

## ***A REVIEW ON SAMPRAPTHI AND CHIKITHSA SUTRA OF GRAHANI DOSHA***

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### **ABSTRACT**

*Samprapti* is the process of evolution of the disease, which gives an exact idea as to how the etiological factors give rise to *Prakopa* of *doshas*, how *doshas* travel at different sites setting in the disease process. It gives the insight into the development of the disease. In all the disorders *Sampraptivighatna* is the important *prayojana* of *chikitsa*. *Chikitsa* is proposed for the eradication of *roga*. *Roga* arise due to *doshadushyasammurchana* at specific *Srotas* or *Sthana*. Pathogenesis of *roga* is *samprapti*. So, *Sampraptivighatana* itself is *Chikitsa*. In *Samprapti* of each and every disorder *dosha*, *dooshya*, *srotas*, *agni* are given more focus to do a *Sampraptivighatana*.

**Keywords:** *Agnidusti, Amavish, Grahani dosha*

### **INTRODUCTION**

The disease "*Grahani Roga*" is the main and leading disorder of the gastrointestinal tract. As the hypo function of *Agni* i.e. *Mandagni* is the root cause of all the disease, *Grahani Roga* is also mainly caused by *Agnidushti*. It is an *Ahitashanajanita Vyadhi*; the *Ahitashana* includes faulty dietary habits like *Pramitasana*, *Vishamasana* *Adhyashana*, *Samashana*, *Viruddhashana* etc. and faulty life style like

*Diwa Svapana*, *Ratri Jagarana*, *Vega Vidharana* etc. The organ *Grahani* and *Agni* have *Ashraya* (site) -*Ashrita* (dependent) type of relationship. The prime site of *Agni* and the site of occurrence of the disease *Grahani Roga* is organ *Grahani*. The impairment of *Agni* (Mainly *Mandagni*) is responsible for the creation of *Grahani Roga*.

## Review of literature

**Table 1:** Adhikarana of disease in Samhithas

Samhitha	Sthana	Chapter
Charaka samhitha	Chikithsa sthana	15 <sup>th</sup> Grahanchikithsadyaya
Sushruta samhitha	Nidhana,uttaratantra	Nidhana <sup>9<sup>th</sup></sup> , 40Atisara chikithsa
Astanga hridaya	Nidhana,Chikithsa sthana	8 <sup>th</sup> atisara nidhana,10 <sup>th</sup> grahani chikithsa
Astanga sangraha	Nidhana,chikithsa sthana	8 <sup>th</sup> ,12 <sup>th</sup>

### Grahani swaroopa according to authors

Agni adhistana means agnirashraya that means the place where Agni resides, grahana means dharana. That which holds anna is grahani. Grahani helps to do the upastambha and upabrumhana karma of agni<sup>1</sup>.

According to chakarapani commentary

Upastambitha (angina pittavyaparakaranena anukooliha)-grahani helps the Agni to do the function of pitta vyapara (digestion and metabolism)

upabrimhita (brimhana vyapaara karanena sashaktikrita)

Grahani holds the apakwa anna and expels pakwa anna to parshwa. (Vama parshwa)<sup>2</sup>. Here Vamaparshwa means where annavaha srotas ends.

According to sushruta

Grahani is seated in pithadhara kala, sixth kala which is located b/w pakwashaya and amashaya.vagbhata opines same as susruta<sup>3</sup>.

Concept of grahani dosha and grahani roga according to chakarapani commentary

Doshas which reside in grahani are called grahani doshas those are vata, pitta & kapha.

The disease produced due to grahani ashrittha doshas is termed as grahani dosha.

Grahani doshas vikriti leads to agnimandya and ajirna so agnimandya and ajirna are gra-

hani ashrittha rogas. Grahani gada is produced due to improper functioning of grahani. That improper functioning of dharana, munchana, upasthamabhana & upabrimhana<sup>4</sup>.

Nidhana of Grahani roga

Aharaja-abhojana, atibhojana, vishamashana, asatmya, guru, sheetha, atirooksha bhojana Viharaja-vega nigraha, karshana due to vyadhi.

Panchakarmavibrama-virechana, vamana and snehavibhrama.

1. Abstinence from food (Abhojana)
2. Indigestion (Ajirna)
3. Over-eating (Atibhojana)
4. Ingestion of -
  - a) Unwholesome food (Asatmya bhojana)
  - b) Heavy or indigestible food (Atiguru bhojana)
  - c) Cold and food (Shita bhojana)
  - d) Excessively dry and dehydrated food (Atirukshabhojana)
  - e) Putridarticle (Sandusta bhojana)
5. Adverse effects of the therapeutic measures such as, Purgation, Emesis, Oleation
6. Emaciation or wasting brought about by other diseases
7. Incompatibility of the – country, climate, season
8. Voluntary inhibition of natural urges (Vega Vidharana)<sup>5</sup>.

### **Samprapthi according to Charaka**

Samprapthi takes place in two ways one is due to abnormal function of *avayava* and other is due to *agnidustikara Ahara vihara*.

Abnormal function of *Avayava* makes *agni dubala* and *dosha dusta* finally it leads to *apachana* of *anna* and it expels *apachana anna* as it is<sup>6</sup>.

*Agni dusti* taking place due to *agni dustikara ahara vihara*. This *dustagni* will not digest the food properly, so that *apachya anna* attains *shukthata* and leads to *visha roopatha*<sup>7</sup>.

Meaning of *shukthata* and *visha roopata* acc to commentary

*Shukthatwamiti amlathaam*- food attains sourness

*visharopathamitiyathavishambahuvikarakaari bhavatatathadroopathaam*.- *Ahara* becomes *bahuvikarakari* like poison.

Weak *agni (durbala)* brings about *vidaha* (a part which is digested the other part remaining without digestion) of food, which moves upward and downwards in gastro intestinal tract. The digested (*pakwa*) and undigested food (*apakwa*) moves downwards and this condition are called *grahani gada*. In this condition, the entire food material usually remains the state of *vidagdha* (i.e a part of it gets digested, the other part remaining undigested)<sup>8</sup>.

### **Nidhana and samprapti according to Sushruta**

1. *Grahani dhooshana* is taking place by *agnisada hetus*.

Here *agnisada* refers to the factor which makes *Agni mandya*<sup>9</sup>.

2. *Grahani dooshana* is caused by two factors here as follows

After stoppage of *atisara* if patient continue to take *mandagnikara* and *ahitakara ahara*

As per *Dalhana* commentary *nivrithe api itiapishabdhanivrithe api/ bhooyaha punarapi* Patient continues to take *mandagni* and *ahitakara ahara* before the stoppage of *atisara*<sup>10</sup>.

Due to above *nidhana doshas* gets vitiated by single or in combination leads to improper digestion of food and expels as it is<sup>11</sup>.

*Vagbhata* explained the *nidhana* and *samprapthi* same as *sushruta*<sup>12</sup>.

### **Types of Grahani roga**

*Grahani* is of 4 types according to *charaka, sushruta* and *vagbhata*<sup>13</sup>.

#### **Vataja grahani samprapti**

Due to consumption of *Vataja ahara vihara vata* gets aggravated and covers the suppressed *agni* (power of digestion). As a result of this, the food taken by the patient does not get easily digested which leads *vataja grahani*<sup>14</sup>.

#### **Pittaja grahani**

Due to *pittaja ahara vihara pitta* gets vitiated leads to *aaplavana* of *Agni* and leads to *pittaja grahani*. *Aaplavana* means- *aaplaavayadyanthaalamithi*- it destroys *Agni*, *aaplavanamdravenaardrikaranam-dravata vridhi* of *pitta* leads *ardrikarana* of *agni*, like water kindles fire<sup>15</sup>.

#### **Kaphaja grahani**

Due to *kaphakara ahara vihara kapha* get vitiated leads to indigestion of food leads to *kaphaja grahani*<sup>16</sup>.

#### **Sannipataja grahani**

*Sannipataja grahani* is to be determined on the basis of simultaneous manifestation of all

the signs and symptoms pertaining to the three *dosas*<sup>17</sup>.

*Poorvarooopa of Grahani*

*Thrishna-thirst*

*Aalasya-laziness*

*Balakshaya-loss of strength*

*Vidaha-* burnig sensation during digestion of food

*Chira paaka*-delayed digestion

*Kaaya gourava*-heaviness of body<sup>18</sup>.

### **Diagnostic feature of *grahani***

*Saama* and *niraama lakshanas* of *grahani* is one of the important diagnostic features of *grahani*

The stool associated with *aama* sinks in water due to its heaviness. If the stool is voided after proper digestion (*pakva*, i.e, if it is not associated with *ama*), then it floats over the water.

The rule does not hold good or apply in cases where the consistency of the stool is thin or exceedingly compact, and if the stool is affiliated with excessive *kapha*. Therefore, the physician should, first of all, examine (carefully) the *saama* and *niraama* nature of the stool of the patient (suffering from *ama dosa* or *grahani dosa*) and then appropriately treat him accordingly to the prescribed procedure with *pachana* and such other suitable therapies<sup>19</sup>.

*Samprapti ghatakas*

*Dosa –*

*pitta pradhana tridosaja*

*Vata-Samana vayu*

*Pitta-Pacaka*

*Kapha-Kledaka*

*Dusya –Dhatu –rasa*

*Agni –Jatharagni*

*Agnidusti-Mandagni*

*Ama –Agnijanya*

*Srotas-Annavaha*

*Srotodusti-Sanga,* *vimarga* *gamana,*  
*atipravritti*

*Adhistana –Grahani*

*Udbhavasthana –Grahani*

*Vyaktastha-Grahani*

*Sancarasthana –Maha srotas, Annavaha*

*Ama –Agnijanya*

*Srotas-Annavaha*

*Srotodusti-Sanga,* *vimarga* *gamana,*  
*atipravritti*

*Adhistana –Grahani*

*Udbhavasthana –Grahani*

*Vyaktasthana – Grahani*

*Sancarasthana –Maha srotas, Annavaha sro-*  
*tas*

*Roga marga- Abhyantara*

*Roga bheda-Vataja, Pittaja, Kaphaja & Sanni-*  
*pataja*

*Chikithsa of grahani*

According to *charaka*

### **General *chikithsa sutra of grahani***

The patient suffering from *grahani* should, in brief, use the following categories of therapies:

*Snehana* or oleation therapy, *swedana* or fomentation therapy, *suddhi* or elimination therapy, *langhana* or fasting therapy, *deepana* or the therapy for the stimulation of the power of digestion, *curna* or recipes in the form of powder, *lavana* or recipes containing salt, *kshara* or recipes containing alkalies, *madhvarista*, i.e. an alcoholic preparation containing honey, *sura* or alcohol, *asava* or a type of alcoholic preparation or wine, *takra-yoga* or various recipes of containing butter milk, *dee-*

*pana sarpis* or recipes of medicated ghee which stimulate the power of digestion<sup>20</sup>.

### **Grahani with Ama**

When the *dosa* located in *grahani* is afflicted by food, which is not fully digested (*vidagdha*, i.e partly digested and partly undigested), then the signs of *ama* (product of improper digestion and metabolism), viz., *vistambha* (constipation), *praseka* (salivation), *arti*, *vidaha*, *aruchi* and *gourava*.

**Grahani with amalanga** –emetic therapy should be administered with the help of *usnambhu* (Luke warm water). Alternatively, the decoction of *madana phala* mixed with *pippali* and *sarsapa* should be used for emetic therapy

### **Leena and pakwashayastha ama**

Here *leena* means *anuthklista*. If *doshas* get *leena* in *pakwashaya* then *sravana* (purgation) therapy with *deepana* drugs.

### **Shareeranugata saama**

*Shareera vyapaka samarasayukta dosha* treated by *langhana* and *pachana*.

After the *amashaya* is cleansed of the *ama* by the administration of appropriate purgation and fasting therapies, the patient should be given *peya* (thin gruel) prepared of the decoction of *panchakola* and *laghu anna* and *deepanakara yogas*<sup>21</sup>.

### **Vataja grahani chikithsa sutra**

Having ascertained that the *vatika* type of *grahani* –*roga* has become free from *ama* (undigested material), the physician should administer medicated ghee prepared with drugs belonging to *deepaneeya* group in small quantity. After the *agni* is got slightly stimulated, the patient becomes capable of retaining the stool, urine and flatus, to such patient, oleation

therapy should be administered for two or three days, which should be followed by fomentation and massage therapies. Thereafter, *niruha* type of medicated enema should be administered.

After the *dosa* has become loosened (free from adhesion), and the *vayu* is eliminated or alleviated as a result of the administration of *niruha* type of medicated enema, the patient should be given purgation therapy with the help of *eranada taila* or *tilvaka-ghrta* mixed with *kshara*.

Even after the *ashaya* is cleaned and stool has become semisolid (well formed), the dryness of the *ashaya* might persist. For correcting this dryness, the patient should be given *anuvasana* type of medicated enema with the help of appropriate quantity of oil cooked with drugs which stimulate digestion, which are sour in taste and which are alleviators of *vayu*.

After the appropriate administration of *niruha*, *virechana* and *anuvasana* therapies, the patient should be given light food, and thereafter, a course of (medicated) ghee should be administered<sup>22</sup>.

### **Pittaja grahani chikithsa**

Having ascertained that the *pitta* is located in its natural habitat, that it is in an agitated condition and that it is causing extinction of the *Agni*, the physician should administer either purgation or emetic therapy for the removal of this *pitta*<sup>23</sup>.

### **Kaphaja grahani chikithsa**

If the *grahani* is caused by aggravated *kapha*, then the patient should be given emetic therapy according the prescribed procedure. Thereafter, pungent, sour, saline, alkaline and

bitter drugs should be administered for the promotion of his power of digestion<sup>24</sup>.

*Tridoshaja grahani chikithsa*

*Tridoshaja grahani* should be treated with appropriate administration of *pancha karma*. The patient should be given medicated ghee, alkalis, *asavas* and *aristas* which stimulate the *Agni*.

For the patient suffering from different type of *grahani*, various therapeutic measures for the alleviation of *vayu*, etc., are described. These should be administered by the physician either separately or jointly after ascertain the nature of the *dosa* involved in the causation of this ailment<sup>25</sup>.

*Avasthika chikithsa in grahani*

*Grahani* with *kapha steevana-rookshana chikithsa* and *deepana* with *tiktha rasayukthadravyas*. *Grahani* in *krisha* person with *bahukaphavastha - rooksha* and *snigdha chikithsa* alternatively can be done. If *shareera* pervaded with *ama* after proper examination, the patient should be administered *deepana* with *snehayuktha* drugs. If *pitta* aggravated in excess then *tiktha rasayuktha deepana dravyas* with *madhura* ingredients should be administered. If *vata* aggravated in excess *deepana* with *sneha amla* and *lavanyuktha dravyas*. The above recipes will work as a fuel, and when appropriately administered, they will stimulate the gastric fire<sup>26</sup>.

*Chikithsa* according to *sushruta*

*Atisara* and *virechanavath chikithsa* has to be followed in *grahani*<sup>27</sup>. All which stimulate the digestive fire are useful in always for the patient of *grahani* disorder. Complications fever etc. should be treated with respective measures without contradicting<sup>28</sup>.

The patient having been evacuated according to predominance of *dosa*, as prescribed, should be given liquid gruel etc. mixed well with appetisers.

Thereafter the drugs of digestive and appetising groups should be taken with *sura*, *arista*, *sneha*, *mootra* and *sukhambhu*, with *takra* or *takra* alone is useful.

Moreover, measures prescribed for treatment of *krimi*, *gulma*, *udara* and *arsha* should also be adopted. *Hingvadi churna* or *ghrita* indicated in *pleeha vikara* should also be used<sup>29</sup>.

*Chikithsa* according to *astanga hridaya* and *astanga sangraha*

*Grahani ashrittha doshas* should be treated as like *ajeerna*. *Amapachana* should be done same as told in *atisara*<sup>30</sup>. *Ajirna* should be treating as like in *matrashiteeya adyaya*. *Ama-jirna-langhana chikithsa*

*Vistabdhajirna-swedhana chikithsa*

*Vidagdhajirna-vamana chikithsa*<sup>31</sup>.

## DISCUSSION

### *Grahani swaroopa*

All the *Acharyas* and *Commentators* of *Samhitas* described *Grahani* as *Agni Adhithana*. The relation that exists between *Grahani* and *Agni* is reciprocal i.e. *Agni* supports the function of *Grahani* and *Grahani* supports the function of *Agni*. Thus, integrity of *Grahani* depends upon *Agni* and the latter is located in the former. Any impairment of *Agni* leads to the impairment of *Grahani* and vice versa. So any defect or pathology in the functioning of any these two, leads to disease condition.

### *Nidhanas in causation of grahani gada*

One of the *adhithana* for *agni* is *grahani* and also one of the the *karma* of *grahani* is *upast-*

*hambhana* i.e. *agninaapittavyaapaarakarane-  
naanukoolita* so all above said *nidhanas*  
makes *agni dusti* in turn leads to *grahani roga*.

### **Samprapthi of grahani roga according to charaka**

According to *charaka samprapthi* takes place  
in two ways as follows

- I. Disturbed functions of *Grahani* lead to vi-  
tiation of *Jatharagni*, followed by the vi-  
tiation of *Grahaniashritha doshas*, lead-  
ing to ‘*Grahani dosha*’.

*Durbalagni* and *dustagni* in causing disease

Here two adjectives have been used for *Gra-  
hani Roga*:

1. *Durbala Agnibala*: weakness of *Agni* (weak  
digestive power) i.e. strength of

*Agni* is less and *Durbala Bala* i.e. whose  
strength of holding capacity of ingested food  
is lessened.

2. *Dushta*: Abnormal condition, which has un-  
dergone pathological changes, when it gets  
vitiated because of weakness of *Agni*.

From the above terms it can be inferred that,

- *Grahani Dosha* is a precursor or forerunner  
of *Grahani Roga*.
- *Grahani Dosha* is vitiating of *Agni* i.e. func-  
tional derangement of *Grahani* regarding pro-  
duction of *Pachaka Pitta* (enzymes responsi-  
ble for digestion) and also holding (*Grahana*)  
of *Anna* (food) for digestion.

- II. Vitiating of *Jatharagni* takes place first,  
followed by vitiating of *Grahanisth  
dosha*, leading to disturbed Functions of  
*Grahani* and manifesting as ‘*Grahani  
dosha*’ & leads to *grahani roga*

This *sloka* indicates *shukthapaka* and *annav-  
isha* stage after *sevana of agnidustikara hetu*.

In the beginning, *Agnidushti* occurs in mild  
form

Because of *Agnidushti* Ingested food is not  
properly digested

By this *Apachana* takes place

The food affairs *Shukthapaka*

The *Shukthapaka* stage leads to *Annavisha*

It may remain in *Grahani* or may spread in the  
whole body after absorption.

The *Annavisha* while remaining in *Grahani*  
produces following symptoms:

*vistambha*- Intestinal stasis, *jrimbha*- Yawning  
*shiro ruja* – Headache, *sadhana* – Asthenia  
*angamardha*– Bodyache, *moorcha*– Fainting  
*thishna* – Thirst, *brama* – Giddiness  
*jwara* – Fever, *pristakatigraha* – Back stiff-  
ness

*chardhi*– Vomiting, *arochaka* – Anorexia

*pravahana* - Dysentery

Here, when the *Annavisha* mixes with *Pitta /  
Vata / Kapha* it

Produces different symptoms shown here.

*Annavisha* with *pitta- daaha, trishna, muk-  
haamaya, amlapitta*

*Annavisha* with *kapha-  
yakshma, peenasa, mehadi*

*Annavisha* with *vata- vaatajamscha gada*

*Annavisha* with *mootra- mootraroga*

*Annavisha* with *shakrith – kukshiroga*

Annavaisha with dhatu-dhatugatha roga

Grahani Dosha

Grahani Dushti

Grahani Roga

**Samprapthi ghataka**

Doshaa

Vata-samana vata

Samana vata sthana is Agni sameepastha indicates grahani sthana.

Anna grahana- grihnaati-apakvamaamashaye dharayateethyarthaha

Pachana -Pachati-agnisandhukshanaadbhaktakaara iva

Vivechana - vivechayati-samhathamannam paakaayavibhajate

Munchana - munchana-shakrinmootradiroopam adha pravrittate<sup>32</sup>

So from above reference it indicates that samana vata gets vitiated by Agni dustikara ahara leads to grahani roga

Pitta-pachaka pitta

Anna pachana and Sara kitta vibhajana is the main function of pachaka pitta. Pachaka pitasthana is grahaniso derangement of function of grahani like upasthambhana in turn leads to pachaka pitta vitiation<sup>33</sup>.

Kapha-kledhaka kapha

annasanghata- is the karma of kledhaka kapha it means it has the part in pachana of ahara.

Annavaaha srotas in grahani

The moola of annavaaha srotas is amashaya and vamaparshwa. The nidhanas like atimatra, akala and ahita bhojana causes annavaaha srotas dusti<sup>34</sup> So annavaaha srotas is involved in causation of grahani.

**Comparison between authors regarding Samprapti**

Charaka opines that from agnidustikara ahara grahani gets vitiated first then it leads to ajirna, agnimandya grahani doshas and in turn these leads to grahani roga proper, where as Shushrutha and Vagbhata explained grahani as nidhanarthakara roga. That is after the stoppage of atisara or during atisara if patient indulges in agnidustikara ahara it leads to grahani roga proper. No clear explanation samprapthi related to grahani as a swatantra vyadhi according to both. Pathogenesis as nidhanarthakara roga is also not clearly explained.

**Discussion on Chikithsa**

The Chikithsa of grahani according to authors not much differs charaka treatment start with ama pachana then Agnideepana and then shodhana according to doshas.

Sushrutha mentioned it as Nidhanarthakara roga so he advised atisara and virechanavath chikithsa. nd deepana chikithsa, shodhana kriya same as Charaka.

Vagbhata explained ajirna line of treatment in grahani, Amapachana same as in atisara chikithsa. Other same as Charaka.

**Ajirnavath upacharet**

Amajirna-langhana chikithsa

Vistabdhajirna-swedhana chikithsa

Vidagdhajirna-vamana chikithsa

So here amajirna indicates grahani dhoositha by kapha dosha, vistabdha indicates grahani dooshana by vata dosha, and vidagdha indicates grahani dooshana by pitta dosha.

**Atisaravath chikithsa**

During the stage of Amadosha the Jatharagni or digestive power become so weak, this is not

able to digest the ingested food and even medicine too.

Disease caused by *Amadosha* is cured only by *Apatarpana*, which are of three types namely:

- *Langhana* - indicated in *Alpa Amadosha*
- *Langhana Pachana* - indicated in *Madhyama Amadosha*
- *Shodhana* or *Avasechana* - indicated in *Parbhuta Amadosha*

Similarly the disease *Atisara* is also *Amadoshaja Vyadhi* and the line of treatment described by *Acharyas* is *Apatarpana*. All the *Amadoshaja Vyadhis* are classified in *Bahu Doshaja*, *Madhya Doshaja* and *Alpa Doshaja* on the basis of their treatment. In *Atisara* there is description of *Pravrita Doshas*, means *Doshas* after vitiation and aggravation in excess quantity goes out of the body from the nearest possible root.

## CONCLUSION

*Grahani* and *Agni* have *Adhar-Adheya Sambandha*. So, proper functioning of the one element will ultimately boost the proper functioning of the other elements too and of course vice versa. Probable mode of *Samprapti* can be understood by two ways. First, disturbed functions of *Grahani* lead to vitiation of *Jatharagni*, followed by the vitiation of *Grahanistha doshas*, leading to '*Grahani roga*'. While in Second, vitiation of *Jatharagni* takes place first followed by vitiation of *Grahanistha dosha*, leading to disturbed Functions of *Grahani* and manifesting as '*Grahani roga*'. *Grahani* can also be considered as *nidhanarthakara roga*. *Amapachana* and *agnideepana* are the first line of treatment. *Grahani dosha* is the preliminary stage of *grahani gada*.

## REFERENCES

1. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/56&57. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.
2. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/56&57(commentary). Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.
3. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/169, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhambha Orientalia, Varanasi, 2014; p. 709.
4. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/38-40(commentary). Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 516.
5. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/42to43. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.
6. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/57. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.

7. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/44. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.
8. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/51to53. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.
9. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/166, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhamba Orientalia, Varanasi, 2014; p. 709.
10. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/167, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhamba Orientalia, Varanasi, 2014; p. 709.
11. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/171-172, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhamba Orientalia, Varanasi, 2014; p. 709.
12. Vagbhata, Arunadatta, Hemadri, Ashtanga Hridaya, nidhana sthana, 8/15, edited by Bhisagacharya Hari Shastri Pade, Chaukhamba Surbharati Prakashana, Varanasi, 2014; 174-6.
13. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/58. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
14. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/59-60. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
15. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/65. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
16. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/67. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
17. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/72. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
18. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/55. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 517.
19. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/94-95. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
20. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta.

- Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/196-197. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 524.
21. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/73-77. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518.
22. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/78-81. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 518-519.
23. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/122-123. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 521.
24. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/141. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 521.
25. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/194-195. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 523.
26. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta. Edited by Vaidya Jadavaji Trikamji acarya; Cikitsasthana 15/198-200. Varanasi: Chaukhamba Sanskrit Sansthana; 2016. p. 524.
27. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/168, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhambha Orientalia, Varanasi, 2014; p. 709.
28. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/178-180, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhambha Orientalia, Varanasi, 2014; p. 710.
29. Sushruta, Dalhana, Sushruta Samhita, uttaratantra, 40/182, edited by Vaidya Jadavaji Trikamji Acharya, Chaukhambha Orientalia, Varanasi, 2014; p. 710.
30. Vagbhata, Arunadatta, Hemadri, Ashtanga Hridaya, chikithsa sthana, 10/1, edited by Bhisagacharya Hari Shastri Pade, Chaukhambha Surbharati Prakashana, Varanasi, 2014; p.665.
31. Vagbhata, Arunadatta, Hemadri, Ashtanga sangraha, chikithsa sthana, 12/2, edited by Bhisagacharya Hari Shastri Pade, Chaukhambha Surbharati Prakashana, Varanasi, 2014; p.504.
32. Vagbhata, Arunadatta, Hemadri, Ashtanga Hridaya, sutra sthana, 12/8, edited by Bhisagacharya Hari Shastri Pade, Chaukhambha Surbharati Prakashana, Varanasi, 2014; p.193.
33. Vagbhata, Arunadatta, Hemadri, Ashtanga Hridaya, sutra sthana, 12/10-12, edited by Bhisagacharya Hari Shastri Pade, Chaukhambha Surbharati Prakashana, Varanasi, 2014; p.193.
34. Agnivesha, Charaka Samhita. Ayurveda Dipika Commentary of Chakrapanidatta.

Edited by Vaidya Jadavaji Trikamji  
acarya; vimanasthana 5/8. Varanasi:  
Chaukhamba Sanskrit Sansthana; 2016. p.  
250.

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