



Unit 30. Enumeration, Nidāna Pañcaka and Sādhya-asādhya-tā of Śīroroga

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A) Śīroroga: Enumeration, Sāmānya Nidāna, Saṃprāpti, Sāmānya Lakṣaṇas, Sādhya-Asādhyata

1) Paribhāṣā and Enumeration (Types)

Śīroroga—diseases of the head (śīras—chief seat of indriyas) comprise doṣaja and viśeṣa types. Ācārya Vāgbhaṭa enumerates the head-diseases discussed in the adhyāya and concludes:

श्लोक :

“सूर्यावर्तः स इत्युक्ता दश रोगाः शिरोगताः” (Aṣṭāṅgahṛdaya, Uttarasthāna 23/20)

Implied list from the same adhyāya:

1. Vātaja śīrastāpa (vāta-dominant)
2. Pittaja śīrastāpa
3. Kaphaja śīrastāpa
4. Raktaja śīrastāpa
5. Sannipātaja śīrastāpa
6. Kṛmija śīroroga
7. Ardhāvabhedaka
8. Śāṅkhaka
9. Sūryāvarta
10. (Anantavāta is described elsewhere in Śālākya, yet many syllabi include it in the global list of śīras-vyādhis.)

Note: In Suśruta’s Śālākya (Uttara-tantra), the classical listing often cited for exam answers includes **11**: Vātaja, Pittaja, Kaphaja, Sannipātaja, Raktaja, Kṣayaja, Kṛmija, Ardhāvabhedaka, Sūryāvarta, Śāṅkhaka, Anantavāta. For this unit we will anchor shlokas from **Aṣṭāṅgahṛdaya Uttarasthāna 23** for nidāna-lakṣaṇa and viśeṣa rūpas, as below.

2) Sāmānya Nidāna (Common Etiology)

Aṣṭāṅgahṛdaya provides a compact nidāna for śīro-roga:

श्लोकाः :

“धूमातपतुषाराम्बु-क्रिडातिस्वप्नजागरैः ॥१॥

उत्स्वेदाधिपुरोवात-बाष्पनिग्रह-रोदनैः ॥२॥

अत्यम्बुमद्यपानेन कुमिभिर्वेगधारणैः ॥३॥

उपधानमृजाभ्यङ्ग-द्वेषादः-प्रतलेक्षणैः ॥४॥

असात्म्यगन्ध-दुष्टामभाष्याद्यैश्च शिरोगताः ॥५॥

जनयन्त्यामयान् दोषाः ॥६॥” (A.H. Uttara 23/1-3)

Vārtā (meaning for study): Smoking/soot (dhūma), sun-exposure (ātapa), cold/frost (tuṣāra), excessive water sports, over-sleeping/keeping awake, profuse sweating, against-wind exposure, suppression of tears, **ati**-water & alcohol intake, worms, suppression of natural urges, aversion to pillow/oiling, constant downward gaze, **asātmyagandha** and **duṣṭa-bhojya**—all vitiate doṣas in **śīras** and produce disease.



3) Saṃprāpti (Pathogenesis)

- **Doṣa-duṣya sammūrchanā** occurs in **śīras** owing to repeated nidānas causing **vāta** prakope (main driver), with **pitta** and **kapha** joining variably.
- **Srotas: Manovaha, Prāṇavaha** and **Raktavaha** srotas in the **ūrdhvajatrugata** sphere get involved; **sirā-jāla sphuraṇa** (pulsation/spasm) and **śīra-sandhi** vedanā evolve.
- **Adhīṣṭhāna: Śīras (uttamāṅga)**—rich in indriya-marma; small doṣa shifts yield large symptom load (śabda/āloka intolerance, bhrama etc.).
- **Kriyākāla:** With continued nidāna, **sthāna-saṃśraya** in śīras → **vyakti** as **śīrastāpa/śīrahśūla** with doṣa-specific bhāvas; **upadrava** like nausea, netra-karṇa involvement ensue.

Diagnostic tip: Mark the **guṇa** profile: **rūkṣa-śīta-laghu** (vāta), **uṣṇa-tikṣṇa** (pitta), **guru-śīta-snigdha** (kapha), along with **raktadūṣṭi** signs.

4) Sāmānya Lakṣaṇas (Common Clinical Features)

- **Śīrah-śūla/śīrastāpa, ghūrṇi** (giddiness), **nidrā-vikāra, karṇa-nāda, āloka-asahatā, bhrūmadhya-lalāṭa** pain, **sirā-jāla sphuraṇa, kandharā/hanusaṅgraha** (neck-jaw stiffness). Many are directly captured in Vāgbhaṭa's verses for **vāta-janya** śirovyādhi:

श्लोकाः (Vātaja śīrastāpa—core picture):

“तत्र मारुतकोपतः ॥३॥
निस्तुद्येते भृशं शङ्खौ, घाटा संभिद्यते तथा ॥४॥
भ्रुवोर्मध्यं ललाटं च पततीवाति-वेदनम् ॥५॥
बाध्येते स्वनतः श्रोत्रे, निष्कृष्येत इवाक्षिणी ॥६॥
घूर्णतीव शिरः सर्वं, सन्धिभ्य इव मुच्यते ॥७॥
स्फुरत्यति सिराजालं, कन्धरा-हनुसंग्रहः ॥८॥
प्रकाशासहता घ्राण-स्रावोऽकस्माद् यथाशमौ ॥९॥
मार्दवं मर्दन-स्नेह-स्वेद-बन्धैश्च जायते, शिरस्तापोऽयम् ॥१०॥” (A.H. Uttara 23/3-7)

5) Nidāna Pañcaka of Śīroroga (Exam-ready)

(i) **Nidāna (Hetu):** As above (A.H. 23/1-3). Add: **vegādhāraṇa, śīrṣa-abhitāpa** (sun/heat), **atipāna, viṣamāhāra, asātmeyendriya-artha-saṃyoga** for the head.

(ii) **Pūrvarūpa (Prodrome):** Dull head heaviness, **tandrā, āloka-asahatā, karṇa-nāda**, mild **ghūrṇi**, eye fatigue; with doṣa-hints—

- Vāta: pricking twinges at **śāṅkha**, intermittent stiffness.
- Pitta: heat, burning, early photophobia.
- Kapha: morning heaviness, nasal ooze, **tandrā**.

(iii) **Rūpa (Vyaktalakṣaṇa):** Doṣa-specific lakṣaṇas (below §B); **śūla/tāpa** pattern (diurnal) and triggers define subtype (e.g., **sūryāvarta** worsens till mid-day).

(iv) **Upadrava: Chardī, mūrccā, jvara, bhrama, netra/karṇa-vyathā, karṇa-nāda;** in kṛmija—**kaṇḍū, pūtitā, siṅghāṇaka**, foul discharge.

(v) **Saṃprāpti:** Doṣa prakopa → śīras-sthāna saṃśraya → sira-daurmanasya, **sirājāla sphuraṇa** (vasospasm/engorgement), **indriya-asahatā** → vyakti as **śīrastāpa/śīrahśūla** with periodicity (e.g., **ardhāvabhedaka**).



6) Sādhyā-Asādhyāta (Prognosis)

General principles (exam line):

- **Eka-doṣaja** (vāta/pitta/kapha) without **dirgha-kāla** and **bāla-vṛddha-garbha** status: **Sādhyā/Kṛcchra-sādhyā**.
- **Sannipāta, kṛmija, raktadūṣṭa, kṣaya-sahita, śaṅkhaka**: **Kṛcchra-sādhyā to Asādhyā** depending on bala.

Supportive ślokas on severity:

- **Śaṅkhaka— vaidyotsava (emergency):**
“पित्तप्रधनेर्वाताद्यैः शङ्खे शोषः सशोणितैः,
तीव्रदाह-रुजाराग-प्रलाप-ज्वर-तृड्-भ्रमाः ;
तिक्तास्यः पीतवदनः क्षिप्रकारी स शङ्खकः ;
त्रिरात्राज्जीवितं हन्ति, सिद्धद्यत्यप्याशु साधितः” (A.H. Uttara 23/16-17)
- **Ardhāvabhedaka—periodic course:**
“अर्धे तु मूर्ध्निः सोऽर्धावभेदकः ; पक्षात् कुप्यति, मासाद्वा स्वयमेव च शाम्यति ;
अतिवृद्धस्तु नयनं श्रवणं वा विनाशयेत्” (A.H. Uttara 23/7-8)
- **Kṛmija—severe, foul, neuro-sensory involvement:**
“सङ्कीर्णैर् भोजनेर्मूर्ध्नि क्लेदिते रुधिरामिषे ;
कोपिते सन्निपाते च जायन्ते मूर्ध्नि जन्तवः ;
शिरसस्ते पिबन्तोऽस्रं घोराः कुर्वन्ति वेदनाः ;
चित्तविभ्रंशजननीर्ज्वरः कासो बलक्षयः ;
रौक्ष्य-शोफ-व्यधन-च्छेद-दाह-स्फुरण-पूतिताः ;
कपाल-तालु-शिरसोः कण्डूः शोषः प्रमीलकः ;
ताम्रच्छ-सिंघाणकता, कर्णनादश्च जंतुजे” (A.H. Uttara 23/12-15)

Clinical take-away for viva: **Śaṅkhaka** can be **prāṇahara** if not rapidly addressed; **ardhāvabhedaka** shows **pakṣika/cyclicity** with potential sensory loss; **kṛmija**—chronic, **kṛcchra-sādhyā**.

B) Doṣaja Śirahśūla: Vātaja, Pittaja, Kaphaja, Sannipātaja

1) Vātaja Śirahśūla (Vātaja Śirastāpa)

Key idea: **Rūkṣa-śīta-cala** guṇas cause pricking, migrating, spasmodic head pain; **āloka-asahatā, karṇa-nāda**, neck-jaw stiffness; **mardana-sveda-bandha** give relief.

श्लोकाः : (already quoted under Sāmānya Lakṣaṇa) (A.H. Uttara 23/3-7)

Nidāna highlights: Exposure to cold/dry wind, **vegadhāraṇa, anātmya vihāra**, fasting, over-exertion.

Upaśaya: Snigdha svedana, gentle bandhana, taila-abhyanga; avoid śīta-vāta provokers.

Sādhyā: Generally **sādhyā/kṛcchra-sādhyā** if recent, in **bala** patient.

2) Pittaja Śirahśūla

Clinical picture: Burning, heat, **jvara, sveda, akṣi-dāha**, worse at night with need for cooling.

श्लोकः :

“शोरोभितापे पित्तोत्त्वे शोर-धूमायनं ज्वरः ;
स्वेदोऽक्षिदहनं मूर्च्छा, निशि शीतैश्च मार्दवम्” (A.H. Uttara 23/9)

Nidāna: **Uṣṇa-tikṣṇa-amla-lavaṇa** āhāra, sun/heat exposure, anger.



Upaśaya: Śītala śīrolepa, ghr̥ta-pāna, virecana where indicated.
Sādhya: Good if promptly treated; raktānvita (raktaja) is more severe.

3) Kaphaja Śirahśūla

Clinical picture: **Guru-stimitatā**, morning heaviness, **tandrā**, **śūnā'kṣi-kūṭatva** (puffiness), **karna-kaṇḍū**, vomiting tendency.

श्लोकाः :

“अरुचिः कफजे मूर्ध्नो गुरु-स्तमित-शीतता ;
शिरानिस्पन्दताऽआलस्यं, रुक्षमन्दाऽहन्यधिकानि” (A.H. Uttara 23/10)
“तन्द्रा, श्नाक्षिकूटत्वं, कर्णकण्डूयनं, वमिः” (A.H. Uttara 23/11)

Nidāna: **Guru-snigdha-śīta** ahāra, day sleep, sedentary habit, kapha-ṛtu exposure.

Upaśaya: **Uṣṇa-tikṣṇa** dīpana-pācana, nasya, śīrodhūma, lepa with kaṭu-tikta dravyas.

Sādhya: **Sādhya** if corrected early.

4) Raktaja & Sannipātaja hints (for viva)

- **Raktaja:**

“रक्तात् पित्ताधिक-रुजः, सर्वैः स्यात् सर्वलक्षणः** (sannipāta)**” (A.H. Uttara 23/11) → bleeding tendencies, **tāpa**, **dāha**, **rāga**; treat as **rakta-pitta** variant with **raktamokṣa** where proper.

- **Sannipātaja:** Mixed signs of all doṣas, **kṛcchra-sādhya**; avoid strong śodhana if bāla is low—prefer **mṛdu-tridoṣa-śamana**.

5) Viśeṣa Rūpas (you must quote in exam)

(i) Ardhāvabhedaka (classical counterpart of recurrent hemicrania/migraine traits)

श्लोकः

“अर्धे तु मूर्ध्नः सोऽर्धावभेदकः ; पक्षात् कुप्यति, मासाद्वा स्वयमेव च शाम्यति ;
अतिवृद्धस्तु नयनं श्रवणं वा विनाशयेत्” (A.H. Uttara 23/7-8)

Key points: Unilateral, periodic (pakṣika), photophobia/phonophobia common; may impair eye/ear if severe.

(ii) Śaṅkhaka (temporal fulminant hemicrania)

श्लोकः (as above) (A.H. Uttara 23/16-17)

Key points: Rapidly progressive, **prāṇāntika** if untreated within **3 nights**; urgency emphasized.

(iii) Sūryāvarta (diurnal crescendo with sun-rise)

श्लोकः

“पित्तानुबद्धः शङ्खाक्षि-भ्रूललाटेषु मारुतः,
रुजं सस्पन्दनां कुर्याद् अनुसूर्योदय-उदयाम् ;
आ मध्यान्हं विवर्धिष्णुः, क्षुद्धतः सा विशेषतः ;
अव्यवस्थित-शीतोष्ण-सुखा, शान्त्यतः परम् ;
सूर्यावर्तः स इत्युक्ता...” (A.H. Uttara 23/18-20)

Key points: Pain rises from sunrise to midday; hunger worsens; relief with temperature stability.

(iv) Kṛmija Śiroroga

श्लोकाः : (quoted above, A.H. Uttara 23/12-15)



Key points: Kaṇḍū, foul discharge, karṇa-nāda, citta-vibhrama, severe pain—kṛcchra-sādhyā.

C) Classification of Headache as per ICHD-3 (for correlation answers)

Primary headaches

1. **Migraine** – with/without aura; menstrual migraine; chronic migraine.
2. **Tension-type headache (TTH)** – infrequent/ frequent episodic; chronic.
3. **Trigeminal autonomic cephalalgias (TACs)** – cluster headache, paroxysmal hemicrania, SUNCT/SUNA, hemicrania continua.
4. **Other primary headaches** – cough/exertional/sexual activity related; hypnic; stabbing; external-pressure; cold-stimulus; primary thunderclap, etc.

Secondary headaches

- Trauma/cranial-cervical disorders; vascular (SAH, arterial dissection), non-vascular (IIH); infection; homeostasis disorders; substance/withdrawal; head-neck structures (sinusitis, TMJ); psychiatric causes.

Painful cranial neuropathies and facial pains

- Trigeminal neuralgia, glossopharyngeal neuralgia; persistent idiopathic facial pain; burning mouth syndrome etc.

Exam use: Map **Ardhāvabhedaka** ↔ **Migraine, TTH** ↔ **Kaphaja/Vātaja śirahśūla with dull band-like pain, TAC traits** ↔ **Śaṅkhaka/Sūryāvarta red flags (autonomic signs, circadian)**—state as **correlation** only.

Rapid Revision (one-minute points)

- Quote **A.H. Uttara 23/1-3** for **Nidāna**.
- Quote **A.H. Uttara 23/3-7** for **Vātaja lakṣaṇas**.
- Quote **A.H. Uttara 23/9-11** for **Pittaja/Kaphaja/Raktaja/Sannipāta** hints.
- Quote **A.H. Uttara 23/7-8** (Ardhāvabhedaka), **16-17** (Śaṅkhaka), **18-20** (Sūryāvarta), **12-15** (Kṛmija).
- Prognosis: **Śaṅkhaka—prāṇāntika (3 nights)**; **Ardhāvabhedaka—pakṣika**; **Kṛmija—kṛcchra-sādhyā**.

Assessment (Exam-oriented)

A. Long Essay (LAQ) — 10 marks

1. **Enumerate Śīroroga. Write the Nidāna Pañcaka and Sādhyā-Asādhyata in detail.** (Include shlokas: A.H. 23/1-3; 3-7; 9-11; 7-8; 16-17; 18-20; 12-15.)

B. Short Essays (SAQ) — 5 marks each

1. **Vātaja Śirahśūla**—nidāna, lakṣaṇa, upaśaya with **A.H. 23/3-7**.
2. **Pittaja & Kaphaja Śirastāpa**—contrast using **A.H. 23/9-11**.
3. **Ardhāvabhedaka**—definition, course, prognosis with **A.H. 23/7-8**.
4. **Śaṅkhaka**—red-flags and emergency nature with **A.H. 23/16-17**.
5. **Kṛmija Śīroroga**—clinical picture with **A.H. 23/12-15**.



C. Short Answers (SA) – 2 marks each

1. Write any **four** nidānas of Śīroroga (quote half-verse).
2. Define **Sūryāvarta** (one śloka line).
3. Mention **two** features suggesting **raktānubandha** in head pain.
4. List **two** srotases implicated in Śīroroga saṃprāpti.
5. State the **ICHD-3** primary headache groups.

D. MCQs – 1 mark each (Answer key below)

1. “...अनुसूर्योदय-उदयाम् ; आमध्याह्नं विवर्धिष्णु...” refers to:
a) Ardhāvabhedaka b) Śaṅkhaka c) **Sūryāvarta** d) Kṛmija
2. “त्रिरात्राज्जीवितं हन्ति...” is stated for:
a) Vātaja b) **Śaṅkhaka** c) Kaphaja d) Raktaja
3. **Kaṇḍū, pūtitā, siṅghāṇaka, karṇa-nāda** are classical in:
a) Vātaja b) Pittaja c) Kaphaja d) **Kṛmija**
4. “स्वेदोऽक्षिदहनं मूच्छा...” belongs to:
a) **Pittotthe śirastāpe** b) Kaphaja c) Vātaja d) Sannipāta
5. **ICHD-3** includes which as a **TAC**?
a) Chronic migraine b) **Cluster headache** c) Hypnic headache d) Medication-overuse headache

Answer key: 1-c, 2-b, 3-d, 4-a, 5-b.

Model Phrasing for Theory Answer Sheets

- Start with **definition + enumeration** (quote “**daśa rogāḥ śirogatāḥ**”).
- Write **Nidāna Pañcaka** with at least **two śloka lines** from **A.H. 23/1-3** and **one** doṣa-lakṣaṇa śloka.
- Add **one viśeṣa** (Ardhāvabhedaka/Śaṅkhaka) with exact śloka line.
- Conclude with **Sādhyā-Asādhyatā** sentences citing **A.H. 23** lines (7-8; 16-17).