International Journal of Integrated Medical Research

Volume 11 Issue 01 January-February-March 2024 https://doi.org/10.57181/ijoimr/vol11i01/162 ISSN (Online): 2393-9869, ISSN (Print): 2350-0360

REVIEW ARTICLE



AYURVEDIC PERSPECTIVE ON NIDANARTHAKARA ROGA: A CONCEPTUAL UNVEILING

Dr. Pradeep Kumar Meena¹, Dr. Suman Meena²

¹Assistant Professor, Dept. of Kaya chikitsa, MMM Govt. Ayurved College, Udaipur, INDIA ²Assistant Professor, Dept. of Rog Nidan Evum Vikriti Vigyan, MMM Govt. Ayurved College, Udaipur, INDIA

Corresponding Author: Dr. Suman Meena, Assistant Professor, Dept.of Rog Nidan Evum Vikriti Vigyan, MMM Govt. Ayurved College, Udaipur, INDIA, Email: pmina9510@ gmail.com

ABSTRACT

Background: The integral role of causative factors, termed Nidan, in the onset of diseases, including instances where a disease itself becomes a causative factor for another ailment, is a significant aspect in Ayurveda known as Nidanarthakara Roga. Conditions such as Pratishyaya, Kasa, Kshaya, and Shosha fall under this category. These not only trigger the pathogenesis of other diseases but also compromise the individual's immune system. Timely diagnosis of causative factors and targeted treatment of the root disease are essential to avert the consequences of Nidanarthakara Roga. This article elucidates the conceptual framework of Nidanarthakara Roga and explores various diseases associated with this Ayurvedic concept. Treatment modalities such as Shuddha Chikitsa, Dosha Prashamana Chikitsa, Balya Aoushadhi, Rasayana therapy, and Panchkarma are indicated for managing Nidanarthakara Roga.

KEYWORDS: Nidanarthakara Roga, Pratishyaya, Kasa, Kshaya, Panchkarma.

INTRODUCTION

The genesis of diseases is intricately linked to the interaction with causative factors, known as *Nidan*, which significantly contributes to the pathogenesis of various ailments¹. In Ayurveda, certain diseases have the propensity to become causative factors for other conditions, leading to the conceptualization of *Nidanarthakara Roga*². Ayurvedic texts, notably those by *Acharya Charaka*, illustrate instances of *Nidanarthakara Roga*, encompassing ailments such as *Pratishyaya*, *Kasa, Shosha, Kshaya*, and *Udara etc*^{3,4}.

Ayurveda, as a holistic science, not only delves into disease management but also emphasizes preventive approaches over therapeutic measures. The concept of *Nidanarthakara Roga* underscores the idea that one disease can act as a causative factor for another. The primary disease, resulting from various etiological factors, can be influenced by psychological, nutritional, environmental, and genetic factors, as well as lifestyle practices.³⁻⁶

Acharya Charaka elucidated examples of Nidanarthakara Roga, such as Jwara, Raktapitta, Shosha, and Gulma. For instance, common cold arises from factors like an unhealthy lifestyle, poor dietary habits, low immunity, and environmental influences, progressing to chronic rhinitis (Jeerna Pratishyaya) if not appropriately addressed, and further evolving into conditions like Kasa. Causative factors may exhibit both pathological and etiological characteristics, sometimes manifesting solely as etiological factors or evolving into distinct diseases that subsequently lead to others⁶⁻⁸.

The prevention of the initial disease significantly reduces the likelihood of secondary diseases in their early stages. However, in chronic scenarios where secondary diseases manifest shortly after the onset of the primary disease, the focus should shift towards treating the secondary ailment. In such cases, addressing the primary disease aids in averting the chronic symptoms associated with secondary diseases.

Understanding the dual dynamics of *Ubhayarthakari* (where the primary disease persists alongside the onset of

PUBLISHED BY IJOIMR www.ijoimr.com

secondary diseases) and the resolution of the primary disease post the initiation of secondary diseases underscores the complexity of *Nidanarthakara Roga* in Ayurveda.

The manifestation of a primary disease either concurrently with the onset of a secondary ailment characterizes *Ubhayarthakari*, while the subsidence of the primary disease subsequent to the initiation of secondary diseases is termed as *Ekarthakari*. Managing such cases necessitates *Shuddha Chikitsa*, emphasizing the importance of addressing both the disease and its causative factors to mitigate the risk of recurrence. Identifying the causative disease holds paramount significance in the case of *Nidanarthakara vyadhi*, guiding the formulation of an effective treatment protocol. This conceptual framework aids in the accurate diagnosis of the disease's final manifestation.

The prolonged existence of a disease leads to the vitiation of *Dosha* and *Dhatus*, instigating the pathogenesis of other ailments. *Nidan sevan*, or the persistence of causative factors, serves as the precursor to the primary disease, ultimately giving rise to *Mula vyadhi*⁷⁻⁹.

CAUSES OF NIDANARTHAKARA ROGA

It can be categorized into *Swatantra* and *Paratantra vyadhi*. *Swatantra vyadhi* results from direct involvement with external factors, leading to primary diseases. On the other hand, *Paratantra vyadhi* arises from pre-existing illnesses. Several conditions contribute to the development of secondary diseases, including:

- 1. Lack of proper treatment for the previous disease.
- 2. Improper diagnosis of the primary ailment.
- 3. Weak immunity of the individual.
- 4. Neglecting disease-aggravating factors.

Negligence of the primary disease due to the absence of complicated signs and symptoms. Understanding these causative factors is crucial for preventing the progression of *Nidanarthakara roga* and underscores the significance of comprehensive and timely intervention in Ayurvedic practice.

Pathological consequences in *Nidanarthakara roga* involve the indulgence of etiological factors leading to the primary disease. This primary disease, in turn, triggers a cascade of pathological events, including the aggravation of *Dosha*, obstruction of *Srotamsi* (channels), depletion of *Dhatus* (tissues) due to inadequate nourishment associated

with obstructed channels, deterioration of metabolic activities, a diminished state of Agni (digestive fire), production of Ama (toxins), and accumulation of toxins. These health issues associated with the primary disease serve as precursors to the development of secondary diseases⁸⁻¹⁰.

A **common example** of *Nidanarthakara roga* is *Pratishyaya*, a primary disease that leads to the secondary disease *Kasa*. *Pratishyaya* arises from factors such as a poor lifestyle, smoking, and exposure to dust, cold, suppression of natural urges, and unhealthy dietary habits. If the *Dushta* (vitiated) condition of *Pratishyaya* is neglected and proper treatment is not administered, *Pratishyaya* can progress to *Kasa*. Avoidance of the causes of *Pratishyaya* and improper treatment may further contribute to the development of *Kasa*.

If *Pratishyaya* is not treated properly, it can lead to the vitiation of *Vata dosha* along with *Kapha*. In the later stages of *Pratishyaya*, the *Samprapti* (pathogenesis) of the disease increases, and patients may develop *Kasa*. The diminished immunity of *Pranavaha srotas* (respiratory passages) plays a crucial role in the development of *Kasa* from *Pratishyaya*. In the chronic stage, aggravated *Kasa* can lead to *Dhathu Kshaya*, associated with weight loss, destruction of alveolar walls, and ultimately progressing to *Kshaya*. The involvement of *Apana Vata* plays a significant role in the manifestation of *Kasa*.

Pratishyay acts as a primary disease for *Kasa*, which further evolves into *Kshaya*. This exemplifies how one disease can ultimately become a causative factor for another, illustrating the interconnectedness and progression observed in *Nidanarthakara roga*.

Kasa, characterized by a disturbance in gastric fire (Agni), is marked by the improper functioning of Agni, leading to the depletion of Dhatus, especially Rakta (blood). This results in the unavailability of Poshak rasa (nourishing essence), which is further diminished by the influence of Dosha prabhava (increase of Doshas). This complex interplay of factors contributes to the pathological consequences observed in Kasa and its subsequent progression to Kshaya. These consequences include the depletion of Dhatus, aggravation of Doshas, and a diminished state of immunity, among others.

Anuloma kshaya and Pratiloma kshaya are two patterns of Dhatus depletion associated with diseases. Anuloma kshaya involves the depletion of Dhatus in the direction

2 PUBLISHED BY IJOIMR <u>www.ijoimr.com</u>

of nourishment, while *Pratiloma kshaya* leads to the depletion of *Dhatus* in the direction opposite to their nourishment. Diseases associated with *Anuloma kshaya* can further lead to other conditions characterized by deprived body nourishment⁹⁻¹¹.

Understanding the intricate relationship between disturbed *Agni*, *Dhatus* depletion, and *Dosha* imbalances provides insight into the comprehensive impact of *Kasa* and its progression to *Kshaya*. This knowledge is crucial for devising effective treatment strategies in Ayurveda to restore balance, promote nourishment, and enhance overall well-being.

Examples of diseases caused by other illnesses, according to modern science, include:

- Diabetes may lead to renal disease.
- Obesity is associated with heart problems.
- Anxiety or mental health issues may contribute to hypertension.
- Kidney problems may cause skin manifestations.
- Diabetes can also result in retinopathy.
- Digestive ailments may impact immunity, leading to infections.

Common therapies for *Nidanarthakara roga* in *Ayurveda* encompass:

- Shuddha Chikitsa
- Dosha prashmana Chikitsa
- Balya Aoushadhi
- Rasayana therapy
- Panchkarma

CONCLUSION

In conclusion, major causative factors of diseases encompass poor lifestyle choices in *Ahara* (diet) and *Vihara* (daily regimen), genetic factors, environmental influences, and psychological factors. These factors can lead to health ailments, persisting over time and giving rise to additional diseases a phenomenon referred to as *Nidanarthakara roga* in *Ayurveda*. The initial disease is termed as the primary disease, while diseases occurring later as a consequence of the primary disease are considered secondary diseases. *Strotorodha* (blockage of channels), *Vishamagni* (irregular digestion), vitiation of *Doshas*, depletion of *Dhatus*, and the production of *Ama* are major pathological conditions associated with *Nidanarthakara roga*.

Examples such as renal disease associated with diabetes, heart problems, hypertension, and diabetic retinopathy are indicative of *Nidanarthakara roga* in the modern context. Managing such health problems involves early diagnosis, primary care, addressing the root cause of the disease, and avoiding causative factors. The therapeutic modalities in Ayurveda, including *Shuddha Chikitsa*, *Dosha prashmana Chikitsa*, *Balya Aoushadhi*, *Rasayana therapy*, and *Panchkarma*, are recommended for a comprehensive approach to treating *Nidanarthakara roga*.

REFERENCES

- 1. Ramakaran Sharma and Bhagavan Das, Charak samhita (English translation) Reprint edition Vol-2 Nidansthan Chapter 1, Varanasi, Chaukambha Sanskrit series office, 2015; 105.
- 2. Ramakaran Sharma and Bhagavan Das, Charak samhita (English translation) Reprint edition Vol-2 Nidansthan Chapter 8, Varanasi, Chaukambha Sanskrit series office, 2015; 106.
- 3. Ambikadatt Shastry, Suahrut samhita, 10th edition, voume 2 (uttaratantra chapter 25) Varanasi, Chaukambha Sanskrit samsthan, 2000; 120.
- **4.** Yadavji Trikamji editor charak samhita of charak, chikitsasthan, chapter no 8, verse no 39-40 reprinted, Varanasi, Chaukambha Sanskrit series, 2008; 461.
- Ramakaran Sharma and Bhagavan Das, Charak samhita (English translation) Reprint edition Vol-2 Nidansthan Chapter 8, Varanasi, Chaukambha Sanskrit series office, 2015; 106: 7.
- 6. Vaidya Yadavji Trikamji acharya editor, sushrut samhita of sushrut with nibhanda sangraha commentator of Dhalhanachary, nidansthan, chapter no 41, verse no 10, Varanasi, Chaukambha Orientalia, 2008; (20): 712.
- Ramkaran Sharma & Bhagavan Dash, Charaksamhita (Eng. Translation), Reprint edition, Vol. 2, (Nidansthan chp. 1), Varanasi, Chaukhambha Sanskrit Series office, 2015; 105.
- Ramkaran Sharma & Bhagavan Dash, Charak Samhita (Eng. Translation), Reprint edition, Vol. 2, (Nidansthan chp. 8), Varanasi, Chaukhambha Sanskrit Series office, 2015; 106.
- Sudarshan Shastri & Ydunandnopadhyaya, Madhavanidan Madhukoshavyakhya, twenty ninth edition, Vol 2, Varanasi, Chaukhambha Sanskrit Sansthan, 263.

PUBLISHED BY IJOIMR www.ijoimr.com

- **10.** K.R. Srikantha Murty, Sushrut Samhita (Eng. Translation), Reprint edition, Vol. 2, (uttartantra), Varanasi Chaukhambha orientalia, 2014; 7: 3.
- **11.** Ambikadatta Shastri, Sushrut Samhita, Tenth edition, Vol 2, (Uttartantra chp. 25), Varanasi, Chaukhambha Sanskrit Sansthan, 2000; 120.

PUBLISHED BY IJOIMR www.ijoimr.com