

## CONCEPTUAL STUDY OF *SHAITHILYA*

Phadke Chinmay<sup>1</sup>, Nilakhe Savita<sup>2</sup>

<sup>1</sup>MD scholar, <sup>2</sup>Associate Professor;

Department of Ayurved Samhita and Siddhant, College of Ayurved, Bharati Vidyapeeth Deemed University, Pune, Maharashtra, India

Email: [chiefphadke@gmail.com](mailto:chiefphadke@gmail.com)

### ABSTRACT

*Dhatu Shaithilya* is a structural and functional deformity. *Shaithilya* is an incompact type of union. *Dhatu*s will acquire *Shaithilya* at different degrees of *Anibidasamyoga*. *Shaithilya* is of two types Physiological and Pathological. Unless the pathogenesis of *Shaithilya* is understood the treatment of same is not possible. In this article study of *Shaithilya* in different angles is presented. These are *Prakrut-Vikrut Shaithilya*, Structural-Functional *Shaithilya*, *Nidan Panchak* associated with *Shaithilya* and Relation of *Shaithilya* to *Dosha, Dhatu, Mala, Upadhatu. Shaithilya* can also be explained on the basis of the *Guna, Karma* and body components associated with the *Panchamahabhuta*. Study of *Shaithilya* has different angles to be focused. These are elaborated in this article.

**Keywords:** *Shaithilya, Shithila, Prameha, Samyoga, Laxity*

### INTRODUCTION

In India total of 31.16 % (37.7 crore) of population is urban.<sup>1</sup> It's seen that their dietary habits & behavioral patterns are similar to the same described in *Charak Samhita* as *Gramyahaar*. Now a days, these factors are also being found in rural areas. These factors affect the physical as well as mental strength of a person and cause various effects like dislocation of joints, porosity in bones, vitiation of *Rakta*, hampered ejaculation of *Shukra, Glani, Sada, Shwasa* etc. One of those

is *Dhatu Shaithilya* which is caused over duration due to change in the composition of *Dhatu*. This symptom is present in diseases such as *Pandu*<sup>2</sup>, *Vatarakta*<sup>3</sup>, *Sthaulya*<sup>4</sup>, *Kushtha*<sup>5</sup>, *Prameha, Rajayakshma* etc. Unless the pathogenesis of *Shaithilya* related to various *sharir bhavas* like *Rakta, Mamsa, Meda, Sandhi, Indriya* etc. involved in these diseases is understood the treatment of same is not possible. Hence this topic is chosen for study.

**Aim:** To study Shaithilya as a concept.

**Material**

- Carak Samhita with Chakrapani & Gangadhar commentaries.
- Sushruta Samhita with Dalhan & Gayadas commentaries.
- Ashtanga Samgraha with Indu commentary.
- Ashtanga Hrudaya with Arundatta, Hemadri & Chandranandan commentaries

**Method** - Literary Study

- References related to Shaithilya from classical Ayurvedic texts & allied classical literature was compiled.
- The compiled references were studied & analyzed.
- The concept of Shaithilya from compiled references has been established.

Shaithilya is a structural deformity which also brings a functional deformity. Chakrapani explained it as *Anibidasamyogata*. (Incompact type of union) (See table No.1, and Diagram no. 1) Shaithilya is an incompact type of union of two *bhava padartha*. To understand this concept; an example is given by Chakrapani; as, if tough threads are woven loosely ultimately the resultant cloth will not have compactness and hence the strength. In the same way even if *paramanus* of a *dhatu* are of best quality but being arranged loosely then the *dhatu* thus formed will not have required compactness. That condition is known as Shaithilya. This will be graver with a decreasing quality of *dhatu paramanus*. The degree of normal compactness of each *dhatu* is different. Hence different *dhatu*s will acquire

Shaithilya at different degrees of *Anibidasamyoga*.

To study the Shaithilya there are scattered references from the *Bruhatrayi*. When those references are compiled together, correlated and analyzed; vast information about Shaithilya is obtained which may be classified as -

1. *Prakrut-Vikrut Shaithilya*
2. *Structural-Functional Shaithilya*.
3. *Nidan Panchak* associated with Shaithilya.
4. Relation of Shaithilya to *Dosha, Dhatu, Mala, Upadhatu*.

MODES OF ACQUIRED SHAITHILYA

**1. Prakrut-Vikrut Shaithilya**

*Prakrut Shaithilya* term is coined for those conditions in which Shaithilya is acquired due to unavoidable physiological changes in the body. For e.g. *Pittala* person has *Shithila sandhibandha* and *Shithila Mamsa dhatu* due to *Drava guna* of *Pitta*. Hence it may be related to *Jala* and *Teja Mahabhuta*. (See table no.2)

*Vikrut Shaithilya* term is coined to those conditions which arise due to some pathological changes. This is described under Classification according to *Hetu, Samprapti, Purvarupa, Rupa, Upadrava, Arishta/Asadhya lakshana* associated with Shaithilya. (See table no.3)

**2. Structural-Functional Shaithilya**

*Structural Shaithilya* – Actual structural change in a *sharir bhava* resulting in *Anibida Samyoga* is termed as *Structural Shaithilya* in this study. E.g. *Sandhi Shaithilya* in *Rajyakshma samprapti, Sandhi Shaithilya*

due to *ratha-kshobha*. This will also elicit a functional deformity/debility.

Functional *Shaithilya* – *Shaithilya* causing deformity in normal functioning of body parts. E.g. *Javoparodha* is seen as an effect of *Shaithilya* in *medo dhatu* in *sthaulya*.

### 3. *Nidan Panchak* associated with *Shaithilya*

When direct references of word *Shaithilya* were analyzed according to *nidana Panchaka* it was found that this deformity is present from *purvarupa* till the *Arishta lakshana* in various conditions. The obtained information is presented in the table.(See table no. 3)

*Charak samhita* and both *Vagbhatacharya* stated *Shaithilya* as *purvarupa* in *Prameha* but *Acharya Sushruta* mentioned it as *Upadrava*. *Bruhatrayi* states *Shaithilya* as *purvarupa* in *Vatarakta* but they differ in *Avayava – Sandhi Shaithilya* as per *Charaka*, *Paad Shaithilya* as per *Sushruta* & *anga Shaithilaya* as per *Sangraha* are stated as *purvarupa* in *Vatarakta*.

### 4. Relation of *Shaithilya* to *Dosha, Dhatu, Mala, Upadhatu*.

All the three *Dosha* take part in *Shaithilya* & except *Pitta Kshaya* all *kshaya* and *vrudhhi* of *Doshas* are directly associated in generating *Shaithilya*.

There are direct references of 5 *dhatu* responsible for *Shaithilya*. Namely *Rakta, Mamsa, Medo, Asthi* and *Shukra*.

Among *Upadhatu Twak, Sira* and *Snayu* mentioned as *Sandhibandha* acquire *Shaithilya* according to these direct references.

4 References of *Purish* undergoing *Shaithilya* are found.

References stating Specific *Avayava Shaithilya* include *Linga Shaithilya* as *Rupa* in *klaibya*, *Parva Shaithilya* as in *vyapad* of *ratha-kshobha*, *lasika Shaithilya* as in *Kushtha*.

*Danta Shaithilya* presenting *asadhya laxana* in *visha peeta* condition are the conditions in which *Shaithilya* is found in a particular Organ.

References of *Shaithilya* in *rasa, Majja* as *dhatu* and *Mutra, Sweda* as *mala* are not directly stated in *Samhitas* but in *Prameha, Shithilangata* is a *Purvarupa* and in *Dushya sangraha* of *prameha, Majja, Rasa* and *Ambu* are stated. Hence it is understood that *Rasa, Majja, Mutra* and *Sweda* also undergo *Shaithilya* in *Prameha*.

## DISCUSSION

According to the references *Shaithilya* is a state of incompact union and *Samhanana* is a state of Compact union. Hence these conditions are exactly opposite to each other. *Prakrut Shaithilya* includes following conditions.

During the summer season there is great discomfort in the body because of the affliction with excessive heat. *Doshas* remain excessively detached due to their excessive *Shaithilya* caused by the contact with the *Ushna Guna*.

*Kleda* causes *Shaithilya* in the food particles during digestion. This also suggests the action of *Kleda* on tissues. If it stagnates in a tissue in excess quantity, it will cause *Shaithilya* of that tissue. This will be Structural deformity along with functional impairment.

In *Pitta* dominant person *Shaithilya* is due to *Drava* attribute of *Pitta*.

As soon as sweating is noticed, one should conclude that the stagnant *doshas* have moved from their locations to the alimentary canal. Here the word *Shaithilya* is used in a sense to describe detachment of stagnant *doshas*.

In old age *Sara* becomes *Shithila*. Here again instability suggest a functional *Saithilya* and incompactness suggests structural *Shaithilya*.

In the context of *Asannaprasava Ga g dhara* comments on *Shaithilya* of eyes, as inability to open and close. In the same context *Aru adatta* comments as *Shaithilya* is a feeling as if eyes are being slightly moved from their site. Hence, here, both structural and functional *Shaithilya* can be understood.

During onset of *Bh janak la, sam na vayu* is in active mode. Also *Kshudha Vega* is there. In this condition *Shaithilya* occurs as a symptom.

*Shaithilya* is a step in pathogeneses of various diseases like *Kushtha, Sthaulya, Prameha, Rajayakshma, Pandu. Shaithilya* is also found as a primordial symptom in *Prameha* and *Vatarakta*. It is one of the symptoms in conditions such as *Pitta asr a, Pakva pha, Graha, Sthaulya, Klaibya, Asthik aya, kaphak aya, kaphavrddh, raktak aya* and *m sak aya*.

*Shaithilya* can arise as complication in *Sutika* if advised regimn is not followed. This causes a disease in *sutika* to become *Krucchra Sadhya* hence it also provides a valuable aspect for judging the prognosis. Hence it should be diagnosed as early as possible and treated as early as possible.

*Shaithilya* is also suggestive of fore coming death in combination with other specific symptoms as mentioned in *Arishtas*.

*Shaithilya* is multi factorial deformity. Hence it should be studied in various ways. Scholar has attempted to study *Shaithilya* in few aspects.

There is further scope to continue the study of *Shaithilya* by adding clinical assessment of *Shaithilya*. If one could diagnose and assess *Shaithilya* it will be a golden opportunity to prevent it from generating any further disease. Objective Assessment of *Shaithilya* could be developed as common pre-diagnostic criteria of above mentioned diseases. Also controlled trials of specific *Aushadh, Anna* and *Vihar can be arranged* to find out a method to counter *Shaithilya*.

## CONCLUSION

1. *Shaithilya* is multi factorial deformity.
2. *Shaithilya* is a common step in pathogenesis of various diseases.
3. *Shaithilya* can be generated by any *Dosha* in Any *dhatu* except *Asthi* as well as 3 *Upadhatu, 1 mala* and 9 organs.
4. *Shaithilya* is also a factor which causes a disease to become *Krucchrasadhya*.

## REFERENCES

1. [http://www.censusindia.gov.in/2011census/PCA/PCA\\_Highlights/pca\\_highlights\\_file/India/Chapter-1.pdf](http://www.censusindia.gov.in/2011census/PCA/PCA_Highlights/pca_highlights_file/India/Chapter-1.pdf)
2. *Charak Samhita* by Agnivesha with Chakrapani tika, Edited by Vd. Yadavji Trikamji Acharya, Published by Chaukhamba Prakashan, Varanasi, Reprint in 2013, Page no. 526,.

3. Sushruta Samhita by Sushruta with Dalhana tika, Edited by Vd. Yadavji Trikamji Acharya, Published by Chaukhamba Sanskrit Sansthan, Varanasi, Reprint in 2013, Page No. 264.
4. Ashtang Sangraha By Vagbhata with Indu Tika, Edited by Dr. Shivprasad Sharma, Published by Chaukhamba Sanskrit Series office, Varanasi, Edition 2008, Page no.184,.
5. Ashtanga Hrudaya By Vagbhata with Aru adatta and Hem dri tika, Edited by Vd. Hari Sadashivashastri Paradkar, Published by Chaukhamba Sanskrit Sansthan, Varanasi, Reprint in 2012, Page no. 524.

**Table 1: Shaithilya Vs Samhanana**

Shaithilya (Chakrapani – Cha.Sha.4/14)	Samhanana (Chakrapani – Cha.Vi.8/116)
Anibida-samyogata	Nibida-sandhanata
State of an incompact union	State of a compact union

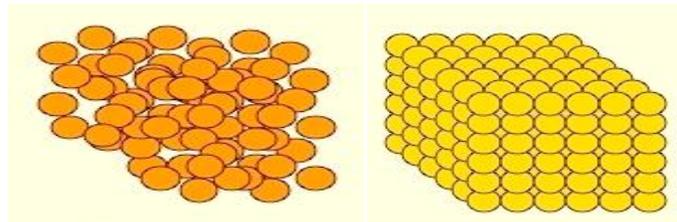


Diagram 1 :- Shaithilya      Diagram 2 :- Samhanana

**Table 2: Prakrut Shaithilya.(Cha. – Charak Samhita, Su. – Sushrut Samhita, A.San. – Ashtanga Sangraha, Vi.- Vimana Sthana, Sha.- Sharira Sthana, Chi.- Chikitsa Sthana, U.- Uttara tantra.)**

Reference	Topic	Sutra	Sharir Bhava	Guna	Mahabhuta
Cha.vi.8/127	Avoid Shodhana in Grishma	arira ..... ati ithilamatyarthapravil nad a	arira, d a	Ushna	Teja
Cha.Sha.6/15	h rapari makar a bh va	kl da aithilyam p dayati			Jala
Cha.Vi.8/97	Symptoms in Pitta dominant Person	dravatv cchithilamrdusandhibamdhm s	sandhibamdh a (Sn yu), m sa	Drava	Teja, Jala
Su.Chi.33/7	Mode of action of Vaman drug.	tasya ca sv dapr durbh v a ithilat m panna .....j n y t	Dosha	Ushna, Tikshna, Sukshm, Vyavayi, Vikashi	Agni, Vayu.
A.San.Sha.8/2	Old age	vrddh tu.....tasminm rut dr ka t na lathas ram sasandhyasthit	S ra(Oja), m sa, sandhi, asthi	Ruksha	V ta

Cha.Sha.8/36	prajananak la li ga	ak vimuktabandhanatvamiva kuk ravasra sanam	aithilya , vak asa ,	Netra, Vak a, kuk i	Chala	V ta
Su.U.64/84	h ra k la	kuk au ca ithil prad yastv h r bhavati		kuk i		

**Table 3:** Nidan panchak associated with Shaithilya. (Cha. – Charak Samhita, Su. – Sushrut Samhita, A.San. – Ashtanga Sangraha, A.Hr.-Ashtanga Hrudaya)

Sampr p ti	P u	R jayak m	Sthaul ya	Pram eha	Ku ha								
P rvar p a	Prameha (Cha., A.Hr.)	V tarak ta											
R pa	Pitta asr a, Rakt r a (vi)	Pakva pha - tvak	Ratha k bh a - sandh i	Vyav ya - sandh i	Gra ha - vi	Sthaulya - jav par dh a aithilya	Klaib ya - li ga	asthik aya - sandh i	kap hak aya	kap havr ddh	rakta k aya - sir	m sa k aya - hama n	
Upadrav a	Prameha (Su.)	S tik Paricar y – If not followe d.											
Ari a, Mara a, As dhya	Pi ik - sadya	Sandhib andha - sadya	Vi - sadya	Sipr y ant g tr i	Vi a p ta								

**Source of Support: Nil**

**Conflict Of Interest: None Declared**

How to cite this URL: Phadke Chinma, Nilakhe Savita: Conceptual Study Of Shaithilya. International Ayurvedic Medical Journal [online] 2017 [cited May, 2017] Available from: [http://www.iamj.in/posts/images/upload1653\\_1658.pdf](http://www.iamj.in/posts/images/upload1653_1658.pdf)