



Review Article

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CONCEPTUAL AND CLINICAL ASPECTS OF AVARANA: A REVIEW

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ABSTRACT

Avarana is a unique concept in Ayurveda. Avarana is the route along which the pathogenesis of many diseases proceeds. To understand and analyse the avarana, meticulous knowledge of basic concept of avarana is essential. There are so many conditions which mimic avarana. It is either least observed, diagnosed or goes unidentified due to lack of skill. While managing many vata diseases, the usual management protocol may not work as expected. Here we must incorporate other concepts like avarana, anubandha dosha etc for better results. So, this article is trying to enlighten the views regarding avarana and to incorporate in our day-to-day practice.

Keywords: Avarana, vata, anubandha dosha

INTRODUCTION

The treasures of knowledge are often buried within very complicated conceptualizations. There are certain concepts in Ayurveda that can never be understood in their true sense. Avarana is such a concept that opens newer and newer areas of clinical interest when we go deeper and deeper into the matter. Unravelling the spectrum of manifestations of avarana will not only help to have a better understanding of the disease but also enable the clinician to have a differential diagnosis in every case we are going through¹. This is because, in all the diseases involving vata, avarana is one of the differential diagnosis. Many questions arise among us when we go through our concepts but beyond any doubt that knowledge never create a problem provided it is used in the right way. Avarana is one of the most difficult concepts to understand, teach and incorporate in clinical practice. Acharya has elaborately explained different varieties of avarana which is one of pathology in different diseases. If, correctly observed and diagnosed the treatments will be quite effective. Sometimes it goes unidentified or mistaken as associative dosha in many conditions due to lack of observations and skills. But once identified it helps in designing the management protocol of a particular disease.

Nirukti of Avarana - According to Shabdakalpadruma, vyutpati of avarana shabda is from Vru dhatu which means valayita, vestita, ruddha etc.

Avarodha gati nirodha - According to Ayurvediya shabdakosha, the word avarana means avarodha gatinirodha³ that is obstruction or resistance to normal gati of vata.

Avaraka Achadhanam - According to Shabdakalpadruma aavaraka means achadhanam that is encapsulation.

Vega prathibandham - According to Acharya Charaka aavaraka means Vega pratibandham² i.e., obstruction to Vega or movement.

Table 1: Avarana synonymously used in Samhitas

Pratighata	Kasa
Avurta marga	Artava kshaya
Avruta marga	Ashta nindita purusha
Ruddha gati	Madhumeha
Baddhamarga	Shotha

Synonymously avarana is explained in samprapti of various disease in samhitas. In the context of kasa acharya use the term Pratighata and in Madhumeha context chakrapani has explained ruddha gati and in Sushruta Dalhana comment the word Baddhamarga in the context of shotha etc.

Definition of Vatavyadhi

In Charaka, avarana is explained in vatavyadhi so we can go through the definition of vata vyadhi. Charaka has classified the diseases into two kinds samanyaja and nanatmaja. In the light of the above proposition, we doubt that how is it that there is a separate chapter mention for vatavyadhi but not for pitta vyadhi or kapha vyadhi. This anomaly can be solved by interpreting as

Vata janito asadharana vyadhi, vatavyadhiriti visheshaneeyam

That is, the peculiar disease caused by vata is to be called vatavyadhi. The reason behind this is, vata being powerful and quick-acting produce major diseases which are very troublesome, incurable and need special kinds of treatment and the other two doshas do not have the above qualities. So, a separate description for vata disorder have explained.

Vata-the unique dosha

Since avarana is the obstruction to the flow of vata, it is important to discuss the nature of vata and its peculiarities. Vata is the prime dosha. In charaka, acharya describes the importance of vata as vayu is life, strength, vayu mainstays living organism, the same vayu is verily the universe, and hence the Lord vayu is praised³. Owing to its incorporeal nature and instability it is inaccessible in comparison to the other two doshas. The inaccessibility is characterized by its functional and physical attributes but is more relevant regarding the therapeutic aspect. There is a reference in charaka vatavyadhi that the ailment arising out of avarana of vayu by pitta and kapha are also designated as vatavyadhi because such diseases are never manifested without the predominant involvement of vayu.

Involvement of Vata in Avarana

The causes for vata prakopas are, that is the vayu gets aggravated by dhatukshya and avarana. There is another reference from Charaka chikitsa Sthana to explain the involvement of vata in avarana which is vata, pitta and kapha are sarvashareerachaari⁴, they are supposed to give the dharana of shareera. Vata has been explained to be sukshma marganusari and preraka that is the one that gives the initiating force for the movement of all other doshas. So, it has the reach to the microlevel of the body. Vata is the only guna that tends to be obstructed easily most of the time. It has chala guna and is rajo guna prominent. Thus, whenever movement of vayu through the srotas is obstructed or the preraka karma is hampered the vata dosha gets vitiated. If vayu became kupita it makes the udeerana of pitta and kapha to different parts of the body. The vitiated vata along with pitta and kapha produces different diseases in different parts of the body and causes shoshana of rasadi dhatus.

Gati-Siddhanta

To understand avarana firstly we need to understand the gati-siddhanta explained by our acharya. Avyahatagati, explains the normalcy of vata dosha and whenever vata dosha remains in the Prakrut avastha, the person lives a healthy life for 100 years. Chakrapani commenting on the word avyahatagati, has used two significant words aparityakta swamarga or anavritamarga. Vata dosha is the gatyatmak dravya within the Shareera. Hence when its normal gati is hampered or vitiated the vata becomes avrita and it becomes parityakta or vimarga. Different pathologies are set in different srotas to produce whenever a favourable condition and situation arises. So, in the case of vata srotas is the inevitable component in every movement.

Components of Avarana

There are two factors involved in any type of avarana the one which is being obstructed and the other which obstructs the first one. The factor which is obstructed is identified as avruta, while the factor which obstructs the flow of the first one is designated as avaraka. The avruta factor is mostly a type of vata since it can flow independently. The avaraka factor may be a type of vata or any other dosha, dhatu or mala. While naming avarana, the name of avaraka is used as a prefix and the name of avrita is used as a suffix for example in kapha avrita vata kapha is the encroaching factor and vata is the entrapped factor.

Types of Avarana

The avarana of vata may be innumerable. However, 42 types of avarana vata have been described in the texts which can be categorized under the following two major divisions.

Murta avarana and Amurta avarana

Murta avarana occurs when Murta substances like pitta, kapha doshas dhatus, mala and anna obstruct the path of vata and this is called samanya avarana. The second one is amoortha avarana that is when the subtypes of vata impede the functions of each other. It is also called anyonya avarana. Charaka has described in detail only 12 types of avarana while the remaining 8 conditions of anyonya avarana may be understood or diagnosed based on the seat of the function of each type of vata as well as increase or decrease of its function.

Anyonya Avarana

A question arises as to how one type of vata can obstruct the channels of other types since vata is Amurta. Vata dosha is the same everywhere but depending on karma and sthana we classify it into 5 types like Prana, Udana etc. Anyonya avarana is not a type of acchadana. It makes dushti or suppresses the function of another vayu. Here functional impairment is more than structural defect. In Sushruta delhana opines that when two types of vata move towards each other and the weaker one overcome by the stronger one⁵. Arunadatta mentions that in anyonyaavara the strong i.e., excessively vitiated variety of vata suppresses the weak type of vata and thus produces gatibanga or functional derangement.

Dalhana also mentions that when Udana vata which is having movement in an upward direction causes functional obstruction of the pranavayu or apanavayu having the movement in the downward direction, then udanavayu act as avaraka.

Fundamentals of diagnosis

According to Sushruta there are two criteria are told to diagnose kevalavata, dosha and dhatuyukta vata and avruta vata, that are lakshana and uhya. Lakshana is based on the symptoms and uha i.e., by logical thinking. Two possibilities are told by charaka to diagnose avarana that is svakarma vridhhi and hani. That is if aavaraka is balavan then karmavruddhi of aavaraka and karmahani of avruta happens and if avruta is balavan then karmavrdhi of avrutha and karmahani of avaraka may occur. But in most of the cases aavaraka will be balavan. In the vyakyana chakrapani explain as how to understand the anukta aavarana that is by the utsarga and hani that also depends on sthana and how the elements are working in it. Vagbhata mentions that sometimes it is very difficult to diagnose the condition of avarana and in that case, it requires repeated clinical examination and frequent administration of upashaya before arriving at the clinical diagnosis. This can be illustrated with one example.

In avarana of prana by udana the symptoms developed includes chardi shwasa etc and in apana avruta vyana there will be symptoms like increased expulsion of vit mutra shukra. When there is avarana of prana by samana there are symptoms like Grahani, Parshwa Hrudgata and Amashaya Shula are present.

Avarana other than in vata vyadhi

Some conditions that cause avarana

Indhana avruta agni

Neither excessive nor deficient consumption of food promotes proper digestion. This is like the fact that fire won't catch in the absence of fuel. Also, the fire is concealed, and do not flame out if the fuel is excessive. That is ahara makes an avarana to agni and makes it functionless.

Dosha avruta basti

In a state of excessive accumulation of dosha if less potent vasti is administered, morbid dosa tend to entrap the vasti dravya and prevents its evacuation. Thus, the basti dravya obstructs the movement of vayu⁶. That is the dosha inside the body is strong enough to encapsulate the marga of vata.

Hrutshoola

Sushruta says about margavarana Hritshula, that is when kapha and pitta makes avarana after that rasasammurchana takes place then Shoola and Uchwasa avarodha occurred.

Shaka ashrita kamala

The excess pitta srava is obstructed by kapha leads to rudhapadha kamala or shakashrita kamala. This is a case of avarana of moorta dravya over Murta.

Mada moorcha sanyasa

In mada murcha sanyasa-there is avarana of mana with Raja and Moha. It is a type of abhibhavatmaka avarana.

Gulma

The Gulma pathogenesis mentioned in Nidana and Chikitsa Sthana of Charaka Samhita are different. In nidana Sthana, only elevation and provocation of vata have been emphasized. Here, provoked subtype of vata itself causes avarana of another subtype of vata. While in Chikitsa Sthana acharya mentioned that gulma occurs due to avarana of vata caused by Pureesha, Mutra, Kapha, Pitta and Ama.

Illustration of some condition that mislead diagnosis

We can illustrate some of the conditions in which avarana will be one among the differential diagnosis. When we see a patient with symptom like muhu badha muhu drava mala Pravritti; then at first, we may think and diagnose diseases like Grahani roga, Annava Srotodushti etc, but these symptoms we can also observe in samana avruta Apana.

If it is Grahani roga, we can prescribe aushadhas in Grahani like takrarishta or we can think it would be an Annava Srotodushti and can provide Ama pachana, agni deepana or grahi aushadha. By these two the patient is not responded to the treatment then, we must redefine the Samprapti to avarana. Because these symptoms also get in samana Avruta Apana and prescribe the medicines like agni deepaka ghrita.

Another example is Rakta Pradara that is excess menstrual flow. If we take it as Pradara then give medicines like Ashoka arishta, Vasa ghrita, Phala Sarpis or else it can be considered as Artava Vaha Sroto dushti and go accordingly with that treatment. If not responding to the above treatment, then think about to the Avarana Samprapti, that is pitta avruta apana. In pitta avruta apana there will be rajasashcha ati vardhana that is excess flow of rakta. Then we must do sheeta ushna kriya and can give jeevaniya sarpi ghrita.

Madhumeha

Here we can take one example that is Madhumeha to see the difference in pathology between dhatukshaya janya and avruta janya. There is one reference in Ashtanga Hridaya Nidana Sthana, here acharya mentioned two types of Madhumeha. One is due to sampurna and other due to ksheena dosha.

Table 2: Exclusion by Nidana

Dhatukshaya janyam	Avarana janyam
Kashaya, Tikta, Katu	Amla, Lavana
Ruksha, Laghu	Snigdha, Guru
Anashana, Jagarana, Vyayama, Vyavaya	Atimatra samasnata
Udvega, Shoka	Nidra
Shodhana atiyoga	Tyakta vyayama, Tyakta chintana
Vishama Shareera Nyasa	Asyasugam

Here we can see nidana of Madhumeha that is dhatukshaya janya Madhumeha lead to vata kopa instantly and give rise to Madhumeha.

Avarana janya pathogenesis occurs due to etiological factors which lead to the vitiation of kapha, pitta, meda and mamsa which in turn cause avarana of vata dosha leading to its provocation and manifestation of Madhumeha⁷

Dhatukshaya janya Madhumeha	Avarana janya Madhumeha
Vata kopa	Kapha pitta kopa
↓	↓
Ruksha	Increases meda māmsa
↓	↓
Madhura rasa oja turns to Kashaya rasa	Obstruct the gati of vayu
↓	↓
Excretion through mutra	Carries oja to basti
↓	↓
Asadhya	Krichrasadhya

Exclusion by Samprapti

In dhatu kshaya janya Madhumeha Samprapti, the kshaya of Gambhira and Sarabhuta dhatus like majja, vasa, oja and lasika leads to vata prakopa. Vata dosha gets vitiated leading to ksharana of sarabhuta dhatus through mutra Pravritti in such a quantity that this ksharana of sarabhuta dhatus itself acts as etiological factor again for vata prakopa, hence this vicious circle goes on. But due to ashukaritra of vata all the stages of samprapti proceeds so fast that, it leads to asadhya stage of the disease very quickly.

In avarana janya Madhumeha Samprapti: Here it is seen that nidana is same as that of kaphaja prameha but still the resulting disease is madhumeha. Guru, Snigdhadi ahara, avyayamaadi vihara etc. leads to provocation of kapha and pitta dosha in turn increases in quantity of meda and mamsa. All these increased factors obstruct the gati of vata leading to provocation of vata and this withdraws oja from the body and takes it towards vasti and leads to Madhumeha, which is Krichra Sadhya for treatment.

Exclusion by Lakshana

Then we can see the lakshanas of both Madhumeha

In Madhumeha caused by pure vata, the patient passes urine, which is kashaya and madhura in rasa, yellowish in colour and is ruksha.

In avarana janya Madhumeha waxing and waning of symptoms will be seen. The patient shows the symptoms of vata pitta and kapha frequently and the severity of the disease diminishes for some time and again it can aggravate. It may be due to the avarana of doshas. In vyakhyana it said that the presentation will be anyata that is akasmat darshayati or sudden presentation will be there.

In outpatient department many people said that I have an increase in my blood sugar but after proper diet and without any medication it was decreased and after few days it again comes to the previous state. There will be a chance to rule out the diagnosis to avarana janya Madhumeha.

Prognosis of Avarana

Doshavarana

The diagnosis and treatment of anyonya avarana is being considered as the most difficult. In case when subtype of vayu that is prana and udana obstructer by pitta and kapha these are more severe. According to Dalhana it is gurutaram bhavati that is prana vayu got the vital functions of the body. So, when these are obstructed, they cause the bala and ojonasha and leads to nirayusha that he may lose his life too.

Dhatwavaranam

Among dhatwavarana the most difficult to treat is meda avruta vata. It may be due to its complications and poor therapeutic response

Anyonya avarana

In Anyonya Avarana Udana avruta prana is the most difficult to treat. When they obstruct each other there will be ojohani and bala kshaya and varnahani.

Upadravas of Avarana

Improper diagnosis and delayed treatment lead to Hridroga, Vidradhi, Pleeha, Gulma, Atisara etc.⁸

Treatment of Avarana

The treatment of avarana should aim towards cleansing the srotas with different medicaments which possess anabhishyandi and snigdha properties which are not antagonistic of kapha pitta, but which causes vatanulomana is beneficial.

Administration of the yavana basti sramsana chikitsa and rasayana dravya may be considered after analysing the bala of patient and stage of disease.

In anyonya avarana varieties of vata should be directed in their respective direction. Udana vata should be directed up, Apana vata should be directed downwards etc. Shilajeet and guggulu should be administered along with milk as rasayana. We can also give Chyavanprash and Abhayaamalaki rasayana for this purpose.

Panchakarmas in avarana

Panchakarma is not considered as the choice of treatment in all varieties of avarana. The selection of specific panchakarma is aimed towards removal of aavaraka. For instance, if kapha is obstructing vata, then kaphahara chikitsa should be done. The treatment modalities should be selected based on the amount of provoked kapha. The stage when kapha obstruction is removed then vatahara treatment need to be carried out.

In some specific avarana different panchakarmas are the choice of treatment. Then we can check with certain examples.

- Vyana avruta Prana- snehayukta virechana
- Prana avruta Vyana- nasya
- Prana avruta Samana- yavana basti
- Udana avruta Apana- basti

Application of vyatyasa chikitsa

In classics, some of the application of vyatyasa chikitsa are clearly described in different diseases like arsha, grahani, hikka, kasa, vatavyadhi etc.

Hikka is a vayu and kapha dominant disease. Increased vayu vitiates the urahsthanagata kapha then kapha obstructs the prana vayu and produces hikka. While explaining of nasya prayoga in hikka chikitsa, ushna ksheera and sheeta ksheera along with madhu is mentioned alternatively, it results in early prognosis of disease⁹. Ushna ksheera balances vata and sheeta ksheera along with madhu balances kapha without harming other doshas. According to Ashtanga Hrudaya Sita (Sharkara) and madhu used alternatively with ushna ksheera and sheeta ksheera respectively in hikka chikitsa.

Kasa is a condition where pranavayu is obstructed due to kaphadi Dosha. It will affect the normal movement of vayu and produces different sounds. In this condition bala and agni should be increased by adopting vyatyasa chikitsa i.e., deepana, brimhana and samshodhana alternatively as per the need and based on involvement of doshas and strength of patient¹⁰.

Pittavruta vata is a type of anyonyavarana, in which obstruction of vayu marga by pitta dosha takes place. Treatment of this avarana is sheeta and ushna chikitsa, it is adopted as alternative form or repeated form. These alternative treatments do not increase the pitta and vayu simultaneously. Sheetta Chikitsa suppresses the increased pitta and similarly ushna chikitsa decreases the vata alone. These vyatyasa chikitsa removes the obstruction and helps in normal movement of vata.

So, we can select these types of treatments in avarana according to the condition.

CONCLUSION

Concept of avarana can incorporate in every disease. We must assess each patient differently. Categorise the diseases into gatavata, avarana vata, ama vata, anubandha doshas etc in every case comes to us.

Avarana is a clinical condition where the dynamic equilibrium of vata is lost, either due to the impact of other doshas or due to untoward movement of any type of vata. The avarana is least observed diagnosed or goes unidentified due to lack of skills. To understand and analyse avarana meticulous knowledge of Ayurveda is essential. If we can trace out the exact avruta dosha and the aavaraka factor, it becomes easier to treat the case and the results become more encouraging.

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