



VIKRATYATMAKA ADHYAYAYNA (PATHOLOGICAL ASPECT) OF ROGA MARGA

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ABSTRACT Going through the textual references, in order to study *Roga marga* and making the idea clear, one can infer that *Roga marga* this nomenclature is not suggestive of any anatomical that is *rachanatmaka* or only *srotass* or *Dhamani vachaka* but its indication is towards something else. Some of the expert Ayurvedic physician believes that the description of *Roga Marga* is nothing but a special type of disease classification. Such a classification is again unique in comparison to Modern's systemic classification of disease. The systemic classification does not give any contribution in the field of prognosis and management whereas it is not so in the case of Ayurvedic classification of diseases in terms of *Roga Marga*. The systemic classification is based on the Anatomical and physiological continuity, whereas not always the organs of a particular *Roga Marga* have anatomical attachment. e.g. *Madhyama Roga Marga*. The connection between the organs of a particular *Marga* is evident pathologically, hence termed as *Roga Marga*

Key words: *Roga,marga,Bahya,Madhyama,Abhyantara*

INTRODUCTION : The literal meaning of the word *Roga marga* is signifying not the physiological turn over but rather related to *vikara* or *roga*. Though certain specific organs are nominated in a particular *Roga marga* no physiological evidence of their relationship is shown.¹ On the other hand, certain diseases of a particular *Roga marga* are narrated. Along with it this subject has been emphasized for *sadhya sadhyata* i.e. prognosis, according to *chakrapani* and for therapeutic application according to *madhukoshakara*.² This leads our attention towards pathological aspect rather than physiological.

Roga marga this terminology gives a general sense that through which *roga* or *vikrati* travels, which in turn means that the *dosha* participating for *roga* or *rogamulaka dosha* are traveling through it. This is what mentioned while narrating *samprapti*. Thus *Roga marga* are very much related with *samprapti* of a disease.³ The definition of *samprapti* brings forth

two things. One is that the accumulated and spreading *dosha* virtually reach in each and every portion of the body and the general channel of flow is *rasayani*.

In *astanga hridaya nidaan sthana samanya samprapti* of *rogas* is mentioned as *kupita vaatadi dosha* through *rasayanis* which enters into *adhithanas* of *rogas* creates different types of disease in *sharira*. Ultimately, *dosha* settle or make *samshraya* in some *sthaana* and give rise to a disease. Such a *sthaana* may be an organ, part of an organ, a *srotass* or a part of it only a part of the vitiated and circulating *dosha* is fixed in this way and the general built continues to circulate giving rise to *dosha laxana*. If by chance a disease is neglected or the patient indulges in errors and diets, it is likely that the disease may spread. Normally under such circumstances the spread of the disease occurs in the same organ or *srotass* affecting different parts. But it is not always so in certain diseases, the *arambhaka dosha* may pro-

duce serious disorders or *upadrava* in the controlling organs, not in any way connected with each other. Only study of *Roga marga* can have this understanding.

In the healthy state, there will no *Roga marga* of any kind reserved to the travel of the morbid *dosha*. *Marga* is created actually when *khavaigunya* takes place. The morbid factors moving in the body will take advantage of this *khavaigunya* and it is than the manifestation of a disease takes place. The *srotasses* which are vitiated, behave as *Roga marga* or the *marga* for the *roga*. As a result of this *roga* becomes clear and virulent. Thus the term *Roga marga* can be understood as the weak part of the *srotass* responsible for the *samprapti* occurrence and also spread of a disease.

Again, for the clinical evaluation of *Roga marga*, it can be comprehended as follows:

- i) Role of *Roga marga*. in sub clinical or formative stages.
- ii) Role of *Roga marga*. in clinical manifestation stage.
- iii) Role of *Roga marga*. in complicated clinical (Post clinical) stage.

Sub clinical or formative stages : Under the sub clinical stages; *Chaya*, *Prakopa*, *Prasara* out of the 6 *Kriykalas* are to be considered.⁴ The *Chaya avastha* exhibits a vague symptomatology, corresponding to the *Dosha* involved and the *Prakopa avastha* exhibits the symptomatology but not disease. Though both these stages are also such that the deranged *Dosha* can be checked or eliminated here itself but in those stages, there is imbalance of *Dosha* but no direct involvement of *Marga*.

The actual role of *Roga marga*. starts from *Prasara avastha*. Here the *Marga* are not vitiated but the vitiated *Dosha* can spread through channels.

Clinical stage :

Sthana Samsraya and *Vyakti avastha* come under the umbrella of clinical manifestation stage and the *Roga marga*. also, directly comes in to picture in this stage itself. This can be said because in a particular *Roga marga*., the list of disease is given. For the *Sthanasamsrayavastha*, it is said that, Here, there is a very significant thing in the term of *Khavaigunya*.⁵ This *Khavaigunya* is very important as far as *Rogamarga* are concerned because *Khavaigunya* actually takes place in *Roga marga* and then disease occurs.

Khavaigunya is very much essential for the pathogenesis to occur. It takes place by a special part of *Nidana*. *Khavaigunya* is necessary, for it is the ignition point from where the direction of disease pathology is decided. The *Mula Sthana* of many *Srotasses* is common (Egg: *Mula sthan* of *Praanavaha srotas* and *Rasavaha srotas - Hridaya*) and may be connected. Hence, the pathogenesis can progress in many directions, but in which particular direction and pattern it will progress is decided by *Khavaigunya*, which, occurs in the *Roga Marga*. Thus, *Khavaigunya* is very important for the understanding of *Roga marga*. Here under is given the probable interpretation of *Khavaigunya* in modern term.

Khavaigunya Vs. Specificity : Why *Khavaigunya* occurs in a specific place? In a way, the particular part of *Nidana* leads to *Khavaigunya*. In another way, again the question arises, why the particular *Nidana* leads to *Khavaigunya* of a particular *Roga marga*.? The *Roga marga*. is expected to be so constituted as to exercise a selective discrimination. Experimental evidences to support the specificity have been made available by modern physiology and biochemistry.

Sthanasamsraya avastha is a very important stage, which can be aptly designated as the transition between the sub clinical and the clinical stages. It may also be stated that it is in this stage, definite structural lesions begin to evolve, whereas the previous three stages may not involve any structural lesion. By implication, the stages of *Chaya*, *Prakopa* and *Prasara* may present purely functional disturbances⁶. It is in this stage that gross metabolic disturbances occur at the level of the *Srotamsi* – Vascular (Capillary) bed, and the tissues, resulting in the blocking of metabolic pathways and exchanges leading to the localization of lesion. These events have been characterized in modern medicine as increased capillary and cell membrane permeability (with the resulting equalization in the chemical composition of inter and intra cellular fluids), haemo concentration, and tissue catabolism etc. In the *Vyakti avastha*, the outcome of the *Dosha Dushya Sammurcchana* is revealed. According to respected Vaidya Shiva Charan Dhyani, in the book “*Nidana Pancaka*”, in this stage, (i) Completion of *Dosha Dushya Sammurcchana* (ii) *Srotodusti* and its features and (iii) *Laksana Sammurchaya* of diseases, are manifested. Though the *Dosha Dushya Sammurcchana* is initiated in the previous stage, its completion achieved in *Vyakti avastha*. Here, certainly there is role of *Roga Marga* is in the *Sroto dushti*.

Complicated Clinical (Post Clinical) stage :According to Acharya Yadavji Trikamji, the *Bhedavstha* should not be considered under *Samprapti* because after the disease manifestation the field of *Bhedavastha* is initiated while the field of *Samprapti* is upto *Rogotpatti*. Hence, here *Bhedavstha* has been considered as the post clinical stage.

In this stage, the *Vyadhi* may become chronic or it may become complicated or serve as the *Nidana* (Cause) for other disease. *Roga Marga* again plays an important role for the *Nidanarthakarata* of *Vyadhi*.

The relationship between the two Roga Marga : We have thus seen the travel of *Dosha* from one *Marga* to another. The travel of the *Dosha* from internal pathway or *Abhyantara Roga marga*. towards other *Marga* will be clear in most of the diseases of *Abhyantara Roga marga*. But in the case of *Bahya Roga marga* the travel of the *Dosha* from *Shakha* towards *kostha* is not so easy. Reason may be that the diseases of the internal pathway produce many symptoms externally. But the diseases of the *Bahya Roga marga* . generally may not have any serious symptoms and signs pertaining to *Abhyantara Roga marga*. or *Madhyama Roga marga*. The reason for this can be given in the way followed.

a) Body due to its defensive mechanism generally tries to push out the factors, which are not suitable to it. If the *Kostha* is filled with such morbid factors, in order to defend the organs of *Kostha* from any type of damage, which may take place due to the morbidity of the *Dosha* seated in *Kostha*, they are pushed to other *Margas* if not expelled out. This is done preferably through the *Marga* of *Poshana*.

b) The same case is not found in the diseases of *Bahya Roga marga*. because the morbid *Dosha* will not be able to move back to *Kostha* easily. This is because the *Viloma gati* of *Dosha* will have to take place here. This sort of movement is possible only with the co-operation of the *Srotas*. But this being a retrogressive process will not be entertained in the body. That is why to the successful treatment of

the diseases of the *Bahya Roga marga*. it takes comparatively longer time than in cases of *Abhyantara Roga marga*.

The *Sanchara* of the morbid factors in the diseases of *Madhyama Roga marga*. will be of different type. In these diseases, the travel of the *Dosha* will be from one organ to the other organ of the same *Roga Marga*. In diseases like *Amavata*, *Vatarakta*, etc. which are related with the joints coming under *Madhyama Roga marga*. signs and symptoms of the malfunction of *Hridaya* or *Basti* or both etc. will be present. In the same way, the affection of the heart may produce signs and symptoms related with *Bahya Roga marga*. in their *Purva rupavastha*. *Prameha* and *Rajayakma*, which are the diseases of *Madhyama Roga marga*., may be quoted as examples. In these disorders, in their *Purvarupavastha*, the excessive growth of hairs, nails etc. are found.

Elsewhere, it will be said that most of the diseases of *Bahya Roga marga*. will be *Pakwasayottha*. One more supporting point for that statement can be offered in the following way. In the diseases of *Bahya Roga marga*. apart from the *Bahya Chikitsa* or *Bahirparimarjana Chikitsa*, *Virechana* is preferred. It is only through suitable *Virechana dravyas* skin diseases are treated successfully. Again *Virechana* as we know will have special influence on *Pakwasaya*. Thus, being the disorders, which subside by means of *Virechana*, the diseases of *Bahya Roga marga*. may be said as *Pakwasayottha*.

CONCLUSION:

• *Roga marga* physiologically can be termed as *srotas*, the same converts into passage of the disease when pathology or *vikrati* occurs.

• The term *Roga marga* can be understood as the weak part of the *srotass* responsible for the *samprapti* occurrence and also spread of a disease.

• *Roga Marga* plays an inevitable role in the subclinical, clinical and complicated clinical stages of *Samprapti*.

• *Roga Marga* also can be appreciated as the classification of diseases on the basis of their prognosis. If so, it is again specific and unique in comparison to the systemic classification of diseases in the modern science.

REFERENCES:

- 1) Shastri KN, Chaturvedi GN, Charaka Samhita 21st Ed, Varanasi ; Chaukambha Bharati Academy 1995, (1) ; 601
- 2) Shastri SS, Upadhyaya YN, Madhavanidhan, 25th Ed, Varanasi; Chaukambha Sanskrit Sansthan 1995,(1);70
- 3) Shastri KN, Chaturvedi GN, Charaka Samhita 21st Ed, Varanasi; Chaukambha Bharati Academy 1995(1) ; 237
- 4) . Shastri AD, Sushruta Samhita, 9th Ed, Varanasi Chaukambha Sanskrit Samsthan 1995, (1);15
- 5) Vaidya LC, Astanga Hridayam of Vagbhata Reprint Ed, Delhi, Motilal Banarasisdas Samsthana 2005; 104
- 6) Shastri AD Sushruta Samhita, 9th Ed, Varanasi Chaukambha Sanskrit Samsthan 1995,(1);42

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