); from arsa (Haemorrhoids) there may result abdominal suffering and also gulma (abdominal Tumor) Pratisyaya (coryza) results from morbific factors such as sleeping at day time etc);
- 1, 18: Kāsa (caugh) may result from corryza and Kṣaya (wasting) from Kāsa; and the Kṣaya acting as a causative factor may lead to the disease (called) sosa.

(C.N. 8,16 cd-19).

Though, a disease sometimes becames a cause for another disease. But the causative factors of the primary disease should be considered as the etiological factors for the secondary disease also. Caraka has summarily described the etiological factors of all the primary diseases as being threefold as".....is known as the unholesome conjunction. The objects of sense faculties which are of five kinds are further subdivided into three each (Viz. non-utlisation, excessive utilisation and wrong utilisation" (sut 11,38). The use of the term Nidanarthakara implies that, there is no further category of causative factors. Further, a disease bringing about another disease, can do so only when its force has been augmented by another cause. For example, the Jvara, as mentioned above does not start Raktapitta, as long as its force is not augmented by the unwholesome conjuction of the senses with their objects etc., such as, Jvara is caused by substances having heating property and if such substances are excessively used or other substances having properties conducive to the production of Raktapitta are simultaneously used then it results in the production of raktapitta. Thus, with regard to the production of a disease the cause is therefore, threefold, directly or indirectly. Casuative factors as diseases in stages:

1, 19 a b: They exist first as isolated diseases, and later on act as causative factors of other diseases.

(C. N.8,20 a b)

These primary diseases in initial stage are existing as such alone, and later on, being augmented by another cause, they bring about another disease, as for example Jvara generates raktapitta.

Nature of disease and difficulty in cure: 1, 19 cd: Sometimes one disease gets subsided, after giving rise to another disease,

1,20: Whereas, there are other diseases which even after causing another disease do not subside.

Such admixtures of diseases in human beings are regarded as being those which are the most difficult for treatment.

(C.N.8, 21-22 ab)

Some diseases get subsided after causing another disease, but there are other

diseases which produce yet other diseases without themselves subsiding. For example coryya may continue to exist along with kāsa after causing to latter, and at times after causing kāsa, coryza itself may get subsided. In the former case coryya is considered both as a disease as well as a causative factors, in the latter case it acts only as a causative factor.

The examples of admixures of diseases, i.e. combinations of diseases are: when coryza does not cease and cough is produced, haemorrhoids do not cease and abdominal affection and visceral swelling occur. They are most difficut to cure due to the combination of diseases, as they generate suffering of many kinds and usually are obstructive to treatment.

1,21: So, the accomplished physicians desirous of outstanding success, in the field of treatment have to learn, exerting themselves, this very ascertainment of Jvara (fever), etc., which will be described further.

Therefore, the physicians desirous of success have to strive hard to understand the diagnosis of diseases like jvara (fever) etc. as being described hereafter, 20 & 21

Thus ends the chapter called Panca Laksana Nidana.

Caraka Samhita (Text with English translation & critical exposition based on Cakrapani Datta's Ayurveda Dipika commentary) by Dr. R.K. Sharma and Vol. Bhagwan Dash, Vol. II, 2nd Edn. (1985), Pub. by Chowkhamba Sanskrit series office, Varanasi - 1, P.Nos. 105 & 106.

The Madhava Nidana & its Chief Commentary (chapters 1-10) by G.Jan Meulenbeld (1974), P.Nos.66-68.

REFERENCES

1. Lakshmipathi, A.	1945	"Ayurveda Siksha" (A Text - Book of Ayurveda) Volume IV - Section -1, "Principlesof Diagnosis" (Roga vijnanam) edited by Dr. A. Lakshmipathi, Circus Maidan, Governorpet, Bezwada (Vijaya- wada (India).
2. Meulenbeld, G.J.	1974	The Madhavanidana and its Chief Commentary (Chapters 1-10). Printed with financial support of the Netherlands Organization for the Advancement of - Pure Research (Z.W.O.), Leiden, E.J. Brill.
3. Sharma, R.K. & Bhagwan Dash	1985	Caraka Samhita (Text with English translation & critical exposition based on Cakrapani Datta's Ayurveda Dipika commentary) by Dr. R.K. Sharma and Vd. Bhagwan Dash, Vol. II, 2nd Edn. Pub. by Chowkhamba Sanskrit series office, Varanasi - 1 (India).
4. Singhal, G.D. & Sharma, K.R.	1976	Ophthalmic & otorhinolaryngological consider- rations in Ancient Indian Surgery (based on Salakya Tantra Portion of Uttara Tantra of Susruta Samhita, Published by Dr. G.D. Singhal, Singhal Publications, 14, Sammelan Marg, Allahabad- 211003 (India).

सारंश

निदानपञ्चक व्याख्या (माधवनिदान प्रथम अध्याय)

- मोमिन अली

यह लेख भारतीय आयुर्विज्ञान इतिहास संस्थान पत्रिका खण्ड २७ संख्या २, जुलाई १९९७ पृष्ठ संख्या १६३ से १७१, में प्रकाशित निदानपञ्चक व्याख्या (माधवनिदान प्रथम अध्याय) नामक लेख के क्रम में ही है | जो कि व्याधि का विशिष्ट (यथावत) ज्ञान कराने वाले निदान, पूर्वरूप, रूप, उपशय एवं सम्प्राप्ति इन पांच उपायों से संबन्धित है | इस विषय में माधवनिदान नामक ग्रन्थ में जो वर्णन मिलता है उसी पर यह लेख आधारित है |