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UNDERSTANDING THE DIAGNOSTIC APPROACH OF AYURVEDA THROUGH SHADVIDHA PARIKSHA

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ABSTRACT

Accurate diagnosis is the cornerstone of effective treatment in *Ayurveda.* The classical concept of *Shadvidha Pariksha*—comprising *Shrota* (auscultation and hearing), *Ghrana* (olfaction), *Rasana* (taste perception), *Chakshu* (inspection and observation), *Sparsha* (palpation and touch), and *Prashna* (interrogation)—provides a comprehensive sensory-based diagnostic framework. These six methods enable a physician to evaluate both Roga (disease) and Rogi (patient) through direct and indirect perception. Each sense organ serves as a diagnostic instrument, helping assess *dosha* imbalance, tissue status, and systemic involvement. Chakshu Pariksha aids in visual examination of body features; Sparsha Pariksha helps determine temperature, tenderness, and texture; *Ghrana* and *Rasana* analyze odour and taste changes indicative of pathological states; *Shrota Pariksha* assists in detecting sounds of respiration, speech, or internal disturbances; and *Prashna Pariksha* provides subjective data regarding symptoms and history. This multi-sensory diagnostic system reflects the holistic and empirical approach of *Ayurveda*, correlating perceptual skills with clinical judgment. The present paper aims to elucidate the significance, method, and clinical applicability of *Shadvidha Pariksha in Rog Nidan*, emphasizing its relevance in contemporary diagnostic practice.

KEYWORDS: - *Shadvidha Pariksha, Rogi- Pariksha, Ayurverd.*

1.0 INTRODUCTION: - The key point in *Rogi pariksha* is said that the *Vaidya* should judge the *Rogi* by enlightens his/her *gyanachakshu* and the *rogi pariksha* should be done minutely ***(Gyanbuddhi pradeepen yo na vishti tatvitaha aaturasyantratmaanam.)***. By defining the importance of *Rogi pariksha* it is told that the patient should be examined by *pariksha* before any kind of treatment and the work of physician starts after that ***(Rogmado parikshet tatoanantaram oushdham, tata karma bhishak paschat gyanpurvakam samachret)*** [2] The aim of *Rogi pariksha* is also told as *Pratipatigyanam* (Knowledge)[3] The qualities of the examiner are told as: [4] *Shrutam* (listener), *Budhiwaan* (intelligent), *Smritidakshyam dhriti* (good memory with good mental strength), *Hita niveshnam* (thinks of patient benefit), *Vagavishuddhi* (clear speech – should tell clearly about the patient), *Shamawaan* (forgiver), *Dhairyam* (good patience), *Aashrayanti parikshkam* (should do the *pariksha* with stability) In *Ayurveda samhita* different *acharya* have given different *pariksha* to evaluate the patient. These are as follows: [5-12]

Table 1: Classification of Pariksha

Dwividha pariksha	*Pratyaksha, Anumana*
Trividha pariksha	*Pratyaksha, Anumana, Aaptopdesha*
	Darshana, Sparshana, Prashana
Chaturvidha pariksha	*Pratyaksha, Anumana, Aaptopdesha, Yukti*
Shadvidha pariksha	***Panch gyanendriya evam Prashana pariksha***
Astavidha pariksha	*Nadi, Mutra, Mala, Jihwa, Shabda, Sparsha, Druk, Aakruti*
Dashavidha pariksha	*Prakruti, Vikruti, Sara, Samhanana, Pramana, Satmya, Satwa, Ahara Shakti, Vyayama Shakti, Vaya*
Dwadasha pariksha	*Ayu, Vyadhi, Agni, Vaya, Ritu, Deha, Bala, Satwa, Satmya, Prakruti, Bheshaja, Desha*

1.1 Shad Vidha Pareeksha:

Shad vidha Pareeksha is view on *Roga pareeksha* and *Rogi pareeksha* for diagnosis and prognosis of disease, has described by Susruta helps to acquire complete knowledge of patient through six-fold examination technique i.e *pancha ghnanendriya pariksha* and *prashna pariksha.* [13]

षड्विधो हि रोगाणां विज्ञानोपायः तद्यथा-पञ्चभिः श्रोत्रादिभिः प्रश्नेन चेति । (सु.सू. 10/4)

1. *Shrotendriya Pareeksha*
2. *Sparshanendriya Pareeksha*
3. *Chakshurendriya Pareeksha*
4. *Rasanendriya Pareeksha*
5. *Ghranendriya Pareeksha*
6. *Prashna Pareeksha*

Shrontendriya Pareeksha: - [14-17]

Shront **"श्रोत्रं शब्दस्य ग्रहणं कुर्यात्।" (च.शा. 8/8)**

The function of the auditory sense organ is the perception of sound.

Indriya **"इन्द्रियाणां चापरिक्षणं प्राणापेक्षया भवति।" (च.इ. 1/3)**

Examination of the sense organs is done to asses the strength and vitality of prana in an individual.

Pareeksha **"अन्त्रकूजनं, सन्धिस्फुटनमङ्गुलीपर्वणां च, स्वरविशेषांश्च,**

ये चान्येऽपि केचिच्छरीरोपगताः शब्दाः स्युस्ताञ्श्रोत्रेण परीक्षेत ।" (च.वि. 4/7)

"Bowel sounds, Joint crepetations and other peculiar sounds produced in the body should be examined through auscultation."

Shwas - *Bhastrika Dhman Wat,* (Noisy Blowing sound of respiration)

Tamak Shwas - *Kapot Eva Koojanam, (*Loud wheezing resembling the sound of pigeons)

Maha Shwasam - *Matta Vrushabh Eva,* (Laborous noisy respiration like that of angry bull)

Kasa - *Bhinna Kansya Tulya,* (like the sound made by striking the bronze pot)

Krukkaj Kasa - Whoop like sound in whooping cough.

Swarabheda - *Gardabha wat swara,* (Donkey like voice in Hoarseness of voice)

Hridroga - *Hritdrava Eti Dad Dadika,* (The *Dhad Dhad* sound in tachycardia)

तत्र श्रोत्रेन्द्रियविज्ञेया विशेषा रोगेषु व्रणास्रावविज्ञानीयादिषु वक्ष्यन्ते-

तत्र सफेनं रक्तमीर-यन्ननिलः सशब्दो निर्गच्छति' इत्येवमादयः । (सु. सू. 10/5)

This method of examination helps to identify abnormalities in various disease by hearing. E.g-

1. Gargling sound in abdomen, *Atopa* in *Amatisara, Adhmana* in *Udavarta.*

2. *Sandhi Sputana* i.e cracking sound, cerpitus in the joints.

3. Change in the voice of patients like *swara bedha* found in *vataja kasa, Anuswara* in *Medaja galaganda, Khara*

swara in *Vataja Kasa.*

4. Abnormal sounds produced in various disease like *Hikka, Swasa, Kasa..*

Auscultation:

Auscultation is general term refers to the process of hearing to sounds within Boby during examination.

Eg. Examination of lungs, heart, abdomen

1. B/I air entry, abnormal sounds of lungs like wheezing, Ronchi, crackling and stridor

2. Heart sounds, abnormal heart sounds like murmur

3. Abdominal sounds like bowel sounds, peristaltic sounds, gurgling sound, rumbling sound

4. Voice of patients like hoarseness of voice, diminished voice

Sparshanendriya Pareeksha -

Palpation Examination as Per *Acharya Charaka-*

a) **स्पर्श च पाणिना प्रकृतिविकृतियुक्तम् । (च.वि. 4/7)**

Touch in healthy and diseased states should be assessed through palpation.

स्पर्शप्राधान्येनैवावुरस्यायुषः प्रमाणावशेषं जिज्ञासुः प्रकृतिस्थेन पाणिना शरीरमस्य केवलं स्पृशेत्, परिमर्शयेद् वाऽन्येन । परिमृशता तु खल्वातुरशरीरमिमे भावास्तत्र तत्रावबोद्धव्या भवन्ति । तद्यथा- सततं स्पन्दमानानां शरीरदेशानामस्पन्दनं, नित्योष्मणां शीतीभावः, मृदुनां दारुणत्वं, श्लक्ष्णनां खरत्वं, सतामसद्भावः, सन्धीनां संसभ्रंशच्यवनानि; मांसशोणितयोर्वोतीभावः, दारुणत्वं, स्वेदानुवबंधः, स्तम्भो वाः, यच्चान्यदपि किनिवोदृशं स्पर्शानां लक्षणं भूशविकृतमनिमित्तं स्यात् । इति लक्षणं स्पृश्यार्ना भावानामुक्तं समासेन ॥ (च.इ. 3/4)

The physician who is keen to know the remaining life span of the patient by way of palpation then he should palpate the entire body of the patient. While doing so, he should record the following things: [18]

- Whether there is loss of pulsation in the body areas which are constantly pulsating?

(तद्यथा- सततं स्पन्दमानानां शरीरदेशानामस्पन्दनं)

- Whether the body parts which are usually warm are getting cold?

(नित्योष्मणां शीतीभावः)

- Whether the body parts which are usually smooth are feeling rough?

(शीतीभावः, मृदुनां दारुणत्वं, श्लक्ष्णनां खरत्वं)

- Whether there is feeling of loss of sensation on palpation?

(सतामसद्भावः)

- Whether the joints are felt loosened or dislocated on palpation ?

(सन्धीनां संसभ्रंशच्यवनानि)

- Whether there is loss of skeletal mass on palpation?

(मांसशोणितयोर्वोतीभावः)

- Whether there is profuse sweating?

(स्वेदानुवबंधः)

- Whether there is generalized stiffness?

(स्तम्भो वाः)

- Any other palpable sign appearing without any reason ?

(स्पर्शानां लक्षणं भूशविकृतमनिमित्तं स्यात्)

Palpation Examination as Per *Acharya Sushruta:* -

स्पर्शनेन्द्रियविज्ञेयाः शीतोष्णश्लक्ष्णकर्कश-मृदुकठिनत्वादयः (स्पर्शविशेषाः) ज्वरशोफादिषु । (सु. सू. 10/5)

Cold, Hot, Smooth, Rough, Soft, Hard etc. tactile perceptions in fever, edema etc. should be assessed through palpation.

1. *Chakshurendriya Pareeksha*

I.वर्णसंस्थानप्रमाणच्छायाः, शरीरप्रकृतिविकारी,

चक्षुर्वेषयिकाणि यानि चान्यान्यनुक्तानि तानि चक्षुषा परीक्षेत । (च.वि. 4/7)

II.चक्षुरिन्द्रियविज्ञेयाः शरीरोपचयापचयायुर्लक्षण-बलवर्णविकारादयः । (सु. सू. 10/5)

Colour, shape, measurement and complexion *(Varna samsthana pramana chaya Shareera prakruti vikaro).* Natural & unnatural changes in body. Other findings examined visually like signs of the disease, lusture and other Abnormalities. In case of *Mrutbhakshanaja pandu Shoona gandakshi koot bhruhu* is told which is perceivable by *netrendriya* [19]. Close observation of the details of the patients appearance, behaviour, movement, facial expression, mood, body habitués, conditioning, skin conditions like petechie, eye movements, abdominal counter (flat, rounded, protubent, scaphoid, distended) It also helps to detect age, change in colour, structure,

size, shape, deformities, extremities oedema, gait, symmetry appearance, nutritional status, height, weight, symmetrical respiration, any scars, visible masses, swelling, tumor etc.

Table No 2: Elements to be inspected

वर्ण	Colour of the body
पीत शुक्ल वर्णम मूत्र, छर्दी आदि	Colour of the body fluids (Ex. Urine, Vomitus, etc.)
संस्थान	Size and Shape
प्रमाण	Proportion
छाया	Lusture
शरीर प्रकृति	Look or Constitution of Patient
शरीर उपचय अपचय	Nutrition (Wasting / Healthy)
इन्द्रिय आदि	Sensory Motor Activities
बल	Power
विकार आदि	Features of the Diseases
आयु लक्षण	Ayu Laxanas

2. ***Rasanendriya Pareeksha***

a. रसं तु खल्वातुरत्रशरीरगतमिन्द्रियवेषयिक-मप्यनुमानादवगच्छेत्,

न ह्यस्य प्रत्यक्षेण ग्रहणमुपपद्यते, तस्मादातुरपरिप्रश्नेनैवातुरमुखरसं विद्यात्,

यूकापसपं त्वस्य शरीरवैरस्यं, मक्षिकोपसर्पणेन शरीरमाधुर्य,

लोहितपित्तसन्देहे तु कि धारिलोहितं लोहितपित्तं वेति

श्वकाकभक्षणाद् घारिलोहितमभक्षणाल्लोहितपित्तगि अनुमातव्यम्,

एवमन्यानप्यातुर-शरीरगतान् रसाननुमिमीत। (च.वि. 4/7)

b. रसनेन्द्रियविज्ञेयाः प्रमेहादिषु रसविशेषाः । (सु.सू.10/5)

a. Although taste is a sensation, it cannot be directly examined on patient. By interrogating the patient, the taste of his or her mouth could be known. By observing the lice on patient's body, physician should infer the pathological taste of the body. By observing the flies on patient's body physician should assume sweet taste of the body. If there is doubt of disease being *Raktapitta,* the little amount of blood should be fed to either dog or crow. If they taste it then it is the pure blood. If they do not mean it is the *Rakta-Pitta.*

b. Now a day as well as in ancient days it was very difficult to implement this *Pramana* practically. So, indirect method of *Rasnendriya pariksha* has been given by noting the behaviour of insects like ant's flies, lice etc. Though this method is an *Anumana pariksha,* it can be substituted for *Pratyaksha* as it is difficult to do with physician's tongue.

c. ***Rasa Vikruti (*Taste Alteration) -** The examiner who wishes to assess the remaining lifespan of a patient through taste should inquire directly about any changes in taste perception. Such observations can also be inferred through examination. The body taste of a person nearing death is said to change in two distinct ways: in some individuals, it becomes unpleasant, while in others, it turns excessively sweet.

In patients with an unpleasant body taste, flies, lice, stinging insects, and mosquitoes tend to avoid them. Conversely, when the body taste becomes excessively sweet, flies and insects are frequently attracted to the patient, even after bathing and applying perfumes or cosmetics.

3. *Ghranendriya Pareeksha-*

a. घ्राणेन्द्रियविज्ञेया अरिष्टलिङ्गादिषु व्रणानामव्रणानां च गन्धविशेषाः। (सु.सू.10/5)

Normal and abnormal smells of the whole body may be detected by organ of smell *(Gandhastu khalu sarwa shareera gatanaam)* [20] e.g. while describing the *arista laxanas*, it is said that the smell of different flowers if

arising from the body, it indicates recent death of the person. Likewise in Kussmaul's breathing, fruity odour is

significant.

b. गन्धांस्तु खलु सर्वशरीरगतानातुरस्य प्रकृति वैकारिकान घ्रणेन परीक्षेत। (च.वि. 4/7)

The normal and abnormal odour of patient's body and body contents should be examined by nose. Following odour abnormalities could be noticed in body and body fluids.

Table No 3: Abnormal Odour

1	Odour of alcohol	Recognizable on the breath
2	Odour of diabetic ketoacidosis	Sweet odour
3	Uremia	Ammonical or fishy odour
4	Pregnant woman	Bird or a goat odour

4. *Prashna Pareeksha -*

Interrogation is the beginning of doctor-patient relationship. Obtaining a proper history from the patient largely depends on their faith in the doctor. So, as earlier mentioned doctor must put the patient at ease by virtue of his caring and friendly attitude and should encourage the patient to talk freely. No particular technique is useful in all the situations. Approach varies as per the state of the patient and time available. in Indian medical science *(Ayurveda)* it has been mentioned before 2000 BC very systematically and scientifically. As per *Sushruta* the various information related to the patient required for reaching the diagnosis of a disease should be obtained by interrogating the patient.

Interrogation As Per *Acharya Sushruta*

According to *acharya Sushruta* following things should be noted through interrogation:

प्रश्नेन च विजानीयाद्देशं कालं जातिं सात्म्यमातङ्कसमुत्पत्तिं वेदनासमुच्छ्रायं बलमन्तरग्निं वातमूत्रपुरीषाणां प्रवृत्तिमप्रवृत्तिं कालप्रकर्षादींश्च विशेषान् । (सु.सू. 10/5)

Table No 4: Points of interrogation

1	देश	Address/Residence
2	काल	Age and Season
3	जाति	Caste and Gender
4	सात्म्य	Compatibility of Habits and Addictions
5	आतंक समुत्पत्ति	History of present illness
6	वेदना समुच्छ्रायं	Presenting Complaints
7	बल	Strength/Power
8	अग्नि	Appetite
9	वात प्रवृति अप्रवृति	Passage of flatus - Present/Absent
10	मूत्र प्रवृति अप्रवृति	Urination-Present/Absent
11	पुरीष प्रवृति अप्रवृति	Defecation-Present/Absent
12	काल प्रकर्ष	Duration and aggravation of illness
13	आदि	Family history, occupational history etc.
14	च	As per *Dalhan*, and *Cha'* stands for Genito urinary discharge examination

2.0 Discussion:

Clinical examination forms the cornerstone of clinical medicine, beginning with careful observation of the patient and proceeding toward the planning of appropriate therapeutic interventions. *Sushruta* emphasizes the vital importance of clinical examination, which encompasses the assessment of both *Roga* (disease) and *Rogi* (patient).

The concept of *Shadvidha Pareeksha* fulfils the dual objectives of diagnosis and prognosis, encompassing every step from detailed history-taking to systematic examination. The effectiveness of treatment fundamentally depends on the accuracy of diagnosis, which, in turn, relies on the physician's skill in patient examination using various diagnostic tools.

Ayurvedic texts and modern medical science both describe diverse diagnostic methodologies. The *Shrotendriya, Chakshurendriya, Sparshanendriya, and Prashna Pareeksha* described in *Ayurveda* can be compared to the modern diagnostic methods of Auscultation, Inspection, Palpation, and Interrogation, respectively.

3.0 Conclusion:

The exploration of the *Ayurvedic* concept of *Shadvidha Pariksha* in this review highlights its comprehensive role in the diagnosis and prognosis of diseases. Its holistic approach, encompassing physical, mental, and spiritual dimensions, provides valuable insights applicable to modern healthcare. When integrated with contemporary diagnostic practices, this ancient methodology can contribute to more effective, individualized, and balance-oriented healthcare strategies, ultimately promoting overall well-being.

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