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A Critical Review on Understanding Vatarakta

Author: Kavya A¹

Co Authors: Parvathy S²

ABSTRACT

Vatarakta is a chronic, progressive disorder present in the society caused due to mithya ahara, vihara and sedentary lifestyle. Vatarakta as the name suggest is the vitiation of vata dosha and rakta dhatu. In this condition the normal flow of vata is obstructed by rakta. The disease is initially limited to the uttana dhatu leading to uttana vatarakta but later on involves the gambhira dhatu giving rise to gambhira vatarakta. Vatarakta is a broad term when viewed under the lens of contemporary science ranges from autoimmune connective tissue disorders to metabolic disorders. The treatment should not only aim on samprapti vighatana but also on lifestyle modification in the present era. The present study aims to give a sight of critical review on the disease Vatarakta.

Key Words Vatarakta Mithya Ahara, Vihara

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INTRODUCTION

Vatarakta is a progressive disorder due to multiple causes which involves various metabolic or biochemical disturbance, the effects of stress and the allergic states¹. Due to increasing industrialization. urbanization. environmental pollution, sedentary lifestyle and improper dietary habits, incidence of Vatarakta is increasing in last few decades. The word Vatarakta comprises of two words which include vata and rakta. In this condition vata dosha and dushya rakta are vitiated simultaneously². It is called so because of rakta's saturation with vata and its predominance by the same. Adhyavata, Khudavata and Vatabalasa are the synonyms

used in literature to refer the illness Vatarakta based on its clinical occurance, anatomical site and the severity of the disease respectively³. Due to the involvement of both vata and rakta there is severity in the presentation of the symptoms of this condition which is *sheegrakari* and *yapya* to treat. This presentation of the disease is due to the guna of vata and rakta which have similar properties as that of vayu and agni i.e they mutually synergise the effect of each other. Sushruta describes this condition under the chapter Vatavyadhi while Charaka and Vagbhata assign a separate chapter to this disease. Though it involves vata and rakta, due to its vitiating factor vata it is mentioned under Vatavyadhi. But other acharyas designate a separate chapter due to

^{1,2}Department of Shalya Tantra, SDM institute of Ayurveda and Hospital, Bangalore, Karnataka, India





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its specific aetiology and pathogenesis involved

in this condition. NIDANA [Table 1]

Table 1 Nidana of Vatarakta

Aharaja Nidana	Viharaja Nidana	Acc To Prakruti
 Amla, katu,lavana, kshara 	■ Abhighata	 Sukumara
Snigdha, ushna	 Asuddhi 	Sthoulya
 Klinna and shushka bhojana 	 Divasvapna 	Avyayama persons
 Ambuja and anupa mamsa 	 Ratrijagarana 	
Pinyaka, moolaka, kulatha,	 Ambukreeda 	
masha, nishpava	Plavana	
 Dadhi, aranala, sauveera, 	 Langhana 	
sukta, takra, sura	 Vyavaya 	
 Viruddhahara, adhyasana 	 Vega nigraha 	

1. Lavana, amla, katu, kshara

These *rasas* and *gunas* of the ahara possess *agni mahabhoota* predominantly which does *rakta dushti* and *vata vriddhi*.

2. Snigdha, ushna ahara

It leads to agnidushti and pitta vidagdatha.

3. Klinna and shushka bhojana

Intake of these type of *ahara* is against *ahara* vidhi vidana which leads to *agnimandya* which further does rakta dushti.

4. Ambuja and anupa mamsa

It possesses abhishyandi guna which leads to *rakta* dushti and santarpanajanya vyadhi.

5. Pinyaka, moolaka, kulatha, masha, nishpava

Excessive intake of these leads to pitta dushti along with kapha *dosha*.

6. Dadhi, aranala, sauveera, sukta, takra, sura, asava

These are entitled under amla varga dravya which have vidahi guna. Excessive consumption leads to *rakta* dushti and pitta vriddhi.

7. Viruddhahara, Adhyasana

These are improper method of consumption of food which will lead to ajeerna. Ajeerna is one of the contributing factor in the pathogenesis of *Vatarakta*.

8. Krodha, divaswapna, prajagara

These all are mithyaviharajanya nidanas which lead to *dosha* dushti. Excessive krodha leads to pitta dushti and agni dushti which in turn forms ama. Divaswapna and ratrijagarana does agnimandya.

9. Sukumara and achankramanasheela

Individuals who are habituated to sedentary and luxurious lifestyle will lead to *rakta* dushti.

10. Ashuddha and abhighata

If an individual doesn't undergo seasonal shodhana and if traumatic injury occurs it will lead to *rakta* dushti.

SAMPRAPTI

Acharya *Charaka* and *Vagbhata* has explained etiopathogenesis in detail. *Vatarakta* is also considered as avaranajanya *vata*vyadhi. In order to understand the pathogenesis of *Vatarakta* one should understand the concept of avarana. *Vata dosha* possesses chala guna which helps in entering it into sukshma srotas. *Rakta* is considered as jeevana because it does dharana of the shareera. By the etiological factors *vata* and *rakta* gets vitiated on its own. Then dooshita





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rakta does avarana of dooshita vata dosha in turn leads to more aggravation of vata which causes sanga of rakta dhatu and in later stages it does vimargagamana which further vitiates other dhatus and causes Vatarakta.

SAMPRAPTI GHATAKA

Dosha - Vata

Dushya – Uttana: Rasa, *Rakta*, Mamsa

Gambhira: Rasa, *rakta*, mamsa, medas, asthi and majja

Srotasa – Rasavaha, *Rakta*vaha, Asthivaha

Agni – Vishmagni

Udhbhavasthana – Pakwashaya

Vyaktasthana – Twaka, Snayu, Sandhi

Srotodushti – Sanga, Siragranthi

RUPA[*Table 2 & 3*]

Roga Marga- Madhyama

STHANA OF VATARAKTA⁹

The sthana of *Vatarakta* is Kara (hands), Pada (feet), Anguli (fingers) and Sarva Sandhi (all joints). Initially it starts at Hasta-Pada Moolgata Sandhi (roots of hand and feet joints) and then spreads all over the body.

PURVARUPA

Sveda bahulya or svedabhava, karshnyat, sparsagnata, kshathe athiruk Sandhi saithilyam, alasyam, sadhanamangam, pidakodgamam, vaivarnya and mandalotpathi in twak, nisthoda, spurana, bheda, gurutwa, supthi in janu, jangha, uru, kati, amsa, hasta, padaanga and sandhi.

Table 2 Lakshanas based on dosha predominance

VATADHIKA	PITTADHIKA	KAPHADHIKA	RAKTADHIKA	
- Sirayama	- Vidaha	- Staimitya	- Staimitya	
- Sula	- Vedhana	- Gourava	- Gourava	
- Spurana	- Murcha	- Snehatwa	- Snehatwa	
- Toda	- Sweda	- Supthi	- Supthi	
- Shothasya karshnyam	- Thrishna	- Manda ruja	 Manda ruja 	
roukshyam	- Mada	- Kandu	- Kandu	
- Shyavata vriddi hani	- Brama	- Swetata	- Swetata	
- Dhamani anguli sandhi	- Paka	- Sheetata	- Sheetata	
sankocha	- Raga	- Sopha	- Sopha	
- Angagraha	- Bheda	- Stabdatwa	- Stabdatwa	
- Atiruk	- Sosha			
- Stambana	- Ugra daha			
- Sheeta pradhvesha	- Atiushnatwam			
- Sparshodwigna Bheda	- Sophasya			
- Prashosha	mridutwam			
- Swapa	- Sammoha			
- Sheetanupashaya				

Table 3 *Lakshanas based on types of Vatarakta* UTTANA VATARAKTA GAMBHIRA VATARAKTA Kandu Svayatu stabdhata Daha Svayatu kathinya Ruja Bhrisharthi Shyavatha Ayama Tamra twak Toda Spurana Kunchana Daha Toda Syava twak Rakta twak Sphurana Bheda Paka and Ruja Vidaha Gourava





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-	Suptata	- Vatasyasandyasthi majjasuchindanniva	
		-	Kanjatwa, pangutwa and adhika purvaruk

UPADRAVA

Acharya *Sushruta*, *Charaka* has enumerated the upadravas but *Vagbhata* has not enlisted them.[Table – 4]

Table 4 Upadravas according to different acharyas

Table 4	∪padravas accor	ding to d	lifterent acharyas
Achary	a Sushruta ⁵	Achar	rya Charaka ⁶
-	Prana	-	Aswapna
kshaya		-	Arochaka
-	Mamsa	-	Shwasa
kshaya		-	Mamsa kotha
-	Pipasa	-	Shirograha
-	Jwara	-	Moorcha
-	Moorcha	-	Mada
-	Shwasa	-	Ruk
-	Kasa	-	Trishna
-	Sthambha	-	Jwara
-	Arochaka	-	Moha
		-	Pravepaka
		-	Hikka
		-	Pangulya
		-	Visarpa
		-	Paka
		-	Toda
		-	Bhrama
		-	Klama
		-	Anguli vakrata
		-	Sphota
		-	Daha
		-	Marmagraha
		-	Arbuda

SADHYASADHYATA⁷

- Ekadoshaja and naveena Sadhya
- Dwi*dosha*ja Yapya
- Tri*dosha*ja and upadravayukta Asadhya

Acharya Charaka has also opined other criteria for considering the condition as asadhya which have lakshanas like Samprasavi (profuse discharge from the Vivarna ulcer). (discoloration), Stabhdha (stiffness), Arbudakrita (tumour like lesion), Sankocha (constrction) and *Indrivatapa* (damage to the senses). Even if there is Moha (mental confusion) alone, then also the disease is considered as incurable⁸.

CHIKITSA

A] SAMANYA CHIKITSA

- **RAKTAMOKSHANA:** Acharya *Charaka* has mentioned *rakta*mokshana with shringa, jalouka, suchi, alabu and pracchana or siravyadha after considering the vitiation of the *doshas* and the strength of the patient.
- *VIRECHANA:* After proper snehana, mridu virechana should be given with sneha dravya or rooksha dravya. After virechana Anuvasana basti and Niruha basti should be given.

B] VISHISHTA CHIKITSA

Avagaha

I. Based on the site of the origin[Table-5]

Table 5 Vishishta chikitsa according to types of VataraktaUttana VataraktaGambhira VataraktaPralepaVirechanaAbhyangaAsthapana bastiParishekaSnehapana

II. Based on the predominance of dosha

- 1. Vatadhika: Pana, abhyanga and basti with combination of four snehas and upanaha to the affected areas according to Charaka. Purana ghrita pana is recommended by both Vagbhata and Sushruta. If the disease affects the joints of the legs only then Asthapana basti followed by Anuvasana basti should be given.
- **2.** *Pittadhika:* Virechana, pana with ghritha and ksheera, parisheka, basti and sheeta lepa. Same treatment is followed in *Rakta*dhika *Vatarakta*.







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3. *Kaphadhika:* Mridu vamana, avoiding excessive snehana, parisheka, upavasa, and ushna lepa.

SHODHANA CHIKITSA

1. VIRECHANA

After proper *Snehana*, *Mridu Virechana* with *Snigdha* or *Ruksha dravyas* according to the condition, should be advised to the patient¹⁰. *Acharya Charaka* has mentioned the use of *Eranda Taila* with milk in *Bahudosshavastha*¹¹, *Abhaya Kashaya* or *Ghritabhrishta Trivrita Churna* with *Ksheera* or *Draksha Rasa* decoction of *Kashmarya*, *Trivrita*, *Draksha* and *Parushaka* with *saindhava* and *madhu* for *virechana karma*¹².

2. RAKTAMOKSHANA

Acharya Charaka, Sushruta, Vagbhatta have mentioned Raktamokshana in Vatarakta. The

predominant pathology of *Vatarakta* is the *avarana* of *rakta arga* which causes the accumulation of the *dushitha rakta*. Hence this treatment modality is considered as the main treatment of *Vatarakta*. It should be done with the help of *Shringa*, *Jalauka*, *Suchi*, *Alabu*, *Prachhana* and *Siravyadha*¹³.

3. BASTI

Acharya Charaka has mentioned that there is no treatment available as efficient as Basti. The Mala should be eliminated by administrating Ksheera Basti mixed with ghrita¹⁴.

SHAMANA CHIKITSA

After the completion of the *shodhana chiktsa*, *shamana chikitsa* is essential to subjugate the *dosha*s that may still be in a vitiated condition. Yogas mentioned in the classics are enlisted below.[Table-6]

Table 6	Vocas	mantioned	in	alacciac
rable o	1 Ogas	mentioned	Ш	Classics

Kashaya	Choornas	Arista and Asavas	Taila	Ghrta yogas
Manjishtadi	Saddharana choorna	Punarnavasa	Pinda taila	Sravanyadi ghrita
Rasnerandadi	Rasnasaptaka	Amritarista	Dhanwantaram taila	Bala ghrita
Kokilaksha	ashta choorna	Balaritsta	Amrtadya taila	Parusaka ghrita
Rasnapanchaka	Hinguvachadi		Satapaka bala taila	Jivaniya ghrita
Amruthothara	choorna			
Vasaguduchyadi				
Lepas	Guggulu yogas	Rasa yoga	as Rasayana yogas	
Jadamayadi lepa	Kaisora guggulu	Vatavidhwamsini	rasa Amalaki dasar	noola rasayana
Kottamchukkadi lepa	Mahayogaraja guggulu	Yogendra rasa	Kushmanda ra	isayana
Manjishtadi lepa	Amritadi guggulu		Amritaprasava	aleha
DIGOTIGGIA		TZ 1	1 1	1 (1 1 '

DISCUSSION

The leading cause of *Vatarakta* is *apathya ahara* sevana & lifestyle in present era. Margavarana in this condition leads to the manifestation of disease. Shodhana, shamana and bahiparimarjana chikitsa are aimed to rectify the margavarana. Raktamokshana is the first line of treatment in both uttana and gambhira vatarakta.

Ksheera basti mentioned by Charaka is the efficient treatment which does snaihika virechana. Rasayana chikitsa should be employed as the disease is progressive and chronic in condition which helps in dhatu poshana. Acharya Charaka mentioned pathya apathya of vatarakta which plays important role in prevention of this condition.

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CONCLUSION

In present era due to the *mithya ahara*, *vihara* and sedentary lifestyle *Vatarakta* has become one of the most common conditions seen in day to day life. It is very important to understand the

pathogenesis and stage of this condition to treat it effectively. In contemporary science it can be considered as hyperuricemia, hypertension, vascular diseasesThe treatment modalities mentioned by acharyas are effective in *Vatarakta*.



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