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EVIDENCE ON PRACTICES OF DAIVAVYAPASHRAYA CHIKITSA IN PRESENT SCENERIO W.S.R BALAGRAHA – A SURVEY STUDY

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ABSTRACT

Bala Chikitsa (pediatric) one among the *Ashtanga Ayurveda* (eight branches of Ayurveda) highlights the importance of concept of *Bala (child)*. Preventive and therapeutic aspects of diseases of children are explained here. *Nija Dosha Samutha Vyadhi* (endogenous) are able to cure through the *Yukti Vyapashraya Chikitsa*, but *Agantuja Vyadhi* (exogenous) afflicted through *Grahas* (supernatural power) are to be cured through *Daivavyapashraya Chikitsa* only. There are circumstances in the present scenario, where diagnosis regarding the *Agantuja Roga* are vanishing or depleting due to the lack of knowledge. Since from the Veda Kala performing the rituals are followed for the health of the society and individual, which constituted under *Daivavyapashraya Chikitsa*, in order to get rid off biological unpredictable diseases. As in present scenario the importance of *Graha Chikitsa* is deteriorating. So, here the survey study was conducted to document the practices of *Daivavyapashraya Chikitsa* in the present scenario.

Keywords: Bala, Daivavyapashraya, Survey, Documentation.

INTRODUCTION

Daiva Vyapashraya (spiritual healing) It is a sort of divine therapy derived mainly from *Atharvaveda*. It is a

faith therapy. Faith is a part and parcel of human psychology and this treatment is a play of faith where in patient should have full belief in the medicine and the method of treatment. The term, "Daiva" essentially refers to, belonging to divine, celestial, to the action of past life. So, this therapy is designed to exhaust evil acts of the past to combat Daivikruta diseases. The word, "Vyapashraya" refers to depending on taking refuge with, having recourse. Daivavyapashraya is literally translated to mean any therapy that depends on or linked to Daiva or unknown. As a matter of fact, Daivavyapashraya is concerned with all the unknown circumstance, which is beyond the purview of reasoning. Hence this treatment is often referred to as spiritual therapy. Some of the measures are concerned with religious rituals like benedictions and offerings. Hence the term magico-religious practice has aptly been applied. "Occult practice", "Faith practices" are terms which are generally employed to suggest this "Daiva Vyapashraya" treatment. In Atharvaveda and Koushika Sutra, the two authentic sources of this therapy, many "occult" method have been described to deal with demons and with crafts because Atharvans were the first to establish relation between demons and diseases¹. The methods adopted as a part of Daiva Vyapashraya treatment are 1. Mantra (Hymns) 2. Aushadha (Amulets, Talisman) 3. Mani (Wearing of gems) 4. Mangala (Auspicious ceremony) 5. Bali (Offering to god) 6. Upahara (Gift) 7. Homa (Oblations) 8. Niyamana (Observance of scriptural rules) 9. Pravascita (Atonement) 10. Upavasa (Fasting) 11. Svastyavana (Chanting of auspicious, Hymns) 12. Pranipata (Observance to the god) 13. Gamana (Going to pilgrimage)². A proforma was prepared for the survey in the form of open-ended questionnaire. Folklore practitioners were interviewed, and data was collected by considering diagnostic methodology, management plan, evaluation procedures. The collected data was documented, as given in the result, discussion and conclusion. The data was collected by conducting open ended survey by using a questionnaire format written in Kannada language by asking the question such as how do they diagnose the disease as BalaGraha, since how many years they are doing practice, how did they learn this Chikitsa, till now how many patients they treated. Etc. The response was documented in their own words. The immediate relatives

of the folklore also helped in collecting the information. Open ended questionnaire was used as there is no earlier data available regarding the practice of *BalaGraha*. Also, as it was an observational study to obtain initial data and need to document the current practice and situation. Moreover, detailed explanation was required about all the points of study instead of a closed end answer. Questionnaire were framed in Kannada language as many of the folklore practitioners will be not educated and everyone can easily understand Kannada and moreover the survey was conducted in Karnataka.

Materials:

- 1. Permission letter from the institution to conduct survey.
- 2. Consent form
- 3. Self-prepared Questionnaire

Method: Survey

Area of selection:

The survey work was done in and around places of *Mysuru, Almatti, Sagnoor, Gulbarga*.

Study design: Explorative study

The present study was conducted by the use of self-prepared open-ended questionnaire in Kannada language to obtain the information regarding diagnostic methodology, management plan, evaluation procedures followed by *Ayurveda* clinical practitioners and folklore practitioners w.s.r. *Graha Chikitsa*.

Sample Size: 10

Study design: Explorative

Sampling technique: Purposive Sampling.

Laboratory investigation: Not Applicable

Follow up: Not applicable

Data pertaining to the Folklores w.r.s to *Graha Chikitsa*: Folklores were selected from the places in and around of *Mysuru, Almatti, Sagnoor, Gulbarga*.

Inclusion Criteria: Practitioners full filling the criteria of *Graha Chikitsa*

Exclusion Criteria: Practitioners who are not practicing *Graha Chikitsa*, not explored /concealed the matter **Statistical Methods:** Descriptive statistics using software statistical package for social sciences.

Observations and Results

Table 1: Distribution of practitioners based on years of practice

Years of practice	5-25years	25-50years	50-75years
No of folklore practitioners	5	1	4

It is found that 5 practitioners were practicing since 5-25years,1 practitioner was practicing since 25-50years,4 practitioners were practicing for 50-75 years.

Table 2: Distribution of practitioners based on age

Age	1-25	25-50	50-75	75-100
No of folklore practitioners	0	5	4	1

It is found that 5 practitioners were in between the age group of 25-50,4 practitioners were in between the age group of 50-75,1 practitioner was in between the age group of 75-100.

Table 3: Distribution of practitioners based on Education

	Educated	Uneducated
Folklore practitioners	6	4

It is found that 6 practitioners were educated,4 practitioners were uneducated.

Table 4: Distribution of practitioners based upon how they learned the Balagrahachikitsa

^		
	Vamshaparamparika	From guru
No of folklore practitioners	9	1

It is found that 9 practitioners learnt *BalaGraha Chikitsa* through *Vamshaparamparika* method,1 practitioner from *Guru*.

Table 5: Distribution of practitioners based on Religion

Religion	Hindu	Muslim	Christian	Any other religion
No of folklore practi-	8	2	0	0
tioners				

It is found that 8 practitioners were belonging to hindu religion,2 practitioners were belonging to Muslim religion.

Table 6: Distribution of practitioners based on the total no of patients they treated till now

*		*	•	
No of patients	500-1000	1000-2000	2000-3000	Innumerable/not counted
No of folklore practitioners	1	1	1	7

It is found that among 10 practitioners,1 practitioner treated 500-1000 cases till now,1 practitioner treated 1000-2000 cases till now,1 practitioner treated 2000-3000 cases till now,7 practitioners till now they treated many cases, but they didn't count.

Table 7: Distribution of practitioners based on the Management Plan

Management plan	Yantra	Mantra	Lemon-oral and for bath	Bhasma	Visiting religious places
No of folklore practitioners	10	10	9	9	10

It is found that all the 10 practitioners followed the *Mantra*, *Yantra*, sending to temple/mosque, only 2 practitioners were not using the *Bhasma* and lemon for the treatment.

Laxanas	Fever	Crying continuous	Loose stools		Dryness	of	Abdominal	Irritation		
			with bad smell		the hip rea	gion	pain			
No of folklore practitioners	5	8	3		4		2	3		

Table 8: Distribution of the practitioners based upon the laxanas they used to see

Totally 6 *Laxanas* (symptoms)were seen by practitioners to diagnose *Balagraha*, among 6 *Laxanas*, it is found that among 10 practitioners, 5 practitioners were not including the symptoms of fever, 2 practitioners were not seeing symptoms of continuous crying, 7 practitioners were not including the symptoms of loose stools with bad smell,6 practitioners were not including the symptoms of dryness of the hip region,8 practitioners were not including the symptoms of abdominal pain,7 practitioners were not including the symptoms of irritation.

DISCUSSION

Documentation means the material that provides official information or evidence or that serves as a record. A survey was conducted by framing the self-prepared open-ended questionnaire to collect and to document the information regarding the diagnostic methodology, management plan followed by Ayurveda clinical practitioners and folklore practitioners w.s.r *BalaGraha Chikitsa*.

In the survey total 10 folklore practitioners were interviewed and the documentation was done in their own words, throughout the survey no *Ayurveda* practitioners were seen who are practicing the *BalaGraha Chikitsa*.

1. Regarding the practitioners-It is noted during the study that the practitioners who are still practicing the *Balagraha Chikitsa* are folklore practitioners but not the *Ayurveda* practitioners, the probable reason may be due to lack of *Sadhana, Sidhi* or self-confidence of *Ayurveda* practitioners.

2. Regarding the age of the practitioners-It is noted that all the age groups people are practicing the *Balagraha Chikitsa*, but in this study the practitioners belongs to the age group between 25-85 are seen.

3. Regarding the practitioners based upon the years of practice-It is noted that minimum of 5years experience and maximum of 50 years practice is seen and documented.

4. Regarding the education of the practitioners-Maximum practitioners are found to be educated, in this survey study, probable reason may be apart from their education (*Dhaneshana*) they are interested to carry on the practices of their ancestors from generation to generation.

5. Regarding the manner they learnt the *Chikitsa*-It is noted that maximum number of practitioners learnt from the *Vamshaparamparika* (ancestral practice) method. Here the probable reason may be to get the trademark of the family or to carry on the practices from generation to generation. (*Santana Nyaya*).

6. Regarding the total number of patients they treated till now-in this survey, it is noted that minimum 500 to maximum 3000 patients they treated till now. Depending upon the availability of the patients this is documented.

7. Regarding the diagnostic methodology-It is noted during the survey study and documentation was done that maximum number of practitioners were diagnosing the *BalaGraha* based upon only the *Laxanas* not on the *Nidanas*, more frequently assessed. *Laxanas* are crying continuous, fever, loose stools with the bad smell.

8. Regarding the management plan-It is noted during the survey study that maximum number of folklores were following the methods such as *Mantra, Yantra Dharana, Bhasma Lepa*. These are having the *Adrushta Phala* (unseen effect) their effects cannot be explained on the basis of Karya Karana Siddhanta, (cause and effect theory) they act by their *Prabhava* (can't be analyzed) which is said to be *Achintya*.

Regarding the uniqueness of the practitioners – (Shringa Grahika Nyaya)³

✓ It is noted that in diagnosing the *BalaGraha* only *Laxanas* are seen by the folklore practitioners not

the *Nidanas*, unique *Gandha (smell)* of the *Mala* (stool) is observed. Based upon the practitioner's religion and *Adidevata*, they insist the patients to go to the religious places.

- ✓ Each practitioner is having their own style of treatment based on what they have learnt traditionally from their ancestors or from their *Guru*, treatment principles are similar to what described in the *Samhitas*.
- ✓ Practitioners told that, these are the rituals performed with a prayer for wellbeing, how it effects and cures the *Graha*, affliction can't be analyzed, but surely the effect of the treatment is seen, the reason for this is the *Prabhava*.
- ✓ The folklore practitioners on other hand does the Daivavyapashraya Chikitsa in a similar way as explained in the treatment of Balagraha Chikitsa in Ayurveda Samhitas including Mantra, Yantra, but as these practices have been descended traditionally from one generation to another generation many of the procedures are lost this is the information given by the practitioners.

CONCLUSION

Practice of *Balagraha Chikitsa* is still in practice now a days. The treatment modalities which were followed earlier are deteriorating in present scenario. The use of the *Yantra, Mantra*, going to religious places, are having the *Adrushta Phala*, their effects cannot be explained on the basis of *Karya Karana Siddhanta*, they act by their *Prabhava* which is said to be *Achintya*. *BalaGraha* can be diagnosed only based upon the *Laxanas* but not on the *Nidanas*. From the survey study it can be concluded that still the practice of *BalaGraha* is in practice till now.

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