

A Conceptual Study of Essential Hypertension in View of its Nidanpanchak According to Ayurved

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Abstract

Hypertension is one of the widespread disorder came across in practice. It is being a kind of epidemic in India due to luxurious and pro-western life style. Increased socioeconomic stress and strain, irregular dietary habits and competitive profit motivated, industrialized way of life. It is common, asymptomatic, readily detectable, usually easily treatable and often leading to lethal complication if left untreated. Hence, it is one among the leading life threatening disease now days. The WHO rates hypertension as one of the most important causes of premature death worldwide. It is estimated that around 26% of overall population worldwide and 29.8% in India, is affected by hypertension. Though, Ayurvedic texts provides no clear reference to Essential Hypertension, here is an effort to understand the possible diagnosis means its nidanpanchak which include its Hetu or Nidana (causes), Purvarupa (symptoms), Rupa (signs), Upshaya (examination methods), Samprapti (pathogenesis). In terms of Ayurveda, there are many ways of diagnosis in Ayurveda, one of them is Nidanpanchak. It is one of the most important methods of diagnose of disease, its causes and prognosis. For treatment, diagnosis is important, in this article Nidanpanchak of hypertension is explained thoroughly.

Keywords: Ayurveda, Nidanpanchak, Purvroop, Upshaya, Samprapti, Essential hypertension

Introduction

Ayurveda is a science of life. Holistic Approach of Ayurveda is regarded to help for the upliftment of society by providing a disease free and healthy environment. Though modern Hypertensive drugs are effective, but associated with side effect and long term treatment make people feel burden. So the whole world is looking forward as hope for alternative remedies. In this context Ayurveda is the therapy of choice, so it is the need of time to understand Essential hypertension in terms nidanpanchak of Ayurveda. Essential hypertension is one of the most important modifiable risk factors for coronary heart disease in western and Asian population. Studies from India have shown an increasing trend in the prevalence of essential hypertension. Community surveys have documented that in a period of three to six decades, prevalence of essential hypertension has increased about 30 times among urban dwellers and by about 10 times among the rural inhabitants. Ayurveda is a traditional medicine science. It consists of many ways to diagnose disease. One of them is Nidanpanchak. The diagnosis of disease in Ayurveda depends on the etiological factors of the disease. Nidanpanchak is consist of five sub types which are Nidan (causes),

Purvroop (symptoms), Roop (signs), Upshaya (examination methods) and Samprati (pathogenesis). Though, Ayurvedic texts provides no straight reference to Essential hypertension, here is an effort to understand the possible pathogenesis in terms of involved factors like Dosha, Dushya etc. For understand essential hypertension in terms of Ayurveda the five aspects i.e. Nidan, Purvarupa, Rupa, and Samprapti and Upshaya are main important things. Understanding the essential hypertension, in the light of Tridoshas principles of Ayurveda it as a challengeable melody so present project was carried out.

Nidana or hetu of essential hypertension

Nidana is the causative factors of disease. It is defined as factor which causes diseases. As mentioned earlier essential hypertension is the name given to the type in which no exact cause can be found. But in recent years, this view has changed because some factors have been found which tends to increase blood pressure i.e. genetic, dietary, stress etc., has not been explained as such in Ayurvedic texts so; its Nidana factors are also not incorporated. According to basic Ayurvedic fundamentals each disease is an outcome of vitiation of three, somatic Dosas and two Mansik Dosas. After vitiation, these Dosas interacts with each other and influences various organs of body and produce disease. This is

true in the case of essential hypertension also in this disease individual dosha prakopa karanas can aggravate the doshas and causes the disease. When the dosha's become aggravated through food, lifestyle or attitude, the nature of that substance leads to an increase of similar qualities inherent in the body and mind. The accumulation of these qualities according to Ayurveda is first stage of disease

The following pre-disposing factors have the strongest association with Essential hypertension

(1) Bijadushti (kulaj itihās)

Charaka has described the genetic influence in diseases. At the time of the conception, if the Bija (semen and ovum), Bijabhaga (chromosomes) or Bijabhaga avayava (genes) get vitiated; it is likely to travel in subsequent generations. (Cha. Sha. 3/17). Essential hypertension is more frequent in some communities and families than others. Some have suggested that the Essential hypertension is inherited.

(2) Vaya (Age):

In vriddavasta vata is the predominant dosha. There is high predisposition to develop vataja vikaras in the old age. Therefore Vaya at which it usually occurs between 40 years to 60 years. The peak incidence of the disease occurs between 50 to 60 years.

(3) Samhanana (Constitution): -

Constitution means built up of the body. They are of two types – Krisha (asthenic) and sthula (obese). In sthula person blood pressure is usually high. Sushruta has mentioned medoroga leads to vata vikara. Commenting on above verse Dalhana explained that vatavikara is produced due to medvrita marga. Apart from this in astaninditiya adhyaya of Charaka, he has described the complications of sthoulya. Here the apakva medas when deposited in rasavaha srotas may lead to dhamani pratichaya (atherosclerosis), which is the main factor responsible for essential hypertension.

(4) Atilavan seven

Lavan rasa is Jala and Agni Mahabhuta Pradhan. (Cha.su.10/1) and it is pittaprakopak. In ashtanga sangraha, lavana is said to increase shareera kleda leading to increased cardiac output.

(5) Atichinta (stress)

In Ayurveda sthana of manas is said to be related to Shira and Hridaya, which are in turn

related to prana and vyana vayu respectively, which have influence over function of maintaining the blood pressure. So aggravated vata will initiate the process of essential hypertension.

(6) Avyam and ativyam

Lack of physical exercise for prolonged period may result in agnimandya. Hence produce apakva ama rasa, which deposits in vahinis and produce dhamaniupalepa or pratichaya. On the other hand, over exercise leads to vata prakopa, leading to aggravation of vataja bal vishepana mince increase in blood pressure.

(7) Ratrijagran:

Ignoring normal sleep time of night aggravates Vata and Pitta, which increases the main culprit of U.R.C. Sleep causes a fall of blood pressure. However, sleep associated with nightmare, dreams may cause rise of blood pressure.

(8) Dhumrapana (Smoking):

In Ayurveda, tobacco is derived from a plant Tamra (nicotiana tobacum), which has the madaka effect and has property to aggravate pitta and rakta. It also causes bhrama and mada. Apart from this, smoking causes rukshata in siras and its stabhak effect causes narrowing of the lumen, thus all together resulting in to essential hypertension

(9) Madyapana (Alcohol intake):

In Madatyaya chapter, Acharya Charaka has explained that, when madya is taken in large quantity, it shall affect channels of rasa (rasavaha srotas) madya affects dosha, dhatu, srotas and srotomula of rasavaha srotas (circulatory system) leading to essential hypertension.

Purvarupa

The premonitory symptoms appear before the appearances of the disease are known as puevarupa. (Cha.ni.1/8) Puvarupavastha is the fourth stage of Kriya kala. In this stage doshas get logged atkhavigunya place and produced Dosha - Dushya Sammurachana. It is already said that Uchharaktachpa is a vata pradhan, Tridoshaj Vyadhi. As we know that Purvarupa of Vata Vyadhi are Avyakta. (cha. chi. 28/19) Most of the hypertensive patients are Asymptomatic or present with subjective symptoms, like headache, vertigo etc. Many patients are diagnosed at routine check-up or other health

problems. So the premonitory symptoms of essential hypertension are indistinct

Roop (signs) :

These are signs of the disease, which are very important in the diagnosis for the disease. The signs of the disease are always seen after the aggravation of the Doshas and formation of the disease.

(1) Persistent rise in blood pressure:

In patients where systolic Blood pressure (SBP) of 140 mmHg and more and Diastolic Blood pressure of 90 mmHg and more are define as hypertensive. For this it is necessary to measurement Blood pressure several weeks and confirms raised level of blood pressure. Rasa-Rakta Samvahana in whole body supporting and nourishing elements of body. Vyanvayu is responsible for Rasa-RaktaSamvahan by its Yugpat gati (Ch.chi.15) Vitiated vayu cause sankoch of Dhamnies (Vaso Constriction) by virtue of its Ruksha, Sheet and khara guna. (Cha. su. 1/56) and Snigdha, Picchillaproperties of Kapha result decreasing in the elasticity- vessels. Dhamni Kathinya, Dhamni Sankoch and Dhamani Uplep are lead to Srotorodha. Hence leads to forcible (blood flow in Dhamni vessels) which is called as a high blood pressure. According to Acharya Sharangadhara, Venous – Return depends on the normal-functioning of Saman-Vayu. So vitiated

Saman Vata may impair the cardiac output mechanism leading the normal circulation to raised arterial pressure. Thus Vata dosha is mainly responsible for essential hypertension.

(2) Shira - shool:

Chakrapani emphasized that Rakta is the main dushya in all type of Shiro Roga. Thus Shirashool caused by agrevated Vata Dosha, Raktadushya which lead srotorodha in Sirastha Rasa - Rakta vahini. Thus headache occurs.

(3) Bhrama:

Acharya Charak concluded Bhrama in Vata nantamaj Vikara (Vata Vyadhi) (Cha. su. 20/11) Vata, Pitta and Raja are responsible for Bhrama. (Su. sha. 4/56) It can be compared with wrangling sensation. When chala guna of Vata increase, then patient feel that he himself and the external objects both are revolving.

(4) Hird - Drava (Palpitation):

Hird - Drava means gati of Hariday. Hrid - dravatva Hrid - spandana or Hrid ghattanan is known as palpitation. It is clearly mentioned by Acharya Gangadhar in Maharogadhyay. (Cha. su. 20)

Rasa Dhatu kshya produce Hrid - dravatva and kshya of Dhatu is closely related with the vitiataion of Vata.

(5) Swaskrichhata (Dyspnoea):

Ayas janaya swas is one of the symptoms of kshudraswas. It is mainly occur by vata prakopa. Vitiated vyan vata give impact on Pranavaha srotos.

(6) Klama (Fatigue):-

Klama is described in Shonitaj roga (Cha.su.24/14) Karmatah Dosha dusti. create sroto dusti which results in weekness without any exertion.

(7) Krodha - prachurya (mental irritability):

Krodha-prachurya corresponds to mental irritability or range with which karmatah Vriddhi of sadhaka Pitta (Cha. su. 12/11) Pitta prakopa lead to Rakta dushti. Thus Sadhak Pitta, Raja and Tams doshas stands for mental irritability and they leads to Monovaha sroto dushti, which results Krodha prachurya in essential hypertension.

(8) Nindranasha (Insomnia):

Acharya Sushruta emphasized that Vata, Pitta Doshas and Manas santap will lead to Nindra - nasha. (Su. sha. 4/42)

(9) Raktasrava (epistaxis):

According to Ayurveda Raktastrava may occur only when Rakta is vitiated with Pitta.

(10) Prabhut Mutrata and Ratri Mutrata (Polyurea and nocturnal polyurea).

Kapha and Meda are responsible for Prabhut and Ratri – Mutrata. When kapha and meda is hamper, sroto dhusti takes place and this Dosha – Dushya Sammurchnana results prabhuta mutrata and Ratri Mutrata (Cha. ni. 1/56)

(11) Pada-shohta (Pedal- edema):

Vitiated Vayu debase the Kapha Rakta, Pitta when goes to peripheral Siras, which surplus Kapha Rakta and Pitta obstruct the normal passage of Vayu. The restrained Vayu create shohta at the site of obstruction

Samprapti (Pathogenesis):

Samprapti is explained in Samhita as Dosha Dushya get vitiated and get aggravated and produce

disease and that disease is known by Samprapti. The process by which disease produce is known as Samprapti. This can be taken as stages through which disease evolve. In Samprapti the evolution of the disease from the starting point as Nidan till the investigations can be considered.

Samprapti of essential hypertension

Heredity, Age, Ati lavan seven, Manovikara, Ratrijagarana etc. Nidan seven are give impact on Doshas, Dushyas and Mana, Hridaya, Oja. Because of this Nidan seven Pranvayu Apanvayu, Samanvayu, Vyanvayu, Sadhak Pitta, Avlambak kapha, Raja and Tama Doshas are getting vitiation. These vitiated Dosh will produce Agnimadhy and Dhatu dushti karak hetu. Heredity will produce Khavigunya. This Agni Madhya will produce Sama rasa. When this Sama rasa will contact with the Prakrit Rasadi Dhatu than Dosh-Dushya Sammurchana takes place and Khavigunya leading to Strotorodh (Rasavaha Strotorodha). Thus, Sama rasa and Mala rupa kapha leads to srotouplep (In Wall of Dhamani) and reduce srotovivar by its Singdha, picchil guna. Sarnat sira is described in our classis. Saran is the karam of Prakrut vata and Vyanvayu is perfuming its Rasa-Rakta Vikeshpan karma normally. Because of nidan seven vitiated vata dosha will produced kathinya and sankoch in uplifts srotas by its ruksha, khara etc. guna, which resulting of strotovivar. This is a 'Sthansamsrayavavastha'. Due to srotovivar this narrowing path way occur avarodh. Because of this avarodh vyanvayu has to perform its Rasa-Rakta Vikshepan kriya will be forcefully by the chala guna of vata, which resulting Vyan vata vikriti. Thus forcefully Vikshepan karam of vyanvayu will gives rice to pressure on the wall of Dhamni thus increases in blood pressure occur. It is a stage of Vyavaktavstha.

Samprapthi Ghatakas :

1. Dosh - Shariraka-vata- Vyana, Prana, Udana, Pitta- Pachaka, Sadhaka, Kapha – Avalambaka, Manasika - Rajas, Tamas
2. Dushya - Rasa, Rakta, Mamsa, Medho, Majja
3. Sanchara stana - Hridayam, sarva shariram
4. Agni - jataragni, dhatwagni
5. Ama-Jataragnimandyajanya, dhatwagnimandyajanya
6. Srotas - Rasavaha, Raktavaha, Manovaha

7. Srotodushti prakara - Atipravritti, Sangam
8. Adhistana - Hridaya, Dhamanis
9. Udbhava stana- Amashaya, Pakwashaya
10. Rogamarga - Madhyama, Bahya
11. Vyaktha stanam- Sarvadaihika

Upshaya (examination method)

The disease whose manifestation, symptoms, signs doesn't clear the production of disease and from which Doshas and Dushya it has been produced in that diseases Upshaya (examination methods) are used to rule out the disease. Treatment used drugs, lifestyle, diet is also considered in Upshaya. Panchakol churna, Brihatvat Chintamani Rasa, Triphaladi churna , Avipatkar Churna, Jatamansi powder, Medhya Rasayana, Rasona, Pipli, Brahmi Churna, Marich & Aswagandha churna, Sarpadadha Churna, Dashmool Quath, Gandharavahatadi Quath, Mansyadi Quath, Punarnavadi Quath.this gives upashaya in essential hypertension

Discussion

Nidana -

vata pitta prakopak Aahar vihar, atilavan sevan, atichinta, avyam or ativyam, ratrijagan, dhurpan, madyapan these are main hetus of essential hypertension. For diagnostic aspect if we know these Nidana or hetu of essential hypertension in patients then we know which dosha was aggravated and we treat essential hypertension accordingly and Acharya Susruta has explained that with the change of diet, lifestyle that is Nidan parivarjana is the best way of treatment.

Puravroop -

Most of the hypertensive patients are Asymptomatic or present with subjective symptoms, like headache, vertigo etc. Many patients are diagnosed at routine check-up or other health problems. So the premonitory symptoms of essential hypertension are indistinct.

Roop -

Persistent rise in loodpressure, shirashul, bhrama, hriddrava, klam, krodhprachrta, nidranasha, raktastrav, prabhutnutrata, padshotha these are main symptoms of essential hypertension and these symptoms are useful for symptomatic treatment of essential hypertension

Samprapti-**Samprapthi Ghatakas:**

1. Dasha - Shariraka -vata- Vyana, Prana, Udana, Pitta- Pachaka, Sadhaka, Kapha – Avalambaka, Manasika- Rajas, Tamas
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9. Udbhava stana - Amashaya, Pakwashaya
10. Rogamarga - Madhyama, Bahya
11. Vyaktha stanam - Sarvadaihik It will help to known the stages of formation of disease in which they can be cure and if we break this samprapti essential hypertension is cure accordingly.

Thoroughly knowledge of Nidanpanchak of essential hypertension is very useful for diagnosis and treatment of essential hypertension

Conclusion

Nidanpanchak is main important diagnostic tools in Ayurveda. Articles show that if we used this nidanpanchak in a proper method this will be useful in diagnostic, prognosis of the essential hypertension. After the proper use of these Nidanpanchak the essential hypertension manifestation can be stopped and can be cure easily. By this Nidanpanchak we will know all stages of essential hypertension and by that knowing of stages of essential hypertension the disease formation can be stopped in any stage. If Nidanpanchak is used in well manner complications which is very often in essential hypertension can be avoided easily. So proper knowledge of Nidanpanchak i.e. Rog Nidan approach is essential for diagnosis and treatment of essential hypertension.

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