Pratyatma Lakshana: A Diagnostic Pathological Report

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Abstract

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The meticulous diagnoses of the disease in Ayurveda completely rely on five means of diagnosis (nidanapanchaka), out of that lakshana (clinical features) plays an important role. These are manifested as the result of Gunata (qualitative) and Dravyata (quantitative) vitiation of various factors like dosha, dushya, srotas, agni, prakruti, bala and kala etc, involved in the process of samprapti (pathogenesis). Clinical features are occurred in different stages of samprapti, in doshadushyasamurchana avasta called as poorvarupa (premonitory clinical feature) and some manifested after the completion of doshadushyasamurchana called as roopa (clinical features) among these some are unique and specific to particular disease and these are called as pratyatma lakshana (cardinal features), for e.g. dehamanasantapa of jwara, malasarana of atisara and netratwakpanduta of pandu etc, understanding and diagnosis of srotogatavyadhis (systemic diseases) remains a challenging even after knowing the clinical features, because a single clinical feature of particular disease occur in more than one disease of same srotas or other srotas, but pratyatma lakshanas are unique to particular disease so it carries a great value in the accurate and final diagnosis of the disease along with other common features manifested as poorvarupa and roopa of srotogatavyadhis. By considering uniqueness of pratyatma lakshana the present work is taken into consideration.

Keywords: Pratyatma Lakshana; Roopa; Poorvarupa; Doshadushyasamurchana; Clinical Features; Diagnosis.

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Introduction

Among three principle objectives of Ayurveda, Aturasyavikara (Disease of the patient) is considered as most important in the point of Roganidana (Clinico-Diagnostic Pathology), to overcome the Aturasyavikara, Acharyas mentioned various diagnostic tool like nidanapanchaka and etc. among these pratyatma lakshanas which are manifested

either during the stage of poorvarupa or roopa are considered as Atmalakshana (cardinal/unique) of a particular disease and unique diagnostic pathological report of Ayurveda. Clinically most of the time poorvarupa and rupa are alike in various diseases of Doshapradoshaja, Dhatupradoshaja and Srotopradoshaja, where as pratyatma lakshanas are specific to specific disease even when different factors involved in the manifestation of various diseases are same, Because these are manifested as



the result of uniqueness of Khavaigunya (Suitable defected place to produce disease within the body/ Site of Pathology) and Samprapti of a particular disease. So it's time to explore the pratyatma lakshanas are unique diagnostic methods of ayurveda in relation to pathology.

Diagnostic Glance on Lakshana

After critical analysis of concept of lakshana as explained by various Acharyas in relation to diagnostic approach towards a disease, probably we can drawn the following conclusion for the sake of accurate diagnosis and to explore the concept of Roganidana in the light of clinical and pathological

diagnostic report.

Pratyatma Lakshana (Diagnostic Pathological Report)

To explore the concept of pratyatma lakshana in the light of pathological diagnostic report only those unique clinical features are considered as pratyatma lakshana of the particular disease as these are directly Indicating the nature of Khavaigunya (Pathology) among the common clinical features which are explained by various acharyas. For the differential diagnosis of the diseases on has to consider Samanyalakshanas along with Pratyatma Lakshana.

Table 1: Showing Probable Diagnostic Role of Lakshana

Lakshanas	Role in Diagnosis
Poorvarupa	Diagnostic Clinical Report in premonitory stage of the disease
Roopa	Diagnostic Clinical Report in manifested stage of the disease
Pratyatma	Diagnostic Pathological Report

Table 2: Showing Pratyatma lakshana (Diagnostic Pathological Finding) of Various Diseases [1,2,3,4]

Pratyatma Lakshana	Diagnosis
Shabdayuktauchwasanichwasa	Mahashwasa
Deerghashwasa, Urdhwadrusti	Urdhwashwasa
Vicchinnashwasa, Raktaikalochana	Chinnashwasa
Гееvravegashwasa, Gurguraka, Vimokshnate muhoortam labate sukham, Aaseenolabate sukham	Tamakashwasa
Shushkakasa and alpakapha, Jeernannevega	Vatajakasa
Peetanishteevana, Pratatamkaasamaancha jyoteeshmati	Pittajakasa
Bahula, Madhura, Snigdha, Ghana kapha	Kaphajakasa
Shushkakasa followed by Sashonitakapha, Paravata evakoojana	Kshatajakasa
Durghanda, Hareeta, Raktayukta, puyayuktakapha, Shreemadarshanalochana, Bahuvashi durbalakrusha	Kshayajakasa
Ekadasha Roopa	Rajayakshma
Uroruk followed by kasa and Raktavamana	Urakshata
Daranasphotanvat shoola in Hrudayapradesha	Vatajahrudroga
Dahachoshavat shoola in Hrudayapradesha followed by Hrudayaklama	Pittajahrudroga
Mandavedana, Hrudayasthabdhata in Hrudayapradesha followed by Hrudayastimita	Kaphajahrudroga
Teevravedana in Hrudayapradesha followed by Kandu	Krimijahrudroga
Alpaalpa muhurmuhu sashabdha malanisarna	Vatajatisara
Peeta/neela/lohita malanisarna	Pittajatisara
Tantula muhurmuhu savedana malanisarana	Kaphajatisara
Sarakta malanisarana	Raktajatisara
Bahukaphaalpamalanisarana	Pravahika
Suchivatatoda followed by Chardhi and Atisara	Visuchika
Kukshiadmanaatopa followed by padashopha, Gamanashakti	Udararoga
Kukshi udakapoornadruti sparsha	Jalodara
Atishrustamatibadha/Drava malanisarana	Grahniroga
Atishrustamatibadha/Drava malanisarana followed by Jeerneadhmanam	Vatajagrahni
Atishrustamatibadha/Drava malanisarana followed by Hruthkantadaha	Pittajagrahni
Atishrustamatibadha/Drava malanisarana followed by Akrushasyadurbala	Kaphajagrahni
Galajjalaghateedwani malasarana followed by Parshwa shoola	Ghatiyantragrahni
Samsparshaparipindita Granti in between Hrudaya and naabhi pradesha	Gulma

Samsparshaparipindita Granti followed by Jeerneabhadhikam bhukte samaupaiti Vatajagulma Samsparshaparipindita Granti followed by Sparshasahtwam and jeerneshoolam Pittajagulma Samsparshaparipindita Granti followed by Staimitya Kaphajagulma Avipaka followed by Tiktamlaudgar, Hruthkantadaha, klama, utklesha Amlapitta Avipaka followed by jeeryate shoolam Parinamashoola Avipaka followed by Jeernejeeryateajeerne Shoolam Annadravashoola Dehamanasantapa Iwara Vatajajwara Vishamavegajwara, vepatu Tikshanavegajwara, Mukhapaka Pittajajwara Mandavegajwara, sthaimitya Kaphajajwara Kshenedaha kshenesheeta followed by asthisandishiroruja, kantakujana, shirasolotana Sannipatajajwara Vishama vega and kala jwara Vishamajwara Netratwakpanduta followed by Pindikodwestana, angasada, Hrudayaspandana Pandu Stabdha and Guruta in Sandhi followed by Angamardha, shoonagata, Avipaka Amavata Utsedhasamhatashopha followed by Prashamyati praunnmati prapeedita, Chala Vatajashotha Utsedhasamhatashopha followed by Bhrushadahapaka Pittajashotha Utsedhasamhatashopha followed by Prashamonipeedita, guru, sthira Kpahajashotha Utsedhasamhatashopha followed by avalambhi Vishajashotha Pittadhushita raktasarana Raktapitta Haridra netratwaknakha followed by Raktapeeta shakrutmutra Koshtashakhashraya kamala Haridra netratwaknakha followed by Shwetashakrutmutra Shakhashraya kamala Haridra netratwaknakha followed by Krushnashakrutmutra, kukshishotha Kumbhakamala Haridra netratwaknakha followed by Nityamandajwara, Strishuaharsha Haleemaka Prabhutaavilamutrata followed by Shadpatapippalikabhicha Prameha Twakvaivarnya followed by vedana/srava/Kandu etc Kustha Twakshweta followed by Asravi/Avedana Shwitrakushta Vatapoornadrutisparsha shotha in Sandhi Sandhigatavata Hatwaekapaksha Pakshagata Hatwaekapaksha followed by vakranasabhrulalatakshi Ardhita Shoola in Sphikkatiprustaurujaanujanghapadam kramath Gradrasi Sandhishoola followed by sweda, sparshajnatwam Vatarakta Talapratyanguli Vedana followed by Karmakshyakari Vishvachi

Conclusion

Pratyatma lakshana are Atmalakshana of a particular disease. After critical analysis of all clinical features in relation to various Doshapradoshaja, Dhatupradoshaja and srotopradoshajavyadhis, the poorvarupa and rupa can be considered as Diagnostic Clinical Report of Ayurveda. Whereas pratyatma lakshanas can be considered as Diagnostic Pathological Report of Ayurveda as these are indictor of uniqueness of Khavaigunya and Samprapti even when different factors involved in the process of various disease manifestations are alike.

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