

**DEVELOPMENT AND VALIDATION OF SCALE FOR ASSESSMENT OF SAMYAK SNEHA LAKSHANAS**Priya R Yadav<sup>1</sup>, Priyanka BV<sup>2</sup>, Kiran M Goud<sup>3</sup>

<sup>1</sup>Under Graduate scholar, Sri Kalabhyraveswary Ayurvedic Medical College, Hospital and Research Centre, Vijayanagar, Bangalore, Karnataka, India

<sup>2</sup>Associate Professor, Department of Samhita & Siddhanta, Sri Kalabhyraveswary Ayurvedic Medical College, Hospital and Research Centre, Vijayanagar, Bangalore, Karnataka, India

<sup>3</sup>Professor, Department of Panchakarma, Sri Kalabhyraveswary Ayurvedic Medical College, Hospital and Research Centre, Vijayanagar, Bangalore, Karnataka, India

Corresponding Author: [priya94814@gmail.com](mailto:priya94814@gmail.com)<https://doi.org/10.46607/iamj1911072023>

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**ABSTRACT**

*Chikitsa* aims for *Dhatusamyata* by means of *Shamana* (pacificatory techniques) or *Shodhana* (evacuator or eliminatory treatments). *Shamana* addresses vitiated *Doshas* at their source rather than expelling them from the body, whereas *Shodhana* is concerned with the expulsion of *Dushita Dosha* or *Mala Nirharana*. Adequate administration *Purvakarma*, *Shodhana* achieves success by performing the *Dosha Upasthita Avastha*. *Purvakarma* for *Shodana* includes *Deepana* (digestive), *Pachana* (*Ama* detoxification), *Rookshana*, *Snehana* (oleation), and *Swedana* (sudation). In this context, *Upasthita Dosha* refers to the *Dosha's* presence in the *Koshta* for expulsion. *Dosha* is properly mobilized from *Shakha* to *Koshta* as a result of the actions of *Snehana* and *Swedana*.

*Pravicharana* and *Accha Snehapana* are two methods, with *Accha Snehapana* being administered before *Shodana*. The purpose of this study is to develop and validate *Samyak Sneha Jeerna Lakshana*. *Samyak Sneha Jeerna Lakshanas* were gathered from classical texts during the development phase. Open-ended questionnaires were created for various domains and subdomains. The domains and questions were validated with 25 *Snehapana*

for *Virechana* and *Vamana* patients. Based on the responses, a closed-ended questionnaire with a 5-to-7 Likert scale was created.

The reliability was assessed using Cronbach's Alpha(CA) test. The questions which didn't give the acceptable CA were redacted and the questions with good and acceptable CA were retained. The final questionnaire was obtained with 41 questions after obtaining a CA of 0.836 in the 5th stage.

The questionnaire obtained at the end of this research can be a self-administrable scale to analyze the *Samyak Sneha Lakshanas* in an individual who are undergoing shodhana both *Vamana* and *Virechana*. In this study objective criteria are not developed to confirm *Samyak Sneha Jeerna Lakshana*. The final CA obtained i.e 7 to 1 was 'good' according to the rule of thumb for statistical reliability.

**Keywords:** *Snehapana*, Questionnaire, *Samyak Sneha Jeerna Lakshana*, *Shodana*, Validation

## INTRODUCTION

Digestion of *Sneha* is Prime factor to descry the effect of the *Snehapana*. *Jatharagni* (strength of digestion) plays the central role in the process of digestion. As the digestion progresses , our body shows the signs which reflect the stage of digestion known as *Jeerna aahara Lakshanas*. *Snehapana* Oral administration of *sneha* as a *purva karma* for *vamana* and *virechana*. It can be done with *grutha* or *taila*. It can be administered either for 3/5/7 days which will be divided based on *Samyak Sneha Lakshanas* *Samyak Sneha Lakshanas* explained in *Charaka Samhita Sutra sthana* are *Vataanulomana*(carination), *Deepthagani*(stimulated digestion), *Snigdha Asamhata mala*(unctuous and unformed stools) and *Maardava Snigdata Anga*(softness of body parts). Acharya sushruta in along with above symptoms adds symptoms *Parishudda koshta*(well purified abdomen), *Dhatu Bala Varna*(strength and colour) *Drudaindriya* (Stable functioning of *Indriya*), *Manda jara*(slow in getting old) and *Shathaa-yu*(life of hundred years) .

If *snehapana* is given more than 7 days the purpose won't be fulfilled, the proper *snehapana* results in to *Utklesha* of *Doshas* and helps to *Samyak yoga* of *Vamana* and *Virechana* ,also timely assessment of *Samyak Sneha Lakshana* helps to avoid *Atiyoga Ayoga* and *Sneha vyapat* Though in *Panchakarma* during *Snehapana* clinician ask few questions to confirm *Samyak Sneha Lakshana* those questions are not validated or not uniform of assessment ,also to

get a suitable answer for *Samyak Sneha Lakshana* questionnaires should be developed properly

This research was aimed at developing and validating a scale for assessment of *Samyak Sneha Jeerna Lakshana*.

## METHODS USED FOR QUESTIONNAIRE DEVELOPMENT AND VALIDATION:-

The Study was initiated after receiving the Institutional Ethics Committee Clearance [IEC No. SKAM/IEC/002/2020]. Informed consent from the volunteers. The questionnaire prepared was discussed with academics for suitability of selection of domain and questions. In the process of validation, the closed ended questions were distributed volunteers of both genders aged 18-60, whereas the non-Willing subjects and those suffering from metabolic disorders, or under any constant medications were excluded from the study. Validation of the questionnaire was carried out through SPSS 2.0 software and internal consistency was determined using Cronbach's Alpha test.

**Stage1:** As a prerequisite, *samyak sneha Lakshanas* were collected from *bruhatrayi* and keeping the *Snehadhyaya* as primary information. The questionnaire was developed after considering the domains and sub domains of the *lakshanas* enlisted. Development of questionnaire was done in the following way.

1. Construction of open-ended questions was done by considering the references of *Charaka Sam-*

hitha, Sushruta Samhitha, Astanga Hrudhaya, Astanga Sangraha.

- 25 patients are given with open-ended questions. Later, closed ended questions was developed based on the respondent opinion using 3, 5 or 7 graded like rt scale. The language used in these questionnaires is limited only to English.
- To develop a proper set of questionnaires – Question Validation was done by conducting focus group interviews to finalize the domains and subdomain. Experts were invited for the focus group.
- These questions were cross checked with 5th standard children to check language understand ability and perceptibility.

**Stage 2:-** The questionnaire was further distributed to 25 individuals of various groups' viz., who were undergoing snehapana either for vamana or virechana. Subjects with a good understanding of language were considered for the purpose of study. The response was analysed using SSPS 16 software and factorial analysis is carried out for the purpose of data reduction. The Questions constructed under different Domains were retained which possess Chron alpha more than 6 and those questions were retained for next round Validation.

**Stage 3:-** For validation, the constructed questionnaire after 1<sup>st</sup> round of validation was administered to 26 respondents who satisfy the inclusion criteria, with prior written consent. The response was analysed using SSPS 16 software and factorial analysis was carried out for the purpose of data reduction.

**Stage 4:-** validated questionnaires are administered to 10 respondents by contentment/intern/physicians the response was cross checked for the variability using SSPS 16 software.

The review of the internal consistency was assessed by a standard test known as Cronbach's Alpha (CA). The test value Ranges from 0 to 1.0

Rule of thumb for reliability statistic value is as follows:-

- Excellent >0.9, Good >0.8, Acceptable >0.7, Poor >0.5, Unacceptable <0.5

An alpha of 0.7 is probably a reasonable goal. A high goal alpha indicates good internal consistency of the items in the scale. The questions which didn't give the acceptable CA were rejected.

#### **OBSERVATION:-**

Out of 76 subjects, 36 were male whereas 39 were female. Out of 76 subjects, 19 were from the age group of 18-28 whereas, 17 were from the age group of 29-38, 19 were from the age group of 39-48 and 19 were from the age group of 49-60 years of Age group.

#### **1<sup>ST</sup> ROUND STUDY**

Construction of open-ended questions was done by considering the references of Charaka Samhitha, Sushruta Samhitha, Astanga Hridhaya, Astanga Sangraha. 25 patients are given with open-ended questions. Later, closed ended questions was developed based on the respondent opinion using 3, 5 or 7 graded likert scale. The language used in these questionnaires is limited only to English. To develop a proper set of questionnaires – Question Validation was done by conducting focus group interviews to finalize the domains and subdomain. Experts were invited for the focus group. These questions were cross checked with 5th standard children to check language understand ability and perceptibility.

#### **2<sup>ND</sup> ROUND DATA**

The questionnaire was further distributed to 25 individuals of various groups' viz., who were undergoing snehapana either for vamana or virechana. Subjects with a good understanding of language were considered for the purpose of study. The response was analysed using SSPS 16 software and factorial analysis is carried out for the purpose of data reduction. The Questions constructed under different Domains were retained which possess Chron alpha more than 6 and those questions were retained for next round Validation. 2<sup>nd</sup> round of Assessment 30 ml was minimum dose and 50ml was Maximum dose of Snehapana On 1<sup>st</sup> day Maximum Subjects 9(36%) took 4 hours for digestion of Sneha in 2<sup>nd</sup> round of Assessment. Subjects has taken minimum 4hr and Maximum 16 hours for digestion of Snehapana. On 2<sup>nd</sup> day the minimum dose Sneha adminis-

tered was 50ml and Maximum dose was 160ml, which was digested in 6 to 13 hours. On 3<sup>rd</sup> day of snehapana 80 ml was minimum dose administered and maximum dose was 300ml which was digested within 4 to 13 hours.

On 4<sup>th</sup> day the minimum Sneha administered is 120ml and Maximum it was 350ml which was digested within 5 to 16 hours of time.

### RESULT ON DATA ON QUESTIONNAIR

By the analysis from the above table due to poor acceptancy based on the chron alpha value some questions will be deleted they are Under Domain Shiroruja subdomain bhrama questions D2.2 , D2.3 Subdomain lalastrava D3.2 Subdomain murccha D4.1 Subdomain antardaha D7.2 Under Domain vatanulomana Subdomain D.2,D.5,D.6,D.7,D.8 Under Domain kshudha pravritti Subdomain D.1,D.2 Domain thrishna pravritti D.1,D.2 Domain deepthagani D.4

Domaina asmataha mala D.1,D.2,D.6, Domain tvaksnigdhta D.2, Domain durvarnatva D.2 Domain bhakta dvesha D.1,D.2,D.3 Domain grana srava D.2 But some questions such as domain arati D.1 Domain mardava D.1 Domain snehodvega D1,D2,D3 Domain tvaksnigdhatva D1 Domain durvarnatva D1 Domain jadyata D1, Domain tandra D1 Domain bhakta dvesha D4, domain grana srava D1, domain guda daha D1

Though the above questions were received with low chron alpha, questions were retained for the second round to avoid deletion of domains coming under Snehapana.

At the end of the last round of validation the following questions were retained which more than 7 Cronbach alpha value.

#### A. DOMAIN 1

##### SHIRORUJADI PRASHAMANA

###### I. Sub Domain 1 - Shiroruja

1. Have you ever had a Headache after Consuming Sneha?  
Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)
2. Is the headache relieved after appearance of hunger or digestion of Sneha?

No (1), Yes (2)

###### II. Sub Domain 2 - Bhrama

3. Have you Ever felt Giddy after Consuming Sneha?  
Very Often (5), Quite Often (4), Several Times (3), Few Times (2), Never (1)

###### III. Sub Domain 3 -Lala Srava

4. Have you ever experienced excessive salivation After consuming Sneha?  
Very Often (5), Quite Often (4), Several Times (3), Few Times (2), Never (1)

###### IV. Sub Domain 5 - Arati

5. Did you experience body pain after consuming Sneha Pana which was not before consuming Sneha Pana?  
Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)

###### V. Subdomain 6 -Anga Saada

6. Did you experience weakness/lathery after consuming Sneha Pana which was not before consuming Sneha Pana?  
Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)

###### VI. Subdomain 8- Klama

7. Did you feel tired without physical exhaustion after consuming Sneha?  
Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)
8. Do you experience mental fatigue after consuming Sneha?  
Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)
9. Do you experience that your sense organs are weak or tired after consuming Sneha?  
Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)
10. Did you Notice that your sense organs are more active than before, after digesting Sneha Pana or appearance of hunger?  
Strongly Agree(5), Agree(4), Neither agree nor disagree(3), Disagree(2), Strongly disagree(1)
11. Are you feeling as active as usual before starting Sneha Pana?

Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1)

**B. DOMAIN 2 - SHAREERA LAGHUTVA**

12. Are you experiencing body lightness?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**C. DOMAIN 3 - VATANULOMANA**

13. Are you experiencing flatulence after *Snehapana*?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

14. Please specify the frequency of Micturition.

More than 9 times (5), 6-8 times (4), 3-5times (3), 1-2times (2), Never (1)

15. Have you Passed stool after consuming *Sneha*?

Yes (2), No (1)

**D. DOMAIN 4 - KSHUDA PRAVRUTTI**

16. Do you experience hunger after consumption of *Sneha*?

Yes (2), No (1)

**E. DOMAIN 5 - TRUSHNA PRAVRUTTI**

17. Do you experience thirst after consuming *Sneha*?

Yes (2), No (1)

**F. DOMAIN 6 - UDGARA SHUDDI**

18. Are you experiencing Belching?

Always (5), Often (4), Sometimes (3), Rarely (2), Never (1)

**G. DOMAIN 7-DEEPTAGNI**

19. Agni Bala index = Given Dose x 9/Time taken for Digestion

20. Do you find it like you completely digested the *Sneha*?

Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1)

21. Do you Feel That you have digested *Sneha* with difficulty?

Always (5), Often (4), Sometimes (3), Rarely (2), Never (1)

22. Do you feel that your digestion capacity is more after staring *Sneha Pana*?

Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1)

**H. DOMAIN 8 - SNIGDHA MALA**

23. Have you Passed stool with *Sneha* in the morning?

Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1)

**I. DOMAIN 9 - ASAMHATA MALA**

24. Did you Noticed that your faeces were pellet form?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

25. Did you notice that your faeces were soft?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**J. DOMAIN 10 - MARDAVATA**

26. Did you notice that your body is soft?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**K. DOMAIN 11- SNEHODVEGA**

27. Did you have an aversion to Consuming *Sneha*?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

28. Did you experience nausea as a result of aversion to consuming *Sneha*?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

29. Did You vomit *Sneha* because of aversion to it?

7 or more times (5), 5-6 times (4), 3-4times (3), 1-2time (2), No (1)

**L. DOMAIN 12 -TVAK SNIGDHATA**

30. Did You Notice that your skin is oily?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**M. DOMAIN 13 - DURVARNATVA**

31. Did you notice that your skin colour is changed?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**N. DOMAIN 14 - JADYA**

32. Did You Notice your body is Sluggish?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**O. DOMAIN 15- TANDRA**

33. Are you experiencing Drowsiness or stupor?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**P. DOMAIN 16 - BHAKTA DVESHA**



34. Do you have interest in taking food?

No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**Q. DOMAIN 17 - GRANA SRAVA**

39. Did You Notice discharge from Nose? No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**R. DOMAIN 18 GUDA DAHA**

40. Did you notice burning sensation in anus? No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

**S. DOMAIN 19 - PURUSHA ATIPRAVRUTTI**

41. Did you notice the increased frequency of stool? No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

In the 1<sup>st</sup> round 67 questions with good and acceptable CA were retained and distributed to 25 subjects. Similarly at the end of 2<sup>nd</sup> stage 47 questions were retained. During 3<sup>rd</sup> stage 47 questions were again distributed to 26 subjects which retained 41 questions. In stage 4, 41 questions were distributed to 10 volunteers assessed by different physicians and reliability was cross verified.

**DISCUSSION**

*Shodhana* (evacuatory or eliminatory treatments)<sup>1,2</sup> expels *dustha dosha*<sup>3,4</sup> if it follows successful *Purvakarma*. This *Purvakarma* makes *dosha upasthita* according to Acharya Charaka. *Deepana* and *Pachana* as *purva karma* increase Agni and detoxification of *Ama*. *Rakshana* helps to reduce *Kapha* and *meda*, *Snehana* and *Swedana* Makes *dosha Upasthita Upasthita Dosha* refers to *dosha* in the *Koshta* which is ready for expulsion by the movement of *Dosha* from *Shakha* to *Koshta*. *Pravicharana* and *Accha Snehapana* are two methods of *Sneha* administration. *Accha Snehapana*, administered as *purvakarma* for *Shodhana*. Acharya Charaka uses the analogy that contents simply and effortlessly detach from a smooth container. Similar to this, *Kaphadi Doshas* were easily evacuated from an oiled body<sup>5,6</sup>. The *Sneha Jeeryamana* and *Jeerna Lakshanas* evaluate *Sneha's* digestion. These serve as a tool for understanding how Agni affected *Sneha Dravya*. *Shirorukh*

(headache), *Bhrama* (nervousness), *Nishtiva* (salivation), *Murcha*, *Saada* (pain), *Arati* (tiredness), and *Klama* (fatigue) are some of the *Sneha Jeeryamana Lakshanas* as described by Acharya Vagbhata. These are the *Lakshanas* observed during *Sneha's* digestion. Following *Sneha's* digestion, the *Jeerna Lakshanas* manifest as eructation, *kshudha* (appetite), *trushna* (thirst), *vatanuloma* (passing of flatus), and *Swasthyam* (health symptoms). '*Snehanam Sneha Vishyandam Mardava Kledakarakam*' quotation of Charaka explains about the therapeutic action of *Shodhananga Snehapana*. *Snehapana* manifests *Twak Snigdhata*, *Vishyandana* causes *Adhastat Sneha Darshanam*, *Mardavata* of *Snehana* leads to *Gatra Mardavata* and *Kledana* is responsible for *Asamhata Varchas*. So, we can say that in *Shamana* and *Brimhana Snehapana*, *Snehana* and *Mardava* effects can be seen whereas *Kledana* and *Visyandana* effects will not be seen, as the last two effects excite the *Dosha* and so are not intended in *Shamana* and *Brimhana Snehapana*.

In the Study 1<sup>st</sup> Domain, *shirashuladi Shama* included Sub Domain 1 – *Shiroruja*. The question framed to assess above criteria includes presence of Headache after Consuming *Sneha* and Likert scale selected indicates severity of the headache. (Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)) Also to confirm appearance of the headache during the time of digestion of *Sneha* is due to *Sneha Pana* another question was framed relief of headache after appearance of hunger or digestion of *Sneha*. The question got validated for reliability after factorial analysis. Sub Domain 2 includes the *lakshana* reduction of *Bhrama* which was assessed feeling Giddy after Consuming *Sneha* with Likert scale indicating frequency of occurrence (Very Often (5), Quite Often (4), Several Times (3), Few Times (2), Never (1)). Sub Domain 3 was reduction *Lala Srava* which was assessed with experience of excessive salivation After consuming *Sneha* with Likert scale indicating frequency of occurrence (Very Often (5), Quite Often (4), Several Times (3), Few Times (2), Never (1)) Sub Domain 5 was *Arati* which was assessed with the experience body pain after consuming *Sneha Pana*

which was not before consuming *Sneha Pana* and answered was with the Likert scale indicating severity (Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1))

Subdomain 6 was used to assess the symptom of reduction in *Anga Saada* with the question experience of weakness/lathery after consuming *Sneha Pana* which was not before consuming *Sneha Pana* and answered was indicative of severity (Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)). Subdomain 8 *Klama* was assessed with the question tiredness appearance without physical exhaustion, mental fatigue, weakness or tiredness of sense organs and answered was indicative with severity (Excruciating (5), Sever (4), Moderate (3), Mild (2), Nil (1)). Another question was included to assess same subdomain more active sense organs than before, after digesting *Sneha Pana* or appearance of hunger with Likert scale indicative of opinion (Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1)). Also feeling as active as usual before starting *Sneha Pana* considered with Likert scale Strongly Agree (5-Strongly disagree (1))

In this study Domain 2 was *Shareera Laghutva* which was assessed with experiencing body lightness and answered taken was severity Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5).

Domain 3 i.e *Vatanulomana* was assessed with experiencing flatulence after *Sneha Pana*, answer selected was severity Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). *Vatanulomana* also results in proper elimination of *Mutra* and *Pureesha*. Hence this domain includes questions related to *Mutra* and *Pureesha Pravrutti*. *Mutra Pravrutti* was assessed with frequency of Micturition with answer More than 9 times (5), 6-8 times (4), 3-5times (3), 1-2times (2), Never (1) and *Pureesha Pravrutti* with passing of stool after consuming *Sneha*. Domain 4 in this study was assessment of *Kshuda Pravrutti* and Domain 5 - *Trushna Pravrutti* was assessed with experience of hunger and thirst after consumption of *Sneha*. Answer was selected is nominal scale Yes (2), No (1) Domain 6 *Udgara Shuddi* was assessed with experiencing Belching and answered selected indi-

cated frequency i.e Always (5), Often (4), Sometimes (3), Rarely (2), Never (1) Domain 7-*Deeptagni* was assessed with *Agni Bala* index which was calculated using formula Given Dose of *Sneha Pana* multiply-ing with constant 9 and by dividing Time taken for Digestion of given *Sneha*.

Also additionally question completeness of digestion of the *Sneha* was passed with Likert scale Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1). Also, additional question was taken to assess difficulty in digestion of *Sneha* which was answered with frequency Always (5), Often (4), Sometimes (3), Rarely (2), Never (1) Also increase of digestion capacity after starting *Sneha Pana* was considered with Likert scale Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1) Domain 8 - *Snigdha Mala* was assessed passing of stool with *Sneha* in the morning which was assessed with Likert scale Strongly Agree (5), Agree (4), Neither agree nor disagree (3), Disagree (2), Strongly disagree (1) Domain 9 - *Asamhata Mala* was assessed passing of pallet form or softness of stool which was assessed with Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5) Domain 10 - *Mardavata* was assessed with observation of softness of body with Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

Domain 11- *Snehodvega* was assessed with an aversion to Consuming *Sneha* with severity No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). Also, another question taken related to experience nausea as a result of aversion to consuming *Sneha* with Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). Also, frequency of vomiting of *Sneha* because of aversion to it also questioned. (7 or more times (5), 5-6 times (4), 3-4times (3), 1-2time (2), No (1) Domain 12 -*Tvak Snigdhatva* was assessed with question oiliness of skin with severity No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5) Domain 13 - *Durvarnatva* was assessed with the question change in skin colour is changed with Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

Domain 14 – *Jadya* was assessed with body Sluggishness with scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5)

Domain 15- *Tandra* experiencing Drowsiness or stupor was assessed with severity No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). Domain

16 - *Bhakta Dvesha* was assessed with appearance of interest to take food with severity scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). Do-

main 17 - *Grana Srava* Noticing of discharge from Nose was assessed with No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). Domain 18 *Guda*

*Dhaha* burning sensation in anus was rated with severity No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5). Domain 19 - *Pureesha Atipravrutti*

assessed with increased frequency of stool with Likert scale No (1), Mild (2), Moderate (3), A lot/Very (4), Extreme (5) The *Lakshana Vatanulomana*, *Deeptagni*

can manifest from 1st day of *Snehapana* which may be because of *Snigdha Guna* of *Sneha*. Due to intake of *Sneha Anulomana* of *Apana Vayu* occurred, which

resulted in the good functioning of *Apana Vayu* and *Pachaka Pitta* and in turn *Agnidipti* was observed. *Purisha Snigdhatta* may start to be observed by the

patient from day 3 onwards. It suggests the gradual *Snigdhatta* of *Purishavaha Srotas*, which will reach maximum by 7th day. *Twak Snigdhatta* suggests that

*Sneha* has reached up to *Rasa*, *Rakta*, *Mamsa* and also *Majja Dhatu* as explained by Vagbhata, “*Sneho Akshi Twagvisham*” Caraka explains this with illustration that just as water saturates the cloth to its

capacity then drains off, similarly the unctuous dose gets digested according to the strength of *Agni* and drains off when it exceeds the limit of *Agni*.

*Cakrapani* comments that it is direction to find when to stop *Snehapana*<sup>7</sup> Symptoms explained under *Samyak Snehapana* indicates first *Mahastrotas* be-

comes *Snigdha* which results in symptoms *Agnidipti* and *Vatanulomana*. Further when *Asamhata Varchas* appears the complete *Snehana* of *Annavaha* and

*Purishavaha Srotas* can be understood. Afterwards *Twak Snigdhatta* appears. This reveals that *Snigdhatta* has reached up to *Dhatu* level. At last, *Snehodvega*

and *Adhastat Sneha Darshanam* were noted suggest-

ing that there is no need for further *Snehana*. So, from the above data it can be understood that the onset of *Snehana Lakshana* described by Caraka and other Acharyas are in the sequence of appearance. However, symptoms like *Twak Snigdhatta* are little difficult to achieve or may not appear in all the patients.

## CONCLUSION

The questionnaire obtained at the end of this research can be a self-administrable scale to analyze the *Samyak Sneha Lakshanas* in an individual who are undergoing *shodhana* both *Vamana* and *Virechana*. In this study objective criteria are not developed to confirm *Samyak Sneha Jeerna Lakshana*.

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