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# DASHAVIDHA PARIKSHA- A PRACTICAL APPROACH TO CLINICAL METHOD OF DIAGNOSIS

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#### **ABSTRACT**

Pariksha is an important clinical tool for assessment of the Roga and Rogi Bala. Different types of Pariksha have been mentioned in our classics. Dashavidha Pariksha mentioned by Acharya Charaka is one such Clinical assessment protocol. A standard protocol has to be developed to clinically assess the Dashavidha Pariksha without any ambiguity. Such protocols will help to reproduce the same assessment done at different places by different physicians. The 10 point examination can be employed to a "Swastha Purusha" to assess the risk factors and make necessary changes in the Ahara and Vihara to prevent the impending disease.

Keywords: Pariksha, Roga, Rogi Bala, Dashavidha Pariksha, "Swastha Purusha.

#### INTRODUCTION

The first and foremost requirement before starting any *Chikitsa* is to examine the disease. Later with due consideration of all factors, the physician should initiate the treatment<sup>1</sup>. The purpose of clinical examination is to assess *Roga & Rogi Bala*. A patient constitutes the *Karyadesha* or the site for the administration of therapies to bring back the homeostasis of *Dhatus*<sup>2</sup>. Before starting any treatment; we have to do clinical examination of the patient to gain more knowledge about the patient's condition and for getting an idea about probable diagnosis. Examination of the patient gives an idea about *Ayu Pramana* and *Bala Dosha Pramana*<sup>3</sup>. In our

classics, Acharyas have given different types of Pariksha like Trividha Pariksha, Chaturvidha Pariksha, Shadvidha Pariksha, Ashtavidha Pariksha, Dashavidha Pariksha which helps in diagnosis of the disease and to plan treatment. Acharya Charaka has explained the importance of Dashavidha Pariksha. It can be applied to know the Bala Pramana of both Aatura (patient) and Roga (disease). It includes the ten aspects which are to be examined viz., Prakruti, Vikruti, Sara, Samhanana, Pramana, Satmya, Satwa, Ahara Shakti, Vyayamashakti, Vaya.

#### **PRAKRUTI**

Prakruti is the Swabhava/ inherent characteristic property of an individual. It refers to the physical and mental constitution of the individual determined from the time of conception<sup>5</sup>. It is determined by the Doshas dominating the sperm and the ovum during the time of conception and also those inhabiting the uterus at that time determine the Prakruti of the individual. The types of Prakruti depends on different factors like Shukra-shonita Prakruti, Kalagarbhashaya Prakruti, Maturahara-vihara Prakruti, Mahabhutavikara Prakruti.

#### Prakruti Assessment

- A Questionnaire consisting of both the physical and psychological parameters of the *Tridosha* can be made. Each parameter is given 1 score and the total is calculated.
- The individual total of each *Dosha* is calculated separately out of total& the percentage noted.
- The percentage determines his predominant Doshic Prakruti.
- For Eg: if V -15, P 6, K 3, out of total 24 parameters, then the individual is 60% V, 28% P & 12% K i.e., *VataPittaja Prakruti*

#### Importance of Prakruti Pariksha

Prakruti won't affect the individual just like Visha of the Keeta won't affect itself<sup>7</sup>. But the Prakopa Karanas of the particular Dosha in Prakruti has more chances of leading to that particular Dosha Vikruti because of Samana Guna Dharma. For example, a Vataja Prakruti person is more prone to certain diseases because of indulging in VataPrakopaka Ahara, Vihara. Also the effect of Kala, Rutu, Vaya can be seen in particular Prakruti persons. Hence preventive measures can be taken by knowing the Prakruti and avoiding the Prakopakara Nidana. Prakruti

is always stable there won't be any changes unless if it is the last stage of *Ayu*. Also it helps to know the limitation of treatment in case of *Kulaja Roga*.

#### SARA

Sara is the Shuddhatara Dhatu or the essence of the Dhatu, which is of superior quality. It is mentioned for the assessment of Bala Pramana of the patient<sup>8</sup>. Bala means biological strength or power of resistance against the diseases. 8 types of Sara are mentioned- Twak, Rakta, Mamsa, Medo, Asthi, Majja, Shukra and Satwa Sara. Dalhana in his commentary has mentioned that Twak Sara indicates the Rasa Sara itself, which is present in the Twak<sup>9</sup>. The 8 types of Sara may be assessed in term of relative quality i.e., Pravara Sara Purusha, Madhyama Sara and Avara Sara Purusha<sup>10</sup>.

## Sara Assessment<sup>11</sup>

- ✓ Each parameter i.e., *Lakshana* of the *Sara* is given 1 score each and the total is divided by total number of *Lakshanas* in that *Sara* and percentage is calculated.
- ✓ If 3 *Dhatu Sara* or < 25% is considered as *Avara Sara*
- ✓ 4 to 6 *Dhatu Sara* or 26% to < 75% is considered as *Madhyama Sara*.
- ✓ More than 6 *Dhatu Sara* or >75% is considered as *Pravara Sara*.

NOTE: This *Dhatu Sara* should co-relate with *Bala* assessed by *Vyayamashakti* as *Pravara Dhatu Sara* represents *Uttama Bala* & Vice-Versa.

#### Importance of Sara Pariksha

Charaka has emphasized that sometimes the physicians may take a wrong decision only by seeing the body of the patient. Like- the person

is strong because he is possessing *Sthula Share-era* and weak because of possessing *Krusha / Alpa Shareera*. But factually it is observed that some persons who possess *Krusha / Alpa Shareera* are strong. They are like ants that have small body and look emaciated but can carry too heavy load. *Sthula Shareera* persons may have strength less than the *Krusha /Alpa Shareera*, just like an elephant having big and corpulent body possessing less strength than the lean and short body of lion possessing greater strength. Hence *Sara* has to be examined. <sup>12</sup>

#### **SAMHANANA**

A person having compact body reflects the quality of overall body build. Clinically patient may be assessed as *Pravara*, *Madhyama* and *Avara Samhanana*, depending on the compactness of body parts. *Pravara Samhanana*- A person having *Samasuvibhakta Asthi*, *Subaddha Sandhi i.e.*, well-formed bones and joints, *Sunivishta Mamsa Shonita* is said to have *Susamhata Shareera* and *Balavan*. The person having opposite qualities is considered as *Avara Bala* and the one having *Madhyama Samhanana* is having *Madhyama Bala*. <sup>13</sup>

#### **PRAMANA**

Pramana is determined by measuring the Utsedha, Vistara, Ayama of the body part taking the Anguli Pramana of that particular individual as the unit of measurement. For clinical assessment, it can be subdivided into – Pravara, Madhyama and Avara Pramana. The Ayama of the entire body should be 84 Angula. The Ayama should be equal to Vistara of the body. The person having Ayama and Vistara equal to each other is known as Sama Purusha, anatomically proportionate and healthy person.

Those peoplewill have *Uttama Ayu* (longevity), *Bala, Oja, Sukha, Aishwarya*. The person having *Anguli Pramana* more than 84 *Angula* or less will be considered as *Adhika* or *Heena*.<sup>14</sup>

#### **Pramana** Assessment

- Body frame size, BMI and Waist Hip ratio can be considered for assessing *Pramana*. Body frame size denotes bone mass and muscle mass and has an important role in determining weight ranges. These ranges in turn act as guides for people to determine the weight they should be, depending on their frame size. It varies according to the gender. There are 3 frame sizes: small, medium, large.
- BMI can be considered as one such parameter to assess the *Pramana* of the person. It is a parameter to assess the healthy weight range for height of that individual. It is calculated as BMI= Weight in kg/ Height in m<sup>2</sup>. Within this healthy weight range for height,

BMI of 19-21 is considered as best for small frame.

BMI of 21-23 is best for a medium frame. BMI of 23- 25 is best for a large frame individual.

■ The Waist-Hip Ratio also has an important role in identifying the risk factors. It is stated that a waist—hip ratio of above 0.90 for males and above 0.85 for females, or a Body Mass Index (BMI) above 30.0 are at increased health risk for cardio-vascular disorders, reproductive status & long term health risk.

#### Importance of Pramana

Charaka has mentioned about the Ashta Nindita Purusha like Atidirgha, Atihriswa, Atisthula, Atikrusha<sup>15</sup>. By assessing the Pramana in

a patient, these can be known which helps to know the *Sadhyasadhyata* of the disease and the probable plan of treatment. In modern context, the first two can be compared to gigantism and dwarfism, which can be due to any hormonal imbalance or due to genetic conditions for which treatment is difficult.

#### **SATMYA**

Satmya is that which is being used constantly over a long period of time and has become a habit and which are homologous to the body. Satmya can be of 3 types- Sarva Rasa Satmya, Eka Rasa Satmya, Vyamishra Satmya. Individuals for whom Ghrita, Ksheera, Taila and Mamsa Rasa as well as the drugs and diets having all six Rasa are wholesome are endowed with strength and longevity. They are considered as Pravara Satmya. One who is Ruksha Satmya, Ekarasa Satmya will be having Alpabala, Alpayusha and is Alpakleshasaha. One who is accustomed to Vyamishra Satmya will have Madhyama Bala. 16

#### Satmya Assessment

By knowing the selectivity of food- *Satmya* can be assessed

- Non- selective- *PravaraSatmya*
- Moderately selective- MadhyamaSatmya
- Very Selective *AvaraSatmya*

#### Importance of Satmya

*Charaka*has mentioned the importance of *Satmya* stating that *Sarva Rasabhyasa* is the reason for *Bala* and *Eka Rasabhyasa* for *Dourbalya*. <sup>17</sup>

#### **SATWA**

Satwa is mind and it regulates the body because of its association with soul. Acc. to Bala Bheda, it is of 3 types, viz., Pravara, Madhyama, Avara Satwa. 18

#### **Importance of** *Satwa*

A *Pravara Satwa* person will be tolerant in all kinds of situations. 19 Even if possessed with weak physique, such persons having excellent mental faculties will be having more tolerate any disease and without much difficulty. From the treatment point of view, one can withstand Shodhana procedures, Shastra Karma without any difficulty. Madhyama Satwa persons can tolerate the pain themselves when they realise that others can also tolerate it. The Avara Satwa persons can neither by themselves nor through others sustain their mental strength and in spite of having sound physique, they cannot tolerate even mild pain. They are susceptible to fear, grief, greed, delusion, ego. Such persons may be prone to psychological diseases, *Unma*da, Apasmara, Mada etc.

#### AHARA SHAKTI

Ahara Shakti of an individual can be examined by two ways – by Abhyavaharana Shakti - the power of ingestion and Jarana Shakti—the power of digestion. <sup>20</sup>Abhyavaharana Shakti depends on the condition of Agni itself. Jarana Shakti is assessed by the Jeernahara Lakshanas i.e., Udgara Shuddhi, Utsaha, Yathochita Kale Vegotsarga, Laghuta, Kshut, Pipasa. <sup>21</sup>

#### VYAYAMA SHAKTI

Vyayamashakti should be examined by the capacity for doing work. It is of 3 types-Pravara, Madhyama and Avara Vyayamashakti.<sup>22</sup>

#### Vyayamashakti Assessment

Samyak Vyayama Lakshana can be considered as the optimal capacity of the person for exercise/ work. A person can have good exercise capacity / feel tired before achieving Sa-

myak Lakshana which can be taken as Pravara or Avara.

Exercise capacity of an individual can vary depending on many factors like age, gender etc. Depending on these if a standard protocol is developed in relation with the variables, *Vyayamashakti* can be assessed in a better way.

Exercise tolerance refers to the exercise capacity of an individual as measured by their ability to endure exercise and/or the maximum work load achieved during the exercise period. Exercise tolerance can be measured accurately during an exercise tolerance test. It involves monitoring of heart rate, BP, ECG as well as physical symptoms. Most commonly treadmill can be used.

Perceived exertion is how hard you feel your body is working. It is based on the physical sensations a person experiences during physical activity, including increased heart rate, increased respiration or breathing rate, increased sweating, and muscle fatigue which can be correlated to *Samyak Vyayama Lakshanas*. <sup>23</sup> Althoughthis is a subjective measure, a person's exertion rating may provide a good estimate of the actual heart rate during physical activity.

The other method is to check the pulse rate during maximum exertion. It should be within 1 ½ times of the normal pulse rate of that individual.

#### Importance of Vayamashakti

A person with good *Vyayamashakti* will possess good *Bala*, hence can tolerate *Shodhana* therapies and any kind of *Shastra Karma*. Also *Vyayama* helps to increase the *Agnibala*. Thereby helps in planning the type of medicine to be administerd, its dosage. To undergo rehabilitation programme, the person should be having

good power of exercise. This helps in faster recovery.

#### **VAYA**

Vaya is defined as the state of the body corresponding to the length of time that has passed since birth. It is broadly classified into 3 stages as per *Charaka*: *Bala* (childhood)- 0- 30 yrs- again divided into 2 as 0-16 yrs- *Aparipakwa Dhatu Kala*, 16-30 yrs- *Vivardhamana Dhatu Kala*. *MadhyamaVaya*- 30-60 yrs and *Jeerna Vaya*- 60- 100 yrs. <sup>24</sup>

### Importance of Vaya

The examination of *Vaya* helps in knowing the diseases and *Doshas* which are specific to that particular age. The dose of medicine is different for different age groups. So it helps in calculating the dosage as per the age group. Certain treatment procedures are contraindicated in *Bala*, *Vruddha* which are to be avoided.

#### **VIKRUTI**

Vikruti Pariksha is done to know the Roga Bala by examining Hetu, Dosha, Dushya, Prakruti, Desha, Kala, Bala Lakshanas in the affected Rogi<sup>25</sup>. Without determining the strength of the causative factors etc., it is not possible to obtain the knowledge regarding the intensity of the diseases.

Hetu- It can be interpreted as the causative factor of the disease whether the origin is due to Shareerika/ Agantuja/ Manasika Nidana also, whether the cause of the Roga is Sahaja, Garbhaja, Jataja, Pidaja, Kalaja, Prabhavaja or Swabhavaja.

Dosha- The Doshaswhich are vitiated should be evaluated. Whether it is Shareerika or Manasika Dosha; or it can be Vriddhi or Kshaya of the Dosha.

Dushya- It can be Dhatu/ Mala/ Srotas. The vitiated Dhatu/ Mala can show respective Vriddhi/ Kshaya Lakshanas and vitiated Srotas can show the respective Sroto Dushti Lakshana which helps in the understanding of the diagnosis.

Prakruti- Constitution of an individual helps to know the susceptibility of the individual to certain kind of diseases and also to understand prognosis of the disease. For example: Vataja Prakruti persons are more prone to Vataja Roga. Here we can also assess whether it is Prakruti Sama Samaveta or Vikruti Vishama Samavaya.

Desha- It can be Bhumi Desha or Aatura Desha.Bhumi Desha is of 3 types- Jangala, Anupa and Sadharana. By knowing the Bhumi Desha, it gives a clue regarding the Doshas which have a tendency to get aggravated, diseases which are prevalentin that particular place, the type of Ahara, Vihara people are accustomed to, Bala of the persons residing in that region, their Satmya can all be predicted. Atura Desha is examined to know the extent of Dosha Bala Pramana and Ayu Pramana.

*Kala*- can also be considered as the stage of the disease- whether it is acute or chronic stage. For Example: In *Navajwara*, *Langhana* is preferred and *Kashaya* is contraindicated.

Depending on these factors like *Hetu*, *Dosha* etc., the severity of the disease can be classified into 3 types as *Uttama Bala Roga*, *Madhyama Bala Roga*, *Alpa Bala Roga*. In case of any disease, if the *Dosha*, *Dushya*, *Prakruti*, *Desha*, *Kala*, *Bala* are having similar *Gunas*; if *Hetu*, *Linga* are having *Mahat Bala*, then the *Roga* is considered as *Balawan Roga*. Contrary to this, if the *Dosha*, *Dushya*, *Prakruti*, *Desha*, *Kala*, *Bala* are having dissimilar *Gunas* and *He*-

tu, Linga are having Alpa Bala, then the Roga is considered as Alpa Bala Roga.

The strength of the individual can be classified as *Pravara*, *Madhyama*, *Avara* depending upon the *Prakruti*, *Sara*, *Samhanana* etc., except *Vikruti*. The strength of the *Doshas* is inferred from the *Vikruti*. Depending on these factors, the type of *Bheshaja*to be administered, whether *Teekshna/ Mrudu/ Madhyama* can be known.

#### Importance of VikrutiPariksha

Vikruti refers to morbidity of the susceptible individual and it also helps to ascertain the strength of the pathogenesis factors responsible for the manifestation of disease and also helps to predict the prognosis of the disease. The Vyadhi Bala is assessed by the intensity of Hetu, Lakshana parameters. They are collectively described as the conditions namely of Sukha Sadhya, Krichrasadhya and Asadhya. It helps in planning of the treatment. For example, we can advise Nidana Parivarjana by knowing the Hetu. By knowing the Dosha involvement, Dosha Pratyaneeka Chikitsa can be planned.

#### **DISCUSSION**

- *Dashavidha Pariksha* of *Charaka* is explained for the examination of the *Atura*.
- The aim is to assess Ayu (Life span), Bala & Dosha Pramana of the patient.
- Dashavidha Pariksha helps to identify the Rogi & Roga Bala there by selection of appropriate dose & strength of medication (Shodhana & Shamana).
- The 10 point examination has to be practically understood and interpreted to obtain optimum result.
- The same may be employed to a 'Swastha Purusha' and try to assess his Ayusha Pra-

*mana* and analyze the underlying risk factors that may cause disease in future.

#### **CONCLUSION**

- A standard protocol has to be developed to clinically assess the *Dashavidha Pariksha* without any ambiguity.
- Such protocols which help to reproduce the same assessment done at different places by different physicians.
- The 10 point examination can be employed to a "Swastha Purusha" to assess his risk factors and make necessary changes in his Ahara & Vihara to prevent the impending disease.
- Dashavidha Pariksha can be used as a tool for 'Preventive & Positive Health'.
- Dashavidha Pariksha coupled with Dinacharya & Rutucharya will help to achieve the goal "Health for all by 2020".

As Charaka quotes- If the person is having *SamaMamsa*, *Pramana*, *Samhanana* and all the *Indriyas* are in good condition, and then the person will not be affected by the strength of the disease.<sup>26</sup>

#### REFERENCES

- Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, sutra sthana, chapter:20, verse:20,Pg:115
- 2. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:88,Pg. 275

- 3. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:94,Pg. 276
- 4. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:94, Pg:276
- 5. Sushruta, SushrutaSamhita, Nibandhasangraha Commentary by Dalhanacharya, NyayachandrikaPanjika of Gayadasacharya, Edited by Vaidya YadavjiTrikamji Acharya, ChaukhambaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 824, shareerasthana, chapter: 4, verse: 63, Pg. 360
- Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, vimanasthana, chapter:8, verse:95, Pg:277
- 7. Sushruta, SushrutaSamhita, Nibandhasangraha Commentary by Dalhanacharya, NyayachandrikaPanjika of Gayadasacharya, Edited by Vaidya YadavjiTrikamji Acharya, ChaukhambaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 824, shareerasthana, chapter: 4, verse: 79, Pg: 362
- 8. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:102 commentary, Pg:278

- 9. Sushruta, SushrutaSamhita, Nibandhasangraha Commentary by Dalhanacharya, NyayachandrikaPanjika of Gayadasacharya, Edited by Vaidya YadavjiTrikamji Acharya, ChaukhambaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 824, sutrasthana, chapter: 35, verse: 16, Pg. 152
- 10. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:111-113, Pg:278
- 11. Jagrutichapale, Ajay dawale, Quantitative estimation of bala(physical fitness) with respect to dhatusarata, IJRAP, 2013; 4(5):705-707
- 12. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, vimanasthana, chapter:8, verse:115, Pg:278
- 13. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:116, Pg:279
- 14. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:117, Pg:279
- 15. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan,

- Varanasi, reprint 2014, Pp: 738, sutra sthana, chapter:21, verse:3, Pg:116
- 16. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:118, Pg:279
- 17. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, sutra sthana, chapter:25, verse:40, Pg:132
- 18. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, vimanasthana, chapter:8, verse:119, Pg:279- 280
- 19. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:119, Pg:280
- 20. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp. 738, vimanasthana, chapter:8, verse:120, Pg:280
- 21. Madhavakara, Madhavanidana, Madhukoshavyakhya by Srivijayarakshita and Srikanthadatta, Vidyotinihinditika by Yadunandanopadhyaya, Choukambhaprakashana, Varanasi, reprint 2014, Vol I, Pp:568, chapter:6, Verse:24, Pg:237

- 22. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, sutra sthana, chapter:7, verse:33 (1), Pg:51
- 23. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, vimanasthana, chapter:8, verse:121, Pg:280
- 24. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, vimanasthana, chapter:8, verse:122, Pg:280
- 25. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, vimanasthana, chapter:8, verse:101, Pg:278
- 26. Agnivesha, CharakaSamhita, Ayurveda Deepika Commentary by Chakrapanidatta, Edited by Vaidya YadavjiTrikramji Acharya, ChoukambhaSurbharatiPrakashan, Varanasi, reprint 2014, Pp: 738, sutra sthana, chapter:21, verse:18, Pg:117

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