

REVIEW ARTICLE

TRIVIDHA PARIKSHA: A FUNDAMENTAL APPROACH IN CLINICAL RESEARCH

Abhilasha Kumari^{1*}, Naresh Sharma², Puneet Sharma³, Vividha Mahant⁴, Madhu Bala⁵ and Riyanka Devi⁶^{1,5,6}P.G. Scholar 1st Year, Department of P.G. Studies in *Ayurveda Samhita* and *Siddhanta*, Shiva Ayurvedic Medical College and Hospital Chandpur, Distt. Bilaspur, Himachal Pradesh, India.²Dean Academics & Head, Deptt. of P.G. studies in *Ayurveda Samhita* and *Siddhanta*, Shiva Ayurvedic Medical College and Hospital Chandpur, Distt. Bilaspur, Himachal Pradesh, India.³Reader, Deptt. of P.G. Studies in *Ayurveda Samhita* and *Siddhanta*, Shiva Ayurvedic Medical College and Hospital Chandpur, Distt. Bilaspur, Himachal Pradesh, India.⁴Assistant Professor, Deptt. of P.G. Studies in *Ayurveda Samhita* and *Siddhanta*, Shiva Ayurvedic Medical College and Hospital Chandpur, Distt. Bilaspur, Himachal Pradesh, India.***Corresponding Author: Dr. Abhilasha Kumari**P.G. Scholar 1st Year, Department of P.G. Studies in *Ayurveda Samhita* and *Siddhanta*, Shiva Ayurvedic Medical College and Hospital Chandpur, Distt. Bilaspur, Himachal Pradesh, India.

Article Received on 24/03/2024

Article Revised on 14/04/2024

Article Accepted on 04/05/2024

ABSTRACT

Ayurveda is a traditional Indian system of medicine. It is a comprehensive system of medicine which helps in maintaining the health of individuals by preventing disease in healthy and treating disease in diseased one. *Ayurveda* mentioned various approaches for diagnosis of diseases as right diagnosis help in treating diseases properly. *Trividha Pariksha*^[1] i.e. *Darshana*, *Sparshana* and *Prashna* is one of the approach for diagnosis of diseases. *Pariksha* means examining and observing patients in all aspects. This article presents the concept of *Trividha Pariksha* according to *Ayurveda* classics and modern literature and to understand how *Trividha Pariksha* gives the direction for right diagnosis of diseases.

KEYWORDS: *Trividha Pariksha*, *Ayurveda*, modern medicine.

INTRODUCTION

Purushartha Chatustayam i.e. *Dharma*, *Artha*, *Kaama* and *Moksha*^[2] are attained by healthy individuals, but due to change in various intrinsic and extrinsic factors there is increased proneness towards different types of ailments and hence patient should be examined thoroughly for right diagnosis as without diagnosis the treatment of disease is not possible.

Pariksha works as important mode of investigation and examination and serves as a basis for validation and verification of scientific knowledge. *Ayurveda* classical texts have mentioned a variety of examinations in the form of *Rogi Pariksha* i.e. *Trividha Pariksha*, *Shadvidha Pariksha*, *Ashtavidha Pariksha* and *Dashvidha Pariksha* for diagnosis and management of diseases.

In Present Modern Scenerio, there are various examinations and diagnostic methodologies but *Trividha Pariksha* i.e. *Darshana*, *Sparshana*, *Prashna* are base for all of them.

AIM

To expand the existing knowledge regarding the concept

of *Trividha Pariksha* and applicability of *Trividha Pariksha* in performing clinical research.

OBJECTIVES

1. To explore the *Ayurveda* classical texts for description of *Trividha Pariksha*.
2. To describe *Trividha Pariksha* according to modern literature.
3. To give a direction for right diagnosis of diseases.

MATERIAL AND METHOD

Material related to concept of *Trividha Pariksha* is collected from *Ayurveda* classical texts i.e. *Charaka Samhita*, *Sushruta Samhita*, *Astanga Hridaya*, their commentaries and textbook of modern medicine. Other sources include journals, research works, offline and online content having description related to the topic.

1. दर्शन परीक्षा

दर्शन स्पर्शन प्रश्ने: परीक्षित च रोगिणम्^{3A} (अ०ह०सू०1/22)दर्शनेन दृष्ट्या^{4I}

(अ०ह०सू०1/22 सर्वांगसुन्दरा टीका)

वर्ण संस्थान प्रमाणच्छायाः, शरीरप्रकृतिविकारौ, चक्षुःवैषयिकाणि परीक्षेत^{5I}

यानि चान्यान्यनुक्तानि तानि चक्षुषा (च०वि०4/7)

चक्षुरिन्द्रियविज्ञेयाः शरीरोपचयापचयायुः लक्षणबलवर्णविकारदयः^{6I}

(सु०सू०10/5)

Darshan Pariksha can be co-related with Inspection

Table No: 1.

Inspection ^[7]
Body built, proportion, position and posture.
Gait.
Skin abnormalities like discolouration, bruising, lesions, swelling, scars, stretch marks, dilated veins, rashes, wounds due to trauma or burn injuries.
Shape of chest / abdomen, type of breathing and the movement of chest / abdominal wall with respiration.
Any bumps, abdominal distension or depression.
Radiological examinations: e. g. X-Rays, CT- Scan, Sonography, ECG etc. are also observed by the examiner visually.

2. स्पर्शन परीक्षा

स्पर्शनेन हस्तकायस्पर्शने^{8I}

(अ०ह०सू०1/22 सर्वांगसुन्दरा टीका)

स्पर्शं च पाणिना प्रकृतिविकृतियुक्तम्^{9I}

(च०वि०4/7)

स्पर्शनेन्द्रियविज्ञेयाः शीतोष्णश्लक्ष्णकर्मशमूदुकठिनत्वादयः स्पर्शविशेषा ज्वरशोफादिषु^{10I} (सु०सू०10/5)**Sparshana Pariksha can be co-related with Palpation^[11] and Percussion.^[12]**

Table No: 2

Palpation	Percussion
Light Palpation – Used for assessing texture, tenderness, pulsations, temperature, moisture, elasticity and masses.	Used to determine the size, consistency, borders of body organs and presence or absence of fluids in body areas.
Deep Palpation - Used to determine the size, shape and position of body organs and helps to detect any organomegaly.	Percussion sounds tell that the organ is:
Light ballottement – Used to detect abnormal fluid in tissues by keeping fingers on skin surface e.g. patellar tap test.	Dense (eg. liver) – Dull sounds
Deep ballottement – Used to detect fluid in abdomen.	Air filled (eg. lungs) – Resonant sounds
	Fluid filled (eg. bladder, stomach) – Tympany sounds
	COPD, Pneumothorax – Hyperresonant sounds

3. प्रश्न परीक्षा

प्रश्नेन पृच्छया^{13I}

(अ०ह०सू०1/22 सर्वांगसुन्दरा टीका)

प्रश्नेन च विजानीयाद् देशं कालं जातिम् सात्म्यमातंकसमत्पति वेदनासमुद्भूयं बलमन्तराग्निम वातमूत्रपुरीषाम् प्रवृत्यप्रवृत्ती कालप्रकर्षादींश्च विशेषान्^{14I}

(सु०सू०10/5)

Prashna Pariksha can be correlated with the history^[15] taking of patients

Table No: 3.

History taking	
1) Name	2) Age
3) Sex	4) Address
5) Occupation	6) Present complaints
7) History of past illness	8) Family history
9) Personal history	10) Socio-economic history
11) Menstrual, obstetric history in case of female patient.	

IMPORTANCE OF TRIVIDHA PARIKSHA IN CLINICAL RESEARCH

For conducting any clinical research one has to collect data and then after its analysis, final conclusion is drawn.^[16] *Trividha Pariksha* can provide primary source of data and it can be collected by *Darshana*, *Sparshana* and *Prashna*. Investigations which are carried out during any trial also use modern technology along with indirect *Darshana Pariksha*. Before and after trial the improvement in sign and symptoms or any side effects of intervention used are also assessed by *Trividha Pariksha*.

DISCUSSION

Trividha Pariksha is blessing for successful clinical practice and research. It helps in proper diagnosis of a disease directly (inspection, palpation, percussion) or indirectly (modern diagnostic techniques like X-ray, MRI, CT scan, endoscopy, USG etc use modern technology along with indirect *Darshana Pariksha*) and prognosis of disease. Though modernization has been done for various diagnostic methods but *Trividha Pariksha* will always have top most priority for the examination purpose. To be good practitioner and researcher, one must have sound understanding of *Trividha Pariksha*.

REFERENCES

1. Kushwaha Harishchandra. *Ayushkamiya Adhyaya*. Chapter-I, Part-I, Verse- 22, *Sarvang Sundara* and *Ayurveda Rasayan* commentary on *Asthang Hridayam Sutra Sthana*. Chaukhambha Orientalia; Varanasi, 2018; 41.
2. Shastri Kashinath, Chaturvedi Gorakhnath. *Deerghanjiviteeya Adhyaya*. Chapter- I, Part-I, Verse-15, *Vidyotini* commentary on *Charaka Samhita Sutra Sthana*. Chaukhamba Bharti Academy; Varanasi, 7.
3. Kushwaha Harishchandra. *Ayushkamiya Adhyaya*. Chapter-I, Part-I, Verse- 22, *Sarvang Sundara* and *Ayurveda Rasayan* commentary on *Asthang Hridayam Sutra Sthana*. Chaukhambha Orientalia; Varanasi, 2018; 41.
4. Kushwaha Harishchandra. *Ayushkamiya Adhyaya*. Chapter-I, Part-I, Verse- 22, *Sarvang Sundara* and *Ayurveda Rasayan* commentary on *Asthang Hridayam Sutra Sthana*. Chaukhambha Orientalia; Varanasi, 2018; 41.
5. Shastri Kashinath, Chaturvedi Gorakhnath. *Trividha Rogavishesh Vigyaniya Adhyaya*. Chapter-4, Part-I, Verse-7, *Vidyotini* commentary on *Charaka Samhita Vimana Sthana*. Chaukhamba Bharti Academy; Varanasi, 707.
6. Shastri Ambika Dutt. *Vishikha Anupravesheeya Adhyaya*. Chapter – 10, Part-1, Verse- 5, *Sushruta Samhita Sutra Sthana*. Chaukhambha Sanskrit Sansthan; Varanasi, 42.
7. Joshi SR, Mehta SP, Mehta Nihar. P.J. Mehta's Practical Medicine. 21st ed. Dr. Shilpa Pradip Mehta; Mumbai, 2018.
8. Kushwaha Harishchandra. *Ayushkamiya Adhyaya*. Chapter-I, Part-I, Verse- 22, *Sarvang Sundara* and *Ayurveda Rasayan* commentary on *Asthang Hridayam Sutra Sthana*. Chaukhambha Orientalia; Varanasi, 2018; 41.
9. Shastri Kashinath, Chaturvedi Gorakhnath. *Trividha Rogavishesh Vigyaniya Adhyaya*. Chapter-4, Part-I, Verse-7, *Vidyotini* commentary on *Charaka Samhita Vimana Sthana*. Chaukhamba Bharti Academy; Varanasi, 707.
10. Shastri Ambika Dutt. *Vishikha Anupravesheeya Adhyaya*. Chapter – 10, Part-1, Verse- 5, *Sushruta Samhita Sutra Sthana*. Chaukhambha Sanskrit Sansthan; Varanasi, 42.
11. Joshi SR, Mehta SP, Mehta Nihar. P.J. Mehta's Practical Medicine. 21st ed. Dr. Shilpa Pradip Mehta; Mumbai, 2018.
12. Joshi SR, Mehta SP, Mehta Nihar. P.J. Mehta's Practical Medicine. 21st ed. Dr. Shilpa Pradip Mehta; Mumbai, 2018.
13. Kushwaha Harishchandra. *Ayushkamiya Adhyaya*. Chapter-I, Part-I, Verse- 22, *Sarvang Sundara* and *Ayurveda Rasayan* commentary on *Asthang Hridayam Sutra Sthana*. Chaukhambha Orientalia; Varanasi, 2018; 41.
14. Shastri Ambika Dutt. *Vishikha Anupravesheeya Adhyaya*. Chapter – 10, Part-1, Verse- 5, *Sushruta Samhita Sutra Sthana*. Chaukhambha Sanskrit Sansthan; Varanasi, 42.
15. Joshi SR, Mehta SP, Mehta Nihar. P.J. Mehta's Practical Medicine. 21st ed. Dr. Shilpa Pradip Mehta; Mumbai, 2018.
16. Sukumar Bargale. Research Methodology and Medical Statistics. Chaukhambha Publications New Delhi, 2018.