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IMPORTANCE OF ASHTAVIDHA PARIKSHA – AS A DIAGNOSTIC TOOL

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ABSTRACT

For effective management of disease, diagnosis and prognosis are two important aspects. Clinical examination is an important tool for assessment of disease as well as condition of patient. Different types of examination depicted in Ayurveda among that Ashtavidha Pariksha viz. Nadi (Pulse), Mootra (Urine), Mala (Faeces), Jihwa (Tongue), Shabda (Speech), Sparsha (Touch), Drika (Eyes) and Akriti (Posture) an effective tool for clinical examination of patient, which was routinely used by traditional Ayurvedic practitioner, but is missing in present era. In this paper, the clinical utility of Ashtavidha Pariksha is discussed which will be helpful for scholars to use it as a diagnostic and therapeutic tool in their clinical practice.

Keywords: Ashtasthana Pariksha, Ayurveda, Examination, Diagnosis, Prognosis.

INTRODUCTION

To assess the clinical condition of patient's various methods of examination are described in Ayurveda, among them Ashtavidha Pariksha Viz. Nadi (Pulse), Mootra (Urine), Mala (Faeces), Jihwa (Tongue), Shabda (Speech), Sparsha (Touch), Drika (Eyes) and Akriti (Posture), for the first time advocated by Aacharya Yogratnakar is one of the best and the most significant method of clinical assessment. It is a complete clinical examination of a patient which has very close resemblance with general physical examination of the patient as described in Modern Medicine. It is indeed the examination of eight aspects of a person to determine their health status. The body of the patient is the actual seat of disease and these eight sites represent the whole-body manifestation of underlying disease, which is the basic component for the management.

Aim & Objectives:

- 1. To evaluate the clinical condition and strength of the patient.
- 2. To assess the diagnostic and prognostic aspect of disease with the help of Ashtavidha Pariksha.

Material & Methods:

References of Ashtavidha Pariksha have been collected from the available literature of Ayurveda.

Ashtavidha Pariksha:

It includes the following examination. [1]

- 1. Nadi Pariksha (Pulse Examination)
- 2. *Mootra Pariksha* (Urine Examination)
- 3. Mala Pariksha (Stool Examination)
- 4. Jihwa Pariksha (Tongue Examination)
- 5. Shabda Pariksha (Voice Examination)
- 6. Sparsha Pariksha (Skin Examination)
- 7. *Drika Pariksha* (Eye Examination)
- 8. Akriti Pariksha (Examination for physical constitution)

DISCUSSION

In Ashtavidha Pariksha, examination of all eight folds are related to Pratyaksha Pramana i.e. Nadi Pariksha and Sparsha Pariksha come under Sparshnendriya Pariksha, Shabda Pariksha comes under Srotrendriva Pariksha and the other five are included under Chakshurindriya Pariksha.

Nadi Pariksha (Pulse Examination): It is the first among the Ashtasthana Pariksha and known as Jivasakshini (sign of life), its detailed description is available in Ayurveda literature and used for precise and accurate diagnosis. The status of Doshas in disease condition as well as in healthy individuals can be assessed with the help of *Nadi Pariksha*.

Synonyms: Dhamani, Dharani, Dhara, Snayu, Hansi, Tantuki, and Jeevan Gvan. [2]

Site and Method of Examination: Nadi Spandana is caused by the beatings of Hridaya (heart) and consequent movement of Rasa-Rakta (blood). Pulse examination is carried out through Hasta Nadi (Radial Artery) and physicians should examine the pulse of the right hand of the men and left hand of the women by using his right arm. Examination is preferably carried out early in the morning after ablution of the body. While examining the pulse, the elbow and the wrist of the patient should be slightly flexed with the fingers distended and the physician should hold the patient elbow gently with the left hand and feel the pulse with his right hand. The index finger of the physician is placed below the root of the thumb; other two fingers are placed next to the index finger. The pressure of the three examining fingers has to be uniform, it indicates the condition of the Tridosha and their Gati (Manda, Madhyama and Tikshna). The index finger (Tarjini) denotes Vata, the middle finger (Madhyama) Pitta and the ring finger (Anamika) Kapha. In Nadi Pariksha following factors are main and important: [3]

- 1. Spandana Samkhya (pulse rate): is described in terms of number of *Nadi* (pulse) per *Pala* of time.
- 2. Gunas (Qualities) of Nadi: like Ushna (warm), Sita (cold), Mrdu (soft), Kathina (hard), Tanu (thin), Sthula (thick) etc. This can easily be detected by the palpating fingers.
- 3. Gati (character) of Nadi: Is described to be resembling with the movement of certain animals and birds, like [4]

Nadi Gati	
Nadi	Gati
Vataja Nadi	Snake and Leech (i.e., Low volume and fast)
Pittaja Nadi	Frog, Crow and Crane (i.e., rate & volume both are high)
Kaphaja Nadi	Swan, Pigeon and Peacock (i.e., high volume and low rate)
Vata-kaphaja	Snake and Swan
Vata-pittaja	Snake and Frog
Pitta-kaphaja	Monkey and Swan
Sannipataja	Woodpecker (with frequent gaps, variable rate and volume or irregular)

Swastha Nadi

Swastha Nadi (Physiological state): [5] Sthira(steady) and Balwati(forceful).

Vata: Twisting Pitta: Unstable Kapha: Stable

Imperceptible pulse as after-exertion, thirst, heat exposure, hunger, sexual intercourse.

Vikrata Nadi (Pathological state) [4]	
Pathological condition	Nadi Gati (pulse movement)
Mandagni	Manda (slow)
Ama	Gambheera
Jwara	Ushna, Gambheer, Vegavati
Kama, krodha	Vegavati (rapid)
Chinta, Bhaya	Kshina (weak)
Deeptagni	Laghu and Vegavana
Rakta Dosha	Ushna, Gurvi (heavy) and Sama
Kshudhita	Chanchala (unstable)
Tripta	Sthira (stable)
Asadhya vyadhi	Kampana (vibration) and spandana (pulsation)

Nadipariksha Nishedhakala (Contraindication):

Nadi will be misleading or incorrect if done after the patient has taken food, exercise, bath, intoxicants, intercourse and sleep or when afflicted with hunger, thirst, anger, grief, worry etc.

Mootra Pariksha (Urine Examination): Urine is the end product of metabolism by billions of human cells and the body chemistry, nutrient intake, fluid balance, blood pressure and the state of health are key elements in determining the nature of urine. Among the Ashtavidha Pariksha, Mootra Pariksha is one which proves to be an important aid in diagnosis and prognosis. Taila Bindu Pariksha is a part of Mootra Pariksha which can be used as a tool for assessing the

prognosis and severity of diseases to plan the treatment. The purpose of urine examination is to determine the Tridoshika manifestations in the body through its volume, frequency, colour, consistency, smell and taste etc. in diagnosis of disease as well as assessing the healthy condition.

Characters of Urine vitiated by Doshas:

Vata: Pandu varna (pale yellow colour)/unctuous appearance

Pitta: Rakta (reddish colour)/oil like varna appearance

Kapha: Phenayukta (foamy/muddy appearance)

Dwandaj: Mixed features as per dominancy of Doshas

Sannipataja: Krishna (blackish colour)

Urine appearance in certain diseases	
Disease's condition	Urine appearance
Ajeerna	Tandulodak (rice water like)
Nava jwara	Dhumra varna (smoky) and polyuria
Jeerna jwara	Reddish yellow
Vatapittaja jwara	Smoky and hot
Vatakaphaja jwara	Whitish with budbudabhama (bubbles)
Kaphapittaja jwara	Kalusa varna (dark coloured blood mixed)
Sannipataja jwara	Mixed coloured

Taila Bindu Pariksha: Vasavarajiyam had mentioned the use of Til Taila for Taila Bindu Pariksha. The physician should wake up the patient early in the morning, around 4 o'clock; first midstream urine sample should be collected in a wide mouth, plastic or glass, air tight, sterilized disposable container and examined for detecting various abnormalities in it for diagnosing the underlying disease.

The urine is kept in a clean vessel and with the help of Tran(rod) or a dropper, instil one or two drops of Tila Taila into the vessel. The changes of the oil drop on the surface of urine should be carefully observed viz. Time of spread, Direction of spread, Shape, Pattern of oil on spreading over urine, and then we can assess type of Dosha Vikara, curability or non-curability of disease. [6]

Taila Bindu appearance (shape of urine drops)	
Dosha	Shape
Vata	Snake
Pitta	Umbrella
Kapha	Pearl

Disease condition observed by Shape of spread oil drop	
Shape of spread oil drop Disease condition	
Swan, pond, lotus, elephant, umbrella, gate or building	Sadhya
Plough, tortoise, buffalo, honeycomb, sword, crossroad, a man without head	Asadhya

Disease condition observed by position of oil drop	
Oil position	Disease condition
If oil drop spreads fast over urine	Sadhya
If oil drop spreads very slowly	Kastasadhya
If oil drop settles down at the bottom of pot	Asadhya

Prognosis observed by the direction of movement of the oil drop	
Direction	Prognosis
Movement towards East	Quick recovery
Movement towards West	Patient will get happiness and healthy
Movement towards North	Patient will be healthy very soon
Movement towards	Indicate fever and gradual recovery
Movement towards Ishana Angle	Patient will die within one month
Movement towards Aagneya and Nairatya Angle	Patients' death is certain
Movement towards Vayavya Angle	Patient will die soon

Mala Pariksha (Stool Examination): Mala (Purisha) is one of the important waste products of the body being the Kitta of Ahara (food), hence it is a diagnostic method generally in all diseases and especially in disorders of Annavaha Srotas and Purishvaha Srotas system. In Avurvedic texts examination of stool is limited mainly up to the examination of physical characteristics such as *Rashi*, Swarupa, Varna, Gandha. Besides these, a specialized

technique Viz. Jala Nimajjana Purisha Pariksha has been indicated to identify Sama Nirama condition of Mala. [7]

Jala Nimajjana Purisha Pariksha: This is the only objective method which was used in ancient times to detect the presence of Ama in stool. The examiner should take a wide mouth glass vessel and fill it with clean water. Place some faecal matter over the surface of water. If the stool is very hard and sinks to the bottom, it indicates the presence of Ama. If it is filamentous and floats over the water surface, it indicates *Ama* is absent in stool.

Mala Lakshana in different Dosha Vikara	
Dosha Vikara	Mala Lakshana
Vata Vikara	Dridha (hard) and Shushka (dry)
Pitta Vikara	Pitta (yellowish)
Kapha Vikara	Shukla (white)
Sannipataja	Shyama, Trutita, Pittabha, Baddha, Shweta
Vata Kapha	Kapisha (brown)
Pitta Vata	Baddha Trutita (quite fragmented), Peeta-Shyama (yellowish-black)
Pitta Vata	Peeta-Shweta, Ishat Sandra (semisolid), Pichhila (slimy)

Mala Lakshana in different diseased condition		
Diseased condition	Mala Lakshana	
Jalodara (Ascites)	Sita (white), Puti gandha (bad stench)	
Shakhashritta Kamala (obstructive jaundice)	Tilpishtawat (pale /clay colour)	
Kumbha Kamala	Krishna Varna (malena)	
Mrittikabhakshanjanya Pandu	Raktapuyakuta (mixed with blood and mucus)	
Kshaya (Phthisis)	Shyama varna	
Ama condition	Yellowish with pain in lumbar region	
Jirna Mala	Foul smell, cold, hard stool	
Sannipataj Asaadhya Atisar.	Mamsambu Sadrisham (dark reddish blackish)	
Tikshnaagni	Lumpish dry	
Mandaagni	Drava (loose)	
Asadhyavyadhi	Stinks too much, Shines like moon beam	

Jihwa Pariksha (Tongue Examination): [8] The tongue is the index of the stomach, implying its importance in the diagnosis of digestive disorders. The examination of the Jihwa (Tongue) reveals a variety of clinical information which help in the Tridoshika diagnosis of a disease. It also manifests the Ama state of the body and many G.I.T. disorders.

Tongue appearance in predominance of <i>Doshas</i>	
Predominance of <i>Doshas</i>	Tongue appearance
Vata	Sita (Cold), Khara (Rough), Sphutita (Fissures)
Pitta	Rakta (Red), Shyam (Dark Blue)
Kapha	Shubhra (White), Picchila (Excessively Greasy)
Sannipataj	Black, Kantaka (Thorny), Dry

Conditions of Jihwa in Various Diseased Conditions	
Manifestation of Tongue	Disease condition
Pale and white	Kaphadhikya
Pandu	Anaemia
Pita (Yellow)	Pittadhikya, Jaundice
Haridra (Green)	Halimaka (chlorosis)
Nila (Blue)	Respiratory disorder
Krishna (Black)	Renal disorders, licking of iron contain medicine
Atirakta (Angry Red)	Pittajjwara (Hyperpyrexia), Tikshnagni (Hyperthyroidism), Raktavrddhi (Polycythemiavera)

Shabda Pariksha (Voice Examination): Shabda Pariksha is the examination of the various sounds produced by the different organs of the body; hence an examination of the normal and abnormal sounds will

be advantageous to arrive at correct diagnosis. The voice will be healthy and natural, when the Doshas are in a balanced state. [9]

Voice appearance in Various Conditions	
Various Conditions Voice appearance	
Kapha Vikrti / Ama / Medaja Vikara	Guru Svara (heavy, thick and deep)
Pitta Vikrti	Sphuta (clear), sharp
Kapha Vikrti	Dry, hoarse and broken.

The conditions producing change in speech and sound are like MinMina i.e., nasal speech and monotonous in case of extra pyramidal lesions, Gadagada (stammering/spastic speech) due to brain trauma (indicating UMN lesions), Swarbheda (hoarseness of voice) may leads to chronic irritation of the larynx caused by smoking or excessive alcoholism.

Sparsha Pariksha (Touch Examination): This is a method to understand the condition of the various parts of the body in respect of their normal or abnormal *Gunas* (qualities). [10]

Palpation can be compared with the Sparsha Pariksha of Ayurveda, which used for assessing the state of organs and tissue examination of skin like i.e., roughness of the skin in Anaemia or malabsorption syndrome, rashes over skin or discharge from skin in Eczematous dermatitis, skin and extremities are hot in fever and are found to be cold in case of circulatory failure/cardiac arrest. In this way tactile examination (Sparsha Pariksha) plays an important role in diagnosis of disorder.

Sparsha Pariksha in predominance of Doshas	
Predominance of <i>Doshas</i>	Sparsha observation
Vata	Sita Sparsha (cold), Ruksha (dry)
Pitta	Ushna Sparsha (hot)
Kapha	Sita Sparsha (cold), Picchila (greasy)

Drika Pariksha (Eye Examination): Expressions of the eyes reflect the health status of the entire body. The examination of eyes provides more information about the condition of the *Doshas* and the underlying disease. [11]

Drika Pariksha in predominance of Doshas	
Predominance of Doshas	Drika observation
Vata	Ruksha (dry), Dhumra (smoky), Roudra (terrifying), Chala (unsteady), Antarjwala (glows inside)
Pitta	Dipa dwesha (fear from light), Santapta (burning sensation), Pita Varna (yellowish colouration)
Kapha	Jalardra (moist by water), Jyotihina (lustreless), Snigdha (greasy), Shweta (whitish)
Sannipataja	Rakta (red), Kalusa (dirty), Asita (black), Bhishana (horrifying), Nirbhugna (oblique) and
	Nisprabha (lustreless), Tandra-Moha Yukta (stuporous look).

In clinical condition like Anaemia (Pandu Roga) the colour of eyes (sclera) is changed to yellowish white, deep yellow conjunctiva in case of jaundice (Kamala), In case of excessive blood loss, purgation and starvation eyes results sunken, prominent or bulging eyes can be seen in thyrotoxicosis etc. [12]

Akriti Pariksha (Facies & Overall Appearance): Akriti Pariksha means the examination of the external features of the whole body. In Ayurvedic texts it may be considered under Deha Prakriti Pariksha, Ashta Nindita Purusha (unhealthy physique), Vishamasana Savana (abnormal posture, gait), Sahaja Vikritis

expression) [13]. (congenital deformities) and Mukha Bhava (facial

Akriti Pariksha in predominance of Doshas	
Predominance of Doshas	Akriti observation
Vata	Vibhu, Ashukari, Balvana, prone to many diseases, split hair and dry skin with Dhusara
D*	Varna, dislikes cold, Pralapa, unstable Dhriti, Smriti, Buddhi, Cheshta etc.
Pitta	Hungry and thirsty, fair in colour, brave, Swabhimani, less hair
Kapha	Jalardra (moist by water), Jyotihina (lustreless), Snigdha (greasy), Shweta (whitish)
Sannipataja	Saumya, snighdha, well-built body and joints, tolerant to hunger, thirst, hardship, hot sun

CONCLUSION

Diagnosis as per Ayurveda is not merely naming the disease, but identification of the imbalance of trienergies (Doshas). These eight factors are excellent ways for judging the imbalance of tri-energies.

It is advisable that 'Diagnosis should precede treatment wherever possible. Ashtavidha Pariksha was designed in such a way that these were very much applicable in leading to the diagnosis and prognosis of a certain disease. It helps the physician to decide if he can handle the case or if it would be wise enough to refer the case to related specialties and helps in planning a comprehensive treatment protocol.

One can draw a conclusion on diagnosis of a particular disease and can start management accordingly, on the basis of various clinical observations described in Ashtasthan Pariksha.

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