

CRITICS ON VIKALPA SAMPRAPTI IN UNDERSTANDING THE PATHOGENESIS  
WITH SPECIAL REFERENCE TO VICHARCHIKA

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## ABSTRACT

**Background:** *Vikalpa Samprapti* is a unique concept that helps to estimate the fractional vitiation of *Dosha* and to understand the *Tara* and *Tama Bhava* of *dosha* involvement in disease. Evaluating the *Tara* and *Tama* of *dosha* vitiation is known as *Amshamsha Kalpana*. All Acharyas are unanimous about the involvement of *Tridosha* and four *Dushya* in the manifestation of *Kushta*. Despite this fact, there is variation in the *Lakshana* of each *Kushta*. There are multiple doshas involved in the condition, but a predominant dosha acts as a prime one in bringing about the symptoms. The causative factors responsible for any disease are identified by the knowledge of predominant dosha. Drugs and diets that possess opposite qualities to that of the predominant *Dosha* help to reverse the *Samprapti* and ultimately cure the disease. **Objective:** This study aims to evaluate the *Dosha Vikalpa* in *Vicharchika* and thereby finding a way to combat similar conditions. **Materials and Methods:** The current study was a cross-sectional observational study and was carried out in 100 subjects fulfilling the diagnostic and inclusion criteria of either gender of *Vicharchika*. These patients were categorised based on *Lakshana* of each *Dosha*,

detailed clinical features of *Vicharchika* was recorded and the *dosha* involvement in each *Lakshana* were evaluated based on *Dosha Lakshana* explained in classics. Data obtained were analysed for statistical significance by adopting descriptive statistics. **Results:** The present study revealed that *Vicharchika* is predominantly *Vataja*; *Vata Dosha Lakshana* being considerably more observed in the highest 32 subjects (32%). **Conclusion:** *Vikalpa Samprapti* provides knowledge of *Tara Tama Bhava* (degree of vitiation) of *Dosha* in *Samsarga* and *Sannipataja Dushti*. The current study concludes that the respective *Doshas* are responsible for the manifestation of the particular *Lakshana* in each *Vyadhi*.

**Keywords:** *Vikalpa Samprapti, Dosha Vikalpa, Amshamsha Kalpana, Vicharchika, Tara Tama Bhava*

## INTRODUCTION

*Dosha* is the prime cause for the manifestation of disease. By assessing *Lakshana* exhibited in each *vyadhi*, the combination of *dosha* or its *Dosha Vikalpa* is traced out. There are multiple *Dosha* involved in the condition, but a single *Dosha* plays a pivotal role in bringing about the symptoms.<sup>[1]</sup> The causative factors responsible for the progression of the disease are figured out by knowing the predominant *Dosha* involved in the *Samprapti*. Understanding the causative factors or nature of the predominance of *Dosha* helps in reversing the *Samprapti*.<sup>[2]</sup> Every disease gets manifested with its cardinal symptoms which are obviously about that *Dosha*. Assessment of these symptoms helps to find the *Dosha Vikalpa* in disease. There are various factors responsible for the progression of pathogenesis. Depending upon the amount, duration and number of causative factors there are variations in the vitiation of any particular attribute of a *Dosha* which is well understood by the concept of *Vikalpa Samprapti*.<sup>[3]</sup> Vitiation of *Kapha Dosha* leads to *Kandu, Pidaka, Shyava Varna* and *Bahusrava* in *Vicharchika*. Similarly, vitiation of *Vata Dosha* leads to *Atikandu, Atiruja* and *Roukshya*. Here, *Kandu*, being the feature of vitiated *Kapha* and *Vata Dosha*, needs to be analyzed properly to be specific in the selection of drugs. The proper understanding of *Amshamsha Kalpana* of *Dosha* through *Vikalpa Samprapti* helps in better planning of the treatment, not only in the case of *vicharchika* but in other diseases as well. *Doshas* are perceived as per the attrib-

utes given to them. *Vicharchika*, as per *Ayurveda* Classics, varies in presentation depending upon the *Amshamsha Kalpana* of *Dosha*. Though *Acharya Caraka* has mentioned an innumerable number of *Kushta* depending upon *Dosha Vikalpa*, it is again classified as seven and eleven types respectively as *MahaKushta* and *Kshudrakushta* for *Chikitsa Vish- esha* based on *Dosha Amsa Amsa Vikalpa, Anubanda Dosha, Sthanavibhaga, Vedana, Samsthana, Varna* and *Prabhava*.<sup>[4]</sup> So, for a better understanding of disease in terms of *Dosha Dushtya* involvement, the following study was carried out.

**Clinical trial registration number-**  
(CTRI/2019/3/18311)

### Materials and Methods

**Source of Data** - Literary data were collected manually from classical textbooks of *Ayurveda*, textbooks of contemporary sciences, published articles from journals and authentic websites using keyword *Vikalpa Samprapti, Vicharchika, Amshamsha Kalpana* and *Dosha Vikalpa*.

### Applied Data

Subjects of *Vicharchika* were selected from the OPD and IPD of Shri Dharamasthala Manjunatheshwara College of *Ayurveda* and Hospital, Hassan, Karnataka, India.

### Diagnostic Criteria

Subjects were screened based on classical *Lakshanas* of *Vicharchika* mentioned in Table no.1

**Table 1** (Diagnostic Criteria)

S.N	Diagnostic Criteria <sup>[5]</sup>
1	<i>Kandu</i> (excoriation)
2	<i>Pidika</i> (lesions)
3	<i>Shyaava</i> (blackishness)
4	<i>Srava</i> (discharge)
5	<i>Rukshata</i> (dryness)
6	<i>Vedana</i> (Pain)
7	<i>Raji</i> (lichenification)

**Assessment Criteria:** The patients were assessed by using various subjective and objective parameters

that were categorized based on the *Dosha Lakshana* explained in *Kushta Chikitsa* mentioned in Table no.2

**Table 2:** (*Kushta Gata Dosha Lakshana*)<sup>[6]</sup>

S.N	<i>Vata Dosha Lakshana</i>	<i>Pitta Dosha Lakshana</i>	<i>Kapaha Dosha Lakshana</i>
1	<i>Parushayata</i>	<i>Swedana</i>	<i>Aswedana</i>
2	<i>Nistoda</i>	<i>Vaivarnya</i>	<i>Syava</i>
3	<i>Sphutana</i>	<i>Paridaha</i>	<i>Srava</i>
4	<i>Lomaharsha</i>	<i>Ushanata</i>	<i>Klama</i>
5	<i>Kharatwa</i>	<i>Raga</i>	<i>Gaurava</i>
6	<i>Krushnatwa</i>	<i>Paka</i>	<i>Kandu</i>
7	<i>Raji</i>	<i>Vedana</i>	<i>Pidika</i>
8	<i>Kandu</i>	<i>Srava</i>	-
9	<i>Rukshata</i>	-	-

### Inclusion and Exclusion Criteria

#### Inclusion Criteria-

1. Diagnosed cases of *Vicharchika* based on given criteria.
2. Both gender between the age group 18-70 years.
3. Patients who are ready to give their consent.

#### Exclusion Criteria-

1. Patient other than *Vicharchika*. Patients suffering from other systemic diseases or suffering from any chronic disease like Diabetic Mellitus, HIV or HBsAg positive, pregnant women.
2. Patient those who are taking any immune suppressant medications.
3. Subjects who are not willing to participate

**Study Design:** Conceptual Cross-Sectional Observational Study

**Enrollment of Subjects:** A total of 150 subjects were screened for this trial. Among them, 100 subjects were included based on inclusion criteria.

**Statistical Analysis:** Data were analyzed using IBM SPSS statistics 23.0. Obtained data were analysed for statistical significance by adopting descriptive statistics.

**Ethical Consideration:** Ethical clearance was obtained from the ethical committee of the institute and the trial was registered under the clinical trial registry – India (CTRI/2019/3/18311)

Written consent was taken from each subject willing to participate in the study before the initiation of the study.

#### Results:

A total of 150 subjects were assessed for the eligibility criteria out of which 50 subjects were excluded and 100 subjects fulfilling the inclusion criteria were included in the study. *Kushta Gata Dosha Lakshana* mentioned in *Charaka Samhita* were taken as assessment criteria and all 100 subjects were taken for assessment of dosha lakshana.

**Table 3:** Observation on *Vata Dosha Lakshana* (N= 100)

Lakshana	Frequency		Percentage
	Present	Absent	
<i>Parushyata</i> (hardness)	Present	49	49.0
	Absent	51	51.0
<i>Nistoda</i> (pricking pain)	Present	7	7.0
	Absent	93	93.0
<i>Sphutana</i> (Cracking)	Present	24	24.0
	Absent	76	76.0
<i>Lomaharsha</i> (Horripulation)	Present	0	0.0
	Absent	100	100.0
<i>Kharatwa</i> (Roughness)	Present	25	25.0
	Absent	75	75.0
<i>Krushnatwa</i> (Blackishness)	Present	47	47.0
	Absent	53	53.0
<i>Rajyo</i> (lichenification)	Present	22	22.0
	Absent	78	78.0
<i>Kandu</i> (Excoriation )	Present	64	64.0
	Absent	36	36.0
<i>Rukshata</i> (dryness)	Present	73	73.0
	Absent	27	27.0

Among 100 subjects, 49% subjects were observed having *Parushyata* followed by *Nistoda* which was observed in 7% subjects, *Sphutana* was observed in 24% of subjects, *Lomaharsha* was not at all observed, *Kharatwa* was observed in 25% subjects, *Khrushnata*

was observed in 47% of subjects, *Raji* was observed in 22% of subjects, *Kandu* was observed in 64% of subjects and *Rukshata* was observed in 73% of subjects

**Table 4:** Observation on *Pitta Dosha Lakshana* (N= 100)

Lakshana	Frequency		Percentage
	Present	Absent	
<i>Swedana</i> (profuse sweating)	Present	24	24.0
	Absent	76	76.0
<i>Vaivarnya</i> (discoloration)	Present	16	16.0
	Absent	84	84.0
<i>Paridaha</i> (burning sensation)	Present	32	32.0
	Absent	68	68.0
<i>Ushanata</i> (increased temperature)	Present	18	18.0
	Absent	82	82.0
<i>Raga</i> (Erythematous)	Present	13	13.0
	Absent	83	83.0
<i>Paka</i> (suppuration)	Present	17	17.0
	Absent	83	83.0
<i>Vedana</i> (pain)	Present	4	4.0
	Absent	96	96.0
<i>Srava</i> (thin discharge)	Present	31	31.0
	Absent	69	69.0

Among 100 subjects, *Swedana* was observed in 24% of subjects, *Vaivarnya* was observed in 16% of subjects, *Paridaha* was observed in 32% of subjects, *Ushnatawas* observed in 18% of subjects, *Raga* was

observed in 13% of subjects, *Paka* was observed in 17 % of subjects, *Vedana* was observed in 4% of subjects and *Srava* was observed in 31% of subjects.

**Table 5:** Observation on *Kapha Dosha Lakshana* (N= 100)

Lakshana	Frequency		Percentage
<i>Aswedana</i> (loss of sweating)	Present	12	12.0
	Absent	88	88.0
<i>Shyava</i> (blackness)	Present	27	27.0
	Absent	73	73.0
<i>Srava</i> (serous discharge)	Present	30	30.0
	Absent	70	70.0
<i>Klama</i> (drowsiness)	Present	14	14.0
	Absent	86	86.0
<i>Gaurava</i> (heaviness)	Present	17	17.0
	Absent	83	83.0
<i>Kandu</i> (itching)	Present	32	32.0
	Absent	69	69.0
<i>Pidika</i> (lesions)	Present	82	82.0
	Absent	18	18.0

Among 100 subjects, *Aswedana* was observed in 12% of subjects, *Syavata* was observed in 27% of subjects, *Srava* was observed in 30% of subjects, *Klama* was observed in 14% of subjects, *Gauravata* was ob-

served in 17% of subjects, *Kandu* was observed in 32% of subjects and *Pidika* were observed in 82% of subjects.

**Table 5 (i):** *Dosha Vikalpa* (N= 100)

Dosha	VATAJA	PITTAJA	KAPHAJA
<i>Vata</i>	32(48%)	0(0%)	0(0%)
<i>Pitta</i>	0(0%)	1(1%)	0(0%)
<i>Kapha</i>	0(0%)	0(0%)	9(9%)
Total	32(32%)	1(1%)	9(9%)

**Table 5 (ii):** *Dosha Vikalpa* (N= 100)

VP	PK	KV	KPV	total
9(9%)	0(0%)	20(20%)	5(5%)	66
1(1%)	1(1%)	0(0%)	1(1%)	4
0(0%)	11(11%)	6(6%)	4(4%)	30
10(10)	12(12%)	26(26%)	10(10%)	100

Among 66%, the majority of the subjects (48.4%) were observed *Swatantra Vata Lakshana* followed by 13.6% being *Vata* in association with *Pitta*. Similarly, 30.3 % had *Vata* in association with *Kapha* and 7.5%

had *Vata* in association with *Tridosha*. Among 4% subjects of *Pitta Dosha Pradhana Lakshana*, 1% subjects were observed *Swatanatra Pitta Dosha Lakshana*, 1% subject had *Pitta* in association with *Vata*,

1% subject's had *Pitta* in association with *Kapha* and 1% subject had *Pitta* in association with *Tridosha*. Among 30% subjects of *Kapha Dosha Pradhana Lakshana*, 30% subjects were observed with *Swatantra Kapha Dosha Lakshana* followed by 36.6% subjects who had *Kapha* in association with *Pitta*. Similarly, 20% of subjects had *Kapha* in association with *Vata Dosha* and 13.3 % of subject's had *Kapha* in association with *Tridosha* as shown in table no. 6 (I, II)

## DISCUSSION

**Dosha** - Before outlining the treatment for the disease, the physician should examine the patient as well as the disease completely. The complete knowledge of vitiated *Dosha*, causative factors, signs and symptoms are necessary for diagnosing and treating the condition.<sup>[7]</sup> Knowledge of involved *Dosha* and their state in pathogenesis is sufficient to manage the condition and provides definite results. Each dosha has its cardinal feature and functions in both *Prakruta* and *Vaikruta* states. In the present study, predominant *Dosha Lakshana* in the *Samprapti* of *Vicharchika* were evaluated.<sup>[8]</sup>

In all conditions whether the disease is known or unknown the physician should examine the patient and keenly observe the cardinal feature present in that disease to conclude the *Dosha* involvement. For example, if there is the presence of cardinal symptoms like *Sramsas*, *Bhramsas*, *Vyaas*, *Sangha*, *Bheda*, *Saada*, *Harsha*, *Tarsha*, *Kampa*, *Varta*, *Chala*, *Toda*, *Vyatha*, *Chesta*, it is concluded that there is the involvement of *vata*. Similarly, increased *Vaikruta Guna* of *Vata Dosha* are *Rooksha*, *Sheeta*, *Laghu*, *Vaishdhata*, *Gati*, *Amurtwa*, *Anavasthita*. Observing these *Lakshanas*, one can conclude that the disease is *Vata* predominant. Similar other two *Doshic* conditions are also understood.<sup>[9]</sup>

**Vikalpa samprapti** - *Vikalpa Samprapti* provides the understanding of fractional variation in qualities of *Dosha* involved in pathogenesis. For example- in *Vata- Kaphaja Vyadhi*, the qualities of *Vata Dosha* and *Kapha Dosha* are opposite to each other to contribute to the pathogenesis. The *Rooksha Guna* of

*Vata* and the *Snigdha Guna* of *Kapha Dosha*, if gets aggravated, leads to comparatively weak *Samprapti*.<sup>[10]</sup> So, in *Vata- Kapha* disease condition the contributing qualities are *Sheeta Guna* of *Vata Dosha* and *Snigdha Guna* of *Kapha Dosha* which makes the pathogenesis stronger as well as difficult to manage. When more than one dosha is combined in disease the degree of qualitative and quantitative vitiation of *Dosha* varies from one disease to another and *Amshamsha Kalpana* of *Vikalpa Samprapti* provides a clear picture of *Tara* and *Tama Bhava* (degree of vitiation) of *Dosha* in *Samsarga* and *Sannipataja Dushti*.<sup>[11]</sup>

This concept provides the knowledge of etiological factors responsible for the pathogenesis of a particular disease that is essential for the selection of appropriate therapies which are opposite to that of a particular disease as well as the etiological factors (i.e. *Vyadhi- Hetu- Pratiwandhi*) as the attributes of *Dosha* resembles the etiological factors which vitiate the dosha.<sup>[12]</sup>

**Selection of disease** - The principle of *Kushta Chikitsa* states that the *Dosha Vikalpa* should be evaluated before the initiation of the treatment so that the *Pradhana Dosha* involved in *Samprapti* is treated initially followed by *Apradhana Dosha*. This understanding of diagnosing *Kushta* and its management is the evidence showing the importance of *Dosha Vikalpa* mentioned in the classics.<sup>[13]</sup>

*Vicharchika* is mentioned among the list of *Kshudra Kushta*, and there is variation in the opinion regarding the involvement of dosha in pathogenesis of *Vicharchika*. The concept of manifestation of *Kushta* by *Acharya Charaka* shows that no *Kushta* is going to manifest by the single dosha and the concept of *Sapta Dravya Samgraha*<sup>[14]</sup> gives the clear vision to understand all kinds of *Kushta* including *Vicharchika*.

Though *Kushta* is a *Tridoshaja Vyadhi*,<sup>[15]</sup> the present study was taken to further explore the extent of vitiation of any dosha so that we can plan the management after proper analysis of *Dosha Lakshana* and their predominance in the *Samprapti*.

**Vata pradhana vicharchika** - In the present study, the majority of subjects 32 (48.4%) were observed with *Swatantra Vata Lakshana* in *Vicharchika* followed by 9 (13.6%) being *vata* in association with *Pitta* and similarly, 20 (30.3 %) had *Vata* in association with *Kapha* and 5 (7.5%) had *Vata* in association with *Tridosha*. The subjects were observed with *Swatantra Vata Pradhana Lakshana* of *Vicharchika*, among them *Vata Vaikrita Lakshana Rookshata, Kharrata, Raji, Parushyata*, and other symptoms were observed more than that of another dosha. Following this, in *Vata-Pitta Pradhana Vicharchika*, both *Vata* and *Pitta Lakshanas* were present; *Vata Lakshana* being slightly more. Similarly, in *Vata- Kapha Pradhana Vicharchika*, both the sets of *Lakshanas* were present; *Vata Dosha Lakshana* being slightly more.

**Pitta pradhana vicharchika** - In the present study, among 4% subjects 1(25%) subjects were observed with *Swatantra Pitta Dosha Lakshana* in *Vicharchika*, following this 1(25%) subject had *Pitta* in association with *Vata*, 1 (25%) subject had *Pitta* in association with *Kapha* and 1 (25%) subject had *Pitta* in association with *Tridosha*. The subjects observed with *Swatantra Pitta Dosha Lakshana* in *Vicharchika* were found to have more *Pitta Vaikruta Lakshana* like *Daha, Raga, Paka, Srava* and other *Lakshana* than other two *Dosha*. The subjects where *pitta dosha* was in association with both *Vata* and *Kapha* i.e., *Vata-Pitta Pradhana* and *Vata-Kapha Pradhana*, combined *Lakshanas* were present; *Pitta Dosha Lakshana* being more than other two *Doshas*.

**Kapha pradhana Vicharchika**- In the present study, among 9 (30%) subjects were observed with *Swatantra Kapha Dosha Lakshana* followed by 11(36.6%) subjects who had *Kapha* in association with *Pitta*. Similarly, 6 (20%) subjects had *Kapha* in association with *Vata Dosha*. The subjects observed with *Swatantra Kapha Dosha Lakshana* in *Vicharchika* were found to have more *Kapha Dosha Lakshanas* like *Asweda, Srava, Pidika, Kandua, Gaurava*, than the other two *Dosha*. The subjects where *Kapha Dosha* was in association with both *Vata* and *Pitta Dosha* i.e., *Kapha- Vata Pradhana* and *Kapha-Pitta pradhana*, combined *Lakshanas* were present; *Kapha*

*Dosha Lakshana* being more than the other two *Doshas*.

**Tridosha vicharchika** - In the present study, a total of 10 subjects were observed with *Tridosha Lakshana* in *Vicharchika*. Among these maxima in 5(7.5%) subjects *Vata Dosha Lakshana* were observed more than the other two *Dosha*, in 1(25%) Subject *Pitta Dosha Lakshana* was observed more than the other two *Dosha*, and in 6(20%) subjects, *Kapha Dosha Lakshana* were observed more than other two *Dosha*. Among 100% subjects total of 10% subjects were observed with combined *Lakshana* of all three *Dosha* but *Vata Lakshana* were slightly more in maximum subjects of *Tridosha Vicharchika*.

## CONCLUSION

The current study concludes that the respective *Doshas* are responsible for the manifestation of the particular *Lakshana* in each *Vyadhi*. Although there is variation in the opinion regarding the involvement of *Dosha* in *Vicharchika*, the present study revealed that it is predominantly *Vataja*; *Vata Dosha Lakshana* being considerably more than other *Doshas*. However, further exploration of the variation of this *Dosha Lakshana* as per the variation in the involvement of *dushya* can further deepen the understanding.

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