

**A literary study of *Purvarupa* (Prodromal features) w. s. r.
to *prameha vyadhi Purvarupa*.**

Archana R. Gharge^{*1}, Rajiv Mundane²

1. M. D., Ph. D. (Sch.), Professor & HOD, *Rog Nidan & Vikruti Vigyan Dept.*,
Y. M. T. Ayurvedic Medical College & Hospital, Kharghar, Navi Mumbai, M. S.,
India.
2. Professor, HOD, Rog Nidan and Vikruti Vigyan Dept. & Dean,
D. M. M. Ayurvedic Mahavidyalaya, Yavatmal, M. S., India.

***Corresponding authors:** Ph. no. 9821741702, dr.archanapatil@rediffmail.com

ABSTRACT

In *Ayurvedic* science, diagnosis of disease is done with help of *Nidan Panchaka*. In five -fold examination, *Purvarupa* is one of the component part of *Nidan Panchak*. *Purvarupa* means prodromal features of diseases. Any disease does not appear suddenly . Time taken between etiological factors intake to appearance of specific disease is of *purvarupa*. They are premonitory features that manifest before the actual emergence of disease. These symptoms could be *doshaj* or *adoshaj*. *Purvarupa* are of two types, general and specific. Careful understanding of *purvarupa* helps in differential diagnosis of diseases. *Purvarupa* also helps to determine the prognosis of any disease. Appearance of all *purvarupa* of any disease are considered of bad prognosis and incurable. At *purvarupa* stage, treatment modalities for any disease are simpler or easier. So the knowledge of *Purvarupa* is essential. In *samhitas* the *purvarupa* (prodromal features) of *Prameha vyadhi* are described very well. As the *Prameha vyadhi* is *asadhya* in its chronic stage as well as it may cause

many serious complications if it is not treated and controlled in early stage, it is very important to know the disease in very primary stage. This is possible by detecting the *prameha purvarupas* in patient as earlier as we can. So that we can diagnose this stage and can prevent to develop it further in *vyaktavastha*. So in this article an attempt is made to elaborate the importance of *Purvarupas* and to compile the *purvarupas* of *Prameha* from all *Ayurvedic samhitas*.

Keywords: *Purvarupa, Sthansanshraya, Dosha-dushya sammurchhna, Prodromal features, Prameha purvarupa.*

INTRODUCTION:

Ayurveda is the science which gives concept of maintenance of health in healthy person (*Swasthasya swasthyarakshanam*) and treatment of diseased (*Aturasya vikar prashamanam cha*). Health is maintained by following proper *ahar, vihar, vyayam* etc. Treatment of diseases is done with the *nidanparivarjan, shaman* and *shodhan upakramas*. Diagnosis of the disease is done by using various measures. *Nidan*

panchak is one of the important tools used for diagnosis of diseases. Concept of *roga pariksha* and *rogi pariksha* are separate in *Ayurveda*. *Roga pariksha* is done with help of *Nidan panchak* which is also called as *Vyadhi dyanopaya*. As the name suggests *nidan panchak* are five-fold principles for diagnosis of any disease. The *Nidan*, *Purvarupa*, *Rupa*, *Upashaya* and *Samprapti* are five parts of *nidan panchak*. Individually or collectively, these all play a vital role in diagnosis of a disease. *Vyadhi* in *Ayurveda* is a complex terminology which can be explained through Pancha Nidana theory & each *vyadhi* is manifested as outcome of *Samprapti*. The *hetu* (etiological factors), pathogenesis of disease (*samprapti*), prognosis, Clinical features (Signs and Symptoms) etc. are all determined by *nidan panchak*. According to these all factors treatment of disease is decided. *Purvarupa* are prodromal features or signs of future disease. Due to continuous *nidansevan*, *doshas* are aggravated which in turn vitiate the *dushyas* i. e. *rasa*, *rakta* etc. causing *dosha* – *dushya sammurchhana*, giving rise to the *purvarupa* of *vyadhi*. This generally occurs in the fourth *Kriyakal* i. e. *sthansanshray avastha* of *Shatkriyakal*.

Purvaroopa which is an important factor of *Nidan Panchak* is defined as the typical features that are seen before manifestation of any disease. *Prameha* which is included under *Medavaha Srotodusthi* can be defined as metabolic disorder in which patients urinate frequently & profusely. It is considered as ‘silent killer’ in today’s society. It is estimated that 77.2 million people in India, who are suffering from Pre-Diabetic condition. Diabetes is the most common metabolic disorder which is prevalent in every part of the world and is a major public health challenge of the

twenty-first century. International diabetes federation (IDF) shows that 285 million adults (20-79 years) are affected by this disorder in 2010. Epidemiological trends indicate that without proper control and prevention, its prevalence will increase further to 438 million in 2030. Hence, special precautions as well as early diagnosis is essential to prevent the complication of Diabetes. It can only be possible when it will be identified in early stage or at the time of *Purvaroopa avastha* (Prodromal stage) of *Prameha*. The *Acharyas* of *Ayurveda* had also described about the *Purvaroopa avastha* of *Prameha* in their respective *Samhitas* (Classical texts of *Ayurveda*). If we compare all the Prodromal features of *Prameha* described by our *Acharyas* then we can find a lot of similarities between them. These typical similarities will be very much helpful to diagnose the case in earlier stage and to prevent further *vyaktavastha* and its complications.

AIMS AND OBJECTIVES:

1. To understand the concept of *Purvarupa* from *Ayurvedic* literature.
2. To study clinical importance of *Purvarupa*.
3. To compile the *purvarupa* of *prameha* from all *Ayurvedic* texts.

METHODOLOGY

Review of *Brihatrayi* (*Charak Samhita*, *Sushruta Samhita* & *Vagabhatta*), *Laghutrayi*.

(*Bhava Prakash*, *Madhav Nidana*, *Sharangadhara Samhita*) have been carried out to elaborate the *purvarupavastha* of diseases and to compile the classical features of

Purvarupa avastha of *Prameha*. In addition to this, various classical *Chikitsa Granthas* (Medicine books) of *Ayurveda* like *Yoga Ratnakara*, *Vangasen Samhita*, *Kashyap Samhita*, *Bhela Samhita*, *Harita Samhita* also reviewed to prepare a comprehensive data of *Purvarupa avastha* of *Prameha*.

Discussion (Review of literature)

According to *Ayurvedic* science, diseases occur due to imbalance of *dosha* (*vata*, *pitta*, *kapha*). This imbalance is created due to intake of *nidan*. *Nidansevan* directly do not cause any disease but it causes *dosha sanchay* initially and then *prakopa* and *prasara* of doshas if they continued further *nidansevan*. The disease appears when complete pathogenesis takes place in body. In the course of disease (*samprapti*) there is a stage of *sthana-samshraya*. Symptoms which appear due to *dosha-dushya sammurchhna* during *sthana samshraya* stage are called *purvarupa*. Although *purvarupa* of many diseases are mentioned in books, in some diseases, existence of milder form of *roopa* (sign or symptoms) can be called as *purvarupa*. *Purvarupa* is essential and useful tool to identify a future disease i. e. prodromal stage.

Definition of *Purvarupa* / *Pragroopa*

Pragroopa are said to be those symptoms which are seen before the manifestation of the main disease (which they denote). *Acharya Vagbhata* says that *Purvarupas* (premonitory symptoms) are the symptoms of the forthcoming disease. They do not specify the particular doshas taking part in the *samprapti* (pathogenesis) of the disease. These symptoms are fewer and not clearly manifested (feebly manifested). *Madhava*

Nidana defines *Purvarupa* as '*Avyakta Lakshanas*' i. e. feebly manifested symptoms or the hidden symptoms of the forthcoming disease. *Madhava Nidana* also says that only those symptoms which indicate a *bhavi vyadhi* or a forthcoming disease are called *Purvarupas*. [18] By using the word 'only' in the definition of *Purvarupa*, the author has eliminated or disapproved the inclusion of *Nidana* (causative factors), *Rupa* (symptoms of a manifested disease), *Upashaya* (relieving and aggravating factors of a disease) and *Samprapti* (pathogenesis of a disease). *Madhava Nidana* also implies that - During the *Sthana Samshraya avashtha*, i.e., *sammurchhna* of vitiated *dosha* and vitiated *dhatu*s, some unclear (*avyakta*) symptoms are produced, which indicate the forthcoming disease. These symptoms of the yet to be manifested disease are called *Purvarupas*.

Types

They are of 2 types:

- *Samanya Purvarupa* (Generalized premonitory symptoms)
- *Vishesha Purvarupa* (*Dosha* specific premonitory symptoms)

Madhavanidan has also mentioned other types as follows:

- *Sharira Purvarupas* - premonitory symptoms limited to physical plane.
- *Manasa Purvarupas* - premonitory symptoms limited only to the mental plane.
- *Sharira-Manasa Purvarupas* - premonitory symptoms which occur both at physical and mental plane.

Types of *purvarupa*

Samanya Purvarupa

The premonitory symptoms which give a clue regarding the forthcoming disease but no idea about the *doshas* involved in it, are called *samanya purvarupas*. This means that the *samanya purvarupas* indicate the forthcoming disease but do not give us an idea of the *dosha* involved in the causation of disease or its types. E. g. *shrama* (fatigue), *arati* (discomfort, body pains) and *vivarnata* (discoloration) etc. are the common *purvarupas* or premonitory symptoms of *Jwara* (fever). These symptoms suggest that the fever is going to be manifested after sometime or in future if patient continue to consume *nidan* and takes no preventive measures at this stage. But these symptoms will not reveal the involvement of specific *doshas* i. e. whether the *Jwara* which is supposed to get manifested is *Vataja* (fever caused due to vitiated *vata*) or *Pittaja* (fever caused due to vitiated *pitta*) etc.

Vishist or vishesha purvarupa (dosha specific premonitory symptoms).

The symptoms which not only give a clue regarding the forthcoming disease but also give us an idea of the *dosha* taking part in the causation of the disease are called *Vishesha purvarupas*.

E. g. Yawning as a *purvarupa* of *Vataja Jwara* (fever caused by vitiated *vata*), burning eyes as the *purvarupa* of *Pittaja Jwara* (fever caused by vitiated *pitta*) and tastelessness as *purvarupa* of *Kaphaja Jwara* (fever caused by vitiated *kapha*). Appearance of all *purvarupa* mentioned in *samhitas* is a bad prognosis for a disease because it becomes incurable.

Purvarupas are again classified as follows:

Shareera Purvarupa (physical prodromal symptoms):

Premonitory symptoms of a disease occurring only at the physical level are called

Shareera Purvarupas. Example- *shrama*, *aruchi*, *jrimbha*, *netra daha* etc. are *shareerika purvarupas*.

Maanasa Purvarupas (psychological prodromal symptoms):

The premonitory symptoms of a disease appearing only at the *manas* level are called

Maanasa purvarupas. E. g. Dislike to common desires, aversion to the elderly advices, *vaichitya*, *arati* etc.

Shareera Manasa Purvarupas (psychosomatic):

These are the prodromal symptoms of a disease which occur both at physical and mental planes. E. g. Desire to have *amla* (sour) and *lavana* (salt) *rasatmaka* foods or dislike of *madhura rasa* (sweet taste or foods) are examples of *shareera maanasa purvarupas*. In this instance, desire and dislike (of tastes) are mental manifestations. And consumption and non- consumption of these tastes of that particular person is a physical manifestation.

Shatkriyakala and Purvarupavastha in the Sthanamsamshraya stage of Kriyakala

“*Shat Kriya Kala*” is described by *Acharya Sushruta*. These are six stages of manifestation of the disease (pathogenesis). *Sanchaya*, *Prakopa*, *Prasara*, *Sthanasamshraya*, *Vyakti* and *Bheda*, are six stages of *shatkriyakala*. *Sanchaya avastha* is the collection or *sanchaya* of *doshas* in their own *ashayas* due to the *nidanasevan*, (*Chayo vridhhi swa dhamnyev*). E. g. *Sanchaya* of *vata dosha* in *pakvashaya*, *kapha dosha* in *urdhva amashaya*, and

pittadosha in *adho amashaya*. After *sanchay* of *doshas* also, if the person continues to consume the particular *dosha prakopak nidansevan*, the second stage of *kriyakal* i. e. *Prakop avastha* appears. In *samhita* it is stated that "**Kopastu Unmargagamita**". In this stage the *sanchita doshas* started overflowing and they start coming out of their own *sthan* or *ashaya* as mentioned above. If still the *nidansevan* is continued and proper care is not taken, the vitiated *doshas* leave their chief sites and starts spreading in body, turning in the third stage of pathogenesis i. e. *Prasara avastha* (stage of overflow of *doshas*). All these three stages can be identified by the symptoms given in the *samhitas*. These *prasarita* or *vimargagami doshas* flow all through the body in search of a place for lodgment. When they find a susceptible *dhatu* or *dushya* (tissue), in a specific impaired channel(*Kha vaigunya* or *Kha dushti*) they get lodged in the *dhatu*s. This *kriyakal* is called as *Sthana Samshraya*, the 4th stage of *Shat Kriya Kala*. *Sthana* indicates place or site (tissues of the body in this instance) and *Samshraya* indicates lodging or invading of *doshas*.

Sthanasanshraya is the stage of pathogenesis in which the vitiated *doshas* lodge in the tissues causing damage therein. In this stage, the vitiated and *vimargagami doshas* which are displaced from their places in the 3rd stage of *Kriya Kala* (*Prasara*, or stage of overflow) are circulating in the body in seek of a lodgment. *Vata dosha* due to its *sancharanshil* quality takes other *doshas* like *Kapha* and *Pitta* with it and take them to other places. When these vitiated and aggressive *doshas* find a weak and susceptible *dhatu*s (tissues), they invade and get lodged in them. This is called *dosha-dushya sammurchana*. Since the *doshas* get lodged (*samshraya*) in certain places i. e. tissues (*sthana*), this stage of

kriyakala is called *sthanasamshraya* or stage of lodgment of *doshas*. These *doshas* in the later stage contaminate and damage the *dhatu*s leading to the manifestation of various diseases (depending on the tissue, organ or *strotas* in which these vitiated *doshas* get lodged). In this stage the *sammurchhana* of *doshas* and *dushyas* (*dhatu*s) is not complete, we can say (is immature) and the *samprapti* (pathogenesis) of the disease is also not complete, therefore the disease is also not manifested completely. The *dosha dushya sammurchana* can be halted and the further stages of *kriya kala* i. e. *Vyaktha Avastha* (stage of manifestation of disease) and *Bheda Avastha* (Stage of *vyakti* of specific *dosha* involvement of the disease) can be prevented by early diagnosis and treatment. Thus disease formation can be prevented. When the disease is completely formed, all *lakshanas* appear in the *vyakta Avastha* (5th stage). During the process of *Sthana Samshraya* (when the *samprapti* has not been completed and the disease has not yet manifested), the vitiated *doshas* produce certain unclear symptoms which indicate the forthcoming disease. These symptoms of an impending disease (yet to be manifested disease) are called *Purvarupas*. The symptoms which occur after the completion of *dosha dushya-sammurchana* (complete contamination of *dhatu*s by morbid *dushyas* or *dhatu*s) are called *lakshanas* (symptoms of a manifested disease).

When *dosha-dushya sammurchana* starts following *sthanasamshraya* of *doshas*, the prodromal symptoms (*purvarupas*) starts occurring. These symptoms indicate the initial stage of the disease and demands attention in the form of prompt treatment.

Prodromal symptoms(*Purvarupas*)occur due to *Dosha-Dushya Sammurchana* i. e. vitiated *doshas* and *dushit dhatu* at the *sthana samshraya* stage. This indicates

the initial contact of *doshas* and *dushyas* at already impaired or weak channel (*strotas*) giving an alarming sign of the disease of that *strotas*, which will appear in future. This occurs following the *sthanasamshraya* or lodgment of *doshas* in the *dhatu*s. These *kriyakal* i. e. *Sanchay*, *prakopa*, *prasara* and *sthansanshraya* gives a person an opportunity to take precautionary steps forward, like *nidan parivarjan* or to follow other simple *upakramas* or remedies for *dosha shaman* to prevent the condition from getting converted into further *kriyakala* i. e. *Vyakti* and *bhedavastha*.

Purvarupas are the symptoms which are seen in the *sthansanshray avastha* of *shatkriyakal* and they occur before the manifestation of the disease. They may even continue after the manifestation of disease, along with the course of the disease or may disappear before the actual disease is manifested.

In the *Purvarupavastha*, the strength (*bala*) of *dosha*, *dhatu* amalgamation will be weak, as it is a primitive stage [15]. Therefore the damage to the tissues also will be least. Since the damage of the tissues is less, early diagnosis of this condition and prompt treatment will prevent the disease progression and consequent formation of stage of manifestation of disease (*Vyakta avastha*, i. e. 5th stage of pathogenesis) and stage of manifestation of *dosha* specific involvement (*Bheda avastha* i. e. 6 stage of *Kriya Kala*). The prodromal symptoms (*Purvarupas*) will be fewer and weaker in comparison to the *rupas* (symptoms of a manifested disease). They are also unclear and latent (*avyakta*). This by itself is characteristic feature of the *Purvarupas*. Since *Purvarupas* are fewer and feebler, the treatment of the disease at this stage i. e. stage of prodromal symptoms will be comparably easy. *Samanya Purvarupas* will not reveal the *dosha* involvement in the formation of a disease. In the beginning of

manifestation, the *purvarupas* (*samanya purvarupas*) might indicate an impending disease but will not reveal the *doshas* involved in the causation of the disease. In some cases or in later stages, the involvement of *doshas* too will be indicated (*vishishta purvarupas*) promptly.

When the *purvarupas* get matured and get clearly manifested in the 5th stage of pathogenesis (*kriya kala*), i. e. *Vyakta avastha*, they will denote the manifested diseases and will be called as *rupas* (symptoms of a manifested disease). Further progression of the disease beyond stage of manifestation will lead to stage (*Bheda Avastha*). The *purvarupas* will lead to *rupas*, when the disease is not treated or proper precautions are not taken at the stage of manifestation of *purvarupas* (*sthana samshraya*). Some of the *purvarupas* may continue to exist in the actual condition of the disease also (manifested disease). In this instance, the *purvarupas* have matured to form *rupas* or the *purvarupas* have been transformed into *rupas* and clearly manifested. Example, yawning which is a *purvarupa* of *jwara*, will also (may) continue to persist even in the acute condition of manifested *Jwara* i. e. in the *rupavastha* of the *Jwara* alongwith the other *lakshanas* (symptoms).

Some *purvarupas* progress, some disappear. All the *purvarupas* do not progress to form the *rupas* in the *vyakta Avastha* [16]. Some *purvarupas* disappear at the stage or during the process of becoming *rupas*. In some diseases, the *pragrupas* contradictory to *rupas* may occur. E. g. Instead of sensation of temperature (*deha santapa*), rigors and chills occur before the onset of fever. Similarly constipation (*vidsanga*) occurs before manifestation of diarrhea in the *purvarupa* of *atisara* (diarrhea). In most of the diseases, are all the *rupas* i.

e. *lakshanas* of diseases are seen in milder stage (*avyakta*) in *purvarupavastha*. E. g. the *purvarupa* of all *vata vyadhis* are commonly described as “**Avyaktam lakshanam tesham Purvarupamiti smrutam**”. That means all the *rupa* are seen in *purvarupavastha* but in milder stage.

Prodromal symptoms occur at both mental and physical planes. *Purvarupas* may be limited to the body (*shareera purvarupas*), mind (*manasa purvarupas*) or both (*shareera maanasa purvarupas*). *Purvarupas* may be generalized or *dosha* specific. They may also be *Samanya* (generalized *purvaupas*, do not specify the *dosha* involved in the pathogenesis of the disease) and *Vishesha* (premonitory symptoms indicating the *dosha* involved in the pathogenesis of the disease). Premonitory symptoms help for early diagnosis and treatment of a disease. The number and strength of the *purvarupas* determine the prognosis of a disease. The disease will become *asadhya* (incurable) if there are maximum number of *purvarupas* (as described in text) present in a disease or if they are strong in strength. On the contrary presence of less number of *purvarupas*, which are also feeble and of low strength, indicates that the disease is easily curable (*sadhya*).

CLINICAL IMPORTANCE OF PURVARUPA:

a) For diagnosis of diseases:

In *nidanpanchak*, one *nidan* can be a cause several diseases. In such situation, only *nidan* is insufficient to provide any clue about disease. For example, excessive intake of *madhura rasatmaka* food and drinks can cause *prameha*, *sthaulya* and other *kaphaja vyadhis*. Even patient also does not give correct history

of *nidan sevan*. *Purvarupa* knowledge helps in diagnosing the disease early. As *purvarupas* help in early recognition of the diseases, early understanding of the pathology and pathological elements, and nature of the impending disease, it helps in preventing the disease process at the earliest and halting the disease process before its progression into the main disease and its complications. Knowledge of *purvarupas* help in preventing the next stages of disease formation of *Kriya Kala*. The physician can prevent the *vyakta* (stage of manifestation of disease and manifestation of symptoms) and *bheda* (stage of complications) of the disease with a precise knowledge of *purvarupa avastha*.

The efforts of the physician should be to detect the pathology as early as possible and try to control and cure it. *Purvarupas* are the early clues regarding the developing pathology-*dosha-dushya sammurchana*. Hence the forthcoming disease, its nature, severity etc. can be diagnosed at an early stage before the manifestation of the main disease with the help of knowledge of *purvarupa*.

b) For treatment:

Treatment modalities can be decided on the basis of *purvarupa* like *ghritpaan* on appearance of *purvarupa* of *vataj- jwara* (*sushruta*), *laghu aharsevan* or *langhan* on appearance of *Jwara purvarupa(charak)*. Knowledge of *purvarupa* helps in early start of treatment. With good knowledge of *purvarupa* the physician can diagnose the disease at the earliest. This will help him to plan the treatment and medications at the earliest, before the disease gets manifested with its full blown symptoms. The treatment at this stage is also easier and doesn't need an aggressive approach. Appropriate treatment planned and implemented at *purvarupa* stage succeed

in preventing the disease or in minimizing its severity. If the pathology is understood and destroyed (*samprapti bhang*) in *purvarupa avastha* itself, the disease pathology doesn't progress to its further stages.

c) For prognosis:

The *purvarupas* indicate the *sadhyata*, *asadhyata* (prognosis) of a disease. Prognosis of any disease can also be determined by examining *purvarupa*. Few *purvarupas* along with mild *nidan* intake (*alpa hetu*) and mild *rupa* (*alpa lakshanas*) shows that the disease is *sukhsadhyata*. According to *Acharya Charak*, if all *purvarupa* of any disease appears together, it is called *Arishta* because disease become incurable. The greater the number of *purvarupa* and more the severity, it indicates the severity of vitiation (morbidity) of the *doshas* and severity of the nature of the disease. If the *purvarupas* of a given disease are more in number or if they are severe in intensity, then the prognosis of the disease will be bad. Similarly the less number of *purvarupas* of any disease or their feebleness indicate good prognosis (*saadhyata*), i. e. that the disease can be easily curable.

d) For differential diagnosis of diseases:

Knowledge of *purvarupa* helps in differential diagnosis of an existing disease. For example, patient urinating dark yellow or red coloured urine without *purvarupa* of *prameha* confirms diagnosis of existing *raktapitta*.

Acharya Charak has given *purvarupa* of all diseases mentioned in *nidan sthana* and *chikitsa sthana*. Few *purvarupa* are general symptoms and common to other diseases like *arochak* (aversion from food), *avipaka* (indigestion),

daurbalya (weakness), *angamarda* (body ache), *alasya* (laziness) etc. [17] These prodromal features suggest *nidan* intake and beginning of pathogenesis in body. *Parivarjan* (eversion) of *nidan* intake may bring body to normalcy. Patient can be cured with minimal treatment/interventions at this stage. *Purvarupa* explained by *Acharya Charak* can be divided into physical, mental (psychological) changes. Like *jrimbha* (excessive yawning), *mukha vairasya* (distaste in mouth), *ashru gaman* (watering of eyes/ teary eyes), *nidradhikya* (excessive sleep) etc are physical changes before *hwara* (fever). Symptoms like *balebhya pradvesh* (dislike children), *gurunam vaakyabha asuya* (finding faults in teachings of elders or teachers), *svakarma achinta* (ignoring daily or routine spiritual works) etc. are *manasika* or Psychological *purvarupas* appearing before *hwara* (fever). *Purvarupa* of *raktapitta* can also be divided into common (*samanya*) and specific (*vishesha*). *Anannabhilasha* (aversion to food), *gatrashadan* (malaise) etc are common (*samanya*) *Purvarupa*, which indicate deviation of health from normalcy. Symptoms like *sukta-amla-gandha udgaar* (eructation having smell and taste of sour gruel), *chardi abhiksanam* (frequent vomiting), *chardi bibhatsata* (abnormal/dicoloured vomitus), *loh-lohita-matsya gandhtavam aasya* (metallic, blood like, or foul fish like smell from mouth) etc. indicate dominance of *dosha* in particular *vyadhi* (*Vishesha purvarupa*).

Purvarupa of Prameha

There are rising incidences of type 2 Diabetes mellitus in India and world. Attention must be given to analyse *purvarupa of prameha*. Presentation of *prameha* is quite similar to diabetes mellitus. Few *purvarupa* stated by

Acharya Charaka are found as different type of complications of Type 2 Diabetes mellitus like *karpadasuptata daha* (numbness and burning sensation in hands and soles), *visra sharirgandha* (bad odour in body). *Purvarupa* like *satpadapipilika sareera mootra abhisarana* (ants crawling /attracted in urine) appear when there is a marked hyperglycemia in blood. *Pipasa, much-taalu-kantha shosha* appear during pre-diabetic and diabetic stage. *Alasya* (laziness), *nidra, tandra* (sleep and drowsiness at maximus hours of day) may be used as premonitory features and thus necessity of laboratory Investigations to rule out Pre-diabetes or Diabetes. Similarly, *purvarupa* of other diseases are also mentioned. *Sushruta samhita* and all other major and concerned books of *Ayurveda* discuss about *purvarupa*. Aim of mentioning *purvarupa* before discussing treatment of any disease is to diagnose future disease at early stage and nip it in its bud with *nidanparivarjana* or minimal treatment.

Prameha is a *medovaha strotodushtijanya vikara*. The two chief symptoms described in *Samhita* are *prabhuta* (Excessive) and *avil* (turbid) *mutrata*. There are 20 types of *prameha*, which shows different abnormalities regarding colour, constituents and *swarupa* of urine according to vitiated doshas. All types of *pramehas* get convert into *madhumeha* which is chronic stage of disease and its prognosis is also not good (*Asadhya*). *Prameha vyadhi* which is similar to Diabetes Mellitus, is known as a silent killer. It can bring many complications to many systems, if not controlled or properly treated. But as it is a lifestyle disorder, if it is diagnosed in early stage, i. e. prediabetes, it can be controlled with changes in diet and lifestyle. The premonitory stage of diabetes, i. e. prediabetes is the stage in which the prodromal symptoms or *purvarupas* of *vyadhi* can be observed. *Prameha*

purvarupas compiled from all *Ayurvedic samhitas* are as follows.

Charaka Samhita[1]

Acharya Charaka has described following symptoms on *purvaroopavastha* of *Prameha* in the context of *Nidana sthana* of *Charaka Purvardha*.

Kara-pada daha (burning sensation of both hand & feet), *asya madhurya* (sweetness of mouth), *Pipasa* (Thirst), *mukha-talu-kantha shosha* (dryness of oral cavity), *visra shareera gandha* (foul smelling of body), *jatilabhava keshanam* (nesty appearance of hair), *tandra, shathpipilika mutravisarana, kaya malayukta, kara-pada suptata* (numbness in both hand & feet), *anga daha* (burning sensation of body) *anga suptata* (numbness of body), *alasya* (laziness), *kaya upadeha, nidra* (sleepiness).

Charaka Samhita[2]

Acharya Charaka has also described following symptoms on *purvarupavastha* of *prameha* in the context of *chikitsa sthana* of *Charaka uttarardha*.

Kara-pada daha (burning sensation of hand & feet), *asya madhuryata* (sweetness in mouth), *gala-talu shosha* (dryness of oral cavity), *anga sweda-gandhata* (Foul smelling of body due to excessive sweating)

, *kesha-nakha ativridhhi* (rapid growing of hairs & nails), *mutre avidhavanti pipilika, sheeta priyata* (desiration of cold items), *anga shithilata* (lethargy in body), *shaiya-Asana-swapna rati* (laziness)

, *hrit-netra-jihva-shravana upadeha, ghana angata* (smooth body).

Sushruta Samhita[3]

Acharya Sushruta has described following symptoms on *purvarupa avastha of prameha* in the context of *Nidana sthana of Sushruta samhita*.

Hasta-pada tala daha (burning sensation of hand & feet), *pipasa* (thirst), *jatilibhava keshanam* (nesty appearance of hair), *nakha vridhhi* (rapid growing of nails), *tandra*, *talugala-jihwa-danta malayuktata*, *snigdha-pichhil-guru gatrata* (smooth body), *madhura-shukla mutra* (whiteness & sweetness in urine), *sada* (lethargy of body), *dourgandha swasa* (foul smelling of breaths).

Astanga Hridaya[4]

Acharya Vagabhata has described following symptoms on *purvarupa avastha of prameha* in the context of *Nidana sthana of Astanga Hridaya*.

Kara-pada daha (burning sensation of hand & feet), *madhurya asya* (sweetness in mouth), *gala-talu shosha* (dryness in oral cavity), *anga-gandha* (sweetness of mouth), *kesha-nakha ativridhhi* (rapid growing of hair & nails), *mutre avidhavanti pipilika*, *shita priyata* (desiration of cold items), *sweda* (nesty appearance of hair), *sithilangata* (numbness in both hand & feet), *shajya-asana-swapna sukha* (laziness), *hrit-netra-jihva-shravana upadeha*, *ghana angata* (smooth body).

Astanga Sangraha[5]

Acharya Vridhha Vagabhatta has described following symptoms on *purvarupa avastha of prameha* in the context of *Nidana sthana of Astanga Sangraha*.

Pani-pada daha (burning sensation of both hand & feet), *madhurya asya* (sweetness of mouth), *pipasa* (thirst),

talukantha shosha (dryness in oral cavity), *visra gandhata of mutra & shareera* (foul smelling of urine & body), *jatilabhava keshanam* (nesty appearance of hair), *pipilika upasarpana*, *tandra*

, *maladhikya vahirkaya*, *shukla mutrata* (whitish urination), *atimadhurya mutra*, *kayachhidra*, *shwasa*, *nidra* (sleepiness), *alasya* (lazyness).

Bhava Prakasha[6] & Madhava Nidana[7]

Acharya Bhava Mishra has described following symptoms on *purvarupa avastha of prameha* in the context of *prameha chikitsa* and Acharya Madhava in the context of *prameha nidana*.

Pani-pada daha (burning sensation of hand & feet), *swadu asyata* (sweetness of mouth), *trut* (increased thirst), *danta malayukta*, *chikkana deha* (smoothness of body).

Sharangdhara Samhita

Acharya Sharangadhara has not described anything about *prameha*.

Yoga Ratnakara[8] & Vangasen Samhita[9]

Acharya Yogratnakara & Bangasena has also described same symptoms about *purvarupa avastha of prameha* like Bhava Prakash & Madhav Nidana.

Pani-pada daha (burning sensation of hand & feet), *swadu asyata* (sweetness of mouth)

, *trut* (increased thirst), *danta malayukta*, *chikkana deha* (smoothness of body).

Kashyap Samhita[10]

Acharya Kashyap has described about *prameha* in the context of

'Vedanadhyaya' but has not mentioned any *purvarupa avastha* of *prameha* in this chapter.

***Bhela Samhita*[11]**

Acharya Bhela has not described *purvarupa avastha* of *prameha*.

Harita Samhita

Acharya Harita has described about *prameha*, its classification, its treatment but has not described anything about *purvarupa avastha* of *prameha* in *Harita Samhita*.

RESULT

On review it was found that the prodromal features of *prameha* have been described

elaborately in the classical texts of *Brihatrayi*. Other texts of *Ayurveda* also opined the

same. All the data are assessed and narrated in table 1 & table 2 as under:

Most Common Prodromal-Symptoms of *Prameha* by *Brihatrayi*.

Symptoms	Charaka	Sushruta	Astanga Hridaya	Astanga Sangraha
<i>Kara-Pada Daha</i>	+	+	+	+
<i>Kesha-Nakha Ativriddhi</i>	+	+	+	-
<i>Vinsra Gandhi</i>	+	+	-	+
<i>Jatilabhava Kesha</i>	+	+	-	+
<i>Tandra</i>	+	+	-	+
<i>Mala Kaya</i>	+	+	-	+
<i>Mukha Madhurya</i>	+	-	+	+
<i>Mukha Shosha</i>	+	-	+	+
<i>Pipasa</i>	+	-	+	+
<i>Sheeta Priyata</i>	+	-	+	-
<i>Shath pippilika mutre</i>	+	-	+	-

Most Common Prodromal-Symptoms of *Prameha*.

Symptoms	Ch	S. S.	A. H.	A. S.	M. N.	B. P.	Y. R.	V. S.
<i>Kara-pada Daha</i>	+	+	+	+	+	+	+	+
<i>Mukha Madhurya</i>	+	-	+	+	+	+	+	+
<i>Pipasa</i>	+	-	+	+	-	-	-	-

<i>Mukha Shosha</i>	+	-	+	+	-	-	-	-
<i>Vinsra Gandha</i>	+	+	-	+	-	-	-	-
<i>Kesha Nakha Vriddhi</i>	+	+	+	-	-	-	-	-
<i>Jatilabhava Kesa</i>	+	+	-	+	-	-	-	-
<i>Tandra</i>	+	+	-	+	-	-	-	-
<i>Sheeta Priyata</i>	+	-	+	-	-	-	-	-
<i>Mala Kaya (With Danta)</i>	+	+	-	+	+	+	+	+
<i>Shathpippilika mutre</i>	+	-	+	-	-	-	-	-

DISCUSSION:

Purvarupa must be given importance because hint of future disease may help cure disease at early stage with minimal treatment or with *nidan parivarjan* (avoidance of *nidan* intake)[12]. *Purvarupa* is a part of *nidan panchak*, If *purvarupa* do not give hint about a disease, then *nidan*, *upshaya* may help to confirm a disease, In another situation, if all *purvarupa* hints at any particular disease in future then *nidan*, *upshaya* further confirms about the disease. Some *purvarupa* like *aalasya* (laziness), *arochaka* (aversion of food), *avipaka* (indigestion), *anga marda* (malaise) etc are easily ignored by patient considering them as short term or minor disturbances. Psychological disturbances like dreaming unusual things, minor behavioural changes are also ignored by patients and relatives. But meticulous history taking about *nidan sevan*(etiological factors) along with knowledge of *purvarupa* can

give good clue about future disease.

Therefore, no physical, mental or psychological changes are irrelevant rather they are *purvarupa* [13]. Today diagnostic tools and aids have improved, all *purvarupa* of a disease mentioned in texts are not necessarily the prodromal symptoms of that disease. In that era, diagnostic tools were different and health from normalcy attracted attention of patient. Pathogenesis of disease start early and apparent symptoms might appear late[14]. By analyzing the data of compilation of all *prameha purvarupas* from all *samhitas*, it is found that the features like *kara-pada daha*, *mukha madhurya* & *mala kaya* are common features described by all *Acharyas*. The other common features like *pipasa*, *mukha shosha*, *visra-gandhatva*, *Jatilabhava Keshanam*, *kesha-nakha vriddhi*, *tandra* have been described mostly by *Brihatrayi*. Hence, these

typical features can be taken as diagnostic features of Pre-Diabetes.

Purvarupa like *karpadasuptata*, *daha* (numbness and burning of soles), *visra shareera gandha* (foul odour in the body), *shatpada pipilika sharira mutra abhisarana*

(ants crawling/attracted on body and urine) appears when there is marked hyperglycemia in blood for long or as complications of Diabetes mellitus. Knowledge of *purvarupa* must be combined with other components of *roga pariksha* like *nidan* and *upshaya*. It helps to prevent *samprapti* at early stages and avoidance of future disease.

Conclusion:

Metabolic disorder like Diabetes Mellitus is increasing like a rapid fire in the society as it affects all the age groups & all social economic groups. So, it is quite difficult to save the society from Diabetes Mellitus if the diagnosis and treatment procedure are delayed. So the need of the hour is to screen the common people in terms of awareness programme in both urban & rural areas. So the Prodromal features of *prameha* can be screened earlier and appropriate treatment will be given by holistic method as mentioned in *Ayurveda*. It could also be concluded that *purvarupa* along with othe components of *nidan panchak* holds great importance in *roga pariksha* (diagnosis of any disease).

Reference:

1. Pandey Gangasahay, Yadavji Trikamaji, Sharma Privavrit. Charaka Samhita of Charaka, Nidan stnana, chapter 1, verse no. 6, Varanasi, Chaukhamba Sanskrit Sansthan, 2007, 601.

2. Pandey Gangasahay. Yadavji Trikamaji Sharma Priyavrit. Charaka Samhita of Charaka, Nidan sthana, chapter 1, verse no. 8. 1 st edition Varanasi, Chaukhamba
3. Sanskrit Sansthan, 2007, 604.
4. Sashtri Sudarshana, Upadhaya Yadunandana, Madhava nidana of Madhavakara, poorvardh, chapter 1, 2 edition, Varanasi, Chaukhamba Sanskrit Sansthan; 2008; 40.
5. Dhyani, Shivcharan. Nidaan panchak [five principles of diagnosis], 1*edition, Varanasi;Chaukhamba subharti prakashan; 2014; 56.
6. Sashtri Sudarshana, Upadhaya Yadunandana. Madhava nidana of Madhavakara, poorvardh. chapter 01, verse number 5-6, 2nd edition, Varanasi Chaukhamba Sanskrit Sansthan, 2008, 38
7. Sashtri Sudarshana, Upadhaya Yadunandana. Madnava nidana of Madnavakara, poorvardh, chapter 01. verse number 5-6, 2nd edition. Varanasi, Chauknamoha Sanskrit Sansthan. 2008, 37-38
8. Dhyani Shivcharan. Nidan panchak [Five principles of diagnosis]; 1* edition, Varanasi; Chaukhamba subharti prakashan; 2014, 53-54.
9. Pandey Gan gasahay, Yadavji Trikamaji, Sharma, Priyavrit. Charaka Samhita of Charaka, Chikitsa sthana, chapter 11, verse no. 12. 1 edition, Varanasi;Chaukhamba Sanskrit Sansthan, 2007, 282.
10. Pandey Gangasahay, Yadavji Trikamaji, Sharma Priyavrit, Charaka Samhita of Charaka, Chikitsa sthana, chapter 28, verse no. 19. 1" edition, Varanasi; Chau khamba SanskritSansthan,
11. Sastri Ambikadutta. Susruta Samhita of Su sruta, Uttartantra, chapter 39 verse numb er 27, 2 edition, Kapadganj Chaukhamba Sanskrit Sansthan, 2012 220Dhyani Shivcharan. Nidan panchak [Five principles of diagnosis]; 1*edition,

- Varanasi; Chaukhambha subharti prakashan; 2014, 53-54.
12. Pandey Gangasahay, Yadavji Trikamaji, Sharma Priyavrit. Charaka Samhita of Charaka, Chikitsa sthana, chapter 11, verse no. 12. 1 edition, Varanasi;Chaukhambha Sanskrit Sansthan, 2007, 282.
 13. Pandey Gangasahay, Yadavji Trikamaji, Sharma Priyavrit, Charaka Samhita of Charaka, Chikitsa sthana, chapter 28, verse no. 19. 1" edition, Varanasi; Chau khambha SanskritSansthan,
 14. Sastri Ambikadutta. Susruta Samhita of Su sruta, Uttartantra, chapter 39 verse numb er 27, 2 edition, Kapadganj Chaukhambha Sanskrit Sansthan, 2012, 220.
 15. Desai Ranjeetrai, Sastri Haridutta Nidanchikitsahastamlaka Vol 1, chapter 10, 2 edition, Kapadganj; Sri Biadyanath ayurved bhavan publication; 2010; 642-43.
 16. Singh Ramharsh. Ayurvediya nidana chikitsa siddhanta & prayoga (principles and practice of Ayurvedic diagnosis and treatment]; 5 th revised edition, Chaukhambha Amarbharti Prakashan2015, 13-14.
 17. Pandey Gangasahay, Yadavji Trikamaji, Sharma Priyavrit. Charaka Samhita of Charaka, Nidanasthana, chapter 1 verse no 8, 1st edition, Varanasi: Chaukhambha Sanskrit Sansthan-2007, 466-67.
 18. Pandey Gangasahay, Yadavii Takamaji, Sharma Priyavrit. Charaka Samhita of Charaka, Nidansthana, chapter 1, verse no 36, 1st edition Varanasi;Chaukhambha Sanskrit Sansthan, 2007:482-83.
 19. Pandey Gangasahay, Yadavji Trikamaji, Shar ma Priyavrit. Charaka Samhita Charaka, Sutrasthana, chapter 10, verse no. 11-13, 1st edition, Varanasi, Choukhamba Prakashan, 2007, 143.
 20. Pancey Gangasanav Macayji Trikamaj Sharma Privavrit Charaka Semhita of Charaka, Indriyasthana chapter verse no 8-9, 1st edition. Varanasi, Chaukhamba SanskritSansthan, 2007, 896. Charaka Samhita of Charaka, Indriya sthana Jan 2007,
 21. Pandey Gangasahay-Yadavji Trikamaji - Sharma Priyavrit, Pandey Gangasahay, Yadavji Trikamaji, Sharma Priyavrit. Charaka Samhita of Charaka, Indriya sthana, chapter 9, verse no. 8-9. 1 st edition, Varanasi; Chaukhambha Sanskrit Sansthan, 2007;896.
 22. Madhava nidana of Madhavakara, poorvardh, chapter 01, Jan 2008 - 37-38Sashtri Sudarshana Upadhaya Yadunandana, Shashtri Sudarshana, Upadhaya Yadunandana. Madhava nidana of Madhavakara, poorvardh, chapter 01, verse number 5-6, 2nd edition, Varanasi, Chaukhambha Sanskrit Sansthan, 2008; 37-38. Varanasi; Chaukhambha subharti prakashan, Jan 2014 53-54.

Conflict of Interest:

Non

DOI:

<https://doi.org/10.52482/ayurline.v5i03.590>

Source of funding:

Nil

Cite this article:

A literary study of Purvarupa (Prodromal features) w. s. r. to prameha vyadhi Purvarupa.
Archana R. Gharge, Rajiv Mundane

Ayurline: International Journal of Research In Indian Medicine 2021; 5(4):01-14