



A Critical Review on Shatkriyakaal and Samprapti of Prameha Vyadhi.

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ABSTRACT:

Prameha Roga is one of the major diseases described in *Ayurveda* since *vedic* periods. Prevalence of diabetes is increasing day by day throughout the world where India has been projected by the W.H.O. as the country with the fastest growing population of the diabetics. *Prameha* is a disease occurring mainly due to *Agnimandhya* and can be categorised under metabolic syndrome. For understanding disease and its management in better way, ayurveda explained many unique concepts. *Shatkriya kaal* is one of them. It is the phenomenon which is used to understand the disease in such a detail way from its starting to end. So, for a good physician and complete cure of a disease, it is necessary to know these six stages of *shatkriya kaal*. Thus, *Shatkriyakaal* is very helpful in diagnosis, Prognosis, Treatment and also inhibit the complete manifestation of disease. Therefore, this review article attempts to explain the concept of *Shatkriyakaal* of *Prameha vyadhi*.

Keywords: *Shatkriya kaal, Prameha, Samprapti*.

Introduction:

Ayurveda is believed to be the oldest and finest medical science of human civilization. it is a science of life as it helps to keep human healthy and disease free with its wide array of principles and formulations. It follows a two-fold method of treatment, which is preventive and curative. The art of understanding a disease and its stage of pathogenesis was probably explained for the first time in ayurveda by *acharya Sushruta* in a very comprehensive manner.ⁱ Early diagnosis of any disease in its budding stages can help a physician to take remedial action and also reverse the imbalances at an early stage of manifestation, thus preventing the emergence of the full-blown disease. The concept of *Shatkriya kaal* is an objective approach of ayurveda which gives an idea about the consecutive stages of *prameha* disease and accordingly preventive measures can be described to overcome future complication of *prameha*.

According to *Sushruta*, *Prameha* is characterized by a peculiar feature:

Pra means excess of urine in both frequency and volume. *Prameha*, thus, becomes self-explanatory and holds the twin meaning of “*prabhut-mutrata*” or excessive urination and *Avil-mutrata* or “turbid urine”.ⁱⁱ Along with this there are many more symptoms given in classics like increased thirst levels, dryness of throat, fatigue, dizziness in body etc.ⁱⁱⁱ

SAMPRAPTI:

The detailed description of all the morbid process that takes place in the manifestation of disease is called *Samprapti* or Pathogenesis. The complete knowledge of *Samprapti* is useful in the prognosis of the disease because treatment measures (*Samprapti Vighatana*) changes according to the different stages in the *Samprapti* of a particular disease.

Samprapti of a disease completed under six stages called as *Shatakriyakaal* by *Sushruta*. Vitiating of *doshas* occurs due to continuous indulgence of etiological factors which involves further vitiation of *dushayas*, so that *Dosha-Dushyasammurchhana* occurs at *kha-Vaigunya* which ultimately leads to *Vyadhijanama*.^{iv}

Samanaya and *Vishista Nidana* described by *Charaka* in *Nidana* and *Chikitsa Sthana*; He has also described *Samprati* of *Prameha* in a detailed manner i.e. *Samanaya Samprapti* and *Vishesha Samprapti*.^v

Before going towards the detailed discussion of *Samprapti* on the basis of *Samanaya* and *Vishesha* aspects; firstly, it is necessary to know about the concept of three important factors which are involved mainly in to form *samprapti* of *Prameha*. This concept called as “*Vikara Vighata Bhava Abhava Visheshha*” which is explained by *Charakacharya* in *Nidana Sthana*.^{vi}

These three factors namely *Nidana*, *Dosha*, *Dushya*; when strongly co-relate with each other, then they producing disease in “*Vikara Vighata Abhava*”) and not able to produce a *Vyadhi* when there is condition of “*Vikara Vighata Bhava*” is present. *Prabala Rogoutpatti* with all *Lakshanas* occurs when there is proper and strong *Anubandha* of these three factors and vice-versa. This *Anubandha* can be understood by following chart: -

Table- Concept of *Vikara Vighata Bhava Abhava Vishesh*

<i>Bhavas</i>	<i>Anubandha</i>		<i>Ananubanda</i>
	<i>Prabala Anubandha</i>	<i>Abala Anubandha</i>	
<i>Nidana+</i> <i>Dosha+</i> <i>Dushya</i>	<i>Rogotpatti Nature</i> <i>Sheegra</i> <i>Balishta</i> <i>Sarvalakshana</i>	<i>Rogotpatti Nature</i> <i>Chira</i> <i>Durbala</i> <i>Alpa-Lakshana</i>	<i>Roga Anutpatti</i>

Samanya Samprapti of Prameha:

Samprapti can be elaborately explained on the basis of *Shatkriyakala*. The process commences from *Nidana Sevana*.

1. *Sanchaya (Stage of accumulation):*

Due to over indulgence in etiological factors, *Kapha dosha* gets aggravated and accumulated in *Bahudravatva* state as in *Sanchaya Avastha*.^{vii} In *prakrita-avastha*, *Kapha* founds to be in *Baddha* form i.e. in dense or binded; but due to excessive increment of *Kapha dosha* due to *Nidan Sevana*, its *Baddha* form changes to *abaddha* form which contribute accumulation of *Kapha* as in *Dravva* state as explained by *Chakrapani* in his commentary.^{viii}

2. *Prakopa (Stage of aggravation):*

Favourable combination of three factors i.e. *Nidana*, *Dosha* and *Dushya* occur in such a precise way that they cause the further vitiation of ‘*Bahu*’ and ‘*Abaddha*’ *Kapha* also called as “*Bahudravatva*”.^{ix}

3. *Prasar (Stage of spread):*

Due to pre-existing *Sharir Shaithilya*, the *Kapha* accumulated in the previous stage spreads all over the body. *Sharir Shaithilya* is also one of the favourable factors for *Nidana* to vitiate *Dosha*.^x

4. *Sthana Samshraya (Stage of localization):*

While spreading all over the body; first of all, *Vikrita Kapha* has tended to unite with *Bahu-Abaddha Meda* because of having similar features and allows *meda-dushti*. *Kapha* does it so because it is in the *Vikrita* Condition. This combination of *Vikrita Kapha* and *Vitiated Meda* establish a relation between *Shariraja Kleda* and *Mamsa*, which are already increased in large quantity, prior to vitiation of *Kapha*.^{xi}

This stage is very important because *purvarupa*'s are tending to be manifested in this. Therefore, to stop further progression of the disease, proper evaluation should be done at this stage.

5. *Vyakta (Stage of manifestation):*

At this condition, two types of manifestation occur:

1. **Eruption of *Puti Mamsa Pidika*** – Combination of *Vitiated Kapha* and *Meda* with *Mamsa Dhatu* leads to the eruption of *Puti Mamsa Pidika* like *Sharavika*, *Kachapika* etc. due to *Mamsa Dhatu* vitiation.^{xii}
2. ***Mootravaha Srotodushti* due to *Sharira Kleda Dushti*** – When this *Vitiated Kapha* and *Meda* combine with *Sharira Kleda*, then *Kleda* changes into *Mootra*. The *vitiated Kapha* impedes the openings of *Mootravaha Srotas*, which are already filled with *vitiated Meda* and *Kleda*, thus producing the disease *Prameha*.^{xiii}
6. ***Bheda (Stage of differentiation):***

In this stage various complications of the disease manifest and the disease progresses towards *Asadyata*. Due to *Prakriti* and *Vikriti* nature of *Dosha-Dushya*, the *Prameha* progresses to stable (*Sthairya*) as well as incurable (*Asadhya*) state.^{xiv}

Here *Chakrapani* has explained the term *Prakriti* and *Vikriti*, here *Prakriti* stands for normal *guna* of *Kapha*. When *Kapha* interacts with *Dushya* having the same qualities as that of *Kapha* like *Meda*, *Vasa Shukra* then the *Vyadhi* become *Sadhya* (due to *Samanaya Chikitsa Upakrama*) and if interacts with just opposite properties of *Dushya* like *Rakta* then, due to having different treatment regimen *vyadhi* become incurable.^{xv}

These involvements of *Raktadi Dhatu* which are not similar in qualities (*Guna*) to *Kapha* are considered as *Vikriti*.

Vishista Samprapti - According to Doshik Predominance:

Kaphaja Prameha:^{vi}

Etiological factors cause vitiation of *Kapha* because of having similar properties to the respective *hetu*. This vitiated *Kapha* spreads all over the body easily due to *Sharirashaitilyta*. *Meda Dhatu* has also resembled properties with *Kapha*; which is also vitiated after mixed with *Kapha*. Then both of this vitiated *meda* and *Kapha* when comes in contact with *Sharira-kleda* and *mamsa*, which are already in excess quantity resulting *putimamsapidika* and the vitiated *Kleda* converts into *mutra*. So, in the end, this all three vitiated *dosha* and *dushya* comes in *mutravaha srotas* resulting in formation of ten types of *Kaphaja Prameha*.

Sushruta mentioned *Dushyas* in each type of *Prameha*. He describes in *Kaphaja Prameha*, vitiation of *Kapha* occurs with *Vata*, *Pitta* and *Meda*.

Pitaja Prameha:^{xvii}

Due to *pitaja Nidana Sevana*, *Pitta* gets vitiated and pathogenesis is similar to that of *Kaphaja Prameha*. According to the dominance of different *gunas* of *Pitta Dosh* six type of *pitaja Prameha* are manifested.

Acharya Sushruta has explained *Shonita* along with *Vata*, *Kapha* and *Meda* in the pathogenesis of *Pitaja Prameha*.

Vataja Prameha:^{xviii}

Acharya Charaka ha described detailed *Samprapti* of *Vataja Prameha*. In *Nidana Sthana*; he mentioned that, the aggravated *Vata* due to *Nidana sevana* spreads all over the body and while doing so it drags down the *Vasa*, *Majja*, *Lasika* and *Ojas* to the *Basti* and eliminates it from the *Sharira* thus leading to the manifestation of *Vataja Prameha*.

While in *Chikitsa Sthana* that vitiation of *Vata* occur due to depletion of other two *Doshas* in comparison to *Vata Dosh*, which drags vital *Dhatu*s towards the *Basti*, leading to *Vataja Prameha*.

Conclusion:

Acharya Charak has explained that the simple baseline treatment is the avoidance of etiological factors (*Nidana Parivarjana*). Rightly, it is said that prevention is better than cure. In this attribute one more important tool i.e. *Shatkriyakaal* explained in ayurveda is to diagnose the disease in its early stages and also helps in understanding the process of manifestation of various diseases. By gaining the knowledge of *shatkriyakaal* in context of *Prameha Vyadhi*, further manifestation of disease can be overcome and also treatment of disease would be easier.

ⁱ Shastri Ambikadutt, Sushruta Samhita, Reprint. Varanasi: Chaukhambha Sanskrit Sansthana; 2023. Pp121

ⁱⁱ Shastri Ambikadutt, Sushruta Samhita, 1st ed. Varanasi: Chaukhambha Sanskrit Sansthana; 2016. Pp326

ⁱⁱⁱ Shastri Ambikadutt, Sushruta Samhita, 1st ed. Varanasi: Chaukhambha Sanskrit Sansthana; 2016. Pp326

^{iv} Shastri Ambikadutt, Sushruta Samhita, 1st ed. Varanasi: Chaukhambha Sanskrit Sansthana; 2016. Pp118

^v Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^{vi} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp613

^{vii} Chakrapani, Ayurved Deepika, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2017. Pp212

^{viii} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^{ix} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^x Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^{xi} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^{xii} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^{xiii} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp614

^{xiv} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp61

^{xv} Chakrapani, Ayurved Deepika, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2017. Pp214

^{xvi} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp168

^{xvii} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp168

^{xviii} Tripathi Brahmanand, Charak Samhita, 1st ed. Varanasi: Chaukhambha Surbharti prakashan; 2011. Pp168