

Kampa Vata Explaining in Classical

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Abstract

Kampavata (Parkinson's disease) is a progressive neurodegenerative disorder. The disease affects approximately 2 out of 1000 people, and most often develops after age of fifty, the clinical course is chronic and progressive with severe disability attained after approximately ten years. According to Ayurveda, Kampavata is a Nanatmaja disorder of Vata. In time of Charaka and Susruta cluster of symptoms like Kampa (tremor), Stambha (rigidity), Chestasanga (bradykinesia and akinesia), Vakvikriti (disturbance in speech) etc were described in different contexts, but they were not clubbed as part of one disease. As a separate clinical entity of Kampavata was first narrated by Acaraya Madhavakara under the name of "Vepathu". However, it was the Basvarajiyam who for the first time gave an unabiguous description by explaining the clinical picture of Kampavata as and all these clinical features are similar to that of Parkinson's disease.

Keywords - Kampavata, disorder, kampa, vepatu, parkinsons, vakvikruti etc.

Introduction-

'Ayurveda' is the science of life which described the 'Hita' and 'Ahita' to 'Ayu'. Means, it described the favorable and unfavorable to life. If, man doesn't follow the rules described in 'Ayurveda', it leads to several pathogeneses, which ultimately produces different disorders. 'Shitapitta {Urticaria}' is one of such disorder, which caused by 'Asatmya Sevana' means the 'Exposure to allergens and antibody.' In present busy and fast life, one can't follow the rules of 'Dinacharya' and 'Ritucharya' described in 'Ayurveda'. Due to heavy industrialization and heavy traffic one constantly comes into contact with various

pollutants. The spicy and fast food eaten now a days, which have very less nutritional values and also having similar properties to 'Viruddhahara. These all ultimately resulted into 'Dhatudurbalya' (i.e. lower immunity).

Aims :

Kampa Vata explaining in classical

Objectives :

Study of Conceptual study Kampa Vata, concentration on Ayurveda view Kampa Vata.

Materials :

- Laghutrayee Samhita
- Bruhatrayee Samhita
- Journals
- Commentary

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Methods :

Assemble the Ayurveda view on Kampa Vata appearance of Conceptual. This is literary research study. In this articles all the references from Ayurveda Samhita and respective commentaries regarding Kampa Vata explaining in classical

Review of literature–**Purvaroop^{1 & 2}**

The symptom which occur before the clear manifestation of a disease are known as Purvarupa or Premonitory symptom. The Purvarupa manifests in Sthana Samsraya stage which is the forth stage of Kriyakala (Su.Su-21/33). It is important to diagnosis and treats the disease at this stages, the patients may be saved from the functional or organic damage which may be done by the complete manifestation of the disease. Charaka say that Avyakta Lakshana are the Purvarupa of Vata Vyadhi (Ch.Chi.-28/16), following may be considered as.

Purvarupa of Kampavata.

- Angamarda
- Anxiety (Udvega)
- Anavasthita Chittatva.
- Disorientation (Moha)
- Forgetfulness (Smriti hani)
- Irritability (Asvasthanana)
- Pain (Gatraruka) ache & pain which may be restricted to one side of the body.
- Nervous ness (Avasada) patient felling of tension & restlessness.
- Paresthesia (Supti)
- Sensation of warmth (Ushnapratiti)
- Tiredness (Klama)

Above mentioned Purvarupa are mostly Vattic in nature, which is suggestive of Vata dominance in the disease while patients with idiopathic Parkinson's disease usually present after suffering symptom for about two year Having made an accurate diagnosis. The patient should be counseled about nature of the condition and

effective treatment that are available when necessary. There is often no immediately need for therapy in the newly diagnosed case. Where treatment is required will depend on the functional disability of the individual.

Roop –

The Kampavata is characterized by :-

- Karapada Tale Kampa (Tremor in hand and legs.)
- Dehabramana (Whirling sensation ; ? Rombergism)
- Nidrabhanga (Loss of Sleep)
- Kshinamati (Dementia)

The symptom like :-

- Stambha (Rigidity)
- Cestahani (Slowness of the movement)
- Vinaman (Flexed posture)
- Vakvikriti (Speech disorders)

Have been mentioned in other pathological conditions of Vata vyadhi which can also be grouped under the feature of Kampavata.

Various commentaries on Kampa^{3,4,5 & 6} :-**Charaka Samhita :-**

Venpanam Ekdeshe Vyakta Kampanam (Cakrapani On Ch.Chi.- 24/102)

Pravepate Kampate (Yog Ch. Chi.- 11/9).

Susrut Samhita:-

- Brahmata Kampte (Dal. Su. Ut.- 62/8)

Vagbhata :-

- Uddhuyamanaha Antolyamanath (Haem. AH. Ni.- 4/14)
- Vepathu Kampah (Arun AH.Ni.- 16/13)
- Uddhuyamanaha Utkampahmanah (Arun. AH. Ni.- 4/14).
- Parivepanam Sakampanam (Chandra. AH.U- 4/40)
- Kampah Ativepanam (Arun. AH. Su.- 12/50)
- Kampah Chalanam (Hemadri. AH. Su.-37/26)

Madhava Nidana :-

- Mahata Vegena Vepanam (Vijay Rakshita, Ma. Ni- 68/20)

Kampa as one symptom of many other diseases are as follows:-

- Vataja Jvara – (Ch.Ni-1/28, S.Utt-39/29)
- Ardita (Su.Ni- 1/71-73)
- Vataj Unmada (Ch.Ci- 10/9)
- Ananta Vata (Ch.Si- 9/86)
- Madatyay (Ch.Chi.-24/91)
- Jarashosha (Su.Utt- 41/19-20)
- Putanagraha (Kasyapa)
- Shitaputana (Kasyapa)

Kampa

- Urustambha (Ch.Ci- 27/13).
- Vatic Visarpa (Ch.Ci- 21/30)
- Vishama Sannipataja Jvara (Ch.Ci- 3/99)
- Vatic Kushtha (Ch. Ni- 5/10).

Samprapti ⁷-

“Samprapti” (A.H. Ni.-1/18). Charaka says that due to the etiological factor, Vata getting aggravated fills up the vacuities in the body passages and produces various kinds of Vata Vyadhi which may affect the whole body or some specific part of the body (Ch.Chi.-28/18). It has also mentioned that the provocation of Vata may take place either due to diminution of body element (Dhatukshaya) or due to obstruction in the body channels (Avarana) (Ch.Chi.-28/59).

Samprapti Ghataka -

Dosha : Vata – All five types especially Prana, Vyana, Udana,

Pitta – Sadhaka

Kapha – Tarpaka

Dushya : Dhatu – Rasa, Majja, Sukra, Mamsa,

Updhatu _ Snayu, Ojas

Mala _ Purisha, Vitsneha

Strotas : - Rasa, Sukravaha, Majjavaha,

Mamsavaha

Type of strotodushti - Sanga.

Agni : - Jatharagni

Marga : - Madhyama

Site : - of production – Pakvashaya, Shirastha Majja manifestation – Sarvanga.

Sadhyasadhyatva ^{8&9}-

Chikitsya incurable (Su.Su.-33/4-5; A.S.Ni.- 9/33). Kamapavata being a one of the disease of Vata; is also considered as incurable, Charaka while explaining the Sadhya Asadhyata of some Vatic disease, mentioned that these disorders on account of their deep seated nature may or may not be cured even after careful treatment (Ch.Chi.- 28/72-73)

Pathya Ahara¹⁰ :-

Annavarga - Yava, Kulattha, Kodrava, Raktasali, Purana Sasti, Sali.

Sakavrga - Vastuka, Sigru, Kara wella, Patola, Surana, Kakamachi.

Falavrga - Darsa, Kushmanda, Amalaki,

Dugdhavarga - Godugdha, Ajadugdha, Mahisidugdha, Advaka/ Lasuna sidhha Takra.

Mamsarga - Kukuta, Lava, Vartak, Shuka, Kapota, Chatak, Mamsa.

Paniyarga - Tapta Niva.

Apathya Ahara - Dadhi , Mastu, Guda, Kshira, Masa

Viruddha - Bhojana, Asatmya -Bhojana, Visamasana, Anupa mamsa, Abhisyandhi, Guru, Picchila Drayvas.

Apathya Vihara - Viruddhachesta, Vegavarodha and Jagarana are also Apathya for Kampavata patients.

Result & Discussion-

Kampavata is a Nanatmaja disorder of Vata, description of a neurological disease identical to Parkinson's disease with rigidity a sensation of heaviness of the body and mental

apathy was described in Charaka subsequently description was seen in Susruta Samhita various signs and symptoms of Kampavata are scattered in Charaka Samhita, Madhava Nidana and other Ayurvedic treatise and include Chestasanga (akinesia & bradykinesia), Stambha (rigidity), Karpada tale Daha (tremor of in hands and legs), Shirokampa (head tremor), Avanamana (flexed posture), Dehabhraman dukhite (difficulty with balance), Cittanasa (dementia) even Parkinson's used the word to describe the disease that are less specific compared to today's terminology.

Conclusion-

Kampa Vata (Parkinson's disease) is a progressive degenerative disorder of the cerebellum occurs in all ethnic groups has an equal sex distribution. It is characterized by slowly progressive akinesia, rigidity, postural abnormality and resting tremor.

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