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UNDERSTANDING THE NIDANA PANCHAKA OF INFECTIOUS DISEASES

Dr. Nayana D R[1], Dr. Sanjay Kumar M D[2], Dr. Ananta S Desai[3]

[1]*Third Year Post Graduation Scholar, Department of Kayachikitsa, Government Ayurveda Medical College, Mysuru .*
[2]*Professor, Department of Kayachikitsa, Government Ayurveda Medical College, Mysuru.*
[3]*Professor and Head Department of Kayachikitsa, Government Ayurveda Medical College, Mysuru.*

ABSTRACT

Background: *Infectious diseases arise from interactions between infectious agents, environmental factors and host susceptibility. Ayurveda provides a systematic approach through Nidana Panchaka – Nidana, Purvarupa, Rupa, Upashaya-Anupashaya and Samprapti. Concepts such as Agantuka Vyadhi, Aupasargika Vyadhi, Krimi and Janapadodhwamsa offer additional perspectives on communicable diseases.* ***Aim:*** *To explore the Nidana Panchaka of infectious diseases and interpret its relevance from an Ayurvedic perspective.* ***Materials and Methods:*** *A narrative conceptual review was conducted using Caraka Samhita, Susruta Samhita and Astanga Hridaya, along with contemporary literature on infectious diseases, epidemiology and host susceptibility. Ayurvedic concepts of causation, transmission, pathogenesis and host resistance were conceptually correlated with contemporary understanding.****Results:*** *Nidana includes infectious exposure, contaminated Ahara-Jala, environmental and seasonal factors, and host determinants. Purvarupa represents prodromal features, while Rupa denotes established clinical manifestations. Upashaya-Anupashaya provides supportive diagnostic information, whereas Samprapti explains disease progression through Dosa Prakopa, Agni Vaigunya, Ama, Srotodusti and Dosa-Dusya Sammurcchana. Janapadodhwamsa emphasizes Vayu, Jala, Desa and Kala, while Vyadhi-ksamatva and Ojas reflect host resistance.* ***Conclusion:*** *Nidana Panchaka offers a holistic framework integrating causation, susceptibility, environmental factors, clinical manifestations and disease progression. Its conceptual integration with modern microbiology and epidemiology may support Ayurvedic assessment and preventive care without equating classical concepts with specific microorganisms or diseases.*

KEYWORDS: *Nidana Panchaka; Agantuka Vyadhi; Aupasargika Vyadhi; Janapadodhwamsa; Krimi; Samprapti; Vyadhi-ksamatva; Infectious diseases.*

INTRODUCTION

Infectious diseases are disorders caused by pathogenic microorganisms and may spread directly or indirectly between susceptible hosts through respiratory secretions, contaminated food and water, bodily fluids, vectors or contaminated environmental materials.[1] Their occurrence and transmission are influenced not only by the infectious agent but also by host susceptibility, environmental conditions, sanitation, nutrition, behaviour and social determinants of health.[2]

Ayurveda approaches disease through an integrated understanding of *Nidana*, *Dosha*, *Dushya*, *Srotas*, *Agni*, *Bala* and the interaction between the individual and the environment.[3] The classical literature contains descriptions that are relevant to communicable diseases, including *Sankramika Roga*, *Aupasargika Roga* and epidemic conditions described under *Janapadodhwamsa*.[4]

The concept of *Janapadodhwamsa* described by Acharya Charaka explains the simultaneous affliction of large populations despite differences in individual constitution, diet, age, strength and lifestyle, emphasizing common environmental factors such as *Vayu*, *Jala*, *Desha* and *Kala*.[5] This provides an important Ayurvedic perspective for understanding population-level disease transmission.

Nidana Panchaka is an important diagnostic framework in Ayurveda consisting of *Nidana*, *Purvarupa*, *Rupa*, *Upashaya-Anupashaya* and *Samprapti*[6] It facilitates systematic understanding of a disease by examining its causes, prodromal manifestations, established clinical features, therapeutic response and pathogenesis.

The application of this framework to infectious diseases can therefore provide a structured approach that incorporates both the external infectious exposure and the internal response of the host.

Concept of Nidāna Pañcaka

Nidāna Pañcaka comprises five important components of disease assessment:

1. *Nidāna*
2. *Pūrvarūpa*
3. *Rūpa*
4. *Upaśaya-Anupaśaya*
5. *Saṃprāpti*

These five components collectively facilitate understanding of the cause, early manifestations, established manifestations, therapeutic response and pathological sequence of disease.

1. NIDĀNA OF INFECTIOUS DISEASES

तत्र निदानं कारणमित्युक्तमग्रे

A. JANAPADODHWAMSA HETU

द्विविधो हेतुर्व्याधिजनकः प्राणिनां भवति- साधारण असाधारणश्च: तत्रासाधारणं प्रतिपुरुषनियतं वातादिजनकमाहाराद्यभि धाय बहुजनसाधारणं वातजलदेशकालरूपं साधारणरोगकारणमभिधातं जनपदो दध्वंसनौयोड भिधीयते।१-२| [7]

- **Vayu (Air)** – contaminated air
- **Jala (Water)** – contaminated water

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- **Desha (Land)** – polluted environment
- **Kala (Season/Climate)** – seasonal disturbances

B. AUPASARGIKA NIDANA

प्रसङ्गाद्गात्रसंस्पर्शात् निःश्वासात् सह भोजनात्
।सहशय्यासनाच्चापि वस्त्रमाल्यानुलेपनात् ॥
कुष्ठं ज्वरश्च शोथश्च नेत्राभिष्यन्द एव च ।औपसर्गिकरोगाश्च संक्रामन्ति नरान्नरम् ॥[8]

- Physical contact (Sparsha)
- Respiration (Nishwasa)
- Sharing food (Sahabhojana)
- Sharing bed (Sahashayana)
- Sharing clothes and ornaments

C. KRIMIJA NIDANA

Krimi are described as disease-causing organisms that can invade the body and produce illness. Though not identical to modern microbes, the concept broadly corresponds to infectious agents.

अजीर्णभोजी मधराम्लनित्यो द्रवप्रियः पिष्टगडोपभोक्ता
व्यायामवर्जी च दिवाशयानो विरुद्धभुक् संलभते क्रिमींस्तु

Krimi are living entities capable of producing disease. They are classified as: **Bahya Krimi** External organisms, Lice, Fleas , Mites. **Abhyantara Krimi**,Internal organisms, Intestinal parasites, Bacteria, Viruses , Protozoa

D. AGNIMANDYA

Agnimandya does not produce pathogens; it weakens the host by causing Ama formation, impaired Dhatu nourishment, reduced Ojas, and decreased Vyadhikshamatva. This makes the body more susceptible to infection and influences the severity and recovery of infectious diseases.

E.PRAJNAPARADHA

- धीधृतिस्मृतिविभ्रष्टः कर्मयत्कुरुते अशुभम्।प्रज्ञापराधं तं विद्यात् सर्वदोषप्रकोपणम्॥[9]

Infectious diseases are caused by external pathogens such as bacteria, viruses, fungi, and parasites, Pragnaparadha predisposes an individual to these diseases by promoting unhealthy behaviour, poor hygiene, impaired immunity, and increased exposure to infectious agents. Thus, Pragnaparadha acts as an indirect but important etiological factor in the development and spread of infectious diseases.

F. AGANTUJA NIDANA

- मुखानि तु
खल्वागन्तोर्नखदशनपतनाभिचाराभिशापाभिषङ्गाभिघातव्यधबन्धनवेष्टनपीडन-रज्जुदहन-शस्त्राशनिभूतोपसर्गादीनि,
निजस्य तु मुखं वातपित्तश्लेष्मणां वैषम्यम् ॥[10]
- Agantuja Nidana refers to diseases caused by external etiological factors (Agantu Hetu). these include trauma, poisons, insect bites, animal bites, and other external agents. In the context of infectious diseases, **microorganisms** such as bacteria, viruses, fungi, and parasites can be conceptually considered **Agantu Hetu**, as they originate outside the body and invade the host.
- Initially, the disease is caused by the external pathogen. After entering the body, the pathogen causes Dosha Prakopa, Srotodushti, and Dhatu Dushti, leading to the manifestation of infectious disease. Thus, an Agantuja disease later becomes associated with tridosha itself.

G. VYADHIKSHAMATVA

- व्याधिक्षमत्वं नाम व्याधिबलविरोधित्वं व्याद्युत्पादकप्रतिबन्धकत्वं च

Vyadhikshamatva (व्याधिक्षमत्व) is the body's ability to resist disease.

Individuals with good Vyadhikshamatva are less likely to develop infections, and if infected, they usually experience milder disease and recover faster

Vyadhikshamatva is the capacity of the body to:

- Resist the strength and severity of disease (Vyadhi Bala Virodhitva).
- Prevent the occurrence of disease (Vyadhyutpada Pratibandhakatva).

2. PURVAROOPA

पूर्वरूपं प्रागुत्पत्ति लक्षणं व्याधेः[11]

- After the entry of an external pathogen (Krimi/Agantu Hetu): The pathogen enters the body. Agni becomes affected in susceptible individuals. Ama begins to form. Doshas start getting vitiated.Initial Srotodushti occurs.The body responds through early constitutional symptoms.

In infectious diseases, *Pūrvarūpa* may include:

- *Aruci* – anorexia, *Gaurava* – heaviness, *Aṅgamarda* – body ache, *Klama* – fatigue, *Jvara-prāya Lakṣaṇa* – early febrile symptoms, *Śirogaurava* – heaviness of head, *Tṛṣṇā* – thirst,mild respiratory or gastrointestinal symptoms.

Recognition of these manifestations may facilitate early clinical suspicion and timely investigation.

3. ROOPA

प्रादुर्भूतलक्षणं पुनर्लिङ्गम् तत्र लिङ्गमाकृतिर्लक्षणं चिह्नं संस्थानं व्यञ्जनं रूपमित्यनर्थान्तरम्[12]

The disease process begins with **Agantu Hetu (pathogen)** entering the body, followed by pathogen multiplication when *Agni* is weakened and *Vyadhikshamatva* is reduced. This leads to *Ama* formation and *Dosha Prakopa*, followed by *Srotodusti* and *Dhatu Dushti*, ultimately resulting in the manifestation of clinical features (*Rupa*).

Depending on the *Srotas* and *Dūṣya* involved, infectious diseases may present with varied clinical manifestations. Involvement of *Prāṇavaha Srotas* may produce *Kāsa, Śvāsa, Pīnasa, Uraḥśūla* and *Jvara*, whereas *Annavaha Srotas* involvement may manifest as *Aruci, Chardi, Atisāra* and *Udaraśūla*. Affection of *Raktavaha Srotas* may result in *Dāha, Jvara* and inflammatory manifestations, while involvement of *Majjāvaha Srotas* may produce neurological manifestations such as altered sensorium, headache and convulsions, depending on the disease.

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4. UPASHAYA

उपशयः पुनर्हेतुव्याधिविपरीतानां विपरीतार्थकारिणां चौषधाहारविहाराणामुपयोगः सुखानुबन्धः[13]

It refers to the **therapeutic measures, diet, or lifestyle that relieve or aggravate disease**, thereby helping in both **diagnosis and management**.

हेतु-विपरीत, व्याधि-विपरीत, उभय-विपरीत, हेतु-व्याधि-विपरीत, तथा विपरीतार्थकारी उपायाः उपशयाः

Upashaya includes therapeutic measures that are opposite to the causative factors (Hetu), opposite to the disease (Vyadhi), opposite to both, or even seemingly opposite in action but beneficial in relieving the disease.

Hetu Viparita Upashaya: Measures opposing the cause, such as hygiene, sanitation, isolation and vaccination, help prevent infection.

Vyadhi Viparita Upashaya: Measures targeting disease manifestations include antipyretics, antimicrobials, rehydration and Ayurvedic *Langhana, Pachana* and *Deepana*.

Hetu-Vyadhi Viparita Upashaya: Measures that address both cause and disease include antibiotics, antimalarials and appropriate *Krimighna* and *Rasayana* therapy.

Viparitarthakari Upashaya: Apparently contrary measures that provide benefit when properly used include controlled fluid therapy and vaccination.

5. SAMPRAPTHI

सम्प्राप्तिर्जातिरागतिरित्यनर्थान्तरं व्याधेः
यथादुष्टेनदोषेणयथाचानुविसर्पता
निर्वृत्तिरामयस्यासौसम्प्राप्तिर्जातिरागतिः॥ [14]

Infectious disease begins with **Agantuja Nidana**, such as *Krimi* or *Aupasargika* agents, entering the body through various routes. In the presence of *Agnimandya*, *Ama* forms and contributes to *Dosha Prakopa*. The vitiated *Doshas* and *Ama* cause *Srotodushti*, followed by *Dhatu Dushti* and, in severe cases, *Ojas Kshaya* with reduced *Vyadhikshamatva*. Ultimately, these changes result in *Vyakti*, producing characteristic clinical manifestations according to the affected system.

DISCUSSION

The present review highlights *Nidana Panchaka* as a comprehensive framework for understanding infectious diseases by integrating external causative factors, host susceptibility, environmental influences and disease progression. *Agantuja Nidana, Krimi* and *Aupasargika Vyadhi* provide conceptual perspectives on external agents and disease transmission, while *Janapadodhwamsa* emphasizes the role of *Vayu, Jala, Desha* and *Kala* in community-level disease.

Agnimandya and *Ama* are considered important factors influencing disease progression, followed by *Dosha Prakopa, Srotodushti* and *Dhatu Dushti*. Variation in *Dosha* and affected *Srotas* may explain differences in clinical manifestations. *Purvarupa* supports early recognition, *Rupa* identifies established disease, and *Upashaya-Anupashaya* assists clinical assessment and therapeutic decision-making.

The concepts of *Vyadhikshamatva* and *Ojas* provide an Ayurvedic perspective on host resistance and variations in disease severity and recovery. The overall *Samprapti* may be understood as a progression from *Agantuja Nidana* through *Agnimandya, Ama, Dosha Prakopa, Srotodushti* and *Dhatu Dushti* to clinical manifestation.

Thus, *Nidana Panchaka* offers an individualized and holistic approach that may complement contemporary microbiology, epidemiology and preventive medicine. However, classical concepts should be interpreted as conceptual frameworks rather than direct equivalents of specific microorganisms or modern disease entities.

CONCLUSION

Nidana Panchaka provides a holistic and systematic framework for understanding infectious diseases by integrating causative factors, transmission, host susceptibility, environmental influences, clinical manifestations and disease progression. Concepts such as *Agantuja Nidana, Krimi, Aupasargika Vyadhi* and *Janapadodhwamsa* offer valuable Ayurvedic perspectives on individual and community-level disease. The roles of *Agni, Ama, Dosha, Srotas, Dhatu, Ojas* and *Vyadhikshamatva* further emphasize the importance of host factors in disease susceptibility and recovery. Integration of these principles with contemporary microbiology and epidemiology may enhance Ayurvedic clinical assessment and preventive strategies, while maintaining appropriate distinction between classical concepts and modern disease entities

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