



An Insight into Relation of Action of Herbs and Srotas

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Abstract

The word *srotas* is derived from “*sru*” *gataudhatu* which means movement. *Srotas* are channels which transport *anna*, *dhatu*s, *tridoshas* and *pranas*. When the flow of appropriate nutrients through *srotas* is proper and unobstructed, there is health. When there is blockage, excess or deficiency in these channels, disease occurs. Herbs act in various ways. Some stop *attipravitti* while others remove *sang*. In this article an effort has been made to analyze the action of *dravyas* in different pathologies exclusively at *srotas* level in order to highlight their medico clinical importance in our body.

Key words: *Srotas*, Herbs, Channels, *Ayurveda*.

Introduction

Acharya Charak has stated “*Tadetat srotsam prakatibhutawat na vikarairoopsriyate shariram*” i.e. *samprapti* (pathogenesis) of any disease involves the *srotodushti* in its progression[1]. No disease can occur without *srotodushti*. Hence a thorough knowledge of *srotas* present in human body is the basic necessity to understand the action of *Ayurvedic* medicines. That may be the reason, *Acharya Charak* has mentioned this important topic in *Vimana sthana*, where the ‘*vishisht maan*’ of the body has been described[1]. Similarly *Acharya Shusruta* gave importance to this topic by dedicating a separate chapter on *srotasin Shareer sthana*[2]. To be noticed, *Acharya Charak* has used the terms *srotas* directly and indirectly while describing *samprapti* of maximum diseases e.g.

Sleshmada rudha marg tat – Shakhashrita Kamala (C.Chi.16/1225)

Srotansya adhisthay manovahani – Unmada (C.Chi.9/5)

Dosha prakupita sthanm adhigamya – Kustha (C.Ni.5/6)

Rakten aavrita pathi – Vatarakta (C.Chi.29/10) etc.

Dosha- dushya sammurchana occurs in *srotas*, during *sthan- sanshraya avastha* of *samprapti*. *Ayurvedic* system of diagnosis is based as on which of the individual *dosha* are involved & which channels are obstructed or afflicted. A disease originated from one vitiated *dosha* can travel through *srotas* to the site of another *dosha*. Excess of *dushya* can either block the *srotas* or can create a spillover effect. A disease may also involve anatomical problem of *srotas* or *srotomula*. The modality of treatment in *Ayurveda* thus includes the *evulsion* of obstruction, correction of anomaly or stopping of spillover effect at the nano level of *srotas* by the use of herbs. Hence the choice of drug in a disease would depend on the type of *srotas* and anomaly involved. Action of various drugs at *srotas* level thus highlights the medical importance of *srotas* in our body.

Material and Methods

It is a conceptual research. *Ayurvedic* texts consulted include *Charak Samhita*, *Sushruta Samhita*, *Dravyaguna Vigyan* by Late Acharya Priyavrat Sharma, *Ras panchak* by Dr. S.C. Dhyani etc. Research articles available on internet have also been consulted.

Action of herbs at srotas level of samprampti

Some herbs act at *dosha* level, some at *dushya* while others at *srotas* level to cure the disease. Many may act at multiple levels e.g.

In *Atisaramain dosh* involved is - *vata*

main *dushya* involved is - *purish*

main *srotas* involved is - *Purishvah*(mainly *pakvashya*).

Shunthi chiefly acts on *Vata*, *Bhanga* on *purish* while *Ahifen* on *purishvaha srotas*. It is quite common to use poppy for *Atisara* when all measures fail. Being *Ruksha* & *kashaya* it is *sthambhak*, hence, decreases excess secretion by *purishvaha srotas*. At the same time causes decreased intestinal motility by being *Vata shamak* because of *ushna virya*. Morphine present in *Ahifen* reduces GIT motility thus helps in diarrhea as reported by Casy et al., 1986[3].

Action of herbs on sroto dushti (sanga&atipraviti)

The cardinal symptoms of disease relates, in high majority of cases, to the hypofunctioning (*sang*) or hyper functioning (*atipraviti*) of the *srotamsi* involved in it and the *vyadhi pratyneekachikitsa* aims at correcting these defects e.g. *Svasa* and *Kaas* roga occur due to *sanga* in *praanvaha srotas*. The *sanga* may be due to the spasm (*Vayu*) or *kapha*. Medicines acting on *vata* & *kapha* as well as *praanvaha srotas* are therefore used in these *rogas*.

Kustha (*Saussurea lappa*) by its *ushna virya* & *katu- tikta* rasa rectifies *vata* & *kapha* thus removes the *sanga* of *praanvaha srotas*, which in modern parlance is bronchodilating and spasmolytic action (Raghvan et al., 1962)[4].

Taalish patra, *Tulsi* and *Twak* through their oil content liquefies *kapha* which is then easily expectorated, thus by removing *sanga* of *praanvahasrotas* help in *svasa*.

Vasa removes the *sanga* of *praanvaha srotas* by being expectorant and bronchodilator.

Vibhitak corrects the hyperactivity of *praanvaha srotas* by being *kaph shamak* and antitussive.

Ela exhibits bronchodilatory effect, mediated through Ca ion antagonist mechanism, hence improves hyperactive status of respiratory system[5].

Raktastambhak drugs like *Lodhra*, *Doorva*, *Shatavari*, *Vasa*, *Kushmand* etc. owing to their *sheet* & *kashaya* properties enhances the coagulation process and constrict the *rakt vahidhamniya*, the *moola* of *raktvahi srotas*, thus are used in *Raktapitta (attipravitti)*[6].

Ashok twak is used in *raktapradar*, a disease of *aartavvahi srotas*. *Ashok twak* acts on *Garbhasaya* (uterus), the *mula* of *aartavvahi srotas*, induces its contraction thus regulates menstrual bleeding[7].

Elective affinity of herbs towards srotas

Certain herbs exhibit selective affinity toward a particular *srotas*. *Lodhra*, *Naagkesar* & *Mochras* are well established *Raktastambhak dravyas*. But when it comes to choice of medicine for *Raktarsh* we choose *Naagkesar*, for *rakpradar* *Lodhra* & for *raktaatisara* *Mochras* is our choice (table 1), though all the three diseases involve common *dosha* & *dushya*. It is the type of *srotas* involved & the elective affinity of herb towards it which makes the difference.

Table: 1

Disease	<i>Pradhan Dosh</i>	<i>Pradhan Dushya</i>	<i>Srotas</i>	<i>Dravya</i>
<i>Raktarsh</i>	<i>Pitta</i>	<i>Rakta</i>	<i>Maansvaha</i>	<i>Naagkesar</i>
<i>Raktapradar</i>	<i>Pitta</i>	<i>Rakta</i>	<i>Aratavvaha</i>	<i>Lodhra</i>
<i>Raktaatisara</i>	<i>Pitta</i>	<i>Rakta</i>	<i>Purishvaha</i>	<i>Mochras</i>

Remote action of herbs & srotas

Dosha, dhatu, mala & srotas mutually affect each other. Medicines after absorption through *ras-rakta* circulation reach to their site of action & cure the pathology which may affect other related organ or *avayav*. This is called Remote action of *dravya*. This is utilized when a remote situated *sroto dushti* is the culprit of another problem e.g. *Arogyavardhani* removes the *sanga* (obstruction) of liver thus also resolves related Ascites.

Punarnava is mentioned in *kasahara mahakashaya* by *Charaka*[8]. Though it doesn't have any direct effect on lungs but due to its diuretic action reduces the congestion (*sanga*) in the lungs which gives symptomatic relief in congestive conditions of lung tissues.

Action of herbs at srotomula

“*Chinnamula na shakha na pattram*”[9]

Whether be *dos has* or plants, if the roots are not attacked upon, reappearance of the gone away disease and sprouts respectively is obvious[10]. Hence treatment of *srotomula* is very important.

Mukhdhusika is a *raktavaha srotodushti janit vikara*. The *moola* of *raktavaha srotas* are *Yakrit & Pliha* and *raktvaahi dhamniya*[11, 12]. So if we treat *yakrit & pliha* we can cure *Mukhdushika*. *Rohitaka & Sharpunkha* can be used as a remedy as both have stimulating property of *yakrit* and *pliha*. *Rohitaka*, due to predominance of *tikta & kashaya ras* alleviates *pitta* while due to *ushna virya* it alleviates *kapha & vata*, thus due to these properties it is *plihanga & raktasodhaka dravya*.

Sharpunkha due to *laghu, ruksha guna & tikt-kashaya rasa* alleviates *kapha & pitta* and due to *sheet virya* exhibits *plihanga & raktashodhak* effects. In modern aspect, spleen acts as reticulo-endothelial system and liver detoxifies waste products of blood (Chowdhury et al; 2013) [13].

Classification of drugs as per their action on srotas[14]

Table: 2

<i>Praanvaha srotas</i>	<i>Vibhitaka, Yashtimadhu, Vasa, Taalish patra, Gojheeva, Pushkarmoola, Kantkari, Twak, Kusth, Tulsi etc.</i>
<i>Udakvaha srotas</i>	<i>Chandan, Usheer, Dhaanyak, Kiratikta etc.</i>
<i>Annavaha srotas</i>	<i>Chitrak, Pippali, Sunthi, Jeerak, Methika, Suvarchala, Shatpushpa, Nimbu, Amlika etc.</i>
<i>Rasvaha srotas</i>	<i>Arjun, Amlaki, Guduchi, Paatla, Moorva, Sudarshan, Nirgundi,, Agnimantha, Jeevanti, Shatavari, Ashwagandha etc.</i>
<i>Raktavaha srotas</i>	<i>Manjistha, Haridra, Bakuchi, Padmak, Chakramarda, Laaksha, Nimb, Karanja, Sharpunkha, Doorva, Kumari, Rohitak etc</i>
<i>Maansavaha srotas</i>	<i>Lashun, Bhallataka, Chavya, Panas, Aguru, Madhook etc.</i>
<i>Medovaha srotas</i>	<i>Karpur, Guggulu, Paaribhadra, Apamaarg, Kaanchnaar etc.</i>
<i>Asthivaha srotas</i>	<i>Asthisrinkhla, Bakul, Chadak etc.</i>
<i>Majjavaha srotas</i>	<i>Chopcheeni, Hapusha, Dhamasa, Shalmali etc.</i>
<i>Shukravaha srotas</i>	<i>Kasturi, Kapikacchu, Akshot, Paataalgaruni etc.</i>

<i>Mutravaha srotas</i>	<i>Pashanbheda, Yavakshar, Gokshru, Kush, Kulatha, Kaarvellaka etc.</i>
<i>Purishavaha srotas</i>	<i>Haritaki, Jaatiphala, Bilva, Mochrasa, Kapitha etc.</i>
<i>Swedavaha srotas</i>	<i>Vatsnaabh, Shobhaanjan, Naagkesar, Priyangu etc.</i>
<i>Artavavaha srotas</i>	<i>Lodhra, Gorochana, Saariva, Lajjalu, Ashok, Plaksha etc.</i>

Discussion

On the basis of above study, it can be said that every *Ayurvedic* drug should be researched or studied on the basis of mode & site of action with respect to *srotas* involved. In routine *Ayurvedic* practice, it is observed that a drug which acts wonderfully in patient of one disease may not show any beneficial effect in another patient with similar disease. In my opinion the reason behind it on detailed study can be understood taking an example of Ascites. The common causes of Ascites are Liver cirrhosis, Renal failure, Cox abdomen, CHF and Carcinoma[15]. *Arogyavardhini* which works wonderfully in Ascites due to Cirrhosis will be useless in Ascites due to Cox abdomen, CHF, RF etc. As the main content *Katuki* (*Picchrhiza kurroa*) acts on *srotodushti* of liver which is the main culprit. Similarly, *Trinpanchmool dravyas* are very effective in Ascites due to renal pathology but play negligible role in other causes.

Conclusion

From this study we conclude that

1. *Srotas* are involved in pathogenesis of diseases.
2. *Dravyas* used for treatment of disease act at *srotas* through various mechanism.
3. A physician must observe the clinical manifestations of disease to trace out the *srotas* involved so as to make choice of medicine.
4. Further work is still much needed in this field.

References

1. Agnivesh, Charak, Charak samhita, Vimaan sthana, Srotoviman Adhyaya, Chapter 5, Shlok 6, edited by Ganga Sahay Pandey, Vidyotini Hindi commentary by Shastri K. N and Chaturvedi G. N., part 1, Chaukhamba Sanskrit sansthan, Varanasi, Reprint year 2001.
2. Sushruta, Sushruta Samhita, Shareer Sthana Dhamnivyakrana, Chapter 9, Shlok 12,13. Edited by Prof. Kaviraj Ambikadatt shastri. Chaukhamba Sanskrit sansthan, Varanasi, Second Edition, Reprint year : 2005.
3. Casy AF, Parfitt RT. Opoid analgesics. Springer; 1986.
4. Raghvan P, Nagendra AS, Dutta NK. Total alkaloids of Saussurea lappa in treatment of bronchial asthma. An assessment of its therapeutic value by clinical & ventilator function studies. J Postgrad Med 1962; 8:158-169.
5. Arif- ullah Khan 1, 2, Qaiser Jabeen Khan 1,3 and Anwarul- Hassan Gilani 1; Pharmacological basis for the medicinal use of Cardamom in asthma; Bangladesh J Pharma 2011; 6: 34-37.
6. Basic concepts of Dravyaguna Vijnana by Dr. Anugrah Narain Singh and Prof. Satya Deo Dubey, Chaukhambha Vishvabharti, Varanasi, 1st edition 2014.
7. Dravyaguna Vijnana by Prof. P. V. Sharma, Chaukhambha Bharti Academy, Varanasi, Reprint year 2011, pg 618 .
8. Agnivesh, Charak, Charak Samhita, Sutrasthan, Shadvirechanshtashati adhyay Chapter 4, Shlok 36, edited by Ganga Sahay Pandey, Vidyotini Hindi commentary by Shastri K. N and Chaturvedi G. N. , part 1, Chaukhamba Sanskrit sansthan, Reprint year 2001, Varanasi.
9. Bhagvat Geeta
10. Agnivesh, Charak, Charak Samhita, Sutrasthan, Chikitsaprabhritiyamadhyay, Chapter 16, Shlok 21, edited by Ganga Sahay Pandey, Vidyotini Hindi commentary by Shastri K. N and Chaturvedi G. N. , part 1, Choukhamba Sanskrit sansthan, Reprint year 2001, Varanasi.

11. Agnivesh, Charak, Charak Samhita, Vimansthan, Srotoviman Adhyaya, Chapter 5, Shlok 7, edited by Ganga Sahay Pandey, Vidyotini Hindi commentary by Shastri K. N and Chaturvedi G. N. , part 1, Choukhamba Sanskrit sansthan, Reprint year 2001, Varanasi.
12. Sushruta, Sushruta Samhita, Shareer Sthana Dhamnivyakrana, Chapter 9, Shlok 12. Edited by Prof. Kaviraj Ambikadatt shastri. Chaukhamba Sanskrit sansthan, Varanasi, Second Edition, Reprint year : 2005.
13. Chowdhury Kanchan, Dhakar Rajkumar, Patil Bansilal Satish, Jain Rahul, Datta Nilanjan. Role of Rohitaka and Sharpunkha on Mukhadushika. International Journal Of Ayurvedic And Herbal Medicine, 3;3 (2013)1159: 1172.
14. Dhyani S C, Rasa-Panchaka, Varanasi, Chowkhamba Krishnadas Academy; Edition 4th , 2016, pg 134-135.
15. Davidson's Principles & Practice of Medicine. Edition 20th. pg 937.