



CRITICAL ANALYSIS ON PANCHAVIDHA VATA KARMA CONSIDERING SUBJECTIVE AND OBJECTIVE PARAMETERS

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ABSTRACT

Back ground: *Vata Dosha* holds a position of prime importance due to its role in governing all forms of bodily movement and control. *Vata* is functionally classified into five subtypes - *Prana*, *Udana*, *Samana*, *Vyana*, and *Apana*; each responsible for specific physiological domains. **Aims and Objectives:** To critically analyse the functions of the five subtypes of *Vata Dosha* (*Panchavidha Vata*) by integrating subjective patient-reported symptoms with objective clinical findings, in order to enhance the precision of diagnosis and effectiveness of therapeutic interventions in Ayurveda.

Materials and Methods: For this article, various references are collected from classical Ayurveda texts, commentaries and research journals physiology text books later valid & reliable hypothesis was built. **Discussion and conclusion:** The assessment of *Vata* sub-types involves a combination of clinical evaluation and patient-reported symptoms. *Prana Vata* is examined by observing functions like spitting, sneezing, gag reflex, respiration, and swallowing, which reflect both neurological and respiratory health. *Udana Vata* is evaluated through speech-related parameters such as clarity, phonation, comprehension, and memory, using both subjective reporting and speech-cognitive testing. *Vyana Vata* is assessed by analyzing motor and sensory functions, including muscle tone, power, coordination, and patient-reported movement capabilities. *Samana Vata* is investigated by evaluating appetite, nutritional status, and digestive efficiency with the help of lab

investigations and abdominal examination. *Apana Vata* is assessed through a detailed history and clinical evaluation of elimination and reproductive functions, supported by hormonal tests and imaging as needed. Mere English translations of the *Panchavidha Vata Karmas* are insufficient to fully comprehend their physiological aspects. A deeper understanding emerges through the exploration of both subjective and objective parameters associated with each Karma.

KEY WORDS: *Dosha, Vata, Prana, Udana, Samana, Vyana, Apana*

INTRODUCTION

Human body is composed of *Dosha, Dhatu* and *Mala*¹. Among which *Doshas* are the principle factors for regulation of homeostasis in the body. *Doshas* form the foundational pillars of Ayurvedic physiology, serving as the essential bio energetic forces that govern all biological processes within the human body. Although these *Doshas* are not directly perceivable through the senses, their existence and influence are inferred through the various physiological functions they control, such as digestion, circulation, respiration, neural activity, and tissue metabolism. When *Doshas* functioning normally, it maintain health and balance within the body. Any imbalance in the *Doshas* leads to functional disturbances, which manifest as disease². Hence, the understanding and management of *Doshas* are vital to the Ayurvedic approach to health and healing.

Vata dosha is the most important factor of *Tridosha* which is responsible for controlling all types of movements. *Vata Dosha* represents the body's dynamic forces and regulatory mechanisms responsible for movement, communication, and control across all systems. *Vata* is considered the *Prana* the vital life force of the human body, as it initiates and governs all bodily and physiological functions. *Vata Dosha* coordinates the activity of all sensory faculties, plays a crucial role in regulating cognitive and emotional functions and serves as the driving force behind every voluntary and involuntary movement within the body. *Vata* functions as the initiator, regulator, and communicator across multiple physiological and psychological systems. By maintaining harmony between the body and mind, it upholds the vital force necessary for sustaining life.

Vata Dosha is classified into five subtypes: *Prana, Udana, Samana, Vyana,* and *Apana*³ each with distinct functions and areas of influence. Each of the five types of *Vata Dosha* has a distinct location

and specific set of functions within the body. Among them, *Prana Vata* plays a vital role, operating across multiple levels and interacting with various bodily structures. Its influence is dynamic and cannot be confined to a single anatomical site. Ayurveda emphasizes a functional understanding of the body where the validation of its principles lies not in structural representation, but in the observation of physiological roles and effects⁴. *Udana Vata* is primarily associated with upward and outward movements in the body, governing essential functions such as speech, respiration, and mental clarity⁵. *Vyana Vata* plays a vital role in the circulation of *Rasa Dhatu*, which is essential for tissue nourishment and maintaining systemic balance. Its functions closely align with modern understandings of the cardiovascular system particularly the heart's electrical conduction, autonomic nervous system regulation (sympathetic and parasympathetic), and hormonal influences that govern heart activity and circulation⁶. *Samana Vata* enhances digestion and metabolism by aiding the breakdown of food in the intestines. It plays a crucial role in the disintegration and regulation of the essence of *Ahara*. *Samana Vata* is vital for *Anna Grahana* (food intake), *Anna Pachana* (digestion), and facilitates *Anna Vivechana* (*Sara-Kitta Vibajana*)⁷. *Apana Vata* is responsible for the elimination of waste products as well as the expulsion of the fetus during childbirth. Excretion, the process by which waste is removed from the body, is vital for maintaining homeostasis and overall health⁸.

AIMS AND OBJECTIVES

To critically analyse the functions of the five subtypes of *Vata Dosha* (*Panchavidha Vata*) by integrating subjective patient-reported symptoms with objective clinical findings, in order to enhance the precision of diagnosis and effectiveness of therapeutic interventions in Ayurveda.

MATERIALS AND METHODS

For this article, various references are collected from classical Ayurveda texts, commentaries and research journals physiology text books later valid & reliable hypothesis was built.

DISCUSSION

The evaluation of *Prana Vata Karma* involves assessing the ability to spit, presence of drooling, and signs of facial muscle paralysis through patient queries and clinical observation. Sneezing reflex is tested both subjectively by patient report and objectively via reflex tests. Belching and the gag reflex are observed to determine digestive and neurological function. Respiratory difficulties are assessed through patient history, respiratory rate measurement, chest circumference, and monitoring of respiratory movements. The ability to swallow and the act of deglutition are examined clinically to evaluate esophageal and swallowing reflex integrity.

For *Karma of Udana Vata*, speech-related functions are assessed. Subjective evaluation includes clarity and fluency of both written and spoken speech, phonation, resonance, repetition, prosody, and comprehension including memory recall and object naming. Objective speech articulation and cognitive function tests help to identify any deficits such as aphasia or dysarthria.

Karma of Vyana Vata is evaluated by querying the patient about their ability to perform gross and fine movements. Clinical examination of the motor system includes assessing muscle tone and power, eyelid blinking reflex, and sensory function. Related sonographic reports may be reviewed to support findings. This comprehensive assessment helps in detecting issues with motor coordination and sensory integrity.

Karma of Samana Vata is analyzed by assessing subjective parameters such as appetite, nourishment status, and the characteristics of urine and stool. Objective evaluation includes laboratory tests like complete blood counts, stool and urine analysis, abdominal examinations, and observations of intestinal motility. These help in understanding digestive efficiency, absorption, and elimination. The physiology of *Samana Vata* is similar to the functioning of parasympathetic system and stretch reflex.

Apana Vata functions related to elimination and reproduction are evaluated through various queries. For *Shukra Niskrama*, patients are asked about penile erection, ejaculation, including concerns like premature ejaculation, and in female by asking about secretion of coital lubricating fluid, with related issues like dyspareunia. Clinical examinations and hormonal assays support this assessment. *Artava Nishkramana* is evaluated through menstrual history and symptoms such as dysmenorrhea,

with gynecological examination and hormonal profiling aiding diagnosis. In the assessment of *Shakrit Nishkramana*, patient inquiries regarding the frequency of defecation and symptoms of constipation are complemented by abdominal examinations and, when necessary, supported with imaging investigations to evaluate bowel function. *Mutra Nishkramana* is assessed by querying urination frequency and post-void residual urine, supported by urinalysis and urinary tract ultrasound. Lastly, *Garbha Nishkramana* involves reviewing parturition history, including mode of delivery, to evaluate pregnancy and childbirth outcomes.

CONCLUSION

Mere English translations do not adequately convey the physiological complexity of *Pancha Vidha Vata Karma*. A complete understanding requires examining both subjective experiences and objective signs to capture the complex functional roles of Vata. Therefore, integrating classical Ayurvedic knowledge with clinical observation is essential. Systematic analysis of *Panchavidha Vata Karma* using both subjective and objective parameters facilitates accurate diagnosis and effective management of *Vata*-related dysfunctions in clinical practice.

REFERENCES

1. Acharya Vagbhata, Ashtanga Hrudaya, English translation and commentary by Dr T Sreekumar, Volume 1, Sutra Sthana11/1, Harisree Hospital, Mannuthy, Thrissur, 2015
2. Acharya Vagbhata, Ashtanga Hrudaya, English translation and commentary by Dr T Sreekumar, Volume 1, Sutra Sthana1/20, Harisree Hospital, Mannuthy, Thrissur, 2015
3. Upadhyay Yadunandan: Astanga hridaya, published by Chaukhmbha Sanskruta Samsthan, Varanasi, Fourteenth edition; Kaviraj Atridev Gupta Commentary (Vidhyotini) Sutrasthana-12/5: Pg.no.171.
4. Twinkal Pramar, Ashok Kumar Sharma, Rekh Raj Meena, Komal Chavda. A critical review of Prana Vayu and its correlation with contemporary science. *J Ayurveda Integr Med Sci* 2024; 6:190-196.
5. Moharana P, Roushan R. A critical review of Udanavayu in the modern perspective. *Int J Ayu Pharm Chem*.www.ijapc.com. E-ISSN: 2350-0204.
6. Abhirami Babu, Anjali Sivaram. Understanding Vyana Vayu: Bridging Ayurveda and Modern Physiology. *International Journal of Ayurveda and Pharma Research*. 2024; 12(2):122-126.

7. Acharya Vagbhata, Ashtanga Hrudaya, English translation and commentary by Dr T Sreekumar, Volume 1, Sutra Sthana12/8, Harisree Hospital, Mannuthy, Thrissur, 2015
8. Acharya Vagbhata, Ashtanga Hrudaya, English translation and commentary by Dr T Sreekumar, Volume 1, Sutra Sthana12/9, Harisree Hospital, Mannuthy, Thrissur, 2015

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