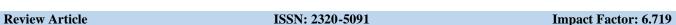


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IMPORTANCE OF PURISHA PARIKSHA IN CURRENT PRACTICE

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ABSTRACT

Mala is the metabolic end-product formed after the proper digestion of Ahararasa and it will help in maintaining homeostasis of the body. Like Dosha, Dhatu and Mala also play an important role in Dharana of Shareera¹ so it should be assessed to determine health and wellbeing. Mala as a whole include Sharirika and DatuMala. Here in this article, Purisha is considered one among Sharira Mala mainly. While describing Rogi Pariksha Bhrihathrayi's not mentioned on Purisha Pariksha as such instead gave scattered references of changes in Purisha while describing various diseases, and Yogaratnakara described Purisha Pariksha in Ashtasthana Pariksha. Purisha assessment is not only used to assess Roga but also to assess the Agni Bala and presence of Ama Avastha in Shareera. The Stool is the waste residue of indigestible materials of the digestive tract expelled through the anus during defecation it is to be examined to find out the gastrointestinal pathologies. Which is examined by microscopical, macroscopical, chemical and culture methods. Here is an attempt to gather all information relating Purisha Pariksha and to find out its usefulness in current clinical practice.

Keywords: Mala, Pariksha, Purisha, Agni, Ama

INTRODUCTION

According to Ayurveda body is maintained by Dosha (bodily elements), *Dhatu* (tissue elements), and *Mala* (bodily waste) in their normalcy. Each entity has its characteristic role in the proper functioning and maintenance of bodies homeostasis. So, Mala (bodily waste) also have characteristic importance in assessing health and disease. According to Acharyas the processed food which reaches the *Pittashaya* (duodenum) undergo further metabolism and turn into semi-digested solid and water part of food and Acharya Dalhana specifies that this semi-digested solid part of food that reaches the *Unduka* (ceacum) is called *Puri*sha².In contemporary view undigested food comes from the ileum into the colon consists of indigestible materials (cellulose) and liquid absorbed into the colon and the remaining contents in the lumen become faeces.

Pradhana Karma of Purisha is Deha Dharana itself so in diseases like Rajayakshma it is explained that these imbalanced *Doshas* spread in the body, obstructing the openings of various channels and the flow of Dhatus. Because of this obstruction, the Ahara Rasa does not get converted to Dhatus instead it gets converted to *Purisha* only in such cases, the body survives on the support (Upashtamba) of Malas. Hence Mala should be protected, particularly in a case where the patient has already been afflicted with Sosha and in cases where the individual is emaciated or very weak. Along with this *Purisha* helps in the regulation of *Ap*ana Vayu and maintenance of Agni in the body³. In Ayurvedic texts, examination of stool is limited mainly up to the examination of physical characteristics such as color, quantity, odor, froth, and consistency. Besides these, a specialized technique of stool examination, i.e., Jala Nimajjana Purisha Pariksha (sinking test in water) has been described to detect the presence of Ama thereby inferring the status of Agni in the body. So, by examining the characteristics of *Purisha* one can assess the *Dosha* vitiation, *Ama Nirama Avastha* and *Agni* of a person and holds a major role in today's clinical practice.

NORMAL PURISHA LAKSHANA:

Normal characteristic features as such are not mentioned but *Acharya Charaka* mentioned amount as seven *Anjali*⁴. A normal characteristic feature of faeces is human faecal matter is normally yellowish-brown in colour which results from a combination of bile and bilirubin. The odour of stool depends on the pH of the stool and indole and skatole are the substances that produce normal odour formed by Intestinal bacterial fermentation and putrefaction. Consistency will be smooth and soft with sausage shape.

PRAKUPITA PURISHA LAKSHANA:

Purisha when increased pathologically will produce subjective and objective symptoms like pain, heaviness, gurgling sounds and abdominal distension 5. And Purisha when decreased pathologically causes vitiation of Vata in the stomach and untoward movement of Vata along with sound, pain in Hridaya and flanks ⁶. Along with these Lakshanas Acharya Charaka mentioned the characteristic changes in Purisha during Purishavaha Srothodusti (pathologies in channels of faecal production, transmission and excretion) Krichrena (difficulty in defaecation/ dyschezia), Alpalpam (Passing of little amount of faecal matter frequently) Sashabda (Passage of stools associated with the passage of the flatus) Sashula (Passage of stools associated with severe pain) Atidravam (Passage of liquid/ semisolid stools frequently) Atigrathitam (Passage of scybalous stools (very hard faecolith) Atibahu (Passage of normal bowels frequently). Acharya Susrutha adds unformed stool along with a foul smell to it 8.

DOSHA ANUBHANDHA PURISHA LAKSHANA:

According to Acharya Yogaratnakara Purisha will produce characteristic colours and features when affected with particular *Doshas*⁹[Table 1].

Table 1: Charachteristic features of *Purisha* based on *Dosh*

Dosha	Stool features	
Vata	Dridha (hard) and Shushka (dry)	
	Trutita (broken), fenila (frothy), Ruksha (dry), DhuMalam (smoky coloured)	
Pitta	Peeta (yellow), raktha(red)	
Kapha	Shukla (white)	
Sannipatha	Sarva lakshana-shyama (blackish), peeta (yellow), Shwetha (white), Trutita (broken), Baddha (ob-	
	structed)	
Vata sleshma vikara	Krishna varna (black)	
Pitta anila vikara	Badddha (binding), Trutita (broken), Peeta (yellow), Shyam (black)	
Kapha pitta vikara	Peeta (yellow), Sweta (white), Ishat Sandra (slightly thickened), Pichchila(sticky)	

AGNI AND PURISHA RELATION:

Purisha shows characteristic changes in association with Agni

As per Yogaratnakara in Atyagni Purisha will be Pinditha (bolous like) and Shushka(dried).

In Mandagni (reduced digestive fire) Purisha will be watery 10.

SAMA NIRAMA LAKSHANA:

Purisha Parisha is also used to assess the Koshta, Agni and Ama Avatha in body and it indicates the presence of Ama by its characteristic features. Amanubandha Purisha will be extreme foul-smelling, sticky and sink in water and Niramatha marks lightness of faecal matter and it floats on water¹¹. This examination to assess ama is called Jalanimanjana Pariksha.

PURISHA VEGA DHARANA LAKSHANA:

Defecation is one among the urge which should not be suppressed and due to today's busy lifestyles and all many have to do the same and this itself became a cause for many diseases

Lakshana of Purisha Vega Dharana are:

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It will produce pain abdomen, headache, unable to remove flatus and stool, muscle cramps in the calf region and abdominal distension¹².

CHARACTERISTIC OF STOOL IN VARIOUS **DISEASES:**

Stool as a material matter shows characteristics due to the bodily changes during the disease process. It will become sometimes a predominant symptom, symptom and sign to assess prognosis too. Major changes are noted in colour, consistency, odour, presence of froth and nature of associated pain on defecation.

CHANGE IN COLOUR OF STOOL:

Black Coloured stool: upper GI haemorrhage, iron and colloidal bismuth therapy.

Tarry or deep maroon stools / fresh bright red blood (Hemetehezia) -severe upper GI haemorrhage

Pale bulky: small bowel or pancreatic Malabsorption

Silvery pale: Pancreatic CA

Blood mixed: colitis

Clay coloured: Obstructive jaundice or presence of barium sulfate

Green: Ingestion of Spinach, antibiotics.

In Infants:

Exclusively breastfed infants -loose and green or pasty and yellow stools.

Infants fed on cow's milk preparations - stools of a paler yellow colour and a much firmer consistency.

Babies fed on newer modified cow's milk preparations - clay coloured or greenish stools.

Some healthy children may pass frequent, loose stools containing undigested vegetable matter called Toddler's diarrhoea.

Table 2: Change in colour of stool in various diseases

Colour of stool	Disease
Krishna Varna (black colour)	Vatika Arsha, Vatika Gulma, Kumbha Kamala, Paittaka Atisara and Vata Prakopa
Shukla Varna (white color)	Shlesmika Jwara Shlesmika Udararoga Shelsmika Arsha, Shelsmika Pandu, Shakhashrita
	Kamala, Shelsmika Atisara, Sahaja Srsha, Jalodara, Kaphaja Gulma and Kahaja Visarpa
Shyava Aruna Varna (grey and	Vatika Udara Roga, Vatika Arsha, Vatika Atisara Vata Prakopa Vataja Gulma Vataja
reddish colour)	Jvara Nad Vataja Pandu
Rakta Varna	Kamala, Pittaja Atisara, Rakthapitta Sahaja Arsha and Chhidrodara

PRESENCE OF FROTH IN STOOL:

Frothy stools with sour smell in lactase deficiency.

Table 3: Presence of froth in stool in diseases

Froth	Pathological condition
Presence of froth	Vataja Arsha
	Vatika Atisara
	Vataja Grahani

CHANGES IN CONSISTENCY:

Table 4: Consistency of stool in various diseases

Consistency of stool	Diseases involved	
Sandra(dense)	Kaphaja Atisara And Sahaja Arsha	
Baddha	Asadhya Pandu, Vataja Prameha	
Vibaddha(solid)	Udara Roga Baddhodara, Purishavrita Vata, Ashuddha Dugdhapana Sevana, Tridosha Dushti, Tikshnagni, Vataja Atisara, Vataja Visarpa, Vataja Jwara, Sahaja Arsha, Vataja Arsha, Mahash- vasa and Malavirita Vata	
Drava(watery)	Paittika Arsha, Vatika Grahani Asadhya Atisara and Mandagni	
Bhinna(loose)	Paittika Arsha, Shlesmika Grahani, Kshayaja Kasa Kaphavirita Aanavayu, Pittaja Murchha, Ega Sandharanjanya Yakshma and Arsha Samanya Lakshana	
Shushka(dry)	Vataja Grahani And Sahaja Arsha	

Bristol Stool Chart

	Type 1	Separate hard lumps, like nuts (hard to pass)	Very constipated
6559	Type 2	Lumpy and sausage like	Slightly constipated
	Туре 3	A sasuage shape with cracks in the surface	Normal
	Type 4	Like a sausage or snake, smooth and soft	Normal
	Type 5	Soft blobs with clearcut edges	Lacking fibre
2000年	Type 6	Fluffy pieces with ragged edges, a mushy stool	Inflammation
	Type 7	Liquid consistency with no solid pieces	Inflammation

Table 5: Bristol stool chart

CHANGE IN ODOUR OF STOOL: A foul odour is caused by the degradation of undigested protein and excessive carbohydrate intake. A Sickly-sweet odour is produced by undigested Lactose. The sour smell in lactase deficiency. [Table 6]

Table 6: Odour of stool in various diseases

Odour of stool	Diseases involved
Durgandhita (foul smell)	Shleshmika Atiara, Paittika Pandu, Asadhya Sannipataja Chhardi,
	Ama Purisha, Purishavaha Srotodusti and Vid Vighata
Visragandhi (smell of raw meat)	Paittika Arsha And Shleshmika Atisara
Atidurgandhita (extremely foul smell)	Paittika Atisara and Paittika Arsha
Amagandhi (smell of ama)	Amatisara
Kunapagandhi (smell of dead body)	Chhidrodara And Sahaja Arsha
Kunapa, puya, ama, matsyagandhi (smell of dead	Sannipataja Atisara
body, pus, ama and fish)	
Mahatputigandhi (putrefied smell)	Jalodara
Nirgandha or Sagandha (without or with odor)	Agantuja Atisara

CHARACTERISTIC PAIN ASSOCIATED WITH DEFECATION:

Table 7: Characteristic pain associated with defecation

Type of pain	Diseases involved
Sashula (with pain)	Amatisara
Sashula sadaha (with pain and burning)	Paittika Atisara
Parikartika (gripping pain)	Vataja Atisara
Pravahana(tenesmus)	Pravahika
Shula, gudasrava (discharge from anus with pain)	Jalodara
Chirat dukham (passing with difficulty)	Vataja Grahani
Sashula pravahana (tenesmus with pain	Kaphaja Arsha, Kaphaja Atisara and Pravahika
Kunthana (painful strain)	Samatisara And Visamagni

Painful defecation is seen in bacillary dysentery, tuberculosis, ulcerative colitis, diverticulitis, Inflammatory proctitis, irritable bowel syndrome, anal fissure and haemorrhoids.

PRESENCE OF KRIMI:

Another important criterion while examining *Purisha* in modern and *Ayurveda* parlance is the presence of *Krimi* in the stool.[Table 8]

Table 8: Types of Purishaja Krimi

Sr.no	Type of	CharakaSamhita	SushrutaSamhita
	Krimi	C.S. Vi. 7/10-13	S.S.U.54/8,12,15
1	Purishaja	Kakeruka, Makeruka, Leliha, Sashoolaka,	Ajawa, Vijawa, Kipya, Chipya, Gandupada, Churu,
		Shausurada	Dvimukha

Among the 4 types, *Krimi's* based on site of origin only *Kaphaja* and *Purishaja* are visible to the naked eye, and both originated from the gastrointestinal system as per all *Acharyas*. *Kaphaja from Amashaya* and *Purishaja from Pakwashaya*. And clinical features associated with *Purishaja Krimi* are as follows¹³. [Table 9]

Table 9: Lakshana Of Purishaja Krimi

Krimi	Lakshana according to Charaka	Lakshana according to Susrutha
Purishaja	Diarrhoea, emaciation, dryness,	Abdominal pain, dyspepsia, anaemia, constipation, loss of
	horripilation, when it reaches	strength, excessive salivation, anorexia and heart disease
	Guda Mukha produce pain and	Gandupada Krimi: which is red and long, in specific cause
	itching in the anal region	abdominal pain, gurgling sound in the abdomen, itching in
		anus, diarrhoea and loss of digestive power.

- Bacterial agents which are responsible for diarrhoea
- 1. Gram-positive: (Staphylococcus aureus, Clostridium perfringens, Clostridium difficle, Bacillus cereus)
- 2. Gram-negative: (Vibrios (i) Vibrio cholera (ii) Vibrio parahemolyticus)
- (iii) Other halophlic vibrios, Escherichia coli (Enterotoxigenic Escherichia coli (ETEC), Enteropathogenic E. coli (EPEC), Salmonella (i) S. enteritidis(ii) S.

typhimurium, Shigella spp, Campylobacter jejuni, Yersinia enterocolitica

Bacterial agents which are responsible for dysentery

Shigella species (sh. dysentriae, sh. flexneri, sh. boydii and sh. sonnei), Escherichia.coli (EIEC and EHEC), V. parahemolyticus, Campylobacter jejuni, Salmonella spp.

Macroscopic examination

Various points which have to be noted are:

- Consistency: formed, unformed (soft), loose or watery.
- The presence of blood, mucus or pus.
- Colour (white, yellow, brown or black).
- · Normal faeces appear brown and formed or semiformed.

Infant faeces are yellow-green and semiformed

Microscopic examination

- Methylene blue preparation
- 2-Wet mount
- 3-Hanging drop preparation
- 4-Basic fuschin smear

These tests will help to evaluate the motility of the organism and with the staining character, we can identify the organism¹⁴.

DISCUSSION

The word Purisha Pariksha gave a wide range of scope to assess the Doshik imbalance, Ama Anubhandhadha, Agni, Presence of Krimi, diagnosis and prognosis of a disease. The characteristic features of Purisha assessed to establish Doshik imbalance, Roga and Agni are its consistency, colour, odour and pain associated with defecation. Ama Anubhandhadha can be assessed by assessing characteristic features and Jalanimanjana Pariksha. Jalanimanjana Pariksha is a validatory method to assess ama in Purisha but it has to be standardized with the amount of stool, collection time, the quantity of water, nature of water and type of vessel to carry out the examination.

While going through the references regarding *Purisha* Pariksha it is clear that the vitiated Dosha have role in the colour, consistency, odour and nature of pain associated during defecation so it will act as a tool to assess the *Dosha* vitiation and *Ama* associated. For example, Vata Prakopa can be assessed by Ruksha (Dry), Krishna Varna (Black Colour), Phena (Frothy) Stools similarly Kapha and Pitta can be assessed. Ama Anubhandhadha can be assessed by the Dourgandhya/Ama Gandha(foul smell), Drava (watery), Pichilatha (sticky) and it also gives an idea about Agni Mandhya as ama is an end product of Agni Dushti.

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CONCLUSION

Purisha is one among the Sharirika Mala that do the dharana of Shareera. One way is it will remove the toxic waste products like ammonia and at the same time, it will correct the functioning of Apana Vayu and maintain the Agni in Koshta. Purisha sometimes acts as Bala to the body as in Rajayakshma.

It is one among the Adharaniya Vega and its suppression symptoms can range from mild muscle cramps to heart disease due to the resultant Dosha Dathu Mala dushti in Shareera. So, if we assess Purisha we can prevent a lot of diseases before manifestation and can assess the prognosis of already manifested. If the phyaccurately assesses the Dosha. Anubhandhadha and Lakshanas treatment will be made easy so Purisha Pariksha can be taken as one of the criteria to assess the same as it shows characteristic changes in all these Avasthas.

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