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Conceptual study of *Rasa Sindoor* in management of *Shotha Roga* w.s.r. to *Brihat-Trayi*

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ABSTRACT

"Rogamadou Parikshet Tatoanatarām Aushadham" Physician should first of all diagnose the disease then he should select proper medicine. Diagnosis is not complete without elucidation of all factors related to disease. For the diagnosis of the disease *Nidaan Panchaka* is very useful entity. Except *Chikitsa*, *Nidaan Panchaka* includes all the necessary information related to disease. Here we consider the *Nidaan Panchaka* of *Shotha* according to *Brihat Trayi* and its management with *Rasa Sindoor* one of the unique preparation in *Rasashastra*.

Key words: *Chikitsa, Nidaan Panchaka, Rasashastra, Rasa Sindoor, Shotha Roga.*

INTRODUCTION

Shotha even though explained as *Lakshana* in many disease it can be studied as a separate disease not considering as a *Lakshana*. "Shavatiti Shugatou + Bahulakatyen" by adding *Athuchpratyayato Shwi Dhatu* the word *Shotha* is formed.^[1] In Ayurvedic classics we get the reference of three different words *Shotha, Shopha & Shwaythu* which are used as synonyms of *Shotha*.^[2]

Classification of *Shotha*^[3-5]

Shotha can be classified as follows according to *Brihat Trayis*.

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Table 1: Classification of *Shotha*

Type of <i>Shotha</i>	C.S	S.S	A.H
<i>Ekavidha</i>	+	-	-
<i>Dwividha</i>	+	-	+
<i>Trividha</i>	+	-	+
<i>Chaturvidha</i>	+	-	-
<i>Panchavidha</i>	-	+	-
<i>Shadvidha</i>	-	+	-
<i>Saptavidha</i>	+	-	-
<i>Ashtavidha</i>	+	-	-
<i>Navavidha</i>	-	-	+

Shotha Nidaan^[6-8]

The word *Nidaan* is used in 2 different meanings i.e 1st as a etiological factor and 2nd as a diagnosis of disease. "*Nidaanwadaadikaranm*" i.e. It initiates disease formation. "*Hetulakshannirdeshat Nidaanani*" that which gives *Nirdesh* about *Hetu* and *Lakshan* is *Nidan*. These are the *Nidaans* of *Shotha* according to *Brihat Trayis*.

Table 2: Nija Shotha Nidaanans

Nidana	CS	SS	AH
Mithyayoga of Vamanadi Karma	+	+	+
Apathyaprayoga after Panchakarma	+	+	+
Ati Krusha with Alasaka, Jwara, Shwasa atisara, bhagandara	+	+	+
Kushta & Kandupeedita	+	+	-
Udgara, Mala, Mutra, Apanavayu Vegadharana	+	+	+
Amla , Lavanaati Sevana	+	+	+
Pishtannaati Sevana	+	+	-
Phala, Shaakaati Sevana	+	+	+
Dadhi, Madhya, Mandakaati Sevana	+	+	+
Shooka, Shamidhanyaati Sevana	+	+	+
Atisevana of Aanupa and Audakamamsa	+	+	+
Garbhasampeedana	+	+	-
Garbhaprapatana	+	+	-
Prajatanaammithyopachara	+	+	-
Atiupavaasa	+	+	+
Ratrijagarana	-	-	+
Mrudbhakshana	+	+	+
Atimaithuna	-	+	+
Atichankramana	-	+	+
Atiyaana	-	+	+

Table 3: Aagantuja Shotha Nidaanans

Nidana	CS	SS	AH
Chedana	+	+	+
Bhedana	+	+	+
Kshanana	+	+	+

Bhanjana	+	+	+
Utpeshana	+	+	-
Prahara	+	+	+
Bhandana	+	+	-
Veshtana	+	+	-
Vyadhana	+	+	+
Peedana	+	+	-
Bhallatakapushpa, Phala, Rasa Samsparsha	+	+	+
Shooka, Krimishookahita	+	+	+
Vishapatra, Lata, Gulmasamsparsha	+	+	+
Savishapranidamshttra	+	+	+
Garbhasampeedana	+	+	-
Garbhaprapatana	+	+	-

Poorvaroopa of Shotha^[9-11]

Poorvaroopa are prior indications of forthcoming diseases. They occur prior to complete manifestation of disease. The signs and symptoms which develop before the manifestation of the cardinal features are considered as *Poorvaroopa*. When the *Dusta Dasha* localizes at the *Dhatu* and brings about morbidity in the *Dhatu*. The normal functioning of that particular *Dhatu* is altered and hence some abnormal features are developed. The initial response of the *Dhatu*, when *Dusta Dasha* affects the normal functioning is considered as *Poorvaroopa*. These are the *Poorvaroopas* of *Shotha* according to *Brihatrayis*.

Table 4: Poorvaroopa of Shotha

Poorvaroopa	CS	SS	AH
Ushma	+	-	-
Davathu	+	-	+
Sirayama	+	+	+

Angagaurava	-	+	+
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Samprapti of Shotha^[12]

The sequential process of *Dosha* vitiation, their spread in the body to manifest disease is called as *Samprapti*. It includes various stages as disease progression i.e. *Nidaana Sevana* leads to *Dosha Dushti* which further leads to *Vyadhi Utpatti*.

The term *Shotha* refers to *Swayathu* where '*Utsedha*' is the *Pratyatma Lakshana*. *Uthseda* refers to swelling. *Shotha* is primarily because of *Kapha Prakopa* in the *Shareera*; *Kapha* is responsible for *Kedanain Shareera*. '*Aapah Kledah*' - Generally the term *Kleda* refers to *Jaleeya Dhatu*. Accumulation of *Jaleeya Dhatu* results in *Uthseda* in the *Shareera*.

From the etiological factors it is learnt that different diseases are the *Pradhanika* or *Utpadaka* or *Vyadhi Hetu* of *Shotha*. All the *Aharaja* and *Viharaja Nidana* are either *Vyanjaka* or *Dosha* or *Vyabhicari Hetu*. A person suffering from the *Vyadhi* if he is indulging in the *Aharaja* and *Viharaja Nidana* there will be further *Dusti* of the *Dosha* in the *Shareera*.

Dusta Tridosha obstructs *Vyanavata* in the *Shareera* especially *Ambuvaha*, *Moortavaha* and *Swedavaha Srotas*. *Tridosha* are moving in all the *Srotas* with the help of *Vyanavata* along with the *rasa Rakta Adi Dravadhātu* to maintain the respective functions of the *Shareera Dhatu* and *Avayava*. Once the *Dusta Dosha* obstructs the *Vyanavata* at *Ambuvaha*, *Mootravaha* and *Swedavaha Srotas* *Vata* gets *Prakupita* and brings the other *Dosha* along with *Rasa Raktadi Drava Dhatu* to the *Bahya Sira*. *Bahya Sira* refers to *Agambheera Sira* i.e., *Sira* related with *Twak Mamasa Pradesha*. In this way *Dusta Dosha* and the *Shareeraja Kledadi Drava Dhatu* reaches the *Twak Mamsantara Pradesha* and vitiates the *Sthanika Dosha*, results in *Uthseda* i.e., *Shotha Vyadhi*.

Roopa of Shotha^[13]

"*Pradurbhuta Lakshanam Punarlinagam*". The *Lakshanas* which are seen after complete manifestation of disease is *Roopa*.

According to *Charaka* the following are the *Samanya Lakshanas* of *Shotha*.

- 1. Utsedha** - *Utsedha* is the *Pratyatma Lakshanas* of the *Shotha* and it is formed due to the accumulation of the vitiated *Doshas* in between the *Twacha* and *Mamsa*.
- 2. Gaurava** - *Gauravata* is seen due to the *Guru Guna* in the *Kapha Dosha*. It is seen because of the accumulation of the *Kapha Dosha* in between the layers of *Twacha* and *Mamsa*.
- 3. Anavasthitatva** - *Anavasthitatva* means the increase and decrease in the *Shotha*. As the *Vataja Shotha* is *Divabali* in nature, i.e. it increases in the day time whereas the *Kaphaja Shotha* is *Ratribali* in nature, i.e. it increases in the night time.
- 4. Ushma** - the *Ushmata* is due to the involvement of the *pitta* and the *Raktadoshas* which are accumulated in between the *Twacha* and *Mamsa*.
- 5. Siratanutwa** - *Siratanutwa* will be there due to the accumulation of the *Kleda* in the *Siras*.
- 6. Lomaharsha** - the *Lomaharsha* can be taken as horripilation.
- 7. Vivarnata** - there will be the *Vivarnata* on the site of the *Shotha* and the *Vivarnata* will be seen depending on the *Dosha* involved.
 - *Vata Shotha* - *Shyava, Arunavarna*.
 - *Pitta Shotha* - *Peeta, Tamravarna*
 - *Kapha Shotha* - *Pandu, Shwetavarna*
 - *Sannipataja Shotha* - *Mishra Varna*

VISHESH LAKSHANAS OF SHOTHA

Vataja Shotha Lakshanas

Varna - *Shyava, Aruna, Krishna Varna*

Swaroop - *Sheeghraunnata, Sheeghrashamana, Khara, Parusha, Bhinnatwak, Romaharsha, Twacha Shunyata, Chala, Mrudu, Anavasthita, Tanutwak, Divabali, Ruksha, Vedana-Todavat, Chedanavat, Bhedanavat, Peedanavat, Pipeelikasarpannavat.*

Pittaja Shotha Lakshanas

Varna - Peeta, Tamravarna, Raktavarna, Krishna, Neela.

Swaroop - *Kshipronnataprashamo, Ushna, Mrudu, Sagandho, Kledayukta, Vedana - Jwara, Trushna, Daaha, Klinnata.*

Kaphaj Shotha Lakshanas

Varna - Pandu, Shwetavarna

Swaroop - *Kruchroothanaprashamobhavati, Guru, Sthira, Shlakshna, Sheetala, Nipeeditona cha unnamati, Ratribali, Ghana Vedana - Kandu.*

Dwandwaja Shotha Lakshanas

In *Dwandwaja Shotha* the mixed *Lakshanas* of the involved *Doshas* are seen.

Sannipataja Shotha Lakshanas

In *Sannipataja Shotha* the *Lakshanas* of the *Tridoshas* are seen.

Upadravas^[14]

The *Upadrava* is stage which develops by the factors which are responsible for the manifestation of the main disease.

The *Upadrava* of *Shotha* according to different *Acharyas* are,

Table 5: Upadravas of Shotha

▪ <i>Chardi</i>	▪ <i>Durbalata</i>
▪ <i>Shwasa</i>	▪ <i>Hikka</i>
▪ <i>Aruchi</i>	▪ <i>Kasa</i>
▪ <i>Trushna</i>	▪ <i>Avipaka</i>
▪ <i>Jwara</i>	▪ <i>Parikartika</i>

▪ <i>Atisaara</i>	▪ <i>Agnimandya</i>
▪ <i>Karshya</i>	▪ <i>Tamogunadhikya</i>
▪ <i>Bhrama</i>	▪ <i>Vrana</i>

Sadhyasadhyata^[15,16]

- If the *Shotha* is present in the *Madhya Shareera* or *Sarva Shareeragata Shotha* is present, it is cured with difficulty.
- When the *Shotha* is present in the lower half of the body which spreads upwards is curable.
- The *Shotha* is incurable if it is associated with the symptoms like *Shwasa, Pipasa, Chardi, Jwara, Daurbalya* and *Aruchi*.
- The *Shotha* appeared in the feet which spreads to the whole body in males, is difficult to cure.
- If the *Shotha* in females starts from the face and spreads to the whole body then it is difficultly curable.
- Both in males and females if the *Shotha* starts from the genital organs and spreads to the whole body then the *Upadravas* are seen and this type of *Shotha* is incurable.
- *Shotha* in the regions like *Kukshi, Udara, Gala* and *Marma Sthana* is also incurable.
- *Shotha* in children and in old aged people is fatal.
- *Shotha* which is of recent onset having no complications is curable.

Chikitsa of Shotha

Rasaushadhis used in little quantity, don't have any taste, smell due to its all qualities it gives favourable and ultimate results.^[17]

According to *Bhaishajya Ratnavali* "*Langhanam Paachanam Shotha Shirkaya Virechanam Vamanam Cha Yathasatvam Yathadosham Pralapyet*"^[18] i.e. in *Shotha Roga* according to *Dosha & Rogi Bala* treatment should be done. Mainly it consists of *Langhana, Pachana, Shirovirechana* and *Vamanadi Karma* can be adopted along with *Shamana*.

In *Shotha*, *Shamana* treatment adopted in the form of *Rasaushadhis* especially the *Parada* preparation are used for *Shotharoga*, to see the efficacy of the treatment. In *Rasashastra* mainly like *Kupipakwa Rasa*, *Potalli Rasa*, *Kharaliya Rasa* etc. are majorly used.

In *Shotharoga Adhyaya* the *Kupipakwa Rasayana* taken for study *Rasa Sindura* a unique formulation of *Kupipakwa Rasayana* which is used in all types diseases with different *Anupanas*.

In this study *Rasa Sindura* along with *Mandoor Bhasma* and *Punarnavasava* as *Anupana* used for treatment of *Shotha*.^[19]

Rasa Sindura is prepared by *Shuddha Parada 8 parts*, *Shuddha Gandhak 8 parts*, *Shuddha Navasadar 2 parts* according to procedure of *Kupipakwa Rasayan*. Dose is *Rasasindura - 1 Ratti*, *Mandoor Bhasma 2 Ratti* mixed in *Madhu* and *Lehana Karma* should be done and *Punarnavasava 2* and half *Tola* is taken as *Anupana*.^[20]

Mandoor Bhasma is *Vrishya*, *Sheeta*, *Ruchikaraka*, *Agni Deepaka*, *Sreshta Roganashaka*, *Raktavardhaka* and *Shothghna* in nature.^[21] *Rasasindura* is very *Laghu* in nature due to preparation technique. i.e. during its preparation intense heat is used. Hence it penetrates fast into the tissues and enhances *Jatharagni* and *Dhatwagni*. *Punarnavasam* according to *Bhaishajya Ratnavali* helpful in all diseases which are considered to be *Asadhya*.

CONCLUSION

References of *Shotha* are obtained from *BrihatTrayis*. *Rasashastra* is one of the beautiful branch of Ayurveda which gives ultimate results in less dosages. Use of *Rasaushdis* should be done very carefully otherwise it can act as a *Visha* also. The physician can study it from other literary work for also for treating *Shotha* effectively.

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