



## REVIEW ARTICLES

### A CONCEPT OF “VĀTA VYĀDHIVATA CIKITSĀ” SIDDHĀNT IN THE MANAGEMENT OF BĀDHIRYA

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#### ABSTRACT

Hearing loss (hearing impairment), is a partial or total inability to hear. A deaf person has little or no hearing. Hearing loss may be caused by a number of factors, including: genetics, ageing, exposure to noise, some infections, birth complications, trauma to the ear, and certain medications or toxins. According to modern medical science, there are three type of hearing loss: 1) conductive hearing loss, 2) sensory neural hearing loss, 3) mixed hearing loss. In *Āyurvēd*, hearing loss described as a *Bādhirya*. There are two type of hearing loss described in *Āyurvēdsamhitā*: 1) *vātakaphaj*& 2) *shuddhaVātaj*. Among them, *shuddhaVātajBādhirya* can be correlated with sensory neural hearing loss. *VātaDōṣ* is main causative factor of *Bādhirya*, so *vātavyādhivatcikitsāsiddhant* can be implemented in the managements of *Bādhirya*.

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## INTRODUCTION

*Āyurvēd* is the one and only medical system which gives equal importance to preventive and curative aspects of diseases. In *Āyurvēd*, *Ayu* is defined as conjunction of body, soul, mind and *Senses*. There are five *Gyānēndriya* (sense) mentioned by our *Āchāryas*<sup>1</sup>. Among them, the functional aspect of hearing is “*Śravanēndriya*”. The seat of *Śravanēndriya* is *Karna*<sup>2</sup>. *Bādhirya* is one of 28 types of *karnaroga* which is described by *ĀchāryasŚuśruta* in *uttaatamtra*. According to *ĀchāryaŚuśruta*, vitiated *VātaDōṣa* or *vata - KaphaDōṣa* resides in *ŚabdānuvahaSirā* leads to *Bādhirya*<sup>3</sup>. As *Bādhirya* is impaired hearing, It can be correlated with Deafness (Hearing Loss). According to modern science, there are mainly two types of deafness. 1) Conductive Deafness and 2) Sensory neural Deafness<sup>4</sup>. *VātaDōṣaPradhānBādhirya* can be correlated with Sensory Neural Hearing Loss (SNHL). Today due to faulty lifestyle & dietary habits, stress (*Prajñāparādha*), noise pollution, over use of headphone (*Asātmyēndriyārtha Samyōga*), variation in season and atmospheric changes (*Parināma*)<sup>5</sup>, the number of patients suffering from *Bādhirya* (SNHL) is increased. In 2012, WHO released new estimates on the magnitude of disabling hearing loss. The estimates are based on 42 population based study. There are 360 million persons of the world with disabling hearing loss (5. % of the world’s population). Among them, 328 million (91%) are adult

(183 million male & 145 million females) & 32 million (9%) of these are children<sup>6</sup>. Though, the prevalence of *Bādhirya* (SNHL) is high and increasing, still no satisfactory treatment is established. Being a complete medical science, *Āyurvēd* possesses many wonders, which are still beyond our site & understanding. In the light of *ĀyurvēdSiddhānta*, we can understand and create the wonders. To find out such phenomenon of *Āyurvēd*, *Bādhirya* (SNHL) has been selected for the present study.

## BĀDHIRYA

*ĀchāryaŚuśruta* has described 28 types of *Karnaroga*<sup>7</sup>. Among them *Karnanāda*, *Bādhirya* and *Karnakshveda* are related to *Śravanēndriya*. According to *ĀchāryaŚuśruta*, vitiated *VātaDōṣa* or *vāta* with *KaphaDōṣa* resides in *Śabdānuvahasirā* and leads to *Bādhirya*. *AsātmyēndriyārthaSamyōga* (improper use of sensory and motor organs in day to day life), *Prajñāparādha* (living against social and communal codes) and *Parināma* (time and season) are the root cause of any disease.<sup>1</sup> According to modern medical science, there are three type of hearing loss: (1) conductive hearing loss, (2) sensory neural hearing loss, (3) mixed hearing loss. In *Āyurvēdsamhitā*, this type of classification has not been mentioned by any *Āchāryas*. But according to *Mādhavakar* and *Videha*, the disease *Bādhirya* is occurred due to vitiated *VātaDōṣa* as well as vitiated *Vāta-KaphaDōṣa*. Thus, according to dominant *Dōṣas*, *kevalaVātaj* and *kaphānubandhiVātajBādhirya* can be considered as the two types of *Bādhirya*. *Visheshcikitsāsutra* given by *ĀchāryasŚuśruta* in the management of *Bādhirya* are

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(1) *pratishyāyavatacikitsā* and (2) *vātavyādhivatcikitsā*.<sup>8</sup> This type of *cikitsāsūtra* can be implemented in *kaphānubandhiVātajBādhīrya* and *shuddhaVātajBādhīrya* accordingly. So, it can be assume that there are 2 type of *Bādhīrya* has also been described by *Āchāryas*; (1) *kaphānubandhiVātaj* & (2) *shuddhaVātaj*. It can be correlated with conductive hearing loss and sensory neural hearing loss accordingly.

## NIDĀNA

Pratishyayjalkridakarnakanduayanaimarutt |  
Mithyayogenshabdasyakupitoanyaicchkopani ||<sup>9</sup>

According to Acharya Vāgbhatta, Rhinitis, Swimming, Itching in ear, and misuse of *shabda* are *samānyanidāna* of *karnaroga*. *Visheshnidāna* of *Bādhīrya* are not mentioned in *samhitās*.

Today due to faulty lifestyle & dietary habits, stress (*Prajnāparādha*), noise pollution, over use of headphone (*AsātmyēndriyārthaSamyōga*), variation in season and atmospheric changes (*Parināma*) the number of patients suffering from *Bādhīrya* (SNHL) is increased. SNHL occurs due to a number of factors like genetics, ageing, exposure to noise, some infections, birth complications, trauma to the ear, and certain medications or toxins. Now a days, the major factors of SNHL is noise pollution, over use of headphone i.e. “*mithyayogenshabdasya*” which ultimately leads to vitiation of *kevalaVātaDōṣa*.

## SAMPRĀPTI

Saevshabdanuvahayadasirakafanuyatovyanusrutyatishthati ||  
Tada  
narasyapratikarasevinobhavettubadhīryamashanshayamkhalu  
||<sup>10</sup>

Due to *Vātaprakopakanidānasevana*, Vitiation of *VātaDōṣa* obstruct the *strotasa* (*vividhamārgāvrutya*) and resides in *shabdānuvahāsira* and leads to *vātapradhānaBādhīrya*.

## PURVARUPA:

There is no specific *purvarupa* of *Bādhīrya* is mentioned in *samhitās*. But *ĀchāryasŚuśruta* and *Āchāryasvāgbhatta* have mentioned that if *karnanāda* is not treated properly, it leads to *Bādhīrya*.

Tada narasyapratikarasevino... ||<sup>11</sup>  
.....vayurnadovaasamupekshuitah ||<sup>12</sup>

Thus *karnanāda* can be considered as *purvarupa* of *VātaDōṣapradhānaBādhīrya*.

## RUPA:

The term “*Bādhīrya*” itself mentioned the *rupa* of the disease. According to *ĀchāryasŚuśruta*, *Bādhīrya* means impaired hearing and complete loss of hearing. But *Āchāryasvāgbhatta* have mentioned different the severity of *Bādhīrya*. That is “*ucchaihashruti*”, “*kruchhatshruti*” and *Bādhīrya*

Ucchaihakruchhatshrutikuryatabadhiratvamakramena cha ||<sup>13</sup>

The severity can be correlated with *ucchaihashruti*” means mild hearing loss, *kruchhatshruti* means moderate hearing loss, and *Bādhīrya* means severe to profound hearing loss.

## CĪKITSĀ

In modern medical science, hearing aids, implants and assistive devices are most common instrumental devices which are used in re-habitation of the impaired hearing. Hearing aid may not suit all persons because of the intolerable distortion of sound. Such type of many disadvantages of conventional hearing aids and many complications of cochlear implant surgery has been noted<sup>11</sup>.

In *Āyurved*, *Śuśruta* mention some common measures for all the diseases of ear.

Samanyamkarnarogeshughritapanamrasayanam |  
Avyayamoashirahsnanambrahmacharyamakathanam ||<sup>14</sup>

*ĀchāryasŚuśruta* has further described the common therapies for *karnashula*, *karnanāda*, *Bādhīrya* and *karnakshveda*. They are *swedana* (*nādisweda*, *pindasweda*), *snehavirechana*, *saghrithadhūpana*, *ghritapana*, *bastikarma*, *murdhataila*, *nasya*, *mastishka*, *parishhesana*, etc.

*ĀyurvedSiddhānta* make *Āyurved* unique & complete science than other. “*Cikitsāsūtra*” is the *Siddhānta* which gives new horizon to the treatment. Acharya *Śuśruta* has mention specific *cikitsāSiddhānta* as *cikitsāsūtra*

Vakshyate yah pratishyayevidhisoapyatrapoojitah ||<sup>15</sup>

Vatavyadhishuyashchyoktovidhisa cha hitobhaveta ||<sup>16</sup>

Here in *VātaDōṣapradhānaBādhīrya* (SNHL) the “*VātaVyādhivataCikitsā*” *Siddhānt* can be implemented. *Snehana*, *swedana*, *snehavirechana*, *basti*, *nasya* etc are mentioned in the management of *vātavyādhi*.

## SNEHANA

Naavanaistarpanaischannaihsusnigdhamswedayettatah ||<sup>17</sup>  
*Snehana* a can be administered in the form of *nāvananasya*, *tarpana-netartarpana*, *shirobasti*, *nāsātarpana*, and *karnapurana*, and along with *anna*.

## GHRITAPĀNA

Bhaktoparihitasarpi ||<sup>18</sup>  
*Ghrītpāna* is indicated as *sāmānyacikitsā* and *visheshacikitsā* of *Bādhīrya* which can be administered after meal

## SWEDANA

Nadiswedairupacharetpindaswedaistathaiva cha ||<sup>19</sup>  
*Swedana* can be administered in the form of *nādisweda* and *pindasweda* in *Bādhīrya* after *samyakaabhyang*.

## VIRECHANA

Mrudhibhihasnehasamtyuktairaushadhaistamvishodhayeta ||<sup>20</sup>  
*Srotobaddhvaanilamrundhyattasmattamanulomayeta* ||<sup>21</sup>  
*Mridu* and *snehayuktavirechan* is mentioned in the management of *vVātavyadhi*, Specifically in *āvratavāyu*.

## BASTI

According to “*Bastivātarānām*”<sup>iii</sup>, *Basti* may help to balance the vitiated *VātaDōṣa*.

*Bastikarma cha poojitama* ||<sup>22</sup>

*Āchāryas Śūsruta* has also amphecised more on *bastikarma* in the management of *Bādhīrya*.

## Conclusion

According to *Āyurvēd*, there are 2 type of *Bādhīrya*: (1) *kaphānubandhiVātaj* & (2) *shuddhaVātaj* which can be correlate with conductive hearing loss and sensory neural hearing loss accordingly. *shuddhaVātajBādhīrya* can be treated as per the *vātavādhyatcīkītsāsiddhant* in the management of *Bādhīrya*.

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