

CONCEPT OF BLEEDING DISORDER IN AYURVEDA

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ABSTRACT

Raktapitta is caused by vitiation of two body elements, namely *Rakta* and *Pitta* together due to their *Ashray–Ashrayee* relationship. *Raktapitta* is a *Raktjavikar* caused due to *raktavaha srotodushti*. When *pitta* vitiated *Rakta* increases in amount due to *usna guna* of *pitta*, it starts flowing out of the body through different parts- upward, downward or both, or through skin pores. When patient complaining bleeding from *guda*, *yoni*, difficult to differentiate between *AdhogRaktapitta*, *Raktaatisar*, *Raktapradar*, *Raktarsh*, like that hemophilia, Purpura & Vacuities with *Ubhaya Raktapitta*. There are major similarity in *nidan*, *rup* and *doshash* involved, some minor difference need to be study to diagnose the disease. Which can be done only by the deep knowledge Ayurvedic diagnostic tools, by the critical evolutions of the *nidan panchak*. The classification of the disease, differentiation from the other disease and enhance the treatment of modalities of *Ayurvedic* management.

Keywords: *Nidan panchak*, *Raktapitta*, *Raktaatisar*, *Raktapradar*, *Raktarsh*.

INTRODUCTION

Ancient *Ayurveda* has own unique and original concept and fundamental principles, further this system considered *Dosha*, *Dhatu* and *Mala* as the root of *Sharira*. *Dhatus* are responsible for sustenance of life, Among them *Raktadhātu* is most important without them life is endangered. *Sushruta* bestows importance to *rakta* equal to the *tridoshas*, the body is supported and maintained by *rakta*¹. The most important function of *rakta* is '*Jeevana kriya*' i.e. it sustains life². "*Raktam jivayati pranuvartanam karoti*"³ The term '*pranuvartanam*' also indicates that it carries the vital –*vayu* – '*prana*'. *Mulas* of *raktavaha srotases* is *yakrit* and *pleeha* by *Charaka*⁴ and *sushrut* further added *Raktavahini dhamanis*⁵. Therefore the disorder of all these organs are to be taken

as *Raktajvyadhi*. *Raktapitta* is a particular disease caused by *Raktava srotodushti*. *Charaka* has mentioning *Raktapitta* as a *Mahagada*,⁶ disease *Raktapitta* manifests itself with absolute rapidity and spreads all over the body like fire. It invades the body in all possible directions and becomes critical if not diagnosed or treated properly. According to modern bleeding disorder caused by platelets dysfunction, vessel wall defect and coagulation factors. *Raktapitta* is a bleeding disorder where in the blood vitiated by *Pitta* flows out of the orifice of the body. In simple words any bleeding that takes place because of endogenous i.e. internal causes (and not related to injury, trauma etcetera exogenous cause) is called *Raktapitta*.

This hemorrhage may occur from *urdvajatrugata angas* like *nose*, *mukha*, *karna* or from downward *Adhoangas*, *gudmarg*, *mutra marg*, *yonimarg* etc, or it

may occur from all the *romakupas* (hair follicle) of the entire body.

AIMS AND OBJECTIVES: To study the *Nidan panchak of Raktapitta* and its correlation with bleeding disorder.

MATERIAL AND METHODS: Compilation of literature related to *Raktapitta* from classical, published article, internet site and modern text.

Acharya Charaka has described it in the chapter immediately after *Jwara* as it arises due to the *Santapa* caused as a result of *Jwara*, whereas *Acharya Sushrut* has described it after discussing *Pandu* as they have common causative factors.

Nirukti/Definition :

1. *Pitta* associates or interacts with *Rakta*, hence the term *Raktapitta*.⁷
2. On interacting with *Raktapitta dosha* also became *rakta*, light in colour hence it is *Raktapitta*.
3. *Pitta* vitiates *Rakta* on its interaction.

Charaka explaining, rationally behind naming this as *Raktapitta* said-

In this disease process –

1. *Samyoga:- Pitta* and *Rakta* are combined together.
2. *Rakta dhatu* is vitiated by aggravated *Pitta dosha*.
3. Because of interaction, between *Pitta* and *Rakta*, *Pitta* also become reddish i.e. both are same colour.⁸

NIDAN/CAUSES –

Ahara:-

- *Rasa* - Excessive consumption of Diet that is *Amla* (sour), *Katu* (pungent), *Lavana* (saline).
- *Guna* - Intake of excessive *Vidahi* (Improper digestion leading to burning sensation of food), *Tikshna* (Sharp),

Ushna (Hot), *Kshara* (Alkalis)

Vihara:-

- *Aatapa* - Excessive exposure to heat of sun
- *Vaayama* - Excessive physical exercise
- *Vyavaaya* - Excessive indulgence in sexual activities
- *Adhwa* - Excessive walking

Manas:-

- *Shoka* - Excessive grief
- *Kopa* - Anger

Other:-

- Excessive of *Virechana*.⁹

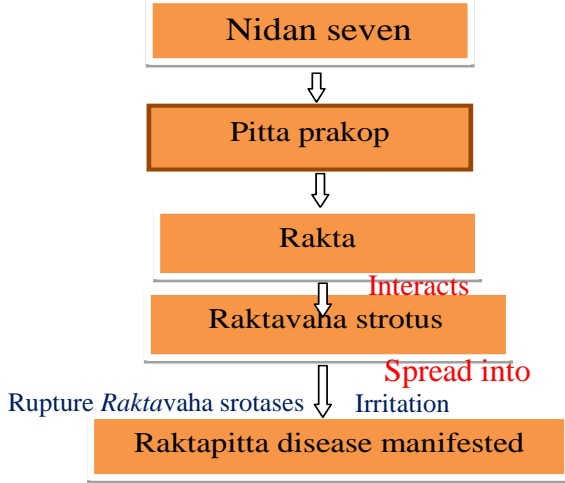
Samprapti/Pathogenesis -

The disease *Raktapitta* develops and manifests as the pathogenesis runs through the below mentioned -

- *Pitta* aggravated by the above said *nidanas* and leaves its site and reaches *Rakta* (blood).
- Being a *mala* (waste product) of *Rakta*, the *Pitta* on getting mixed with *Rakta* attains quantitative increase.
- The *Pitta* in turn vitiates the *Rakta*. Due to the heat of *Pitta*, the *drava dhatu* or the liquid portion (fluid) of other tissues like *Mamsa* (muscles), *Meda* (fat) etc., oozes out of their respective tissues and gets mixed with *Rakta*.
- This further enhances the quantity of blood flowing in the blood vessels creating immense pressure in the blood vessels.
- Due to the pressure of the blood and heat of *Pitta*, the walls of the blood vessels get damaged and the blood starts flowing through various openings of the body.
- Bleeding occurs through mouth, nose,

ears, skin, anus, penis and vagina.

This bleeding of blood vitiated by Pitta through various orifices of the body is called *Raktapitta*.¹⁰



Samprapti Ghatak /Disease Profile:

Dosha	Pitta
Dushya	Rakta
Srotas	Raktvaha srotas
Adhistan	Yakrit ,pleeha
Srotodushti	Atipravrat, vimarg gaman
Swabhav	Ashukari
Agni dushti	Jatharagni, rasa, rakta agni-agnimandh

Poorvaroopa:

- Anannabhilasha
- Bhuktasya vidahata
- Sukta Amla Udgara
- Swarabheda
- Paridaha
- Klama
- Shiro gowrava
- Kasa
- Swasa
- Bhrama

1. Angasada 2. Sheeta kamitva 3. Kanta dhumayana 4. Vaman 5. Loha gandhisch niswasa¹¹

• Matsya gandha¹².

Bheda/Classification:-

1. Based on the Dosha predominance:

- 1 Vataja
- 2 Pittaja
- 3 Kaphaja
- 4 Sannipataja
- 5 VataPittaja
- 6 Pittakahaja
- 7 Kaphavataja

2. Based on direction of bleeding:

1. Urdhava Raktapitta
2. Adhog Raktapitta
3. Tiryak Raktapitta

LAKSHANAS (ROOPA) :

1. Vataja Raktapitta : When it is associated with Vata dominance, the blood will be

- Shyava
- Aruna
- Saphena
- Tanu
- Rooksha

2. Pittaja Raktapitta: When it is associated with Pitta dominance, the blood will be

- Kashaya like the colour of the Patala flower
- Black like Go mutra (Cow's urine)
- Mechakagara dhuma Anjana

3. Kaphaja Raktapitta : When it is associated with Kapha dominance, the blood will be

- Sandra
- Sapandu
- Sasneha

• *Picchila*

4. *Sannipataja Raktapitta*:- When vitiated by all the 3 *Dosha* then the signs and symptoms of all the 3 *Doshas* are manifested in the blood.

5. *Samsargaja Raktapitta*:-When vitiated by 2 *Doshas*, the signs and symptoms of the aggressive two *Doshas* are manifested in the blood.¹³

Sadhya Asadhyata:

1. The *Raktapitta* is associated with :-

- One *Dosha* - *Sadhya* (Curable)
- Two *Doshas*- Its *Krichrasadhya* or *Yapya*
- All the 3 *Doshas* - *Asadhya* (Incurable)

2. *Urdhvaga* which is *Kaphaanubandhee* is - *Sadhya*.

3. *Adhoga* which is *Vaataanubandhee* is - *Yaapya*.

4. *Ubhaya* which is *Vatakaphaanubandhee* is - *Asadhya*.

5. It also becomes *Asadhya* in following conditions:-

- If patient is having *Mandagni*
- *Aivegavat*
- If the patient is emaciated by diseases
- *Ksheena Deha*
- *Vruddha*
- *Anashna*
- When bleeding takes place in excess through either of *Urdhva* or *Adhomarga*
- *Kunapa gandhi*
- *Krishnavarna*
 - When it gets obstructed in throat

• *Upadrava sahita* .¹⁴

Chikitsa Siddhant :

- *Santarpana / Aparpana Chikitsa*
 - *Mrudu, Sheetala, guna Ahara*
 - *Madhura, Tikta, Kashaya Rasa Ahara*
 - *Pradeha, Parisheka, Avagaha, Samsparshana*
- etc, external coolants

• *Pratimargaharana Chikitsa*

1) "*Pratimarga cha haranam Raktapitte vidheyathe "Pratimaarga (Viruddha) Maarga Harana (Shodhana):* Eliminating the causative, vitiated *Dosha* from the opposite direction of its manifestation is the key to management of *Raktapitta*.

2) **For Urdhvaga Raktapitta :**

Kashaaya and *Tikta Rasa* are criteria. *Virechana* should be given.

For Adhoga Raktapitta : *Shamana Dravya* and *Madhura Rasa* is to be used. *Vamana* should be done.

In *Urdhvaga Raktapitta* - *Tarpana* should be given in the beginning

In *Adhoga Raktapitta* - *Peya* should be given in the beginning

Bahya prayoga: Abhyanga, Lepa, Parishechana, Seka, Avagaha, Sheeta Upachara.

• *Sthamban nishedh*.¹⁵

• **Shaman chikitsa :**

- *Atruskwadi kwath.*
- *Usheeradi churna.*
- *Vasaghrit.*

• *Shatavaryadi ghrit.*

UPDRAVA:¹⁶

- General weakness
- Dyspnoea

- Cough
- Sensation of burning
- Stupor
- Fever
- Drowsiness
- Vomiting
- Heavy chest and chest pain
- Thirst
- Change in voice quality
- Foul smelling sputum
- Loathing of food
- Indigestion
- Restlessness
- Loss of libido.

Arista Lakshan :

- Bleeding of various abnormal colours like green, black, gray and yellow Etc.
- Bleeding through skin
- Bleeding which leaves stains on the cloth after washing
- Foul smell of the bleeding
- Heavy spurting type of bleeding
- Severe loss of blood from the body.¹⁷

PATHYA:-

- **Rasa** - Kashaya
- **Dhanya** - Jeerna Shashtika Shali, Priyangu, Nivara, Yava, Godhuma.
- **Shimbi** - Mudga, Masoora, Chanaka, Adhaki, Makushta, Koradoosha, Shyamaka
- **Mamsa** -Aja, Pakshi, Harina, Kukkuta
- **Dugdha**-Godugdha, Ksheeranavaneet, Ghrita, Aja Dugdha, Santanika
- **Drava** - Sheeta Jala, Narikel Jala, Varuni, Audbhid Jala, Shrutasheeta Jala, Madhu + Jala, Laghu

Panchamoola Siddha Jala.

- **Phala** - Kadali, Talaphala, Dadima, Amalaki, Narikela, Kapittha, Draksha, Ikshu, Pakva Amra Phala, Shrungataka, Kamalgadda, Gambhari, Kharjura, Panasa, Mocharasa, Karkati, Taruni, Vidarikanda, Shatavari, Kasheruk, Shrungataka etc
- **Utpaladi Siddha Ksheera**, Peya, Yoosha, Yavagu, Mamsa Rasa.
- **Other** - Mishreya, Laja, Saktu, Madhu, Shra- kara, Gajapippali, Guda, Vasa-Meda-Majja.

Apathya :-

- **Rasa** - Katu, Amla, Lavana
- **Guna** -Vidahi
- **Drava** - Kaupa Jala, Madya.

DISCUSSION:-

Charakacharya has described it in the chapter immediately after *Jwara* as it arises due to the *Santapa* caused as a result of *Jwara*, whereas *Sushrut* has described it after discussing *Pandu* as they have common causative factors. That can be diagnosed by the classical sign and symptoms. It can be correlated with the bleeding disorder and diagnosed and differentiate by *Panchanidana* & lab investigation (1.Bleeding time & Clotting time, 2.Platelet count, 3.Activated partial thromboplastin time (APTT), 4. Thrombin time (TT), 5. Prothrombin time, 6.INR(international normalized ratio),7. Fibrinogen level 8. Coagulation screening, 9.Von willbrand disease screens 10.Light transmission platelet aggregometry.) In generally *raktapitta* can be correlated with bleeding disorders on the basis of site of bleeding but differentiated by *nidana*, *rupa*, *poorvarupa*, *upshayanupashaya* & *sanprapti*.

Example: - Bleeding from *adhomarga*

(Yoni) known as *raktapradara* the *nidanpanchaka* of *raktapitta* (*adhogmaraga-yoni*) are different from *raktapradara* and principle of treatment is also different.

CONCLUSION:

The blood expelling out of the body is not *Shuddha Jeeva Rakta*, but due to the nature of the disease *Rakta* - the *Pranaashraya* itself gets vitiated. Thus, this is *Ashukari* (acute) hence *Raktapradoshaja* disease can be considered as one of the life threatening disorders. Severity depends upon the cause and the blood loss.

Therefore a wise physician who has a clear cut knowledge of the *hetu* and *Lakshanas* of *Raktapitta*, A physician who has skills of diagnosing this condition as quickly as possible should treat it immediately, without any delay.

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