

## DISCERNING SLEEPADA SAMPRAPTI WITH SPECIAL REFERENCE TO ELEPHANTIASIS

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### ABSTRACT

Lives embrace the states of health and disease. Ayurveda, the unbeaten science deals with these states of life. Ayurveda incorporates both the preventive and curative aspects of human ailments, promising it as a holistic science. In the current era of industrialization and urbanization one of the major social set back is to meet a clean and hygienic domain. This can steer to origin of contagious diseases. One such set of disease includes the filariasis and Elephantiasis. Ayurveda reckon it under the disease *Sleepada*. The following article “Discerning *Sleepada samprapti* with special reference to Elephantiasis” is reviewed through Ayurvedic classics in integration to modern medical facts in the causation and the course of the disease *Sleepada* with reference to Elephantiasis.

### INTRODUCTION:

*Sleepada* is a disease condition depicted in the classical Ayurvedic treatise. It is evident as an abnormal enlargement of different body segments like the limbs, ears, lips, nose, eyes and genitals<sup>[1]</sup>. These manifestations are similar to that of lymphatic filariasis progressing to Elephantiasis. Lymphatic filariasis constitutes second leading cause of permanent disability in South East Asia leading on to social stigmatization and poverty<sup>[2]</sup>.

**Nirukti:** The term *Sleepada* has been derived from two separate words – “*shlish*” and “*pada*”. “*Shlish*” refers to elephant. “*Pada*” refers to the foot<sup>[3]</sup>.

**Definition:** The pathological condition possessing the appearance and consistency of leg resembling a stone is called *Sleepada*<sup>[4]</sup>.

**Nidana:** The cascade of pathological events starts with an individual getting exposed to the predisposing factors like an area of stagnant water and temperate climate<sup>[5]</sup>. The stagnant water can be comprehended as *dushtajala*. It possesses *kapha pittakara-guna*<sup>[6]</sup>. The samhitas mention consumption of water from sources like the *Mahendra*, *Himavat*, *Pariyatra*, *Vindhya* and *Sahya* causes the disease *Sleepada*<sup>[7, 8]</sup>. The high end scientific studies conducted in those areas, presently acknowledged as the Western Ghats and Himalayas<sup>[9, 10]</sup> reveal the prevalence of filariasis due to favorable breeding grounds for the vector i.e. mosquitoes<sup>[11]</sup>. Overlooking the Ayurvedic and contemporary science regarding *Sleepada* with reference to filariasis and Elephantiasis, the predisposing factors appear to be the same.

They include the temperate climate and exposure or consumption of stagnant water.

**Samprapti:** The *dosha* that ignites the pathogenesis is the *kapha dosha*. *Kapha* is *ashrayee* to *rasa dhatu*. Therefore *kapha-dushti* first influence the *prakruta karma* of *rasa dhatu*. Then with the chronicity of the condition, *kapha dosha* cause *dushti* of *pitta dosha* through its *sneha samana guna* or due to *kapha pittakara gunas* of *nidana*<sup>[12]</sup>. Hence, the pathology progresses to a stage which is predominant with the *kapha dosha* associated with the *pitta dosha*. This can be comprehended as an inflammatory stage. *Pitta* being *ashrayee* to the *raktha*, along with *snehadi gunas* of *kapha* undergo *dushti* of the *raktha*. The *dushti* of *rasa* and *raktha* is reflected on to the *mamsa dhatu* because of deficient *uttarottara dhatu poshana* and due to the *samana guna* of *mamsadi dhatu* to the *kapha dosha*<sup>[13, 14]</sup>. In the context of understanding *Sleepada samprapti* with reference to filariasis and Elephantiasis, *rasa* can be interpreted as the lymph. *Raktha* as blood and its components. *Mamsa* as the soft tissues such as the muscles, lymphatics – lymph channels and lymph nodes and other tissues like the vasculature etc.

**Poorvaroopa:** In classical literature the premonitory signs and symptoms are not recorded for the disease *Sleepada*. The proper comprehension of the terminology and the definition favor the near similarity of *Sleepada* to that of a stage of Elephantiasis. Therefore premonitory symptoms of *Sleepada* with reference to Elephantiasis can be addressed as an initial stage of lymphatic filariasis<sup>[15]</sup>. In this stage *kapha* is predominantly involved, later in association with the *pitta dosha*. This stage can be interpreted by observing the features like fever, lymphangitis, lymphadenitis and transient local ede-

ma. Lymphangitis is retrograde in nature. Regional lymph nodes are often enlarged and the entire lymphatic channel can become indurated and inflamed<sup>[16]</sup>. These features can affect the other locations – lower as well as upper extremities and even in genital lymphatics too.

The above symptoms resemble as that of the *kaphaja* and *pittaja Sleepada*. The initial stage of manifestation is with those symptoms like *snigdha varna* – due to stretching of the skin, *sveta varna*, *pandu*(paleness), *guru* (due to the initial phase of lymphatic obstruction), *sthira* (immobility) due to the heaviness; indicating the involvement of *kapha dosha*<sup>[17]</sup>.

They progress to the next level of pathogenesis, which is evident about the role of *pitta*. The patient exhibits the signs and symptoms like the *peeta sankasham* (yellow discoloration), *daha* (burning sensation), *jwara* (fever) which are mild in nature<sup>[18]</sup>.

Understanding *poorvaroopa* of *Sleepada* with reference to elephantiasis can be drawn as the filarial stage where there is predominance of *kapha – pitta dosha* (inflammatory phase). Therefore *kaphaja* and *pittaja Sleepada* symptoms can be told as prodroma to *vataja Sleepada* - Elephantiasis.

**Roopa:** *Vataja Sleepada* can be comprehended with reference to Elephantiasis with the characteristic features like *krushnam* (hyperkeratosis), *rooksha* (dry), *sphutitam* (fissures of the skin), *teevrarujam* (severe pain), *animittarujam* (pain without reason) and *jvara*(fever)<sup>[19, 20, 21]</sup>. These all symptoms constitute the *vataja Sleepada*. Hence, this stage coincides with the Elephantiasis that develops from a condition of lymphatic filariasis.

**Sadyasadyata&upadrava:** Patient possessing morphological features like *valmika*

(anthill) and *kantaka* (thorns) over the leg are to be rejected from providing treatment because of its chronicity and futile results<sup>[22]</sup>. These features indicate advanced stage of lymphatic filariasis manifesting the hyper keratinization and in-folding of the skin.

The patients with features of all the three *doshas* and associated with *sraava* has to be rejected from intervention<sup>[23]</sup>. Here *sraava* can be comprehended as a complication of Elephantiasis where there is obstruction of the local lymphatic or the systemic lymphatic like the retroperitoneal lymph vessels. Obstruction of retroperitoneal lymphatics increases the renal lymphatic pressure. This leads to the rupture of the renal lymphatic and results in the passage of milky urine and is termed as chyluria<sup>[24]</sup>. The loss of intestinal lymph (chyle) which is rich in lipids and proteins leads to severe malnutrition, hypo - albuminemia and weight loss<sup>[25]</sup>. These all features can be understood as a chronic case which ends in *vataja* variety of *Sleepada* which is ultimately reflected with the *dhatu kshaya* or *ojo vyapat*<sup>[26]</sup>.

**Appraisal:** *Sleepada* is a *kapha pradana tridoshaja vyadhi*, where there is abnormal enlargement of different body segments<sup>[27]</sup>. In contemporary science it coincides with the pathogenesis and manifestation of filariasis to the advanced stage of Elephantiasis. The different *nidanas* told by Acharyas can be comprehended as the predisposing factors that can give rise to the disease *Sleepada*. These predisposing factors from the modern purview, favor the flourishing of the causative agents like the *Wuchereria bancrofti*, *Brugia malayi*, *Onchocerca volvulus*, *Loa loa* and more<sup>[28]</sup>.

The *Sleepada lakshnanas* that are mentioned in the classics can be comprehended as different stages of pathogenesis with reference

to the manifestation of Elephantiasis. *Vataja Sleepada* can be taken to an extent as Elephantiasis. The premonitory symptoms are not discussed in the classics. But *kaphaja* and *pittaja Sleepada lakshanas* can be drawn as the prodromal or the initial stage of pathogenesis with reference to the symptoms of filariasis.

The *vataja Sleepada lakshanas* resemble to that of Elephantiasis. The complication phase mentioned in classics, such as *sraava* can be taken as the stage of chylous weeping; which can be assimilated as *dhatukshaya* or *ojo vyapath*. Hence, for arresting the progression of a disease, knowledge of *samprapti* and *avastha* of the disease is the key. Thereby it helps in developing an insight and drawing decision for a clinician to execute a timely and fruitful intervention

#### REFERENCES:

1. Madhava. Sleepada. In: Y. Upadhyaya (eds.)MadhavaNidana. 1st ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1998. p77
2. Munjal.Y. P. Filariasis and other related infections. In: SharmaS. K, AgarwalA. K, SingalR. K, GuptaP, SundarS. et, all (eds.)API Textbook of Medicine. 9th ed. New Delhi: Jaypee Brothers Medical Publishers; 2012. p1211
3. Monier Williams. *Monier Williams M. A Sanskrit English Dictionary*. 1st ed. New Delhi. BharatiyaGranthNiketan Publishers; 2007
4. Vijayarakshitha, Madhava. Sleepada. In: UpadhyayaY. (eds.)MadhavaNidana. 1st ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1998. p77
5. Susrutha. Vruddhiupadamshasleepadan-amnidanam. In: AcharyaY. T.

- (eds.)SusruthaSamhita. 1st ed. Varanasi: ChaukhambhaOrientalia; 2009. p197
6. Vagbhatta. Dravadravvyavijnaniyam. In: AcharyaH. P. (eds.)Ashtangahrudaya. 1st ed. Varanasi: ChaukhambhaOrientalia; 2005. p62
  7. Agnivesha. Annapaanavidhiadhyaya. In: Charaka, Drudabala, AcharyaY. T. (eds.)CharakaSamhita. 1st ed. Varanasi: ChaukhambhaSurbharatiPrakashan; 2009. p164
  8. Susrutha. Dravadravvyavidhiadhyaya. In: AcharyaY. T. (eds.)SusruthaSamhita. 1st ed. Varanasi: ChaukhambhaOrientalia; 2009. p197
  9. BalasubramanianR., Nikhil T. L. *Mosquito (DipteraCulcidae) fauna in Alappuzha and Kottayam district of the Kerala State, South India.* (accessed 8 April 2015).
  10. FutehallyI.,WaslekarS., TrivediS., HonawarR., RajA., SuryanarayananS., et, all. *The Himalayan Challenge, Water Security in Emerging Asia.* [http://www.strategicforesight.com/publication\\_pdf/85801himalayan-challenge.pdf](http://www.strategicforesight.com/publication_pdf/85801himalayan-challenge.pdf) (accessed 4 April 2015).
  11. Harrison. Filarial and Related Infections. In: LongoD.L.,FauciA.S., KasperD. L., Hauser S. L, Jameson J. L, LoscalzoJ. (eds.)Harrison's Principles of Internal Medicine . 18th ed. New York: The McGraw – Hill Companies; 2012. p1745
  12. Vagbhatta. Dravadravvyavijnaniyam. In: AcharyaH. P. (eds.)Ashtangahrudaya. 1st ed. Varanasi: ChaukhambhaOrientalia; 2005. p62
  13. Susrutha. Vruddhiupadamshasleepadan-amnidanam. In: AcharyaY. T. (eds.)SusruthaSamhita. 1st ed. Varanasi: ChaukhambhaOrientalia; 2009. p317
  14. Vagbhatta. Granthiarbudasleepadaapachinadivijnaniyam. In: AcharyaH. P. (eds.)Ashtangahrudaya. 1st ed. Varanasi: ChaukhambhaOrientalia; 2005. p882
  15. Robbins and Cotran. Infectious Diseases . In: KumarV.,AbbasA. K., FaustoN.,AsterJ. C. (eds.)Robbins and Cotran Pathologic Basis of Disease. 8th ed. Philadelphia: Philadelphia Saunders and Company; 2007. p395
  16. Harrison. Filarial and Related Infections. In: LongoD.L.,FauciA.S., KasperD. L., Hauser S. L, Jameson J. L, LoscalzoJ. (eds.)Harrison's Principles of Internal Medicine . 18th ed. New York: The McGraw – Hill Companies; 2012. p1746
  17. Madhava. Sleepada. In: Y. Upadhyaya (eds.)MadhavaNidana. 1st ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1998. p77
  18. Ibid
  19. Madhava. Sleepada. In: Y. Upadhyaya (eds.)MadhavaNidana. 1st ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1998. p77
  20. Vagbhatta. Jvaranidana. In: H. P. Acharya (eds.)Ashtangahrudaya. 1st ed. Varanasi: ChaukhambhaOrientalia; 2005. p449
  21. Harrison. Filarial and Related Infections. In: LongoD.L.,FauciA.S., KasperD. L., Hauser S. L, Jameson J. L, LoscalzoJ. (eds.)Harrison's Principles of Internal Medicine . 18th ed. New York: The McGraw – Hill Companies; 2012. p1746, 1747
  22. Susrutha. Vruddhiupadamshasleepadan-amnidanam. In: Y. T. Acharya (eds.)SusruthaSamhita. 1st ed. Varanasi: ChaukhambhaOrientalia; 2009. p317
  23. Madhava. Sleepada. In: Y. Upadhyaya (eds.)MadhavaNidana. 1st ed. Varanasi:

- Chaukhambha Sanskrit Sansthan; 1998.  
P80
24. Harrison. Filarial and Related Infections.  
In: LongoD.L.,FauciA.S., KasperD. L.,  
Hauser S. L, Jameson J. L, LoscalzoJ.  
(eds.)Harrison's Principles of Internal  
Medicine . 18th ed. New York: The  
McGraw – Hill Companies; 2012. p1747
25. Munjal.Y. P. Filariasis and other related  
infectionss. In: SharmaS. K., AgarwalA.  
K., SingalR. K., GuptaP.,SundarS. et,  
all (eds.)API Textbook of Medicine. 9th  
ed. New Delhi: Jaypee Brothers Medical  
Publishers; 2012. p1213
26. Susrutha. Doshadhatu mala vrudhik-  
shayavijnaniya. In: Y. T. Acharya  
(eds.)SusruthaSamhita. 1st ed. Varanasi:  
ChaukhambhaOrientalia; 2009. p72

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