A REVIEW ON PATHOGENESIS OF DISEASE WITH SPECIAL REFERENCE TO ANUBANDHA AND ANANUBANDHA VAADA

Ebin. T U¹, G. Jai²

¹PG Scholar, Dept. of R&B Govt. Ayurveda College, Thiruvananthapuram.
²Principal, Govt. Ayurveda College, Kannur, Kerala, India

Corresponding Author: ebintu89@gmail.com

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ABSTRACT

Introduction: In Ayurveda a detailed explanation of causative factors, pathogenesis, signs and symptoms and prognosis of different Nija Rogas are available. Even then the subjectivity of a disease in its origin, clinical presentation and curative facets with respect to individuals are found to be different. This can be cleared by the knowledge of Anubandha – Ananubandha Vaada. Materials and Methods: The present work is a literature review on the theory of Anubandha -Ananubandha and its importance in Nija Roga manifestation. Results and Discussion: The strength of disease may be assessed through the Anubandha and Ananubandha of Nidana, Dosha and Dooshya. A well treatment plan with either Brimhana or Langhana should be assigned through this principle. Similarly, an appropriate lifestyle can be followed which may essentially help to cure a disease or prevent a disease. Conclusion: By proper knowledge Nidana Panchaka and Shat-Kriyakala, a Vaidhya is able to break the factor sequence in a disease development. Understanding in depth the different facets of Anubandha - Ananubandha Vaada helps in preventing, recognizing and curing disease.

Keywords: Nija Roga, Anubandha, Ananubandha, Nidana Panchaka, Shat-Kriyakala

INTRODUCTION

In Ayurveda diseases are classified into two, based on origin; Nija (diseases of internal origin) and Aganuthu (diseases of external origin)[¹]. In Nija Roga, the Dosha is vitiated first, which in turn vitiates the Dathus (tissue...
systems), creating a disease. Conversely in Aganthu Roga the disease arises first, followed by Doosha vitiation [2]. Nija Rogas are also known as Sareeraja Rogas (diseases of bodily origin), because for the manifestation of a Nija Roga there must be abnormal fluctuations in the superficial and deep tissue systems of body. Different methodologies were worked out to explain the development of a disease. Shat-Kriyakala, explained by Acharya Sushrutha is the chief among them. In this concept, the stage wise development of a disease beginning from the consequences of serving causative factors, pathogenesis, premonitory symptoms and symptoms are well explained. In fact, Kriyakala denotes Chikitsa Kala, the period of performing treatment [3]. Even then certain clarifications are needed to understand the process of disease formation in an individual. Not all individual exposing to the same causative factor is affected by the corresponding disease or the disease may not be fully symptomatized in a person while it may completely symptomatize in other. The disease may be mild, but with majority of prescribed symptoms or it may be severe with incomplete symptoms. The development of disease may be quick and the patient becomes seriously ill or it may progress slowly and by the time it can be easily cured. These comparative changes in the intensities of a disease are termed as Tara-Tama Bheda.

Materials and Methods

The present work is a literature review on the theory of Anubandha -Ananubandha and its importance in Nija Roga manifestation. The subjectivity of a disease to body with respect to its exhibition and severity can also be analyzed.

The factors associated with understanding of a disease can be summarized as Nidana Panchaka (5 factors) [4]. They are

- **Nidana** – Causative factors
- **Poorvaroopa** – Premonitory symptoms
- **Roopa** – Clinical Symptoms
- **Upasaya** – Factors subsiding/antagonistic to disease
- **Samprapti** – Pathogenesis

No Nija Roga violates these 5 factors. There is a chronological order of Nidana Panchaka with respect to formation of a disease. It is as follows:

Nidaana ➔ Samprapti ➔ Poorvaroopa ➔ Roopa ➔ Upasaya

For a Nija Roga to evident in a body, three basic factors are required. They are Nidana, Dosha, Dooshy /Da-thus. Nidana encourages the Doshas to get vitiate. Vitiated Dosha in turn vitiates Dooshy/ Dathus. Vitiated Dooshya lead to the formation of Roga. The linkage between Nidana, Dosha and Doosha in the formation and absence of disease is explained by Acharya Charaka in the context of Prameha Nidana. This was further elaborated by Commentator Chakrapani Datta thereby clarifying the Tara-Tama Roga bala (proportional strength of a disease) with respect to an individual. The present theory may be named as **Anubandha – Ananubandha Vaada. Anubandha**, implies Anu-koola- supporting / similar [5]. **Ananubandha**, implies Pratikoola- Refuting / dissimilar [6].

When the Nidana – Dosha – Dooshya are Anubandha to one another then the person is affected by a disease. When Nidana –Dosha- Dooshya are Ananubandha to one another then there will be agenesis of disease. Thus there are four aspects of disease formation explained based on Anubandha – Ananubandha theory which can be summarized as; [7]

1. **Sampoorna Linga Balavatha Roga Utpathi** - Manifestation of disease with all the clinical symptoms
2. **Chira Roga Abinivritti** -. Gradual incidence of a disease
3. **Tanu Roga Utpathi** - Mild expression of a disease
4. **Ayathoktha Sarvalinga Roga Utpathi** - Partial expression of symptoms

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In the points of **Anubandha** and **Ananubandha**, when the three fundamental factors for **Roga**; ie **Nidana**, **Dosha** and **Dooshya** are supportive to each other, the **Roga Samprapti** (pathogenesis of a disease) will be triggered and disease is exhibited.

**Course of Roga Utpathi (Disease formation)**
When the **Guna** (quality) of a **Nidana** (disease causing factor) is similar to **Guna of Dosha**, then excess practice of such a causative factor may lead to vitiation of **Dosha**. When the vitiated **Dosha** vitiates the **Dathus** with same or very same **Guna**, the latter and it’s **Moola** (substratum) is vitiates leading to the formation of a disease. The severity of disease is different in different individuals. This variability supports the principle **Pratipurusha niyatham’** (the importance of subjectivity). **Anubandha** can be sub classified as:

1. **Samyak Anubandha** - Strongly supportive to each other
2. **Abaleeya Anubandha** - weakly supportive to each other
3. **Kaalaprakarshaat Anubandha** - supportive in due course

**1. Samyak Anubandha:** When **Nidaana** – **Dosha** – **Dooshya** are in **Samyak Anubandha** (optimum support), there will be genesis of disease with **Sampoorna Linga Balavatha Roga Utpathi** (presenting all or most of the clinical symptoms corresponding to disease).

Eg: Intake of **Masha** (Black gram) by Kapha Pradhana **Prakriti** person may lead to **Kapha Vridhi (Pravara)**.

**2. Abaleeya Anubandha:** When **Nidana** – **Dosha** – **Dooshya** are in **Abala Anubandha** (mildly supportive to each other), manifested disease may be mild or with incomplete symptoms. **Charaka** mentioned this stage as ‘**Tanu Avastha’** (mild stage) and ‘**Ayathoktha Sarva Linga**’ (stage of incomplete symptoms) respectively.

Eg: i. Intake of **Maasha** by a **Vata Pradhana Prakriti** person may lead to **Kapha Vridhi (Avara)**.

    ii. Intake of **Kulatha** by **Kapha pradhana Prakriti** person may lead to **Pitta Vridhi (Avara)**.

**3. Kaalaprakarshaat Anubandha:** When these three basic factors are influenced by **Kaala** (Time -which can be diurnal / nocturnal /seasonal variation) the progression of disease may be delayed. **Charaka** mentioned this stage as ‘**Chira Roga Abnirvririthi’** (gradual development of disease); e.g. Intake of **Snigdha –Seetha** – **Guru Dravya** by a person in **Greeshma Kaala** (summer season) may not immediately generate disease, because in **Greeshma Kaala** there is **Vata Chaya and Snigdha-Seetha – Guru Dravyas pacify Vata**. In contrary, the same incidence in **Hemantha – Sisira –Vasantha Ritus**, there are more chances for disease manifestation. Therefore Kaala, here plays an important role in linking **Nidana** with **Dosha** for the vitiation of latter and thereby leading to **Datu dooshana** and **Roga Utpathi**. Unlike **Samyak Anubandha**, here circumstances for disease genesis is dependent on optimum time.

**Anubandha – Ananubandha Relation with Vikara-Vighata Bhava and Vikar Vighata Abbava**

**Vikara Vighata Bhava** denotes “**Vikaranam Vighatasya, utpathitrabhandhasya bhavo vighat-abhava**” [8], a stage whereof hindrance in the formation and progression of disease are present. **Vikaaravighata Abbava** is “**Vikaranam vighatasya -abavo, Vikara jananamithi…….” “ [9], stage with the absence of hindrance in the formation and progression of disease, leading to manifestation of a disease.

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**Figure No: 1**

Nidana –Dosha – Dooshya

Anubandha

Vikara Vikaravighata Abbava

Vikara Jananam (Manifestation of disease with all symptoms)

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Nidana –Dosha – Dooshya

Anubandha

Vikaravighata Bhava

1. Vikara Ajananam (Absence of disease)
2. Chirena Jananam (Slow manifestation and progression of disease)
3. Tanu Vikara Jananam (Very mild in strength)
4. Asarvalinga Vikara Jananam (Less symptoms)

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Theory of *Anubandha* Relation with *Samanya* Sidhantha

*Anubandha* fulfils the *Samanya* Sidhantha (Theory of similarity). When *Nidana* - *Dosha* – *Dooshya* are in *Samanya Bhava* with each other then there is a likelihood for disease to occur.

**Table 1:** Relationship between *Samanya* Sidhantha and disease

<table>
<thead>
<tr>
<th>Type of Samanya</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dravya Samanya</td>
<td>Medhovardhaka Ahara Seva cause Medho dathu Vridhi and thereby Sthaulya Roga</td>
</tr>
<tr>
<td>Guna Samanya</td>
<td>Kulatha Sevana cause Pitta Vardhana and Rakta Vikara</td>
</tr>
<tr>
<td>Karma Samanya</td>
<td>Ativayama cause Vata Vridhi and Dehasoshana</td>
</tr>
</tbody>
</table>

Essentially each *Dosha* and *Dooshya* is evolved from the *Panchamahabhuthas*. The only difference is the proportional predominance of *Mahabhuthas* in them. In *Rasa Dathu* and *Kapha Dosa*, the predominant *Mahabhuta* is *Jala*. In *Rakta Dathu* and *Pitta Dosha*, the predominant *Mahabhuta* is *Agni* and *Jala*. When *Nidana* – *Dosha* – *Dooshya* retains the same quality, then through *Nidana Seva*, *Dosha* is vitiated. The vitiated *Dosha* in turn vitiates *Dooshya*. E.g. *Ahara* that could increase *Kapha Dosha* - vitiates *Kapha Dosha* in body, which in turn may vitiate *Rasa Dathu*; as all the three factors have a predominance of *Jalabharhuta*. This subtle level similarity stands as the basic feature for the *Dosha* and *Dooshya* Dushti. According to Samanya *Guna* - *Karma Sidhantha*, when there are *Dravya* and *Guna Samanya* among *Nidana-Dosha-Dooshya*, there will be *Roga Samprapati* and finally *Roga utpathi*. In all the three *Samanyas* mentioned above, there is *Dosha-Dooshya Sannurchana*, which finally leads to *Vyadhi*. Even then, depending on the strength of *Vikara Vighathabhava* (factors preventing disease), the intensity of *Anubandha* varies. This may further lead to variable intensities of same *Roga* in different individuals.

While analyzing *Kriyakala*, in *Sanchaya Avastha*, *Doshas* are mildly provoked in their own seats by unwholesome regiments. In *Prakopa Avastha*, the provoked *Doshas* tend to blow-out from its own site. In *Prasara Avastha* the *Doshas* which are displaced, moves further and occupies it’s other seats. In all the 3 stages the *Doshas* are not in relation with corresponding *Dooshya* to generate a particular disease. Further in *Staanasamsraya*, a *Dosha* after getting vitiated in all its *Staanas* (sites), move to the sites of other *doshas* and exerts its pathological effect. Wherever there is *Khavaigunya/ Srotosangha* (obstruction) there the *Roga* occurs. When a *Dosha* is clubbed with the other and further with the *Dathus*, it results in the appearance of *Poorvaroopa* (Premonitory symptoms) of a disease. When the process is further advanced it results in *Roopa* (Symptoms) of a disease. [10]

**Table 2:** *Anubandha* – *Ananubandha* relation with *Shat-Kriyakala*

<table>
<thead>
<tr>
<th>Kriyakala</th>
<th>Expression</th>
<th>Association</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sanchaya</td>
<td></td>
<td>Nidana- Dosha Anubandha</td>
</tr>
<tr>
<td>Prakopa</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prasara</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staanasamsraya</td>
<td>Poorvaroopa</td>
<td>Dosha- Dooshya Anubandha</td>
</tr>
<tr>
<td>Vyakti</td>
<td>Alpa Roopa</td>
<td></td>
</tr>
<tr>
<td>Bheda</td>
<td>Sampoorna roopa</td>
<td></td>
</tr>
</tbody>
</table>
RESULT AND DISCUSSION

A Vaidhya who is well versed in Nidana Panchaka, will be able to understand the typical formation of a disease. Similarly, through proper understanding the significance of Anubandha and Ananubandha principles, Vaidhya can assign a better treatment plan to prevent or cure a disease. When the strength of Nidana to vitiate the Dosha is less or if the Rogi Bala is more compared to Roga Bala, the disease may be of mild in nature or with less symptoms as per the principle of Abaleeya Anubandha. Rogi bala directly relates to Vyadhi Kshamatwa, where the relatively weak Nidana fails to exert its effect on Dosha.

Hence Vyadhikshamatwa acts as a Vikara Vighatakara Bhava. As a result, the Dosha fails to get vitiate and so as the Dathus. This principle can be adopted in the prevention aspect of a disease. Drugs with Rasayana property is the best choice for enhancing Vyadhikshamathwa. Rasayana drugs, through the qualitative and quantitative enhancement of Saptadathus (7 tissue systems in the body) achieves the goal of ‘Swasthasya Swaasthya Rakshanam’ (maintaining healthy state in an individual). While an attempt to treat a disease, the following protocol can be opted.

Table 3: Treatment Options in relation to Anubandha – Ananubandha Vaada

<table>
<thead>
<tr>
<th>Assosiation</th>
<th>Characteristics of association</th>
<th>Probable method of treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Samyak Anubandha</td>
<td>Roga with</td>
<td>Sodhana (Purificatory therapies) (Depending upon Rogi Bala and Kala)</td>
</tr>
<tr>
<td></td>
<td>1. Sarvalinga (majority of symptoms)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Seegra Abinivritti (acute condition)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Balavan (severe in nature)</td>
<td></td>
</tr>
<tr>
<td>Abaleeya Anubandha</td>
<td>Tanu Roga Pradurbhava (Less Intense)</td>
<td>Samana (Pacifying therapies)</td>
</tr>
<tr>
<td></td>
<td>Ayathoktha Sarvalinga (Not all symptoms are exhibited)</td>
<td>Samana (if needed Sodhana depending on intensity of symptoms)</td>
</tr>
<tr>
<td>Kaalapракarshaat Anubandha</td>
<td>Chira Roga Abhinivrīti (slow manifestation of disease)</td>
<td>Samana (Pacifying therapies)</td>
</tr>
</tbody>
</table>

Hence after adopting the principles of Anubandha – Ananubandha, assessing the Tara- Tama Bheda (relative intensity) of a disease, the general principle of treatment like Brimhana for Ksheena (depleted) Doshas, Langhana for Alpa (relatively less vitiated) Dosha. Langhana- Pachanam for Madhyama (moderately) vitiated Doshas and Sodhana for Prabhoota (largely increased) Dosha should be adopted. The association of Anubandha Vada with Samanya Sidhanta helps in assigning a proper lifestyle to a patient. Thus, adopting wholesome regiments and abstaining from unwholesome regiments with respect to Roga (disease) and Rogi (nature of patient) may essentially help to cure a disease or prevent a disease.

CONCLUSION

Theories related to pathology and genesis of disease is well explained in Ayurveda. Breaking any of the factors in the series of disease development is achieved by proper knowledge of Nidana Panchaka and Shatkriyakala. Understanding in depth the different facets of Anubandha - Ananubandha Vada will basically help a Vaidhya to recognize the severity of a particular disease. This in turn helps to assign the most suitable treatment methodology for the presented disease. A preventive approach can also be satisfied by this profound awareness.

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