

APPLICATION OF 'TRIVIDHA PARIKSHA IN CURRENT CLINICAL PRACTICE

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ABSTRACT

Introduction: *Ayurveda* as a holistic medicine has a sound philosophical and experimental basis. *Rognidan* comprises of knowledge of aetiology and symptomatology both and includes the pathology. *Rog Pariksha* is one of the process with the help of which we come to the certain conclusion about the nature and localisation of lesion and cause of suffering of a person. Diagnostic methods in *Ayurveda* rely more on the physician reading of patient signs and symptoms than on diagnostic practise (subjective interpretation). Various diagnostic method has been described in various ayurvedic texts, out of which '*Trividha pariksha*' i.e. *Darshana* (Inspection), *Sparshana* (Palpation, Percussion), *Prashana* (Questionnaire) forms the basis of all. All the other diagnostic method explains in *Ayurveda* as well as modern science can be categorised under these basic '*Trividha pariksha*'. In our day to day practise we either directly or in directly use this *Trividha pariksha* to arrive at certain diagnosis and give proper treatment. So, these *Trividha pariksha* plays a key role in diagnosis of any disease condition. **Aim:** To study the application of *Trividha pariksha* in current clinical practise. **Objectives:** To study *darshan, sparshana, prashana pariksha* from *ayurvedic* texts and its application in clinical practise. **Material and Methods:** This is a conceptual study for which various *ayurvedic* and modern texts and published articles and research papers and information available on internet is used. **Discussion:** *Trividha pariksha* is root of all the diagnostic methods. Modern diagnostic methods like x-ray, CT scan, MRI etc are just a medium in form of modern technology. One must be expert in *Trividha pariksha* for proper interpretation of any disease. Comprehensive and applied knowledge of *Trividha pariksha* is needed for perfect diagnosis and treatment i.e. good clinical practise. **Result:** *Trividha pariksha* in *Ayurveda* has a key role in current clinical practise for diagnostic as well as prognostic purpose.

Keywords: *Trividha pariksha*, clinical practise.

INTRODUCTION

Ayurveda is often called as a *samakalin shastra* (a science of all times). The fundamentals of this ancient science are simple and easily applicable to all eras. In fact, a majority of modern science principle are based on the fundamentals of *ayurveda*. One cannot help but wonder at the profound wisdom and observational skills of the early ayurvedic physicians who could

fathom the deepest secrets of human body and mind even in absence of modern technology^[1].

Diagnosis comprises of a knowledge of aetiology and symptomatology both and includes pathology^[2]. It is a result of various process by the means of which we conclude about the nature and localisation of lesion and the cause of the suffering of the person^[2]. The

word *Pariksha* is derived from the root 'iksha' means to view, to observe, to consider, with the preposition 'pari' fixed before the root which means from all sides. Thus, *pariksha* means observation from all direction^[1].

The wise should understand the disease by direct observation and inference. A proper diagnosis forms the basis for effective treatment, whereas ignorance of disease or improper diagnosis leads to inefficient treatment. *Rog priksa* is given first place and the principle of treatment and drugs are given next place in order of importance^[1]. *Ayurveda* diagnostic methods involves keen observation of each aspect of patient. It relies mostly on physicians' skills than on modern technology.

Various diagnostic methods are described in different ayurvedic texts. This are broadly classified into two categories^[3]

1. *Roga pariksha* (Diagnosis of disease)
2. *Rogi pariksha* (Examination of patient)

These *pariksha* together helps in proper diagnosis of disease. *Rog pariksha* means *nidanpanchak* i.e. *Nidan* (cause), *purvarupa* (early signs and symptoms), *rupa* (signs and symptoms), *upashaya* (prognosis), *samprapti* (etiopathogenesis) we get to know the disease. *Rogi pariksha* includes diagnostic method of different Ayurvedic texts. Various diagnostic text described in *Ayurveda* are as follows^[3].

Materials and Methods:

Trividha pariksha: It was first described in *Charak samhita* as *Pratyaksha* (direct observation), *Anuman*

(inferential), *Aptopadesh* (preaching of saint).^[4] The person who is wise enough, needs to know only two of this i.e. *pratyaksha* and *anuman*. All the other diagnostic methods are nothing but the advance version of these three. These form the base of all the other diagnostic methods. As year pass by this *pariksha* was further revised by *Vagbhat* in *ashtanga hridiya Samhita* as *darshan*, *sparshan*, *prashna*. Which together were tagged as '*trividha pariksha*'. Similar description was further traced in *yogratnakar* and *Bhavparkash Samhita*^[3,5,6]. *Trividha pariksha* comprises the aspect of both *roga* and *rogi pariksha*.

1. *Darshana pariksha* (Inspection)
2. *Sparshan pariksha* (Palpation Percussion)
3. *Prashna pariksha* (Questionnaire/interrogation)

I. Darshana Pariksha:

The word '*darshana*' means inspection, observation. In Ayurveda clinical examination begins as soon as patient steps in the consultation room. Physician should have best observation skill to master in this examination. *Darshan pariksha* is vague term. It includes variety of observational examination. But for study purpose it can be simplified under the following headings from *ayurved* point of view^[10].

1. *Gati* (Gait)
2. *Asana* (sitting position)
3. *Shayana* (Supine position)
4. *Varna* (change in complexion, change in colour of urine, stool, sputum, sweat)

1. Gati (Gait)

Gait	Disease condition
1.Limbing gait	<i>Grudhrasi</i> (sciatica)
2.Forward bending while walking	<i>Katigraha</i> (low back pain)
3.Walking with hands placed on both knee	<i>Sandhivaat</i> (joint pain)
4. Holding abdomen while walking	<i>Udarshool</i> (pain in abdomen)
5.walking with tremors in whole body	<i>Kampavaat</i> (parkinsonism), <i>madatyay</i> (alcoholic liver disease), <i>khanja</i>
6.Hands placed over chest while walking	<i>Shwas</i> (respiratory disease), <i>Hridrog</i> (Cardiac disease)

Many more gaits are explained in modern text which can also be included under *darshan pariksha*.

2. Asana (sitting position)

Asana	Disease condition
1. Sits in forward bending position	<i>Tamakshwas</i> (bronchial <i>asthama</i>), <i>Udarshool</i> (pain in abdomen)
2. Putting complete weight on one side while sitting	<i>Arsha</i> (piles), <i>Bhagandhar</i> (fistula in ano), <i>Katigraha</i> (low back pain)
3. Sits with the support of hands	<i>Daurbalya</i> (weakness)
4. Sits with head in one direction	<i>Manyasthamb</i> (neck pain)

3. Shayana (Supine position)

<i>Shayana</i>	Disease condition
1. Lying with both legs flexed in knee towards abdomen	<i>Udarshool</i> , <i>Shitanubhuti</i> (shivering)
2. Prone position	<i>Udarshool</i> , <i>Prushtashool</i> (back pain), <i>Daurbalya</i>
3. Incomplete supine position	<i>Hridayrog</i> , <i>Tamakshwas</i>
4. Lying with face in towards the wall or in direction of dark	<i>Avasad</i> (epileptic attack), <i>Dhanustambh</i> (Tetanus)

4. Varna (change in complexion, change in colour of urine, stool, sputum, sweat)

Varna	Disease condition
1. <i>Panduvarna</i> (pallor)	Pandu (anaemia)
2. <i>Pitah varna</i> (yellowish)	<i>Kamla</i> (jaundice), <i>pittaj pandu</i> , <i>paitik gulma</i> .
3. <i>Atipitah varni</i>	<i>Halimaka</i> , <i>Lagharak</i>
4. <i>Raktavarna</i>	<i>Vatarakta</i> (gout), <i>Visarpa</i> (erysepalis)
5. Presence of <i>sirajal</i> on <i>udar</i>	<i>Jalodar</i>

These are just few examples of *darshan pariksha*. Diseases are diagnosed according to change in colour of urine, stool, sputum, sweat. *Darshana pariksha* is part of their physical examination in terms of modern context. Swelling, elevation or depression of umbilicus, *vranavastu* (type of injury) are also included in *darshana pariksha*. *Kashyap Samhita* speciality *vedana adhyaya* is completely based on *darshan pariksha*. As small children are unable to speak, they convey their pain or feelings through certain actions, which are precisely explained in *kshayap Samhita* for diagnosis of disease [11]. X-ray, Endoscopy, microscopic examination these modern technologies are nothing but advanced version of *darshana pariksha*. Now a day's various tools are used for indirect inspection (*darshan pariksha*) of various organ.

II. Sparshan pariksha (Palpation, Percussion)

It is examination by *sparsha* (touch). The physician can evaluate several factors through the medium of touch. He can assess the temperature of the body, feel

the margins of the swelling in skin, palpate and note the characteristics of pulse, or check for organ enlargements. According to the commentary of *ashatang hridiya sparshan pariksha* includes *sheeta* (cold), *ushna* (hot), *shlakshna* (smooth), *karkash* (rough), *mrudu* (soft), *kathin* (hard) interpretation on tactile examination [3]. examples of *sparshan pariksha* are as follows

1. *Ushna sparsha* in *jwar*. (fever)
2. *Pronmati-unmati* examination of *shoth*. (pitting and non-pitting oedema)
3. *Vaatpurna drutisparsha* in *sandhivaat*. (crepitus in joints)
4. *Drava sanchiti* in *jalodar*. (fluid collection in ascites)
5. *Sthanik ushna sparsha* in *Aamvaat*.
6. *Sparshasahatva* (hyperesthesia) in case of acute pain, sensory examination in various neurological disease like peripheral neuritis, diabetic neuropathy

thy, alcoholic neuritis. Hyperesthesia in peritonitis.

7. *Pidanasahatva* (Tenderness)

8. Fluctuation test is performed in cyst (*granthi*)

Yogratnakar and *bhavprakash* has included *Nadi pariksha* (pulse examination) in *sparshan pariksha*^[5,6]. *Nadi pariksha* is done by the palpation of radial artery at the wrist. The strength, rhythm, speed, quality of pulse is examined to decide the condition of *dosha* and diagnose the disease. The conventional clinical methods of palpation and percussion are also examples of *Sparshana pariksha*.

III. *Prashna pariksha* (Questionnaire/interrogation)

Prashna means question. Interrogation with the patient is most important in clinical practise. It is always favourable to allow the patient to relate the entire history of the ailment in his own words. It facilitates the doctor patient relationship. Patient are usually suffering from physical as well as mental stress due to disease. Positive doctor patient conversation makes the patient feel comfortable and secure about his problems. He feels a mental support. History taking plays a key role in *Ayurveda*. All the activity of the patient from early rising from bed to night sleep, family history, history of previous illness, personal, occupational, socio-economic history are taken into the consideration for finding the cause of disease. History taking is an art. It is helpful in getting information about the patient present as well as past illness.

According to *Sushrut samhita*, *prashna pariksha* is helpful in knowing *desh* (region), *kala* (climate), *jati* (religion), *vaat-mutra-malaadi pravrutti* (natural urges), *satmya-asatmya* (wholesome-unwholesome), *vyadhi utpatti kram* (chronology of symptoms), *pramukha vedana* (main complaints), *sharir bala* (physical strength), *agni bala* (digestion)^[7].

Prashna pariksha (history taking) can be done in following format^[10]

1. *Pramukh vedana* (chief complaint)

2. *Vartaman vayadhivrutta* (history of present illness)

3. *Purva vyadhivrutta* (history of previous illness)

4. *Parivarik vrutta* (Family history)

5. *Vyaktigat, vyavsayik, samajik itivrutta* (Personal, occupational and socio-economic history)

1. *Pramukh vedana* (chief complaint): Precise and complete information of the suffering can be obtained directly from the patient. As this is directly obtain from the victim it is error less and more reliable. It helps physician to trace exact cause and severity of disease. He can concentrate on main symptoms and plans treatment accordingly.

2. *Vartaman vayadhivrutta* (history of present illness): Patient should be asked for complete information about the disease. He should be allowed to address his suffering in his own words from the arrival of first symptom to the present complaint, type of pain, various treatment he has taken, reliving factors according to him, all this should be taken into consideration.

3. *Purva vyadhivrutta* (history of previous illness): History of Previous illness like DM, HTN, Malaria, jaundice should be asked for. If patient is suffering from diabetes or hypertension he is generally on regular medication. This would affect the line of treatment. If patient has previous surgical history certain care need to be taken while doing further treatment. Many of the times previous history is helpful in diagnosis of disease. A person having traumatic history to the spinal cord, are most likely to have spine related problems in future.

4. *Parivarik vrutta* (Family history): Hereditary disease are increasing day by day. If any of the family member is suffering from hereditary disease like Diabetes, hypertension, sickle cell anaemia etc. they are more prone of getting such disease, if they do not follow the healthy lifestyle.

5. *Vyaktigat, vyavsayik, samajik itivrutta* (Personal, occupational and socio-economic history): Some of the disease are more common in certain occupational population. Chemical Factory workers are more prone to respiratory disease, hospital workers are more prone to infectious disease. Now a day's depression is the main cause of many physical and mental illnesses. Socioeconomic status helps us to know whether the person is socially happy and his social surrounding.

Some diseases are more common in certain economic status like malnutrition, tuberculosis, rickets in poorer and Diabetes, Heart disease in high society.

DISCUSSION

In *Charak Samhita Vimana Stahana* it has been well said that the physician who are unable to enter the soulful mind of the patient with the help of enlighten knowledge and fails to acquire the trust of the patient are always unsuccessful in their treatment^[12]. So, it mandatory for physician to have a full flesh knowledge of various *pariksha* for a good clinical practise. *Trividha pariksha* is supreme of all the methods. He should be expert in *darshan, sparshan and prashana pariksha* because it also has application in modern diagnostic tests. Xray, MRI, CT scan, Endoscopy, USG are nothing but indirect *darshana pariksha* with the help of modern technology. *Sparshan pariksha* like palpation, percussion is also practise by every physician in his day to day clinical practise. Lastly *prashana pariksha*, history taking is pearl of *Ayurveda* and *Vaidya* should be expert in this. In many cases, half of the symptoms of the patient is relieved just by having a positive conversation with doctor, because due to changing lifestyle many of the disease are due to depression, mental stress. Proper case history can guide us to right diagnosis without requirement of any special investigation.

CONCLUSION

From the above literature and discussion, we can conclude that *trividha pariksha* i.e. *darshana, sparshan, prashana* is soul of the *ayurved pariksha padhati*. It has great importance in clinical practise. Though various modern technology and laboratory test have arrived in today's era, but *trividha pariksha* still has as that spark and capacity to guide towards the proper diagnosis. Its importance has not faded. *Trividha pariksha* is boon to mankind. Proper Diagnosis without any advance expensive tests in clinical practise will facilitate more patients without financial hesitation. This will increase the number of skilled physicians. The coming era will be of physician based good clinical practise and other tests will be considered as a secondary source at the time of dilemma.

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