

Application of *shodhana* (Bio-purification) in Chronic *Sheetapitta* (*Dhatwantara gata / Leena Avastha*) with special reference to *Urticaria*

Seminar Article

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Abstract

Shodhana (Bio-Purification) is a procedure which helps in expelling out the excessively aggravated *doshas* from the *shareera* (Body). One of the most alluring concepts in the modulation of disease is *leenadosha* (Adhered/ Concealed). Technically *leena* (Adhered) term suggests to Conceal even Merge. Here the *doshas* will be attached or concealed to the *dhatu*s. So we can frame the quality of *leena dosha* as *ekadeshasthita/anutva* (Minute) and also *dhatvantaragata* (Adhered to Dhatus). In the disease *sheetapitta* (Urticaria) *sheetamaaruta* exposure acts as a prime *nidana* (Cause) in vitiating *vata* predominantly along with other *doshas* like *pitta* and *kapha* leading to skin manifestations in *bahya twacha* (External skin) and other systemic symptoms in *abyantara shareera* (Within the body). Eventhough the disease *sheetapitta* (Urticaria) has *vata dhika dosha lakshanas kandu* (Pruritis) and *daha* (Burning sensation) will also be associated in many cases. By neglecting this particular diseases considering its *lakshanas* and severity after a time period *dosha* becomes *leena* within the *dhatu*s and later becomes difficult to treat. Classics clearly mentioned that *leena dosha* (Adhered) cant be eliminated through *shodhana* (Bio-Purification) without prior *deepana pachana* (Stomacic & digestive), *snehana* (Oleation) and *swedana* (Sudation) i. e bringing back the vitiated *doshas* from *shaka* (Extremities) to *kosta* (Abdomen). So *saama dosha* adhered or concealed in diseases are understood as in *leena* state. This particular understanding facilitates further intervention which will be discussed in full paper.

Key Words: Concealed, *Anutklista*, *Deepana*, *Pachana*, *Snehana*, *Swedana*.

Introduction

Roga (Diseases) are *Aparisankheyaya* (Innumerable) with multiple cause and symptoms. History taking, physical examination and also laboratory investigations plays a key role in diagnosis of disease. Life encompasses the states of health and disease. *Ayurveda*, the spearhead science deals with these states of life. Various fervent concepts with sturdy bedrocks are laid down for understanding the body. Diagnosis and understanding of diseases is of prime relevance in the field of medicine. Different principles and methods in unveiling the mechanism of disease have been mentioned in classical texts. One of the most alluring concepts is *Leenadosha* (Concealed) in the modulation of a disease.

Among *Dosha*, *Dhatu* (Metabolic constituents) & *Mala* (Excretory products), *Doshas* are primarily important as they can vitiate themselves and can vitiate *Dhatu* and *Mala* which leads to manifestation of

diseases. Different symptoms of the disease are due to different *Avasthas* (stages) of the *doshas* like *Vridhdha* (Exacerbated), *Stambita* (Stagnent), *Leena* (Adhered) etc

Leena Term Suggests- *Asamyak Darshitaha / Layaprapta* which means clung or pressed closely together, merged in, hidden, attached or staying in.

“*Leenatvaat Ekadeshastitvat*” (1)

“*Leenaha Ekadesha stitaha*”

Dosha which are *Leena* gets accumulated and resides at one place. *Leena* is also considered as *Slista* (Adhered)

“*Yat Udeerayet Bahirdoshan Panchadha Shodhanam cha Tat*”

“*Yat Doshan Bahirnishkasayet Tat Cha Shodhanam*”

Shodhana helps in expelling out the excessively aggravated or vitiated *Doshas* from the *Shareera*.

Contextual Understanding of *Leena* (Concealed) *Dosha*

Leenadosha is a state where the *Doshas* are attached or concealed in *Dhatu*s (2). The knowledge of the disease is of prime relevance before intervention in medicine. The reasons from which a *Leenaavastha* (Concealed state) can be generated are the following *Mithyopachara* (Unwholesome regimen), *Svabhava*

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(Nature) of disease, *Nidana* (Etiology), *Vyadhikshamatva* (Immunity), abstaining from treatment etc. Pathology of *Leena* can be made out in many diseases like *Sheetapitta* (Urticaria), *Vishamajwara* (Fever), *Swasa* (Dyspnoea), *Grahani* (? Sprue/IBS), *Apasmara* (Seizure) etc. *Leena* is not only considered as *Doshavastha* but also it conveys the relapse or remission of disease.

Latency is a state of seeming inactivity. It is a state where there is existence but not yet developed/manifested/hidden/concealed/dormant/carrier state etc. *Leena* is also similar which is explained as *Anutklista* (Not expellable), which is not profound at a perceivable level as signs and symptoms. *Slista* refers to merging of *Doshas* with *Dhatu*s.

Contextual Understanding of Shodhana (Bio-Purification):

Panchakarma i. e mode of *Shodhana* (Bio-Purification) therapy in *Ayurveda* has attracted attention of the people worldwide as it is an unique sort of treatment of various chronic, auto immune, hormonal, degenerative disorders, etc., where other sorts of treatments have no satisfactory answer. *Acharya Charaka* has highlighted the role of *Panchakarma* therapy by stating that the disease treated by *Shodhana* (Bio-Purification) will never recur, whereas the treatment with *Shamana* (No Bio-purification) therapy may recur in due course of time (3). In addition, if *Shamana* drugs are administered after proper course of *Shodhana*, then it provides additional relief and thus helps in eradicating the diseases completely. Though it has wide range of applicability but mainly indicated in *Bahudoshavastha* (Multiple *Dosha* involved) and *Dhatvantara gata* diseases like *Sheetapitta* (Urticaria). Bio-Purification therapy is well known procedure for its excellency to cure the disease from the root cause.

Urticaria is a skin disorder of vascular reaction pattern characterised by transient, erythematous, oedematous papules or plaques (wheals) of varying sizes and shapes which are usually pruritic (4). In *Ayurveda* Urticaria is correlated with a disease called *Sheetapitta*. The *lakshana* (symptoms) of *sheetapitta* is *varatidashtasamsthana shotha* (swelling which resembles a swelling of wasp sting), *kandu* (itching), *toda* (burning sensation in excess) etc (5). Since the characteristic symptoms of both are similar its being correlated with *sheetapitta* disease in *Ayurveda*. Though the disease is of *Tridosha* origin, *Pitta* is the predominant dosha and so the disease shows characteristic feature of burning sensation and pruritis associated with swelling. Many reasons have been mentioned in different texts regarding its etiology. The condition is considered as chronic if the welts appear for more than six weeks and recur frequently over months or years. *Chirakaleena Vyadhi* (Chronic disease) will be always in *Bahudoshavastha* (Multiple dosha) and its treatment with *Shamana Aushadhi* (No Bio-Purification) will be *Krichrasadhya* (Difficult to cure) or *Asadhya* (Incurable) in nature. This even

applies for chronic *Sheetapitta* (Urticaria) which is discussed later.

Aims and Objectives

- To explore the concept of *Leena Dosha* (Concealed) in chronic *Sheetapitta* with special reference to Urticaria.
- To explore the concept of *Shodhana* (Bio-purification) therapy in chronic *Sheetapitta* with special reference to Urticaria.

Materials and methods

Charaka Samhita, *Sushruta Samhita*, *Astanga Hridaya*, *Astanga Sangraha*, *Madhava Nidana*, *Shabdakalpadruma*, Text book of Medicines, Journals, Magazines & other Internet sources.

Observations and Discussion

Before understanding the concept of *Leena Dosha* it is better to understand and discuss the different *Avastha* of *Doshas*:

1. **Chaya Dosha Avastha**- "*Chayovridhi Swadaamnyeva*" (6) Here the term *Dhama* means *Guna* (Quality). So *Gunatah* (Qualitative) increase of the circulating *Dosha* is *Chaya Dosha Avastha*.

2. **Prakopa Dosha Avastha**- Both *Vridhi* (Increase) and *Kshaya* (Decrease) of the *Dosha* is *Prakopa Dosha Avastha*. "*Kopastu Unmarga Gaamita*" (7)/"*Swasthanam Tyaktva sthaanantara Gamanam*". The *Doshas* get *Vridhi* (Increase) in all aspects namely *Gunatah* (Quality), *Karmatah* (Action), *Prabhavatah* (Specific Action) etc. This abnormal state of *Dosha* is *Prakopa Avastha*.

3. **Prasara Dosha Avastha**- The abnormal *Dosha* started moving to other pathways in whole body is *Prasara dosha Avastha*, and it gets lodged in weaker places (*Khavaigunya sthana*). When it starts lodging it will be of *Baddhadosha*, *Stambita Dosha*, *Aama Dosha Avastha* forms.

4. **Baddha Dosha** "*Apravartamana Doshatvam*" (8) the *Doshas* without *Pravruthi* (Movements).

5. **Stambita Dosha**- "*Stabyante Avichaladharmaano Bhavanti*" (9) (Immobile Stagnated *Dosha Avastha*)

6. **Aama Dosha**- "*Aamamiti Apakva Dosham*" (10) (Not properly cooked/Formed *Dosha*).

7. **Upasthita Dosha Avastha**-"*Upasthita Doshaanam Iti Shaakham Tyaktva Koshtam Gaman Ena Tatha Leenatvat Parityagena Pradhana Avastha Prapta*

Doshanaam (11). *Upasthita Dosha* is nothing but the *Doshas* starts moving from *Shakha* (*Dhatus* and skin) to *Koshta* (Alimentary tract) and *Leena Dosha Avastha* will be changed by the influence of *Dosha Gati*.

8. Utklishta Dosha-“*Utklishtaan Iti Hrullasadina Bahirgamana Unmughaan*” (12) The fully excited *Doshas* starts coming out of the body and the person feels *Hrullasa* (Nausea) in this *Dosha Avastha*. Then it gradually becomes *Chala Dosha Avastha*.

9. Chala Dosha Avastha- “*Chala Doshe Swasthaanath Chalita Ityarthah*” (13) The *Dosha* starts to come out from its lodged place for expulsion.

10. Hrita Dosha Avastha-The properly eliminated *Dosha* is *Hrita Dosha*. *Samyak Shodhana Lakshana* is assessed on the basis of *Maaniki* (Measurement), *Vegiki* (*Doshas* eliminated in respective order) for example “*Vamanasya Pittantham, Kaphantham Virechanasya*” (14) (In proper emesis *Pitta* i. e bile at the last *Vega*) is considered as proper emesis. If the *Shodhana* is not proper then it may also cause accumulation of *Dosha* in *Dhatus* and gradually it may become *Leena Dosha* again.

Based on *Samprapti* (Pathogenesis) and *Vegaavastha* (Stages of Disease) *Leenatva* is explained in various diseases: *Vishama Jwara* (fever-intermittent), *Grahani* (?Irritable bowel syndrome), *Apasmara* (Epileptic seizures), *Tamaka Swasa* (Bronchial Asthma), *Sheetapitta* (Urticaria).

Contemporary gleam to Leena dosha

Leenadoshaavastha (Concealed) in modern pathology can be comprehended through diseases like herpes zoster, herpes simplex, AIDS, malaria, epilepsy, filariasis, leprosy and many more diseases. Among them malaria is here to explain its pathology and mechanism in symptomatic manifestation. The vector- female *Anopheline* mosquitoes inoculates plasmodial sporozoite from salivary gland into host body (blood). They invade hepatic parenchymal cell and progress to intrahepatic or pre erythrocytic schizogony or merogony. The single sporozoite in the hepatocyte eventually proliferate, swollen the infected cell and eventually bursts. Further the motile merozoites are discharged into the blood stream. Then, it enters the red blood corpuscles, multiply six to twenty times every forty eight to seventy two hours. When the parasites reach fifty per each micro litre of blood, symptomatic stage of infection begins. In all cases of hepatic entry, there may not be division as some forms of plasmodial sporozoites remain dormant for a period ranging from weeks to years. They are called as hypnozoites dormant forms (15).

Latency and Leena dosha Avastha

Latency is the state of seeming inactivity (16) or the state where there is existence but not yet developed/manifested/are hidden/concealed/dormant/a carrier stage, where in the individual is not affected. *Leena* (Concealed) is also similar to be explained as *Anutklishta* (Not expellable), which is not profound at a perceivable level as signs and symptoms. *Shlishta* refers to the adherence/merging of the *Doshas* with the *Dhatus*. Thus when a favourable environment arises it manifests. Thus relapse and remission occurs.

Impact of Leena dosha in Vyadhikshamatva

The references from occurrence of *Punaravarthakajvara* (Relapsing fever) (17) enlighten the role of *Bala* immunity in an individual, in whom the relapse of disease occurs after symptomatic cure. To understand, we can mention diseases like herpes zoster attack. Here the immune system suppresses the virus to an extent, avoiding the manifestation of symptoms. But when the immune mechanism fails to suppress, disease is manifested. But the mechanism of immune failure and relapse is poorly understood (18). Similar is the case of herpes simplex, where the host immunity influences the acquisition, severity of infection, resistance to development, latency and relapse. Latent phase of AIDS extends upon the strength of immunity in an individual. Regarding *Leena* (Concealed) in hyper sensitivity the sensitization of immune system towards any particular antigen can be long lived in the absence of re exposure (greater than 10 years) due to immunologic memory. We can assume the abnormality behind the cell mediated immunity as one of the modern pathological phenomenon in the causation of *Leenaavastha*.

Sheetapitta in Leena avastha

When the disease *Sheetapitta* (Urticaria) is present in an individual due to any cause for a chronic period of time it usually will be of recurring in nature. i. e *Punarbhavi*. Symptoms of the disease like excessive *Kandu* (Pruritis), *Daha* (Burning sensation), *Shotha* (Oedema) etc becomes severe. From the above all explanations it is very clear that in *Chirakaaleenavyadhi* (Chronic disease) *Shodhana* (Bio-Purification) is a best line of treatment.

Incidence and Clinical discernment of Leena

Leenaavastha (Concealed) can occur before and after the treatment of a disease. Before treatment due to the formation of *Saamadoshas*. It can adhere or conceal to the *Dhatus* and *Leenaavastha* (Concealed) is formed. At the end of intervention or after it, though the signs and symptoms of *Sheetapitta* are subsided, there can be presence of *Sheshadosha* (Remaining dosha) in the form of *Leena*. Clinically *Leenaavastha* (Concealed) can be inferred in a *Vyadhi* through an exhibition of recurrent or intermittent attack of a disease, even with an assumption of well adopted treatment. Therefore

merging the textual knowledge with the clinical practice, one could tackle the hurdle of *Leenadoshaavastha* (Concealed) through a non futile intervention.

Our classics mention why and how such conditions should be approached. The *saamadoshas* moving all over the body, when in *Leenaavastha* (Concealed), i. e deeply merged or concealed in *dhatu*s are not feasible to be eliminated through *shodhana* (Bio-Purification) procedures directly in such instances, if *shodhana* is performed can lead to the destruction of body tissues.

Thus *Saamadoshas* adhered or concealed in diseases are understood as in *Leena* (19). This understanding facilitates the further intervention.

This can be briefed as similar to that of *Ama*, i.e measures of *Deepana* and *Pachana* (Stomacic & digestive), inturn leading to *Pakvaavastha*, then performing *Shodhana*. But if even after treatment *sheshadoshas* (Remaining dosha) are present it indicates *Leenadoshaavastha*, again proper *Deepana* and *Pachana* (Stomacic & digestive), has to be performed followed by *Shodhana*, followed by *Rasayana*.

Shodanangasnehana and *Swedana* (Sudation) are performed as preoperative procedures for *Shodhana* (Bio-Purification) to bring the *Doshas* from *Shaka* (Extremities) to *Koshta* (Abdomen). *Snehana* (Oleation) and *Swedana* (Sudation) enables *Leenavastha* (Concealed) of *Dosha* to *Pravaahana Avastha* (Moveable)

It also aids to detach the *Leenadosha* (Concealed) from the *Dhatu*s there by reducing any further occurrence of diseases relapse. But, if the treatments are not administered properly, it leads to the stagnation of *Doshas* (residual *Doshas*). This can seed to the *Leenaavastha* (Concealed), ultimately leading to relapse of the disease (20) especially signs and symptoms of *Sheetapitta* like *Kandu* (Pruritis), *Daha* (Burning sensation) etc. .

Conclusion

Leenadosha (Concealed), is a pathological state of concealed existence of *Dosha*. It can arise from improper treatment, abstaining from therapy, nature of a disease, cause of a disease and abnormal immunity. Its comprehension is not only cramped to the relapse and remission of a disease but also the latency and scrupulously even it can be weaned to be an abnormality in cell mediated immunity.

Diagnosis of *Leenadosha* is understood through the relapse and remission. *Sheetapitta* (Urticaria) is a basically a *Tridoshaja Vyadhi* with *Vata pradhanyata*. Once the disease becomes chronic it will have the tendency to relapse. The physician should comply with treatments of *Ama* followed by *Rasayana*.

Since *Doshas* in Urticaria are Bahu due to chronicity and Anutklista in nature always we should go for *Deepana* (Stomacic), *Pachana* (digestive), *Snehana*

(Oleation), *Swedana* (Sudation) followed by *Bahirnishkasana* (To expel) to get the optimum result.

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