



Review Article

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RECONCEPTUALIZING THE TRIDOSHA THEORY IN SOWA-RIGPA MEDICINE: ETIOLOGY, DIAGNOSIS, AND THERAPEUTIC APPROACHES

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Abstract

Sowa-Rigpa, the traditional medical system of the Himalayan region, offers a comprehensive and integrative understanding of health based on the dynamic balance of Tridosha (*nyepa sum*): *rLung* (wind), *mKhris-pa* (bile), and *Bad-kan* (phlegm). These humours originate from the interaction of the five cosmo-physical elements (*Panchamahabhuta*)—earth, water, fire, air, and space—and regulate physiological, psychological, and pathological processes. This article provides a systematic examination of the etiology, symptomatology, diagnostic methods, and therapeutic interventions associated with humoral imbalance. Drawing upon classical texts such as the *rGyud-bZhi* and comparative insights from Ayurveda, the study highlights the role of diet, behaviour, and environmental adaptation in disease prevention and treatment. The paper further discusses the relevance of Sowa-Rigpa in addressing modern lifestyle disorders and explores its potential integration into contemporary healthcare systems.

Keywords:

Sowa-Rigpa, Nyepa Sum, rLung, mKhris-pa, Bad-kan, humoral theory, traditional medicine, integrative healthcare.

1. Introduction

Traditional systems of medicine continue to provide valuable frameworks for understanding health beyond reductionist biomedical models. Among these, Sowa-Rigpa literally the “Science of Healing” stands as a sophisticated and holistic medical tradition practiced across regions such as India (Ladakh, Himachal Pradesh), Tibet, Bhutan, and Mongolia.

The foundational medical text, the *rGyud-bZhi* (Four Tantras), systematically presents knowledge related to anatomy, physiology, pathology, diagnosis, and therapeutics (Clark, 1995). Central to this system is the theory of the Tridosha (*nyepa sum*): *rLung*, *mKhris-pa*, and *Bad-kan*. These humours regulate bodily functions and mental states, and their equilibrium is essential for health.

Disturbances in this balance arising from improper diet, behaviour, environmental factors, or emotional disturbances lead to disease (Gyatso, 2015). This paper aims to present a comprehensive exploration of the theoretical and clinical dimensions of the three humours and to assess their relevance within contemporary healthcare discourse.

2. Literature Review

Scholarly engagement with Sowa-Rigpa has expanded considerably in recent decades. Early translations of the *rGyud-bZhi* by Clark (1995) enabled wider academic access to Tibetan medical knowledge. Gyatso (2015) further contextualized the system within its intellectual and cultural history, emphasizing its integration of Buddhist philosophy and empirical observation.

Comparative scholarship has identified strong parallels between Sowa-Rigpa and Ayurveda, particularly regarding the elemental composition of the body and the role of humoral balance in health (Dash, 2003). Both traditions emphasize preventive healthcare through diet, lifestyle, and seasonal adaptation.

Recent research has focused on pharmacological validation of herbal medicines and clinical efficacy. However, there remains a significant gap in integrative analyses that bridge classical theory with modern biomedical science.

3. Theoretical Foundations

3.1 The Five Cosmo-Physical Elements

The Sowa-Rigpa system conceptualizes the human body as composed of five fundamental elements (*Pancha-mahabhuta*):

- **Sa (Earth):** Provides structure and physical stability

- **Chu (Water):** Maintains fluid balance and cohesion
- **Me (Fire):** Governs metabolism and body heat
- **rLung (Air):** Facilitates movement and circulation
- **Namkha (Space):** Allows spatial organization and bodily cavities

These elements function in dynamic interaction, forming the basis of physiological processes.

3.2 The Three Humours (Nyepa Sum)

The three humours arise from specific combinations of these elements:

- **rLung (Wind):** Associated with air and space; regulates movement, respiration, and neural processes
- **mKhris-pa (Bile):** Associated with fire; governs digestion, metabolism, and thermoregulation
- **Bad-kan (Phlegm):** Associated with earth and water; responsible for structure, lubrication, and stability

Health is maintained through their equilibrium, while imbalance leads to pathological conditions.

3.3 Qualitative Attributes of Humours

Humour	Dominant Qualities	Functional Role
rLung	Light, cold, mobile, subtle	Movement, nervous regulation
mKhris-pa	Hot, sharp, oily	Digestion, metabolism
Bad-kan	Heavy, cold, stable, smooth	Structure, lubrication

4. Methodology

This study adopts a qualitative and analytical methodology grounded in textual analysis and comparative evaluation.

4.1 Data Sources

- Classical Sowa-Rigpa texts (*rGyud-bZhi*)
- Traditional commentaries

- Modern academic literature

4.2 Analytical Framework

The study is structured around:

- Etiology
- Symptomatology
- Diagnostic methods
- Therapeutic approaches

4.3 Comparative Approach

Conceptual parallels with Ayurveda are examined to contextualize findings within broader traditional medical systems.

5. Etiology of Humoral Disorders

5.1 General Causes

Disease arises from disruptions in humoral balance due to:

- Improper diet
- Improper behavior
- Seasonal and climatic changes
- Environmental and psychosocial influences (Norbu, 2001)

5.2 Role of Taste in Humoral Imbalance

Taste	Effect on Humours
Sweet	Increases Bad-kan
Sour	Increases mKhris-pa
Salty	Increases mKhris-pa
Bitter	Increases rLung and Bad-kan
Pungent	Increases mKhris-pa
Astringent	Increases rLung and Bad-kan

5.3 Specific Etiological Factors

rLung Disorders

- Causes: Stress, fasting, excessive physical or mental exertion
- Diet: Dry, light, cold foods
- Psychological factors: Anxiety, fear

mKhris-pa Disorders

- Causes: Heat exposure, anger, excessive activity
- Diet: Spicy, oily, sour foods
- Lifestyle: Overwork

Bad-kan Disorders

- Causes: Sedentary habits, excessive sleep
- Diet: Heavy, oily, cold foods
- Environment: Damp and cold conditions

6. Diagnostic Methods

Diagnosis in Sowa-Rigpa is based on three principal methods:

1. **Inspection (Visual Observation):** Examination of tongue, urine, and complexion
2. **Palpation:** Pulse diagnosis, reflecting humoral states
3. **Interrogation:** Detailed patient history

Pulse diagnosis remains a highly refined technique within the system (Clark, 1995).

7. Clinical Manifestations

7.1 rLung Disorders

- Dryness, tremors
- Anxiety, insomnia
- Irregular pulse

7.2 mKhris-pa Disorders

- Fever, inflammation

- Irritability
- Digestive disturbances

7.3 Bad-kan Disorders

- Lethargy
- Weak digestion
- Excess mucus production

8. Therapeutic Approaches

8.1 Principle of Opposites

Treatment is based on counteracting the qualities of the aggravated humour.

8.2 Dietary Therapy

- rLung: Warm, nourishing, oily foods
- mKhris-pa: Cooling, mild foods
- Bad-kan: Light, warming, stimulating foods

8.3 Behavioral Therapy

- rLung: Rest, warmth, routine
- mKhris-pa: Cooling activities, emotional regulation
- Bad-kan: Physical activity, stimulation

8.4 Pharmacological Therapy

Herbal formulations are designed according to:

- Six tastes
- Eight potencies
- Post-digestive effects

8.5 Accessory Therapies

- Massage therapy
- Moxibustion

- Bloodletting
- External herbal applications

9. Discussion

Sowa-Rigpa provides a holistic framework that aligns closely with modern preventive and lifestyle medicine. Its emphasis on individualized treatment, diet, and behaviour mirrors current approaches to managing chronic diseases such as diabetes, hypertension, and mental health disorders.

Although sharing foundational similarities with Ayurveda, Sowa-Rigpa exhibits distinct adaptations shaped by Himalayan ecology and Buddhist philosophical traditions. These contribute to its unique diagnostic and therapeutic approaches.

However, integration into modern healthcare systems remains limited due to challenges such as lack of standardized clinical trials, limited global awareness, and insufficient scientific validation. Addressing these challenges requires interdisciplinary collaboration and methodological innovation.

10. Conclusion

The Tridosha (three humours) —*rLung*, *mKhris-pa*, and *Bad-kan*—form the core of Sowa-Rigpa medical theory. Their equilibrium is essential for maintaining health, while imbalance leads to disease. Through a combination of dietary, behavioural, and pharmacological interventions, Sowa-Rigpa offers a comprehensive and sustainable healthcare model.

Its holistic approach, emphasizing harmony between body, mind, and environment, remains highly relevant in contemporary healthcare. Integrating its principles with modern biomedical science presents a promising pathway for developing more inclusive and patient-centered medical systems.

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