



REVIEW ARTICLE

CONCEPT OF *DOSHA DUSHYA SANGRAHA* AND *DHATU SHAITHILYA* (FLACCIDITY OF BODY CONSTITUENTS): THEIR IMPORTANCE IN DIAGNOSIS, TREATMENT AND PROGNOSIS OF *PRAMEHA*

SHAILESH VINAYAK DESHPANDE¹ VAISHALI SHAILESH DESHPANDE²

Abstract

Background: Pathology of *Prameha* mentioned in classics is succinct and needs reading between the lines to appreciate its explicit and indubitable details. *Bahu Drava Shleshma* (*Kapha* in more liquid state) causes *Prameha*, but it is also caused due to other *Dosha*. *Bahu Abadhda Meda* and *Mamsa* (increased *Meda* and *Mamsa* with flaccidity) are undoubtedly principal *Dushya*, but role of other *Dushya* in pathology is unclear. General symptom of *Prameha* is *Prabhuta Avila Mutrata* (excess urine with turbidity), but in practice symptoms seen in patients are diverse and alter from time to time. Twenty types of *Prameha* are mentioned according to different characteristics of urine, but other symptoms according to specific types are not described. To address the issue elaboration of available information about *Prameha* is necessary.

Methods: Literary review of *Prameha* mentioned in *Bruhatrayi*, *Laghutrayi* and *Shabdakosha* (dictionaries/word repositories) was taken. References were hand searched. Key words related to pathology of *Prameha* were used.

Results: Pathology of *Prameha* can be elaborated in better way if the two concepts namely – ‘*Dosha Dushya Sangraha*’ and ‘*Dhatu Shaitihilya* (flaccidity of body constituents)’ are explained. Together, they highlight *Anusangitva* (recurring nature) of the disease. **Conclusion:** Application of these concepts in practices can help in understanding prognosis, treatment plans and absolute cure if possible. It also unveils the road ahead in research in *Prameha*.

Key words: *Madhumeha*, *Ayurveda*, pathology, *Nidana*

¹ Professor, Dept. of Kayachikitsa, Parul Institute of Ayurveda, Parul University, Limda, Vadodara, Gujarat (INDIA)

² Associate Professor, Dept. of Kayachikitsa, Parul Institute of Ayurveda and Research, Parul University, Ishwarpura, Vadodara, Gujarat (INDIA)

Corresponding Email id: dr.shailshd@gmail.com Access this article online: www.jahm.in

Published by Atreya Ayurveda Publications under the license CC-by-NC-SA.

INTRODUCTION

Charaka has put forward the concept of *Dosha Dushya Sangraha*^[1]. As the name suggests, it is set of all possible causative *Dosha* and *Dushya* which can take part in pathology. Pathology of *Prameha* takes place in three ways– (a) caused

by collection of *Kapha* and/ or *Pitta* in body^[2], (b) due to vitiation of *Vata*^[3] and (c) pathology of *Madhumeha* caused due to *Margavarodha* (obstruction) of *Vata*^[4] (Table 1).

Table 1: Similarities and dissimilarities in major types of *Prameha*

Type of <i>Prameha</i>	<i>Santarpanjanya Prameha</i> (<i>Prameha</i> caused by collection of	<i>Apatarpanjanya Prameha</i> (<i>Prameha</i> caused by vitiation of	<i>Madhumeha</i> caused due to
Factors associated	<i>Kapha</i> and/ or <i>Pitta</i> in body)	<i>Vata</i>)	<i>Margavarodha</i> (obstruction) of <i>Vata</i>
Etiological factors	Diet and strolling pattern promoting collection of <i>Kapha</i> and/ or <i>Pitta</i> .	Diet and strolling pattern promoting collection of <i>Vata</i> .	Diet and strolling pattern promoting collection of <i>Kapha</i> , <i>Pitta</i> , <i>Meda</i> and <i>Mamsa</i> .
Causative <i>Dosha</i>	<i>Kapha</i> and/ or <i>Pitta</i>	<i>Vata</i>	<i>Vata</i> obstructed by accumulation of <i>Kapha</i> and <i>Pitta</i> .
Similarity in <i>Dushya</i>	<i>Dhatu Shaithilya</i> (flaccidity of body tissues)		
Reason	Caused due to accumulation of <i>Kleda</i>	Caused due to reduction of <i>Kleda</i>	Caused due to accumulation of <i>Kleda</i> .
Pathology taking place at <i>Basti</i>	Excess <i>Kleda</i> and <i>Dosha</i> collect and obstruct normal function making <i>Basti Guru</i> (~bulky)	Increased movement of <i>Vata</i> carries <i>Shithila</i> (flaccid)body tissues towards <i>Basti</i>	Obstructed <i>Vata</i> carries <i>Oja</i> towards <i>Basti</i>
Similarity	Alteration in properties of urine, frequency and flow of micturation according to <i>Dosha</i> and <i>Dhatu</i> (body tissue) reaching <i>Basti</i> .		
Prognosis	<i>Kaphaja</i> – curable <i>Pittaja</i> – paliable	Incurable	Incurable

Though *Prameha* can be caused by any *Dosha*, some pathological changes are common in all types of *Prameha*. These are – *Dhatu Shaithilya* (flaccidity of body constituents)^{[5],[6]} and strain on *Basti* (urinary bladder).*Dosha* are accumulated at *Basti* or there is abnormal

movement of *Dhatu* in *Basti* that alters the normal properties of urine^[7]. Though different etiological factors for each *Dosha* are mentioned for causing *Prameha*, the end result is same due to similar pathological procedure taking place at the levels of

Dhatu and *Basti*. Also, considering the fact that *Prameha* can be caused by number of ways, namely collection of *Kapha* or *Pitta* (*Santarpanajanya Prameha*), vitiation of *Vata* (*Apatarpanjanya Prameha*) and obstruction to *Vata*, either *Dosha* is capable of causing the disease.

Considering the set of *Dushya*; *Bahu Abaddha Meda* and *Mamsa* (increased *Meda* and *Mamsa* with flaccidity)^[8] are essential. But *Dosha Dushya Sangraha* also mentions about other *Dushya*, namely –*Rasa, Rakta, Majja, Shukra, Vasa, Lasika, Kleda* and *Oja*. But explanation about participation of all these *Dushya* in pathology is not elaborated. Hence it becomes a tricky to understand the involvement of all factors, which are mentioned as *Dushya*, and its implications on diagnosis, treatment and prognosis of *Prameha*.

Methodology

Hence the concepts of *Dosha Dushya Sangraha* and *Kleda, Dhatu Samhanana* (~firmness of body constituents) and *Dhatu Shaithilya* (flaccidity of body constituents) were studied in context with the pathology of *Prameha* and its significance in diagnosis, prognosis and treatment of the disease were also looked upon. Detailed review of literature from *Ayurvedic* classics and *Shabdakosha* (dictionaries/ word repositories) was done. References were hand

searched about etiological factors, pathology, prognosis and treatment of *Prameha*. Key words searched were *Bahu Drava Shleshma, Dosha Dushya Sangraha, Kleda, Dhatu Shaithilya* and *Dhatu Samhanana*. The classical references were analysed logically and put forth in the systematic way.

Understanding of the term ‘*Bahu Drava Shleshma*’.

Prameha is not an acute disease but is caused by *Dosha* collected in body in huge amounts over long duration. So, consumption of etiological factors is in large amounts, frequent and mostly habitual^[9]. Hence collection of *Dosha* in body is in relatively smaller amounts, but over long period of time. *Dosha* collected in such manner may not show any symptom hence remain unnoticed or may produce intermittent smaller illnesses, which may be vague and often disregarded as precursors of *Prameha*. But careful history taking about such sporadic illnesses, may help in precise identification of *Dosha* and *Dushya* as responsible for causing *Prameha*.

Bahu Drava Shleshma (increased *Kapha* with liquid state)^[10] is mentioned as essential factor involved in the pathogenesis. Etymology tells us that word ‘*Kapha*’ is derived from ‘*Ka*’ (*Jala*) and means that *Dosha*, which is nourished by *Jala* (water)^[11]. Also, *Chakrapanidatta* has stressed upon more liquid nature of *Kapha* as causative factor of *Prameha*^[10]. Hence the

term '*Bahu Drava Shleshma*' can be aptly expressed as not 'just accumulation of *Kapha*' but increased collection of *Jala* (~liquid) in body that is responsible for causing *Prameha*.

Concept of *Kleda*

The term *Kleda* is used at various places in classical treatises but its nature, role in maintaining body remains obscure. *Kleda* is normal body constituent that is vitiated in the pathology of *Prameha*. It is described as *Jala* (~water) in body [12],[13]. It is also mentioned as *Ardra Bhava* (moisture)[14] or *Snigdha Bhava* (lubrication)[15] in the body. It is associated with *Udaka Dhatu* (~water component body) and maintains moisture in various body tissues and systems. Fraction of *Kleda*, that is worn, is collected and forwarded by channels carrying *Udaka* towards *Basti* where it is collected and excreted from the body with urine[16]. Hence the role of *Basti* to control amount of *Udaka* and *Kleda* in body is pivotal.

Role of *Kleda* in *Dhatu Samhanana* (~firmness of body constituents) and *Dhatu Shaithilya*

In pathology of *Santarpanajanya Prameha* (caused due to etiological factors promoting accumulation), due to sedentary life style, excess consumption of curds and sugarcane derivatives etc. there is excess accumulation of *Kleda*. Hence *Dhatu Samhanana* is altered giving rise to *Dhatu Shaithilya* (flaccidity of body constituents). While in pathology of *Apatarpanajanya Prameha* (caused due to

etiological actors promoting annihilation of body constituents), due to less amount of *Kleda* the bond between particles of body tissues is weakened giving rise to flaccidity of body tissues.

Due to flaccidity of body tissues, room for collection of *Dosha* is offered[17]. *Dosha* collect in this space and become adherent and disturb normal physiology of the body tissues or organ and vitiate it, further carrying the pathology of *Prameha*.

Flaccidity of body tissues is the characteristic feature of the disease. Hence though different etiological factors are cited for *Prameha* caused due to *Kapha*, *Pitta* or *Vata*, their common effect on body is to adhere with '*Shithila Dushya*'[5],[6]. It should be kept in mind that this pathology can take place in any of the *Dushya* mentioned in *Dosha Dushya Sangraha*. Hence flaccidity of body tissues is the commonest pathological process taking place in *Prameha*.

The term '*Shaithilya*' (flaccidity) is used at different places. Commentators of *Charaka* have explained *Shaithilya* as '*Anibida Samyogiya*'[18],[19]. *Nibida* means one that is compact without spaces[20]. Hence '*Anibida Samyogiya*' is contrary, where compactness, firmness of *Dhatu* is lost and spaces are created in between. *Chakrapanidatta* has further clarified it with an example of cloth.

While weaving cloth if threads are not knitted densely, cloth will be sparse^[18]. It will keep gap between two threads. It gives crystal clear idea about *Shaithilya* and what exactly happens to the *Dushya* during pathology of *Prameha*.

Pathology taking place at *Basti* (urinary bladder)

In pathology of *Santarpanajanya Prameha*, excess *Kleda* and *Dosha*, are carried to *Basti* and obstruct its physiological function which is termed in classics as *Mutravaha Srotasa* (~urinary system) becomes '*Guru*' (~bulky). Accumulation of *Kleda* and *Dosha*, in channels associated with *Basti* makes them to lose flexibility and become bulky. Channels in *Basti* are obstructed by *Kleda* and *Dosha*, altering its function. So *Dosha* vitiate urine and change its colour, smell, taste etc. Hence alteration in normal characteristics of urine is seen which is called as '*Prabhuta Avila Mutrata*' (excess urine with turbidity), which is cardinal feature of *Prameha*^{[21],[22]}.

In *Apatarpanajanya Prameha* due to less amount of *Kleda*, flaccidity of body tissues is seen that leads to dryness. It gives opportunity for altered movement of *Vata*. So, components of body tissues are abnormally carried to the *Basti*, where they are converted to urine and thrown out of body. Similar pathology happens in case of *Madhumeha* caused due to obstruction (*Margavarodhajanya Madhumeha*). Hence it

can be understood that along with flaccidity of body tissues, pathology taking place at *Basti* is another essential factor to complete pathology of *Prameha*.

Dosha Dushya Sangraha

Sangraha is complete enumeration^[23]. *Sangraha* means collecting different descriptive topics in concise form at one place^{[24],[25]}. Hence *Dosha Dushya Sangraha* is the summary of all *Dosha* and *Dushya* taking part in pathology of a disease. In classics, *Dosha Dushya Sangraha* specifically used while describing pathology of three diseases namely – *Prameha*^[10], *Kushtha* (~skin diseases)^[26] and *Visarpa* (~erysipelas)^[27]. Every disease always has description of *Dosha Dushya Sammurchhana* (amalgamation of *Dosha* and *Dushya*)^[17], that tells how the disease configures. In diseases other than *Prameha*, *Kushtha* and *Visarpa*, *Dushya* participating in pathology are specific and limited, but for these three diseases there is array of *Dushya* and each of them can participate in pathology. So, the major difference between these three and other diseases is that symptoms seen in these three diseases can show difference if *Dushya* participating in pathology changes, while for other diseases symptoms seen will be specific due to definite and limited involvement of *Dushya*. This feature of *Prameha*, *Kushtha* and *Visarpa* can only be understood by *Dosha Dushya Sangraha*.

Only one symptom of *Prameha* is termed as common symptom – ‘*Prabhuta Avila Mutrata*’ (excess urination with turbidity)^{[21], [22]}. Symptoms according to different types of *Prameha* only include specific features of urine, which is the basis of classification of *Prameha*^{[28],[29],[30],[31],[32]}. *Sushruta* has mentioned that predecessor symptoms of *Prameha* continue after completion of pathology and should be considered as symptoms of the disease^[33]. It certainly gives some thought about *Dosha* and *Dushyas* involved. But in view of range of *Dosha* and *Dushya* capable of taking part in pathology, it will be rational to have some insight about their vast number of possible permutations and combinations involved in pathology, because each of the combination is capable of producing different symptoms and may not necessarily enlisted in classical treatises. To deal with the situation we need to understand the concept of *Dosha Dushya Sangraha*. According to variations in etiological factors some of the *Dushya* are involved in pathology at particular stage. Over a period of time, due to some reason, such as change in etiological factor, season, strength (*Bala*), etc. other *Dosha* or *Dushya* may take part in pathology. Such alterations will change symptoms of the disease. For example, if a patient of *Prameha* caused due to vitiation of *Kapha*, in whom *Meda* is the only *Dushya* seen

in initial stage, consumes substances with *Lavana* (salty) and *Alma* (sour) taste in excess quantity may vitiate *Pitta* and *Rakta*. Hence, in later stage in same patient, *Pitta* can get associated with *Kapha* and along with *Meda*, *Rakta* or *Mamsa* can get involved in pathology. In similar way other *Dushya* may get involved in pathology.

Similarly, *Prameha Pidaka* (~ skin sores) are not seen in all patients of *Prameha*, but they represent vitiation of *Mamsa*^[34]. These can also be seen in other people even without *Prameha* if *Meda* is vitiating^[35]. So, occurrence of *Prameha Pidaka* indicates a phase where *Mamsa*, *Meda* are vitiating.

Hence *Dosha Dushya Sangraha* gives us an idea about all possible permutations and combinations of *Dosha* and *Dushya* which can be involved in pathology of *Prameha*. Each of such combination will produce different symptoms in body. Hence it is very difficult to define one particular set of symptoms for *Prameha*. Hence, even if excess urine with turbidity (*Prabhuta Avila Mutrata*)^{[21],[22]} is mentioned as the only symptom of the disease, in practice every time in each patient, an attempt can be made to notice symptoms related to different *Dosha* or *Dushya* for its possible involvement in pathology of *Prameha*.

Possible methods to diagnose *Dhatu Shaithilya* (flaccidity of body tissues)

Though it is rational that range of *Dushya* proposes numerous possibilities of their combinations with *Dosha*, which can alter symptoms and warrant change in treatment, practical application of this concept is easier said than done. None of the classical treatises in *Ayurveda* clearly mention symptoms produced due to *Dhatu Shaithilya*. It might be possible that due to huge number of probable symptoms, it was left to the clinical judgment of the consultant. But review of classical treatises can guide us about the possible ways to diagnose *Dhatu Shaithilya*.

Diseases caused due to vitiation of *Dhatu* (*Dhatu Pradoshaja Vikara*)

Charaka has explained different diseases which manifest vitiation of specific *Dhatu*^[36]. These sets of diseases can become the basis to identify flaccidity of specific body tissues. These ailments are not always associated with *Prameha*, but in a known case, if any of the diseases emerges as a new entity, its association with *Prameha* can be suspected. In such scenario careful enquiry of the etiological factors and examination of the particular system in that patient may prove helpful in ascertaining relationship between the new disease and *Prameha*. For example, appearance of *Pidaka*, indicates vitiation of *Mamsa* or *Meda* and indicates involvement of *Mamsa* or *Meda* in pathology^{[34],[35]}. Similarly *Aharshanam* (loss of libido), repeated

miscarriages indicate vitiation of *Shukra*, while *Klaibya* (impotency) indicates vitiation of *Rasa* as well as *Shukra*^[36].

Symptoms of *Dhatu Sara* (excellence in quality of body tissues)

Dhatu Sara is un-fluctuating strength of a body tissue^[37]. *Ayurvedic* classics explain three levels of *Dhatu Sara*, namely – *Pravara* (excellent), *Madhyam* (average) and *Avara* (poor)^[38]. Excellent state of body tissues is related with good strength and poor state of body tissues is related with weakness. Hence manifestations of *Dhatu Asara* (poor state of body tissue) can be looked upon as possible symptoms of *Dhatu Shaithilya*.

Some diseases also lead to *Asara* (poor state) of particular body tissues. For example, in *Pandu*, it is clearly mentioned in classics that *Pitta* accumulates in the body tissues and makes them *Shithila* (flaccid) which leads to *Asara* (poor) state of *Dhatu*; especially of *Meda* and *Rakta*^[39]. Hence symptoms of *Pandu* can be considered as symptoms caused due to *Dhatu Shaithilya* (flaccidity of body tissues). In diseases caused due to *Vata* (*Vata Vyadhi*), *Sneha* (unctuousness) in systems is soaked up making them *Rikta* – *Tuchchha* (empty)^[40]. Hence manifestations of *Vata Vyadhi* can be regarded as symptoms of flaccidity of body tissues caused due to *Vata*. Description of symptoms due to vitiation of specific body tissue by *Vata* are also

mentioned in classics and can become basis to evaluate status of each *Dhatu*^[41].

Dhatu Gata Vyadhi Lakshana (Symptoms caused due to vitiation of specific Dhatu mentioned in some diseases)

Symptomatology of some diseases, such as *Kushtha* and *Jwara* (~fever), is described according to vitiation of specific *Dhatu*^{[42],[43]}. Though these symptoms are related with the specific disease, appearance of these symptoms in a case of *Prameha*, can be helpful in diagnosing the extent of the *Dosha* to that specific body tissue.

Limitations of methods to diagnose *Dhatu Shaithilya* (flaccidity of body tissues) and possible improvisation.

The biggest drawback is that, these methods depend on symptomatology mentioned to measure other diseases than *Prameha*. Hence it is questionable whether same set of symptoms can be applied to assess *Prameha* as well. Also, large number of other confounding factors and variations according to patients, age, gender, geographical location, history of past and present illnesses, may make it difficult to establish the causality beyond doubt. Hence inferences drawn by application of these methods would be speculative. But these methods can surely be the basis of studies to ascertain precise symptoms of flaccidity of body tissues in *Prameha*. In such studies observations about

symptoms seen in patients of *Prameha* at baseline and changes in symptoms seen in same patient over the period of time can be recorded along with alterations observed in diet, strolling habits etc. Changes in symptoms can be categorised according to symptoms seen in vitiation of each body tissue. Alterations in diet and strolling habits of patients can be compared with etiological factors of *Prameha* and *Hetu* of vitiation of different *Srotasa*^[44]. Collecting data about changes in biochemical parameters will also be crucial, to assess their relationship with specific body tissue (*Dhatu*). Data collected and analysed in multiple observational and case control studies upon these parameters may help in establishing a system to determine flaccidity of body tissues in cases of *Prameha*.

This system can help in various ways. It can help in defining symptoms of *Prameha* specific for that patient. Any variation in these symptoms will alarm us about change in involvement of *Dosha* and *Dushya* in pathology and help in making necessary changes in treatment. Timely changes in treatment will not only help in providing better treatment but can minimise the risk of complications as well.

Probable cure for *Prameha*

References in classics explain that *Prameha* caused due to *Kapha* can be cured^[45]. Typical

qualities of urine of patient 'cured' from *Prameha* are also mentioned^[46]. But in practice we see that a patient of *Prameha* living without any symptoms, medicines or dietary restrictions for many years is rare to find. Symptoms may show regression, medicine or dietary restriction may not be required for some time, but after some time symptoms are seen again and treatment needs to be initiated. This aspect of *Prameha* is explained in classics as '*Anusangitva*' of *Prameha*^[47]. *Anusangitva* is recurrence^[48].

This speciality can be attributed to another important feature of pathology of *Prameha*. *Nidana* (etiological factors), *Dosha* and *Dushya* are three components of pathology. These components together cause a disease. If etiological factors are weak, vitiation of *Doshas* will be less. As a result, disease produced will be weak, will not show all or strong symptoms. On the other hand, if etiological factors are strong, vitiation of *Doshas* will be more so disease produced will show strong manifestations. Also, if *Doshas* and *Dushya* do not hook up with each other, pathology will not be completed. In such case, no symptoms of disease will be seen. To complete pathology apart from *Dosha* and *Dushya* some other supporting factors may also be necessary. These factors can be various such as *Prakruti*, *Kala* (time/season), age, *Desha* (place), *Sara* (excellence of body

constituent), previous history and concurrent diseases, etc. If these supporting factors are compatible with *Dosha* or *Dushya*, pathology will be strong. If these factors are not compatible with *Dosha* and *Dushya* disease produced will be relatively weak. This feature is explained as '*Vikara Vighatakara Bhavabhava*' (presence or absence of disease promoting and prohibiting factors)^[49]. Though it is factual for all diseases, it explains pathology of *Prameha* better than any other disease. Hence in *Prameha* initial treatment of *Shodhana* (treatment that eradicates *Dosha*) and/ or *Shamana* (treatment that pacifies *Dosha*), acts on *Doshas*. It can reduce adherence of *Doshas* with body tissues. It can also reduce stress on *Basti* and regression in pathology will be seen. At such stage the symptoms will show regression and medicines may not be required at all. But at this stage short term relief seen is due to evacuation of *Doshas* and it is not the eradication of the disease pathology from its roots. The real culprit in pathology of *Prameha* is flaccidity of body tissues. So, at this stage, flaccidity of *Dhatu*s persists though regression in pathology is seen and patient is free of symptoms. When *Dosha* collect again, they may complete pathology again and recurrence is seen. So, until flaccidity of body tissues is corrected *Prameha* cannot be cured. In *Dosha Dushya Sangraha* ten *Dushya* are mentioned. As

flaccidity of body tissues becomes generalised body, it becomes difficult to correct. Hence *Prameha* is termed as '*Anusangi*' (one that recurs).

While explaining the treatment, *Charaka* has explained that after evacuation of *Doshas*, '*Santarpana*' is the only treatment that must be followed^[50]. But if persistent flaccidity of body tissues that may lead to recurrence is considered, *Santarpana* cannot be understood as only replenishing weak body tissues. But it should be understood as treatment to strengthen body tissues^[51].

One of the best treatments for flaccidity of body tissues as explained in classics is exercise. Due to exercises body parts become *Sthira* (stable)^[52] and *Ghana* (firm)^[53] reducing flaccidity. Commentators have mentioned that exercise increases compactness of body tissues^[54]. Hence in classics abundant heavy exercises such as digging a well, walking hundred *Yojana* (~900 miles) are suggested^{[55],[56]}.

Vagbhata has clearly mentioned the use of *Shilajatu* for this purpose. A person who consumes 4 kg 800 gm (one *Tula*) of *Shilajatu*, ameliorates as if new again^[57]. *Shilajatu* is mentioned as one of the best *Rasayana* (rejuvenators). It is *Anamla* (having all except sour taste), *Kashaya* (astringent), *Katu* (pungent), *Anushna Sheeta* (cold). Due to its properties it is capable of making body tissues

robust and can correct flaccidity^[58]. *Shodhala* has advised to use *Shilajatu* triturated with decoction of *Shalasaradi Gana*^[59], while *Yogaratanakara* has advised its use in morning for 21 days with sugar and milk^[60]. Various types of *Shilajatu* are explained according to specific purposes. It is a matter of research to find ways to consume such a huge quantity of *Shilajatu* and suitable type of *Shilajatu* for the purpose of correcting flaccidity in body tissues. *Charaka* has advocated use of medicated water of *Khadira* (*Acacia catechu* Willd.) for the same purpose^[61].

Concept of honeymoon remission

Word '*Prameha*' is mainly used to explain diseases related to urinary system but it also includes Diabetes mellitus told in modern sciences^[62]. In modern sciences the concept of honeymoon remission is explained about diabetes^[63]. During this phase patient shows partial or complete remission of symptoms, normal blood sugar levels and minimum or no requirement of antidiabetic agents or insulin. It is usually seen after treatment is initiated. This phase is predominantly seen in type I Diabetes mellitus cases, but a few case reports about occurrence of honeymoon phase in type II Diabetes cases are also seen^[64]. Though the justification behind honeymoon phase are not clearly understood, it can be due to increased secretion of insulin from remaining beta cells of islets of Langerhans^[65] or due to increased

uptake of sugar by adipose tissue^[66]. The stage can last for some months and again rise in sugar levels and symptoms reappear.

From *Ayurveda* point of view occurrence of such stage can be justified with the help of *dosha dushya sangraha*. Considering pathology of *prameha*, there can be stage in body when due to non compatibility of supporting reasons or after some treatment *doshas* are either evacuated or their adherence with *dhatu* is wrecked. So the symptoms may show remission reducing or nullifying need of medicine. But flaccidity of *dushya* persists, hence after *dosha* are again collected and become adherent to *dhatu* pathology of *prameha* will complete and recurrence of symptoms is seen.

Conclusion

Concept of *Dosha Dushya Sangraha* explains *Prameha* better than any other disease. Understanding pathology of *Prameha* with help of *Dosha Dushya Sangraha* gives clear idea about exact changes happening in body. It also helps us in understanding how and why various symptoms are produced at a particular stage and its significance for necessary changes in treatment. It also helps in understanding prognosis of the disease. Flaccidity of body tissues is hallmark feature of *Prameha*. Detailed study of *Dhatu Shaithilya* and *Kleda* can help in developing different parameters to examine *Kleda* and *Shaithilya*

(flaccidity) in each *Dushya*. Collection of large clinical data from patients of *Prameha* of various age groups, living at diverse locations will be needed to develop such parameters to examine *Kleda* and *Dhatu Shaithilya*. It is the need of the hour.

Whether *Prameha* can be absolutely cured can be answered positively if flaccidity of body tissues can be corrected. Use of *Shilajatu* for its role in reducing flaccidity of body tissues and possible 'cure' of *Prameha* is still unexplored. *Prameha* can be effectively treated if patient specific treatment plan is developed, according to involvement of *Dosha* and *Dushya* at each stage. Similarly developing patient specific *Pathyapathya* (dietary and strolling restrictions) and exercises and changing it from time to time according to change in pathology can be very useful in day to day practice. Attempt must be made for application of these concepts in daily practice.

REFERENCES:

1. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter 6, verse no. 8.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 445.
2. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no. 8.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 213.
3. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.37.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 214.
4. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Sutra Sthana, chapter17, verse no.79.reprint 2011,

- Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 103.
5. Narendranath Sengupta, Balaichandra Sengupta, editors. Commentary Jalpa Kalpa Taru of Gangadhar Ray on Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.6. Reprint 2002, New Delhi; Rashtriya Sanskrit Sansthan: 2002; p.1311.
 6. Narendranath Sengupta, Balaichandra Sengupta, editors. Commentary Jalpa Kalpa Taru of Gangadhar Ray on Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.9. Reprint 2002, New Delhi; Rashtriya Sanskrit Sansthan: 2002; p. 1314.
 7. Jogindranath Sen, editor. Commentary Charakopaskar of Jogindranath Senon Charaka Samhita of Charaka, Nidana Sthana, Prameha chapter4, verse no.7. 1st edition, 2nd volume, Kolkata; J N Sen: 1922; p. 842.
 8. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.7 - 34.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 212 – 214.
 9. Jogindranath Sen, editor. Commentary Charakopaskar of Jogindranath Senon Charaka Samhita of Charaka, Nidana Sthana, Prameha chapter4, verse no.4. 1st edition, 2nd volume, Kolkata; J N Sen: 1922; p. 839.
 10. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.5 – 6.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 212.
 11. Raja Radha Kant Dev. Shabdakalpa Druma; 3rd edition, 2nd volume, Chaukhamba Sanskrit Series Office, Varanasi, 1967; p. 25.
 12. Bhavaprakash of Bhavamishra, Prameha Pidaka Adhikara, chapter 38, verse no. 2. 7th edition, Varanasi; Chaukhamba Sanskrit Sansthan; 2000; p. 386.
 13. Venimadhav Shastri Joshi, Narayan Hari Joshi, editors. Ayurvediya Shabdakosha, 1st volume, Mumbai; Maharashtra Rajya Sahitya Sanskriti Mandal; 1968; p. 247.
 14. Yadavji Trikamaji, Narayan Ram, editors. Commentary: Nibandha Sangraha of Dalhana on Sushrut Samhita of Sushruta, Sutra Sthana, chapter 18, verse no. 21, 6th edition, Varanasi; Chaukhamba Orientalia; 1997;p. 88.
 15. Taranath Tarkavachaspati. Vachaspatyam, 4th edition, 3rd volume. Varanasi; Chaukhamba Sanskrit Series Office; 1990; p. 2347.
 16. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Siddhi Sthana, chapter9, verse no.4.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 716.
 17. Yadavji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Sutra Sthana, chapter. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 116.
 18. Yadavji Trikamaji, editor. Commentary: Ayurveda Deepika of Chakrapanidatta on Charak Samhita of Charaka, Sharira Sthana, chapter 4, verse no. 14. reprint 2011;Varanasi; Chaukhamba Surbharati Prakashan; 2011; p. 319.
 19. Jogindranath Sen, editor. Commentary Charakopaskar of Jogindranath Senon Charaka Samhita of Charaka, Sharira Sthana, chapter4, verse no.17. 1st edition, 2nd volume, Kolkata; J N Sen: 1922; p. 1219.
 20. Monier- Williams M. A Sanskrit English Dictionary, Reprint 2005. New Delhi: Motilal Banarasidas Publications; 2005; p. 550.
 21. Harishastri Paradkar, editor. Ashtanga Hrudaya of Vagbhata, Nidana Sthana, chapter 10, verse no. 7.reprint 1995, Varanasi; Krishnadas Academy; 1995; p. 502.
 22. Yadavji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Nidana Sthana, chapter 6, verse no. 6. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 290.
 23. Monier- Williams M. A Sanskrit English Dictionary: Reprint 2005, New Delhi: Motilal Banarasidas Publications; 2005; p. 1129.
 24. Venimadhav Shastri Joshi, Narayan Hari Joshi, editors. Ayurvediya Shabdakosha, 1st volume, Mumbai; Maharashtra Rajya Sahitya Sanskriti Mandal; 1968; p.1531.
 25. Raja Radha Kant Dev. Shabdakalpa Druma; 3rd edition, 2nd volume, Chaukhamba Sanskrit Series Office, Varanasi, 1967; p. 218.
 26. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter7, verse no.9.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 451.

27. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter21, verse no.15.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 559.
28. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.13.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 214.
29. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.29.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 214.
30. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.41.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 215.
31. Yadavaji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Nidana Sthana, chapter 6, verse no. 10. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 291.
32. Harishastri Paradkar, editor. Ashtanga Hrudaya of Vagbhata, Nidana Sthana, chapter 10, verse no. 7 – 18.reprint 1995, Varanasi; Krishnadas Academy; 1995; p. 503 – 504.
33. Yadavaji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Nidana Sthana, chapter 6, verse no. 22. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 293.
34. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.8.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 213.
35. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Sutra Sthana, chapter17, verse no.104.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 104.
36. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Sutra Sthana, chapter28, verse no.8 – 19.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 179.
37. Yadavaji Trikamaji, editor. Commentary: Ayurveda Deepika of Chakrapanidatta on Charak Samhita of Charaka, Vimana Sthana, chapter8, verse no.102. reprint 2011;Varanasi; Chaukhamba Surbharati Prakashan; 2011; p. 278.
38. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Vimana Sthana, chapter8, verse no.112.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 278.
39. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter16, verse no.4 - 6.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 526.
40. Yadavaji Trikamaji, editor. Commentary: Ayurveda Deepika of Chakrapanidatta on Charak Samhita of Charaka, Chikitsa Sthana, chapter28, verse no. 19. reprint 2011;Varanasi; Chaukhamba Surbharati Prakashan; 2011; p. 617.
41. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter28, verse no.30 – 34.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 617.
42. Yadavaji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Nidana Sthana, chapter 5, verse no. 22 – 28. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 288.
43. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter3, verse no.76 – 82.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 405 – 406.
44. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Vimana Sthana, chapter5, verse no.10 – 19.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 251.
45. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter6, verse no.7.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 445.
46. Yadavaji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Chikitsa Sthana, chapter 12, verse no. 20. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 455.
47. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Sutra Sthana, chapter25, verse no.40.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 132.
48. Yadavaji Trikamaji, editor. Commentary: Ayurveda Deepika of Chakrapanidatta on Charak Samhita of Charaka, Sutra

- Sthana, chapter25, verse no.40. reprint 2011;Varanasi; Chaukhamba Surbharati Prakashan; 2011; p. 133.
49. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Nidana Sthana, chapter4, verse no.4.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 212.
50. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter6, verse no.16.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 446.
51. Monier- Williams M. A Sanskrit English Dictionary. Reprint 2005, New Delhi; Motilal Banarasidas Publications; 2005; p. 1142.
52. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Sutra Sthana, chapter7, verse no.32.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 50.
53. Harishastri Paradkar, editor. Ashtanga Hrudaya of Vagbhata, Sutra Sthana, chapter2, verse no. 10.reprint 1995, Varanasi; Krishnadas Academy; 1995; p. 27.
54. Harishastri Paradkar, editor. Commentary: Ayurveda Rasayana of Hemadri on Ashtanga Hrudaya of Vagbhata, Sutra Sthana, chapter2, verse no. 10.reprint 1995, Varanasi; Krishnadas Academy; 1995; p. 27.
55. Harishastri Paradkar, editor. Ashtanga Hrudaya of Vagbhata, Chikitsa Sthana, chapter 12, verse no. 36 – 37.reprint 1995, Varanasi; Krishnadas Academy; 1995; p. 680.
56. Yadavji Trikamaji, Narayan Ram, editors. Sushruta Samhita of Sushruta, Chikitsa Sthana, chapter 11, verse no. 12. 6th edition, Varanasi; Chaukhamba Orientalia; 1997; p. 453.
57. Harishastri Paradkar, editor. Ashtanga Hrudaya of Vagbhata, Chikitsa Sthana, chapter 12, verse no. 43.reprint 1995, Varanasi; Krishnadas Academy; 1995; p. 680.
58. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter1, pada 3, verse no.53.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 386.
59. Gangasahaya Pandey, editor. Gadanigraha of Shodhala, Prameha Adhikara, chapter 30, verse 65 – 67. 2nd edition, Varanasi; Chaukhamba Sanskrit Sansthan; 2005; p. 674.
60. Brahmashnkar Shastri, editor. Yogaratnakara of Unknown author, Uttardha, Prameha Chikitsa, chapter 1. 6th edition, Varanasi; Chaukhamba Sanskrit Sansthan; 1997; p. 94.
61. Yadavaji Trikamaji, editor. Charaka Samhita of Charaka, Chikitsa Sthana, chapter6, verse no.46.reprint 2011, Varanasi; Chaukhamba Surbharati Prakashan: 2011; p. 448.
62. Monier- Williams M. A. Sanskrit English Dictionary. 2005, Delhi: Motilal Banarasidas Publications, 2005; p. 686.
63. Raman PG. Diabetes Mellitus in childhood and adolescence. In: Diabetes Mellitus. 3rd edn. Delhi : AITBS Publishers; 2004. p. 171 – 178.
64. Ashrafuzzaman SM, Latif ZA. Does 'Honeymoon Period' Exist In Type 2 Diabetes Mellitus? Ibrahim Med. Coll. J 2008; 2(2); p. 67-69.
65. Mortensen HB, Hougaard P, Swift P, Hansen L, Holl RW, Hoey H, et al. New Definition for the Partial Remission Period in Children and Adolescents With Type 1 Diabetes. Diabetes Care 2009; 32(8); p. 1384 – 1390.
66. Blanco FA, Carretaro JIB, Iglesias P, Balsa JA, Zamarron I, Arrieta JJ, et al. Insulin action in adipose tissue in type 1 diabetes. International Journal of General Medicine 2011; 4; p. 153–157.
- Acknowledgement:** Authors duly acknowledge guidance from Vaidya Prama Joshi, Professor in Sanskrit Samhita Siddhanta for writing this article.
- Cite this article as:** Shailesh Vinayak Deshpande, Vaishali Shailesh Deshpande, Concept of *Dosha Dushya Sangraha* and *Dhatu Shaithilya* (flaccidity of body constituents): Their importance in diagnosis, treatment and prognosis of *Prameha*, *J of Ayurveda and Hol Med (JAHM)*.2018;6(6): 38-51
- Source of support: Nil
- Conflict of interest: None Declared