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An approach to the clinical manifestation of Rupavriddhi Rupahani Rupantara in Avarana

Dr. Sharanamma, Dr. A. S. Prashanth, Dr. S. G. Chavan.

¹Post Graduate Scholar, ²Professor & Head, ³Professor, Department of Post Graduate Studies in Kayachikitsa, Ayurveda Mahavidyalaya, Hubli, Karnataka, INDIA.

ABSTRACT

Ayurveda believes in different pathology which sets in different *Srotas* to produce different diseases. Whenever a favorable condition and situation arise, diseases will manifest. *Nanatmaja Vikara*, *Anubandha*, *Gatavata* and *Avarana* are different pathologies explained in Ayurveda. *Avarana* is one of the most difficult concept to understand teach and incorporate in clinical practice. It is either least observed, diagnosed or goes unidentified due to lack of skill. To understand and analyze the *Avarana*, Meticulous knowledge of basic concept of Ayurveda is essential. It is assumed that symptoms complex in *Avarana* leads to misunderstanding, wrong diagnosis and sometimes end with complications. The symptoms produced in *Avarana* are based on the principles of *Rupahani* (*Karmakshaya*), *Rupavriddi* (*Karmavriddhi*) and *Rupantara* (*Anya Karma*). The present article is an attempt made to have a critical clinical study of role of *Avarana* in the manifestation of *Rupavriddhi*, *Rupahani*, *Rupantara*.

Key words: Avarana, Rupavriddi, Rupahani, Rupantara, Ardita.

INTRODUCTION

Tridosha are the biological entities derived from Panchamahabhuta, responsible for regulation of all bodily functions, its regulation and considering the physiological importance of Dosha in maintance of homeostasis of the body, Tridosha have been called as root of the body i.e. 'Doshadhatumalamulam Hi Shareeram'. Among Tridosha, Vata important role because it has specific character like, Atibalatvena, Ashukaritvat, Vayuh Gatiyatvat, Vikaranam Dusadhyatvat, Aatyayakaratvat,

Address for correspondence:

Dr. Sharanamma

Post Graduate Scholar,

Department of Post Graduate Studies in Kayachikitsa, Ayurveda Mahavidyalaya, Hubli, Karnataka, India.

E-mail: dr.sharanamma24@gmail.com

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Yogavahah. In Vata Kalakaliyadhyaya, Acharya Charaka has explained that Prakuta and Vikruta Laxana of Vata.^[1]

Vata is a unique Dosha and it differ from other Doshas in many ways, for example Pitta and Kapha are Pangu and Vata regulates their functions. [2] Vayu is life, strength, sustainer of the creatures in the entire world, master of all activities. Of the three Doshas, Vata is the one with proper movement i.e. Chalatva. This property having key role in the mechanism of pathogenesis and also makes Vata Dosha, the prime one. The movement of Vata Dosha gets affected in different ways, in other words we can say the pathological condition of Vata in state viz Kevala Vata, Doshayukta Vata and Avrita Vata. Avarana is one among them. In the pathological state also it has double path of vitiation i.e. its vitiation may occur by the depletion of *Dhatu* or by the obstruction of its path by the others.

AVARANA - UNIQUE CONCEPT

The concept of *Avarana* is a unique and the most difficult condition in Ayurveda to understand, analyze and interpret by a physician. *Acharya Susruta* defined

Vata as self generated, subtitle and all pervasive. Vata mainly responsible for normal functioning of all the vital structure of the body with its unique quality i.e. Chalatva (movement). Charaka tikakara Chakrapani says that "Vayoh Vayvantarena Gati Hananarupam Avaranam" means obstruction to the Gati of Vata by another type of Vata is called Avarana. The word Avarana means Avarodhana and Gatinirodha. There are different types of Avarana mentioned in Ayurvedic treatises based on Avruta and Avaraka. During study of Avarana, Vata one has to come cross the two terms i.e. Avruta (which get obstructed), Avaraka (which causes obstruction). Generally in Avarana, the function of Avaraka suppresses the function of the Avruta and manifest itself independently. Thus it manifests Swakarma Vriddhi of Avaraka and Swakarma Hani (diminished activities) of Avruta. Based on this the symptoms will appear in any type of Avarana which help in proper diagnosis. ex in Kaphavruta Vata, we can see Kaphavriddhi and Vataksaya.

Symptom complex in Avarana

Often the symptoms manifested are combined of disturbed function of the obstructing factor as well as the obstructed *Vata*. The symptoms produced are based on the principles of *Rupavriddi* (*Karmavriddi*), *Rupahani* (*Karmahani*) and *Rupantara* (*Anya karma*) and which depend upon the intensity of the obstruction i.e. partial or complete; functional or organic; acute or chronic; transient or persistent etc. For instance, less strong obstruction of *Vata* will lead to its provocation, where as the powerful obstruction may make it weak and like wise. The symptomatology of *Avarana* depends upon the place where it has manifested.

Avarana - An atypical clinical presentation

The symptoms complex produced by *Avarana* is always a diagnostic challenge. To identify the precise cause and exact pathogenesis of *Avarana* requires a special diagnostic skill and expatiation. Some time it misleads the physician because of its complex atypical presentation by mentioning that *Vata* obstructed by *Meda* and *Kapha* produces pain, numbness and

edema. The physician ignorant of the condition of *Avarana*, thinking *Vata Prakopa* is there, May prescribe unctuous enema, which may further deteriorate the conditions. All these references indicate towards its atypical presentation, which may lead to diagnostic error resulting in mismanagement too.

Diagnostic methods of pathologies of *Vata* in *Avarana*

Ksaya, Vriddhi and Gatatva conditions of Vata can be diagnosed easily with the help of symptomatology mentioned in the texts. However, Avarana requires a special diagnostic skill, because of its complex presentation. Susruta mentions that the differential diagnosis between the conditions of Kevala Vata, Samsarga Vata and Avrita Vata^[3] can be made on the basis of their symptoms, by applying the reasons. Sometimes it may not be possible to diagnosis the Avarana and Anyonya-Avarana straight forwardly and in that case it can be diagnosed with the help of principal based on Rupavriddi, Rupaksaya and Rupantara.

In most of the *Vatavyadhi* we failed to identify the *Poorvarupa* as it is in *Avyakta* form, so here *Rupa* places an major role in presenting the disease.

Rupa

Acharya Vagbhata has explained that Rupa is Laxana. Samsthana, Vyangana, Laxana, Chinha, Akruti are the synonyms of the Rupa and Acharyas have mentioned different names for Rupa in different condition. For example in Jwaraprakarana, they have said Laxana as Akriti. For easy diagnosis we can differentiate Rupa into 3 forms as follows

- Rupavriddi: Increased symptoms.
- Rupahani: Decreased symptoms.
- Rupantara: Taking another form as a structural deformity, Upadrava or Anyakarma.

We can find the reference of *Rupavriddi*, *Rupahani*, *Rupantara* in *Astanga Hridaya*, for better understanding of disease, diagnosis and planning the treatment.

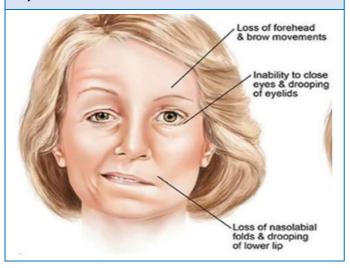
Rupavriddhi



Rupahani



Rupantara



Rupavriddhi: it is condition in which Guna of Vata or Karmata of Vata increased due to obstruction to the movement of Vata by its Avaraka. Arunadatta further

mentioned that *Vriddi* means the *Vaikrita Karma* of *Avaraka Vata*.

Example: Kampavata - it is Nanatmajavyadhi in which kampa of Hasta will be there due to increased Chala quna of Vata.

Rupahani: It is the condition in which *Guna* of *Vata* or *Karma* of *Vayu* decreases due to obstruction to movement of *Vata* by its *Avaraka*. *Arunadatta* further mentioned that *Hani* means diminution in the function of the *Avaryavata*.

Example: *Udanavrita Prana* - The condition of occlusion of *Prana* by *Udana* leads to loss of all motor and sensory sensory functions (*Karma Kshaya*), loss of strength (*Bala Kshaya*) and completion (*Varna Kshaya*), loss of vital essence (*Ojokshaya*), indicates the *Karmakshaya* of *Udanavayu*.^[5]

Pakshagata: Due to decreased in Chalatva of Vata, we see the Karmahani in affected part.

Rupantara: Rupa + Antara, here Rupa means Laxanas and Antara means difference, by this we can defined that appearance of symptoms other than factors involved in Avarana. In some extent Rupantara may be Anyakarma, Upadrava and Structural deformity.

Example: Ardita - It is Vataja Nanatmajavyadhi, but symptoms indicate the Kapha Dosa vitiation i.e. stiffness in effected site i.e. Hanugraha due to Kaphadosha and deviation of mouth (Mukha Vakrata) as Anyakarma.

Avruta Vata Upadrava

Improper diagnosis and delayed treatment of different Avarana conditions or of one year chronicity lead to complication like Hridroga (heart disease) due to Pranavrita Udana Vata, Vidradhi (abscess), Gulma (localized enlargement of abdomen) due to Vyanavrita Apana, Atisara (diarrhoea) due to Apanavrita Vata, Agnisada (dimished digestive power) due to Kaphavruta Samana. [6] Similarly, according to the site of involvement in different sub-type of Vata, Chronicity and severity of basic pathologies result in different complications.

The concept of *Rupantara* as a *Upadrava*, we can understand better with study of cases. In Case 1-A Patient had a history of ALL (Acute lymphoblastic lymphoma) 5 years back for which she was treated with Chemotherapy for 9 months followed by Radiotherapy for a week. Then she was kept on oral medications as a part of chemotherapy treatment for almost 2 years. After a gap of 6 months, Patient gradually started feeling pain in Right hip along with difficulty in flexion of leg along with difficulty in walking later ended up with shortening of right leg. Here we can say the condition as *Rupantara* i.e. deformity and complication of ALL occurred - due to intoxification of chemotherapy and radiotherapy.

Case 2-A patient with history of burning sensation and discoloration in the upper and lower extremities, later she developed loss of movements in both extremities and ended up with *Visarpa* and treated same for this. After 6 months patient came with the complaints of blackish blue discoloration of both extremities along with severe burning sensation and pain. Which are *Upadrava* of *Vatarakta* i.e. *Visarpa, Pangulya, Anguli Vakrata, Sphota, Toda, Vaivarnyata* and *Kotha*. Here Symptom complex became *Rupantara*. This suggest that Vasculopathy disorder ends with Structural deformity i.e. peeling of nails, Amputaion of hands and extremities.

Concept of Rupa in Ardita

It is not mandatory that, getting only *Rupavriddi* or *Rupahani* or *Rupantara* in a diseases, but we can also find all three condition in one disease. For example Whenever the fast wind strikes the plant, due to the excessive force of the wind, the plant falls down, which we can compare it to the increased *Chala Guna* of *Vata* and *Sthira Guna Kshaya* of *Kapha*. *Rupavrudhi* of *Vata* and *Rupahani* of *Kapha* can be seen here. Eventually the plant starts to dry up and loses its *Prakruta Varna*, *Guna* and *Karma* and became a log i.e. attaining different quality as that of a plant, this can be said as *Rupantara*. Likewise in a disease of *Ardita* we can find all condition - *Ardita* in which, the *Vata* vitiated by the respective factors gets localized in the region of head, nose, chin forehead and the eyes,

does Shoshana of Rakta and other Dhatu thereby causing Sankocha of Avayava located above the neck, leading to Vakrata of Mukha, Nasa, Lalata, Netra and Greeva ultimately produces the Laxana of Ardita which indicate the Rupantara, other symptoms like Vaksanga, Twacha Supata (loss of sensation of the Twacha) indicates the state of Rupahani, along with these, Stambha (stiffness) in Ganda, Shiras, Manya indicate increase state of Kapha and can say Rupavriddi.

Samanya Rupa of Vatavyadhi^[7]

Rupavriddhi	Lakshana	
Pralapa	Karmata Vriddi of Udanavata	
Lomaharsha	Karmata Vriddi of Vyanavata	
Aakshekapa	Karmata Vriddi of Vyanavata	

Rupahani	Lakshana
Garbha Shukra Rajonasha	Karmatahani of Apanavayu
Swaranasa	Karmatahani of Udanavata
Aspashta Vak	Karmarahani of Udanavata

Rupantara	Lakshana	
Paniprusta Shirograha	It is due to vitiation of <i>Vyana Vata</i> but presentation indicate <i>Shlesmaka Kapha Kshaya</i> .	
Khanja	There is vitiation of <i>Vyanavata</i> , presenting <i>Rupa</i> is deformity in <i>Adharanga Kaya</i> .	
Pangulya	There is vitiation of <i>Vyanavata</i> , presenting <i>Rupa</i> is deformity in <i>Adharanga Kaya</i> .	
Khanjatva	There is vitiation of <i>Vyanavata</i> , presenting <i>Rupa</i> is deformity in chest.	

Hundana of Shironasakshi Jatru and Greeva

It is due to *Vyanavata Ksaya* and *Avalambaka Kapha Vriddi* but presentation indicate the *Anyakarma*.

Nanatmaja Vyadhi of Vata^[8]

As we know the *Kevala Vata* is one of the pathological condition of *Vata*, here *Kevala* refers to *Dosha-Asamshrita*, by this pathologesis, it produces *Nanatmaja* disorder. Its *Nanatmaja* type of diseases can be initiated and produces only by *Vata* and no other *Dosha* can produce it.

Rupavriddhi	Rupahani	Rupanutara
Akshepaka	Pakshaghata	Samrutasyata
Vepatu	Manyastamba	Vivrutasyata
Pralapa	Angasada	Padabramsha
Atijrumba	Gadagadavak	Dhanurvata
Катра	Retonasha	Ardita
Shukratipravutti	Aswapna	Apatanaka
Ksipramutrata		Antarayama
		Kubjatva
		Bahirayama
		Khalli

Akshepaka is due to Karmatavriddi of Vyatavata, Vepatu and Kampa are due to Chala Guna Vriddi of Vata, Pralapa is due to Karmatavriddi of Uadanavata, Shukratipravrutti is due to Karmatavriddi of Apanavata. These are condition which state Rupavriddi. Pakshagata is due to Karmahani of Vata in affected part, Manyastambha is due to Karmahani of Vyanavata and Gadagadavak is due to Karmahani of Udanavata and Retonasha is due Karmahani of Apanavata. These are condition which state Rupahani. Samrutasyata is due to Vyanavata vitiation but presenting Rupa is difficulty in closing the mouth, Vivrutasyata is due to Vyanavata vitiation but Rupa as

difficulty to open mouth, *Padabramsha* is due to *Vyanavata* viatiation but presentation as structural deformity (foot dystrophy), *Antarayama* and *Bahirayama* are due to *Vyanavata* vitiation and ended up with Structural deformity, *Ardita* presenting *Mukhavakrata* as *Anyakarma*, *Kubjatva* as structural deformity, these condition state the *Rupantara* in *Vataja Nanatmaja Vyadhi*.

Vata Dushti

When *Vata Dushti* occurs, it results in the *Vriddi* or *Ksaya*.

State of Vata Kshaya suggest Rupahani

- Manda Cheshta (diminished movements); Vata has Chala Guna, here state of decreased Chala Guna i.e. Rupahani. Example: upper (lesion in cranial nerve) and lower motor neuron lesions those are poliomyelitis, trauma in peripheral nerve, paraplegia, hemiplegia.
- Alpa Vaakatvam (diminished speech); normal function of Udanavata is Vakpravrutti, when Udanavata Ksaya occurs it leads to Vak Karmahani. Example: Motar aphasia, dysarthria, temporal lobe syndrome, brain injury.
- Apraharhsa (Lack of contentment/ Emotional instability); Normal function of Prana Vayu is Dharana of Buddhi, Hridaya, Indriyas and Manas, when Kshaya of Prana Vayu occurs leads to Apraharsha. Example: Frontal lobe syndrome.
- Mudha Sangyata (sensory perception disorder)
 Example: Partial cortical lesions.

State of Vata Vriddi suggest Rupa Vriddhi

- Vak Parushyam (horseness of voice) here Rupavriddi has occur example irritation or injury to vocal cord due to Laryngitis, trauma.
- Karsya (Emaciation) Anorexia nervosa, starvation.
- Karshnya (hyper pigmentation of the body) -ACTH dependent cushing syndrome, primary hypoadranalism.

- Ushna Kamitva (desire for warmth) example: Hypothermia, Hypoglycemia, Hypothyroidism, Hypotension.
- Gatra Spurana, Kampa (twicting /convulsion, tremors) example: Generalized involuntary movement like Tics (non rhythmic stereotyped motor movements), Chorea, Athetosis, Tonic Spasm, Clonic Spasm, Anxiety, nervousness, cerebellar diseases, hunting syndrome.

General Management

- General principal of Vatopakrama may be applied with due care to obstructed Vata and Srotas by Pitta and Kapha.^[9]
- The Avarana should be treated by measures, which are Anabhishyandi (non-obstructive), Snigdha (unctuous) and Sroto-Shudhikaraka (depuration of body channels).
- 3. In case, *Vata* is obstructed at all the places, prompt measures, which are regulate of *Vata* and at the same time not antagonistic to *Pitta* and *Kapha* are beneficial.^[11]
- 4. In the condition of *Pittavrita Vata*, the treatment of *Pitta*, which is not antagonistic to *Vata*, should be prescribed. In *Kaphavrita Vata*, the treatment of *Kapha*, which is *Anulomana* to *Vata* should be prescribed. [12]
- 5. A vitiated *Dosha* attains great strength in its natural functional seat, hence it should be first subdued by suitable medications such as emesis, purgation, enema and sudation.^[13]
- Shodana therapy Depending on the strenght of patients, Madhura Anuvasana or Yapanabasti and Mridu Sramsana should be administered. [14]
- 7. Rasayana therapy All the palliative and preventive Rasayana drugs are useful for the prevention and treatment of Avrita induced disorder. Especially Shilajitu, Guggulu, Chawanaprasha and Brahma Rasayana are indicated after proper Sodhana. [15]
- 8. Specific management According to Specific pathologies of *Doshavarana*, *Dushyavarana* and

- Mishravarana treatment modalities varies. For example, Alternative administration of cold and hot therapeutics i.e. Vyatyasa Chikitsa in case of Pittavruta Vata. [16]
- 9. Generally *Udana* should be regulated upwards and the *Apana* downwords. The *Samana* should be pacified and the *Vyana* should be treated by all these three measures. *Prana* should be maintained with due care in comparison to other types of *Vata*, because life depends on the proper maintenance of it in its habitat. Thus the various types of *Vata* that are occluded or misdirected (*Vimargamana*) should be established in their normal habitat.

CONCLUSION

Among the *Nidanapanchaka* of *Roga Parikhsa*, *Poorvarup*a and *Rupa* have important role in identification of the disease and to differentiate *Amshamsha Vikalpa*. In *Vatavyadhi Poorvarupa* is in *Avyakta* form, so *Rupa* plays an important role in diagnosis the diseases. Its quite esay as one is familiar with the symptoms of *Vriddi* and *Kshaya* of *Dosha*. The physician should have through knowledge about *Prakrutakarma*, *Vriddi*, *Kshaya*, *Rachana* of *Dosha*, *Dhatu* and *Mala*. This in term helps in classifying the types of *Avarana*, their presentation *Rupavriddhi*, *Rupahani* and *Rupantara* hence treating it to the fullest.

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