



Review Article

ENLIGHTENING A THOUGHT OF 'PRASHNA PARIKSHA' AS A 'TOOL' IN
AYURVEDA

Anjushree Manputra^{1,*}, Yogita Jamdade², Chinmay Phadke³, Divyashree K. S.⁴

P. G. Scholar¹, Professor², Assistant Professor^{3,4}

Department of Ayurveda Samhita Siddhant^{1,2,3,4}

PDEA's College of Ayurved and Research Centre, Akurdi, Pune, Maharashtra, India.^{1,2,3,4}

Article Received on: 10/07/2019; Accepted on: 20/08/2019.

*Corresponding Author: Dr. Anjushree Manputra, E-mail: vd.apmanputra@gmail.com

ABSTRACT:

A perfect diagnosis forms the base for accurate treatment, whereas ignorance of any clue leads to haphazard or irrelevant treatment. i.e. Rognidan is foremost part of the treatment, Navachikitsak means just graduated vaidya face hurdles to diagnose the vyadhi properly and so he falls short to execute appropriate mode of Chikitsa. In Ayurveda -dwividha, trividha, chaturvidha, shadhavidh, Dashavidha pariksha methods are explained to examine the patient, Trividh pariksha deals with Darshan, Sparshan and Prashna pariksha for dignosis of vyadhi.

For diagnosis of vyadhi, a vaidya needs to study each and every causative factor keenly but there are some factors that may not be directly perceived or cannot be examined by Darshan Pariksha or Sparsha Pariksha such as Pain, distress, and suffering, history of previous illness, satmya-asatmya, aahar-vihar, pachan-kaal etc. here vaidya needs to ask details to identify the hetu for vyadhi and possible cures for the exact condition. This can be done by Prashna Pariksha means the symptoms which are Rugnasamavedya needs prashna pariksha i.e a skilled and accurate history taking and knowing about current health problems.

Prashna Pariksha is a one of the methods of precise diagnosis, where conversation with the patient or his relatives is carried out for (detail) knowledge about disease and patient, vaidya asks well directed Prashnas to rugna in which leading questions are avoided, that can result in precise diagnosis with sadhya-asadhyatava of vyadhi.

Prashna Pariksha in general and Vyadhi specific can be developed and framed in the form of Questionnaire, so as to make it easy for application. Questions can be asked in many more ways and words but, the emphasis should be given to standardise the prashna pariksha.

This thought of 'Prashna Pariksha'- as a tool for diagnosis has been enlighten in this article to emphasis need of development of validated questionnaire.

KEY WORDS: Rogi Pariksha, Trividh Pariksha, Prashna Pariksha, Nidan, Case history

INTRODUCTION:

The word 'Pariksha' is important in each and every field of knowledge. In other words Pariksha is necessary for achieving and assessing as well as verification of the knowledge.¹ Parikshan Paddhati Works on Basic Principles with a very coherent, balanced and practical thinking process i.e sidhhanta and

unambiguous diagnosis methods are explored in Samhita.i.e Rogi Parikshan padhatti. Today we live in such a developing era in which there Is availability of diagnostic tools like laboratory/ other investigations test for many diseases, indeed many patients expect a diagnosis to be made from few Blood / Lab test, inclusive Ultra

Scan. But precisely for most of the symptoms chronic vyadhi, which show complexity between Hetu and Samprapti of vyadhi, Also sometimes Physique of patient and his psychological changes can't be judged from any blood / lab test. Here, Vaidya plays important role to give best of his knowledge. This can be achieved by skilled and accurate history taking with clinical examinations. It is preferable for, saving time of vaidya and patient, saving cost of unnecessary test, and saving from latent adverse effect of some of these tests. Every clinical test / investigation / ultra-scan, has its own relevance and should be applied when it's likely to yield worthy information and not in every circumstances. Moreover it is always mentioned that these findings should be correlated clinically, thereby stating the essentiality of Clinical examination.

It's the duty of Vaidya to diagnose vyadhi i.e Nidan of vyadhi to execute appropriate mode of Chikitsa. A clear diagnosis forms the base for accurate treatment, whereas ignorance of any part/clue leads to haphazard or irrelevant treatment. i.e. Rognidan is first and foremost.²

The success of that vaidya is doubtful who though having good knowledge of grantha treats rugna without diagnosing the disease earlier.³

In Ayurveda methods of Rogi Parikshan are described as Dwividha, trividha, chaturvidha, Shadhavidh, Dashavidha Pariksha, etc.

Among them Trividh Pariksha is more rational and constitutes significant part of examinations in the field of Ayurveda, as other pariksha can be included in it. In spite of ultramodern techniques of investigation for diagnosis process, Vaidya knows the significance of Trividha Rogi Pariksha for the diagnosis by Ayurvedic methods.

Trividh Pariksha:⁴

Trividh Pariksha deals with Darshan Pariksha, Sparshan Pariksha and Prashna Pariksha - for examination of the patient.

Darshan Pariksha (direct observation)- It is the thorough observation. Factors which can be directly observed such as-Nature of general physique, type, movements, varna, shoph etc, external signs of body structure, size, shape deformities etc.⁵

Sparsha or touching sense method or Palpation method of diagnosis, in which vaidya examines the rugna by sparsha dnyana as, Palpation-percussion of abdomen, Nadi(pulse), Body temperature, skin texture and type ushna, sheet, snigdha, (moistness, smoothness dryness, thick, soft, coarseness) etc.⁶

Prashna Pariksha is a method of diagnosis, were keen conversation with the patient or his relatives is carried out for case history.⁷

Aptopdesh, Prattyaksha, Anuman and Yukti – are Chaturvidha Pariksha.⁸

Aptopdesh i.e Aptavachana means revelation of aptas, which we have to take as truth. In context of rogi –Parikshan, we can assume the rogi and his relatives as aptas because at time of Pain, and Sufferings rogi speaks only truth to get rid of trouble. Information concerning his Ahar, Vihar, Vedana, vyadhi kal etc. are precisely known only to him so vaidya has to rely on his word for vyadhi nishchiti.⁹

When there is conversation with patient, the information, which revealed is always useful in vyadhi nidan, so conversation with reference to diagnosis is simply what means Prashna Pariksha.

Need of Prashna Pariksha Tool

◇ Many Lakshanas are Subjective i.e understandable by Rugna from personal experience, entities such as Agni, Jaranshakti, Vedana, Swapana, Discomforts-Stress, Sukha-Dukha etc.¹⁰

- Acharya Charak has described that vaidya should try to know about causes of disease, types of pain, Saatmya-Asatmya, aahar-vihar, agnibal etc by Prashna Pariksha.¹¹

- Acharya Sushrut narrates that Desh, Kaal, Urges of Flatus, Urine and stool, Sharir bal-Agni bal, Time of aggravation or suppression of disease should be known by Prashna Pariksha.¹²
- Here we can state that for diagnosis of any vyadhi studying each and every causative factors is must there are some causative factors that may not directly perceived or cannot be cleared by Darshan Pariksha or Sparshan Pariksha such as Vedana, distress, and suffering, previous health history etc. here vaidya needs to ask details to identify the hetu for vyadhi and possible cures for the exact condition. This can be achieved by Prashna Pariksha.
- Also many time sign-symptoms which are seen now may be related to the upadrav or rup of any other vyadi, and vaidya gets misguided, he goes on treating the recent lakshan but the basic vyadi remains untreated, so it will be waste of time in getting involved in such line of treatment, Here well directed prashna pariksha will help.
 - > For e.g. Jwar itself is a Vyadhi of different lakshan samuha, as well as it is seen many time as a lakshana of other Vyadhi as in Pittaja vidradhi, paittika shotha, Alaji pidika, Kamala etc so a validated questionnaire is needed to have fare differential diagnosis.
- A Questionnaire will help as a tool of diagnosis. But it should be made standardize. With proper validated questions.
- It is the need of the time to enlighten this part of Trividh pariksha vidhi from different point of views and evaluate its applicability and utility.

A thought of 'Prashna Pariksha' as a tool

In modern clinical practice especially in allopathic medicine we can see they use a standard clinical format of questionnaire for

diagnosis of any disease but in field of ayurveda there is need of such development and standardization of valid questionnaire.

Prashna Pariksha can be a well framed tool of Nidan of specific roga. Which reveals core Clinical as well as theoretical (granthokta) knowledge. When critical studies have been carried out, relevant information about Prashna Pariksha vidhi is found Scattered in bruhatrayi. As the information on Prashna Pariksha is broadly outlined, it's a need for systematic arrangement to develop it as examination tool. Here many lakshan are wide in their association usage. These are to be made specific with precise meaning. In clinical decision making, process of formulating a diagnosis based Prashnas for Prashna pariksha i.e. Questionnaire must be done

Importance of Standardization of Prashna pariksha

- For case study –Understanding patient's problem from his/her perspective by allowing patients to narrate their issue in their own words and at same time vaidya should seek the answers which he wants for nidan.
- Here to avoid vague discussion Questionnaire helps.
- With well-directed (lakshan based) Prashnas –
 - a. Leading questions will be avoided.
 - b. Vaidya can assess sadhya-asadhyatava of vyadhi(Arishta lakshana).
 - c. Many of the time Proper Prashna pariksha can help in spot diagnosis.
 - d. Proper Prashna pariksha can secure patient's faith on Vaidya.
 - e. Make method of examination more precise and systematic.

So the well formulated work on Prashna pariksha vidhi will be leading vision to pinpoint diagnosis which will ultimately result into Successful Treatment.

Primary Objective (Aim):

To illuminate need of Prashna Pariksha tool for Nidan in Ayurveda.

MATERIALS:

- Available literary material in Ayurvedic classics
- Ayurvediya shabdakosham and other dictionaries.
- Articles or journals related to the topic. Other relevant study materials.

Review of Literature:

Previous work done

1. Devang K Vala. Applied Aspect And Scope Of Anumana Pariksha /Pramana With Special Reference To Pariksha And Management Of Agnimandya. Siddhanta And Darshan. Institute for Post Graduate Teaching & Research in Ayurveda, Gujarat Ayurved University, Jamnagar. 2015
2. Narayan.S. A Study On Rogi Pariksha With Special Reference To Pratyaksh Pariksha. Siddhanta And Darshan. Rajiv Gandhi University of Health Sciences, Karnataka. 2006
3. Kakapure B R. Rogee Pariksha Mein Darshana Pariksha Ka Naidanika Mahattva: Ek Adhyayana. Rog Nidan Avum Vikriti Vigyana. Govt. Ayurvedic College, Nagpur. 2001
4. Venkat Shivadu K. A Detailed Study on The Principles of Diagnostic Methods In Ayurveda And Its Implementation In Essential Hypertension. Ayurveda Siddhanta. Govt. Ayurveda College, Trivendrum. 2000
5. Sharma Ramakrishna K S. Sparsha Pariksha. Kayachikitsa. Govt. Ayurveda Medical College & Hospital, Mysore. 1998
6. Somani H K. Weightage of History And Comprehensive Examination In

Ascertaining Deha Pariksha. Kriya Sharir. Tilak Ayurved Mahavidyalaya, Pune. 1991

7. Dwivedi R P. Ayurvedeeya Paddhati Se Rogi Pariksha Vidhi Vichara. Kayachikitsa. Shri Narayan Prasad Awathy Government Ayurved College, Raipur. 1989
8. CCRAS project
9. Clinical Research Protocols for Traditional Health Sciences
10. Central Council for Research in Ayurveda and Siddha, New Delhi 2009.

OBSERVATIONS:

- Specific work has been done on Rogi Pariksha Vidhi Vichara, with special reference on Anumana Pariksha, Pratyaksh Pariksha, Darshana Pariksha, Sparsha Pariksha but no work is done on Prashna pariksha of trividha parrekshan paddhati.
- In Current ayurveda physician generations, darshan pariksha and sparshan pariksha is developed and well applied in routine practice but prashna pariksha which is carried out is not organised or lakshan based, vague or sometime irrelevant Prashna are asked.
- When the literature was reviewed the relevant information about Prashna pariksha vidhi is found Scattered in text of Sutrasthana, Viman sthana, Sharir sthana, all chapters of Nidan sthana, In indriyasthan, chikitsasthan. As the information is broadly outlined, it's a need for systematic arrangement of this examination tool for up to date physicians.
- CCRAS project has carried out a project of making Protocols for Traditional Health Sciences, here protocol is set for diagnosis on strotas parikshan basis, in these all the lakshan are not considered so it requires involvement of all hetu/ lakshans.

DISCUSSION:

- Why to have a protocol or framing a questionnaire in Ayurveda
 - > To frame or to set the universal protocol of Ayurvedic nidan paddhati a well developed standardize tool of Prashnas is need of today's era to accept Ayurveda globally, keeping this a prime vision.
 - > If the basic methodology is standardized then view of expectance of Ayurveda globally will definitely increase.
 - > There are infinite possibilities in a way of framing questions based on individual intellectual capacity, and to reach towards desired diagnosis but if a basic questionnaire is developed, it will be a concrete guideline or a proper path for thinking process as per granthokta lakshanadi description. Framing such questionnaire will ensure that any part will not be missed while thinking in specific direction for nidana.
- How the questionnaire will effectively capture the topic under one frame/structure.
 - > If the framing done as per nidanpanchaka all the detail explanations of specific vyadhi will be captured, also with help of Triskandha kosha this can be done effectively.
- How to validate the number of questions, specification of language in word or sentences.
 - > This can be developed with help of Survey study of framed questionnaire from expertise in field of Ayurveda all over India.

CONCLUSION:

- Prashna pariksha is perhaps the relevant especially in roga nidan padhatti, but it is never considered as a rigid approach towards rogi parikshan. In an applied

knowledge based system like ayurveda, the inputs from such Prashana tool can be and should be validated with other pariksha's.

- Current researches are on this way. Deeper understanding of this tool will empower fresh/ inexperienced physicians in theory and practice of Ayurveda. Standardization with its application can be a valuable tool for Ayurveda cikitsaka as well as academic research.
- This type of study can be an effective mechanism to communicate and convince the navacikitsaka for better use of prashana pariksha in clinical practise and to make them realize the importance of developing such tools for the upcoming Ayurvedic practitioner's conveniences.

REFERENCES:

- [1] Acarya Y.T. – Charaka Samhita 'Ayurveda dipika vyakhya- Cakrapanidatta, Sutrasthana; Mahacatushpado adhyaya: Chapter 10, verse 5. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-65
- [2] Acharya Y.T. – Charaka Samhita 'Ayurveda dipika vyakhya- Chakrapanidatta, Sootra Sthana; Maharog adhyay: Chapter 20, verse 20. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-115
- [3] Acharya Y.T. – Charaka Samhita 'Ayurveda dipika vyakhya- Chakrapanidatta, Sootra Sthana; Maharog adhyay: Chapter 20, verse 21. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-115
- [4] Paradkar H.S –Ashtanga Hridayam, Arunadatta and Hemadri teeka, Sootra Sthana; Ayushkameeya adhyay: Chapter 1, verse 22; Chaukhamba Sanskrit Pratishtan, Varanasi, 2010 edition, p-14
- [5] Acharya Y.T. – Charaka Samhita 'Ayurveda dipika vyakhya- Chakrapanidatta, Indriya Sthana; Varnasvariya mindriyam: Chapter 1, verse 9-12. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-355

- [6] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Indriya Sthana; Parimarshaneeyam indriyam: Chapter 3, verse 4-6. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-358-359
- [7] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Viman sthan; Janapadodhvasaniya Chapter 3, verse 8. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-241
- [8] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Sootra Sthana; Tistreshniya adhyay: Chapter 11, verse 17. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-70
- [9] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Viman sthan; Rogabhishagjitiya; Chapter 8, verse 38-chakra. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-268
- [10] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Viman sthan; Trividha Roga Vishesha Vijnaniya ; Chapter 4, verse 4-chakra. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-247
- [11] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Viman Sthana; Trividha rogvisheshvidyaniya: Chapter 4, verse6-8. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-248
- [12] Acharya Y.T. – Charaka Samhita ‘Ayurveda dipika vyakhya- Chakrapanidatta, Chikittsa Sthana; Dvivraniyachikitsa: Chapter 25, verse 22. Varanasi: Chaukhamba Sanskrit pratishtan, 2008; p-592
- [13] Acharya Y.T –Sushruta Samhita-Dalhana teeka, Sootra Sthana; Vishikhanupraveshaniyam adhyay : Chapter 10, verse 5. Varanasi: Chaukhamba Sanskrit pratishtan, 2006; p-43
- [14] CCRAS project, Clinical Research Protocols for Traditional Health Sciences, Central Council for Research in Ayurveda and Siddha, New Delhi 2009.

Cite this article as:

Anjushree Manputra, Yogita Jamdade, Chinmay Phadke, Divyashree K.S., Enlightening a thought of ‘prashna pariksha’ as a ‘tool’ in Ayurveda, PDEAS Int. J. R. Ayu. & A. Sc., 2 (1); Feb 2020, p. 25-30.