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Vikara Vighata Bhava - Concept of manifestation and non manifestation of a disease

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ABSTRACT

Every individual is dissimilar while resisting a disease. Disease is an outcome of mutual association between *Nidanadi Visheshas* (*Nidana*, *Dosha* and *Dooshyas*). Presence or absence of a factor called *Vikara Vighata Bhava* affects greatly the mutual association of *Trayonidanadi Visheshas*. The outcome of reaction of *Nidanadi Visheshas* with *Vikara Vighata Bhava* and *Abhava* will cause vivid manifestation of pathogenesis (*Sampraptis*). A factor which inhibits/hinders the manifestation of a disease in an individual is known as *Vikara Vighata Bhava*. In the absence of *Vikara Vighata Bhava* manifestation of a disease is possible easily.

Key words: *Nidana*, *Dosha*, *Dooshyas*, *Vikara Vighata Bhava*, *Vikara Vighata Abhava*.

INTRODUCTION

"All causative factors are not equally capable of vitiating *Doshas*, similarly every individual is dissimilar while resisting a disease".^[1] This is a famous quotation by *Acharya Charaka* which explains about health disparity an area of major concern in community health care. An individual may not be born with a disease but is at a risk of developing it at any stage of life. It starts with genetics and life style choices that lead to or worsen risk factors for many diseases.

Susceptibility causes an individual variation in terms of immunity and on large scales it brings about ethnic disparities. We come across many instances of this

kind. Mexican Americans and Arabs are two ethnic groups at a high risk of developing type 2 Diabetes Mellitus.^[2] Blacks have a higher incidence of stroke and more severe strokes than whites.^[3] Sickle cell anaemia is more prevalent in African Americans.^[4] Similarly human being is the only reservoir for the organism salmonella typhi. Animals are resistant to most of plant diseases and vice versa. All these instances can be reasoned well in Ayurveda in terms of *Vikara Vighata Bhava- Abhava Prativisheshata*.

VIKARA VIGHATA BHAVA

According to Ayurveda presence of *Nidana* (causative factor), *Dosha* (three humours of body) and *Dhooshyas* (*Dhatu/Upadhatus/Malas*) is essential for the manifestation of a disease. But the presence of these three is not an absolute assurance for the manifestation of a disease. Presence or absence of a fourth factor called *Vikara Vighata Bhava* will decide the occurrence and non-occurrence of a disease in an individual. *Acharya Charaka* explains like "manifestation and non manifestation of a disease depends upon the prativisheshas of *Nidana*, *Dosha*, *Dooshya Visheshas* towards *Vikara Vighata Bhava* and *Vikara Vighata Bhava Abhava*."^[5] A factor which inhibits/hinders the manifestation of a disease in an

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individual is known as *Vikara Vighata Bhava*.^[6] In the absence of *Vikara Vighata Bhava* manifestation of a disease is possible easily.^[7]

Visheshas and Prativisheshas

The specific factors which are involved in the manifestation of a disease are known as *Visheshas/Nidanadi Visheshas*^[8] and they include *Nidana* (causative factors), *Doshas* (three humours of body) and *Dooshyas* (*Dhatu/Upadhatus/Malas*). Ayurveda considers disequilibrium state of *Doshas* and *Dhatu* as disease.^[9,10] Unwholesome food habits/conduits, time/season (*Kala*), germs, injuries, lightning and toxins can vitiate *Doshas* and are known as *Bahya Hetus* (external causative factors). Similarly, vitiated *Doshas* and *Dhatu* become the *Abhyantara Hetus* (internal causes).^[11] *Acharya Chakrapani* considers *Nidanadi Visheshas* as *Vyadhijanaka Nidan*.^[12]

Prativisheshas

Prativisheshas is nothing but the outcome of *Nidanadi Visheshas* coming in contact with *Vikara Vighata Bhava* and *Vikara Vighata Abhava*. Each of these has four outcomes.

Vikara Vighata Bhava Prativisheshas

We come across four outcomes (*Prativisheshas*) when *Nidana*, *Dosha* and *Dooshyas* come in contact with *Vikara Vighata Bhava*. They are,

1. *Avikarajanam* (non manifestation of disease)
2. *Chirena Vikara Jananam* (Delayed manifestation of disease)
3. *Anu Vikara Jananam* (manifestation of a mild disease)
4. *Asarvalingayukta Vikara Jananam* (manifestation of a disease without the all symptomatology)

Avikarajanam (Non manifestation of disease)

According to *Acharya Vagbhata* disease begins with the vitiation of *Doshas*. Disease is an outcome of mutual association of *Nidanadi Visheshas*. *Nidana* vitiates *Dosha* only when it gets *Anubandhi / Pratyankoola* (associated / mutually coping or

helping) with *Dosha*. *Anubandha* between *Nidana* and *Dosha* is possible only when *Nidana* and *Dosha* are homogenous in terms of *Dravya*, *Guna*, *Karma* and *Prabhava*.^[13] Similarly, *Dhatushaithilyam / Khavaigunya* is the prerequisite for the *Dooshyas* to get associated with vitiated *Doshas*. *Acharya Sushruta* explains it as aggravated *Doshas* circulate throughout the body in search of a favourable place (*Khavaigunya*) to get lodged and cause morbidity.^[14] *Acharya Dalhana* comments *Khavaigunya* as place of *Srotovaigunya*. In the presence of *Vikara Vighata Bhava* association between *Trayonidanadi Visheshas* (*Nidana*, *Dosha* and *Dooshyas*) is not permitted. This leads to non- manifestation of a disease.

Chiren Vikara Jananam (Delayed manifestation of a disease)

In the presence of *Vikara Vighata Bhava*, sometimes *Anubandha* of *Nidanadi Visheshas* happens after a long gap (*Kalaprakarshyad Anubadnanti*) when the person repeats consumption of same *Nidana* (*Heturvicchedham Krutwa Punah Sevyate*). This is due to existence of similarity between *Kala* and *Dosha* or *Hetu* and *Dosha* as time passes.^[15] This leads to the delayed manifestation of a disease. *Acharya Sushruta* explains it as whenever the *Dosha* is not aggravated completely it resides / remains dormant (*Nishpratyanyah / Nishpratikriyah*) in the channels (*srotuses*) waiting for an appropriate time to aggravate completely and manifest a disease.^[16] Similar opinion is given by *Acharya Charaka* as "Seeds will sprout after a long time being buried in the ground when they get rain water. Similarly, *Doshas* will be reagravated to cause *Vishama Jwara* after a long time remaining submerged in the *Dhatu* (*Srotuses*)."^[17] *Sanubadhana* is a type of *Abheshaja* (*Dravya* causing vitiation in *Vatadi Doshas*) which causes manifestation of a disease after a long gap. Person coming in contact with *Dooshi Visha* may suffer from skin disease (*Kustha*) after a long gap.^[18] Many a times *Kala* (season) itself acts as a *Nidana*, for instance, *Sanchita Kapha* in *Shishira Ritu* gets aggravated in *Vasant Ritu* due to effect of season. Similarly it is understood for *Pitta* and *Vata Doshas*.^[19]

Anu Vikara Jananam (Manifestation of a mild disease)

Sometimes, *Anubandha* (association) between *Nidana*, *Dosha* and *Dooshya* is very weak (*Abaleeyam So Athava Anubadhnanteeti Nidanam*). According *Acharya Chakrapani*, when virulence of causative factor is mild (less potent) vitiation of *Dosha* and then *Dooshya* is also mild.^[20] This leads to a weaker association between *Nidanadi Visheshas* and manifested disease will have a milder form (*Alpa Bala*) hence, these diseases are easily curable. *Nidana* bearing low potency and unable to bring *Dosha Vaishamyata* (vitiating) is called as *Vyabhichari Hetu*.^[21] Seasonal effects of *Shishir Ritu* unable to cause *Kapha Prakopa* is a *Vyabhichari Hetu* for *Kapha Prakopa*.

Asarva Linga Yukta Vikara Jananam (not having all symptomatology)

This is again due to a weak association between *Nidanadi Visheshas*. *Asarva Linga Yuktam* means lacking all classical symptoms mentioned in the text.^[22] All these are *Prativisheshas* of *Nidanadi Visheshas* coming in contact with *Vikara Vighata Bhava*.

Vikara Vighata Abhava Prativisheshas

Whenever *Nidanadi Visheshas* come in contact with *Vikara Vighata Abhava* we come across four outcomes as follows

1. *Vikara Jananam* (manifestation of disease)
2. *Sheeghra Vikara Jananam* (Early manifestation of a disease)
3. *Mahati Vikara Jananam* (manifestation of a severe disease)
4. *Sarvalinga Yukta Vikara Jananam* (manifestation of disease with all symptomatology)^[23]

Vikara Jananam (Manifestation of a disease)

As discussed earlier, *Vikara Vighata Abhava* is a factor which facilitates the manifestation of a disease in an individual. *Anubandha* between *Nidanadi Visheshas* is

facilitated by *Vikara Vighata Abhava* hence, manifestation of disease takes place.

Sheegra Vikara Jananam (Early manifestation of a disease)

Whenever *Nidanadi Visheshas* come in contact with *Vikara Vighata Abhava*, *Anubandha* between these three factors happens very fast and leads to early manifestation of a disease. It is said as consuming food during *Ajeerna* (indigestion) is the root cause for immediate vitiation of *Tridoshas*. (*Jeerne Asneeyat Prakopatayashu: Sarva Doshan*).^[24]

Mahati Vikara Jananam (Manifestation of a severe disease)

Absence of *Vikara Vighata Bhava* causes pre-existing *Dhatushaithilya* and there by causes severe vitiation in *Dooshyas*. This leads to manifestation of a severe disease (*Asadhya/Kastha Sadhya Vyadhi*) and may lead to complications.

Sarvalingayukta Vikara Jananam (Manifestation of a disease with all symptomatology)

Extensive *Dooshya Vaishamyata* leads to manifestation of the disease to its fullest form with all the symptoms mentioned in classics.

DISCUSSION

Association between *Nidanadi Visheshas* is a requisite for the manifestation of a disease. *Vyadhikshamatwa* (immunity) is a factor which is antagonistic to the strength and virulence of a disease (*Vyadhi Bala Virodhitwam*), as well as which inhibits the disease causing factors (*Vyadhyutpad Pratibandakatwam*).^[25] *Nidanadi Visheshas* coming in contact with *Vikara Vighata Bhava* will not be permitted for mutual association between them and thereby manifestation of a disease is inhibited. This refers to *Vyadhyutpad Pratibandhakatwam*. On the other hand *Anubandha* between *Nidana*, *Dosha* and *Dooshyas* is permitted after a long gap leading to delayed manifestation of disease. Similarly, a weak bonding between *Nidanadi Visheshas* will lead to *Anuvikara Jananam/ Asarva Linga Yukta Vikara*

Jananam which are easy to cure. This refers to *Vyadhi Bala Virodhitwam*.

Vyadhikshamatwa is also known as *Bala*, a factor which counters the vitiation in *Doshas* (*Dosha Nigrahaya / Vyadhi Nigrahaya*).^[26,27] Genetic factors (*Sahaja Bala*), seasonal/age factors (*Kalaja Bala*) and life style choices (*Yuktikruta Bala*) influence on the strength (*Bala*) of a person. *Dhatushaithilya/Khavaigunya* facilitate the vitiated *Doshas* to bring vitiation in *Dooshyas*. *Dhatushaithilya* may be inherited for a specific organ whose genetic materials (*Beeja, Beeja Bhaga* and *Beeja Bhagavayava*) have undergone mutation. This causes an inherited susceptibility of an individual towards a disease.^[28] Person's strength changes in accordance with age and season. Person in adulthood, *Hemant* and *Shishir Ritu* bears a good strength on the other hand children and elderly and during *Adan Kala* strength of the person depletes. At the same time *Dhatushaithilya* may be acquired even. The person habituated to consume *Gramyaha* such as *Amla, Lavana, Katu, Kshara, Shushka, Shaaka, Mamsa, Tila, Palala, Pistanna, Nirrodha, Anava Shookha, Shamidhanya, Viruddha, Asatmya, Rooksha, Kshara* and *Abhishyandi Bhojana*. One who is habituated for *Diwaswapna, Adhyashana, Stree Prasanga* (intercourse), consumption of alcohol in excess. One who cannot bear the fear, sorrow, anger, hostility, jealousy, frustration and greed. Such persons are prone to *Dhatushaithilya* like *Vidahayukta Rakta, Shithila Mamsa* (weak musculature), joints prone for dislocation, *Majja* not filling bones, *Shukra Kshaya* and all these leading to *Oja Kshaya*.^[29]

Dhatu Shaithilyam is much dependant on collective form of *Dhatu* (*essence of all Dhatus*) which is nothing but the *Oja*. *Acharya Chakrapani* explains as "though *Oja* is collective form of essence of all *Dhatu* it protects a particular *Dhatu* from the diseases as the essence of that particular *Dhatu* (*Rasadi Sararupataya Rasadibhyo Abhinna moja*).^[30] *Sara Pariksha* is one among *Dashavidha Pariksha Bhavas* and examination of same guides a physician about the prognosis of the disease. Person possessing good essence of a particular *Dhatu* is protected from

that particular *Dhatu Pradooshaj Vikaras* and one can observe the *Prativisheshas* of *Vikara Vighata Bhava* for that particular *Dhatu pradooshaj vikaras* and vice versa. For *Rasa Dhatu Sara Purusha*, skin diseases are seldom seen and the prognosis of the same will be good. On the contrary the person compromised for essence of *Rasa Dhatu* will be immune compromised for *Rasavaha Sroto Janya Vikaras*. It is similarly understood for other *Dhatu Sara Purushas*.

Acharya Charaka classifies person as *Vyadhisahani* (who can resist disease well) and *Vyadhyasahani* (who cannot resist disease well). *Vyadhisahani* has got well compact body (not too obese and not too emaciated), masculine, well developed body and is habituated to *Satmya* (wholesome food habits). He is also bestowed with strong mind (*Satwa*). On the other hand *Vyadhyasahani* has got non-compact body, loose musculature; he is either emaciated or obese and weak. He is habituated for unwholesome food habits and has got a weak mind. All these things will contribute for the vivid manifestation of a disease in an individual as discussed earlier.^[31]

Along with *Shareera Bhavas, Satwa* (mind) is also considered as a boost for the immune system in Ayurveda. Due importance is given for the examination of *Satwa* in *Dashavidha Pareeksha Bhavas*. *Laghuvyadhita Purusha* (a person who projects serious complaints as mild) can bear the sorrow to maximum (can resist a disease well) and is fit for all kind of therapies where as *Guru Vyadhita Purusha* (a person who projects even a mild symptom as big) is unable to bear sorrow and hence, therapies are administered with caution.^[32] Anger, hatred, jealousy, hostility, frustration and other similar negative thoughts bring on discomfort immediately. Physiologically each thought is a chemical and many of the negative destructive thoughts could be bad chemicals that destroy a part of us every time they get secreted. Similarly, positive thoughts are the tonic for the system as also to our enthusiasm to work. Just as hurting others in thought and deed is bad for the health, helping others in deed and thought could boost one's immune system. All these happen through an enigma called mind. Modern medicine is

now recognising hostility as the main culprit in heart attacks and anger as the cause for haemorrhagic strokes. Depression with frustration does bring on cancer and all other killing diseases in their wake.^[33]

Suitable time (season), place (*Desha*), combination (*Samyoga*), *Samskara* and dosage (*Pramana*) cause a considerable change in the virulence of the causative factors (*Nidana*).^[34] For instance, *Vrihi* is said to be *Apathya* (unwholesome food) as it vitiates *Pitta*, in marshy lands (*Anupa Desha*) and *Sharat Ritu* this property of *Vrihi* is enhanced markedly, whereas in *Dhanwadesha* and *Hemant Ritu* same gets reduced. *Doshas* become deeply invaded whenever they get homogenous *Dooshyas* (*Samsrustha Yoni*) to cause early manifestation of diseases which are difficult to cure. Vitiating *Pitta* causes early vitiation in *Rakta* to cause morbidities which are difficult to cure.^[35,36] Hence, it is said as season and geographical changes will act as favourable conditions for the *Doshas* to manifest a disease.

Many emerging infectious diseases are often the result of a host shift, where the pathogen originates from a host species. Virulence can be extremely high following a host shift (for example HIV, SARs and Ebola), while other host shifts may go undetected as they cause few symptoms in the new host. For instance, in bats, Ebola virus appears to be largely asymptomatic, but it is frequently fatal when it crosses the species barrier into humans and other primates. Similarly Henipaviruses appear to be non-pathogenic in pteropoid bats, but can cause high levels of mortality in livestock and humans.^[37] Hence, every individual (species) is dissimilar to resist a disease.^[1]

Balavruddhikar Bhavas (tips to have good immune system) are mentioned by *Acharya Charaka* as - "the person born in *Balavatpurush Desha* (geographic region where persons bear good strength) such as Punjab and Sindha Pradesh, person born in *Visarga Kala* such as *Hemant* and *Shishir Ritu*, person born in a family of healthy/strong persons (ancestors), parents having non mutant gametes (*Beeja Sampat*), mother bearing healthy uterus (*Kshetra Sampat*), one having

enough and good nourishment (*Ahara Sampat*), habituated to wholesome food habits and conduits (*Satmya Sampat*), one bearing a sound mind (*Satwa Sampat*), having good characters, person in adulthood, indulging in good work and keeping himself happy and contained^[38] all these boost up the immune system (*Bala*) of an individual.

CONCLUSION

Mutual association between *Nidanadi Visheshas* is a must for the manifestation of a disease. But it is *Vikara Vighata Bhava* or *Abhava* which inhibits or facilitates the association of the *Nidanadi Visheshas* and thereby brings about various pathogenesis. *Chikitsa* is aimed at *Nidana Parivarjan* (avoidance of causative factors) and *Samprapti Vighatana* (breaking down the pathogenesis). It is essential that the physician must be well equipped with the knowledge of pathogenesis, factors affecting pathogenesis, strength of the *Dosha* and *Rogi* to adopt a proper treatment and to achieve success. Knowledge of *Vikara Vighata Bhava Abhava Prativisheshas* is essential in assessing pathogenesis, *Sadhyasadyatwa* (prognosis of a disease) and to adopt a proper treatment protocol.

REFERENCES

1. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Sutra Sthana, chapter no.28, sloka no. 7, edition 2013, page no. 178.
2. S.Hassoun, M Al-Atrash and M Alkasin, impact of ethnicity and obesity on Insulin resistance in two ethnic groups at very risk of type 2 diabetes mellitus, Elsevier health journal, volume 43, June 2017, page no.- 292-294.
3. Gillium R. Stroke in blacks. Stroke. 1988;19:1-9.
4. Nadia Solovieff, Stephen W. Hartley, Clinton T and others, blood cells Mol Dis. 2011 June 15;47(1):41-45.
5. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.
6. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with acharaya Chakrapani's commentary on Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.

7. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with acharaya Chakrapani's commentary on Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.
8. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Nidana Sthana, chapter no 1, sloka no. 18, edition 2005, page no. 199.
9. Pandit Hari Sadashiva Shastri Navar edited, Astang Hrudaya, sutra sthana, chapter no.1.sloka no. 20, edition 2002, page no. 14.
10. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Sutra Sthana, chapter no 9, sloka no.4 , edition 2013, page no.62.
11. Ayurvedacharya shri. Yadunandanopadhyaya edited, Madhav Nidanam with Acharya Vijayarakshita's commentary, part 1, edition 2004, page no.25. .
12. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Nidana Sthana, chapter no 1, sloka no. 2, edition 2013, page no. 193.
13. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Sutra Sthana, chapter no 1, sloka no.44 , edition 2005, page no.9.
14. Vaidya Jadavji Acharya and Narayan Ram Acharya edited, Sushruta Samhita sutra sthana chapter no. 24. Sloka no.11, edition 1994, page no. 99.
15. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.
16. Vaidya Jadavji Acharya and Narayan Ram Acharya edited, Sushruta Samhita sutra sthana chapter no. 21. Sloka no.30, edition 1994, page no. 90.
17. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Chikitsa Sthana, chapter no 3, sloka no.68-69 , edition 2005, page no.404.
18. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Chikitsa Sthana, chapter no 1, sloka no.5 , edition 2011, page no.376.
19. Pandit Hari Sadashiva Shastri Navar edited, Astang Hrudaya, Sutra sthana, chapter no.12.sloka no. 24, edition 2002, page no. 197.
20. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with acharaya Chakrapani's commentary on Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.
21. Ayurvedacharya shri. Yadunandanopadhyaya edited, Madhav Nidana part 1, edition 1994, page no.22.
22. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with acharaya Chakrapani's commentary on Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.
23. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Nidana Sthana, chapter no 4, sloka no. 4, edition 2013, page no. 212.
24. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Vimana Sthana, chapter no 1, sloka no. 25(4), edition 2011, page no. 237.
25. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with acharaya Chakrapani's commentary on Sutra Sthana, chapter no.28, sloka no. 7, edition 2013, page no. 178.
26. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, chikitsa Sthana, chapter no 3, sloka no. 167, edition 2013, page no. 413.
27. Pandit Hari Sadashiva Shastri Navar edited, Astang Hrudaya, chikitsa sthana, chapter no.1.sloka no. 95, edition 2002, page no. 463.
28. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Shareera Sthana, chapter no.3, sloka no. 17, edition 2013, page no. 315.
29. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Chikitsa Sthana, chapter no.1, dwiteeya pada, sloka no. 3, edition 2013, page no. 381.
30. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with Acharya Chakrapani's commentary on Sutra Sthana, chapter no.30, sloka no. 7, edition 2011, page no. 185.
31. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Sutra Sthana, chapter no.28, sloka no. 7, edition 2013, page no. 178.
32. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Vimana Sthana, chapter no.8, sloka no. 120, edition 2011, page no. 280.
33. Prof. Dr. B.M. Hegde, The real silent killer - your own mind, 24 June 2014.
34. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Sutra Sthana, chapter no.28, sloka no. 7, edition 2013, page no. 178.

35. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita, Sutra Sthana, chapter no.28, sloka no. 7, edition 2013, page no. 178.
36. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita with Acharya Chakrapani's commentary on Sutra Sthana, chapter no.28, sloka no. 7, edition 2013, page no. 178.
37. Ben Longdon, Jarrod D. Hadfield, Jonathan p. Day, Smith SCL, Mc Gonigle JE and Cogni R, The causes and consequences of changes in virulence following pathogen host shifts, PLOS patog 11(3):e1004728

38. Vaidya Trikamaji Yadavaji Acharya edited, Charaka Samhita Shareera Sthana, chapter no.6, sloka no. 13, edition 2013, page no. 332.

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