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SCIENTIFIC EXPLORATION ON PROGNOSTIC ASPECTS OF *TAILA BINDU PARIKSHA*

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ABSTRACT

Introduction *Mutra Pariksha* (urine examination) is one of the eight diagnostic methods outlined in *Ashtavidha Pariksha*, serving both diagnostic and prognostic roles in Ayurveda. Among its techniques, *Taila Bindu Pariksha* (Oil drop test in urine) is a traditional method that evaluates the nature and progression of diseases by observing the behavior of an oil drop placed in a urine sample. This approach, described in classical Ayurvedic texts such as *Yogaratanakara*, *Vangasena Samhita*, and *Yogatarangini*, involves analyzing the oil's spread, shape, and movement to draw clinical insights. **Materials and Methods** This review is based on an extensive study of classical Ayurvedic literature, scholarly articles, and research focused on the prognostic value of *Taila Bindu Pariksha* across various disease conditions. **Result** The findings underscore the relevance of prognostic aspects of *Taila Bindu Pariksha* in contemporary practice, particularly in settings with limited resources. Its simplicity, affordability, and non-invasive nature make it a practical tool for early disease assessment and prognosis. **Discussion** Reintroducing *Taila Bindu Pariksha* into clinical practice could greatly strengthen Ayurvedic diagnostic methods and facilitate early disease prognosis, ultimately improving therapeutic approaches. By integrating this ancient technique with modern medical approaches, practitioners can gain deeper insights into disease progression and *Dosha* imbalances, ultimately improving patient care and outcomes.

Key words: *Mutra Pariksha*, *Ashtavidha Pariksha*, *Taila Bindu Pariksha*, *Yogaratanakara*

INTRODUCTION: Ayurvedic literature propose to diagnose the disease first and then to ponder over the therapy. For appropriate diagnosis of the sickness and disease status, patient's distinct pathophysiological conditions are studied under the broad heading *Ashtavidha Pariksha* (8 sorts of examinations). *Rogamadou Parikshet Tatoanantharamoushadham* ^[1] *Ashtavidha Pariksha* include the following:

1. *Nadi*/Pulse
2. *Mutra*/Urine
3. *Malam*/Stool

4. *Jihwa*/Tongue
5. *Shabda*/Speech
6. *Sparsha*/Touch
7. *Drik*/ Vision
8. *Akrti*/Shape

Mutra Pariksha, or urine examination, is one of the diagnostic procedures mentioned above that has received particular attention in some medieval texts such as *Yogaratanakara*, *Basavarajiyam*, *Chikitsasara*, etc. In addition to examining the colour, appearance, and consistency of urine, a unique method for *Mutra* examination called *Taila Bindu Pariksha*

was created in order to diagnose medical conditions and determine their prognosis. *Taila Bindu Pariksha* is a specialized diagnostic method for *Mutra Vikara* (Urinary Disorders). Physicians need to have technical skills, scientific knowledge, and human understanding to accurately diagnose diseases. [2] Diagnosis and treatment of treatable diseases require suitable techniques and training. [3] Poorly described patients and incorrectly diagnosed diseases might lead to confusion for physicians. [4] According to Acharya Charaka, physicians should first assess the disease, then administer the medication, and last care the patient. [5] Success is guaranteed for those who understand disease characteristics, are well-versed in therapeutic approaches, and have gained the necessary knowledge at the right moment. [6]

MATERIALS AND METHODS

A comprehensive analysis of classical Ayurvedic texts, including Yogaratnakara and Charaka Samhita, along with peer-reviewed research articles from databases such as PubMed, Google Scholar, and

other relevant academic journals, was undertaken to ensure a thorough understanding of the subject matter

TAILA BINDU PARIKSHA

Acharya Yogaratnakara described a scientific and methodical method for examining *Mutra* with high prognostic value in ayurveda.

Collection of Mutra for examination

Vaidyas should collect the patient's *Mutra* for *Pariksha Vidhi* before four *Ghatika* (*Ghatika*= 24 minutes) in the last *Yama* (*Yama* =3 hours) of the *Ratri* (night). To collect *Mutra* from the patient's *Madhyadhara* (mid urine flow), discard the *Addyadhara* (initial urine flow) and collect it in a *Kacha*, *Kansya*, or *Mrudd Patra* (glass, bronze, or earthen dish).

METHOD

Mutra Pariksha Vidhi should be conducted after sunrise, preferably in daylight. *Mutra* should be taken in a glass, bronze, or earthenware dish in a suitable quantity. To test urine, a drop of *Tila Taila* is put on the surface using *Trina Kashta*. Observe the movement and spread of the *Tailabindu*. [7]

PROGNOSIS ON THE BASIS OF MOVEMENT OF THE TAILA BINDU

TABLE 1: Movement of Taila Bindu and Prognosis of Vyadhi

SI No	Movement of Taila Bindu	Sadhyasadyata (prognosis) of the Vyadhi
1.	Spread immediately	Sadhya Vyadhi (curable)
2.	Does not spread	Kashta Sadya Vyadhi (difficult to cure)
3.	Sink to bottom	Asadhya Vyadhi (incurable)

TABLE 2: Spread of Taila Bindu and Prognosis of Vyadhi

Direction of Movement/Spread of Taila Bindu	Sadhyasadyata (prognosis) of the Vyadhi
Purva (East)/Paschima(West)/Uttara (North)/Dakshina (South)	Sukha Sadhya (curable)
Eshanya (North-east corner)	Death within one month
Agneya (East)/Nairutya (South-West corner)	Immediate death of the patient
Vayavya (West-North corner)	Bad prognosis

BY SPREADING SHAPES OF THE OIL

TABLE 3: Shape of Taila Bindu and Dosha Involved in Samprapti

Sl No	Shape of Taila Bindu	Dosha involved in Samprapti
1.	Sarpakara (snake)	Vata
2.	Chatrakara (umbrella)	Pitta
3.	Mukta (pearl)	Kapha

- The prognosis is favourable if the oil drop that spread on the urine's surface conjures up pictures of an umbrella lotus, a Chatrakara, a Hansa (swan), a lotus, an arch, or an elephant. [8]

- If the oil that is spreading on the urine's surface takes the form of a tortoise, buffalo, honey bee, headless human body, Shastra (a surgical tool like a knife), bird, Khanda (a piece of body material), arrow, or three or four roads meeting each other, the doctor should not treat the patient because the disease is incurable. [9]

- Those with Kulaja Dosha (incurable ailments) have oil smeared in the form of a sieve. [10]

DISCUSSION

➤ Dr. Deepika et al., 2025, Rishikul Campus UAU, Haridwar, performed Taila Bindu Pariksha on 92 Madhumeha patients, regardless of gender, ranging in age from 16 to 60. They observed that the oil drops in the urine varied in shape and spreading throughout the 92 samples. According to the literature, the uneven shape, which resembles a Kurma (tortoise), portends a poor prognosis. Glycosuria levels between 1+ and 2+ produced a circular shape in most cases. In contrast, the Taila Bindu acquired an irregular form in urine when the sample contained albumin (2+ or ≥3+) and glucose (≥3+). According to the study, Taila Bindu spreads readily in the urine of most people with albumin (1+) and glucose (1-2+). In most patients, Taila

Bindu travels in the direction of Uttara in urine containing glucose (1-2+). On the other hand, the urine sample with albumin at 1+ moves in the direction of Purva and Uttara, whereas the sample with albumin at 2-3+ moves in the direction of Agneya. Madhumeha is regarded by Ayurveda as a Yapya Vyadhi, and the pattern they have observed in most cases points to a poor prognosis for the Vyadhi. In this way, it somewhat aligns with the Yogaratnakara findings. [11]

➤ 30 patients in the 20-60 age range from Jalodara underwent Taila Bindu Pariksha by Dr. Avinash C. Rathod et al., 2021, Shri Ayurved Mahavidyalaya Nagpur. 25% of patients had a Sadhya (curable) prognosis, 13.33% had an Asadhya (incurable) prognosis, and 61.66% had a Krichrasadhya (curable with difficulty) prognosis based on the kind, direction, and shape of spread. The link was found to be statistically significant in the majority of the cases. [12]

➤ Dr. Sumit Srivatsava conducted Taila Bindu Pariksha in 30 advance stage (III, IV) Prostate Cancer diagnosed patients. Nature, direction and shape of spread of Taila Bindu shows highest percentage i.e. 64.44% Sadhya (Curable) prognosis, 24.44% Asadhya (Incurable) and 11.11% Krichrasadhya (Curable with difficulty) prognosis of disease. But the correlation with modern perspective was not precise in this study as the sample size

was less. There is a further scope of research in this case. [13]

➤ In 30 *Kamala* patients, Dr. Atul Subramanian et al. performed *Taila Bindu Pariksha*. Out of 30 patients, 4 had urine samples with no spreading, and 7 had urine samples with spreading *Taila* drop, indicating a poor diagnostic. The oil drop spread westward in 6 samples and eastward in 2 samples; under both circumstances, the prognosis is deemed favourable. The oil drop was moving in all directions in one urine sample, whereas it was spreading in no particular direction in nine other samples. The oil drop in these patients was spreading quickly or extremely quickly, which is indicative of a favourable prognosis. The oil drop achieved the *Parvata* shape in one sample and the *Chamara* shape in six samples, both of which are signs of a favourable prognosis. In 11 and 4 samples, respectively, the *Chakra* and *Ghata* shapes were seen, indicating a dismal prognosis. The oil drops in 8 samples lacked the proper shape, which is a sign of a favourable prognosis. The results aligned with the description found in traditional Ayurvedic literature. Due to the study's small sample size, more research with a larger number of patients is required in order to reach a more accurate conclusion. [14]

CONCLUSION

The purpose of this review paper was to evaluate, via scientific exploration, the potential of *Taila Bindu Pariksha* as a prognosis tool for a variety of disorders. An important development in the field of prognosis determination will be the scientific validation of these Ayurvedic concepts in the context of contemporary medical research. Lastly, it can be said that

Taila Bindu Pariksha can be employed as a research instrument for disease prognosis prediction based on *Mutra Pariksha* evaluating the severity and prognosis of diseases to plan treatment. This easy method could be useful for both evaluating healthy conditions and diagnosing illnesses. However, in many situations, it necessitates observations. This procedure, which is very cost-effective, may prove to be a beneficial technique in this field because there is now no laboratory test available to instantaneously analyse or forecast the prognosis of the disorders.

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