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“CLINICAL SIGNIFICANCE OF RUPA IN AYURVEDIC DISEASE DIAGNOSIS”

Dr. Snehal Uttamrao Ranvir¹, Dr Gauri Atmaram Mulik²

1. PG Scholar, Department of Rognidan evum Vikriti Vigyan, Loknete Rajarambapu Patil Ayurvedic Medical College & Hospital, Post Graduate Institute & Research Centre, Urun-Islampur, Sangli Road, Tal. Walwa, Dist. Sangli, Maharashtra
2. Guide & HOD, Department of Rognidan evum Vikriti Vigyan, Loknete Rajarambapu Patil Ayurvedic Medical College & Hospital, Post Graduate Institute & Research Centre, Urun-Islampur, Sangli Road, Tal. Walwa, Dist. Sangli, Maharashtra

Abstract:

Ayurveda, the ancient science of life, provides a comprehensive framework for disease diagnosis through the concept of Nidana Panchaka, which includes Nidana (etiology), Purvarupa (prodromal symptoms), Rupa (clinical features), Samprapti (pathogenesis), and Upashaya (therapeutic tests). Among these, Rupa represents the stage of complete manifestation of disease (Vyakti Avastha), where characteristic signs and symptoms become clearly evident. Acharya Charaka defines Rupa as the Lakshanas that confirm the presence of a particular disease and enable accurate identification¹. It reflects the interaction of vitiated Doshas with specific Dhatus and Srotas, resulting in clinically observable features.

Rupa plays a crucial role in diagnosis as it provides definitive evidence of disease and helps in differentiating between similar pathological conditions. Unlike Purvarupa, which indicates the early stage of disease, Rupa denotes the fully developed stage where Dosha-Dushya Sammurchana has progressed sufficiently to produce distinct clinical manifestations. Classical texts such as Sushruta Samhita and Ashtanga Hridaya also emphasize the

importance of Lakshanas in disease identification and clinical decision-making^{2,3}. The nature, severity, and combination of Rupa further aid in assessing Dosha predominance and disease progression.

Keywords: Rupa, Vyadhi Utpatti, Prognosis, Sadhyasadyata, Rognidan, Predictive Ayurveda

INTRODUCTION

Ayurveda, the ancient science of life, emphasizes a systematic and holistic approach to disease diagnosis and management. The primary objective of Ayurveda is not only to treat diseases but also to maintain the health of healthy individuals through preservation of equilibrium among Dosha, Dhātu, Mala, and Agni. For accurate understanding and diagnosis of disease, Ayurveda describes a comprehensive framework known as Nidana Panchaka, which includes Nidana (etiological factors), Purvarupa (premonitory symptoms), Rupa (clinical features), Samprapti (pathogenesis), and Upashaya–Anupashaya (therapeutic tests). Among these, Rupa holds a central position as it represents the stage of complete clinical manifestation of disease (Vyakti Avastha), where the disease becomes clearly identifiable through its characteristic signs and symptoms.

Acharya Charaka defines Rupa as the specific Lakshanas that confirm the

presence of a disease and help in its precise identification¹. These manifestations arise due to the interaction of vitiated Doshas with susceptible Dhatus and Srotas, leading to Dosha-Dushya Sammurchana and eventual expression of disease. Unlike Purvarupa, which indicates the early and subtle stage of disease, Rupa denotes the fully developed stage where the pathological process has progressed sufficiently to produce distinct and recognizable clinical features. The nature, combination, and severity of these features not only confirm the diagnosis but also provide insight into Dosha predominance, stage of disease, and extent of tissue involvement.

From a clinical perspective, Rupa plays a crucial role in differential diagnosis, assessment of disease severity, and formulation of appropriate treatment strategies. Classical texts such as Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya emphasize the importance of

Careful observation of Lakshanas for accurate diagnosis and management. In modern medicine, a similar approach is followed where diagnosis largely depends on clinical features supported by investigations. Thus, Rupa can be correlated with the symptomatic stage of disease, serving as a bridge between classical Ayurvedic principles and contemporary clinical practice. A thorough understanding of Rupa enhances diagnostic accuracy, supports timely intervention, and strengthens the overall effectiveness of Ayurvedic clinical practice.

Aim: To study and analyze the concept of Rupa in Ayurveda and its role in disease diagnosis.

Objectives :

1. To explain the concept of Rupa as described in Ayurvedic classics
2. To understand the role of Rupa in disease identification and differentiation
3. To evaluate the clinical importance of Rupa in diagnosis and management

Materials and Methods

Study Design: Conceptual review study based on classical Ayurvedic texts.

Source of Data: Classical texts such as Charaka Samhita, Sushruta Samhita, Madhav Nidaan and Ashtanga Hridaya

Relevant modern medical literature on clinical features and diagnosis

Inclusion Criteria: References explaining Rupa in Nidana Panchaka Disease-specific Lakshanas mentioned in classical texts

Method of Analysis: Collected data was analyzed and interpreted descriptively.

व्याख्यातदेव व्यक्तां यातं
रूपमित्यभिधीयते ।
संस्थान व्यंजनं लिङ्गं लक्षणं चिह्नमाकृति ॥
(माधवनिदान) 9/7⁴

The verse gives a clear definition and understanding of Rupa in Ayurveda. It explains that the same condition or features which have already been described earlier (Vyākhyāta)—namely the Purvarupa (premonitory symptoms)—when they attain full manifestation (Vyaktatā), are termed as Rupa. In other words, the subtle, initial indications of a disease, when they become (clearly expressed and observable), transform into Rupa, which represents the evident clinical stage of the disease. Thus, Rupa is not something entirely new but is the developed and fully expressed form of earlier symptoms.

The second part of the verse provides various synonyms for Rupa, including Sansthana (form or structure), Vyanjana

(manifestation), Linga (sign), Lakshana (characteristic feature), Chihna (mark), and Akṛti (appearance)¹. These terms collectively denote all the observable and identifiable features through which a disease is recognized in a patient.

Although each term has a slightly different literal meaning, in this context they are used interchangeably to emphasize that Rupa encompasses all forms of clinical expression of a disease. Therefore, this verse highlights that Rupa represents the manifested, and diagnostically important stage of disease, where its signs and symptoms become fully evident and useful for accurate identification and treatment.

तदेव व्यक्तां यातं रूपमित्यभिधीयते ।

संस्थान व्यंजनं लिङ्गं लक्षणं चिह्नमाकृति ॥

⁵ (माधवनिदान)

The verse explains the concept of Rūpa (manifested symptoms) in Ayurveda in a clear and systematic way. It states that the same features which were previously present in an unmanifested or subtle form—such as Pūrvārūpa (premonitory symptoms)—when they attain full manifestation (Vyaktatā), are termed as Rūpa. In other words, Rūpa represents the stage where the disease becomes (clearly expressed), and its signs and symptoms become directly observable and useful for

diagnosis. Thus, it emphasizes that Rūpa is not a completely new entity but the fully developed and evident expression of earlier subtle changes occurring in the body.

The second part of the verse lists various synonymous terms for Rūpa, such as Sansthāna (form or structure), Vyanjana (manifestation or expression), Liṅga (sign), Lakṣaṇa (characteristic feature), Chihna (mark), and Ākṛti (appearance). All these terms collectively indicate the different ways in which a disease presents itself and becomes recognizable. Though each term has a slightly different literal meaning, they are used interchangeably here to highlight that Rūpa includes all observable clinical features of a disease.

Therefore, this verse establishes that Rūpa is the clearly manifested, diagnostically significant stage of disease, encompassing all visible and identifiable signs that help the physician understand and confirm the nature of the

“ज्ञानार्थं यानि चोक्तानि व्याधिलिङ्गानि संग्रहे ।

व्याधयस्ते तदात्मे तु लिङ्गानीष्टानि नामयाः ॥⁶

The verse from the Charaka Samhita

explains the relationship between Vyādhi (disease) and Liṅga (signs and symptoms) in Ayurveda. It states that the signs and symptoms of diseases which are described in classical texts are primarily taught for

the purpose of knowledge and understanding (Jñānārtha), and are termed as Vyādhi-liṅga—that is, indicators that help in identifying a disease. These are studied separately in theory so that a physician can learn how to recognize different diseases based on their characteristic features. However, the verse further clarifies that when these same signs and symptoms are actually present in a patient at the time of manifestation (Tadātva)¹¹, they are not merely indicators but are considered the disease itself (Vyādhi). In practical clinical application, the disease is known only through its manifestations; there is no separate existence of disease apart from its observable signs and symptoms. Thus, what is studied as Liṅga in theory becomes Vyādhi in practice. This highlights an important Ayurvedic principle that symptoms are not just external markers but are the very expression of the disease process. Therefore, the verse emphasizes that Rūpa or Liṅga serves a dual role—first as a tool for learning and diagnosis, and ultimately as the direct manifestation of the disease in the patient, making it essential for accurate clinical understanding and treatment.

पूर्वरूपाणि सर्वाणि⁷

The phrase from the Charaka Samhita (Indriya Sthāna, Chapter 5) highlights an

important prognostic principle in Ayurveda. It refers to the condition in which all the premonitory symptoms (Pūrvārūpa) of a disease appear together in a patient. Pūrvārūpa are the early, subtle, and often indistinct signs that indicate the impending manifestation of a disease before it becomes fully expressed as Rūpa. The classical implication of this statement is that when all Pūrvārūpa manifest completely (Sarvāṇi), it indicates a severe disturbance in the body and a highly advanced stage of disease progression. Such a condition is considered to have a poor prognosis (Asādhya or difficult to cure), because the disease process has become deeply rooted and extensively spread within the body. Normally, only a few Pūrvārūpa appear before the disease manifests, allowing scope for early intervention and prevention. However, when all premonitory signs are present simultaneously, it reflects a loss of physiological balance and diminished capacity of the body to resist or reverse the pathology. Thus, this statement emphasizes the clinical importance of early detection. Recognizing Pūrvārūpa at an initial stage allows the physician to intervene before full manifestation (Rūpa) occurs. But when all such signs are present together, it signals that the disease has progressed

beyond the early stage and may be difficult to manage effectively. Therefore, this concept serves as a critical guideline in prognosis and highlights the importance of timely diagnosis and treatment in Ayurvedic practice.

तत्र व्याधेर्लक्षणं नाम यद् दृष्टं स्पृष्टं श्रुतं च ज्ञायते⁹

This statement from Sushruta Samhita explains the concept of Rūpa through the term Lakṣaṇa (symptoms). It states that the features of a disease (Vyādhi Lakṣaṇa) are those which can be perceived through direct observation and examination, such as by seeing (Dṛṣṭa), touching (Sprṣṭa), and hearing (Śruta). In other words, these are the clinically observable and perceptible manifestations through which a physician understands and diagnoses a disease.

This aligns closely with the concept of Rūpa in Ayurveda, where Rūpa refers to the clearly manifested stage of disease. The emphasis here is on clinical examination (Parīkṣā), meaning that a disease is known only through its observable signs and symptoms. Thus, Lakṣaṇa in Sushruta Samhita effectively corresponds to Rūpa, as both denote the expressed, perceptible, and diagnostic features of a disease.

Therefore, this shloka highlights that the physician must rely on sensory-based

clinical observation to identify disease, reinforcing that Rūpa is the practical and visible expression of the underlying pathological process.

रूपं तु व्याधिविज्ञानं लक्षणैः उपलक्ष्यते¹⁰

In Ayurveda, as presented in the Ashtanga Hridaya, Rūpa refers to the manifested clinical features through which a disease is recognized and diagnosed. The above statement implies that the knowledge of a disease (Vyādhi Vijñāna) is achieved through its Lakṣaṇa (symptoms), which are nothing but the expressed form of the disease. These features become evident only after the disease has progressed from its initial subtle stage (Pūrvārūpa) to a clearly manifested stage.

The text emphasizes that a physician must rely on these observable and identifiable signs to understand the nature, severity, and progression of the disease. Thus, Rūpa serves as the practical basis for diagnosis, as it represents the stage where the disease becomes (clear) and distinguishable.

Similar to other classical texts, Ashtanga Hridaya supports the idea that while early symptoms may hint at disease, it is the fully developed manifestations (Rūpa) that confirm its presence. Therefore, Rūpa is considered essential for accurate clinical judgment and effective treatment planning

The commentary clarifies that this is not correct. The transformation from Pūrvārūpa to Rūpa does not occur in totality (Kṛtsna) nor strictly in a fixed partial manner (Ekadeśa). Instead, it is an undetermined (Anirdhārta) manifestation, where certain indistinct and unexpressed (Avyakta) premonitory signs collectively become clearly expressed and take on the role of disease indicators (Vyādhi-liṅga). To explain this, an analogy is given: just as smoke (Dhūma), even without distinguishing its specific source like different types of fuel (e.g., grass, leaves), is sufficient to indicate the presence of fire (Vahni), similarly, the general manifestation of symptoms indicates the disease without requiring all specific premonitory signs to fully appear. Furthermore, it is explained that when all Pūrvārūpa manifest completely, the disease becomes incurable (Asādhya), but when only some manifestations occur, the disease remains curable (Sādhya). Therefore, not every Pūrvārūpa like yawning automatically becomes Rūpa, because such symptoms are already expressed earlier in a subtle form and are associated with many other unmanifested signs. Also, Pūrvārūpa and Rūpa do not occur at the same time (Asamānakālatva), which further prevents their complete identification with each other. Thus, Rūpa

is specifically that stage where previously unmanifested or indistinct signs become clearly expressed and clinically useful for diagnosis, while Pūrvārūpa remains an earlier, predictive stage.

Result :

The study of classical references from texts such as Madhava Nidana and Charaka Samhita reveals that Rūpa represents the clearly manifested stage of disease, arising from the progression of Pūrvārūpa into a fully expressed form. It was observed that Rūpa serves as a direct indicator (Vyādhi-bodhaka) of disease, playing a crucial role in clinical diagnosis. The analysis also shows that multiple synonymous terms such as Liṅga, Lakṣaṇa, Chihna, Ākṛti, and Vyanjana are used interchangeably to describe the observable manifestations of disease. Furthermore, it was found that Rūpa is neither the intrinsic nature (Svarūpa) of the disease nor merely its property (Dharma), but rather the manifested expression that enables recognition of the disease. The relationship between Vyādhi and Lakṣaṇa was also clarified, indicating that while they are conceptually distinct in theory, they become practically inseparable at the stage of manifestation.

Discussion :

The concept of Rūpa holds central importance in Ayurveda, as it bridges the gap between the internal pathological process (Samprāpti) and external clinical recognition. The findings highlight that although Pūrvārūpa provides early indications of disease, it is Rūpa that confirms the diagnosis due to its स्पष्ट (clear and observable) nature. The discussion also resolves classical controversies regarding whether Rūpa is identical with the disease itself, its property, or its effect. It becomes evident that Rūpa functions as a diagnostic tool (Vyādhi-pratipatti-nimitta), not as the disease essence itself, thereby avoiding logical contradictions such as Svātmani Kriyā Virodha (self-action inconsistency).

Additionally, the analysis of commentaries clarifies that the transformation from Pūrvārūpa to Rūpa does not occur in totality but partially (Ekadeśa), ensuring that not all diseases become severe or incurable. The analogy of smoke indicating fire further strengthens the understanding that even partial manifestation is sufficient for diagnosis. Thus, Rūpa represents a clinically practical and observable stage, making it indispensable for physicians. The discussion also emphasizes that Rūpa and Pūrvārūpa occur at different times (Asamānakālatva), reinforcing their

functional distinction despite their sequential relationship.

Conclusion:

In conclusion, Rūpa in Ayurveda is defined as the fully manifested and observable expression of disease, which evolves from Pūrvārūpa and serves as a definitive tool for diagnosis. It encompasses all clinical signs and symptoms that clearly indicate the presence of a disease and allow accurate identification by the physician. Although conceptually distinct from Vyādhi, in practical application, Rūpa represents the disease itself through its manifestations. The classical texts consistently emphasize that Rūpa is neither the intrinsic nature nor merely a property of disease, but its expressed form essential for clinical understanding. Therefore, the proper knowledge of Rūpa is fundamental for diagnosis, prognosis, and effective treatment in Ayurvedic practice.

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