



REVIEW ON SHAD AVEKSHA KALA.

JANAGOND TEJASWINI^{1*}

ABSTRACT:

The motto of Ayurved is *swasthasya swasthya rakshanam aaturasya vikar prashamanam* . It describes both aspects of Chikitsa. The first one is preventive i.e. maintenance of health and prevention of disease while later, aaturasya vikar prashamanam i.e.to cure the diseased condition of the patient. The prime goal of both is to establish the state of Dhatusamya which is conclusive definition of Arogya. The Kala is accepted as one of the important environmental phenomena from the health and disease point of view. The life style prescribed in Ayurveda according to Kala plays a vital role in maintaining and promoting the positive health as well as to prevent and cure the diseases. Dosha, Agni, Bala, Ahara, Vyadhi, Oushadha and Chikitsa etc various factors are influenced by Kala. Considering dina, atura, aushadha, vyadhi, jeerna linga laxana and rtu are understood as kaala.

Key words: kala, trividha chikitsa bhava, dina, atura, bhesaja, rtu aveksha kala.

^{1*}Assistant professor, RKM Ayurvedic medical college. Vijayapura. Karnataka, INDIA

Corresponding Email id: drtejaswinibams@gmail.com Access this article online: www.jahm.co.in

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INTRODUCTION

The motto of *Ayurveda* is *swasthasya swasthya rakshanam aaturasya vikar prashamanam* . It describes both aspects of *Chikitsa*. The first one is preventive i.e. maintenance of health and prevention of disease while later, *aaturasya vikar prashamanam* i.e. to cure the diseased condition of the patient. The prime goal of both is to establish the state of *Dhatusamyā* which is conclusive definition of *Arogya*. The treatment is practically handled with inclusion of three essential factors to attain total cure of the disease. They are: 1) *Ahar*, 2) *Vihar* and 3) *Aushadh*; through proper application of which, an entire treatment can be proved fruitful and resultant.

Kala is unavoidable factor in *Ayurveda*. The whole universe is under the power of *Kala*, as such it is an efficient cause for all activities. The physiological variations in healthy body along with pathological changes do expect the time as a factor of manifestation. Similarly treatment modalities also depend on *Kala*. Hence *Kala* has utmost significance in *Ayurveda*. *Kala* is the *ek karana* for both *roga* and *arogya* and also important in diagnosis of disease, prognosis etc. *Kala* in *ayurveda* is associated with *rtu*, *bhaisajya kala*, *nityaga kala*, *vyadhi avastha*, *dhatu* formation, *upadhatu* formation, *samskara*, collection of medicine etc.

AIMS AND OBJECTIVES

To review the concept of *shad aveksha kala* .

To elaborate modern concept of *shad aveksha kala*.

MATERIALS AND METHODS

The study is a literature review. Material is collected mainly from *Charaka Samhita*.

Three basic factors should be focused which are impaired and due to that the disease manifests and develops. They should be hence attributed to treat and normalize. They are *Agni*, *Vayu* and *Srotas*; hence, titled as *Trividha Chikitsya Bhava*.

At the time of treatment the things which should be taken into consideration are -- *desha* (*shareera avayava* and *sthana visesha*)^[1], *Kala* (morning, afternoon, evening; before or after food), *Pramana* (the quantity of the medicine to be administered), *Satmya* (favourable to *prakriti*), *Asatmya* (unfavorable to *prakriti*).

Keeping all these concepts in mind the *ahara* and *aushadha dravyas* should be administered due to which it will be beneficial otherwise it will be *apathya*. Here due importance is given to the *samyak yoga* in *chikitsa kshetra* by condemning *mithya yoga* and *atiyoga*.

If the *doshas* are located in stomach, then medicines shall be administered orally; if at head region, then through nose; and if at colon then medicines quickly act if given per rectum. The *doshas* at other body parts and

diseases originated from them like *visarpa*, *pidaka* etc, shall be treated with *pradeha* etc. specific local pacification procedures. Shad is six in number, *Aveksha* is taking into consideration (vicharaniya) , Kala here is of six types. They are *dina*, *atura* , *aushadhi*, *vyadhi*, *ahara pacana Kala* and ^[2] In which *aushadhi sevana Kala* are ten in number. *Aushadhi matra* three types – *alpa matra*, *bahu matra*, *sama matra*. *Satmya* is of two types- *desha satmya* and *shareera satmya* . *Vyadhi satmya* is considered under *aushadhi*, *rtu satmya* under *Kala*, *pramana satmya* under *samyak yoga*.

According to *dina* – *vamana* in early morning.

Table.no 01 . According to rogi.

Rogi	Aushada sevana kaala
Balavan	Empty stomach
Durbala	Laghu, pathya ahara

Aushadha aveksha kaala.

Bhuktadau (2) , bhukta samyukta. , Bhukta madhye, grasa, Bhukta paschat , Grasantara, Muhurmuhu , Samudga.

Table no. 02. Aushadha sevana kala.

Vikruti	Kala
Apana vayu vikruti	Before food
Samaan vayu vikruti	Madhya bhojana
Vyana vayu	After morning breakfast
Udana vayu	After food intake at

	night
Prana vayu	Along with each morsel
Kasa, swasa, pipasa etc vyadhi	Repeatedly consumed
Hikka	Samudga
Aruci	Along with tasty food.

Table no. 03 Vyadhi aveksha kaala.^[3]

Roga	
Jwara	Peya, kashaya, ksheera, sarpi, virechana. (In interval of 6days)

1-6 th day of jwara	Peya
7-12 th day	Kashaya
13-18 th day	Siddha ksheera
19 -24 th day	Siddha ghruta
25 th day	Virechana.

Jeerna linga aveksha kaala.

The *aushadha* should be consumed after the appearance of below mentioned lakshanas.

Kshudha, utpatti of *mala*, *mutra Vegas* and their *nivrutti*, *laghuta* in *shareera*, *shareera shuddhi*,

Because they indicate the lakshana of *pacana* of *ahara* and *aushadha dravyas*.

Rtu aveksha kaala.

The *chaya*, *prakopa*, *prashamana* etc should be taken into consideration along with *ahara*

vihara to be adopted and to be avoided in particular *rtu* should be kept in mind and followed.

Table no. 04 .Rtu and roga sambandh.

<i>Rtu</i>	<i>Roga</i>
<i>Vasanta</i>	<i>Kaphaja</i>
<i>Sharad</i>	<i>Pittaja</i>
<i>Varsha</i>	<i>Vataja.</i>

Table no. 05 .Relation of dosha and ahoratra.

<i>Dosha</i>	<i>Ahorata</i>
<i>Vataja</i>	End of the day and night, end of <i>varsha rtu</i>
<i>Pittaja</i>	Mid of the day and night
<i>Kaphaja</i>	Early morning and night

Table no. 06 .Dosha and ayu sambandh. [4]

<i>Vata</i>	<i>Vruddhavasta</i>
<i>Pitta</i>	<i>Yuvavasta</i>
<i>Kapha</i>	<i>Balyavasta</i>

Table no. 07. Dosha and ahara paka relation.

<i>Vataja</i>	<i>Jirnanta</i> (after digestion)
<i>Pittaja</i>	<i>Jiryamana</i> (at the time of digestion)
<i>Kaphaja</i>	<i>Bhukta matra</i> (after food intake)

Visesha kala.

Consideration according to *Vyadhi, rtu, dina ratri, vaya, bhojana* is *visesha kala*.

Pramana aveksha samyak yoga.

The *alpa matra aushadha* given to the patient is not able to destroy the disease in the similar manner as the small quantity of water cannot put off the fire. Same as that *ausadha* given in excess quantity is also not useful inturn it is *dosha vardhaka* . , same as the excess water destroy the plants.

Satmya aveksha samyak yoga.

Any food substance which is habituated to a particular person in a particular geographical area,even if they are not conducive or not wholesome to body and mind, it should not be withdrawn instantaneously. If any unwholesome food is prohibited instantly the person may not be benefited from it.

DISCUSSION

Shad aveksha kala is an unique contribution of *Acharya charaka*, in which the *kala* is to be known in relation to *dina,atura , bhesaja, vyadhi, jirna linga* and *rtu aveksha kala* .

Dina aveksha kala.

The administration of *Aushadha* depends on day, afternoon, evening and night. *Dosas* are exhibiting diurnal variations. Which vary according to phase of digestion and age, which has got special clinical significance since diseases due to vitiation of a particular *dosa*

aggravates during respective periods. Ex. In *ushna rtu snehana* should be done at night, in *sheeta rtu* at day time, , *vamana* should be done at *purvahna*, *virecana* at *pratah kala* etc.

Atura aveksha kala.

Some medicines are to be administered at specific conditions of patient. Like in *sthula pramehi* type of medicine administered is *apatarpana* in *pragbhakta kala*.

Aushadha aveksha kala.

The *kala* in consideration with *bhesaja* is *aushadhaveksha kala*. Ex. In *krisha* patient *bhesaja* is administered in *adho adhbhakta kala* as the *gati* of *udana vayu* is active in this *kala* which facilitates the activity of *bhesaja* to enhance the strength of the upper part of the body. *Samudga kala: bhesaja* administered before and after meal. This *kala* acts on *vyana*, *apana*, *udana* which is time for medicine administration in *vataja prameha*, and *sukradosha*. (*sushrut nidana sthana 1/20*.) Even various other factors influencing *bhesaja kala* are *dushya*, *desha*, *bala*, *anala*, *satva*, *ahara*, *prakriti*, *vaya*, *linga* etc. And also type of *aushadhi dravya* like *rasayan aushadha* in *pratah kala* as the *srotas* are devoid of aggravation of *kala* (A. S. Su. 23/13).

Vyadhi aveksha kala.

In *arsa – pragbhakta* , in *grahani – madhyabhakta* etc. With help of involved *dosa* in *samprapti*, the *bhaisajya kala* for any disease can be decided.

Jirna linga aveksha kala.

Ahara parinamana occurs in three phases as *ama*, *jiryamana* and *jirnavastha*, in which medicine is administered at *jirnavastha* and when *agni* is stimulated, *srotas* are open. *Bhesaja* administered in *ama* and *jiryamana avastha* will aggravate *vyadhi*, as *ahara* will have interaction with *aushadha*. *Agni* necessary for *bhesaja paka* will be deviated towards *ahara* in *ama* and *jiryamana avastha*.

Rtu aveksha kala.

Snehana should be done with *sarpi* in *sharad rtu*, *taila* in *pravrut*, *majja* and *vasa* in *madhava*. *Shodhana* procedures like *vamana* in *vasanta*, *virecana* in *sharad* etc.

Medicines must be administered along with the food which is *satmya*(wholesome) to the patient . Medicines given with (*satmya*) food nourish the body quickly and do not create much untoward effects. The physician treating the patients simply with recipes, without consideration of *desha*, *kala* etc., may commit mistakes. If these six *kala* are not taken into consideration and treatment is administered to the patient then the patient should face the difficulty or death occurs. Dosage is carefully determined by your doctor and can be affected by age, weight, kidney and liver health, and other health conditions. Many medications need to reach a certain level in bloodstream to be effective. They need to be

given at specific times, such as every morning, to keep that amount of drug in the system.

Taking a dose too soon could lead to drug levels that are too high, and missing a dose or waiting too long between doses could lower the amount of drug in the body and keep it away from working properly. One of the recommendations to reduce medication errors and harm is to use the "five rights": the right patient, the right drug, the right dose, the right route, and the right time. Look-alike/sound-alike medication names can result in medication errors. Misreading medication names that look similar is a common mistake. These look-alike medication names may also sound alike and can lead to errors associated with verbal prescriptions.

Taking medicine on time, as prescribed, is essential to making sure your body has an effective amount of the drug at all times. If not, this can cause the disease to develop a resistance to the medicine or simply prolong the amount of time it takes to feel better.

The Centers for Disease Control and Prevention estimates that not taking medicine on time accounts for up to 50 percent of disease treatment failure.

There are two main reasons these instructions are given:

1 . To make sure you absorb the proper amount of medication. Drugs are large

chemical structures that can be sensitive to the conditions in the stomach.

2 .To reduce side effects involving the stomach. Sometimes food can protect the stomach from getting irritated. Therefore, some drugs such as ritonavir or zidovudine (AZT) may be taken with food to lower the risk of stomach upset or nausea.

Some medicines need to be taken "before food" or "on an empty stomach". This is because food and some drinks can affect the way these medicines work. For example, taking some medicines at the same time as eating may prevent your stomach and intestines absorbing the medicine, making it less effective. Alternatively, some foods can interact with your medicine, either by increasing or decreasing the amount of medicine in your blood to potentially dangerous levels, or levels that are too low to be effective. Some foods can neutralise the effect of certain medicines. Some examples of foods or drinks that can interact with medicines include: grapefruit juice , cranberry juice, foods high in vitamin K, such as leafy green vegetables, salt substitutes or food supplements high in potassium, such as bananas.

Food can remove active ingredients of medicine through chelation process. Certain food contain mineral such as calcium and ferum. Certain medicines such as

biphosphonates and ciprofloxacin will react and bind themselves to the minerals. This process is called chelation process and will cause the medicines to deactivate. Thus, such medicines should be taken before food. Absorption of certain medicines enhanced by bile secretion . Bile secretion enhances absorption of certain medicines such as tacrolimus, carbamazepine and griseofulvin, thus such medicines are suitable to be taken after food.

Rate of gastric emptying : Fatty food will reduce rate of gastric emptying. Reduction in rate of gastric emptying will reduce absorption rate of the drug. Physical adsorption : Certain medicines such as digoxin are easily adsorbed on high-fiber foods. Thus, such medicines should not be taken with high-fiber foods.

Food effects on central nervous system : Food and beverages containing alcohol will cause depression on central nervous system. Certain medicines such as chlorpheniramine, hydroxyzine, dexchlorpheniramine and triprolidine can cause sleepiness and drowsiness. Thus, such medicines should not be taken with alcoholic foods or beverages. Alcohol will potentiate the effects of the medicines.

Treatment → Adherence → Outcomes

The WHO defines adherence to long-term therapy as “the extent to which a person's behavior—taking medication, following a diet,

and/or executing lifestyle changes—corresponds.^[5]

CONCLUSION

The success of *chikitsa* is based on proper planning of usage of medicines, their proper dose and proper time of administration. By ascertaining signs and symptoms of *dosha* indicated , one shall treat curable diseases by (therapies having) qualities opposite to disease and causative factors after proper consideration of the dose and time of administration. Hence proper knowledge of *shad aveksha kala* plays an important role in deciding *bhaishajya*. In *chikitsa shad aveksha kala* is comprehension of all factors which are to taken into consideration. In which *dina, aushadha, rtu* are *lokagata* and *vyadhi, jirna linga, aturavastha* are *purusa gata* factors which are essential for establishing *dhatusatmya* . In contemporary science chronotherapy can be considered as a part of *shad aveksha kala*.

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