

RECENT INNOVATIONS IN UNDERSTANDING THE PRINCIPLES OF SHAREERA WITH RESPECT TO RAJAYAKSHMA AS A DEGENERATIVE DISORDER

Chinnikatti V Anupama¹, Srinivasreddy B² & Kulkarni V Pratibha³

¹MD Scholar , Department of Kriya Sharir, Sri Dharmasthala Manjunatheshwara college of Ayurveda and Hospital , Hassan.

²MD Scholar , Department of Kriya Sharir, Sri Dharmasthala Manjunatheshwara college of Ayurveda and Hospital , Hassan.

³Professor & Head of the Department, Department of Kriya Sharir, Sri Dharmasthala Manjunatheshwara college of Ayurveda and Hospital, Hassan.

Article DOI: <u>https://doi.org/10.36713/epra19667</u> DOI No: 10.36713/epra19667

ABSTRACT

Introduction

Degenerative disorders pose significant challenges to global health, with modern medicine striving to understand their intricate pathophysiology and develop sustainable treatments. Degenerative disorders, characterized by the progressive deterioration of bodily functions, pose significant challenges in modern medicine. Ayurveda, with its timeless principles rooted in Shareera (body constitution), provides a unique perspective. Rajayakshma, a condition characterized by systemic degeneration, offers an archetype for studying degenerative disorders through the lens of Ayurveda. Recent research bridges traditional concepts with modern medical insights, providing a comprehensive understanding of such disorders. Methods:

A systematic review of classical Ayurvedic texts, including Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, is conducted to extract the principles of Rajayakshma. Recent advancements in molecular biology, systems biology, and bioinformatics were examined to integrate modern scientific findings with traditional Ayurvedic knowledge. Clinical trials and case studies focusing on Ayurvedic interventions for Rajayakshama were also analyzed to assess their efficacy and therapeutic potential **Results:**

The Ayurvedic concept of Dhatukshaya (tissue depletion) in Rajayakshma aligns with the progressive degeneration observed in modern degenerative disorders. Innovations in understanding the Agni (digestive and metabolic fire), Tridosha imbalances, and the role of Ojas (vital essence) have provided new insights into disease mechanisms. Molecular studies demonstrate parallels between Ojas depletion and oxidative stress-induced cellular damage. Advances in diagnostic approaches, such as pulse analysis and prakriti-genomics, offer tools for early detection of degenerative processes. Therapeutic interventions focusing on Rasayana (rejuvenation therapy) have shown promise in clinical trials, improving quality of life and mitigating progression. Dravya like Ashwagandha and Shatavari, alongside Panchakarma therapies, exhibit potential for tissue regeneration and restoration of homeostasis.

Discussion:

The integrative approach of Ayurveda enriches the understanding of degenerative disorders through a holistic framework. The principle of Samprapti (pathogenesis) highlights multifactorial etiologies, including lifestyle, environmental, and genetic factors, providing parallels to epigenetic theories in modern medicine. Innovations such as the application of nanotechnology in Ayurveda (Bhasma preparations) and evidence-based validation of traditional therapies underscore the relevance of Shareera in contemporary healthcare.

Conclusion:

Ayurveda's principles of Shareera provide a profound foundation for understanding and managing degenerative disorders. The study of Rajayakshma exemplifies how traditional knowledge can synergize with modern innovations to offer integrative, patient-centric approaches. Further interdisciplinary research and clinical validation are essential to enhance its applicability in global healthcare systems.

KEYWORDS: Shareera, Degenerative Disorders, Rajayakshma, Ayurveda, Dhatukshaya, Rasayana Therapy



INTRODUCTION

Degenerative disorders, marked by the progressive decline in bodily functions, present a significant challenge in modern healthcare by demanding innovative approaches to provide effective relief. The principles of *Shareera* (the study of the human body in Ayurveda) emphasize the balance of *doshas* (*Vata, Pitta, Kapha*) and the interdependence of bodily elements, offering a framework to understand degeneration as an imbalance or depletion of vital energies.

Recent innovations, such as stem cell therapy, nanomedicine, and regenerative treatments, align with the *Yuktipurvaka* (logical and systematic) application of ancient principles, aiming to restore homeostasis and mitigate decay. For instance, stem cell therapy mirrors the Ayurvedic concept of rejuvenation (*Rasayana*), striving to repair damaged tissues and replenish vitality.

These advancements underline the synergy between traditional knowledge and cutting-edge science, highlighting their relevance in addressing *Yakshma* (wasting disorders) and other degenerative conditions by targeting the root causes rather than merely alleviating symptoms.

Materials and Methods

A systematic review of classical Ayurvedic texts, including *Charaka Samhita, Sushruta Samhita*, and *Ashtanga Hridaya*, is conducted to extract the principles of *Rajayakshma*. Recent advancements in molecular biology, systems biology, and bioinformatics were examined to integrate modern scientific findings with traditional Ayurvedic knowledge. Clinical trials

SAMANYA SAMPRAPTI

and case studies focusing on Ayurvedic interventions for *Rajayakshama* were also analyzed to assess their efficacy and therapeutic potential

REVIEW OF LITERATURE

The term *Rajayakshma* has its roots in classical Ayurvedic literature, and its etymology provides significant insights into the disease's nature:

- The word "*Raja*" signifies something that is "majestic" or "kingly," and "*Yakshma*" refers to "decay" or "wasting."
- The disease is termed *Rajayakshma* because it is considered the "king of diseases," given its pervasive impact on the body, causing multi-systemic deterioration and severe debilitation.
- Another interpretation is that it dominates the body, much like a ruler, leading to progressive degeneration if untreated.

Nidana of Rajayakshma

Rajayakshma arises from a combination of causative factors that lead to the depletion of vital body tissues (Dhatu Kshaya) and vitiation of the three Doshas, primarily Vata due to Sahasa. Specific triggers include excessive loss of Dhatus (e.g., Shukra and Rakta), suppression of natural urges (Vegadharana), incompatible dietary habits (Viruddha Ahara), overindulgence in physical and sexual activities, psychological stress, and improper lifestyle practices. These factors disturb the balance of Agni thus impair tissue metabolism, and ultimately weaken Ojas (immunity), resulting in the characteristic symptoms of progressive emaciation, kasa, Jwara etc.





VISHESHA SAMPRAPTI SAHASA

	Due to physical exertion		
	Increase in Incremention and Explication		
	Abnormal breathing injures tissue of lung		
	Vitiated Vata derange the Kapha and Pitta		
Derai	nged Dosha along with Vata spend in all direction within the body		
~			
SANDHARANA	Vega sandharana		
	Vitiation of Vata		
	Disturbance in Agni		
	Vitiation of all Tridosha		
	Sroto avarodha		
Vi	tiated Dosha produce disorders having symptoms of all Trisoha		
KSHAYA			
	Vitiation of Vata		
	Aggravates other two dosha		
	↓ Sroto avarodha		

Degradation of Dhatu

↓ Ekadasha Rupa

VISHAMASHANA

Vitiation of Vata Aggravates other two Dosha Obstructs Rasa and other Dhatu No proper nourishment of Dhatu Ekadasha rupa due to irregular diet



ISSN (Online): 2455-3662 EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal Volume: 11 Issue: 11 January 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

SAMPRAPTI GHATAKA		
Dosha	Vata-Prana vayu (samana , udana ,apana vayu) Kapha-kledaka and avalambaka	
Dushya	Udaka, rasa, rakta	
Agni	Mandagni, Vishamagni Rasa Dhatvagni	
Srotas	Prana, udaka, annavaha	
Srotodusti	Sanga, Vimarga gamana and Atipravrutti	
Udbhava sthana	Pittashaya ,Amashaya	
Vyakta sthana	Urah, Phupphusa, Pranavaha srotas	
Rogamarga	Abhyantara	

Category	Symptoms
Trirupa	1. Kshaya (Emaciation)
	2. Jwara (Fever)
	3. Kasa (Cough)
Shadrupa	1. Jwara (Persistent fever)
	2. Kshaya (Weight loss and tissue depletion)
	3. <i>Shwasa</i> (Dyspnea or breathlessness)
	4. Raktapitta (Hemoptysis or blood in sputum)
	5. Aruchi (Anorexia or loss of appetite)
	6. Daurbalya (Weakness or fatigue)
Ekadasha Rupa	1. Kshaya (General emaciation)
	2. Jwara (Recurring fever)
	3. Kasa (Chronic cough)
	4. <i>Shwasa</i> (Shortness of breath)
	5. <i>Raktapitta</i> (Blood in sputum)
	6. Parshva Shula (Chest pain)
	7. Aruchi (Loss of appetite)
	8. Daurbalya (General weakness)
	9. Swara Bheda (Hoarseness of voice)
	10. Nidrabhanga (Disturbed sleep)
	11. Sandhi Ruja (Joint pain due to Vata imbalance)

DISCUSSION

- The integrative approach of Ayurveda enriches the understanding of degenerative disorders through a wholistic framework.
- Molecular studies demonstrate parallels between *Ojas* depletion and oxidative stress-induced cellular damage.
- Advances in diagnostic approaches, such as pulse analysis and prakriti-genomics, offer tools for early detection of degenerative processes.

Innovations in the understanding and management of *Rajayakshma* have created a bridge between classical Ayurvedic approaches and modern medical advancements. The Principle wise innovations include

• Pulse wave analyzer - *Rajayakshma* a term from Ayurvedic medicine referring to a condition similar to tuberculosis or chronic respiratory disease), a Pulse Wave Analyzer plays a crucial role in assessing the health of the cardiovascular and respiratory systems. It helps in monitoring the arterial health and circulatory dynamics of individuals suffering from *Rajayakshma*, where chronic inflammation and respiratory distress often affect the heart and blood vessels. By evaluating pulse wave velocity, the Pulse wave analyser provides valuable insights into arterial stiffness, early signs of cardiovascular risk, and the effectiveness of treatments. Thus, the treatment and life style modification can be planned by the help pulse wave analyzer.

Genomics- Plays a crucial role in understanding Rajayakshma, a condition that can be likened to chronic wasting diseases like tuberculosis in modern medicine. By identifying genetic markers and variations, genomics can uncover the hereditary factors that influence an individual's susceptibility to Rajayakshma, as described in Ayurveda's concept of Beejadosha (genetic predisposition). Genetic studies also reveal how variations in immune response genes, such as those involved in the innate immune system, may contribute to chronic inflammation, tissue degeneration, and impaired recovery. Ayurvedic concepts of Prakriti and Vikriti is a holistic, individualized approach to prevention and treatment of Rajayakshma can be achieved, merging ancient wisdom with modern scientific advancements.



- Reverse diagnosis from *Dhatu* assessment In *Rajayakshma* focuses on evaluating the status of *Dhatu* to identify imbalances caused by chronic respiratory conditions like *Rajayakshma*. This method trace how the disease has impacted the tissues. By observing symptoms such as weakness, tissue degeneration, or reduced vitality, practitioners can pinpoint areas of dysfunction. Thus, this approach helps in diagnosing the underlying imbalances, offering insights into disease progression.
- Other investigation like Neuroimaging techniques, laboratory investigation and EEG, 2D Echo and Ultrasound can be used for assessment of *Dhatu*, *Upadhatu and Srotas*.
- AI toungue screening , laboratory investigations, Metabolomics can be used for assessing *Mala*.

Other laboratory investigation that can be used for assessment of Dhatu -

Laboratory Investigations	Dhatu
RBC, Hb %, WBC, Platelet Count, MCV, MCHC,	Rakta Dhatu
MCH.	
Eosinophilia	Vata Vriddhi orPrakopa
Neutrophilia	Saama Kapha and Pitta.
Lymphocytes	Nirama Kapha
Serum Electrolytes	Rasa Dhatu
Serum Calcium, Phosphate	Rasa Dhatu,Asthi dhatu
Serum Creatinine,EMG	Mamsa Dhatu
Serum alkaline phosphates, osteocalcin, Acid	Asthi Dhatu
Phosphate, urine calcium (24 Hours)	
Semen Analysis, Testosterone, FSH, LH	Shukra Dhatu
Lipid profile	Rasagata Sneha (Abaddha Meda)
LFT (Liver function test)	Rakta dhatu,Pitta dosha
PFT (Pulmonary function test)	Prana Vayu
RFT (Renal function test)	Mutravaha srotas
TMT, ECG, ECHO	Vyana Vayu

- In our classics, We, come accross 'n' Number of treatment options, explained under various *Vyadhis*.
- When we look into a disease condition and happen to name it/ prev. diagnosed, we restrict ourselves with a false ego of knowing/ branding the patient with the same.
- Proper stepwise diagnosis is a must and if there is *Pratyaksha* data got through various modern innovation, one can straight way provide or show results to the patient (Patient centric) using the same at dhatu level.

CONCLUSION

The, *Shareera* perspective of understanding the multisystemic respiratory system predominent ailment will pave way to look all other *Vyadis* in Ayurvedic classics in a more practical, wholistic order. (eg. jwara). Here the study of *Rajayakshma* exemplifies how traditional knowledge can synergize with modern innovations to offer integrative, patient-centric approaches. There are number of *Rajayakshma* treatments that Ayurveda has provided for us that have proven to be effective and promising .

In addition to reducing symptoms without jeoparadizing the person's health, they must avoid such problems with effective results . A number of natural herbs and pharmaceuticals have been shown to have promising anti tubercular actions , to help alleviate the disease 's unpleasant symptoms , and to function as immune boosters . Thus, Principles of *Shareera* definitely provides a profound foundation for understanding and managing degenerative disorders.

REFERENCES

- 1. P. N./Int.J.Res>Ayurveda Pharm.6(2), Mar-Apr 2015 The dynamics of degeneration: A conceptual view from Ayurveda.
- 2. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter 6, verse no.4. reprinted, Varanasi; Chowkhambha Sanskrit Series, 2008; (1): 193.
- 3. Agnivesh, Charak Chikitsa 8/44, In K R Srikantha Murthy Charak Samhita (text book with English translation) Vol II, reprint edition, Varanasi, Chaukhambha Orientalia, 2009.
- 4. Agnivesh, Charak Nidana 6/3, In K R Srikantha Murthy Charak Samhita (text book with English translation) Vol I, reprint edition, Varanasi, Chaukhambha Orientalia, 2009.
- 5. Sushruta, Sushruta Uttara Tantra 41/8, In Sharma PV. Sushruta Samhita (with English translation of text and Dalhan''s commentary along with critical notes) Vol II, Reprint edition, Varanasi, Chaukhambha Visvabharti, 2005.
- 6. K.R. Srikantha Murthy, editor. Astanga Sangraha Nidana Sthana, chaper 5, verse no 7 Chaukhambha Orientalia, Varanasi, VolI.I reprint edition, 2012; (25): 169.
- Brahmananda Tripathi, editor. Madhavanidanam of Sri Madhavakara with the Sanskrit Comm. Madukosa by Vijayaraksita and Srikanthdatta, chapter 10, verse no.2 Vol-I Choukhamba Surbharati Prakashan Varanasi, 2006; (26): 65.



- 8. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter 6, verse no.4. reprinted, Varanasi; Chowkhambha Sanskrit Series, 2008
- 9. Global Tuberculosis Report: Executive Summary, 2019.
- Vaidya Jadavaji Trikamji Acharya, editor. Sushruta Samhita of Sushruta with Nibandha Sangraha Comm. Of Shri Dalhanacharya, Nidana Sthana, chapter 41, verse no 9, Chaukhambha Orientalia, Varanasi, reprinted, edition, 2008
- 11. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter 15, verse no.4. reprinted, Varanasi; Chowkhambha Sanskrit Series, 2008.
- 12. Yogaratnakara Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter 6, verse no.5. reprinted, Varanasi; Chowkhambha Sanskrit Series, 2008
- 13. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter 8, verse no. 39-40. reprinted, Varanasi; Chowkhambha Sanskrit Series, 2008
- 14. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter 6, verse no.4. reprinted, Varanasi;

Chowkhambha Sanskrit Series, 2008

- 15. Vaghbata, Ashtang Hridaya, Paratkar Shastri Hari Sadahiv editor. Varanasi: Chaukamba Publication; 2011.p. 472
- 16. Brahmananda Tripathi, editor. Madhavanidanam of Sri Madhavakara with the Sanskrit Comm. Madukosa by Vijayaraksita and Srikanthdatta, chapter 10, verse no.2 Vol-I Choukhamba Surbharati Prakashan Varanasi, 2006