



INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

Posture As A Diagnostic Tool - A Hunt In The Samhithas And Contemporary Science

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ABSTRACT

In Ayurveda the term *Pariksha* is used in place of *Pramana*. The synonyms of *Pariksha* are *Pramana*, *Saadana*, *Jnana*, *Upalabdhi*. Any abnormalities in the structural, physiological or psychological aspects of the body are a disease. For proper treatment of any disease perfect diagnosis is must. *Pariksha* helps in understanding the state and site of *Dosha*, *Dooshya* and *Dosha Dooshya Sammurchna*. *Pariksha*'s like *Prathyaksha* and *Anumana* holds relevance in the current clinical methods. Examinations help to obtain knowledge regarding the severity and intensity of morbidity of disease. *Pariksha* helps to arrive at proper diagnosis by understanding the condition of the patient. The term "*Aakrithi Pariksha*" refers to the patient's overall appearance. The "Posture" adapted by the patient in relation to the diseased condition may also comes under the umbrella of this. *Samhanana Pariksha*¹ of the tenfold examinations mentioned by *Charaka* further more will be used to evaluate *Aakrithi Pariksha*. The current paper makes an attempt to select several references in *samhithas* related to diagnose the disease depending on different postures of Individual.

Keywords - *Aakrithi Pariksha*, Posture, *Prathyaksha Pariksha*, *Samhanana Pariksha*

INTRODUCTION

Aakriti Pariksha is the examination of the outward aspects of the entire body. In Ayurvedic writings, it may be classified as *Deha prakriti pariksha*, which involves assessing the patient's physical appearance, posture and bodily structure to establish their general health. The *Acharyas* address the "*Lakshana's of Deha Prakriti*"² in this part. This is still very important in today's physical exams. *Acharyas* explained *Deha prakriti* in terms of dosha distinction. *Vata prakriti* individuals tend to have *Vibhu*, *Ashukari*, *Balavana*, *Pralapa* and unstable *Dhriti*, *Smriti*, *Buddhi*, *Cheshta* etc. whereas *Pitta* individuals have *Pitta Pandutva*, *Alpa kesha*, *akshi* and *Nakha peetatva*, *Kutula kuntala*, *Ushna sharira* and *Shourya*. while *Kapha* individuals have *Snigdha*, *Shweta*, *Balwana*, *Gambhira*, *Buddhiwan* and *Sattvawan*³. Ayurvedic literature may consider it under *Deha prakriti pariksha*, *Ashta nindita purusha* (unhealthy physique), *Vishamasana sayana* (abnormal posture, gait), *Sahaja vikritis* (congenital abnormalities) and *Mukha bhava* (facial expression)⁴. Here is an attempt to understand the various postures which have been explained in contemporary science under the umbrella of *samhithas*.

MATERIALS AND METHODS

Materials related to *Aakriti Pariksha* and contemporary references are collected from Ayurvedic *samhithas* and textbook of modern medicine respectively. Relevant materials are also obtained from medical journals.

DISCUSSION

AAKRITI PARIKSHA

Acharya Yogarathnakar described *Asthasthana Pariksha*, which is used to diagnose ailments. They are *Nadi*, *Mutra*, *Mala*, *Jihwa*, *Shabda*, *Sparsha*, *Drik*, and *Aakrithi*⁵. *Samhanana Pariksha* from the *Dashavidha Pariksha* mentioned by Charaka will be used to evaluate *Aakrithi Pariksha*⁶.

The *Aakrithi Pariksha* has a similar premise to *Samhanana Pariksha*. *Aakrithi Pariksha* refers to the *lakshanas* observed during an individual's assessment, such as *Vishamasana*, *Shayana*, *Sahaja*, *Vikriti*, and so on. An individual's illness condition is determined by an evaluation of bodily aspects such as physical structure, aging features, decubitus, and nutritional status, which can be measured by build, distribution, stature, masculine features, steady bones, and compact joints.

PRATHYAKSHA and ANUMANA AS A TOOL FOR AAKRITI PARIKSHA

त्रिविधं खलु रोगविशेषविज्ञानं भवति; तद्यथा आप्तोपदेशः, प्रत्यक्षम्, अनुमानं चेति॥⁷

These key diagnostic methods are used in *Ayurveda* for diagnosing, predicting, judging, and treating illnesses.

Prathyaksha Pramana means "firsthand information" and refers to evidence that has been observed directly. *Anumana Pramana*, as chosen by *Prathyaksha Pramana*, can assist in the logical reasoning of the subject's prospectus. *Pariksha* must be assessed using *Prathyaksha* and *Anumana Pariksha*.⁷

ATTITUDE, GENERAL APPEARANCE, POSTURE AND MOVEMENTS

"A positive stance and posture reflect a proper state of mind."

The position or attitude constantly assumed by a patient at rest or in motion is referred to as posture. The posture of a patient, when viewed from the side, may be characteristic enough to suggest a diagnosis. Anything that is noted as strikingly abnormal on the first observation should be mentioned here, whether the patients look very sick or not, are febrile or toxic, or appear breathless or are sitting comfortably or lying down comfortably, or whether the patient is conscious and well-oriented or not, or anything peculiar or specific. Posture adopted to lie down, sit, stand, or walk; whether he/she is anxious, agitated, aggressive, or cooperative or looks depressed; and whether there is anything unusual with personal cleanliness, state, and nature of clothing, etc., should be looked for. If anything is found grossly unusual, it should be mentioned in the beginning. At a glance, also assess the build, nourishment, and facial expression. Some unusual postures may be due to painful conditions; muscle spasm; rigidity (tetanus and hypocalcemia); and weakness of limbs or deformity. Patients with parkinsonism have a masked, expressionless face with paucity of movements and stooped posture⁸.

ACCORDING TO CURRENT SCIENCE, BELOW ARE A FEW EXAMPLES OF ABNORMAL GAITS⁹:

Circumducted Gait – Hemiplegia

Shuffling gait- Parkinsonism

Limping gait- Sciatica

Waddling /Duck gait- Pseudomuscular hypertrophy

Frog gait- Pseudomuscular hypertrophy

Camel gait- Neuro scapulohumoral atrophy

Stamping gait- Foot drop

Ataxia / Reeling gait – Vertigo, Alcoholic intoxication

CORRELATION IN AYURVEDA: CONCEPTUAL LINKING IN FACT

BAHIRAYAMA /OPISTHOTONUS

When the aggravated *Vata* afflicts the extensor group of tendons, it bends the body dorsally. It may be associated with stiffness of the chest, pelvis and thighs. This is considered as *Asadhya* (incurable) in nature.¹⁰

ANTRAYAMA/ EMPROSTHOTONUS

When the aggravated *Vata* afflicts the flexor group of tendons of the fingers, ankles, trunk, precordial region, chest and the neck, it give rise to convulsions, a staring look, lock jaw, pain as if the sides of the chest are fractured, as well as mucoidal vomiting and patient bends ventrally like a bow (producing hyperflexion of the body).¹¹

MANYASTAMBHA / TORTICOLIS

It is considered as *Urdwajatrugata Vikara*. In, *Manyastambha*, there is *Avarana* of *Vata* by *Kapha*, which leads to the *Sthabdhata* associated with *Shoola* and mobility of neck is impaired.¹²

AKSHEPAKA/ CONVULSIVE DISORDERS

When vitiated *Vata Dosha* permeates all *Dhamani* or nerves, it causes frequent movements/ constrictions/ contraction/ repeated convulsive episodes in the body. Because of producing convulsions.¹³

DANDAKA

When vitiated *Vata Dosha* is responsible for the stiffness of *Pani*, *Pada*, *Shira*, *Prishta*, *Shroni* that will lead the body to become stiff like a staff (log of wood) with loss of all activities. This is considered as *Asadhya*.¹⁴

APTANTRAKA/ HYSTERICAL FITS

Aggravated *Vata Dosha* moves from its place upwards to the *Hridaya*, *Shira* and *Shankha Pradesha*, due to this, the person may have bending of the body in a similar fashion as the bending of the bow, and it is associated with frequent involuntary movements and fainting, the patient breaths with difficulty with his eyes fixed or with flickering movements of the eyelids and coos like a pigeon in an unconscious state.¹⁵

DANDAPATANAKA

When vitiated *Vata* leads to the stiffness of the hands, feet, head, back and hip, the becomes stiff and the stiffness resembles stick (*Danda*), hence the name *Dandapatanaka*.¹⁶

KAMPAVATA/ PARKINSON'S DISEASE

Kampavata refers to a group of disorders in which the sufferer develops uncontrollable movements of the entire body or of the head. It is also referred to as *Vepathu*. This is caused by the vitiation of *Vata Dosha* in the body. According to the *Madhukosha* commentary, involuntary movement can occur in both the upper and lower limbs, either simultaneously or separately. It can be seen in either unilateral or bilateral appearance. The *Chala* character of the *Vata Dosha* increases as the sickness progresses.¹⁷

KALAYAKANJA/ LATHYRISM

When one trembles and limps while walking like a *Khanjana* bird, there is a loss of neurological control over the joint.¹⁸

KUBJATA/ HUNCH BACK

Kubjata is one of the *Vata Nanatmaja Vikaras*. It is a *Vata Vyadhi*, which means that exacerbated *Vata* affects bones, muscles, and joints, causing contraction and deformity. *Kubja* has a bent body. This is owing to the unusual bend in the back. Because of this curve, the individual will have a hump on his back. This condition is known as "Hunchback".¹⁹

3RD STAGE OF मर्द/ STAGE OF NARCOSIS

Reaching the third stage of intoxication, it represents the dominance of *Rajas* and *Tamas* traits, which is often referred to being like a cadaver, resulting in loss of awareness like a chopped wood, his mind covered in narcosis and bewilderment, and he looks to be dead although being awake. The person lies on the ground, less movement like a cadaver, a larger sinner than the dead, progressing through successive stages of terrible misdeeds.²⁰

SANYASA / COMA

Sanyasa is a terrible condition in which the patient does not wake up and cannot be cured without medication. An aggravated dosha affects the actions of *Vaak*, *Deha* and *Manas*. It is caused by the *Sannipaatika Dosha*, which is sheltered by *Prana Aayatana* and leads to *Akshepana* of the *Chesta*. Such person collapses like *Kastibhoota* (a log of wood) or *Mruthoopama* (a corpse). Thus, *Sanyasa* is defined as an ill person's complete lack of consciousness. Because the disease is exceedingly serious, it requires quick treatment; otherwise, the prognosis is quite negative, and the person may die as a result of *Sanyasa*.²¹

Here are the major postural disorders and syndromes classified in recent literature:²²

1. . Kyphosis (Hunchback)- Is an abnormal outward bend of the thoracic spine, resulting in a hunched look, rounded shoulders, and forward head posture.

2. Lordosis/Swayback (Excessive Inward Spine Curve) - An extreme inward curve of the lumbar spine that causes a bulging abdomen and buttocks.
3. Flat back syndrome- Is characterized by a lack of natural curvature in the lumbar spine, leading to difficulty standing for extended periods of time.
4. Scoliosis- Is a lateral curvature of the spine, typically in a C or S form.
5. Rounded shoulders- When the upper body slouches forward, weight is unevenly distributed over the spine and shoulders. This condition is widespread among persons who sit for lengthy periods of time without correct posture and support. It causes decreased spinal alignment.
6. Knock knees (Genu Valgum) - The knees touch while the feet are apart, resulting in an inward leg posture that might create uneven weight distribution.
7. Bow legs (Genu Varum): The legs curve outward, keeping the knees apart even when the feet are together. This can cause instability while walking and increased joint pressure.
8. Flat feet (Pes Planus)- Without a natural foot arch, the entire sole touches the ground, reducing shock absorption and affecting standing posture.
9. Club foot is a congenital malformation in which one or both feet twist inward, necessitating early attachment for optimal mobility.

TO SUM UP

एकंशास्त्रमधीयानोनविद्याच्छास्त्रनिश्चयम्।

तस्माद्बहुश्रुतः शास्त्रं विजानीयाच्चिकित्सकः ॥

Referring to just one shastra may result in a shallow grasp of a topic, but a thorough study of multiple shastras will help one understand any concept more thoroughly. The pathophysiology of contemporary science was explored there by searching for understandings in *samhitas* using this reference of *shastras*. Hence, it is evident that the hidden references in the *samhitas* helps in understanding the postures mentioned in modern science.

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