CONCEPT OF BLEEDING DISORDER IN AYURVEDA

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ABSTRACT

Raktapitta is caused by vitiation of two body elements, namely Rakta and Pitta together due to their Ashray–Ashrayee relationship. Raktapitta is a Raktjavikar caused due to raktvaha srotodushti. When pitta vitiated Rakta increases in amount due to usna guna of pitta, it starts flowing out of the body through different parts - upward, downward or both, or through skin pores. When patient complaining bleeding from guda, yoni, difficult to differentiate between AdhogRaktapitta, Raktaatisar, Raktapradar, Raktarsh, like that hemophilia, Purpura & Vacuities with Ubhaya Raktapitta. There are major similarity in nidan, rup and doshash involved, some minor difference need to be study to diagnose the disease. Which can be done only by the deep knowledge Ayurvedic diagnostic tools, by the critical evolutions of the nidan panchak. The classification of the disease, differentiation from the other disease and enhance the treatment of modalities of Ayurvedic management.

Keywords: Nidan panchak, Raktapitta, Raktaatisar, Raktapradar, Raktarsh.

INTRODUCTION

Ancient Ayurveda has own unique and original concept and fundamental principles, further this system considered Dosha, Dhatu and Mala as the root of Sharira. Dhatus are responsible for sustenance of life. Among them Raktadhatus is most important without them life is endangered. Sushruta bestows importance to rakta equal to the tridoshas, the body is supported and maintained by rakta. The most important function of rakta is ‘Jeevana kriya’ i.e. it sustains life. “Raktam jivayati prananuvartana karoti” The term ‘prananuvartanam’ also indicates that it carries the vital –vayu – ‘prana’. Mulas of raktavaha srotases is yakrit and pleeha by Charaka and sushrut further added Raktavahini dhamanis. Therefore the disorder of all these organs are to be taken as Raktajvyadhi. Raktapitta is a particular disease caused by Raktava srotodusti. Charaka has mentioning Raktapitta as a Mahagada, disease Raktapitta manifests itself with absolute rapidity and spreads all over the body like fire. It invades the body in all possible directions and becomes critical if not diagnosed or treated properly. According to modern bleeding disorder caused by platelets dysfunction, vessel wall defect and coagulation factors. Raktapitta is a bleeding disorder where in the blood vitiated by Pitta flows out of the orifice of the body. In simple words any bleeding that takes place because of endogenous i.e. internal causes (and not related to injury, trauma etcetera exogenous cause) is called Raktapitta.

This hemorrhage may occur from urdvajatrugata angas like nose, mukha, karna or from downward Adhoangas, gudmarg, mutra marg, yonimarg etc, or it
may occur from all the *romakupas* (hair follicle) of the entire body.

**AIMS AND OBJECTIVES:** To study the *Nidan panchak of Rakta* and its correlation with bleeding disorder.

**MATERIAL AND METHODS:** Compilation of literature related to *Rakta* from classical, published article, internet site and modern text.

*Acharya Charaka* has described it in the chapter immediately after *Jwara* as it arises due to the *Santapa* caused as a result of *Jwara*, whereas *Acharya Sushruta* has described it after discussing *Pandu* as they have common causative factors.

**Nirukti/Definition:**

1. *Pitta* associates or interacts with *Rakta*, hence the term *Rakta*.  
2. On interacting with *Rakta* also became rakta, light in colour hence it is *Rakta*.
3. *Pitta* vitiates *Rakta* on its interaction. *Charaka* explaining, rationally behind naming this as *Rakta* said-

   - In this disease process –
     1. *Samyoga:* *Pitta* and *Rakta* are combined together.
     2. *Rakta dhatu* is vitiated by aggravated *Pitta dosa*.
     3. Because of interaction, between *Pitta* and *Rakta*, *Pitta* also become reddish i.e. both are same colour.  

**NIDAN/CAUSES –**

**Ahara:**

- *Rasa* - Excessive consumption of Diet that is *Amla* (sour), *Katu* (pungent), *Lavana* (saline).
- *Guna* - Intake of excessive *Vidahi* (Improper digestion leading to burning sensation of food), *Tikshna* (Sharp),

**USHNA (Hot), KSHARA (Alkalis)**

**Vihara:**

- *Aatapa* - Excessive exposure to heat of sun
- *Vaaayama* - Excessive physical exercise
- *Vyavaaya* - Excessive indulgence in sexual activities
- *Adhwa* - Excessive walking

**Manas:**

- *Shoka* - Excessive grief
- *Kopa* - Anger
- Other:
- Excessive of *Virechana.*

**Samprapti/Pathogenesis** -

The disease *Rakta* develops and manifests as the pathogenesis runs through the below mentioned-

- *Pitta* aggravated by the above said *nidanas* and leaves its site and reaches *Rakta* (blood).
- Being a *mala* (waste product) of *Rakta*, the *Pitta* on getting mixed with *Rakta* attains quantitative increase.
- The *Pitta* in turn vitiates the *Rakta*. Due to the heat of *Pitta*, the *drava dhatu* or the liquid portion (fluid) of other tissues like *Mamsa* (muscles), *Meda* (fat) etc., oozes out of their respective tissues and gets mixed with *Rakta*.
- This further enhances the quantity of blood flowing in the blood vessels creating immense pressure in the blood vessels.
- Due to the pressure of the blood and heat of *Pitta*, the walls of the blood vessels get damaged and the blood starts flowing through various openings of the body.
- Bleeding occurs through mouth, nose,
ears, skin, anus, penis and vagina.

This bleeding of blood vitiated by Pitta through various orifices of the body is called Raktapitta.¹⁰

\[
\begin{array}{|c|c|}
\hline
\text{Nidan seven} & \\
\text{Pitta prakop} & \\
\text{Rakta} & \\
\text{Raktavaha srotus} & \\
\hline
\end{array}
\]

\text{Rupture Raktavaha srotases} \downarrow \text{Irritation}

\text{Raktapitta disease manifested}

\text{Samprapti Ghatak /Disease Profile:}

<table>
<thead>
<tr>
<th>Dosha</th>
<th>Pitta</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dushya</td>
<td>Rakta</td>
</tr>
<tr>
<td>Srotas</td>
<td>Raktvaha srotas</td>
</tr>
<tr>
<td>Adhisthan</td>
<td>Yakrit, pleyha</td>
</tr>
<tr>
<td>Srotodushti</td>
<td>Atipravriti, vimarg, gaman</td>
</tr>
<tr>
<td>Swabhav</td>
<td>Ashukari</td>
</tr>
<tr>
<td>Agni dushti</td>
<td>Jatharagni, rasa, rakta, agni-agnimandh</td>
</tr>
</tbody>
</table>

\text{Poorvaroopa:}

- Anannabhilasha
- Bhuktasya vidahata
- Sukta Amla Udgara
- Swarabheda
- Paridaha
- Klama
- Shiro gowrava
- Kasa
- Swasa
- Bhrama


- Matsya gandha¹².

\text{Bheda/Classification:-}

1. Based on the \text{Dosha} predominance:
   1. \text{Vataja}
   2. \text{Pittaja}
   3. \text{Kaphaja}
   4. \text{Sanipataya}
   5. \text{VataPittaja}
   6. \text{Pittakahaja}
   7. \text{Kaphavataya}

\text{LAKSHANAS (ROOPA) :}

1. \text{Vataja Raktapitta} : When it is associated with Vata dominance, the blood will be
   - Shyava
   - Aruna
   - Saphena
   - Tanu
   - Rooksha

2. \text{Pittaja Raktapitta}: When it is associated with Pitta dominance, the blood will be
   - Kashaya like the colour of the Patala flower
   - Black like Go mutra (Cow’s urine)
   - Mechakagara dhuma Anjana

3. \text{Kaphaja Raktapitta} : When it is associated with Kapha dominance, the blood will be
   - Sandra
   - Sapandu
   - Sasneha
• **Picchila**

4. Sannipataja Raktapitta:- When vitiated by all the 3 Dosha then the signs and symptoms of all the 3 Doshas are manifested in the blood.

5. Samsargaja Raktapitta:- When vitiated by 2 Doshas, the signs and symptoms of the aggressive two Doshas are manifested in the blood.  

**Sadhyas Asadhyata:**

1. The Raktapitta is associated with :-
   - One Dosha - Sadhya (Curable)
   - Two Doshas- Its Krichrasadhya or Yapya
   - All the 3 Doshas - Asadhya (Incurable)

2. Uradhvaga which is Kapahaanubandhee is - Saadhyam.

3. Adhoga which is Vaataanubandhee is - Yaapyam.

4. Udbhaya which is Vatakapahaanubandhee is - Asaadyam.

5. It also becomes Asadhya in following conditions:-
   - If patient is having Mandagni
   - Ativegavat
   - If the patient is emaciated by diseases
   - Ksheena Deha
   - Vrddha
   - Anasha
   - When bleeding takes place in excess through either of Urdbhya or Adhomarga
   - Kunapa gandhi
   - Krishnavarana 
     - When it gets obstructed in throat

• **Upadrava sahita.**  

**Chikitsa Siddhant** :

- Santarpana / Apatarpana Chikitsa
- Mrudu, Sheetala, guna Ahara
- Madhura, Tikta, Kashaya Rasa Ahara
- Pradeha, Parisheka, Avagaha, Samsparshana etc, external coolants
- Pratimargararana Chikitsa

1) “Pratimarga cha haranam Raktapitte vidheyathe ”Pratimaarga (Viruddha)
Maarga Harana (Shodhana): Eliminating the causative, vitiated Dosha from the opposite direction of its manifestation is the key to management of Raktapitta.

2) **For Uradhvaga Raktapitta :**

Kashaaya and Tikta Rasa are criteria. Virechana should be given.

**For Adhoga Raktapitta :** Shamana Dravya and Madhura Rasa is to be used. Vamana should be done.

In Uradhvaga Raktapitta - Tarpana should be given in the beginning

In Adhoga Raktapitta - Peya should be given in the beginning


- Sthamban nishedh.

**Shaman chikitsa :**

- Atruskwadi kwath.
- Usheeradi churna.
- Vasaghrit.
- Shatavaryadi ghrit.

**UPDRAVA:**

- General weakness
- Dyspnœa
Cough
Sensation of burning
Stupor
Fever
Drowsiness
Vomiting
Heavy chest and chest pain
Thirst
Change in voice quality
Foul smelling sputum
Loathing of food
Indigestion
Restlessness
Loss of libido.

Arista Lakshan:

- Bleeding of various abnormal colours like green, black, gray and yellow etc.
- Bleeding through skin
- Bleeding which leaves stains on the cloth after washing
- Foul smell of the bleeding
- Heavy spurting type of bleeding
- Severe loss of blood from the body.

Panchamool Siddha Jala.

- Phala - Kadali, Talaphala, Dadima, Amalaki, Narikela, Kapittha, Draksha, Ikshu, Pakva Amra Phala, Shrugataka, Kamalgadha, Gambhari, Kharjura, Panasa, Mocharasa, Karkati, Taruni, Vidarikanda, Shatavari, Kasheruk, Shrugataka etc.
- Utpaladi Siddha Ksheera, Peya, Yoosha, Yavagu, Mamsa Rasa.
- Other - Mishraya, Laja, Saktu, Madhu, Shra- kara, Gajapippali, Guda, Vasa-Meda-Majja.

Apathya:

- Rasa - Katu, Amla, Lavana
- Guna - Vidhi
- Drava - Kaupa Jala, Madya.

DISCUSSION:
Charakacharya has described it in the chapter immediately after Jwara as it arises due to the Santapa caused as a result of Jwara, whereas Sushruta has described it after discussing Pandu as they have common causative factors. That can be diagnosed by the classical signs and symptoms. It can be correlated with the bleeding disorder and diagnosed and differentiate by Panchanidana & lab investigation (1. Bleeding time & Clotting time, 2. Platelet count, 3. Activated partial thromboplastin time (APTT), 4. Thrombin time (TT), 5. Prothrombin time, 6. INR (international normalized ratio), 7. Fibrinogen level 8. Coagulation screening, 9. Von willbrand disease screens 10. Light transmission platelet aggregometry.) In generally raktapitta can be correlated with bleeding disorders on the basis of site of bleeding but differentiated by nidana, rupa, poorvarupa, upshayanupashaya & sanprapti.

Example: - Bleeding from adhomarga
(Yoni) known as raktapradora the nidanapanchaka of raktapitta (adhogmaraga-yoni) are different from raktapradora and principle of treatment is also different.

CONCLUSION:
The blood expelling out of the body is not Shuddha Jeeva Rakta, but due to the nature of the disease Rakta - the Pranaashraya itself gets vitiated. Thus, this is Ashukari (acute) hence Raktapradoshaja disease can be considered as one of the life threatening disorders. Severity depends upon the cause and the blood loss.

Therefore a wise physician who has a clear cut knowledge of the hetu and Lakshanas of Raktapitta, A physician who has skills of diagnosing this condition as quickly as possible should treat it immediately, without any delay.

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15. Vidhyalankar A, As.Hr.sh.5/79
16. Vidhyalankar A, As.Hr.sh.5/80

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