



Exploring the Stages of Prameha (Urinary Disorder): An Ayurveda Perspective on Disease Evolution

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ABSTRACT

Background: Ayurveda, the ancient Indian system of medicine, offers a comprehensive and holistic framework for disease prevention and management. One of its core principles, Shatkriyakala (Six stages of treatments), outlines six progressive stages of disease development— Sanchaya (stage of accumulation), Prakopa (stage of Dosha Aggravation), Prasara (stage of spreading), Sthansamshrya (stage of settlement of Dosha in a specific site), Vyaktavastha (stage of disease manifestation) and Bhedavastha (stage of complication). These stages provide critical windows for early diagnosis and timely intervention, thereby preventing disease progression and associated complications. This article examines Prameha, a complex metabolic disorder with primary involvement of the urinary system and systemic implications, through the lens of Shatkriyakala. Objectives: To explore the stage-wise assessment of Prameha with the help of Shatkriyakala. Methods: A qualitative textual review was conducted using classical Ayurveda texts such as Charaka Samhita, Sushruta Samhita and Ashtanga Hridaya. Each stage of Shatkriyakala- Sanchaya, Prakopa, Prasara, Sthansamshrya, Vyaktavastha and Bhedavastha was analyzed in terms of Dosha involvement and progression of Prameha. Results: The Shatkriyakala framework mirrors the continuum of metabolic deterioration in Prameha. Early stages reflect subclinical Dosha (body humor) imbalances, while later stages demonstrate organ involvement and complications. This mapping allows for tailored Ayurveda interventions ranging from lifestyle and dietary modifications in early stages to detoxification and rejuvenation in advanced stages. Conclusion: The application of Shatkriyakala in Prameha highlights Ayurveda's strength in early diagnosis and personalized treatment. Recognizing and addressing Prameha at each stage can not only prevent disease progression but also facilitate effective management.

INTRODUCTION

Ayurveda is a traditional system of medicine that employs a holistic approach to disease management. Acharya

Sushruta has given various concepts regarding management of disease among these one is the concept of Shatkriyakala (six stage disease progression).^[1] Acharya

Sushruta gave this concept for stage-wise management of various diseases. The six stages are -*Sanchaya*, *Prakopa*, *Prasara*, *Sthansamshrya*, *Vyaktavastha* and *Bhedavastha*. Out of these first three stages are related to *Dosha* imbalance and the last three stages are related to disease development.^[2]

According to this principle, disease progresses through six stages, each offering a chance for early, minimal intervention. As it advances, complexity and severity increase. Early recognition allows Ayurveda to prevent complications and support well-being more effectively.

Prameha is a metabolic disorder that is mainly a disease of *Mutravahi srotas* (urinary system disease) but symptomatically it includes whole body.^[3] Early detection and treatment of this disease can decrease the prevalence of *Prameha* in population. *Shatkriyakala* helps in the early diagnosis and stage wise treatment of *Prameha*. This article manifests the symptomatic changes that occur in six stages of *Prameha*.

AIM AND OBJECTIVES

To explore the stage-wise assessment of *Prameha* with the help of *Shatkriyakala*.

METHODOLOGY OF REVIEW

A qualitative textual review was conducted using classical Ayurveda texts such as *Charaka Samhita*, *Sushruta Samhita* and *Ashtanga Hridaya* and indexed journals. Each stage of *Shatkriyakala* was analyzed in terms of *Dosha* involvement and progression of *Prameha*.

RESULTS AND REVIEW OF SHATKRIYĀKĀLA IN THE LENS OF PRAMEHA

1. Samanya Lakshana of Prameha-

Prameha is characterized by *Bahu* (excessive) and *Avila* (turbid) urination.^[4] This group of disorders is largely correlated with various metabolic and urinary disorders one of which is diabetes mellitus. It primarily involves the impairment of *Kapha Dosha*, along with disturbances in *Pitta* and *Vata Dosha*, affecting *Medo Dhatu* (fat metabolism) and other bodily tissues.^[5]

2. Types of Prameha

Among the various classifications of *Prameha*, two significant types are: *Sahaja Prameha* (Congenital or Hereditary) and *Janmottarakalaja Prameha* (Acquired).^[6] *Sahaja Prameha* (congenital) is present from birth and is primarily genetic in nature. It is believed to result from parental factors and imbalances in the reproductive elements (*Beeja Dosha*).^[7] The six stages of disease progression are not applied in this type of *Prameha* because for *Shatkriyakala*, *Dushya Samurchana*

(interaction of *Dosha* with body tissues) should be there. The other type which is *Janmottarakalaja Prameha* (acquired) develops due to lifestyle factors, diet, and environmental influences. It is correlated to type 2 diabetes mellitus.

3. Samprapti of Prameha

The accumulation of *Dosha* begins in the body due to the consumption of *Guru* (heavy), *Snigdha* (unctuous), *Madhura* (sweet), and *Kapha*-aggravating foods, combined with sedentary habits, obesity, and lack of exercise.^[8] If these causative factors (*Nidana*) persist, the *Dosha* progress through all the stages of *Shatkriyakala*, eventually leading to the manifestation of *Prameha*. However, if this pathological process is interrupted at any stage, the disease may be prevented from fully developing in the body.

These six stages and their symptomatic representation (*Janmottarakalaja Prameha*) can be understood as follows-

Sanchaya Avastha (stage of accumulation)-

The initial stage in the disease manifestation of *Shatkriyakala* is known as *Sanchaya Avastha* which is manifested by accumulation of *Dosha* in a cohesive form at their respective places of origin only.^[9] This stage begins with exposure to specific *Nidana*, including dietary [Table no. 1] and lifestyle factors that promote *Dosha* imbalance. In the context of *Prameha*—a metabolic disorder, this stage is initiated by the consumption of foods and adoption of habits that aggravate *Dosha* mainly dominated by *Kapha*.

Table no. 1: Dietary triggers of Prameha^[10] -

Newly harvested grains (e.g., <i>Hayanaka</i> , <i>Yavaka</i> (Hordeum vulgare Linn.))	Pulses such as <i>Harenu</i> (<i>Pisum sativum</i> Linn.) and <i>Masha</i> (<i>Phaseolus radiatus</i> Linn.)	The meat of domesticated, marshy, or aquatic animals	<i>Krushra</i> (a gruel made of sesame, rice, and black gram), and thick gruels (<i>Vilepi</i>)
Milk-based puddings (<i>Payasa</i>), <i>Guru</i> (Heavy food) and <i>Snigdha</i> (<i>Ahara</i> (Oily food))	Sugarcane preparations and sugar-rich foods.	High-fat and protein-rich meals such as sesame (<i>Tila</i> , <i>Sesamum indicum</i> Linn.) oil	Excessive intake of water (<i>Atipana</i>)

Note- only excessive intake of all the above dietary triggers can lead to development of *Prameha*

These are compounded by *Kapha*-aggravating lifestyle habits, including physical inactivity, excessive sleep, prolonged bed rest, and sedentary routines.^[11] This combination results in the accumulation of *Kapha* at one or more of its main places like *Ura* (chest), *Kañṭha* (throat), *Sira* (Head), *Kloma* (pancreas, trachea), *Parvaṇi* (small

joints of body, mainly fingers and toes), *Amashya* (stomach), *Rasa* (Digestive juices, lymph, plasma), *Meda* (fat), *Ghrana* (Nose), *Jihva* (tongue) etc.^[12] Clinically this stage can be identified where the individual develops an aversion to the etiological factors (*Nidana*) that contribute to the *Dosha* increase and likes the opposite qualities.^[13] For example- in condition of increased *Kapha* in body there is aversion towards cold foods similarly person starts to like hot foods.

This stage is generally asymptomatic but may present with initial symptoms of *Kapha Sanchaya* (accumulation)^[14] and *Kapha Vriddhi* (aggravation)^[15] such as laziness and heaviness [Table no. 2].

Table no. 2: Symptoms of *Kapha Sanchaya*^{[14][15]}

<i>Kapha Sanchaya</i>	<i>Kapha Vriddhi</i>
Excessive sleep	White colour of body
Cough	Heaviness in body
Breathlessness	Laziness
Flaccidity in muscles	Salivation in mouth
Coldness in the body	Loss of digestive fire
Laziness	Heaviness in body

This aggravated *Kapha* similarly makes pathogenesis of obesity in the body in which increased *Kapha* enhances *Meda Dhatu*. As *Meda* continues to accumulate, the *Srotas* (body's channels) become obstructed, especially affecting the normal circulation of *Vata Dosha*. This restricted *Vata* movement is predominantly confined to the *Koṣṭha* (abdominal viscera), leading to excessive stimulation of *Agni* (digestive power) and increased food intake due to increased appetite, which again causes weight gain. This accumulation of excessive *Meda Dhatu* (fat tissue), while depleting other *Dhatu*, leads to metabolic imbalances.^[16]

If this stage is left untreated and a person continuously indulges in *Nidana* consumption, it leads to further progression of disease that is *Prakopa Avastha*.

In context of diabetes this stage can be understood as accumulation of fat cells and adipose tissues.^[17] When energy intake is more than required quantity, it is stored as fat and glycogen in subcutaneous adipose tissue (SAT) and organs.^[18] Here in this stage, there is only accumulation of fat cells in the body that are the primary risk factor for developing diabetes. If a person continues to intake more calories than they expend as energy, then this condition leads to its further stage that is metabolic and laboratory changes.

Prakopa Avastha (stage of Dosha aggravation)

The second stage of disease progression in *Shatkriyakala* is known as *Prakopa*, characterized by the continued

accumulation and liquefaction of *Dosha* at their specific sites in the body. In this stage, the *Doshas* exhibit an inherent tendency to leave their original locations, a phenomenon referred to as *Unmarga-gamita* (upward movement) by *Vagbhata*.^[19] This stage can be likened to the overflow of a heated liquid, where the *Dosha* transition from a stable state to an agitated, liquefied form, indicating increased activity and potential for spread within the body.

Drawing a parallel, in the earlier *Chaya Avastha* (stage of accumulation), *Doshas* are solidified, (thick and solidified ghee).^[20] As the disease progresses to the *Prakopa* stage, these *Dosha* liquefy, resembling melted ghee. When the liquefied ghee is subjected to further heat, it goes to froth and overflow, symbolizing the subsequent *Prasara* stage.^[20] *Prakopa* stage can be further classified in two types that is depicted in the flow chart.^[21] [Fig. no. 1]

The *Prakopa* stage signifies a critical turning point in disease progression, where *Dosha* become aggravated, dynamic, and prone to movement, setting the stage for further pathological spread if unchecked.

In *Prameha*, the continued intake of *Nidanas* (causative factors) following the *Sanchaya* of *Dosha* can accelerate the *Prakopa* (agitation) of *Dosha* dominated by *Kapha*, which is already elevated in the body. *Kapha Prakopa* occurs particularly in the form of its fluid component.^[22] Similarly other *Dosha Prakopa* also occurs due to exposure to specific causative factors.

This heightened *Dosha* begins to spread beyond its original site and becomes predisposed to vitiate other organs of the body.

Although *Prameha* is a *Tridoshaja Vyadhi* (disease involving all three *Dosha*), especially excessive liquid state of *Kapha* is mainly vitiated in this disease.^[23] Similarly, when *Kapha* agitates in its fluid state that helps in the excessive formation of *Meda Dhatu* in the body. *Meda Dhatu* is formed with the action of *Medo-dhatvagni* (digestive fire for the metabolism of *Meda*) on the excessively dominant *Snigdha* attribute of *Ambu* (fluid). *Meda Dhatu* generally stands for fatty tissue, however, it is to be noted that it is of two types: *Baddha* (bound, stable, fixed, and stored) and *Abaddha* (free, unbound). The *Baddha* form, therefore, must include the stored fat in the form of adipose tissue; and the *Abaddha* form must include the circulating lipids (cholesterol, LDL, HDL etc.). In *Prameha* pathogenesis mainly *Abaddha Meda* starts to increase in body. At the end of this stage, the person becomes more obese due to the liquid form of *Kapha* and its similar *Dushya*.^[24] *Abaddha Meda* starts to accumulate in various places of *Kapha* and the symptoms of *Kapha*, *Vata* and *Pitta Prakopa* starts to appear in the body. [Table no. 3] This stage marks the turning point where simple

accumulation begins to pose a threat to systemic balance.

Table no. 3: Symptoms of Dosha Prakopa

Symptoms of <i>Kapha Prakopa</i> [23]	Symptoms of <i>Vata Prakopa</i> [24]	Symptoms of <i>Pitta Prakopa</i> [25]
● aversion of food ● nausea, heaviness in chest or heart region	● Pain in stomach ● Movement of Vata in stomach	● Sour/acidic belching ● Thirst ● Burning sensation in whole body
Other symptoms of <i>Kapha Prakopa</i> [26]	Other symptoms of <i>Vata Prakopa</i> [27]	Other symptoms of <i>Pitta Prakopa</i> [28], [29]
● excessive fat ● hardness ● itching ● coldness in the body parts ● feeling of heaviness in the body ● stiffness in body ● coating over body or body parts ● swelling in body ● indigestion ● excessive sleep ● whitish discoloration ● slowly do the work	● Emaciation ● Black discoloration ● Desire for hot things ● Tremors ● Bloating ● Constipation ● Loss of strength ● Loss of sleep ● Loss of sensory functions ● Irrelevant speech ● Delusion and dizziness	● Burning sensation ● Reddish discoloration of body ● Increased heat in the body ● Suppuration, inflammation ● Increased sweating ● Excessive moistness ● Excessive discharges ● Gangrene ● Dysfunction ● Fainting ● Feel of pungent and sour taste in mouth ● Yellowish discoloration of stools, urine, skin and eyes ● Feeling of excessive hunger ● Polydipsia ● Insomnia ● Burning sensation

In diabetes mellitus, regular intake of high-calorie food leads to increased adipocytes in the body which further decrease glucose uptake in peripheral tissues by the release of free fatty acids.^[32] In this stage excessive eating typically leads to fat deposition first in the abdominal area, specifically around the internal organs (visceral fat) and under the skin in the midsection (subcutaneous fat). If continued this fat accumulation process starts to appear on ectopic area also.^[33]

Prasara Avastha (stage of spreading)

In the third stage of *Kriya Kala*, known as *Prasara*, the liquefied *Dosha* begin to migrate within the body, spreading from the head to feet.^[34] Among the *Dosha*, only *Vata* possesses the unique ability to facilitate movement

and transfer locations. In contrast, *Pitta*, *Kapha*, *Rasadi Sapta Dhātu* (seven bodily tissues), and *Mala* (waste products) primarily exhibit an increase in quantity rather than mobility.^[35] This emphasizes the critical role of *Vata* in driving the spread of *Dosha*. At this stage, controlling and regulating *Vata Dosha* is essential to prevent further progression. When *Dosha* migrate from their original sites, they may overflow into new areas, either independently or in combination with other *Dosha* (15 types of combination).^[36] This overflow results in three distinct patterns of movement, referred to as *Gati*.^[37]

❖ *Urdhva Gati* (Upward Movement): The *Dosha* ascend to the upper part of body and affect them.

❖ *Adho Gati* (Downward Movement): The *Dosha* move to the lower part of the body and affects them.

❖ *Tiryaka Gati* (Horizontal or Transverse Movement): The *Dosha* spread laterally, contributing to the development of related disorders.

In *Prameha*, the previously elevated *Kapha Dosha* causes the muscles to become flaccid, (because increased *Kapha* is directly related with the flaccid muscles as said by the *Acharya Vagbhaṭa*.^[38]) facilitating the easy spread of *Kapha* throughout the body during *Prasara Avastha*. *Kapha Dosha* moves through the body independently or in combination, seeking its respective *Duṣya* (susceptible tissues) to vitiate and further contribute to the pathogenesis of the disease.^[39] In *Prameha*, there is mainly *Adhogati* of *Dosha*, which leads to vitiation in *Basti* (urinary bladder) and *Mutravahi Srotas* (urinary system). Clinically this stage is identified as below.^[40] [Fig. no. 2]–

Further in this stage ectopic fat deposition starts to accumulate that is abnormal accumulation of triglycerides in tissues other than adipose tissue (fat storage). This can occur in organs like the liver, pancreas, skeletal muscle, cells, and heart, which normally have very little fat. This ectopic fat accumulation can interfere with these tissues functions and is linked to insulin resistance.^[41]

Sthanasamshrya (stage of settlement of Dosha in a specific site)

The fourth stage of *Kriyakala* is known as *Sthanasamshrya*, where the imbalanced or migrated *Dosha* localize in specific regions of the body. This process occurs when the *Dosha* settle in areas with pre-existing weaknesses, referred to as *Srotovaiṇya* (dysfunction of channels), where tissue depletion or abnormalities have occurred. Additionally, certain weak or defective sites, termed *Khavaigunya*, are predisposed to *Dosha* localization due to structural or functional irregularities in the tissues.^[42]

Localization of *Dosha* is influenced by potent causative factors (*Nidana*) and specific vulnerabilities in tissues.

[Figure no. 3] When dispersing *Dosha* accumulate in these weakened sites, it results in *Sthansamshrya*, marking the early stage of disease formation. Diseases arise when *Dosha* interact with and disturb specific tissues, which may include *Rasa*, *Rakta*, *Mamsa*, *Meda*, *Ashti*, *Majja*, and *Shukra*. The combination of potent causative factors and disturbances in *Srotas* form the basis for *Dosha* settlement and disease manifestation.

In *Prameha* after the *Prasara Avastha*, increased *Kapha* and other *Dosha* start to spread in the body and during this spread they seek their related *Duṣya* (10 *Duṣya* are *Bahu Abaddha Meda* (excessive unbound fat), *Mamsa*(muscle), *Sharira Kleda* (body fluids), *Shukra* (semen), *Shonita* (blood), *Vasa* (fat or adipose tissues), *Majja* (bone marrow), *Lasika* (lymphatic fluids), *Rasa* (plasma or lymph), *Ojas* (vital energy)) and vitiate these *Duṣya*.^[43] Due to the similar property *Kapha* first vitiates the whole *Abaddha Meda* previously present in the body. After this already increased *Mamsa* and *Kleda* get mixed and vitiated with the *Kapha*.^[44] In this stage *Purvarupa* of *Prameha* starts to appear in the body [Figure no. 4].^{[45], [46], [47]}

Further in this stage due to continued accumulation of fats and insulin resistance pre-diabetic symptoms start to appear in the body. Pre-diabetes is a precursor before the diagnosis of diabetes mellitus. Adults with pre-diabetes often may show no signs or symptoms of diabetes but will have blood sugar levels higher than normal (110 mg/dL to - 125 mg/dL), but not high enough to be classified as diabetes. In the minority of patients who do experience symptoms like- Increased appetite, unexplained weight loss/weight gain, high BMI, weakness, fatigue,

sweating, blurred vision, slow healing cuts or bruises, recurrent skin infections/gum bleeding.^[48]

Vyaktavastha (stage of manifestation of disease)

The Manifestation Stage, also known as *Rupa Avastha*, occurs when untreated causative factors from the *Sthansamshrya* stage persist, leading to the full development of disease. At this stage, the characteristic symptoms of a specific disease become evident, making diagnosis possible based on observable signs.^[49]

FACTORS INFLUENCING DISEASE MANIFESTATION

The nature of the aggravated *Dosha* (*Vata*, *Pitta* or *Kapha*) determines the type and characteristics of the disease.

The degree of mixing or combination of *Dosha* influences disease variations, even if the primary *Dosha* imbalance remains the same.

The disease manifestation depends on the interaction between the imbalanced *Dosha* and specific tissues (*Duṣhya*).

In *Prameha* after the *Samskryavastha* the vitiated *Dosha* then change *Mamsa* and *Meda* to *Mutra* and also obstruct the whole *Mutravahi Srotas* with *Meda* and *Kleda* (fluid). *Mutravahi Srotas* mainly gets affected in this disease.^[50] The *Prameha* is manifested in the form of symptoms only when all these vitiated *Dosha* with Vitiating *Kleda*, *Mamsa* and *Meda* reach to *Basti Pradesha* (urinary system).^[51] The cardinal features of this disease like polyuria and turbid urination starts to appear in the body.

Manifestation of *Prameha* also depends on the vitiation of *Dosha* and termed according to that *Dosha* like *Vataja* / *Pittaja* / *Kaphaja Prameha*. *Prameha* manifestation also depends on the *Anshansha* Vitiating of *Dosha* then further it appears as 20 types of *Prameha* in the body.^[52]

In this stage insulin resistance persists and becomes more severe, leading to a further decline in the pancreas's ability to produce insulin. The body cannot effectively use the insulin that is produced, resulting in chronically high blood sugar. Classic symptoms of type 2 diabetes include increased thirst and hunger, frequent urination, unexplained weight loss, fatigue, blurred vision, slow-healing sores, and increased infections. Numbness or tingling in the hands and feet, and frequent skin or yeast infections can also be present.^[53]

Bhedavastha (stage of complication)

The sixth and the terminal stage of the disease progression is termed as *Bhedavastha*. At this stage, *Dhatu Kshaya* starts as *Prameha* is recognized as a *Santarpanjanya Vikara*,^[54] meaning it arises from excessive nourishment and overindulgence. *Acharya Sushruta* explains that when the body becomes overly nourished, it leads to *Avaraṇa*, which gradually causes *Dhatu-Kshaya* and eventually manifests as *Vatavyadhi*.^[55] This clearly shows that degenerative changes are closely linked to the progression of *Prameha*. In *Prameha*, degeneration occurs due to the progressive depletion and dysfunction of multiple *Dhatu*. The main *Dushya* involved include *Rasa*, *Rakta*, *Mamsa*, *Meda*, *Majja*, *Shukra*, *Vasa*, *Lasika*, *Kleda*, and *Ojas*.^[56] In the initial stages, *Prameha* is primarily *Kapha*-dominant. If left untreated, it progresses to *Pittaja Prameha*. Long-standing *Prameha*, with persistent *Kapha* and *Pitta* aggravation, eventually leads to *Vata* vitiation. At this advanced stage, *Dhatu* such as *Vasa* and *Majja* begin to be excreted, indicating significant *Dhatu-Kshaya* and the degenerative nature of the disease. *Dhatukshaya* depends on the type and severity of *Prameha*. In the most severe form all *Prameha* changes to *Madhumeha*. At this stage, the aggravated *Doshas* vitiate *Mamsa* and *Rakta*, leading to *Shotha* (swelling) and other complications.^[57] Symptoms related to disease at this stage become chronic. Without timely intervention and appropriate treatment, the

condition can advance to an untreatable state and affecting many organs and highlighting the chronic nature of the disease.

Complications associated with *Prameha* are thirst, diarrhea, fever, burning sensation, weakness, anorexia, and indigestion. *Prameha Pidika* (Carbuncles) that putrify muscle tissues, like *Alaji* and *Vidradhi* (skin disorders), appear during the chronic stage of the disease.^[58]

High sugar levels in blood over a long period of time can seriously damage blood vessels. If blood vessels are not working properly, blood cannot travel to the parts of the body it needs to and leads to various complications. Complications from diabetes can be classified as micro-vascular or macro-vascular. Micro-vascular complications include nervous system damage (neuropathy), renal system damage (nephropathy) and eye damage (retinopathy). Macro-vascular complications include cardiovascular disease, stroke, and peripheral vascular disease. Peripheral vascular disease may lead to bruises or injuries that do not heal, gangrene, and, ultimately, amputation.^[59]

Importance of understanding *Shatkriyakala*: -

● Opportunities for Early Detection of Disease -

The *Dosha* which gets accumulated and disturbed in the first stage (*Sanchaya Avastha*), do not get immediately progress to further pathological stages. If *Dosha* are controlled in the accumulation stage, they will not move to the further stage of disease progression. However, if they are not managed at an early stage and progress to advanced stages, they become stronger and more difficult to treat.^[60] In the early stages, the disease is less complicated and can be effectively managed with dietary modifications and minimal medication. As stated by *Acharya Dalhana*, when the *Dosha* accumulation is mild (*Alpa Dosha*), it can be treated through *Shamana* (palliative treatment). In cases of moderate *Dosha* aggravation, *Langhana* (lightening therapy) and *Pachana* (digestive therapy) are recommended. However, when the *Doshas* are highly aggravated, *Shodhana* (purification therapy) becomes necessary for effective management.^[61]

Stage-Specific Approaches to Disease Management-

The initial two stages of disease progression are primarily associated with *Nidana Sevana* (continuous intake of causative factors), leading to *Dosha Sanchaya* and *Prakopa*. If an individual controls the intake of *Nidana* and adopts *Ahara* and *Vihara* with properties opposite to the aggravated *Dosha*, further accumulation of *Dosha* can be prevented.

In the third stage, *Vata*, along with *Pitta* and *Kapha*, spreads throughout the body, manifesting symptoms of

Dosha Prakopa. At this stage, controlling *Vata* can help to stop the spread of *Dosha*.

During the *Purvarupa Avastha*, where *Dosha-Dushya Samurchana* occurs, *Acharya Sushruta* recommends *Aptarpana* (starvation), *Vanaspoti Kashaya* (herbal decoction), and goat urine for management.^[62] In the *Rupa Avastha*, where symptoms become evident, *Samshodhana* (detoxification) therapies like *Vamana* (therapeutic emesis) and *Virechana* (therapeutic purgation) should be administered. In the final stage, where complications arise, all the aforementioned treatments should be implemented alongside *Shastra Kriya* (surgical procedures) and *Vrana Chikitsa* (wound therapy).

DISCUSSION

Prameha develops gradually, moving through a series of interconnected stages that depict how early lifestyle choices can eventually lead to a fully developed disease. These stages also provide the opportunity to detect and halt the disease early when the disease is not that complicated. The progression of *Prameha* through the six stages of *Shatkriyakala* highlights the dynamic interaction between *Dosha*, *Dushya*, and various pathological processes. Initially, in *Sanchaya Avastha*, due to the persistent intake of *Kapha*-aggravating food and lifestyle factors, *Kapha* begins to accumulate at its natural sites, leading to early signs like heaviness and lethargy.^[14] If unchecked, this progresses to *Prakopa Avastha*, where *Kapha* liquefies and becomes more mobile, allowing for the early metabolic imbalances like increased appetite and fat accumulation.^[23] As the disease advances into *Prasara Avastha*, the *Dosha*, primarily *Kapha*, begin to overflow and spread throughout the body with the assistance of *Vata*,^[36] leading to a systemic impact on metabolism. Once the *Dosha* reach susceptible tissues with pre-existing weaknesses, they localize in specific sites during *Sthansamshrya Avastha*, particularly targeting *Meda* (fat), *Mamsa* (muscle), and *Kleda* (body fluids), resulting in the disruption of normal tissue functions.^[43] Premonitory symptoms (*Purvarupa*) start to appear in this stage. This localization further leads to *Vyaktavastha*, where the characteristic symptoms of *Prameha* manifest, including polyuria, excessive thirst, and metabolic disturbances, depending on the predominant *Dosha*.^[49] involvement. If the disease remains untreated, it reaches *Bhedavastha* where severe tissue degeneration (*Dhatukshaya*) occurs, leading to chronic complications such as *Madhumeha*.^[57] (Diabetes Mellitus), neuropathy, nephropathy, and ulcerative conditions. Understanding this stage-wise evolution of *Prameha* through *Shatkriyakala* provides a structured approach for early diagnosis, prevention, and targeted treatment strategies to halt disease progression and mitigate long-term

complications.

CONCLUSION

The application of *Shatkriyakala* in understanding *Prameha* provides a structured approach to understand disease progression, highlighting critical intervention points and chances to treat the disease in its early stages through lifestyle modifications (*Pathya-Apathya*), dietary regulation, and herbal formulations.

SCOPE OF FURTHER STUDY

This review of the six stages of disease progression (*Shatkriyakala*) in relation to *Prameha* can be practically applied in clinical settings through case studies. *Prameha* can be correlated with metabolic diseases, especially diabetes mellitus, by mapping Ayurveda stages to clinical markers such as blood glucose levels, insulin resistance, lipid profiles, and inflammatory parameters.

This form of *Prakopa* occurs following the *Chaya Avastha*, where the *Dosha* transition from a relatively stable state to an agitated and liquefied state. Example: for the preparation of *idli* batter Black gram flour, when soaked overnight, remains stable in its original form. By the next morning, fermentation causes the batter to rise and overflow, demonstrating the shift from a stable state (*Chaya Avastha*) to an agitated state (*Prakopa Avastha*).

This form of *Prakopa* occurs without a prior phase of stability or accumulation (*Chaya*). Example: in boiling milk If the heat is suddenly increased, the milk begins to froth and boil over immediately, signifying an abrupt transition to the agitated state without a preceding stable phase. Conversely, if the heat is controlled or reduced, the milk remains calm, preventing overflow. This reflects the absence of a stable intermediate phase before agitation.

Figure 1. Classification of Prakopa of Prameha

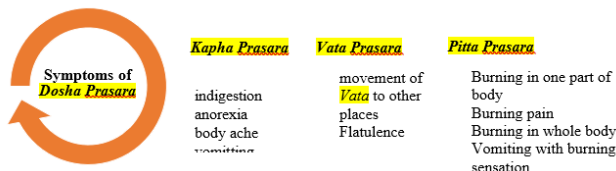


Figure 2. Symptoms of Dosha Prasara

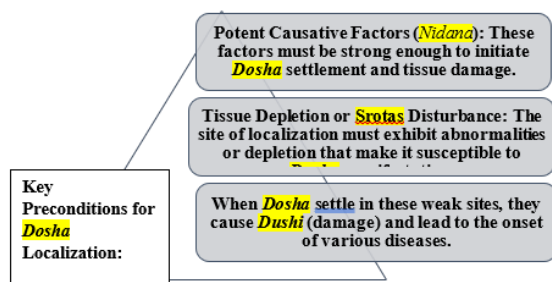


Figure 3. Key preconditions for Dosha localization

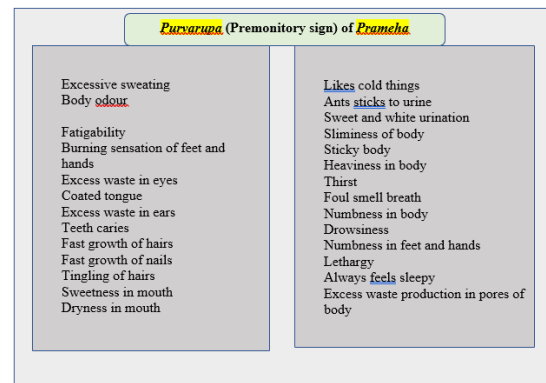


Figure 4. Purvarupa of Prameha

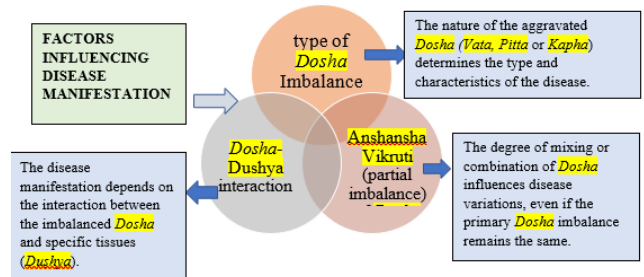


Figure 5. Factors influencing disease manifestation

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