



CLINICAL UTILITY OF *JIWHA PAREEKSHA* IN THE ASSESSMENT OF *ANNAVAHA SROTADUSHTIGATA VYADHI*

Dr. Sandhya Sangeeta Malik¹, Dr. Sarita Mohanta², Dr. Bhagya Ranjan Dash³

¹3rd Year MD, Dept. of Roga Nidan Evam Vikriti Vigyan, Govt.

Ayurvedic College & Hospital, Balangir, Odisha.

²Professor & HOD, Dept. of Roga Nidan Evam Vikriti Vigyan, Govt.

Ayurvedic College & Hospital, Balangir, Odisha.

³Lecturer, Dept. of Roga Nidan Evam Vikriti Vigyan, Govt. Ayurvedic College & Hospital, Balangir, Odisha

ABSTRACT

Srota are the anatomical and physiological pathways which carry all components, elements, reflexes signals from one place to another. In Ayurveda it is mentioned that “Praninam punarmulamahara” means Anna is the root cause of life and the Srotas which carries Anna is known as Annavaaha Srota. Any disturbances in its Srota threatens the life by manifesting several diseases.

As Acharya Charaka has emphasized that disease should be examined prior to treatment for the precise diagnosis of the disease and for effective management of any disease. Rogi Pariksha and Roga Pariksha together complete the protocol of a comprehensive clinical examination. Hence this study has attempted to find an easy diagnostic procedure to diagnosing Annavaaha Srotodushti, with the help of Jiwha Pareeksha (one among Asthasthana Pareeksha). In this examination physician can detect the Dosha predominance of the disease and can prescribe an effective plan of treatment. In Annavaaha Srotodushti there may be various specific manifestations in color, size, shape, surface, margins and coating of tongue, which further can be used as diagnostic criteria and to reflect the status of Annavaaha Srotadushtigata Vyadhi.

Key words: - Annavaaha Srota, Jiwha Pareeksha,

INTRODUCTION

The word *Srota* is derived from the dhatu, “*Su Sravane*” which means to exude, to ooze or to permeate. *Srota* are the channels which carry *Dosha*, *Dhatu*, *Upadhatu* and *Mala* from one place to another for normal function of the body^[1]. Due to the function of *Sravana*, these are called as *Srota*. These *Srota* have the same colour of the *Dhatu* which they circulate in the entire body. Any disturbances in the *Srota* will lead to manifestation of diseases related to *Moolasthana* of *Srota*, *Dhatu Marga* or *Sharira Dhatu*. Thus precise knowledge of *Srota* will help in diagnosis, prognosis and proper management of the disease.

According to Acharya Charaka, disease should be examined prior to treatment to precisely diagnosis of the disease, for the effective management of any disease^[2]. Pareeksha refers to analysing something in every aspect and the goal is “*Pratipatigyanam*”. *Rogi Pareeksha* and *Roga Pareeksha* together complete the protocol of a comprehensive clinical examination. Ayurveda texts have explained the various tools for diagnosing diseases, among which *Astasthana Pareeksha* explained by Yogaratnakar plays significant role in diagnosis of disease.

Since tongue is known as the mirror of GI tract, an assessment of changes in tongue can be attempted to know the disturbances in *Annavaaha Srotodushti*, hence *Jiwha Pareeksha* mentioned by Acharya Yogaratnakar has its significant importance in examination of *Annavaaha Srotadushtigata Vyadhi*. *Jiwha Pareeksha* is a simple, non-invasive and of great significance. *Jiwha* reflects physiological activities of the body. It signals disturbances in entities of the body by the characteristics like colour, shape, size, contour, coating etc. *Jiwha Pareeksha*

primarily incorporates aspects of *Pratyaksha Pareeksha*, *Darshana Pareeksha* and *Prashna Pareeksha* & *Anumana Pareeksha*.

MATERIAL AND METHOD:

The literary review is done on the basis of critical analysis of classical ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita* and *Astanga Hridaya*, *Yoga Ratnakara* along with their authoritative commentaries, to collect references related to *Annavaaha Srota* and the principle of *Jiwha Pareeksha*. The relevant information was collected and correlated with available modern literatures from standard textbook, peer-reviewed journals and online data to achieve a comprehensive understanding.

LITERATURE REVIEW

ANNAVAHA SROTA

The word *Annavaaha Srota* means the channel through which *ahara rasa* is transported. The functions of *annavaaha srota* (Alimentary system) concerned with *anna adana* (ingestion of food), *anna pachana* (digestion) *sara kitta vivechana* (separation of nutrient and waste portions) and *rasa soshana* (absorption of nutrients).

***Srotamula*:** According to *Charaka Samhita* *Annavaaha Srota* originates from *Amashaya* & *Vamparshva*^[3]. While Acharya *Sushruta* says that *Amashaya* and *Annavaahi Dhamanyas* are the *moola* of *Annavaaha Srota*^[4]. The information on *Srotamula* is highly essential as *Srotadushti* of any *Srota* may disturb the function of *Srotamula* in due course of time sooner or later.

Samanya Srotadushti Nidana^[5]



Ahara and Vihara which has the qualities similar to the *Dosha* and *Karana* which are responsible for the abnormality of *Dhatu* are considered to be *Samanya Srotadushti Nidana*.

Vishesa Annavaha Srotodushti Nidana^[6]

- *Atimatra bhojana* (Excessive intake of food)
- *Akale bhojana* (Irregular pattern of food intake)
- *Ahita bhojana* (Consumption of unwholesome food)
- *Agni dushti* (Improper digestive power)

Annavaha Srotodushti Lashana^[7]:

- *Anannabhilasha* (Disinclination of food)
- *Arochaka* (Anorexia)
- *Avipaka* (incomplete digestion)
- *Chhardi* (Vomiting)

JIWHA PAREEKSHA

The tongue is a mirror image of internal organs. The ancient art of tongue examination also describes characteristics that reveal the functional status of respective internal organs merely by observing the tongue's surface. It is the most direct way of seeing the state of Agni and changes taking place inside the body. *Jiwha Pareeksha* is simple, non-invasive and of great significance. *Jiwha* reflects physiological activities of the body.

Characteristics of normal Jiwha: A healthy tongue should be symmetrical and equally pink, supple, devoid of cracks and not quiver or shake. According to Charak Samhita, Characteristics of an ideal tongue should be thin, red and clear^[8]. During explaining *dirghayu lakshana* of a child it is mentioned that *jiwha* should be sufficient length and breadth, *Slakshana* (smooth in texture) and having *Prakuta Varna* (normal colour) i.e. *Shwetarakta Varna*^[9]. A healthy tongue can be assessed as following:

1. Color: *Shyavarakta* (Uniformly pink or Pale-red)
2. Shape: *Tanu* (Neither too thick nor too thin and has even width or oval in shape)
3. Moisture: *Slakshna* (A healthy tongue is moist)
4. Coating: *Nirlipta* or *ishathlipta* (Thin transparent or white coating)
5. Movement: *Akampa* (when sticking out it is straight rather than veering to one side)

Jiwha Accordind To Dosha^[10]:

DOSHA DOMINANCE	JIWHA CHARACTER
➤ <i>Vata dominant Jiwha</i>	<i>Sheeta, Kharasparsha, Sphut ita</i>
➤ <i>Pitta dominant Jiwha</i>	<i>Rakta, Shyama</i>
➤ <i>Kapha dominant Jiwha</i>	<i>Shubhra, Atipichhila</i>
➤ <i>Sannipataja Jiwha</i>	<i>Krushna, Sakantaka, Shushka</i>
➤ <i>Dwandaja Jiwha</i>	<i>Mishrita Lakshana</i>

Timing Of Jiwha Pareeksha

The ideal time for *Jiwha Pareeksha* is not specified in Ayurvedic scriptures, by referring to the *Nadi* (Pulse) *Pareeksha* and *Mutra* (Urine) *Pareeksha*^[10], we can establish that morning hours are the best period for *Jiwha Pareeksha*.

Before examining the tongue, there are a few things to keep in mind

- *Jiwha Pareeksha* should be done on an empty stomach, before breakfast
- It should be done before brushing so that the tongue coating is not disturbed.
- Before the examination, avoid coffee, tea, and sweets; do not allow the patient to eat or drink anything that can stain the tongue.
- It should be inspected under a bright light source, ideally sunlight

Criteria For Jiwha Pareeksha

Various criteria can be adopted in *Jiwha Pareeksha* but important ones are tongue shape, size, tongue body texture, color, moisture, fissures, coating, movements of tongue.

Tongue shape, size^[11]: Examining for shape involves to see whether the tongue is thin or swollen, long or short and whether specific parts of the tongue are swollen.

- *Dirghajiwha* (Macroglossia) – Acromegaly, Cretinism, Myxoedema, Lymphangioma, Amyloidosis, Down's Syndrome, *Bijadosha*.
- *Hraswajiwha* (Microglossia) - Pseudobulbar Palsy, Starvation, Marked dehydration, *Bijadosha*.

Tongue body texture

- *Atitanu* (Smooth or bald tongue): - Iron deficiency anemia, pernicious anemia, B complex deficiency or malabsorption,
- *Kharajiwha /Kantakajiwha*; - Vitamin B complex deficiency, acute glossitis, acromegaly, *Tridoshaja*.
- Scarred tongue: - Scars on the tongue may be due to traumatic, secondary to ulcer from tongue-biting as in epilepsy

Colour^{[11][12]}:

- Pale Or White (*Shukla*) - Over nourishment (*Kaphadhikya*) Anemia (*Pandu*) Leukoplakia Excessive Furring Pneumonia Centrally coated (enteric fever)
- Bright Red (*Arakta*) - State of increase *Pitta* (*Pittadhikya*), Fatal involving tongue (*Jiwha in Sannipat jwara*), Acute glossitis (*Pittaj Jiwhakantaka*), Typhoid (Red at tip)
- Scarlet Red tongue - Niacin Deficiency
- Dark Red Tongue – Polycythemia, Riboflavin Deficiency
- Bluish (*Neelabha*) - Alcohol Intoxication (*Asadhya Madatyaya*), Peripheral Circulatory failure (*Visuchika Asadhya Lakshan*), Ingestion of Black plum Fruit, Central Cynosis
- Yellowish (*Pitabha*) -Jaundice (*Kamala*), Acute Hepatic Necrosis (Yellowish furr)

Coating: The key aspects to observe in the tongue coating is the distribution of the coating and the thickness of coating.

- Absence of tongue coating shows *Nirama* condition.



- White thick tongue coating shows accumulation of *Ama*.

Fissures: It is mentioned that if the tongue is affected by *Vata* it will be *Sphutita* (Fissured). Fissures on the tongue can be used as a diagnostic measure. Fissures can be of the following patterns:

- Central longitudinal pattern
- Central transverse pattern
- Lateral longitudinal pattern
- Branching pattern
- Diffuse pattern

Moisture: Acharya Sushruta mentioned the specific character of a healthy tongue is *Snigdha Slakshana* and *Tanu*. In *Vikrutavastha*, the tongue becomes dry due to conditions such as dehydration, coma, hemorrhage, atropine use, mouth breathing, Sjogren's syndrome, uremia, and increased *Vata dosha*.

Movement

- Slow rhythmic tremor stopping on voluntary extrusion of tongue in *Kampavata* (Parkinsonism), *Adhijihika* (backward and forward), *Tibrajwara*
- *Jiwha Vepana* in rheumatic chorea, lizard tongue, *Trushna nirodhaja daha*.
- Deviated tongue: Hypoglossal nerve paralysis, malignant infiltration, *Mukhapaka* (severe ulceration), *Ardita* or *Pakshaghata* (facial paralysis).
- *Sthabdha Jiwha* (Immobile tongue): Bilateral lingual paralysis, bulbar palsy, syringomyelia, Sluggish and slow protrusion in mental retardation.
- The increasingly slow movement in myasthenia gravis, *Jiwhastambha*.

Tongue Diagnosis Procedure

1. Get a general impression of tongue by observing the tongue's features
2. Collection and identification of the individual's signs concerning the tongue's colour, shape and coating etc. A topographic map of tongue may help in it.
3. Reevaluate the general impression of the individual's tongue signs.

DISCUSSION

Without understanding the disease, proper diagnosis can't be made and without proper diagnosis proper treatment can't be served. Now a days due to lifestyle changes and changes in food habits most of people suffering from *Annava Srotadushtigata Vyadhi*. *Jiwha Pareeksha* mentioned by Acharya Yogaratnakar has its significant importance in early detection of impairment of digestion process. Therefore various aspects of information about *Annava Srota* and *Jiwha Pareeksha*, gathered from different classical and modern textbooks are analysed in the present study.

A careful study of *Srota*, shows the knowledge of internal transport system of the body. disease. Therefore the knowledge of *Srota* will be helpful in the diagnosis of disease related to one or multiple *Srota*. The improper food and diets, improper regimen and erratic behaviour which are not conducive to the

body will lead to the abnormality in *Annava Srota* resulting in *Agnivaigunya* which is root cause of many diseases.

Jiwha Pareeksha is one of the prime tool in assessing status of digestion. While doing a tongue examination, a clear understanding of the entire person and pathology is needed to evaluate either general or specific tongue signs. *Jiwha Pareeksha* assists us to determining the imbalance of Dosha by investigating the features like colour and shape of tongue body. In *Vata Prakopa*, *Jiwha* appreciated as *sheeta, kharasparsha* and *shutita* while during *Pittadhika* it shows signs of *Raktashyava* colour and *Shubhra, Atipichhila* character of *Jiwha* is indication of *Kaphadhika*. The coating is more directly related to digestive process. Absence of tongue coating shows *Nirama* condition. White thick tongue coating shows accumulation of *Ama*. With the help of *Jiwha Pareeksha* physician can detect the dosha predominance in *Annava Srotadushti* and *Samavatha* or *Niramavastha* of disease can be appreciated in this Pareeksha. Inspection of the tongue in the early stages may helpful to detect any impairment in digestive fire and a timely intervention may prevent the further development of *Ama*. This study investigates the utility of *Jiwha Pareeksha* in diagnosing *Annava Srotadushti*.

CONCLUSION

Jiwha Pareeksha is an important non evasive examination tool and said to be the easiest way to see the changes taking place inside the body. In *Annava Srotadushti* there may be various specific manifestations in color, size, shape, surface, margins and coating of *Jiwha*, which further can be used as diagnostic criteria, to reflect the status of *Annava Srota*. Thus the present study is attempted to establish an easy diagnostic procedure in *Annava Srotadushtigata Vyadhi*.

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