



## THE HIDDEN GEMS OF *CHARAK SAMHITA INDRIYA STHAN*

SHAMBHU KUMAR SUMAN<sup>\*1</sup> KAVITA KANYAL<sup>2</sup> PALLAVI BHARTI<sup>3</sup> PUSHPA PRIYADARSHANI<sup>4</sup> VIJAY SHANKAR PANDEY<sup>5</sup>

<sup>\*1,2,3,4</sup> PG Scholar, <sup>5</sup>Professor and Head, Department of Ayurved Samhita and Siddhant, Govt. Ayurvedic College and hospital Patna, Bihar, India.

Corresponding Author Email: [dr.suman0012@gmail.com](mailto:dr.suman0012@gmail.com) Access this article online: [www.jahm.co.in](http://www.jahm.co.in)

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Submitted on- 30-11-23

Revised on- 05-12-23

Accepted on-11-12-23

### ABSTRACT:

Among *Bruhatrayee*, only *Charak Samhita* quoted a separate section (*Indriya sthan*) about the remaining life span of a person. To understand this concept of life and its determination it is framed in 12 chapters, which is explained elaborately and based mainly on four evidences i.e., *Aptopdesha*, *Pratyaksha*, *Anuman* and *Yukti Praman*. There are special instructions for physician while going to treat the patient. The treatment will not be fruitful if the patient doesn't have a remaining good life span and hence it spoils the name, fame, reputation and wealth of the physician. That is why *Indriya Sthan* is quoted before *Chikitsa Sthan*. The similar instructions quoted by *Acharya Sushrut* in *Sutra Sthan* and *Acharya Vagbhat* in *Shareer Sthan* which is also before *Chikitsa Sthan*. Most of the group of signs and symptoms which are mentioned collectively termed as *Arishta/Rishta Lakshan* i.e., bad signs. A few of good signs also mentioned in *Charak Samhita* for good life span of a person. Thoroughly clinical examination and related biomarkers quoted in *Samhita* which indicates the terminal illness can be used in ICU for the betterment of medical science.

**Key words:** *Bruhatrayee*, *Indriya Sthan*, *Praman*, *Arishta lakshan*.

## INTRODUCTION:

*Charak Samhita Indriya Sthan* deals with the importance of pre knowledge for prediction of death. *Acharyas* collected specific signs and symptoms for the person who is near to death and termed them as *Arishta or Rishta Lakshan* (Ominous sign) <sup>[1]</sup>. The term *Indriyam* means *Prana- Lingam* (sign and symptom of life) <sup>[2]</sup>. Although death is fixed for every human being, only a well experienced physician is able to predict it. Its assumption is not only for diseased people but also for healthy ones <sup>[3]</sup>.

## AIMS AND OBJECTIVES:

1.To be aware of the physician for wrong interpretation of diagnosis and mis justification for the remaining good life span of the patient.

2.To be aware of society to save time, money and unnecessary physical as well as mental exhaustion.

## MATERIALS AND METHOD:

Team works on *Indriya Sthan* by five members of *Samhita* and *Siddhant* department G.A.C.H. Patna for the project of “Departmental seminar with scientific study, writing and publication”.

## Literature review:

The term *Arishta* is quoted in most of the treatise, only *Charak Samhita* explains “*Indriya Sthan*” elaborately in a separate section, which

is framed in 12 chapters and 378 verses. Similarly, *Sushrut Sutra* and *Astanga Hrudaya Shareer Sthan* explained all aspects of *Rishta*. *Madhav Nidan*, *Bhavprakash* and *Yogaradhnakar* quoted the term *Arishta* only.

## Prakruti:

The complete and proper knowledge of anatomy, physiology and behaviors of human beings is collectively known as *Prakruti*. *Acharya Charak* says *Prakruti* of everyone is not same, it varies according to the six factors, i.e.-

1. **Jaati prasakta-** it is an occupation-based category of the society.
2. **Kula prasakta-** it is based on the heredity or race of a person.
3. **Deshanupaatini-** categorized on the basis of the habitat of a person.
4. **Kaalanupaatini-** it includes time period, such as *Yuga, Ayan, Aadan- Visarga Kala*, seasonal, diurnal, different stages of life etc.
5. **Vayo-anupaatini-** it is based on the strength of different age groups.
6. **Pratyatmaniyata-** it is based on personal habits or nature <sup>[4]</sup>.

## Vikruti:

The pathology and prognosis of a disease is collectively called *Vikruti*. *Acharyas* explained various *Vikruti* in the context of *Arishta*. These are mainly three types-

1. **Lakshana Nimitta**- it is based on the specific signs and symptoms of the body which appear due to *Purva Janma Kruta Karma* or *Daivajanya*.

2. **Lakshya Nimitta**- it appears due to various specific causes mentioned in *Nidan Sthan*.

3. **Nimitta Anurupa**- it developed without any known cause within a particular time period. It is of two types-

(I) **Niyat Vikruti**- when death is fixed. It further classified into two-

(a) **Nimittarthanukarini**- it doesn't cause the disease but is responsible for determining the remaining life span by previous disease.

(b) **Animitaam**- it doesn't affect immediately but its impact appears within a time period [5].

(II) **Aniyat Arishta**: Patient suddenly gets free from the disease is considered doubtful, either the patient will be cured or die. In such conditions various nutritious and tasty foods are advised with *Mamsa Rasa* for a month. If there is no such improvement, it is fatal [6].

#### Chapter 1- Varna (Rupa) and Swara (Shabda)-

Characteristics of Complexion of body parts as well as sound of patient and surroundings other than natural are accounted for. Acharya Charak has listed 47 factors to be

**Table No. 1. Arishta related conditions** [13]:

<i>Uchchhwasa</i>	Too long or too short breath.
<i>Manya</i>	No flutter ( <i>Spandan</i> ) in <i>Manya Nadi</i> .
<i>Danta</i>	Discoloured and coated teeth.

examined for the *Arishta* determination [7]. Which is grouped into two-

1. **Purushashrit**- The signs and symptoms pertain to the patient. It is determined by *Pratyaksha* and *Anuman Praman* with the assessment of *Prakruti* and *Vikruti*.

2. **Purushanashrit**- Signs and symptoms other than the patient. It is determined by *Aptopdesh* and *Yukti Praman* [8].

#### Chapter 2- Puspitakam (Gandha and Rasa)-

After proper efforts of management, continuous good or bad smell coming out from the body is *Arishta*. It is fatal within a year [9].

The natural *rasa* formed in the body becomes abnormal. So, either parasites or flies attracted or repelled the body at the last stage of life. This is assumed by *Anumana* [10].

#### Chapter 3- Parimarshaneeyam (Sparsha)-

Assumption of *Arishta Lakshan* by *Sparsha* which appears suddenly. This concept of examination is one among the *Trividh* (*Darshan, Sparshan & Prashna*) examination. It is *Pratyaksha Anubhuti* only. Factors listed are- *Satata Spandanam, Nityoshmanam, Shlakshanam, Sheeteebhavah* etc [11].

*Paad, Jangha, Uroo* etc., 29 body parts mentioned to be examined by *Sparsha* [12].

<i>Chakshu</i>	Anatomical or physiological abnormalities appear suddenly without any known cause.
<i>Kesha</i> and <i>Loma</i>	No pain on extraction of hairs.
<i>Udara</i>	Colourful extorted arteries on the abdomen.
<i>Nakha</i>	Ripen <i>jamboo</i> /blue coloured muscle or blood less nail.
<i>Anguli</i>	No stretching sound from finger.

**Chapter 4- Indriyaneekam (Indriya Samooha)**  
/Indriya Adhishtan-

The concept of this section is that *Indriyarth* becomes *Vikruta* however, *Indriya* or *Indriya Adhishtan* is *Prakruta*.

**Table No. 2. Arishta related to Indriya and Indriyarth<sup>[14]</sup>:**

<i>Chakshu</i> and <i>Drushti</i>	Objects appear just opposite to its nature i.e.; Patient can see invisibles and is unable to see the visible.
<i>Karna</i> and <i>Shabda</i>	Patient listens to the sound which is not present and vice-a-versa. Unable to hear the sound of fire by closing both of ears with fingers.
<i>Ghran</i> and <i>Gandha</i>	Patient feels the opposite smell or no smell at all.
<i>Jihwa</i> and <i>Rasa</i>	The patient who is unable to know the proper taste of different <i>rasa</i> however he is free from <i>Mukha Paka</i> .
<i>Twacha</i> and <i>Sparsha</i>	The one who feels the opposite tactile sensation i.e., hot appears cold, dry appears unctuous etc.
<i>Indriya Shakti</i>	Knowledge of extraordinary senses without <i>tapa</i> and <i>yoga</i> . Massive abnormalities of <i>Indriyarth</i> by a silly <i>Prajnapradh</i> .

**Chapter 5- Poorvaroopeeyam (prodromal signs & symptoms)-**

This concept is also applicable for all other diseases [15].

*Acharya* says all or most of the *Purvaroope* explained in the context of *Jwar* *Nidan* if they appear in the patient, it is fatal.

**Table No. 3. Arishta related to Poorvaroope<sup>[16]</sup>:**

<i>Rajyakshma</i>	When <i>pratishyaya</i> get aggravated in emaciated <i>yakshma</i> patient and he indulged in
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	sexual activities
<i>Rakta Pitta</i>	Sky appears like red cloth just near to the person who will catch it with <i>rakta pitta</i> and die with the same.
<i>Gulma</i>	Emaciated person having pain in the abdomen with gurgling sound, discoloured nails, eyes, faeces and urine if got the <i>Gulma</i> will die with the same.
<i>Kushta</i>	The person getting a severe wound by simple touch of any object and it becomes worse will die with <i>Kushta</i> .
<i>Prameha</i>	Flies attract to the person even after proper bath and perfumes.
<i>Unmad</i>	Deeply concentrated (absorbs), unnecessary fearful or anger, unnatural grief, restlessness, loss of strength, aversion towards food, urticaria, funny face, fainting and excessive thirst.
<i>Apasmar</i>	The person sees darkness even in daylight, hears various sounds even in the silence zone.
<i>Bahirayam</i>	Stiff jaws, carotid arteries ( <i>Manya naadi</i> ) and eyes just after getting up from the bed.

**Arishta related to Swapna:** This context is explained very elaborately by different *Acharyas* but its applicability is not so clear and hence, not explained here.

**Chapter 6- Katamani Shareereeyam** (signs & symptoms of *Arishta*)-

Explained to detect the diseased body where management fails and must be refused [17].

**Achikitsya Atur:**

- Severe upper chest pain during talk; vomiting, indigestion, strength losses quickly, unquenched thirst and cardiac pain.

- After a toil it is found that all the *Tridosha* get aggravated in a very weak person.
- The emaciated anaemic person with dry mouth, frequent thirst, stiff eyes and painful breathing.
- A very weak person with a stiff neck and chin, pulsation present only in the heart region.
- A restless weak person with darkness in front of eyes and not getting any kind of relief.
- The critical disease grows very fast with *Virudhayoni* (*Vata-Pitta* or *Pitta-Kapha* type) [18].

**Arishta related to-**

- **Hikka-** *Gambhir Hikka* with excessive bleeding.
- **Anah and Atisar-** In emaciated patients with any disease.
- **Jwara and Kasa-** Fever and cough in emaciated patients before noon.
- **Mootra-purisha-** Thick glandular stool and urine with cough in cold blooded *Udara Rogi*.
- **Shleshma-** Excessive green, yellow and blood mixed phlegm coming out frequently.
- **Shoth- Jwar & Atisaar-** Fever and diarrhoea after oedema or vice-a-versa in emaciated patients. Oedema on hand, feet, groin and abdomen <sup>[19]</sup>.

#### Chapter 7- Pannarupeeyam (Nashta Rupa)-

Explains how the actual form is demolished before death.

As abnormalities in naturals is the sign of *Arishta*, the demolished *Kumarika* within the eyes is the similar concept of image or lucent of the actuals <sup>[20]</sup>.

- **Chhaya:** Abnormalities in actual shape and size of image and lustre of a person is the sign of *Arishta* <sup>[21]</sup>.

#### **Achikitsya Atur** <sup>[22]</sup>:

- Eyes appear like a kamala patient, oedematous face, drooping of temples, body become hot and fearful.

- Loss of strength and lustre even on taking tasty and nutritious food.
- An emaciated patient with *Mandagni*, taking less amount of food and excretes large amounts of faeces and urine.
- Emaciated patient with unclear voice from neck, difficulty in breathing, suffer from severe diarrhea, thirst and dry mouth.
- Shortness of breath (*Chhinna Shwas*) or breathlessness or breath like cut injury all over the body.
- Tachypnoea, lungs filled with phlegm, loss of strength, lustre and diet.
- The patient whose genitalia either intruded or extruded excessively.
- Emaciated thirsty patient with dry mouth, stiff eyes and continuously fluttering of carotid arteries.

#### Chapter 8-Avakshirseeyam (Headless/Inverted shadow)-

##### **Arishta related to** <sup>[23]</sup>:

- **Shira pratichhaya-** Image of a person who looks headless, inverted or curved.
- **Chakshu:** Eyelashes matted like tresses and loss of vision without any known cause. Burning sensation in the eyes and eye-lids not conjoined together in

an anasarca patient is considered as dead.

- **Naasa-** when the nasal bone becomes weak and thick without oedema. Nasal opening appears very wide or very narrow and curved or dry is fatal.
- **Danta-** Teeth become white like bones, fragrance like flowers and coated with mud like substances.
- **Jihwa-** Tongue becomes stiff, heavy, buds appear thorny, blackish, dry, oedematous, no activity or licking lips frequently with tongue.
- **Shwasa-** Gasping breathing (large exhale followed by small inhale) followed by fainting.
- Face, ear, lips, become white, black or red coloured. Both lips become blue due to abnormalities.
- The patient Frequently laughs and cries, touches openings of upper body parts, sweeping the bed frequently with feet.
- Neck doesn't hold the head, the backbone doesn't hold the body, the mouth doesn't hold the food and jaws don't work properly.
- Patients with sudden high-grade fever, excessive thirst, faint, loss of strength and loosen joints. Excessive sweating during the dawn period in the fever.

- When a patient is unable to engulf the food, tongue sinks into throat and sudden loss of strength.

**Chapter 9- Yasya-Shyavanimittiyam** (Black coloured eyes)-

- The patient suffers from various diseases with a dry mouth if they become senseless.
- The arteries of the body become green; hair pores closed and excessive desire to the sour taste, such patients will die with *Pittaj* disease <sup>[24]</sup>.

**Arishta related to** <sup>[25]</sup>:

- **Netra:** When the eyes of a person become blackish or green, displaced from its location and get any disease.
- **Rajyakshma:** The person whose limbs are nomothetic and trunk continuously become lean and thin (Hyposthenic). Hot flushed shoulder, hiccup, blood vomit, distension, flanks and ribs pain.
- **Ashta maharoga:** According to Charak deterioration of strength and muscles in any disease especially in *Maha Gada* is to be refused. *Acharya Sushrut* says all these are difficult to treat by nature. *Mahagada* with loss of strength, muscles, oedema, thirst, vomiting, fever, diarrhoea fainting, hiccup and breathlessness must refuse.

- **Anah:** Even distension treated by *Virechan Karma*, but it repeats with purgation and thirst is fatal.
- **Nishtayoot, shukra & Pureesha:** Various coloured phlegm, semen and faeces of the patient sink into water is a fatal sign.
- Pricking pain in abdomen with frequent blood mixed froth coming from mouth.
- Feeble voice, loss of strength, complexion and disease aggravate improperly.
- The patient with breathlessness, body become cool, excessive pain in groin and not got any relief by treatment.
- The patient talks harshly to *Vaidya*, relatives and hears the voice which is not actually present.

**Chapter 10- Sadyomaraneeyam** (Immediate death)-

**Arishta related to** <sup>[26]</sup>:

**Hruday:**

- Excessively aggravated *Vata* produces *Ashtheela* within the heart and if the patient suffers from frequent thirst.

**Vata:**

- Upward moving *vata* affects both the carotid arteries in emaciated patients, fastens the heart and rectum immediately.

- When the aggravated *Vata* holds rectum and groin, it produces breathlessness, cutting pain in the navel, urethra, bladder and rectum.
- When *Vata* becomes stable in the intestine, the patient loses the sense and produces a sound like a pigeon.

**Excessive thirst-**

- Person has breaking pain in both the flanks, loose stools.
- Oedematous patient with *Vataj Shoth*, loose stool.
- Cutting pain starts from the stomach, stool becomes loose.
- Cutting pain starts from the intestine, stiff rectum with constipation.
- Thirst with breathlessness, headache, fainting, weakness, unclear voice and loose stool.

**Eyes-**

- Displaced eyebrow, burning sensation internally and got hiccup.
- Dilated eyes, body appears like wrapped with wet clothes.

**Teeth-**

- Tartaned teeth, white face similar to limestone, excessive sweating all over the body.

**Chapter 11- Anujyoteeyam** (Fade)- certainty of death within a particular time limit.

**Arishta related to:**



- **Panchamahabhoot:** Simultaneous appearance of *Atiyoga* or *Ayoga Lakshan* of *Indriya* or *Panchmahabhoot* should not be treated <sup>[27]</sup>.
- When the disease becomes more aggravated and mental strength goes down, the complexion, voice, digestion, speaking power, either the patient feels sleepy always or no sleep at all <sup>[28]</sup>.
- Person who hates physicians, medicines, drinks, foods, teachers, friends, can't be treated even if he gets a simple disease <sup>[29]</sup>.
- **Chatushpad:** The patient who is going to die, even a simple disease can't be treated by superior qualities of *Chikitsa Chatushpad* <sup>[30]</sup>.
- People with delusions search for things which are not present at the bed, body, wooden or walls. Laughs loudly without any fun, frequently licks the lips, limbs and breath become cool.
- People with deep delusions can't see the relatives present in the surroundings and call them loudly.
- When the disease becomes more aggravated and mental strength goes down.
- The one who drags feet during walk and shoulder falls downward.
- Fast decaying of strength, intellect, health, *Agni*, muscles and blood.

#### Within 3 days in patient & 6 days in others-

- **Shira Pratichhaya:** Image of a person who looks headless, inverted or curved.
- **Bhru-Avarta:** Appears numerous imaginary lines on the eyebrow and head.
- **Kesh:** When hair is extracted easily with no pain in a healthy or unhealthy person <sup>[32]</sup>.
- **Shankhak Roga:** *Pitta* along with heat when reached to the temporal region it is named as *Shankhak Roga* <sup>[33]</sup>.

#### Within 7 days-

- Coral-like Red-coloured lucent boils appear all over the body and disappear very soon.
- A patient with severe disease, having twitching pain in the neck, stomatitis and oedematous tongue.
- Three signs- fainting, utterance and fractured pain excessively.
- **Netra:** The one who search own fingers in front of eyes and was surprised that he lost fingers, dilated eyes with stare vision.
- Patients see natural fire as blue, black, white or bright less colour <sup>[34]</sup>.

- Frequently fainting when making a patient get-up from sleep <sup>[35]</sup>.

#### **Within 15 days-**

- After bath and application of fragrance, if the chest dries first than other parts <sup>[36]</sup>.
- When diseases of opposite nature collide together and *Jatharagni* become abnormal <sup>[37]</sup>.

#### **Within a month-**

- Tremor and fainting without any cause with crazy voices and movement.
- ***Shukra-Mootra and Purisha***: When semen, urine and feces sink into the water and such a patient hate relatives.
- The hand, feet, and face become emaciated especially in comparison to other parts of the body.
- New moon-shaped blue lines appear on the top of forehead or above the urinary bladder <sup>[38]</sup>.
- Slight unctuous cow dung like dust appears on the head and disappears again <sup>[39]</sup>.

#### **Within 45days-**

- Patients emaciating continuously and disease get worse quickly, aversion towards everything <sup>[40]</sup>.

#### **Within 6months-**

- Loss of these six factors- desire, character (Moral conduct), memory, sacrifice, knowledge and strength without any cause.
- Arterial capillaries appear sudden on the forehead.
- Moon-shaped lines appear suddenly on the top of the forehead <sup>[41]</sup>.

#### **Within a year-**

- The person with faded lustre, weak *Jatharagni*, restlessness, feelings and images are not good and do not get pleasure in any work.
- If the food offered by a person is not eaten by dogs or crows.
- A person can't see the *Arundhati* star.
- Sudden gain or loss of health, wealth and beauty by a person <sup>[42]</sup>.

**Chapter 12-** *Gomaychurneeyam* (Cow dung like dust & remaining signs of death)-

#### ***Purushanashrit* signs-**

##### ***Aushadhi*:**

- Medicine selected after so many trials, even prepared and used properly but useless or not able to cure the disease is fatal <sup>[43]</sup>.
- ***Prabhavaheenata***: After all efforts medicine cannot be prepared, well-practiced medicines become ineffective even with the guidance of experienced physicians <sup>[44]</sup>.

**Ahaar related:**

- When food is prepared properly in the guidance of good Vaidya but it doesn't give optimum benefit to the patient.
- Food spoiled before it gets prepared or without any reason cooking fire gets off <sup>[45]</sup>.

**Vaidya related:**

- Vaidya is not ready for his duty or involved in other urgent work.
- Vaidya touched the filthy object just before meeting the messenger <sup>[46]</sup>.

**Messenger related:**

- Sad, fearful, hurry and sinful female, male having three disabilities or transgender.
- Sliced organs, impostor, ill-sick and robber or murderer <sup>[47]</sup>.

**Pathi Utpatik:** Vaidya observed the sound of sneezing, blasphemy, crying etc. any harsh sound in the direction of light <sup>[48]</sup>.

**Atur Kule Utpatik:** Water filled pot, fire and other auspicious objects coming out when Vaidya enters into the patient's home <sup>[49]</sup>.

- When prana is going to abandon, the body becomes more painful, special knowledge gets obstructed, *Indriyas* lose their strength, cease all the activities, grief and eagerness enter into *Mana*.

- All openings become dry. Smoke and cow dung appear on the head while it is not actually. Organ lost its flutter which was continuously active prior.
- Image of flower on nails, tartar on teeth, eye lashes tresses (stick together), hairs arranged well without combing.
- *Shabda*, *Sparsha*, *Roopa*, *Rasa*, *Gandha*, *Cheshta*, and mental thoughts altered even on proper treatment are considered as *Arishta*.
- The patient dreams incubus, becomes naughty and the messenger becomes unfavourable.
- Violent causative factors appear suddenly, *Prakruti* loses and *Vikruti* becomes strong <sup>[50]</sup>.

**RESULT:**

**Siddhant of Arishta:** Changes in *Prakruti* without any known cause. So, in the present era knowledge of *Arishta* is important not only for Vaidya but for every human being.

**DISCUSSION:**

Almost every Samhita focused on *Triskandha* i.e., *Hetu*, *Linga* and *Aushadh*. Separate section "*Indriya Sthan* " explained in *Charak Samhita* which is arranged after *Shareer Sthan* and before *Chikitsa Sthan*. *Sushrutacharya* and *Vagbhatacharya* explained the same before *Chikitsa Sthana*. It

emphasizes the importance of *Arishta* before going to treatment. The *Arishta Lakshan* includes the *Linga* of *Trisutra*. Among the *Chikitsa Chatuspad*, *Vaidya* who has good qualities is considered as the *Karta* (doer). So, utmost responsibility goes to the *Vaidya* only to has a proper knowledge of *Triskandha*.

However biomedical sciences are advancing day to day at its threshold, regular invention of medical technology continues to diagnose diseases. The ancient medical science gives more importance to the signs, symptoms and thorough clinical examinations with the help of sense organs and different evidence, which is irreplaceable. The presumption of fatal signs is the beauty of *Ayurved*.

The natural *Rasa* formed in the body becomes abnormal. So, flies either attract or repel. This might be due to excess stimulation or no stimulation of excretory systems.

The examination of *Indriya* or *Indriya Adhishthan* is not possible by *Indriya* itself. So, use of *Anuman Praman* has utmost importance. Here *Indriyarth* becomes abnormal however, *Indriya* or *Indriya Adhishthan* is natural.

The physician who knows prodromal symptoms very well can be able to predict the related coming diseases or prognosis and even the fate of death.

The demolished *Kumarika* within the eyes is the concept of abnormalities of actual image or lucent.

When the eyes of a person become blackish or green, displaced from its location and get any disease. This is the condition of acute or chronic cyanosis due to improper supply of prana *Vayu* within the organs which is fatal.

Immediate death is the condition of emergency or trauma where it doesn't give time/chance to treat the disease.

Certainty of death within a particular time limit is the chronicity or slow degeneration of vitals which is responsible for death.

*Purushanashrit* signs are not having direct consequences of a diseased person. It impacts on the condition of the disease and their management procedure by shortening the time which is not favourable.

Physicians should be aware to declare the time of death without request. Even on request it must not be told because it might cause sorrow for close relatives. Further says- by observing good and bad signs it must be forewarned to the relatives.

#### ***Shubh lakshan:***

In the home of patients all members are helpful, obeisance, favourable etc. are the good signs of health. It provides the

favourable environment to the doctor as well as attendant to apply their optimum effort.

**Arogyajanya lakshan:**

Patients with *Satva Guna Pradhan*, affinity towards *Brahman* and *Vaidya*, with curable diseases and he must not get disappointed are the signs to be cured. These are the *Sadvrutta* mentioned by different acharyas to gain the positive energy.

**Prevention of arishta:**

Although death is fixed by *Arishta*, but *Vedacharya "Brahman "* who is free from mental defect and regular practice in *Rasayan*, *Tapa* and *Japa* can postpone the death for a period <sup>[51]</sup>.

*Acharyas* focussed here mainly on the incurables or refusable which is going to be fatal within 3 days to one year. This is the boundary of limitations for doctors. It also gives an opportunity to treat various other needful patients and spread the name, fame and morale of *Vaidya*.

Nowadays so many diseases are being treated successfully in the ICU which was considered as *Arishta* a few centuries back. It doesn't mean that the subject that was dealt prior is of no use. It indicates that under the limited equipment and resources these signs are incurable. Which is still useful even on advanced resources.

Forewarned and consent are the shields of treating doctors. Regular evaluation of biomedical science and new research being necessary to improve the qualities of treatment as well as exact interpretation of the quotation of *Samhita*.

**CONCLUSION:**

In the present era when medical science is at its highly advanced level. So many *Arishta Lakshana* are treated and not considered as predictors of death. It could be the indicator of prognosis and hence, helpful in management to save the life under the present limitations. Within the *Samhita* physicians are instructed for thorough examination of the patient and related biomarkers that indicate the terminal illness. Which can be used in ICU for the betterment of medical science.

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#### CITE THIS ARTICLE AS

Shambhu Kumar Suman, Kavita Kanyal, Pallavi Bharti, Pushpa Priyadarshani, Vijay Shankar Pandey. The Hidden Gems of *Charak Samhita Indriya Sthana*. *J of Ayurveda and Hol Med (JAHM)*. 2023;11(12):66-82

**Conflict of interest:** None

**Source of support:** None