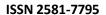


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Nidāna and Their Impact on Santarpaṇajanya Disorders: A Detailed Review of Prameha

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Abstract

A santarpaṇajanya vyādhi called prameha roga is identified by excessively frequent urination and has other meanings, i.e., wetting, emission, and excreting. There are so many reasons for the origin of this disease, but nidāna (hetu) is the prime factor from a diagnostic point of view. Hetu classified in various saṃhitā as āhāraja (dietary) and vihāraja (lifestyle). In āhāraja nidāna, consumption of certain food items leads to a vitiation of doṣa and dūṣya that disrupt glucose metabolism and contribute to prameha roga. Vihāraja nidāna involves lifestyle factors that further exacerbate the condition. These all-causative factors of disease are outlined with some variations across different texts, including Mādhava Nidāna, Caraka Saṃhitā, Suśruta Saṃhitā, and Aṣṭāṅga-Hṛdaya. These texts provide insights into the lifestyle, dietary, and emotional factors that contribute to the onset of Prameha roga, with some consensus and divergence among them. On the Morden perspective, in this review, a detailed classification of hetu has been described that are involved in Prameha roga samprāpti.

Introduction

Since long times, $\bar{A}yurveda$ has been a source of health and healing, dedicated to eliminating disease and protecting human life and well-being. It is written in $s\bar{u}tra$ form called $siddh\bar{a}nta$, or tried-and-true notions, and is the result of centuries of inquiry. In the various chapters of text, diseases are described according to their causal factors, and some ailments are described with those who have similar pathogenic mechanisms. According to those ailments some Ausadha yoga, medicated meals $(\bar{a}h\bar{a}ra)$, and lifestyle guidance $(vih\bar{a}ra)$ are suggested; these are intended to address prevalent disorders. Grossly, the illnesses are grouped according to their causes and treatment methods into two broad categories, samtarpanotha (due to over-



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nourishment) and apatarpanotha (due to lack of nourishment). Saṃtarpaṇoth Vyādhi encompasses a variety of ailments, and Prameha roga is one of them, and apatarpaṇa is a remedy for this condition that acts counterly. Caraka, Suśruta, and other ācārya provide comprehensive insights into the nature, causes, and treatment modalities of Prameha roga. They classified the disease as saṅtarpaṇajanya vyādhi and described various Nidana factors that are involved in the pathogenesis of the disease. Here an attempt is made to describe those factors in details that exist today and cause saṃtarpaṇa (overnourishment).

Material and Methods

Material: This paper draws on a variety of Samhita, Ayurvedic literature, Journals, and Online resources. Both historical and contemporary information has been compiled from various sources, which aids in defining the article's purpose and bolstering its authority.

Methodology: Traditional knowledge has been derived from Ayurvedic books and Samhitas, while journals and online resources have offered current and relevant research data. Because of the integrated use of several sources, this study is accurate and thorough.

Nidāna (Causative Factors) of *Prameha*: All are can be classified in āhāraja, vihāraja, mānsika and bīja doṣaja.

Āhāraja nidāna (Dietary Factors):

Table included the principal dietary causes contributing to Prameha described by various *acārya*:

Hetu/nidāna (causative	examples	Mādhav	Caraka	Suśruta	<i>A.H.</i>
factors)		nidāna			
1. Atidadhi sevana-	Dahi,rayta,kadi,dahi-fry,dahi	+	+	-	-
excessive use of curd	vada,lassi,srikhanda etc.				
and their derivatives.					
2. Gramyamaṃsātisevana	Meat of Ship,goat,buffalo,cow	+	+	-	-
- meat of domestic	etc.				
animals.					
3. Audakamaṃsa	Seafood-	+	+	-	-
atisevana- meat of	fish,crab,lobster,snails,squids,				

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aquatic animals.	crocodile				
4. Ānupamaṃsa atisevana- meat of aquatic and aquatic region animals.	red meat of wild pig, wild buffalo, wild cow,rhino,hippo etc.	+	+	-	+
5. Paya sevana- Excessive use of Milk	Milk, milk-shake, coffee, juices etc.	+	+	-	-
6. <i>Navānna sevana-</i> newly farmed cereals	Wheat, rice, maize, pulses etc.	+	+	-	+
7. Nava drava sevana- freshly made drinks.	Fresh juices, extract of edibles.	+	+	-	+
8. <i>Guḍa vikāra sevana</i> - products of jaggery and their derrivatives.	guda (jaggery) and food items prepared from jaggery	+	+	-	+
9. <i>Kaphavardhaka āhāra</i> sevana-kapha promoting regimen	ghee ,doṣa, idli, vada, dhokla, apoopa, halwa , Soup of uḍad and māṣa etc.	+	+	-	+
10. <i>Śīta dravya sevana-</i> takes cold foods and drinks.	frozen/refrigerated food, ice creams, cold drinks, canned fruit juices etc	+	+	+	-
11. Madhura āhāra- frequent and excessive intake of dietary items having sweet taste.	sweets, jam and jellies, cold drinks, preserved or canned fruits and fruit squashes, sugarcane juice chocolate, biscuits, fruits like grapes, banana, mango etc., vegetables like potato, sweet potato etc.	+	+	+	
12. Drava annapāna — frequent and excessive intake of liquid food items	Drinkables, juices, buttermilk, water etc.	-	+	+	-



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13. Medavardhaka dravya-	Fatty meat, various liver oils,	+	+	+	+
substances that	fried items, cheese,				
promoting fat	mayonnaise etc.				
deposition in body.					
14. Mūtravardhaka	Sugarcane juice, tea, coffee,	+	+	-	+
dravya-materials that	coconut water, cold drinks etc.				
increase amount of					
urine.					
15. Amla lavaṇa rasa	fermented products, pickles,	+	+	-	-
sevana- frequent and	panipuri, sour fruit juices,				
excessive intake of	sauces like tomato sauce,				
dietary items having	excess intake of preserved				
sour taste	foods, curd, buttermilk, lemon				
	juice, vinegar, alcohol,				
	squashes, cold drinks, etc.				
16. Tikta kaşayarasa	bitter melon, bitter gourd etc.	-	+	-	-
sevana- bitter and	, ,				
astringent substances	And intake of honey, herbs,				
48 TY 1 A	infusions like black tea, etc.				
17. Uṣṇa-katu rasa sevana-	intake of food such as hot	-	+	-	-
hot and pungent taste	water, hot tea, hot drinks				
substances	reheated food, etc				
	chilli, pepper, garlic, pickles,				
	chutneys, spicy curries, onion,				
40 71 1 11 -	cloves, mustard, etc.				
18. Ikşhu vikāra sevana-	sugarcane juice, white sugar,	+	-	-	-
frequent and excessive	guda (jaggery) etc.				
intake of dietary items					
made up of Ikshu					
(sugarcane)					
19. Snigdha dravya	excessively fried/oily foods	+	+	+	-
sevana- frequent and	such as puri, paratha, biriyani,				
excessive intake of	fried chicken, fried momos,				



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unctuous (fried/oily)	etc. sweets made of excess				
food items	ghee, such as kheer, rabadi,				
	etc. food prepared with				
	cheese, vanaspati ghee,				
	double-fried food items in				
	refined or processed oil, etc				
20. Gurū āhāra sevana-	pizza, cheese mixed foods,	+	+	-	-
frequent and excessive	bakery products, kidney				
intake of food items	beans, paneer, etc, food items				
which are heavy to	prepared mainly from black				
digest	gram such as dosa, idli, vada;				
	beef, pork; food prepared				
	from refined flour (maida).				
	regular intake of meat				
	products, intake of				
	milkshakes, kheer, etc.				
21. Picchila āhāra-	high-fat salad dressings that	+	+	-	-
frequent and excessive	use cream, mayonnaise,				
intake of slimy food	cheese etc., oily food, curd in				
items	different forms such as lassi.				

The chart lists the main dietary factors—*Mādhava*, *Caraka*, *Suśruta*, and *Aṣṭānga Hṛdaya*—that various Ayurvedic academics (*Ācāryas*) have identified as contributing to the development of *Prameha*, a group of urinary illnesses that includes diabetes. Many causal causes (*Hetu/Nidāna*) are listed, along with which of these are supported by the corresponding scriptures. Important elements like *Atidadhi sevana* (curd and their derivatives), *Gramyamaṃsātisevana* (domestic animal meat), *Audakamaṃsa* (meat of aquatic animals), and Ānupamaṃsa (meat of aquatic region animals) are recognised by *Mādhava and Caraka*, but not by *Suśruta or Aṣṭānga Hṛdaya*, with a few exceptions. Though *Suśruta and Aṣṭānga Hṛdaya* support them selectively, *Mādhava* and *Caraka* also extensively favour other variables including excessive consumption of milk, freshly farmed cereals, beverages, and jaggery goods. Most texts recognise foods that promote *kapha*, cold foods and drinks, sweet substances, and substances that promote fat deposition (*Medavardhaka dravya*). However, opinions on



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some foods, like bitter and astringent substances (*Tikta kaṣayarasa*) and hot, pungent tastes (*Uṣṇa-katu rasa*), differ. Several researchers also point to the ingestion of heavy or sticky foods and oleaginous compounds as contributory causes.

Vihāraja nidāna (Lifestyle Factors):

Āsya-sukhaṃ-	reduced physical	+	+	-	+
Sedentary and sitting life style	activity				
Svapna-sukham-sleeping over the	taking sleep at	+	+	-	+
prescribed norms ex. Sitting,	improper time or				
napping, day time sleep, improper	taking excessive sleep				
timing.	or taking less sleep or				
	taking day sleep				
Avyāyāma-abstaintion from		-	+	-	-
physical exercise.					
<i>ālasya-</i> lasttitude	being unwilling to	-	-	+	-
	work despite having				
	the ability to do work				
Divāsvapna- nonprescribed day		-	_	+	+
				,	,
sleep					
Rātrī jagaraṇa-night awareness		-	+	-	-

various lifestyle factors that contribute in *Prameha roga* recognized by different $\bar{a}c\bar{a}rya$. Sedentary lifestyle ($\bar{A}sya$ -sukham) and excessive or improper sleep (Svapna-sukham) are acknowledged by $M\bar{a}dhava$, Caraka, and $Ast\bar{a}nga$ Hrdaya, but not by $Su\acute{s}ruta$. Lack of physical exercise ($Avy\bar{a}y\bar{a}ma$) is noted only by Caraka, while laziness ($\bar{A}lasya$) is mentioned solely by $Su\acute{s}ruta$. Daytime sleep ($Div\bar{a}svapna$) is supported by $Su\acute{s}ruta$ and $Ast\bar{a}nga$ Hrdaya, whereas night awareness ($R\bar{a}tr\bar{t}$ jagarana) is referenced by Caraka. This comparison reveals differing



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views on lifestyle factors across the texts, with some being universally accepted and others selectively recognized.

 $B\bar{\imath}ja\ doṣa$ (Genetic and Hereditary Factors): Disorders brought on by flaws in the $b\bar{\imath}ja$ (genetic factor) or its $b\bar{\imath}ja\ bh\bar{a}g\bar{a}vyavya$ (constituent parts) are referred to as $b\bar{\imath}ja\ doṣaja\ vik\bar{a}ra$, or $kulaja\ vik\bar{a}ra$. Both $\bar{A}c\bar{a}rya\ Caraka$ and $Su\acute{s}ruta$ have addressed these genetic disorders resulting from anomalies in the reproductive material in their writings but $\bar{A}c\bar{a}rya\ m\bar{a}dhava$ and $v\bar{a}gbhatta$ not commented on it.

Mānsika bhāva (Psychological Factors):

Acintā- not do any thoughtful	Absence of mind	-	+	-	-
things.	activity.				
Krodha-anger	Excessive anger	-	+	-	-
<i>Śoka</i> -grief	death of loved ones,	-	+	-	-
	health issues,				
	relationship issues				

Certain psychological factors contributing to the development of *Prameha*, as mentioned by different $\bar{a}c\bar{a}rya$. *Caraka* is the only scholar who acknowledges the impact of psychological elements like the absence of thoughtful activities (*Acintā*), anger (*Krodha*), and grief (*Śoka*) in the development of the condition, while these factors are not mentioned by *Mādhava*, *Suśruta*, or *Aṣṭāṅga Ḥṛdaya*. *Caraka* places unique emphasis on the role of emotional and mental states.

Pathogenesis (saṃprāpti) of Prameha in Relation to Saṅtarpaṇajanya vyādhi:

The *saṃprāpti* of *Prameha* involves the aggravation of *doṣa* and *dhātu duṣti*, *lakṣaṇa utpatti*, which results from *Saṇtarpaṇa* (excessive nourishment).

Saṃprāpti follows the principle of the six stages of disease formation called ṣaḍ-kriyākāla. It begins with nidāna sevana, leading to the first stage, sañcaya, where indulgence in heavy and oily foods (gurū, snigdhadi āhāra) and lack of physical activity cause Kapha doṣa accumulation. As this Kapha transitions from its natural state to an excessive liquid form, it enters the second stage, prakopa, where the combined influence of the nidāna and duṣya causes rapid aggravation of Kapha, particularly in individuals predisposed to Kapha prakṛti. In the

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third stage, $pras\bar{a}ra$, this aggravated Kapha spreads throughout the body, settling in the bahuabaddha meda called $sth\bar{a}na$ $sam\acute{s}raya$ and vitiating other $dh\bar{a}tu$ like moisture (kleda) and muscle ($m\bar{a}msa$). As the disease progresses to vyakta, symptoms such as excessive urination and cloudy urine manifest, indicative of prameha roga. In the final stage, bheda, complications arise, making the disease chronic and difficult to treat as Kapha doṣa stabilizes and involves other duṣyas like $rakta, m\bar{a}msa$ $dh\bar{a}tu$, leading to an incurable state.

Samprāpti ghataka:-

Samprāpti ghaṭaka	Details
Doșa	Kapha predominant Tridoṣa
Duṣya	Rasa, Rakta, Māṃsa, Meda, Majjā, Śukra, Ojas (bodily tissues
	affected by the disease)
Agni	Jatharāgnimāndya
Srotas	Rasa, Rakta, Māṃsa, Meda, Majjā, Śukra
Srotoduști	Srotosanga Vimārgagamana, Atipravṛtti
Udbhava sthāna	Āmaśaya
Vyakta sthāna	Sarva śarīra / Avayava viśeṣa
Saṅcāra sthāna	Sarva śarīra
Swabhāva	Cirakārī / anuṣaṅgī
Sādhyāsādhyatā	Kṛchrasādhya

Result: The study highlights that the dietary (āhāraja) and lifestyle (vihāraja) factors are responsible for *Prameha roga*, which is directly linked to overnourishment (santarpaṇa) and are detailed in classical Ayurvedic texts such as Mādhava Nidāna, Caraka Samhitā, Suśruta Saṃhitā, and Aṣṭāṅga Hṛdaya. The overconsumption of curd, meat, dairy products, and kaphaincreasing foods, as well as sedentary lifestyles and improper sleep patterns, are the key factors. The research stresses that these nidāna disrupt the balance of doṣa (mainly kapha), duṣya (dhātu), and agni (digestive fire), leading to these metabolic disorders. By merging ancient wisdom with modern insights, it explains how these factors influence glucose metabolism and contribute to conditions like diabetes. The disease progression, based on the ṣaḍ-kriyākāla (six stages), shows how Prameha develops from early kapha accumulation to more advanced stages affecting various tissues, making treatment increasingly difficult. Early detection and



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intervention can improve outcomes, though managing chronic *Prameha* becomes challenging as the condition advances.

Conclusion: The review indicates that traditional text writings such as Mādhava Nidāna, Caraka Saṃhitā, Suśruta Saṃhitā, and Aṣṭāṅga Hṛdaya, Prameha roga, is a saṅtarpaṇajanya condition, mainly caused by food (āhāraja) and lifestyle (vihāraja) factors. A sedentary lifestyle, inadequate sleep, and excessive consumption of curd, meat, dairy, and kapha-promoting foods are the main causes of this illness. These elements cause an imbalance in doṣa, duṣya, and agni, which interferes with the metabolism of glucose and causes conditions like diabetes mellitus. Although Prameha is more difficult to cure in its advanced phases as it advances through the ṣaḍ-kriyākāla (six stages of illness development), the study emphasises the value of early intervention in managing the condition.

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