A conversation with Vaidya C. P. Shukla in Jamnagar

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INTRODUCTION

A quote from Charaka Samhita depicts the entire world as a teacher, suggesting Vaidyas should study other systems of medical knowledge in addition to Ayurveda. Chandrakant Prabhushankanar Shukla, former Dean of the Institute of Post Graduate Training and Research in Ayurveda, Gujarat Ayurveda University, Jamnagar, has practiced this vision himself for over five decades. He is known as ‘Charaka Vaidya’ for his profound knowledge of Charaka Samhita, and his expertise in putting it to practice. Though past 80, he still works as an Ayurveda physician, but supplements standard Ayurvedic practice with modern tools and methods of investigation. He is very forward thinking.

During a recent visit to Jamnagar, I discussed various aspects of research methodology with him [Figure 1]. He talked about methods of drug research and clinical trials, and commented that many links to inventions and practices of Ayurveda had been lost in the dark period of sociopolitical instability. He also underlined the need for instituting programs of research and development in Ayurveda.

Shuklaji is very keen on study of basics. He suggests in-depth study of Charaka Sutrasthana Chapter 26 and Vimanasthana Chapter 8. He explains “drug research should consider Paraadi Gunas as parameters,[1] and also practical aspects like market availability, multiple dosage forms, and quality control. Drug research should consider all steps mentioned in Charaka Vimanastana, including collection, preservation, processing, and use according to patient specific criteria. Clinical research should consider outcome parameters related to Sharira, Indriya, Sattva and Atma (the body, senses, higher personality, and spirit), these being components of Ayu (Life). Statistical aspects of clinical research are also mentioned in the Samhitas. ‘Samkhya’ is a word derived from ‘Samyak Jnana’ (knowledge in totality)[1]. The concept of probability is termed Praayah and referred to in various clinical decision-making contexts.

Shukla is very keen on reading Charaka. He says “Interpretation of sutras is a very basic but important aspect of understanding Ayurveda. Most pathogenetic processes are clearly mentioned in the classics. For example, complications due to increased sugar in Diabetes is termed ‘Maadhuryat Cha tanoratah’. The Sutra ‘Vit Sveda Mootraambu vahaani Vaayu’[2] clearly indicates pathogenesis of Uremia. We have to remember the Samhitas especially in the context of laws of nature. Nature tries to heal disease conditions, so Ayurveda’s guidelines assist natural processes. Many diseases offer examples where Paachana is required, and the symptom Jvara appears. Jvara is required for Pakvaavastha of diseases. Presently we hardly give any attention to this thought, and it could be the cause of disease recurrence, and compromised immune status.”

Vaidya Shukla’s thoughts on any aspect of disease are always clear and straightforward. He strongly supports use of modern techniques for diagnosis. “Interpretation of these techniques within the Ayurvedic paradigm is what is ultimately required. Minute considerations of Doshas, Gunas and their combinations help in precise diagnosis and results of treatment. For example, Vatavyadhis can be
classified according to pathogenesis and main symptoms like loss of function, Kampa, Shoola, Shosha, Graha. Cardiac disorders can be classified as organ related (e.g. hypertrophy of heart), functional (for example, tachycardia) and conduction related (e.g. bundle branch block, arrhythmia). We should use relevant scientific advances for diagnosis and assessment of efficacy. Modern techniques should not deny underlying principles,” he stipulates.

He explains the need for Ayurveda-based outcome parameters in research. “Considering the definition of Chikitsaa as Prakriti-Sthapana, we have to focus on Rugna Prakriti and related Avayava Prakriti, in addition to symptoms. Symptoms of Dhatusamya should be assessed. Vikaropashama (alleviation of symptoms) along with improvement in Dehabala, Agnibala and Chittabala should be measured in any Ayurveda based research. Many times effects on interventions are expected on the broader levels of Sharira, Indriya, Mana and Atma. Many modern drugs though effective in relieving symptoms, fail to improve Rugnabala.”

He shared his experiences of more than half–a-century of clinical practice, suggesting very practical tips. “Many times patients with diagnosed disease visit Ayurveda physicians. In such cases, we have to think of Hetu, disease progress, and involved Srotas while prescribing rasayana drugs. Interpretation of modern pathogenesis in Ayurvedic terms is essential. For example, we have to consider Meda Dhatu related aspects in the case of fatty degeneration of liver, and we can think of Mamsa Dhatu in the treatment of liver cirrhosis. Treatment of renal diseases should include rasayana for Meda Dhatu”.

“Reading Samhitas thoroughly, application of Sutras in the present context, and emphasis on diagnostic parameters is required. Many concepts like Samhanana, should also be considered from anatomical and functional perspectives,” he added.

Talking with Shuklaji is always a great experience. As can be seen, he throws new light on many concepts by pointing to references in the Samhitas. Always citing their shlokas (verses), he explains fundamentals with an orientation towards their application in ways that not only stimulate thinking, but also bridge the gap between modern methods and ancient wisdom. What better introduction to the potential advantages of Integrative Medicine?

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REFERENCES

3. Ibid. Chikitsasthana 20/16.
4. Ibid. Chikitsasthana 30/329.

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