

Contribution of Manas in Prameha - A Conceptual Study

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ABSTRACT

The formation of Purusha is influenced significantly by three key factors: Sattva, Atma, and Shareera, with Sattva being equated to the concept of Manas or the mind. When we delve into the meaning of the term "Ayu" or life, it becomes evident that it is a composite of four essential elements: Shareera (body), Indriya (senses), Sattva (mind), and Atma (soul).

In a similar vein, when we explore the origin of a disease, we find that there is a reciprocal influence between the mind (Manas) and the body (Shareera), as they are interconnected. Once we establish this mutual relationship, we can better comprehend how diseases develop gradually over time.

"Shareera – Sattvaprabhavastu Rogah" conveys that diseases predominantly manifest in both the body and the mind. When the bond between the mind (*Manas*) and the body (*Shareera*) permanently separates from the soul (*Atma*), it results in a complete cure for ailments affecting both the physical and mental aspects. This perspective emphasizes that not only physical causes (*Shareerika Nidana*) but also mental factors (*Manasika Nidana*) play a significant role in the onset of a disease.

Prameha is one such *Vyadhi*(disorder) which is often associated with urinary and metabolic abnormalities. There are various *Nidana*(s) that are inter-related in the manifestation of the condition. Managing *Prameha* not only involves correction at the levels of the *Dosha*(s), change in lifestyle but also includes approach for the alteration in the psychological level. Here is an attempt made to understand that not only *Shareerika Nidana*, but there also is the influence of *Manasika Nidana* to develop *Prameha*. i.e., *Manas* also contributes for the development of *Prameha* in an individual.

KEYWORDS: Manas, Shareera, Nidana, Roga, Prameha.

INTRODUCTION:

Sattva, *Atma*, *Shareera* are the tripods of the living. The co-existence amongst them is very important in order to bring about balance within the body as the mere existence of these three factors is responsible for the formation of *Purusha*. Likewise, the composition of *Ayu* is by four major factors, *Shareera*, *Indriya*, *Sattva*, *Atma*. Amongst the *Tridanda* and components of *Ayu* both *Shareera* and *Manas* are being considered. Question arises regarding the relation between *Shareera* and *Manas*, answer is present right in the texts stating "Yes! there is a connection between the *Shareera* and *Manas*". Virtuous acts are said to be the cause of happiness, contrary to these are cause of sorrow. The diseases manifest in body and mind, thus in non-existence of these (body and mind) the diseases do not recur. The relationship of

Shareera & Manas is not limited to the processes of evolution and dissolution, rather it extends from health to disease and from disease to death as well. That is why there is mentioning of “*Shareera – Sattvaprabhavastu Rogah*” and the interrelationship of *Shareera & Manas* during diseased condition reveals the Psychosomatic approach of *Ayurveda*.^[1]

The connection between *Manas* (mind) and *Shareera* (body) becomes evident during pregnancy. In the fourth month of gestation, the fetus's heart, considered the dwelling place of *Manas*, begins to develop. Consequently, the fetus communicates its desires through its mother's heart, known as “*Dauhridaya*,” and it is believed that these wishes should be honored to avoid potential harm to the fetus,^[2] is one of the examples being stated in order to understand the earliest connection between *Manas* and *Shareera*.

When we come across the *vyadhi bheda* part, *Trividha vyadhi bheda* has been explained. The diseases that occur due to the involvement of *Sharirika* as well as *Manasika* doshas are considered as *Adhyatmika Vyadhi*. That is, disease manifesting in the level of Body and Mind are referred to as *Adhyatmika vyadhi*. Psychosomatic diseases can be understood under this category.^[3] Once the *utpatti* of *vyadhi* has occurred, it has to have *adhishtana* of its own. *Sharira* and *Manas* are two different seats for the *adhishtana* of *vyadhi*. The body and the mind have a separate set of etiopathological agents and hence all the diseases are categorized in two basic groups namely; *Shareerika vyadhi* and *Manasika vyadhi* i.e., Somatic and Psychological respectively.^[4] The *adhishtana* of *vyadhi* being either *Manasika* or *Sharirika*, along with the chronicity of their existence of eventually have an impact on each other. The long standing (chronic) of any disease let it be a somatic disease or a psychological disease, chronicity plays an important role. The concept of *parasparam-anuvartamaanam* of *Kaama adi* and *Jwara adi* needs to be understood. Where *Kaama adi* is *Kama Krodha Lobha Moha* and other *Manasika vikaras* and *Jwara Adi* are *Jwara, Atisara, Shosha, Meha*, etc. *Shareeraanaam – Shareerena, Shareeraanaam – Manasena, Manasaanaam – Manasena, Manasaanaam – Shareerena* are the four permutation and combination of diseases having impact on both *Manas* as well as *Shareera*. It is to know and understand regarding how much the *Shareerika Nidana* contribute to the formation of any disease, likewise *Manasika Nidana* also has an equal contribution for the formation of the disease^[5].

For *Shareerika dosha* as well as *Manasika dosha* to vitiate^[6], 3 reasons have been explained. Namely,

1. Misuse of senses (*Asatmendriyarthasamyoga*):

Asatmaya means “improper,” *indriya* means “sense organs,” *artha* is “the objects of the senses” and *samyoga* means “to combine” or “to link.”

- *Asatmendriyarthasamyoga* refers to improper contact of the senses with their objects, and results in an over stimulation or deficiency of sensory activity.
- This harms the body as well as the mind, which requires moderation and harmony internally and externally for healthy functioning.

2. Misuse of intellect (*prajnaparadha*):

Prajna means “wisdom” or “intelligence”, and *aparadha* means “offence”. The literal meaning of *prajnaparadha* is “an offence against wisdom.”

- That is, doing things without discriminating as to whether it is favorable or harmful for the body or mind. These actions may be verbal, mental or physical.
- The actions generated by *prajnaparadha* aggravate the *tridosha* and stimulate the *rajas* and *tamas gunas*, allowing diseases to become established.
- Excessive/*atiyoga* forms of this include talking too much, or excessive thinking, reading, mental work or physical activity.

- A deficiency (*hina-yoga*) of these actions is not undertaking these activities sufficiently, like not speaking at all or very little, and not working or engaging in any intellectual or physical activity.
 - Incorrect (*mithya yoga*) forms include gossip, lying, inciting violence and irrelevant, illogical or harsh speech. Actions that are motivated by greed, anger, material attachment, envy, ego, fear, grief or delusion also are *mithya-yoga*.
 - The physical form of this includes the suppression of natural urges or performing unnatural activity such as smoking cigarettes, driving recklessly or participating in dangerous sports.
3. Seasonal variations (*parinama* or *kala*), the external environment can trigger disease by unbalancing the body through unnatural or extreme variations in temperature, rainfall or wind.
- Excessive or *atiyoga* of *parinama* is extraordinary or unexpected climatic conditions, such as excessive heat in summer or cold in winter.
 - Deficient/*hina-yoga*: seasonal conditions include very mild temperature variations are not experienced.
 - Incorrect/*mithya-yoga* *parinama* occurs when conditions are opposite to the normal season, such as being cold in summer or warm in winter.
 - *Parinama* or *kala* also refers more generally to the effects of time, and natural physical transformation that occur over time. For example, seasonal influences on the dosas, and the disorders associated with specific phases of life and aging are all in this category.

As the *karma* of *manas* is '*karma manasaha swasya nigraha*'^[7], because of which there is *vekshana* of *hita* & *ahita*, when *Manas* gets afflicted due to imbalance in *Raja* and *Tama dosha*, further there will be dysfunction in *mano karma* leading to *bhramsha* of *buddhi*, there will be indulgence of *Viruddha ahara-vihara*, as the individual loses the ability to differentiate between what is *hita* and *ahita* as there is loss of *nigraha* (control) over self, leading to the *dushti* of *Shareerika dosha* and *dhatu*. Thus, *utpatti* of *vyadhi* occurs, which is observed to be manifested in the *Shareera*.

When we come to the context of *Prameha*, *Meha* is mentioned. One can understand the impact of *Manasika* factors in the *utpatti* of *Prameha*.

Enlisting the *Nidana* for *Prameha*, there are both *Shareerika* as well as *Manasika nidana* mentioned. While we observe, the *nidana* begins with *Manasika nidana* namely *Aasya sukham*, *Swapna sukham*, we may understand the importance of *Manasika bhavas* given here.^[8] *Mrija-vyayama varjanam*, *Swapna-shayana-aasana prasangaha*^[9], *Divaswapna*, *Avyayama*, *Alasya prasaktam*^[10]. There is also mentioning of *Sandharana* of *Vegas*^[11], *Eka sthana aasana ratihi*, *Shayanam vidhi varjitham*^[12]. The afore mentioned *nidana*, starting from irregular sleep patterns habituated by the individuals to avoiding oneself from performing physical activities (regular chores, exercise, etc) has been given abundant concern there by understanding the impact all these activities on human body. All the above mentioned *nidana* have their own way on having an impact on the *Tridosha(s)* present in the *purusha*. While categorizing the *nidana(s)* of *Prameha*, we come across *Prajnaparadha janya nidana*, individual knowingly favors *Aasya sukham*, *Swapna sukham*, *Mrija-vyayama varjanam*, *Alasyam* and opts for consuming *Vishama Ahara*, are few of the *Prameha Nidana* which have been categorized under the heading of *prajnaparadha janya*. Individuals in whom *Mano Vibhrama* takes place, lose the ability to differentiate between what is *hita* / *ahita* for oneself. Because of the *sevana* of *Ahita ahara*, *Viruddha ahara*, there is vitiation of the *Manasika doshas* further causing *vridhhi* of *Tamo guna* leading to loss of control over oneself further indulging in *Avyayama*, *alasya*, *ati matra sevana*, which are presented by the individual. Amongst *Manasika vikaras* mentioned; *Shrama-Krodha*^[13], *Shoka-Udvega*^[14] are given importance as they play a major role in

inducing the alteration of the levels, i.e., vitiating the *Manasika doshas* as well as *Shareerika doshas*. One can understand it as these *Manasika bhavas* vitiate the *mano doshas Rajas* and *Tamas* as well as have the impact on *Shareerika doshas*.

On the other hand, we can even understand the types of individuals who are prone to develop *Prameha*, i.e., predisposing factor individual(s) possesses in order to develop a disease. *Rajasa prakruti* individuals have *Dukkha bahulatha*, *Kaama*, *Krodha* present as their innate mental characteristics. Such individuals under stressful conditions trigger the above emotions further leading to vitiation of the *manasika doshas* and thus hampering *shareerika doshas* as well. Similarly, *Tamasa prakruti* individuals possess qualities like *Vishaditvam*, *ajyaanam*, *akarma sheelata*, *nidralutvam* thereby raising the chances of an individual to develop a *vyadhi*.^[15]

An attempt has been made to tabulate (below) in order to comprehend the characteristic features of *Mano vikaras* which when persistent contribute for the manifestation of the *vyadhi*, *Prameha*.

Mano vikaras and their symptoms which contribute in manifestation of Prameha

काम	भोग इच्छा
क्रोध	कोप
मोह	अज्ञान
शोक	दैन्य, उद्वेग
भय	विषाद
विषाद	वाक् काय चित्त अवसाद
उन्माद	उद्वेग

In the above-mentioned table, *Mano vikaras* and their *lakshana* which contribute for the *Nidana* i.e., manifestation of *Prameha* has been mentioned. Further interpretation of the same being stated below.

1. **Kama:** *Rajo guna bahulyaat*, *Bhoga iccha*, here *iccha* can also be understood as *iccha* for *sevana* of *viruddha ahara*, *vishamashana*, *iccha* to sit back, rest all the while, to sleep, which can be understood by the commentary mentioned “*sweshu visheshu indriyanam anukulyataha pravritta*”. There is loss of control over one(s) desire, therefore not thinking much about their own health but moving forward by indulging in the above-mentioned *Nidana*.
2. **Krodha:** *Rajasa guna*, which further leads to the vitiation of *Pitta (shareerika dosha)*.
3. **Moha:** *Manaso vaichityam* is the *lakshana*, *karyakaarana anabhignyatvam*. *Vichara shakti* of an individual is hampered. Because of which *avyayama* and *vishama asana* is adapted by the individual in-turn which are *ahita*.
4. **Shoka:** *Dukkha* is the *manobhava*, there will not be any interest developed in the individual. No ideation to indulge in activities which help him/her maintain health (physical and mental).
5. **Bhaya** - *Bhayam vishadena*, leads to *parama traasa*, hampering the ideas to initiate something for oneself in the first place, leading to *vyayama varjanam*, etc.
6. **Vishada** - Deprive in the functioning of the individual, let it be to talk, perform any activity or any form of productive thinking, developing the behavior of ignorance towards maintaining one(s) health.

7. **Unmada:** Having *udvega* as one of the *lakshana*, in which the individual loses the ability to understand the difference between *Hita-Ahita*.

The impact of *Manas* does not limit itself to *shareerika doshas* but also have impact on the *dhatu*s. Amongst the *dasha dushya* of *Prameha*, that is, *meda*, *mamsa*, *shareeraja kleda*, *shukra*, *rakta*, *vasa*, *majja*, *lasika*, *rasa* and *ojas*. *Udaka vaha srotas* and *Rasa vaha srotas*, amongst the *dushya* (of *Prameha*), get afflicted by the *manas* thereby leading to *vyadhi*. Out of few factors, *manasika* factors that are mentioned as *nidana* for *sroto dushti* are, *Bhaya* for *Udaka vaha srotas* ^[16] and *Chintyanaam cha ati chintanaath* for *Rasa vaha srotas*.^[17]

In *Agroushadhi*, ^[18]“*Vishado rogavardhanaanaam*” is mentioned, where *Vishada* has *Shoka* as one of its *lakshana*, *Udvega* (*Saada*, *bhaya*, *sheegra kopa*, *anga shoola*) are already mentioned thereby understanding *manasika* factors having an impact on precipitation of the disease as well as occurrence of the disease.

For understanding the role of *Manasika Nidana* having an impact over *Shareera*, conventional science has the hypothesis by stating working principles of the “HPA-Axis” (Hypothalamic-Pituitary-Adrenal Axis). When we examine the role of the mind and its disturbances through the lens of conventional science, we can observe that certain psychiatric disorders can lead to specific behaviors in individuals. These behaviors can contribute to the adoption of unhealthy lifestyles, ultimately increasing the individual's susceptibility to developing certain metabolic disorders. These metabolic disorders have an impact on the endocrine system. The individual loss their interest in maintaining their daily routine, let go of giving priority to their health- both mental and physical health. Due to the signs and symptoms developed by the suffering of their primary disease, the individuals develop secondary diseases in the form of diabetes mellitus, etc.

Psychiatric Disorders and their Symptoms

Schizophrenia	Poor diet, Faulty lifestyle, Decreased functioning in work/social environment, Posturing.
Depressive mood disorder	Pervasive sadness, Decreased energy and easy fatigability.
Anxious Personality Disorder	Avoidance of activities, Persistent feeling of tension, Restriction in lifestyle.
Sleep disorders	Excessive day time sleepiness, unusual sleep phases.
Eating disorders	Binge eating, Starvation.
Psychogenic vomiting	Self-induced vomiting, suppression of the urge to vomit.

DISCUSSION:

When we keenly observe the above tabulated information, we come across the similarities mentioned as the “*Nidana for Prameha*”. The observed information is not coincidental, mental health was given equal importance for the proper functioning of the individual which can be further co-related and understood. Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively, and can contribute to his or her community. Mental

health is an integral part of health; indeed, there is no health without mental health. Mental health is determined by a range of socioeconomic, biological and environmental factors. It leads to psychological well-being and is an integral part of good quality of life. Wherein we can understand, while there is role of Mind in maintenance of well-being of an individual, it plays a vital role in occurrence of disease as well. “*Sama dosha, sama agni, sama dhatu mala kriya* along with *Prasanna atma-indriya-mana* fulfilling all these criteria, then the *purusha* who is formed of the *satva-atma-sharira* is said to be *Swasthya*.^[19]”

CONCLUSION:

While we come across the definition of health by WHO, “Health is a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity”

Certainly, the development of somatic diseases, particularly Diabetes mellitus, can be influenced by various psychological factors. It is important to note that psychological factors do not act in isolation. They often interact with environmental and lifestyle factors in developing of various disorders. Recognizing and addressing these psychological factors through therapy, lifestyle modification, stress management, etc can be an integral part of preventing and managing development of conditions such as *Prameha*.

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