

STUDY OF ĀVRITA VĀTA IN THE LIGHT OF HYPERTENSION



*Forwarded
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SUMMARY AND CONCLUSION

The present study has been planned as a pilot work to evaluate the concept of Avrita Vata.

All the physiological and pathological conditions of the body is depending on the Doshas, Dhatus and Malas. Their qualities, normal functions, decreased and increased functions are describe in all Ayurvedic classics.

A number of diseases have been described in Avurveda. Most of them are related to Vata Dosha. Among them some Avrita Vata Roga and their signs and symptoms have been mentioned in Ayurvedic classics.

The clinical entity of arterial hypertension is one of the most important challenges due to its innumerable hazards. Etiology, mechanism, pathophysiology of hypertension are still not clear even today.

Many historical, classical, epidemiological and experimental data reveal that arterial hypertension was existed in ancient India.

Regarding Doshic consideration of arterial hypertension it can be categorized as Tridosha Janya Roga, more related to Vata and Pitta Doshas. But Kapha also plays a vital role in occurrence of hypertension.

Ayurveda has clearly mentioned that nomenclature of all diseases are not possible always. So physicians try to comprehend the nature of disease on the basis of prevailing features and treatment should be suggested accordingly.

Clinical features of arterial hypertension have been compared by various scholars of Ayurveda in different ways.

In Ayurvedic system of medicine, there are a few clinical conditions which are some extent nearer to the clinical entity of the arterial hypertension.

If we consider the signs and symptoms of Avrita-Vatas in the light of arterial hypertension, we come across a number of Avrita Vatas juxtaposed with Doshā mainly Vata followed by Pitta and Kapha.

On the basis of critical study of the concept of Avrita Vata and their juxtaposition with Dōshas and covering of various types of Vatas, we have been able to short out the six (6) types of Avrita disorders of Vata namely, Pittavrita Vata, Pittavrita Udana, Pittavrita Prana, Pittavrita Vyana, Pittavrita Samana, Raktavrita Vata.

Among them nearest is PITTAVRITA UDANA, where the maximum signs and symptoms tally with that of arterial hypertension.

Thus it can be finally concluded that arterial hypertension is homologously nearer to PITTAVRITA UDANA.

It may be concluded in the end that in modern medical science also the hypertension could not be designated as a separate disease. Rather it is a multifactorial disease and our Ayurvedic literature has already expressed the same view. That is why we can not explicitly give any exact nomenclature.

This humble attempt will be helpful to other scholars interesting in further research in this field.

Bibliography
