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Application of *Kriyakala* in *Kaphaja Vikara* – A Review Article

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ABSTRACT

Establishment of disease begins from vitiation of *doshas*, affliction of dhatus and presentation of symptoms. Two methodologies of assessing stages of disease is adopted in the literature, *nidanapanchaka* and *kriyakaala*. Acharya sushruta explained *shatkriyakala* in detail in *vranaprashna adhyaya*. *Kriyakala* is the opportunity to treat the *dosha* vitiation at early stages before it progresses to a completely manifested disease. Treatment when the *doshas* have not reached the specific stage, not treating even after *doshas* have reached the specific stage or inappropriate treatment at any stage will make even curable conditions as incurable. Proper knowledge of *kriyakala* helps in understanding the process of manifestation of diseases and it propagates the need for appropriate and early intervention. Hence *Shatkriyakala* can be applied for the detailed understanding, prevention and management of diseases at different levels

Key Words *Kriyakala, Shatkriyakala, Chikitsavasara, Kaphajavikara*

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INTRODUCTION

In present era, there is continued search for the queries related to disease formation, susceptibility and prognosis. Adding to it, there are new emerging diseases and their variations, owing to lifestyle, community and global changes and the concept of *shatkriyakala* explains a unified approach that can be applied to any disease not only for understanding but also for the successful treatment. This is an attempt to understand the application of *kriyakala* w.s.r. to *kaphaja vikaras*.

OBJECTIVES

1. To understand the concept of *Shat kriyakaala*
2. To understand the role and application of information and prevention of *kaphaja vikaras*.
3. To understand the importance of *kriyakala*.

MATERIALS AND METHODS

1. Materials were collected from *bruhatrayees* and their available commentaries.



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2. Various articles, research publications, text books, and content available in internet were also considered to collect the materials.

3. Materials collected were critically analysed and rearranged for understanding, discussion and conclusion.

LITERATURE REVIEW

Kriyakala:

The term *kriyakaala* comprises of two words *kriya* and *kala*, where *kriya* is understood as the action which here refers to treatment¹. In the *vishikaanupravesaneeya adhyaya* of *sushruta samhitha*, *kaala* it has been explained to be of two types *nityaga* and *avasthika*. *Nityaga* represents seasonal changes whereas *avasthika* refers to ageing in healthy individuals and stages of disease in patients. Dalhana, commentator of *sushruta samhitha* has explained *kriyakala* as *karma avasara*, meaning opportunity to treat, implying correction of *dosha* vitiation before it progresses to next stage.

Acharya *sushruta* explained *shatkriyakala* in detail in *vranaprashna adhyaya*. The six stages of *dosha* in the evolution of diseases explained are *chaya*, *prakopa*, *prasara*, *stana-samshraya* *vyakta* and *bheda*². Acharya *vagbhata* has explained *rutukriyakala* of three physiologic stages *chaya*, *prakopa*, *prashama*³.

1) Sanchaya

Sanchaya is the first *kriyakala* and hence first opportunity to treat. It is explained by *dalhana* as *sthaanavriddhi* meaning accumulation of *doshas* in

their respective *sthaanas*⁴. Here, the *vriddhi* is in *samhati* or consolidated form. There is dislike towards the causative factors and desire for opposite factors which in turn pacifies the *dosha*. *Kapha sanchaya* can be *praakrutha* i.e *rutubhava*, *kalasvabhaava*, *aahnika* or *vaikrutha* i.e *anrutubhava* *aahaaradivashaat*, *anirdishta*. Causes for *Kapha dosha sanchaya* can be seasons like in *shishira hemantha*, *pratyusha aparahna* time of the day, *snigdha sheetha* climate, *snigdha sheetha guru madhura* food. The symptoms that manifest during *kapha sanchaya* are *gourava* (heaviness of the body) *aalasya* (lassitude) and *chayakaarana vidvesha* (aversion towards causative factors).

Management of *dosha sanchaya* is important to prevent the further vitiation of *doshas*. *Rutuvihita ahaaravihaara*⁵, *sadhaarana niyate kaala shodhana* i.e *vamana* in *vasantha rutu Chaitra masa*⁶, *nidaana parivarjana*, *dosha pratyaneeka chikitsa*⁷ is to be followed.

2) Prakopa

Prakopa is the second *kriyakaala* and is explained as *vilayana rupa vriddhi*⁸. *Dosha prakopa* maybe due to progression if not treated in *chayavastha* or due specific aggravating causes of each *dosha*. In this stage *doshas* are still in their respective sites but ready to move out as explained by *unmargagamitha*. *Prakopa* can be *chayapurvaka* or *apathya nimithaja* when progressed from *chayavastha* or *achayapurvaka* or *pathya nimithaja* when *prakopa* happens without *chaya* stage. It can be furthered classified as *prakrutha* or *vaikruta* based on the causes. *Sushruta* has



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mentioned *sheetakala*, *vasantha rutu*, *poorvahna* (first part of the day), *pradosha* (first part of the night) *bhuktamatra* (first part of digestion) as *kapha prakopa kaala*. Specific causative factors that can cause *kaphaprakopa* are mentioned as follows:

- *Divaswapna avyayama aalasya*
- *Madhura amla lavana rasa*
- *Sheeta snigdha guru picchila abhishyandi aahara*
- Food articles like *hayanaka*, *yavaka*, *naishada*, *itkata*, *maasha*, *mahamasha*, *godhuma*,
- *Tilpishtavikruti*, *ikshuvikara*
- *Dadhi dugdha krushara paayasa*
- *Aanupa audaka maamsa vasa*
- *Bias mrunaala kaseruka shrungataka*, *madhuravalliphala*
- *Samashana*, *adhyashana*

Kapha prakopa maybe due to *vyanjaka nidana* like *vasantha rutu*, *snigdha kaala*, *ushna guna* causing *vilayana* of *sanchita dosha*, or *utpaadaka nidaana* like *prajnaaparaadha*, *asaatmeyindriyarthasanyoga* or *purvajanmaja paapakarma*. Sushruta has mentioned two symptoms that are observed during *prakopavastha* – *annadvesha* (aversion towards food) and *hradayotklesha* which is explained by Dalhana as *hrallasa* (nausea). Vagbhata has explained *kapha prakopa lakshanas* as follows: *Sneha kaatinyatha*, *kandu*, *sheetatva*, *gourava*, *bandha*, *upalepa*, *staimitya*, *shopha*, *apakti*, *atinidrata*, *Shwetha varna*, *svadu lavana rasa* and *chirakaarita*⁹.

If *doshas* are not treated in *prakopavastha* yet another opportunity is lost to prevent further progression where *doshas* mobilise from their site. *Doshas* in this stage can be pacified by *dinacharya*, *rutuvihita aahaara vihara*, *nidaanaparivarjana*, *sadharana niyatha kaala shodhana- vamana in vasantha rutu Chaitra masa*, *doshabalaanusaara shamana shodhana(vamana)*, *hetuvipareeta chikitsa* and *dosha pratyaneeka chikitsa*.

3) *Prasara*

The third *kriyakala* where the vitiated *doshas* leave their sites and move about in the body to other sites¹⁰. *Prasara* is explained with two similis *kinvodakapishtha* (fermented batter flowing out of vessel) and *mahaanudaka sanchaya setumavadarya* (water from overflowing dam joining other waterbodies). Here *vata* is explained as the factor responsible for the movement, as *doshas* cannot move without *vatadosha*, as it is predominant with *rajo guna*. The *doshas* can move alone, or in combination of two or three or with *shonitha* and these permutations are 15 in number. *Doshas* which are displaced and are mobilized can affect *kratsna* (whole body) *ardha* (half of the body) *avayava* (*chibuka charana* etc parts) like the rainfall caused by moving clouds. If the *doshas* are not vitiated enough to produce symptoms or disease, they stay in *leena marga* and if not treated produce disease when favourable *hetu* and *kaala* occur. The symptoms observed during *kapha prasara* are *arochaka*, *avipaka*, *angasada*, *chardi*.



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The treatment principles to be followed are as follows;

- *Doshapratyanika chikitsa*
- *Sthanika dosha chikitsa* – if *vata* or *pitta* localizes in *kaphaja staana*, *kapha* to be treated first, if *kapha* localizes in *vataja staana* or *pittaja staana*, the *vata* and *pitta* to be treated respectively.
- *Samaveta doshe rutucharya*- in *kapha pitta samsarga* and *kapha vata samsarga*, *sharat rutucharya* and *vasanta rutucharya* to be followed respectively.
- *Samasaveta dosha chikitsa* – *vata* is treated first followed by *pitta* and *kapha*.
- *Vishamasamaveta dosha chikitsa* – strongly vitiated *dosha* is treated first¹¹.
- Among *anubandha* and *anubandhya dosha*, *anubandhya* is treated first.

Dalhana differentiates *prasara* from *prakopa* with a simili, where *prakopa* is compared to melting of solid ghee whereas *prasara* is compared to ghee frothing out of the vessel on heating continuously.

4) *Staanasanshraya*

If the *doshas* are not treated in *prasaraavastha*, it leads to fourth *kriyakala* where the *doshas* lodge in favourable sites (*khavaigunya/srotovaigunya*) and *dosha dushya sammurchana* occurs¹². Premonitory symptoms indicating impending disease are observed, which maybe nonspecific (*samana purvarupa*) or disease specific (*vishishta purvarupa*)¹³.

The formation of disease depends on the parts of the body where *dosha dushya sammurchana* occurs. Examples explained are as follows:

Udara- gulma vidradhi udara agnisanga aanaaha visuchika atisara jalodara

Basti- prameha ashmari mutraghata mutradosha

Medra- nirudhaprakasha, upadamsha, shukadosha

Guda- arshas bhagandara

Vrishana-vruddhi

Urdwajatru- urdwajatrugata vikaras

Twak mamsa rakta- kshudraroga visarpa kushta

Medas- granthi apache, arbuda galaganda, alaji

Asthi-vidradi anushayi

Paada- shleepada vaatashonita vatakantaka

Sarvanga- jwara, saravanga roga- sarvanga vatavyadhi, prameha, pandu, shosha

Treatment in *staanasanshraya* is done by *dosha dushya (ubhayaashritha) chikitsa* and *vyadhipratyanika chikitsa*.

5) *Vyaktaavastha*

If treatment is not done in *stansanshraya avastha* yet another opportunity is lost to stop the progression and manifestation of the disease, leading to *vyaktavastha*. This is the fifth *kriyakaala* and the diseases is fully manifested with their cardinal symptoms.

Charaka has mentioned 20 *kaphaja nanatmaja vyadhis* in *maharogaadhyaya*¹⁴. Examples quoted in *sushrutha samhitha* are *shopha, arbuda, granthi, vidradh, visarpa*. Cardinal symptoms of diseases are observed like *santaapa* in *jwara, sarana* in *atisaara, purana* in *udara*.



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Vyadhipratyanika chikitsa is the treatment principle advised in this stage in the dalhana commentary.

6) Bheda

This the sixth and last opportunity to treat the disease and if not treated, disease becomes incurable. The specific symptoms attributed to doshas manifest in this stage as clear differentiation of *dosha* involvement occurs (ex: *ashtajwara*). *Vyadhi pratyanka-vishesha chikitsa* is advised.

Importance of kriyakala:

Kriyakala is the opportunity to treat the *dosha* vitiation at early stages before it progresses to completely manifested disease. With progression of each stage it becomes difficult to treat than the previous stages. The treatment of *doshas* should be done such that it does not cause aggravation of other *doshas*¹⁵.

If *doshas* are not treated at the right stage or if inappropriately treated, even the curable diseases become incurable³⁵. (Repeat from abstract)

Application of *shodhana* which is quantitatively and qualitatively insufficient in severe diseases leads to *ayoga* which intensifies the disease. Application of *shodhana* which is quantitatively and qualitatively excessive in insignificant diseases can lead to *atiyoga* which weakens the malas and also the body³⁶.

DISCUSSION

Establishment of disease begins from vitiation of *doshas*, affliction of *dhatu*s and presentation of

symptoms. This happens in stage after stage and in some diseases, the stages are very rapid and we may find it difficult to access the individual stage. And in some of the diseases, it is slow and every stage of disease can be appreciated clinically. Two methodologies of assessing stages of disease is adopted in the literature, *nidanapanchaka* and *kriyakaala*. Sushruta has explained this *shatkriyakala* in context of *vrana* and applied in two other contexts, *vidradhi* and *pramehapidaka*. Even though sushruta has not explained other diseases with this principle, one can extend this methodology to other diseases, with some limitations, especially in clinical practice.

Kriyakala can be compared with the course of disease in modern disease, from susceptibility to disability. The stage of *sanchaya* and *prakopa* can be compared to susceptibility or pre pathogenesis stage, where there is interaction of risk factors and host, under predisposing factors for occurrence of disease. *Prasara* and *sthanasanshraya* stage can be compared to presymptomatic stage where pathogenesis is already begun but without any gross or obvious manifestations indicative of a disease. The fifth stage, *vyaktavastha* can be compared to the stage of clinical disease characterized by cardinal signs and symptoms. Early diagnosis and treatment would be the principle of treatment here. Last stage of *bheda* can be compared to stage of diminished capacity which may result in recovery, disability or death. Hence *Shatkriyakala* can be applied for the detailed understanding, prevention and management of diseases at different levels



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CONCLUSION

Proper knowledge of *kriyakala* helps in understanding the process of manifestation of diseases and it propagates the need for appropriate and early intervention. A *bhishak* needs to observe the patient carefully to access the stage of pathogenesis using *darshana*, *sparshana* and *prashna*. Early stages with minimum vitiation and systemic involvement can be treated with simpler treatment principles. Failure to identify the vitiation of *doshas* and *dhathus* and the stages leading to disease formation will cost the opportunity of easy and complete remission and may lead to bad prognosis or death. Hence the knowledge of *shatkriyakala* is of great significance in understanding of all *vikaras*.



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