

## Unit 1. Kaya, Chikitsa and Kayachikitsa - Nirukti, Paribhasha, Paryaya and Bheda

# काय, चिकित्सा & कायचिकित्सा

**Nirukti (Etymology) • Paribhāṣā (Definition) • Paryāya (Synonyms) • Bheda (Classification)**

(plus a simulated clinical case with justified choice of therapy)

## 1 | Why three words?

Word	Literal idea	What it really means in Ayurveda
Kāya	“That which <b>grows</b> / <b>dwells</b> / <b>changes</b> ”	a) <b>Body as doṣa-dhātu-mala aggregate</b> (structural view) b) <b>Metabolic Fire (Agni)</b> – functional view
Chikitsā	“The act of <b>separating disease from body</b> ”	Any planned measure that <i>prevents, alleviates or eradicates</i> morbidity
Kāya-Chikitsā	“Therapy aimed at <b>Kāya</b> ”	<b>Internal medicine</b> – all non-surgical management centred on correcting <b>Agni</b> & systemic doṣa imbalance

### The two authoritative roots

- “कायो नाम दोषधातुमलसंघातः” – “Kāya is the confluence of doṣa-dhātu-mala.” — Aṣṭāṅga Hṛdaya Sūtra 1 / 7
- “कायोऽन्नं अग्निरुच्यते, तस्य चिकित्सा कायचिकित्सा” – Dalhaṇa on Suśruta Sūtra 1 / 7 : “Here ‘kāya’ denotes **Agni**; treatment of deranged Agni itself is Kāya-chikitsā.”

These twin viewpoints (structural **body** & functional **fire**) explain every later classification.

## 2 | Nirukti ♦ Paribhāṣā ♦ Paryāya ♦ Bheda

### 2-A KĀYA

Aspect	Detail	Classical hook
Nirukti	Kā (to move/grow) + Ay (to exist) → that which <b>exists by ceaseless metabolism</b>	See AH Su 1/7 above
Paribhāṣā	① <b>Sharīra-drishti</b> – “Doṣa-dhātu-mala-saṅghāta” ② <b>Agni-drishti</b> – “Digestive & tissue fire”	Dalhaṇa, Su Sū 1/7 commentary
Paryāya	Sharīra, Deha, Tanu, Gātra	Compiled from Skt. lexicons & Suśruta
Bheda	i. <b>Sthūla vs. Sūkṣma</b> (gross vs. subtle body) ii. <b>Śārīrika vs. Āgneya</b> focus (anatomical vs. metabolic)	Caraka’s dual use of “kāya” in Cikitsā Sthāna intro

### 2-B CHIKITSĀ

Aspect	Detail	Classical hook
Nirukti	“Chikitsā – <b>to keep the cause of disease away</b> ” (चित् + कीट + साय)	Amarakośa & Bhāva-prakāśa quotations

Aspect	Detail	Classical hook
<b>Paribhāṣā</b>	“Yā kriyā vyādhī hāriṇī sā chikitsā” – Any action that destroys disease.	Bhāva-prakāśa Pūrvakhaṇḍa 11
<b>Paryāya</b>	<b>Bheṣaja, Aushadha, Agada, Pathya, Jaayu, Pratikarma</b> etc.	Complete synonym list
<b>Bheda</b>	1 . <b>Śodhana</b> (eliminative) • 2 . <b>Śamana</b> (pacificatory) • 3 . <b>Rasāyana</b> (rejuvenative) • 4 . <b>Vājikaraṇa</b> (reproductive) • 5 . <b>Sattvāvajaya / Daiva-vyapāśraya</b> (psycho-spiritual)	Caraka, Suśruta & later nibandhas divide therapy this way

## 2-C KĀYA-CHIKITSĀ

Aspect	Detail	Classical hook
<b>Nirukti</b>	<b>Kāyasya Chikitsā</b> - treatment of the <b>body / Agni</b>	Term appears as first of Aṣṭāṅga
<b>Paribhāṣā</b>	“Internal medicine that restores <b>Agni &amp; systemic homeostasis.</b> ”	Caraka Cikitsā-sthāna preamble
<b>Paryāya</b>	<b>Antaḥ-parimarjana chikitsā, Agni-chikitsā, Jāṭharāgni-śāmaka kriyā</b>	Later commentaries
<b>Bheda</b>	A. <b>Twofold</b> – ① <b>Āgantu</b> (exogenous) ② <b>Nijaroga</b> (internal)	Caraka Vimān-4 B. <b>Fourfold</b> – Śodhana/Śamana/Rasāyana/Vājikaraṇa as applied specifically to systemic disease

## 3 | Choosing the “TYPE” of Chikitsā - a Simulated Case

### □ Case vignette

A 32-year-old software engineer, long screen-hours, erratic meals, complains of:

- Heavy head & body in the morning
- Dull epigastric burning, bloating after lunch
- Alternating loose & constipated bowel
- Neck stiffness beginning (Manyāstambha grade I)

**Rogī Bala:** Medium | **Agni:** Viṣama | **Nidāna:** Sedentary posture + cold drinks

**Āyurvedic Diagnosis:** Kāyāgni-manda → Āmajīrṇa progressing to Vāta-Kapha Manyāstambha

### Decision grid

Decision step	Reason	Chikitsā-type selected
1. <b>Āma present?</b> → yes (coated tongue, heaviness)	Kapha-āvaraṇa dominance	<b>Langhana / Deepana-Āpācana</b> – Rūkṣa Sweda, Hingvāṣṭaka + Śuṇṭhi-jal
2. <b>Agni weak; toxins mild</b>	No severe dosha load yet	<b>Mrdu Virechana</b> (10 ml Guḍūcyādi-Eranda)
3. <b>Local Vāta-stambha in neck</b>	Posture strain	<b>Bahir-parimarjana</b> – Sesame oil Abhyanga + Valuka Sweda
4. <b>Systemic regulation</b>	Prevent progression	<b>Śamana Aushadhi</b> – Yogarāja-Guggulu 500 mg BID
5. <b>Agni stabilised (~Day 7)</b>	Ready for nourishment	<b>Rasāyana start</b> – Aśvagandhā-Lehya 10 g HS
6. <b>Lifestyle root-cause</b>	Prolonged sitting	<b>Pathya</b> – ergonomic desk, 30-min micro-break, warm lunch routine

**Therefore:** the appropriate initial chikitsā-type = **Śamana-prakṛti Deepana-Āpācana with adjunct Bahir-parimarjana.**

If recurrence or chronicity → upgrade to **Śodhana (Short Yoga-Basti) + long Rasāyana.**

## 4 | Quick-reference Tables

### 4-A Concept matrix

Term	Nirukti (root-meaning)	Paribhāṣā (definition)	Paryāya (synonyms)	Bheda (main subdivision)
<b>Kāya</b>	To go / grow / exist	Body-mass <b>or</b> Agni	Deha, Sharīra, Tanu, Gātra	Sthūla / Sūkṣma ; Sārīrīka / Āgneya
<b>Chikitsā</b>	To cut off disease	Disease-destroying action	Bheshaja, Aushadha, Agada, Pathya...	Śodhana • Śamana • Rasāyana • Vājikarana...
<b>Kāya-Chikitsā</b>	Treating Kāya	Ayurvedic Internal Medicine	Antaḥ-parimarjana, Agni-chikitsā	Āgantu vs. Nija + the 4-fold above

### 4-B Four pillars for every Kāya-Chikitsā plan

Phase	Classical term	What you do
1	<i>Nidāna-parivarjana</i>	Delete the cause → posture, food
2	<i>Śamana / Śodhana</i>	Neutralise or expel doṣa
3	<i>Rasāyana</i>	Re-nourish dhātu & agni
4	<i>Satvavājaya / Pathya</i>	Long-term mind, diet, routine reset

## 5 | Sanskrit Snippets for viva

### Devanāgarī

“सम्प्राप्ति-विघटनमेव चिकित्सा”

“कायोऽत्र अर्णः” – Dalhāṇa

“या क्रिया व्याधिहरणी सा चिकित्सा” – Bhāva-prakāśa “Whatever act removes disease is Chikitsā.”

### English rendering

“Treatment is nothing but breaking the pathogenesis.”

“Here ‘Kāya’ is Agni itself.”

### □ Take-home bullets

1. **Two images of Kāya** – anatomical body **and** metabolic Agni; both need simultaneous care.
2. **Chikitsā = Samprāpti-vighaṭana**; if you can't map the pathogenesis you can't pick the right therapy-type.
3. **Kāya-Chikitsā** begins with the gut – every systemic disease loops back to Agni.
4. In the **simulated case** we selected **Deepana-Pācana + Bahir-parimarjana** first; jumping to heavy Śodhana in the presence of Āma would have been *pratyakūla* (counter-therapeutic).
5. **Rasāyana & Pathya** are not “after-thoughts”; they lock the cure and prevent relapse.