



Critical Appraisal of Trividha Bodhya Sangraha in understanding Neurological Studies

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ABSTRACT: Introduction: Neurological disorders (NDs) are diversified diseases affecting any of the body's Central, Peripheral and Autonomic Nervous Systems. These are comprehensively included under *vaata-vyaadhi / vaata-naanaatmaja vikaara* in *ayurveda*. *Trividha Bodhya Samgraha* (TBS) is a fundamental principle suggested for accurate diagnosis of ailments clinically. The present study was taken up to analyze the concept of TBS, *vaata-dosha* in terms of its anatomical considerations, physiological boundaries and pathological manifestations analyzing *vaata-naanaatmaja vikaara/vaata vyaadhi* with TBS through a literary review. Materials and Methods: *Moola granthaas* of Caraka samhita, *Susruta samhita* and *Asht aanga hr daya* were referred for this literary study. Initially literary study was done on TBS of Caraka samhita. Further, exploring *vaata dosha* in terms of etymology, anatomical considerations, physiological boundaries and pathological manifestations from *br hatrayi*. Later, sensitizing their relevance in the available description on *vaata-vyaadhi cikitsa*. Results: The literary study revealed the necessity for deeper understanding regarding etymology, physiological boundaries and pathological manifestations, *aatma gun a* and *aatma karma* of *vaata-dosha* under *vikaara-prakrti*, anatomical considerations in terms of *sthaana* of the involved *vaata, roga-marga* followed till the *sthaana-samsraya* under *adhist haana* and the etiological factors as *aahara-janya, vihaara- janya* factors, *maanasika* factors etc under *samuthaana-vis esha*. Thus, *Trividha Bodhya Samgraha* could be an effective diagnostic approach towards neurological disorders. Conclusion: Neurological disorders are heterogenous diseases with varied presentations clinically. *TBS* aids as an effective diagnostic approach for proper understanding of NDs. After having a thorough understanding of the disease's nature, etiology, location and etiological variables, one should begin any management.

Key words: Trividha Bodhya Sangraha, Neurological Disorder, Vaata Naanaatmaja Vikaara, Vikaara prakriti, Adhishthaanaantaraani, Samutthaana-visesha

INTRODUCTION

Neurological disorders (NDs) are a diverse group of diseases affecting the central, peripheral and autonomic nervous systems, both fatal and non-fatal.^[1] They remain key contributors to the prevalence of communicable and non-communicable diseases in India. The rising number of disability-adjusted life years (DALYs), a critical indicator of the global burden of NDs, highlights this impact. In India, non-communicable and injury-related NDs contribute more to overall DALYs than communicable ones.^[2] Therefore,

an integrated approach is essential to address the burden of NDs. The first step is bridging the gap between ayurvedic concepts of NDs and their effective management. *Trividha Bodhya Sangraha*, a principle by *Aacaarya* Caraka, aids in understanding and diagnosing the diseases that are not detailed in the texts (*anukta vyaadhis*).

The International classification of Diseases (ICD), maintained by the World Health Organization, standardizes the classification of diseases, health conditions and external causes for use in epidemiology, health management and clinical

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practice. Chapter 6 of the ICD classifies NDs, including Multiple Sclerosis (MS), under “demyelinating diseases of the Central Nervous System(CNS). “ MS is a chronic autoimmune disorder of the CNS characterized by inflammation, demyelination, gliosis and neuronal loss. Symptoms, including acute relapses, typically appear in young adults, progressing to permanent disability within 10–15 years. Early diagnosis, based on episodes separated in time and space, is crucial for reducing relapses and long-term disability.^[3]

NDs are broadly categorized under *vaata-vyaadhi* or *vaata-naanaatmaja vikaara* in *ayurveda*. Since MS does not directly correspond to any listed *vaata-naanaatmaja-vikaaras*, it is considered an *anukta vaata-vyaadhi* (diseases those not explained in the classic works). Thus, a detailed analysis is essential for its early and accurate diagnosis. This study aims to explore the ayurvedic understanding of MS through the lens of *Trividha Bodhya Sangraha (TBS)*.

Aims and Objectives

To critically analyze TBS in the light of neurological disorders vis-a- vis Multiple Sclerosis.

MATERIALS AND METHODS

Caraka Samhitaa served as the main data source of this study. Concepts were compiled from other classical texts of *ayurveda* and research articles from different online journals of standard e-database. Initially, TBS was explored in detail. Later, aspects of *vaata dosha* like *nirukti*, anatomical sites of *panca-vaata*, *akupita* and *kupita karma* in *sareera*, *aatma-roopa* and *aatma-karma* and their implications in the manifestation of *vaata naanaatmaja- vikaara* were analyzed. Contemporary understandings of Multiple Sclerosis were considered.

Finally, TBS was utilized to understand the ayurvedic perspective of Multiple Sclerosis.

Observations and Results

Trividha Bodhya Sangraha

The Caraka Samhitaa *Sootrasthaana* uniquely presents its concepts in *catushkas* (sets of four chapters with a common objective). *Roga-catushka* outlines the fundamentals for achieving *vikaara-prasamana* by providing a concise understanding of disease pathogenesis.

The concept of TBS, discussed in the *Tris̥otheeya adhyaaya* of *roga catushka*, explains the methodology for understanding disease pathogenesis. It includes: *vikaara- prakṛti* (nature of the vitiated *dosha*), *adhishṭhaanaantaraṇi* (sites of manifestation), and *samutthaana viśeṣha* (specific etiological factors).^[4] *Vikaara-prakṛti* pertains to the disease’s innate nature, *adhishṭhaanaantaraṇi* to the pathological sites and *samutthaana viśeṣha* to the etiological factors. These principles being disease-dependent (*vyaadhi -niyata*), site-dependent (*sthaana- niyata*) and individual-dependent (*purusha-niyata*) form the basis for diagnosing and managing any pathology, including unexplained diseases.

Among the *tridoshas*, *vaata-dosha* is the most significant. It is of five subtypes (*pancaatmaka*).^[5] Acaarya Shaarnghadhara describes that *pitta* and *kapha dosha*, seven *dhaatus* and three *malas* are unable to move independently and all these are activated by *vaayu* from place to place, just like the clouds in the sky by the activity of wind, highlighting the importance of *vaata dosha*.^[6]

Key Aspects of Vaata Dosha in Understanding NDs and MS

i) *Nirukti* of *vaata dosha*: Acaarya Susruta narrates the etymological derivation of *vaata* as having the qualities of movement (*gati*) and sensation (*gandhana*), which are vital in understanding neurological disorders, particularly MS.^[7]

ii) Anatomical sites of *vaata*: *vasti*, *pureeshaadhaana*, *kaṭi*, *sakthinee*, *paada*, *asthi* and *pakvaasaya* are the anatomical sites of *vaata dosha*. Among them, *pakvaasaya* is considered the most important site.^[8] Further, Caraka describes the sites for each of the five

types of *vaata dosha* in *Vaatavyaadhi Cikitsitam adhyaaya* of *Cikitsaa sthaana* as shown in Table 1.^[9] Aachaarya Vaagbhata notes the predominance of *vaata* below the umbilicus, highlighting the predominance of *vaata-dosha* in the lower body parts.^[10]

Table 1 Types of Vaata-dosha and their respective Sites		
Sl.No.	Vaata-Bheda	Sthaana
1.	<i>Praana-Vaata</i>	<i>Moordha, Urah, Kanṭha, Jihvaa, Aasya, Naasikaa</i>
2.	<i>Udaana-Vaata</i>	<i>Naabhi, Urah, Kanṭha</i>
3.	<i>Samaana-Vaata</i>	<i>Svedavaha-Doshavaha-Ambuvaha Srotas, Paarsya of agnisthaana</i>
4.	<i>Vyaana-Vaata</i>	<i>Hṛdaya, Sarvadeha-cara</i>
5.	<i>Apaana-Vaata</i>	<i>Vṛshana, Vasti, Medhra, Naabhi, Ooru, Vangkshana, Guda</i>

iii) Physiological functions of *vaata*: *Vaata* exhibits qualities like *rooksha*, *seeta*, *laghu*, *sookshma*, *cala*, *visada*, and *khara*.^[11] *Daaruna*, means *calatva*, is included as the *guna* of *vaata* in *Vaatakalaakaleeya adhyaaya*.^[12] In this regard, the *saareerika akupita* (normal) and

kupita(abnormal)*vaata karma* are described.^[13] The influence of *vaata-dosha* in the body can be understood under three levels, i.e, *sareera*, *indriya* and *manas*, as shown in Tables 2 and 3. It governs functions such as *utsaaha*, *ucchvaasa*, *nisyaasa*, *ceshtaa*, etc.^[14]

Table 2 Actions of Normal Vaata at S areera, Indriya and Manas levels	
Level	Normal Functions of Vaata
<i>Sareera</i>	<i>Tantrayantra-dharah, Ceshṭaanam pravartakah, Sareerasya sandhaanakah, Agneh sameerano, Dosha-samsoshanah, Bahirmalaanaam ksheptaa, Sthoolaanu-srotasaam bhettaa, Garbhaakrteenaam kartaa</i>
<i>Indriya</i>	<i>Sarvendriyaanaam udyejakah, sarvendriyaarthaanaam abhivodha, Pravartako vaacah, Sparsasabdayoh prakrtih, grotra-sparsanayoh moolam</i>
<i>Manas</i>	<i>Manasah niyantaa, pranetaa, Harsha-utsaahayoh yonih</i>

Table 3 Actions of Abnormal Vaata at Sareera, Indriya and Manas levels	
Level	Abnormal Functions of Vaata
<i>Sareera</i>	<i>Sareere naanaavidhaih vikaaraih upataapah, bala-varna-sukha-aayushaam upaghaataa</i>
<i>Indriya</i>	<i>Sarvendriyaani upahanti</i>
<i>Manas</i>	<i>Mano vyaaharshayati, Bhaya-Soka-Moha-Dainya-Atipralaapa</i>

iv) Pathological manifestations: *Vaata naanaatmaja-vikaara* refers to diseases caused solely by *vaata*, with 80 types listed in the texts. These disorders result from disturbances in *aatma roopa* (inherent nature) and *aatma karma*

(inherent actions).^[15] Table 4 shows the *aatma roopa* and *aatma karma* of *vaata-dosha*. Here the *aatma roopa* acts as the *kaarana*(cause) for the *kaarya* (effect), i.e., *aatma karmas*, to manifest.

Table 4 Aatma roopa and Aatma karma of Vaata-dosha		
	<i>Aatma roopa</i>	<i>Aatma karma</i>
<i>Vaata dosha</i>	<i>Raukshya, Śaitya, Laghu Vaisadya, Gati, Amoortatva and Anavasthitatva etc.</i>	<i>Sramsā, Bhramśa, Vyaasa, Sanga, Bheda, Saada, Harsha, Tarsha, Kampa, Varta, Caala, Toda, Vyathaa, Khara, Parusha, Viśada, Sushira, Aruṇa-varṇa, Kashaayaasya, virasamukhatva, Śosha, Śoola, Supti, Sangkoca, Stambha and Khanja.</i>

These are the features that help an intelligent physician to fully diagnose *vaata-vyaadhi*. The physician will not face difficulty in diagnosing the same without any doubt if these are taken into consideration while diagnosing any type of *vaata-vyaadhi*, which are *ukta* (mentioned in the text) as well as *anukta* (those of which are not detailed in the treatises).^[15]

v) *Vaata Naanaatmaja-vikaara: Aacaarya Cakrapaṇi* defines the term “*naanaatmaja*” as the diseases manifested by the vitiation of one *dosha* specifically.^[16] This means that it cannot be produced by any *dosha* other than the specific *dosha*. *Aacaarya Caraka* enlists eighty *vaata naanaatmaja-vyaadhis*, starting with *nakha-bheda*. Though there can be innumerable kinds of *naanaatmaja vikaaraas* caused by *vaata*, the above eighty important *vyaadhis* are enlisted based on their clinical importance.^[17] All these are invariably caused by the derangement of *aatmaroopa* and *aatma karma* of *vaata-dosha*.

Multiple Sclerosis: A demyelinating disease of the CNS

MS is a chronic autoimmune condition affecting the central nervous system (CNS) and is characterized by inflammation, demyelination, gliosis and neuronal loss.^[18] Pathological features include perivascular lymphocytic infiltration and myelin degradation, leading to symptoms such as: vision issues (e.g., vision loss (either monocular

or homonymous), double vision, symptoms relating to optic neuritis and pain with eye movement; vestibular symptoms (vertigo, gait imbalance); bulbar dysfunction (e.g., dysarthria, dysphagia); motor deficits (weakness leading to hemiparesis-monoparesis- paraparesis, tremors, spasticity and fatigue); sensory disturbances (loss of sensation, paresthesias, dysesthesias and a band-like sensation around the chest or the abdomen); cognitive impairments (memory impairment, executive function impairment and concentration difficulties); urinary and bowel dysfunction (incontinence, retention, urgency, constipation, diarrhea and reflux); psychiatric symptoms (depression and anxiety); and brain stem symptoms (facial muscle weakness and/or reduced facial sensations, diplopia and oscillopsia).^[18] The signs and symptoms of MS in accordance with the site of demyelination are summarized in Table 5.^[19] MS has various disease courses, including relapsing-remitting, primary progressive and secondary progressive. There is no definitive diagnostic test for MS; MRI, spinal fluid analysis, and evoked potential tests are commonly used. Current treatments focus on disease-modifying agents and symptom management, with no therapies yet available for remyelination or neural repair. This underscores the potential role of *ayurveda* in early diagnosis and effective management.^[20]

Site of demyelination	Signs	Symptoms
Spinal cord	Spasticity, Hyper reflexia, Absent abdominal reflexes	Limb weakness, Lhermitte’s symptom, Stiff legs, Sensory impairment, Erectile dysfunction, Urinary frequency and retention, Constipation
Brain stem	Internuclear ophthalmoplegia, Nystagmus, Gaze palsies, Facial sensory loss, Rubral tremor	Ataxia, Diplopia, Dysarthria, Dysphagia, Facial numbness/weakness
Cerebellum	Gait and limb ataxia, Dysarthria, Nystagmus	Unsteady gait and slurred speech
Optic nerve	Relative afferent pupillary defect, Lost color vision/acuity, Optic atrophy	Unilateral visual loss and painful eye movements
Cerebrum	Dementia (subcortical)	Poor memory, Personality change, Epilepsy

DISCUSSION

TBS: A Diagnostic Tool for *Vaata*

Naanaatmaja- vikaaras

Vikaara prakṛti (Nature of disease): *Vikaara* refers to *roga* (disease), while *prakṛti* denotes *svabhava* (nature).^[21] It encompasses causative factors such as *dosha*, *doosha*, etc., describing the signs and symptoms of a disease.^[22] The term

vaata-vyaadhi can be interpreted in two ways: ‘*vaata eva vyaadhih*’ (*Vaata* itself is the disease), agitated *vaayu* permeates the body, causing pain and “*vaatad vyaadhih*” (*Vaayu*-related ailment), *Vaayu* vitiates other *doshas* and *dooshas*, leading to diseases.^[23] Consideration of the type of *vaata-dosha* that is vitiating and its involvement in the *sampraapti* also defines the nature of the disease manifested as shown in Table 6.

<i>Vaata Bheda</i>	<i>Vaata Naanaatmaja Vikaara</i>
<i>Praana Vaata</i>	<i>Śīroruk, Lalaatabheda, Ghraana-naṣa</i>
<i>Udaana Vaata</i>	<i>Vaaksanga, Mookatva</i>
<i>Samaana Vaata</i>	<i>Vid bheda, Mukhaśoṣa</i>
<i>Vyaana Vaata</i>	<i>Paadabhramṣa, Baahuśoṣa, Kampa, Anavasthitacitta</i>
<i>Apaana Vaata</i>	<i>Oorusaada, Trikagraha, Gudabhramṣa</i>
<i>Praana + Udaana</i>	<i>Baadhirya</i>
<i>Vyaana + Apaana</i>	<i>Gr̥dhrasee</i>

Vaata-dosha gets aggravated in two distinct ways: one by *dhaatu-kshaya* (diminished tissue components) and the other by *maarga aavarana* (blockage of its circulatory channels).^[24] *Vaata naanaatmaja- vikaaras* manifest in four forms: *Kevala vaata* (*Vaata* alone is involved); *Samsṛshṭa vaata* (*Vaata* with *pitta* or *kapha dosha*); *Gata Vaata* (*Vaata* localized in a specific site); and *aavruta-vaata* (*Vaata* obstructed by other *doshas* or entities). The progression of *vaata*

naanaatmaja- vyaadhis can be chronic or acute, often presenting with indistinct early symptoms (*avyakta poorvaroopa*).^[25]

Understanding *vikaara-prakṛti* aids in diagnosing the nature and type of the *vaata naanaatmaja vyaadhis*.

Adhishṭhaanaantaraani (Sites of manifestation)

Adhishṭhaana refers to the site of disease, which could be different types of *aaśayaas* like

aamaasaya, *pakvaasaya*, *mootraasaya*, etc.^[26] *Adhishthaana* or *sthaana* can be both *dhaatus*

like *rasa* as well as *aasayaaas* like *vasti*.^[27] This aspect defines the progression of diseases and helps in diagnosis and treatment planning.

Table 7 Understanding of the stages involved under <i>Adhishthaanaantaraani</i> component	
<i>Sthaana</i>	Description
<i>Udbhava Sthaana</i>	<i>Dosha sthaana</i> like <i>Aamaas aya</i> or <i>Pakvaas aya</i> is regarded as the site for origin of the <i>Vyaadhi</i>
<i>Sancaara Sthaana</i>	<i>Srotas, Roga Maargas</i>
<i>Vyakta Sthaana</i>	<i>Anga-Pratyangas</i> of the <i>sareera</i> involved in the <i>Vyaadhi</i> where the <i>lakshanas</i> can be appreciated like i) <i>Ekaanga</i> or <i>Sarvaanga</i> ii) <i>Adho Saakha</i> , <i>Urdhva Saakha</i> , <i>Madhya Kaayagata</i> or <i>Jatroordhva</i> .

Adhishthaanaantaraani can be at the levels of the origin sites, transit sites or the manifestation sites (locations of *udbhava*, *sancaara* and *vyakti*) as shown in Table 7. Disease pathways (*roga maargas*) such as *saakhaa-gata* (extremities), *koshtha-gata* (trunk), *ormarmaasthi sandhi-gata* (vital joints); and

affected regions as *adhassaakhaa*, *oordhvasaakhaa*, *madhya-kaaya-gata* and *jatroordhva* and the affliction of *trimarma*, i.e., *siraa-hridaya-vasti*. Table 8 describes the *vaata naanaatmaja vyaadhis* based on their site of occurrence.

Table 8 Understanding <i>Vaata Naanaatmaja vyaadhis</i> based on their site of occurrence	
Site of occurrence	<i>Vaata Naanaatmaja vyaadhis</i>
<i>Saakhaagata</i>	<i>Paadabhramsa</i> , <i>Oorusaada</i> , <i>Baahuosha</i>
<i>Marmaasthi Sandhigata</i>	<i>Grdhrasee</i> , <i>Prsthagraha</i> , <i>Pakshavadha</i> , <i>Vepathu</i> , <i>Manyaastambha</i>
<i>Koshthagata</i>	<i>Udaavarta</i> , <i>Kashaayaasya</i> , <i>Mukhasosha</i>
<i>Adhah Saakhagata</i>	<i>Grdhrasee</i> , <i>Paadasuptataa</i>
<i>Oordhva Saakhagata</i>	<i>Baahuosha</i>
<i>Madhya Kaayagata</i>	<i>Trikagraha</i> , <i>Prsthagraha</i>
<i>Oordhva Jatrugata</i>	<i>Greevaastambha</i> , <i>Manyaastambha</i> , <i>Ardita</i> , <i>Bhrama</i> , <i>Vaaksanga</i>
<i>Sarvaanga Samsrita</i>	<i>Pakshavadha</i> , <i>Kampa</i> , <i>Aakshepaka</i>
<i>Manovikaara</i>	<i>Visaada</i> , <i>Ati pralaapa</i> , <i>Anavasthitacitta</i>

Proper recognition of *adhishthaana* is crucial for early diagnosis and targeted treatment.

Samutthaana-visesha (etiology): *Samutthaana* refers to the causes of disease.^[28] *Aacaarya* Caraka describes specific etiological factors leading up to *vaata-naanaatmaja vikaara*.^[29] This can be understood under the headings of *aahaara-janya*, *vihaara-janya*, *maanasaika*, *cikitsaa-vibhrama*, *avasthaa-visesha* and *abhigata-janya*, as shown in Table 9. *Samutthaana* is categorized into *baahya hetu*

(external) and *aabhyantara hetu* (internal).^[30] *Baahya hetu* is the initiating or triggering factor, such as lifestyle and diet. *Aabhyantara hetus* are the vitiated *doshas*, identified through symptoms. The intensity and nature of causative factors determine the extent of *dosha* imbalance, shaping the progression of diseases. Thus, *samutthaana-visesha* plays a major role in determining the *vikaara-prakrti* and *adhishthaana* of the disease that is going to be precipitated in the *sareera*.

Table 9
Understanding of *Saamaanya Vaata vyaadhi Nidaana* under *Samutthaana Visesha*

Components	Description
<i>Aahaara janya</i>	Rooks a- <u>Seeta</u> -Alpa-Laghu anna, Abhojana
<i>Vihaara janya</i>	<i>Ati vyavaaya</i> , <i>Atiprajaagara</i> , <i>Langhana-Plavana-Bhaara-Adhva-Vyaayaama</i> in excess, <i>Dukhhasayya-aasana</i> , <i>Divaasvapna</i> , <i>Vega sandhaarana</i>
<i>Maanasika</i>	Cinta, <u>Soka</u> , Krodha, Bhaya
<i>Cikitsaa Vibhrama</i>	Vishama upachaara, <i>Ati dosha-asrk srava</i>
<i>Avasthaa visesha</i>	Dhaatusamkshaya, <i>Rogaatikarsana</i> , Aama
<i>Abhighaata janya</i>	<i>Abhighaata</i> , <i>Marmaaghaata</i> , <i>Apatamsana</i> from <i>Gaja-Ushtra-Agva seeghra yaana</i>

TBS in Understanding Multiple Sclerosis (MS)

After the detailed explanation of *ardita*, *pakshaaghaata*, *grdhrasee*, etc., *Aacaarya* Caraka provides freedom for the *vaidya* to diagnose the rest of the disorders, like *nakhabheda* and so, caused by *vaata-dosha* according to the symptom's characteristic and the seat of affection.^[31]

Hence, assessment of the disease condition in terms of its *vikaara-prakrti*, *adhishthaana* and *samutthaana-visesha* is essential. On these guidelines, the ayurvedic understanding of MS is possible. MS is a neurodegenerative, autoimmune disease characterized by inflammation, Demyelination and neurodegeneration. From an ayurvedic perspective:

1. *Vikaara-prakrti* of MS: MS involves dysfunction in *vaata's* functions of both movement and sensation.

Based on clinical presentations, various *vaata* types may be implicated: *Prana vaayu* from respiratory dysfunction in terms of increased frequency of sneezing and dysphagia; *Udaana vaayu* from dysarthria; *Vyaana vaayu* from eye twitching, hemiparesis, etc., and *Samaana* and *apaana vaayu* from bowel issues in terms of constipation or incontinence.

In MS, the immune system attacks the myelin sheath, which is a lipid-rich fatty layersurrounding the nerve cell axons. This can be understood as

the *snaayu* is the one getting afflicted by the principle of "*medasah snaayusambhavah*".^[32]

Neurodegeneration in the form of microscopic damage to various components of the CNS, such as axons, neurons and synapses, brings about MS. This reflects upon the progressive *dhaatukshaya* taking place in the disease pathogenesis. This *dhaatukshaya* can be a resultant of the presiding *aavarana* as well. Based on the clinical presentations, the underlying pathogenesis as *dhaatukshaya* or *aavarana* can be determined. For example, symptoms like burning sensation and feeling of heaviness reflect the *pittaavarana* and *kaphaavarana*, respectively; symptoms like delayed ejaculation reflect the *sukraavrta vaata* condition, etc. Symptoms like hand muscle atrophy, etc. determine the *dhaatukshaya* nature of MS. Thus, MS reflects both *dhaatukshaya* (tissue depletion) as well as *aavarana* (obstruction) kinds of pathologies.

As seen earlier, MS has three different courses of disease progression, i.e., relapsing-remitting (RR), primary progressive (PP) and progressive-relapsing (PR). This reflects that MS can be both *aa_sukaari* or *cirakaari* in its onset and progression.

Multiple symptoms of MS resemble some of the 80 *vaata naanaatmaja vikaaras*. *Paadabhramsa* (foot drop), *paada suptataa* (numbness of the foot), *pindikodvestana* (cramps in calf muscles), *oorustambha* (stiffness of

thigh), *paangulya* (lameness), *vid-bheda* (bowel disturbance), *khanjatva* (limping), *trikagraha-prsthagraha* (stiffness in the back), *udaraveshṭana* (gripping pain in abdomen), *akshibheda* (pain in the eyes), *vartma stambha* (stiffness of eyelid), *tama* (feeling of darkness), *vishaada* (depression) etc. are seen as clinical presentations in the patients of MS. Thus, MS resembles a number of *vaata naanaatmaja-vikaaras* based on the nature of clinical presentations (*Vikaaraprakṛti*).

Adhishṭhaana of MS: MS presents with multi-system involvement affecting vision, motor and sensory functions, cognitive ability and brainstem. These symptoms align at the levels of *oordhva-jatrugata* (upper body), *madhyakaayastha* (trunk), *adhassaaakhaa-gata* (lower body) and *sarvaanga samsṛta* (systemic). Recognizing the primary site of *dosha-dooshya sammoorchana* is essential for early diagnosis and effective management.

Samutthaana Viśeṣha of MS: According to contemporary science, MS is a condition of autoimmunity. This autoimmune is linked to *aama* (metabolic toxin) formation, leading to *aavarana* and *dhaatu-kshaya* subsequently. Thus, *aama* can be the initiating factor of MS. Along with these, other causative factors of *vaata-vyaadhi* can act as triggering factors and lead up to the precipitation of MS. Proper assessment helps determine causative factors and guide personalized treatment.

To sum up, understanding MS through TBS - *vikaara Prakṛti*, *adhishṭhaana* and *samutthaana-viśeṣha* enables early diagnosis and effective management in *ayurveda*.

CONCLUSION

Neurological disorders, including Multiple Sclerosis (MS), present significant challenges in diagnosis and management due to their multifaceted nature. *Ayurveda*, with its holistic approach, offers valuable insights into

understanding these disorders through frameworks like *Trividha Bodhya Sangraha*. This principle, as detailed in *Acaarya Caraka's* works, aids in comprehending the intricate pathogenesis of diseases, including those that do not have a direct textual reference, termed *anukta vyaadhis*. By examining MS through the lens of TBS, it becomes evident that the disease aligns with the principles of *vaata-naanaatmaja vikaara*, characterized by the derangement of *vaata-dosha*. The framework offers a structured approach to assess the nature of a disease (*Vikaara prakṛti*), site of manifestation (*adhishṭhaana*), and etiological factors (*samutthaana-viśeṣha*). This not only facilitates early and accurate diagnosis but also aids in devising individualized management strategies. Given the complexity and progressive nature of MS, integrating ayurvedic principles with contemporary medical practices could potentially enhance treatment outcomes, improve patient quality of life and address the gaps in current therapeutic modalities. Thus, this study underscores the importance of TBS in addressing the disease not mentioned in the classics like Multiple Sclerosis.

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