

REVIEW ARTICLE

Vyadhibala and its Assessment – A Narrative Review

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ABSTRACT

Ayurveda is a comprehensive medical system based on ancient medicine. To become an expert and achieve dominance in clinical approaches, one must possess a thorough comprehension of science. In clinical medicine, the first stage is a thorough evaluation of the patient, which is followed by the planning of appropriate therapies. If a doctor starts treating patients without properly diagnosing the condition, achieves the desired result by accident, and does not become well-known. Conversely, a doctor will undoubtedly succeed if he gives medications following a correct diagnosis and develops the primary course of care after taking the morbidity of pathogenetic variables, strength, location, season, etc., into account. *Charak* described *Roga Pariksha* and *Rogi Pariksha* for the diagnosis and prognosis of a disease. *Rogabala* can be assessed by *Nidana Panchakas*, i.e., *Nidana* (etiology), *Purvarupa* (premonitory signs and symptoms), *Rupa* (signs and symptoms), *Upashaya* (explorative theories), *Samprapti* (pathogenesis) along with the knowledge of *Sadhyasadyata*, *Ama-Nirama Avastha*, *Upadrava* (complications), *Arista* (bad prognostic indicators), and the efficiency of *Chikitsa Chatuspada*. Assessing *Rogabala* is essential for proper diagnosis, treatment, prognosis, and academic research in Ayurveda. It determines severity, predicts disease progression, and guides treatment intensity. A well-researched study on *Rogabala* can bridge traditional knowledge with modern clinical applications, improving the effectiveness of Ayurvedic treatments.

1. INTRODUCTION

Ayurveda, the science of life, maintains the health of a healthy individual and cures the disease of a patient. At present, people are suffering from different kinds of diseases, which are idiopathic, immunosuppressive, and diseases of different origins. As per *Astanga Hridaya*, the term *Roga* refers to the imbalance in the proportions of *Doshas*.^[1] The word *Roga* refers to any kind of pain or discomfort that will be observed in diseased people. *Roga* is derived from *Ruk* or *Ruja*. Assessment of the strength of a *Roga* is very important for a clinician for the diagnosis, prevention, and treatment. Before giving any kind of treatment, one has to identify the actual illness the individual is suffering from, and then only the physician has to give appropriate medications. *Rogabalas* here stands for the strength of *Roga*, the *Avastha*, or stages of *Roga*, whether it will be cured or become chronic with the production of disabilities in a patient or may cause death of the patient. The following factors have to be employed during the proper diagnosis of the disease.

- The degree of vitiation of *Doshas*.
- Involvement of *Dhatu*, *Mala*, and *Srotas* in the manifestation of disease.
- The presence of *Ama* in the body, whether in *Kostha* or a different location.

If the person is giving the medicine without making the appropriate assessment of *Roga* and *Rogi Bala*, then the person may not respond to the medicine, or even if he responds, that may not be judged by a physician and cannot predict the prognosis of the disease. During the examination of a patient, the role of *Sodhasha Kala* (Physician, patient, attendant, and medicine) is very much essential to determining the *Rogabala*. Untrained *Chikitsaka*, unsupportive patients, inappropriate *Oushadha Dravya*, and unskilled *Upacharaka* lead the disease to the *Upadrava Avastha*, which is difficult to treat. Before prescribing any therapeutic procedure, the physician should examine his *Ayu*, *Agni*, *Ritu*, *Vayah*, *Deha*, *Bala*, *Satwa*, *Satmya*, *Prakriti*, and *Desha* for the understanding of *Rogabala* and *Rogibala*.

2. MATERIALS AND METHODS

The concept is derived from an analysis of Ayurvedic literature. Resources on *Rogabala Pariksha* have been gathered and assembled.

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Charaka Samhita, Susruta Samhita, Astangahridaya, Yogaratnakara, and commentaries on *Samhitas*, recent publications, and principles of Ayurveda are viewed properly in this study.

2.1. Literature Review

Concept of *Vyadhibala*:

- (a) *Nidan Panchak*
- (b) *Sadhya-Asadhyata of Roga*
- (c) *Upadrava-Udraka Availability*
- (d) *Vyadhi Avastha*
- (e) *Tulya Doshha Dhusyatwam-Atulya Ritu*
- (f) *Ama-Nirama Avastha*
- (g) *Arista Laksha*
- (h) *Availability of Chikitsa Chatushpada.*

2.1.1. *Nidana Panchak*

Nidana Panchaka consists of five key diagnostic tools:

1. *Nidana* (Etiological factors) – Causes of disease
2. *Purva Rupa* (Premonitory symptoms) – Early warning signs
3. *Rupa* (Symptoms) – Manifested disease symptoms
4. *Upashaya* (Relieving & aggravating factors) – Factors that affect the disease
5. *Samprapti* (Pathogenesis) – Disease progression.

Each of these factors contributes to assessing *Vyadhi Bala* (disease strength and severity).

2.1.1.1. *Nidana (Causes) and Vyadhi Bala*^[2]

The stronger the causative factors, the stronger the disease^[3] (*Vyadhi Bala*). Continuous *Nidana* leads to chronicity and difficulty in treatment. Example: Mild *Nidana* (e.g., occasional junk food) leads to Mild *Rogabala* (e.g., simple indigestion). Strong *Nidana* (e.g., long-term faulty diet and alcohol) leads to Strong *Rogabala* (e.g., liver cirrhosis) [Table 1].

2.1.1.2. *Purva Rupa (Premonitory Symptoms) and Vyadhi Bala*

More intense *Purva Rupa*^[4] leads to stronger disease. If *Purva Rupa* appears in multiple systems, the disease is deep-seated. Example: *Prameha* (Diabetes): If symptoms such as increased thirst, fatigue, and slow wound healing appear early, *Vyadhi Bala* is strong.

2.1.1.3. *Rupa (Symptoms) and Vyadhi Bala*

More severe symptoms lead to Stronger *Vyadhi Bala*.^[5] The number of symptoms, intensity, and organ involvement help in assessing disease severity. Example: *Jwara* (fever): Mild fever (low-grade temperature and mild fatigue) leads to Weak *Vyadhi Bala*. Severe fever (high temperature, delirium, and convulsions) leads to Strong *Vyadhi Bala*.

2.1.1.4. *Upashaya-Anupashaya (Relieving/Aggravating Factors) and Vyadhi Bala*

If a disease responds quickly to simple treatments, its *Vyadhi Bala* is weak. If it does not respond or worsens with common treatments, its *Vyadhi Bala* is strong.^[6] Example: A patient with hyperacidity (*Amlapitta*): If relief is achieved with mild dietary changes, it leads to Weak *Vyadhi Bala*. If symptoms persist despite strong medicines lead to Strong *Vyadhi Bala*.

If there is doubt that given arthritis is *Amavata* or *Sandhivata*, in that condition, if the application of oil relieves pain, then it is *Sandhivata*, and if aggravation of pain occurs, then it is *Amavata*.

2.1.1.5. *Samprapti (Pathogenesis) and Vyadhi Bala*

Longer, deeper, and more complex *Samprapti* leads to Stronger *Vyadhi Bala*. If a disease reaches *Sthana Samshraya*^[7] (tissue invasion) or *Bheda Avastha* (complications), it is more difficult to cure. Example: *Asthma* (*Tamaka Shwasa*): If *Samprapti* is limited to occasional attacks leads to Weak *Vyadhi Bala*. If *Samprapti* progresses to chronic bronchitis or COPD, it leads to Strong *Vyadhi Bala*.

Nidana Panchaka helps in the early detection^[8] of severe diseases by analyzing *Purva Rupa* and *Rupa*, determines treatment intensity based on *Upashaya* and *Samprapti*, predicts prognosis (*Sadhya-Asadhyata*) of the disease, helps in preventing disease progression by controlling *Nidana* and *Samprapti*.

2.1.2. *Sadhya-Asadhyata of Roga*

Assessing *Sadhya-Asadhyata*^[9] is a key factor in evaluating *Rogabala* because it helps in the following:

1. Understanding disease severity
2. Deciding treatment strategy
3. Predicting prognosis
4. Preventing unnecessary treatments for incurable diseases [Table 2].

2.1.3. *Upadrava and Udraka*

**Upadrava* (Complications) & Its Role in *Rogabala* Assessment – *Upadrava* refers to complications that arise during the course of a disease due to improper management, dosha imbalance, or systemic weakness. Acharya Charaka defines it as a secondary disease occurring due to the primary disease.

Rogabala^[10] Assessment by *Upadrava*:

1. Indicates Disease Strength and Severity – More severe complications lead to Stronger *Rogabala*. Example: Uncontrolled diabetes (*Prameha*) leading to diabetic ulcers (*Vrana*) shows that the disease is deep-seated and strong.
2. Determines Prognosis^[11] (*Saadhya-Asaadhyata*) – Diseases with frequent or severe *Upadrava* are more difficult to cure. Example: *Jwara* (fever) leading to delirium (*Moha*) or convulsions (*Akshepaka*) indicates a poor prognosis.
3. Helps in Treatment Planning – If *Upadrava* is mild, it leads to *Shamana Chikitsa* (palliative treatment), which may be enough. If *Upadrava* is severe, leads to *Shodhana Chikitsa* (detox therapies like *Panchakarma*) is needed. Example: *Amavata* (rheumatoid arthritis) causing heart disease (*Hridaya Upadrava*) requires stronger treatment.

**Udarka* (Sequelae) and Its Role in *Rogabala* Assessment – *Udarka* refers to the aftereffects or residual symptoms that remain even after the primary disease is cured. These occur when the disease is strong, deep-seated, or improperly treated.

Rogabala Assessment by *Udarka*:

1. Indicates Chronic Disease or Recurrence Risk - Diseases leaving behind long-term *Udarka* suggest strong *Rogabala* and a risk of recurrence. Example: *Tamaka Shwasa* (bronchial asthma) leaving behind chronic breathlessness indicates persistent dosha imbalance.
2. Determines Need for *Rasayana* Therapy - If *Udarka* is present, rejuvenation therapy (*Rasayana*) is needed to restore health. Example: Post-fever weakness (*Jwara Udarka*) may need *Bala*-boosting herbs like *Ashwagandha*.
3. Helps Differentiate Between *Sadhya* and *Yapya Vyadhi* – If *Udarka* persists, it leads to *Yapya* disease. (manageable but not fully curable). If there is no *Udarka*, then the disease is completely *Sadhya* (curable).

2.1.4. *Vyadhi Avastha*

The process of manifestation of disease demonstrates different Vyadhi Avastha, which takes place among the contributory factors of disease, i.e., dosha, dushya, agnimandya, etc.

2.1.4.1. Vegavastha and Leena Avastha^[12]

Vegavastha is the stage of attack. Avegavastha – Stage in between attacks of the disease. The stage between the attacks where the Srotovaigunya is present even though sometimes it is not manifested as a disease. Doshas remain increased and dormant and can produce an attack of disease when the condition is favorable to it. E.g., Certain diseases show Vegavastha and Avegavastha – Tamakshwas, Vishamjwara, Apasmara.

2.1.4.2. Dosha Paka and Dhatu Paka Avastha^[13]

Dosha Paka (Maturation of Doshas) – It refers to the pathological transformation of Doshas due to prolonged aggravation. Example: *Pitta Dosha Paka* in Jwara (fever) leading to high fever, burning sensation, and delirium. *Dhatu Paka* (Destruction of Dhatus) – When aggravated Doshas enter deeper Dhatus (tissues), they cause tissue degeneration and destruction. Example: *Asthi Dhatu Paka* in *Sandhigata Vata* (Osteoarthritis) leading to joint deformities. If only *Dosha Paka* is present, then the disease is still treatable. If *Dhatu Paka* has begun, then, the disease is deep-seated and harder to cure.

2.1.4.3. Nava-Jeerna Avastha^[14]

Nava Avastha (Acute/Fresh Stage) – The disease is newly developed, often within the first few days. The Doshas are in an active/aggravated state but have not deeply affected Dhatus (tissues). Symptoms are more intense but easier to treat if addressed early. Examples: Acute fever (Nava Jwara), early-stage joint pain in Amavata (rheumatoid arthritis), and Jeerna Avastha (Chronic/Mature Stage). The disease has been present for a long time, often weeks, months, or years. The Doshas are settled in deeper Dhatus, leading to complications. Symptoms may be mild or intermittent but difficult to cure due to long-standing doshic imbalance. Example: Chronic diabetes (*Jeerna Prameha*), long-standing arthritis (*Jeerna Amavata*)

2.1.4.4. Uttan-Gambhira Avastha^[15]

These are the stages in which superficial (*Uttan*) and deeper (*Gambhira*) dhatus, respectively, are affected. Sushruta has described the condition as “Avagadha.” In *Gambhira Avastha*, there is massive destruction of deeper dhatus. In diseases such as Vatarakta, we can clearly identify the types by differentiating the symptoms.

2.1.4.5. Antarvegi Avastha/Bahrvegi Avastha

Antarvedi Avastha (Internalized Disease Stage) – The disease fails to express itself outwardly and remains trapped within the body. The Doshas are unable to exit through natural channels, leading to deeper tissue damage. Often associated with chronic diseases, complications, and poor prognosis.

Example: Chronic Amlapitta (Hyperacidity) leading to Gastric Ulcer.

2.1.4.5.1. Bahirvegi Avastha (Externalized disease stage)

The disease successfully expresses itself outwardly through the body's natural routes. The Doshas are eliminated, preventing deep-seated damage. Often associated with acute diseases, better prognosis, and easier management. Example: Acute diarrhea eliminating toxins through loose stools.

2.1.4.6. Asukari and chirakari

Ayurveda classifies diseases based on their nature and duration, which directly influences *Rogabala* [Table 3].

2.1.4.7. Dhatugata Avastha

Superficial Dhatu involvement (*Rasa* and *Rakta*) leads to Weak *Rogabala*. Deeper Dhatu involvement (Mamsa, Meda, Asthi, and Majja) leads to Stronger *Rogabala*. Ojas depletion (Sukshma Dhatu involvement) → Very strong *Rogabala*, life-threatening. Example: Kushta^[16] (Skin disease in Rakta Dhatu stage) → Weak-to-moderate *Rogabala*. Kushta affecting Majja Dhatu (like Leprosy) → Strong *Rogabala*, difficult to cure.

2.1.5. Ama Nirama Avastha

“Ama” is a vital concept in Ayurveda, signifying undigested food material or toxins resulting from inefficient digestion. If a disease is in Ama Avastha (toxic, undigested state) → Stronger *Rogabala*, requires Langhana (lightening therapy), Deepana-Pachana (digestive treatments). If in *Nirama Avastha* (detoxified state) → Weaker *Rogabala*, easier to manage with Shamana therapy. Example: Amavata^[17] (rheumatoid arthritis in the Ama stage) has a stronger *Rogabala* than Nirama Amavata.

2.1.6. Tulya Dosha Dushyatwam and its effect on Rogabala

Tulya Dosha Dushyatwam refers to a condition where the aggravated doshas and the dushya (affected tissues) share the same qualities (guna). Effect on Disease Strength: Since similar gunas reinforce each other, the dosha-aggravated condition affects the dushya more intensely, leading to stronger and more severe diseases. Example: If Kapha dosha (cold, heavy, and moist qualities) affects Kapha-dominant tissues (like mucus membranes), diseases such as chronic sinusitis or bronchitis become more severe and persistent.

2.1.6.1. Atulya Ritu (Unfavorable Season) and its effect on Rogabala

Atulya Ritu refers to a season that is not favorable for the body's doshic balance. Effect on Disease Strength: If a disease occurs in a season that worsens the dominant dosha, the disease becomes more intense and difficult to cure. Example: A Pitta-aggravated disease (like hyperacidity) occurring in Sharad Ritu (autumn) (which is also Pitta-dominant) will be more severe. A Vata disorder (like arthritis) occurring in Hemanta Ritu (early winter) (which increases Vata) may become chronic and painful.

2.1.7. Arista

The features that definitely indicate^[18] the death of the patients are referred to as Arista. It helps in:

- (1) Early detection of fatal cases – If Arishta Lakshanas are present, treatment may be futile. If no Arishta is present, the patient has a chance of recovery.
- (2) Deciding treatment approach – Without Arishta: Intensive treatments such as Panchakarma can be tried. With Arishta: Palliative care (comfort-focused treatment) is preferred.
- (3) Ethical decision-making – Helps physicians avoid unnecessary treatments in terminally ill patients. Allows family counseling about the patient's prognosis.

2.1.8. Role of Chikitsa Chatuspada in assessment of Rogabala

To summarize, each of the Chikitsa *Chatuspada*'s elements contributes significantly to the overall assessment of *Rogabala* through a multifaceted lens, ensuring an integrated and person-centered approach in Ayurveda [Table 4].

3. RESULTS

The result of a *Rogabala* assessment in Ayurveda is an evaluation of the strength or severity of a disease, which helps determine the most appropriate treatment approach. It is part of a broader diagnostic system that includes:

Rogabala – strength/severity of the disease *Rogibala* – the strength of the patient *Agnibala* – digestive/metabolic strength *Chetasabala* – mental strength

3.1. Possible Outcomes of *Rogabala* Assessment

3.1.1. Mild *Rogabala*

- Disease is not aggressive
- Simple or minimal treatments may suffice
- Good prognosis.

3.1.2. Moderate *Rogabala*

- Disease has some severity
- Requires a combination of therapies and close monitoring
- Prognosis depends on timely and appropriate intervention.

3.1.3. Severe *Rogabala*

- Disease is aggressive, potentially chronic, or life-threatening
- Strong or specialized treatments are necessary
- Prognosis may be guarded, depending on the patient's strength.

The result guides the physician in selecting:

1. The dosage and type of medication
2. Whether to start with detoxification (*Shodhana*) or palliative therapy (*Shamana*)
3. The duration of treatment
4. Supportive therapies such as diet and lifestyle modifications.

4. DISCUSSION

Rogabala, or the strength of a disease, is notable in Ayurveda as it influences disease prognosis and guides therapeutic decisions. It essentially equates to the severity and complexity of an illness, taking into account the individual's overall health status and the disease's inherent nature.

In the assessment of *Rogabala*, Ayurvedic medicine takes a holistic perspective, addressing factors of both the disease and the patient. The disease-related aspects include the type and intensity of the disease, whether it is acute or chronic, and the involved body tissues or doshas. The patient-centered aspects encompass age, overall strength, digestive ability, mental resilience, and the influence of hereditary factors, all of which can affect disease progression and resistance to therapy. Moreover, Ayurveda recognizes the importance of assessing the imbalance between doshas (Vata, Pitta, Kapha) and the affected "dhatu" or tissue to comprehend the disease's pathophysiology. For instance, chronic diseases indicate a major imbalance and require more diligent and extensive treatment, suggesting a stronger *Rogabala*.

Assessing *Rogabala* is crucial as it determines the course of treatment. When *Rogabala* is strong, gentle treatment methods are used, while in cases where it is weak, stronger treatments may be implemented. This approach showcases how Ayurveda stresses individualized care, with treatment plans tailored to the individual's health and the disease's characteristics rather than adopting a one-size-fits-all model. Further research in understanding *Rogabala* could potentially guide the development of more targeted and personalized treatment strategies in Ayurveda, reinforcing its significance in health care.

5. CONCLUSION

The assessment of *Rogabala*, or the strength of disease in Ayurvedic medicine, offers a deepened insight into disease prognosis and personalized treatment management. This multifaceted concept integrates numerous factors, including the nature and intensity of the disease, involvement of doshas or tissues, and the overall health, age, and mental state of the patient. Concepts such as Ama and Agni are central to this assessment, symbolizing the disease's toxicity and the patient's digestive strength, respectively, both of which potentially affect disease severity and the patient's ability to recover. Moreover, the *Chikitsa Chatuspada*, which includes the doctor, caregiver, patient, and medicinal substances, provides an extensive framework for evaluating *Rogabala*. This integrated approach aids the doctor in making informed decisions, administering treatment plans that are both safe and effective for the patient, and recognizing the role of the caregiver and the importance of appropriate medicinal substances.

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Nil.

11. DATA AVAILABILITY

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Table 1: Correlation of *Nidana Panchaka* with Disease Strength (*Vyadhi Bala*)

<i>Nidana Panchaka</i>	Weak <i>Vyadhi Bala</i>	Moderate <i>Vyadhi Bala</i>	Strong <i>Vyadhi Bala</i>
<i>Nidana (Cause)</i>	Short-term, mild cause	Moderate exposure	Long-term, intense cause
<i>Purva Rupa (Early Signs)</i>	Few, mild symptoms	Noticeable symptoms	Multiple, severe premonitory signs
<i>Rupa (Symptoms)</i>	Mild, localized	Moderate, systemic involvement	Severe, multi-organ involvement
<i>Upashaya (Relief Factors)</i>	Quick response to simple remedies	Partial relief with treatment	No relief worsens with treatment
<i>Samprapti (Pathogenesis)</i>	Simple, early-stage	Intermediate stage	Chronic, advanced stage with complications

Table 2: *Sadhya-Asadhyata of Roga*

Parameter	<i>Sadhya (Curable)</i>	<i>Krichra Sadhya (Difficult but Curable)</i>	<i>Yapya (Manageable)</i>	<i>Asadhya (Incurable)</i>
Dosha Involvement	Mild Dosha aggravation	Deep-seated Dosha imbalance	Chronic Dosha dysfunction	Doshas have caused irreversible damage
Dushya (Tissue Involvement)	Superficial tissue damage	Moderate tissue involvement	Deep tissue involvement, but manageable	Permanent tissue damage
<i>Vyadhi Swabhava (Nature of Disease)</i>	Acute, short-term	Subacute can become chronic	Chronic but controllable	Progressive and fatal
Response to Treatment	Quick recovery	Slow but possible	Needs lifelong management	No complete cure

Table 3: *Asukari and Chirakari Roga*

<i>Vyadhi Swabhava</i>	Disease Nature	Effect on <i>Rogabala</i>	Examples
Sudden onset (<i>Aashukari</i>)	Acute, fast-developing disease	Strong <i>Rogabala</i> if severe	Jwara (fever), Sannipata Jwara (septic fever)
Slow onset (<i>Chirakari</i>)	Chronic, slow-progressing disease	Moderate to strong <i>Rogabala</i> , deeper dosha involvement	<i>Prameha</i> (Diabetes), <i>Amavata</i> (Rheumatoid Arthritis)
Self-limiting (<i>Swabhavabala Pravritta</i>)	Resolves on its own	Weak <i>Rogabala</i> does not require aggressive treatment	Simple cold, minor digestive disturbances
Progressive (<i>Doshabala Pravritta</i>)	Worsens over time	Strong <i>Rogabala</i> , needs aggressive treatment	Cancer (<i>Arbuda</i>), Parkinson's (<i>Kampavata</i>)

Table 4: Role of *Chikitsa Chatuspada* in the assessment of *Rogabala*

Factors	Weak <i>Rogabala (Curable Disease)</i>	Strong <i>rogabala (Incurable Disease)</i>
<i>Bhishag (Physician's Role)</i>	Experienced doctor→Accurate diagnosis, proper treatment	Inexperienced doctor→Misdiagnosis, ineffective treatment
<i>Dravya (Medicine Quality)</i>	Pure, potent, and specific medicines available→Faster recovery	Poor-quality or unavailable medicines→Treatment failure
<i>Upasthata (Nurse/Attendant)</i>	Proper care, monitoring, and diet management →Supports healing	Lack of care, neglect in diet or medicine→Delayed recovery
<i>Rogi (Patient's Role)</i>	Strong <i>Prakriti</i> , good immunity, compliance →High chance of cure	Weak <i>Prakriti</i> , poor immunity, mental stress→High risk of complications