



Clinical Spectrum of *Udavartha* in the Limelight of *Vega* and *Vegarodha*—A Narrative Review

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ABSTRACT:

Udavartha is a *vatarog*, predominantly produced by *vegarodha*, the incidence of which is increasing as a part of the fast and sedentary lifestyle. The primary site of *udavartha* is *Koshta* because of a multifactorial convergence of *doshakopa* towards the highly susceptible *apanavata*. Understanding the physiology of *vegas* help a lot to have an insight over the pathology in *udavartha*. *Vegas*, which can be categorized as either programmed or as a result of some irritation / deficit, are sophisticated functions of 'vata system' of the body to maintain the homeostasis. *Vegarodha* brings about a disturbance in this homeostasis, which is progressed to the disease *udavartha*. There are various conditions, which contradict as well as coincide with the pathology of *udavartha*. These conditions have to be either ruled out or confirmed to be present, before we diagnose or start to treat *udavartha*. As *udavartha* is a multidimensional and multifactorial disease, the management of *udavartha* also demands this kind of depth and variety. *Vatanulomana*, being the primary objective, the treatment of *udavartha* differs to a great extent, according to its type and severity. The treatment of *udavartha* is significant right from its *chayavastha* and is being expanded to a 'broad spectrum *udavartha* therapy' as it reaches the *bhedavastha*. Beyond Ayurveda, the omnipotent *vata* can be controlled and synchronized using pranayama and other Yogic techniques. Thus, the concepts and treatment modalities of Ayurveda; when complemented with a Yogic base and updated to the needs of modern society, can render better results.

Keywords: *Udavartha*, *Vega*, *Vegarodha*, *Koshta*, Physiology, Homeostasis

INTRODUCTION

Health and disease are the obverse and reverse of the same coin. Health can be changed to a disease at any time by means of an error committed by an individual or his surroundings, deliberately or not. It can be as fast as of milliseconds or as slow as to take decades to complete the change. The reversal of disease to health can also happen in two ways - as a natural phenomenon or by external forces. It can also be a fast

or slow process. Each and every disease affecting human body, follow any of the course mentioned above. Still, there are some diseases, which by virtue of their versatility, follow a wide range of course and prognosis. Such a disease is *udavartha* mentioned in Ayurvedic classics.

Generally speaking, *udavartha* is a disease of obstructed or vitiated *vata* which is concentrated around *koshta*. Even though a lot of diseases are



originated as a result of this kind of pathology, *udavartta* has uniqueness right from its causative factors to its management principles. Of the *Brihatrayis*, only *Susruta* has described *udavartta* in a separate chapter¹. But, it is the same as that told in various situations by the other two. Also, *udavartta* has been mentioned as a *lakshana* or *upadrava* or *nidana* in many conditions².

So, to be precise, the diagnosis of *udavartta* has to be made when the peculiar *nidanapanchakas* have been fulfilled. Even though *udavartta* seems to be a disease of *koshta*, the *nidanapanchakas* are not restricted to *koshta*³. Still, the *samprapthi* is related to or sometimes eventually reach upto the *koshta*. Hence, in a broader perspective, a spectrum of diseases comes under the umbrella of diagnosis of *udavartta*, all of which fulfil the *nidanapanchaka* criteria⁴.

Vega - blessing or curse?

Vegas are spontaneous reactions of human body from within. They are so designed that to control them voluntarily is possible, but not without its side effects. The side effects mentioned here are so appalling as to advise not to suppress these spontaneous reactions, except when it is a purely psychological drive⁵. Also, it is possible voluntarily initiate these reactions. But it will produce the same quantum of side effects as mentioned for the suppression of *vegas*. There is a protective and self-regulatory mechanism operating behind each *vega*. Also, there are good and bad effects of *vegas* and they can be traced out in the clinical presentation and patient history of *udavartta*.

Vega is a blessing in a sense that it will be started without the conscious involvement, so that essential life activities go on uninterrupted. Also, there is a facility to control them when needed. The second good effect can sometimes become a bad effect, since it will produce serious side effects when controlled. So, it is a subject to debate, whether the option to have a control over the self-regulatory *vega* is a blessing or not?

Generally speaking, *vegas* can be divided into two categories - *sareerika* and *manasika*. The *manasikavegas*, in contrast to the *sareerikavegas* are to be suppressed always. They don't have a physical or physiological base to influence in the development of *udavartta*. But they, when not controlled, can be causative factors for several other diseases. The quantum of effect of uncontrolled *manasikavegas* are

beyond that of controlled *sareerikavegas* as to trouble the individual's *sareera*, *manas* and *atma*⁶. Generally, only *sareerikavegas* are referred to by using the term '*vega*'. Still, *manas* has a role to play in *udavartta*.

Of the *sareerikavegas*, some can be set according to the biological clock or the '*dinacharya-ritucharya* protocol' in the words of ancient *Acharyas*. The other type of *vegas* like *vata*, *asru*, *kshava* etc., are originated by some irritation that will increase the *vata* to produce *vega*. So, these two types of *vegas*, when traced upto their origin, open up new mechanisms to have a control before they are initiated rather than to suppress the originated *vega*.

The quantum of effect of *vegarodha* is not the same for all the *vegas*. Some *vegas* when suppressed will produce immediate effects. While some others will produce effects only after being suppressed over a period of time. The degree of importance of each *vegarodha* in the development of *udavartta* can be understood by considering the type of *vata* involved, accessibility to the *koshta*, as well as how vulnerable these are in the current lifestyle. *Vegarodhas* and their symptomatology is represented in Table 1.

The Vata Kingdom

Vata is responsible for all the kinetic energy derived in our body. It is the universal agent of movement⁷. *Doshas* are never perceptible in normal circumstances. But the *malaroopas* of the other two *doshas* can be understood as some of the waste products². Since these waste products are perceptible, the status of the other two *doshas* can be ascertained objectively from them. *Vata* differs from the other two *doshas* in this respect also. The *sookshma* nature of *vata* is maintained in its *malaroopas* also, making it difficult to have an objective analysis.

All the clinical methods employed to assess the functioning of *vata* are developed by the application of *anumana pramana* upon the various qualities of *vata*, particularly the *chalaguna*. Eg:- assessment of degree of movement, pain on movement, radiation of pain etc⁴. Apart from the movement aided by some external force, in all types of movement taking place inside our body, there is involvement of *vata*. This is applicable in micro and macro level. Here, we can view many micro movements when combined together, producing a macro movement. This is the same thing happening, but in an opposite direction, when a lot of minute obstacles combine together to produce a big obstacle

enough to produce a disease like *udavartta*.

To explore *vata*, the variants being *prana*, *udana*, *vyana*, *samana* and *apana* are distributed from head to toe. *Prana* is the controller *vata* and it is situated in the head, being propelled upto the chest. The *sthana* of *udana* is chest and it is propelled upto the nose and again downward upto the *nabhi*. The *vyanavata* circulates all over the body, being centered in the heart. The *samana* is situated near to *jataragni* and works in tandem with it. The *apana* is situated in the lower abdomen and it facilitates all the *karmas* related to the adjacent structures like *pakwasaya*, *vasti*, *guda*, *nabhi* etc⁷.

Prana has been told as the supreme form of *vata* and even it is being equated with life itself. But, contradictory to this statement, *pakwasaya* has been told as the main *sthana* of *vata*. How does this contradiction arise? Since *prana* deals with the most precious life activities, it is very well protected inside the strong shell of *kapha*. In other words, the *pranavata* is placed in a strong *kaphasthana* to avoid the provocation of *vata* leading to the deterioration of life processes. Thus the supreme form of *vata* controlling all the life activities from a *kaphasthana* acts as the natural protective mechanism against *vatakopa*.

This is not the case with *apana*. *Apana* is situated in *vatasthana*. i.e., lower portion of the body. There is no protective mechanism here and hence it is more prone to get provoked. Also, based upon a *doshik* polarity (*kapha* in the upper and *vata* in the lower portion of the body) as well as being propelled by the *samana-pachakapitta* unit situated in the *madhyakaya*, each and every minute provocations in all the five types of *vata* tend to move towards this lower portion. Hence, their meeting point viz., *pakwasaya* is being highlighted as the main *vatasthana*⁸. To be precise, even though *prana* is the controller of all the forms of *vata* from a physiological point of view; *apana* and its *sthana* should be given priority on a pathophysiological background. i.e., most of the time, when we want to alleviate *vata*, we have to start from the *apana* rather than from the *prana*.

Koshta* - The Reservoir of *Apanavaigunya

Of the 13 *vegas* mentioned as the *nidana* of *udavartta*, all are not directly related with *apana* or *pakwasaya*.^{1,2,5} The *vegarodha* of *vata*, *vit*, *mootra* etc, are *sannikrishtanidanas*. While the *vegarodha* of *kshut*,

trishna, *nidra* etc, are *viprakrishtanidanas*. Again, on the mechanism of these *viprakrishtanidanas* causing *udavartta*, Dalhana postulates the role played by *koshta* in taking the effect of *vipra krishta vegarodha* upto *apana*¹.

The omnipotent *vyana* circulates in all directions. Except for *vyana* and for some functions of *udana*, all the other movements facilitated by *vata* are in the downward direction. The reason is so simple as to be explained as the system demands it. This direction of flow of *vata* has been called as the *anulomagati* of *vata*. Rather, this *gati* is a programmed one. The opposite movement is possible in two ways only; either by the action of a *vega* or when induced voluntarily. The *vegas* like *kshavathu*, *vamana*, *udgara* are such *pratilomagativegas*. Whereas; *vit*, *mootra*, *sukra* etc, are *anulomagati vegas*. Some functions of *udana* such as *vakpravritti*, which demands *pratiloma* action of *vata* are facilitated by the second mechanism. viz, with voluntary effort.

Thus, there is a resultant flow of *vata* which is demanded by the body itself for its smooth functioning. *Gati* is of very much importance in the diagnosis and management of many diseases⁹. The *vegas* are also included in this resultant flow. That means, when a *pratilomagati* of *vata* is present as a *vega*, say *udgara*, the system demands this movement to expel some air or so. At this time, when the resultant movement is forcefully changed by *vegarodha*, the intention for the *vega* will be converted as *vatakopa* and will start working against the equilibrium. To worsen the situation, all these happen inside the *koshta*.

Koshta is a common platform for all the *vata* types. All the forms of *vata* have accessibility towards it. So, however small may be the *vatakopa* resulted by the *vegarodha*, it will be transmitted directly to *koshta*. Some remote *vegarodhas* such as *udgara*, will produce *pranavatakopa* first. Then it will be transmitted to *koshta* since the resultant flow of *pranavata* is towards the *koshta*. In this manner, all the resultant *vatakopa* of *vegarodhas* will be accumulated in *pakwasaya* to produce *apanavaigunya*.

Dalhana also postulates the role played by *kashaya-katu-tikta* and *rookshaaahara* present in *koshta* in synergizing and transmitting the *vatakopa* already produced. Altogether, *koshta* is being highlighted as the platform for *dosha-dooshya sammoorchana* in the case of *udavartta*. Still, the seriousness and prognosis

of the condition is determined by considering all the factors involved right from the type, frequency and extend of *vegarodha* committed upto the extend of pathology occurred in the *koshta*¹.

DISCUSSION

Every science, however perfect it may be, has to be updated with the current scenario, to get good results from them. This updating increases the accessibility and acceptability of that science. The life pattern of mankind has changed drastically from the period of *Samhitas*. But the basic needs which were expressed as *vegas* such as *kshut*, *trit*, *nidra* etc, have not been changed, even though the manner in which these things are being approached has been changed. Concisely, the life is the same; but the life pattern has been changed.

Vegas being the same, the incidence of *vegarodha* may have shifted from one *vega* to another. So, the focus has to be changed from previously predominant *vegarodha* to the presently predominant one. Unfortunately, the introduction of sedentary and fast lifestyle has made the focus towards the *vegarodhas* involving *apanavata*, which are more dangerous. Also, the huge amount of stress and strain precipitated in the modern lifestyle, when combined with the fastness of life, disrupts the biological rhythm, thus disabling the individuals to set their *vegas* according to the biological clock. i.e., the mechanism to control *vegas* by setting them as per the biological rhythm fails here. This is the same in the other type of *vegas* viz, those initiated as a result of some irritation or so. The introduction of junk foods and increasing pollution levels add to the frequency of *vegas*, which are ought to be suppressed owing to the fastness of life and prevailing social concerns.

The incidence of *udavartta* is increasing among the office staff and the executive workers who are on a tight schedule. Being in a sitting posture over a long period of time accounts for *apanavaigunya* directly. This, when combined with *vegarodha* creates a perfect platform for *udavartta*. As already mentioned, *udavartta* resulting from direct *apanavaigunya* in *koshta* is of high magnitude and density. The absence of exercise and lack of concern over the bowel habits are the other factors, which act as precipitating factors for *udavartta* among the office workers.

The stress and strain, which are the part and parcel of

the modern fast life, bring about a lot of vitiation in *prana*, which are transmitted with the waves of *vegarodha* to create *apanavaigunya* and *udavartta* among the executive class and businessmen. *Vegarodha* of *nidra* is a commonly occurring initiative towards the development of *udavartta* among these categories of people. Here, we can observe the leads from the mind operating behind the pathology of *udavartta*, even though *nidra* is not a *manasikavega*. Coming back to the all-important *koshta*, the use of fast-food creates a lot of burden on the *samana-agni* coherent unit as well as on the *apana*. The fast-food is a cocktail of *viruddhaaharas* and it is very difficult to digest and even more difficult to eliminate. In the case of modern man, who has a lot of stress and strain, the use of fast-food is an act which clears the pathway for the already vitiated *vata* to reach upto *koshta* and to create *udavartta*.

CONCLUSION

Udavartta is not a single condition. It is a group of conditions, where the pathology is that of a vitiated *vata* fraction and the symptoms produced are on the lines of *pratilomagati vata* or are the after effects of a *dushti* already occurred. So, all the conditions, where there is the unique pathology of *udavartta*, have to be considered as *udavartta*, even if it is a complication of another disease or it is manifested as a *netraroga* or *siroroga* or so. *Udavartta* can affect any part of the body, where *vata* is present and it may progress to an *apanavaigunya* in the *koshta*. But, at the point of intervention, the condition need not be an *apanavaigunya*. For example, when a patient presents with tremor (*kampa*), we have to suspect *udavartta* if the causative *vegarodha* or *apathya bhojana* is present. These need to be explained in a broader perspective incorporating the differential knowledge and diagnosis of *aavarana*, *srotorodha* and several other conditions are important, which contradicts and coincides with the *samprapthi* of *udavartta* at various points.

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Table 1 – *Vegarodha* symptomatology in Samhithas

Type of <i>vegarodha</i>	Lakshanas by <i>vagbhata</i> ²	Addl. Lakshanas by <i>Susruta</i> ¹	Addl. Lakshanas by <i>Charaka</i> ⁵
<i>Vata</i>	<i>Gulma</i> <i>Udavartta</i> <i>Ruk</i> <i>Klama</i> <i>Vata-mootra-sakrit-sanga</i> <i>Agnivadha</i> <i>Drishtivadha</i> <i>Hridroga</i>	<i>Adhmana</i> <i>Hridayoparodha</i> <i>Sirorujam</i> <i>Swasa</i> <i>Kasa</i> <i>Hikka</i> <i>Pratisyaya</i> <i>Galagraha</i> <i>Kaphapittaprasara</i> <i>Mukhena vitpravritti</i>	<i>Adhmana</i> <i>Vatarogas in jatara</i>
<i>Vit</i>	<i>Pindeekodweshtana</i> <i>Pratisyaya</i> <i>Siroruk</i> <i>Oordwavayu</i> <i>Parikartana</i> <i>Hridayoparodha</i> <i>Mukhenavitpravritti</i> <i>Vatavegarodhalakshanas</i>	<i>Aatopa</i>	<i>Pakwasayasoola</i> <i>Vatavarchonirodhana</i> <i>Adhmana</i>
<i>Mootra</i>	<i>Angabhanga</i> <i>Asmari</i> <i>Vastimedravamkshana-vedana</i> <i>Vatavitvegarodhalakshanas</i>	<i>Gudamushkanabhi-vedana</i> <i>Vastisopha</i>	<i>Mootrakrichra</i> <i>Siroruk</i> <i>Vinamanam</i> <i>Vamkshanaanaha</i>
<i>Sukra</i>	<i>Suklaskhalana</i> <i>Angabhanga</i> <i>Vridhhi</i> <i>Guhyavedana</i> <i>Asmari</i> <i>Shandatha</i> <i>Swayathu</i> <i>Jwara</i> <i>Hridvyatha</i> <i>Mootrasanga</i>	-	<i>Medravrishanasoola</i> <i>Angamarda</i>
<i>Nidra</i>	<i>Moha</i> <i>Moordhaakshigaurava</i> <i>Alasya</i> <i>Atijimbha</i> <i>Angamarda</i>	<i>Akshijadya</i>	<i>Tandra</i> <i>Siroroga</i>
<i>Kshut</i>	<i>Angabhanga</i> <i>Aruchi</i> <i>Glan</i> <i>Karsyam</i> <i>Soola</i> <i>Bhrama</i>	<i>Tandra</i> <i>Drishtaekrisatha</i>	<i>Daurbalya</i> <i>Sareeravaivarnya</i> <i>Angamarda</i>
<i>Trit</i>	<i>Sosham</i> <i>Angasada</i> <i>Badhira</i> <i>Sammoha</i> <i>Bhrama</i> <i>Hridgada</i>	<i>Kantasyasosha</i>	<i>Srama</i> <i>Swasa</i>
<i>Asru</i>	<i>Peenasa</i>	<i>Sirogurutwa</i>	<i>Pratisyaya</i>

	<i>Sirasoola</i> <i>Hridayasoola</i> <i>Akshisoola</i> <i>Manyasthambha</i> <i>Aruchi</i> <i>Bhrama</i> <i>Gulma</i>		<i>Akshiroga</i> <i>Hidroga</i>
<i>Jrimbha</i>	<i>Siroruk</i> <i>Indriyadourbalya</i> <i>Manyasthambha</i> <i>Ardita</i>	<i>Galasthambha</i> <i>Siroroga</i> <i>Srotraroga</i> <i>Netraroga</i> <i>Nasaroga</i>	<i>Vinama</i> <i>Akshepa</i> <i>Sankocha</i> <i>Supti</i> <i>Kampa</i>
<i>Chardi</i>	<i>Visarpa, kota, koshta</i> <i>Akshikandu</i> <i>Pandu</i> <i>Jwara</i> <i>Kasa</i> <i>Swasa</i> <i>Hrillasa</i> <i>Vyanga</i> <i>Swayathu</i>	<i>Kushtaroga</i> corresponding to the <i>dushti</i> of vomitus	-
<i>Kshavathu</i>	<i>Siroruk</i> <i>Indriyadourbalya</i> <i>Manyasthambha</i> <i>Ardita</i>	<i>Siroroga</i> <i>Srotraroga</i> <i>Netraroga</i> <i>Nasaroga</i> <i>Kantaroga</i> <i>Kanta-asyatoda</i> <i>Swasarodha</i>	<i>Ardhavabhedaka</i>
<i>Udgara</i>	<i>Aruchi</i> <i>Kampa</i> <i>Hridayavibandha</i> <i>Urovibandha</i> <i>Adhmana</i> <i>Kasa</i> <i>Hidhma</i>	Severe <i>vatarogas</i>	-
<i>Swasa</i>	<i>Gulma</i> <i>Hidroga</i> <i>Sammoha</i>	-	-
<i>Kasa</i>	<i>Kasavridhi</i> <i>Swas</i> <i>Aruchi</i> <i>Hridamaya</i> <i>Sosham</i> <i>Hidhma</i>	<i>Vega</i> not mentioned	<i>Vega</i> not mentioned