Understanding of Hypertension in Ayurveda

Rathod MR* and Sharma Amit Kumar

Department of Kayachikitsa, National Institute of Ayurveda, Jaipur, Rajasthan, India

Abstract

Hypertension is reported to be the seventh most frequent contributor to premature death in developing countries. Recent report is indicated that nearly one billion adults had hypertension in 2000, and this is predicted to increase to 1.56 billion by 2025. 14% population of India is suffering with this dreadful disease Hypertension and majority of them have Essential Hypertension. Most of the hypertensive patients are asymptomatic, either delays in diagnosis or missed in diagnosis. Hypertension is one of the most frequent causes for cardiovascular, cerebrovascular morbidity and mortality. The essential hypertension when thought adapting the principle of Dosha, Dhatu and Mala theory the pathology seems to be centered on Shonita Dhatu and TriDoshas. There is a need to understand the exact cause, Pathophysiology, acuteness, Chronicity of the disease, complication and its treatment in Ayurveda.

Keywords: Shonita Dusti; Hypertension; Ayurvedic medicine

Introduction

What is the hypothesis of disease Hypertension in Ayurveda? With some supporting Ayurvedic evidences we can draw some clarification of the disease hypertension. The disease hypertension is an abnormality of Rakta Dhatu (blood) and is popularly known as Shonita Dusti (vitiated blood). Shonita Dusti includes multitude of ill health ranging from stubborn skin disorder to abnormality of blood coagulation. It also includes clinical manifestation that is analogous to hypertension. The illness Shonita Mada simulates the symptom of malignant hypertension. To clear the concept vitiation of Rakta (Blood) and is popularly known as Shonita Dusti (Vitiated Blood) and are seen diseases like Pandu (Anemia), Kamala (Jaundice). Morbidity of the Shonita Dusti leads to cause skin lesions that are collectively called as Kushta. Bleeding tendency disorders like RaktaPitta (abnormal bleeding from different roots of the body), Raktapradara (excessive vaginal bleeding), Rakta meha (Hematuria) etc. are also the morbidity of Rakta Dhatu (Blood), group of vascular disorders explained in Vatarakata (Gouty Arthritis) and some of mucosal inflammation as Mukhapaka (Oral Ulcers), Akshiraga (Redness of Eyes), Upakusha and Pootigrana are also regarded as maladies of Shonita Dusti.

The plethora of diseases pathognomonic of Shonita Dushhti does not end here. A unique category of clinical presentations comprising Shiroruka (Headache), Klama(Nausea, Vomiting), Anidra (Sleeplessness),Bhrama, Buddi Sannohtha,Kampa etc. do not fall under any of the above said class. Also it is interesting to note that all these symptoms are akin to manifestations of hypertension. More to add, Mada, Moorcha and Sanyasa, the different diseases caused by Shonita Dushhti are described also as progressive manifestation of increasing Shonita Dushti. So also, such a sequel is equally true in relation to malignant Hypertension. All these deliberation corroborates parlance of the Shonitadusti and its different clinical manifestations of Mada Murcha and Sanyasa to the essential Hypertension as well as Malignant Hypertension.

Nomenclature is Unresolved Point

In this modern era there are several references available for the disease Hypertension in Ayurveda but we cannot justify authentically how the allopathic science have strong worldwide acceptance of word Hypertension. Here some different opinion by different Academicians of Ayurveda suggested different names to demonstrate the phenomenon like Raktagata vata (YN Upadhyaya-1950), Shiragata Vata (Acharya GN Chaturvedi-1962), Avritta Vata (Acharya RK Sharma-1966), Dhamani Prapurnata (Acharya AD Athawale - 1977), Rakta Vridhhi (Acharya GN Chatruvedi-1981), Rakta Vikshepa (Shukla JP-1954), Rakta Chopra (Ravani and Mahashkar UB-1967), Rakta Sampida (Pandey SB-1972), Vyana Bala (Triguna B 1974), Dhamani pratichaya (Athawale AD), Rasa Bhara (Athawale TS 1979), Rudhira Mada ( Dwivedi VN 1991), Rakta Chapa (Sharma PV 1993) [1] and list goes on with different concept by different Acharyas and it makes confusion to upcoming Ayurvedic generation what could be taken and what could not. Until and unless we cannot accept this disease with its causative factors, Pathophysiology, Acuteness, Chronicity, Complications and exact treatment modalities universally. Here some of the references, signs and symptoms can be taken for this disease once it is validated.

Etiology of Shonita Dusti (Hypertension)

Alcohol intake (Madya)

Alcohol has direct effect on the excitability as well as contractibility of the heart muscles. Intoxication doses of alcohol raise cardiac rate, cardiac output and hence increasing the systolic as well as pulse pressure [2].

Salt intake (Lavana)

Salt (Lavana), one of the major cause as well as to increase the blood pressure due to its hygroscopic quality. Sodium salt (Lavana) has an ability to hold water in the blood and consequently increase its volume; volume of the blood is directly proportional to the blood pressure hence for the Shonita Dusti, Lavana is one of the leading causes [2].

Sedentary habit

Hypertension is a one of the leading lifestyle disorder. The farmer who is working continually in the field may not get the disease but one

*Corresponding author: Rathod MR, PhD scholar, PG Department of Kayachikitsa, National Institute of Ayurveda, Jaipur, Rajasthan, India, E-mail: mannusrathod2@gmail.com

Received October 30, 2012; Published November 22, 2012

Citation: Rathod MR, Kumar SA (2012) Understanding of Hypertension in Ayurveda. 1:494. doi: 10.4172/scientificreports.494

Copyright: © 2012 Rathod MR. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.
who sits ideally; who leads stressful life may have every possibility to have such diseases. Nutritious food habit with sedentary behavior leads abnormal increase in the lipids in the blood this in turn predisposes to atherosclerosis. Atherosclerosis increases the peripheral resistance and thus contributes to increased risk of Hypertension [2].

**Mental stress (Krodh)**

When a person is calm, heart rate is regular, pulse is even, blood pressure is relatively low, visceral organs are well supplied with blood. Contrary to this with stress (Krodh)- vessels of the visceral organs constrict, blood flows in larger quantities to the muscles, the heart beats faster and works harder, as the heart speeds up the pulse quickens and the blood pressure mounts due to chronic emotional stress the hypertension becomes chronic and become persistent [2].

**Physical strain (Shrama)**

Here one more important leading cause for this disease we will find in day to day practice. Isotonic exercises like jogging and swimming that does not causes any physical strain helps in lowering the body weight. Isometric exercise like weight lifting increases the blood pressure [2].

**Seasonal variation**

The person who suffers from various vascular diseases like scleroderma, peripheral vascular disorder etc. they have tendency to increase the symptoms in the cold season may be due to constriction of blood vessels. Low environmental temperature tend to constrict the blood vessel to prevent heat loss, here volume of the blood remains same, but vascular compartment reduced due to constriction, disparity in blood volume and vascular compartment leads to elevation of blood pressure [2].

**Symptoms Of Shonita Dusti and Hypertension**

Symptoms of Shonita Dusti like Headache (Shiroruk), Tiredness (Shrama), Dizziness (Shirobhrama), Vomiting (Klama), Altered state of consciousness (Samshodhana, Mada, Tandra, Nidra), Delirium, Seizures (Akshepa), Visual disturbances (Akshiraga, Akshiroga), Different neurological deficits. These symptoms does not descend on any of the disease category, these symptoms are akin to the clinical manifestation of Hypertension (Shonita Dusti) [2].

**Headache (Shiroruk)**

The illness is asymptomatic in most of the hypertensive, about 40% of the patients suffering from the hypertension (Malignant type) develops headache.

**Tiredness (Shrama)**

Undue exhaustion is a symptom of hypertension and the exact path physiology of this system is not clear.

**Irritability (Krodhaprachurata)**

Disturbance of emotion is not uncommon in hypertension.

**Raised body temperature**

Reason is unknown.

**Dizziness (Shirobhrama)**

Occasional dizzy spell is seen in some patients suffering from hypertension.

**Vomiting (Klama)**

15% of the patients suffering from malignant hypertension are likely to present with vomiting along with other symptoms.

**Altered consciousness (Tamsaaitidarshan)**

In malignant hypertension the cerebral edema is sequel, arteriolar Fibrinoid necrosis as well as spasm of the vessels precipitates cerebral edema, this cerebral edema presents with altered state of consciousness. About 50 to 90% of the patients suffering from malignant hypertension develop this altered state of consciousness this may range from the simple confused state to stupor and coma.

**Seizures (Kampa)**

About 50 to 90% of the patients of malignant hypertension suffer from convulsion and usually generalized one.

**Visual disturbances (Akshiraga)**

Hypertension is characterized by retinopathy with or without papilledema associated with necrosis of small arteries and arterioles this leads to impairment in visual disturbances as well as transient blindness. This manifestation is said to be found in about 40% of patients suffering from hypertension.

**Focal neurological signs**

In about 5% of the patients the cerebral edema as well as necrosis result in focal neurological or the other kind of neurological deficits.

**Urinary system (Raktameha)**

Oliguria, Proteinuria, Hematuria and decline in the renal functions are the manifestation of the malignant Hypertension. Balancing etiology and symptomatology of Shonita Dusti with hypertension some Nidana (causative factor) of Shonita Dusti can predispose to hypertension, many clinical manifestation of the Shonita Dusti can be explained by patho-physiology of hypertension, wise statement that the hypertension of the modern medicine is described as a manifestation of Rakta Dusti. Hypertensive accounts for unwanted anger, irritability, restlessness and delirium.

**Delirium in hypertensive**

Commonest presentation of malignant Hypertension is delirium, in this state mental faculties are deranged, ability of perception may be affected and patient attention cannot be drawn easily. When patient is aroused, patient fails to understand the surrounding with all the earlier precision to keep him alert continuously stimulation is needed this is popularly known as clouding of sensorium.

**Delirium in encephalopathy**

Tremulousness in speech, speech may be irrelevant, irritability, restlessness and unusual hyperactivity for a trivial stimulation. Exhibits unwanted anger and agitation and aggression just speaking may irritate patient and likely to respond with scolding words indicative of Pitta predominance. Consciousness is clouded cannot be aroused by simple verbal stimulation, cannot maintain the alertness, appears thinking and concentrating, do not speak much suggestive of Kapha predominance hence this is popularly known as kinetic delirium or quiet delirium.

**Autonomic nervous system**

Due to the increased activity of the autonomic nervous system the
conjunctiva is injected, the pulse is rapid, temperature may be raised, there is much sweating and the urine is scanty and raised specific gravity. Inability to sleep, vivid hallucinations, extreme agitation and tremulousness is another presentation of delirious state. The patient will have a tendency to convulse.

**Different causes of mada**

Patient of Shonita Mada may not give the history of alcohol intake or poisoning, spontaneous onset for no apparent reason, variable course and spontaneous remission is characteristics of Rudhiraja Mada. If left untreated leads to Murcha and Sanyasa as in hypertension leading to stupor and coma.

**Progressive illness**

In case of no availability of treatment or poor response Hypertensive encephalopathy progressive from delirium to cloudiness of consciousness, stupor and coma also Rudhiraja Mada progress to Murcha and Manyasa.

**Discussion**

There is multiple disease may lead to develop with Shonita Dusti from Mukhapaka (Mouth Ulcer), Kamala (Jaundice), Pandu (Anemia ), Rakta Pitta (Bleeding Disorders ) etc. There is separate set of clinical manifestation like Shiroruk, Bhrama, Tamastidarshana, Krodhaprachurata, Aksiraga, Klama. These are symptoms are similar to manifestations of asymptomatic essential hypertension (Shonita Dusti). Several etiological factors of Rakat Dusti like Lavana (excessive intake of salt), Madya (excess alcohol intake), Krodha (mental stress), good nutrition with sedentary habit, physical strain, are also best mimicking the etiological factors of essential hypertension. Shonitadusti, Shonita Mada, Moorcha and Sanyasa are the different progressive condition of the hypertension based on the criteria naming the disease by their leading symptoms the Rudhiraja Mada is related to the symptomatic phase of malignant hypertension. Asymptomatic hypertension can very well be considered as Avyakta stage of the illness or may be simply referred to Shonita Dusti. Involvement of variety of factors contributing in pathology the complexity of disease goes on increasing and putouts an obstacle in the line of treatment. Since there is involvement of TriDosha with Shonita, as Shonitadushti may further progress to Mada, Moorcha, Sanyasa, and hence dynamic planning of treatment is essential. As there is involvement of Madyama Rogamarga phrased as Yapya Vyadhi. So depending upon the Dosha, Dushya involved, and treatment is planned and consequently Shodhana, Shamana, Rasayana line should be adopted in patients.

The line of treatment in the disease of Shonitadushti consists of Nidana parivarjana, Shodhana (enema), Shirovirecana (purification through nasal root), Raktamokshana (Bloodletting), Murdhni Taila (special technique to keep oil and massage), Shamana medications (different oral medication) and Rasayana Chikitsa. According to the dominance of Dosha and the Avastha of disease, the planning of treatment goes on differing.

**Conclusion**

Various Ayurvedic authors have their own view on the disease hypertension but if we look closely in relation with causes and symptoms of the disease in Ayurveda hypertension can be considered as Shonita Dusti. Most of the causative factors like Lavana, Madya etc. have direct relation with Shonita Dusti and almost all symptoms of mimicking with different stages of hypertension so one can consider this disease as Shonita Dusti rather than considering other.

**References**

1. Rajshekara Sanapeti Clinical Study on the effect of Takradhara in the Essential Hypertension.
Citation: Rathod MR, Kumar SA (2012) Understanding of Hypertension in Ayurveda. 1:494. doi:10.4172/scientificreports.494