

**A STUDY ON NIDANA PANCHAKA AND ROGA-ROGI PAREEKSHA:
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Article Received on 04 March 2026,
Article Revised on 24 March 2026,
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ABSTRACT

The ancient Indian system of medicine, Ayurveda, focuses on the concept of wholeness when it comes to matters involving health and the treatment of disease. Diagnosis (Vyadhi Nirnaya) has been described as the essence of successful therapy, and the classical texts specify such comprehensive methods as Nidana Panchaka and Roga-Rogi Pareeksha. The Nidana Panchaka- system Nidana, Purvarupa, Rupa, Upashaya, and Samprapti form a systematic approach to understanding disease development. In accompaniment, Roga Pareeksha (disease examination) and Rogi Pareeksha (patient examination) are multidimensional since they take a person's physical, psychological, and constitutional features into account. This review compares evidence in classical Ayurvedic literature, commentary, and recent scholarly research on the purpose of these methods of investigation and their relevance

and utility. The results indicate that such holistic evaluations not only help to identify the disease correctly but also make it possible to implement preventive and individually acclimatising approaches to the patient according to his/her constitution (prakriti), his/her way of life, and surroundings. The analogies to modern medical diagnostics testify to the possible complementarities, especially at the level of early stages of diseases and lifestyle diseases. Nevertheless, issues of standardisation, reproducibility, and clinical validation are still there. The paper points out the current importance of these diagnostic systems and the necessity of integrative studies to identify their position in modern medical practice.

KEYWORDS: Nidana Panchaka, Roga Pareeksha, Rogi Pareeksha, Ayurveda, Holistic Diagnosis.

INTRODUCTION

Ayurveda, the traditional medical practice in the world, appreciates overall sense of health, disease, and treatment according to physical, mental, and spiritual dimensions of life. Unlike a reductionist approach of biomedical health systems, *Ayurvedic* theory explains that disease (*Vyadhi*) is the result of imbalances in the *Doshas* (*Vata*, *Pitta*, *Kapha*) in the face of diet, lifestyle and environmental factors. According to this system, correct diagnosis (*Vyadhi Nirnaya*) is cornerstone of its success in treatment, prevention and prognosis.

Nidana Panchaka is a diagnostic master tool that puts disease in order and presents it as a synthesis of five things: *Nidana* (etiological factors), *Purva-rupa* (premonitory symptoms), *Rupa* (cardinal manifestations), *Upashaya* (therapeutic tests) and *Samprapti* (pathogenesis). This code not just acts as an ordered way of finding the origin of the disease; it is also applied to how to prevent diseases by including *Nidana Parivarjana*.

Roga-Rogi Pareeksha, in contrast, is the disease (*Roga*) along with the patient (*Rogi*), and, therefore, it emphasises individualization of diagnosis. Where *Roga Pareeksha* decides the *Doshic* participation, site, or the disease phase, the *Rogi Pareeksha* examines constitutionalistic and the psychological variables through *Ashtasthana Pareeksha* (eight fold examination) and *Dashavidha Pareeksha* (ten fold examination). These assessments achieve personalized diagnostic procedure that renders treatment in harmony with personal constitution (*Prak-riti*), psychological endurance (*Satva*), and Albacity (*Satmya*).

They are a valuable lesson in modern healthcare, where the rate of lifestyle disorders (diabetes, hypertension, and obesity), in general, is increasing rapidly. They have discovered that Ayurvedic diagnostics is aligned with present-day preventative medicine in terms of care that is concentrated on participants and early disease detection. Regrettably, regardless of the relevance, they have a couple of problems such as standardization, clinical verification, integration into contemporary healthcare systems concerns that have to be addressed. The review entails a compilation of classical *Ayurveda* and modern research in their view of subject of relevance of *Nidana Panchaka* and *Roga-Rogi Pareeksha*, their viability, restriction and future potential as an alternative macro diagnostic classification in the sector of healthcare.

***Nidana Panchaka* (Fivefold Diagnostic Tool)**

Definition and Concept

One of the most basic diagnosis principles in *Ayurveda*, *Nidana Panchaka* can be described as systematized research on how, why and in which way diseases develop. It is not focused solely on disease identification, but also on disease causative and prognostic aspects and it is a complete diagnostic and preventive care tool.

Five Components

1. *Nidana* (Etiological factors/causes): *Nidana* are the factors which trigger the onset of illness, such as eating habits, exposures, living style, and mental/stressors. *Nidana Parivarjana* (avoidance of causative factors) is marked as an important primary preventive agent.

2. *Purvarupa* (Prodromal symptoms): *Purvarupa* means the premonitory symptoms preceding commencement of disease in full. The symptoms are warning signs helping the physicians to step in at an early stage.

3. *Rupa* (Cardinal signs and symptoms): *Rupa* refers to the obvious clinical manifestations of a disorder, a form which a disease is defined on. They are like pathognomonic manifestations in the current medical practice.

4. *Upashaya* (Therapeutic test/relieving factors): *Upashaya* is diagnostic in form of observing any relief or aggravation of symptoms by certain therapies interventions e.g., diet, lifestyle changes, or medications. This relates to empirical therapeutic trials that are developed in contemporary diagnostics.

5. *Samprapti* (Pathogenesis): The explanation of the sequence of events in formation of diseases, beginning with original causation and completing with full blown manifestation, is *Samprapti*. It gives information about the severity of the disease, prognosis and suitable treatment measures.

Usefulness in diagnosis and prognosis

When these five dimensions are examined, *Nidana Panchaka* provides a comprehensive picture of a patient and his/her illness.

It assists in discovering root causes, analysing disease stage, and prognosis forecasts, therefore, making sure of an individualized treatment strategy.

Applications in the Early Disease Detection and Prevention

The framework lays stress on preventative treatment by early identification of *Purvarupa* and removal of causative factors. This preventive focus is very votive to the contemporary notions on predictive and preventive medicine.

Comparative perspective on Modern Diagnostic Models

Whereas modern biomedicine has been reduced to laboratory research, imaging and pathological analysis, *Nidana Panchaka* incorporates personal (subjective), clinical (scientific) and therapeutic (*Upashaya*) modalities. Collectively, they suggest the possibilities of *Nidana Panchaka* to become an integrative diagnostic measure of curing methods between conventional wisdom and modern medicine.

Rogi Pareeksha (Examination of Patient)

Ayurveda does not only focus on the evaluation of the disease (*Roga Pareeksha*) but also on a thorough examination of the patient (*Rogi Pareeksha*), therefore, specifying the more holistic and individualized characteristic of the system. As compared to modern medicine, where disease-based diagnostics tend to be given priority, *Ayurveda* does not ignore the constitution, strength and adaptability of the patient hence proving their treatment plan to be personalized.

Trividha Pareeksha

The threefold inspection *Darshana* (inspection/observation), *Sparshana* (palpation and examination by touch), and *Prashna* (interrogation/questioning) are the components of the three fold examination. These approaches offer the vital information about physical looks, touch, and personal health experience of the patient that are like the visual examination, physical examination and history-taking in contemporary diagnosing.

Ashtasthana Pareeksha

There are eight tests they cover: *Nadi* (pulse), *Mutra* (urine), *Mala* (stool), *Jihwa* (tongue), *Shabda* (speech and voice), *Sparsha* (touch/temperature), *Drik* (eyes/vision) and *Akruti* (overall appearance). A combination of these para-meters yields an insight into the nature of systemic imbalances and general health. The modernequivalents are pulse examination, urinalysis, tongue inspection, and neurological assess its.

Dashavidha Pareeksha

This examination a hundred times consists of the *Prakriti* (constitution), *Vikriti* (current disease state), *Sara* (tissue excellence), *Samhanana* (body build), *Pramana* (anthropometry), *Satmya* (habitual adaptation), *Satva* (mental strength), *Aharashakti* (digestive capacity), *Vyayamashakti* (capacity for exercise), & *Vaya* (age) examination. Individualized diagnosis and prognosis are achievable with this comprehensive evaluation hence, a possibility to develop treatment strategies based on physical and psychological strengths.

Applicability to Individualized Treatment and Prognosis

These practices enable *Rogi Pareeksha* to outline a comprehensive patient profile that enables the physician in choosing suitable diet, lifestyle, and therapeutic intervention. It is a holistic, prevention-oriented treatment that has been provided with the integration of aspects of course of constitutional, psychological, and functional issues.

Modern Practice

Current medical practice involves relying on both physical examination and clinical history in addition to psychological assessment to provide care in an individual manner. *Rogi Pareeksha* echoes the same ideas but combines them with more Ayurvedic like notions of prakriti and *Satva*, and therefore is very pertinent within the modern context of personalized and preventive medicine.

***Rogi Pareeksha* (Patient examination)**

The *Ayurvedic* study of the patient known as *Rogi Pareeksha* offers an appropriate body of knowledge framework, the study of understanding the diseased person in relation to health and the disease itself. It includes three great layers: *Trividha Pareeksha-Darshana* (inspection / observation), *Sparshana* (palpation / touch), and *Prashna* (interrogation /questioning) which equates itself to the modern techniques of clinical examination, physical examination and patient history-taking.

This has been elaborated as *Ashtasthana Pareeksha* into a total of eight diagnostic parameters *Nadi*(pulse), *Mutra* (urine), *Mala* (stool), *Jihwa* (tongue), *Shabda* (speech/voice), *Sparsha* (touch/ tempera-*ture*), *Drik* (eyes/vision), and *Akruti* (general appearance). These tools make it possible to thoroughly evaluate the physiological and pathologic state of a patient.

The *Dashavidha Pareeksha* goes beyond evaluation and concentrates on the individual characteristics including *Prakriti* (constitution), *Vikriti* (pathological state), *Sara* (tissue quality), *Samhanana* (bodybuild), *Pramana* (anthropometry), & *Satmya* (compatibility), *Satva* (psychological strength), *Ahara-shakti* (digestive capacity), *Vyayamashakti* (exercise tolerance), and *Vaya* (age). In combination, these parameters inform special therapeutic care, prognosis and lifestyle prescriptions. A multi-dimensional diagnostic model can showcase the holistic approach in *Ayurveda* and can closely resonate with contemporary methods of personal medicine and psychosomatic health care.

Holistic Significance

Rogi Pareeksha and *Nidana Panchaka* combine to put emphasis on body mind and spirit combination in diagnostic practice. *Ayurveda* focuses on preventive health care in which etiological factors (*Nidana*) and constitution of patient (*Prakriti* and *Satva*) are noted, a practice which is like current contemporary approaches of preventive medicine, *Nidana Parivarjana* (eliminating etiological factors). This method also promotes individualized treatment, in which the dietary, lifestyle and therapeutic prescriptions are specific to the patient in terms of constitution & their mental strength. In modern terms it can be compared to holistic and functional medicine where the stress is made to treat the underlying causes of illness, and to consider the physical, emotional, and psychosocial background of the patient.

Modern Significance and Research News

There has been an increased interest in validation of *Ayurvedic* diagnostic tools in recent decades. Experiments involving *Nadi Pareeksha* have showed that it has a potential to correlate pulse data with cardiovascular and metabolic diseases. Much in same line, *Mutra Pareeksha* and *Mala Pareeksha* have also been investigated in diagnosing conditions such as diabetes & gastrointestinal related disorders.

The applicability of these tools is especially apparent in the management of lifestyle conditions like hyper-tension, diabetes, & obesity because due to *Ayurveda* focusing on the constitution-based diagnosis, they are preventable and curable rather than just symptomatically managing the disease. Besides, *Ayurveda* is gaining more credence as an integrative medicine in which evidence-based *Ayurveda* is being introduced along with more regular medical systems. This combination highlights the possibilities of *Ayurveda* to add to individualising models of care, as well as improving healthcare gaps in chronic care and preventive care.

LIMITATIONS AND CHALLENGES

Although using the holistic approach, *Ayurvedic* diagnostic processes have to grapple with a number of problems in modern practice. One key short-coming is the absence of uniform protocols of some *Pareeksha* procedures, including *Nadi* and *Mutra Pareeksha*, as those types tend to depend on subjective choices of practitioners. Modern diagnosis parameters have not been clinically validated on these methods and this slows their adoption in the common areas of healthcare. In addition, problems with documentation, reproducibility, and inter practitioner variability, diminish the fact that there is less reliability in evidence-based research.

FUTURE DIRECTIONS

Standardization and computerizing of *Ayurvedic* diagnostic process should be worked upon in the future with a view to making them accurate and reproducible. Integrative diagnostic models with modern clinical applications but an *Ayurvedic* philosophy may give a better picture of patient health. New research possibilities of method verification in chronic & lifestyle-related diseases, including diabetes, hypertension, and metabolic disorders) exist as well. Building a good clinical evidence can reinforce the position of *Ayurveda* in the system of integrative & preventive health care systems.

CONCLUSION

In combination, *Nidana Panchaka* and *Rogarogi Pareeksha* offer a powerful disease scoring system and patient examination and stands out in terms of disease prevention, personalized attention, and comprehensive wellness.

Despite potential issues in terms of standardization & validation, philosophy of diagnosis as promoted by *Ayurveda* still has relevancy in contemporary practice and can be meaningfully applied with modern medical practices once combined.

REFERENCES

1. Lad V. Textbook of Ayurveda: Fundamental principles. Vol. 1. *Albuquerque (NM): Ayurvedic Press, 2002.*
2. Sharma RK, Dash B. Charaka Samhita: Text with English translation & critical exposition based on Cakrapani Datta's Ayurveda Dipika. Reprint ed. Varanasi: Chaukhambha Sanskrit Series; 2015.
3. Murthy KRS. Sushruta Samhita: Text, English

- translation, notes, appendices, and indices. Vols. 1-3 *Varanasi: Chaukhambha Orientalia, 2012.*
3. Tripathi R. Concept of Nidana Panchaka in Ayurveda and its clinical relevance. *J Ayurveda Integr Med.*, 2019.
 4. Dwivedi LN. Preventive aspects of Nidana Parivarjana in Ayurveda. *Ancient Sci Life*, 2015.
 5. Srikanth N, Kshama R. Clinical importance of Ashtasthana Pareeksha in disease diagnosis. *Ayu.*, 2017.
 6. Shilpa S, Murthy CGV. Understanding personality from Ayurvedic perspective for psychological assessment: A case for prakriti-based classification. *Indian J Psychiatry*. 2011.
 7. Patwardhan B, Mutalik G. Integrative approaches for health: Biomedical research, Ayurveda and Yoga. London: Academic Press, 2017.
 8. Sharma H, Chandola HM, Singh G, Basisht G. Utilization of Ayurveda in health care: An approach for prevention, health promotion, and treatment of disease. Part 1—Ayurveda, the science of life. *J Altern Complement Med.*, 2007.
 9. Hankey A. CAM modalities can stimulate advances in theoretical biology. *Evid Based Complement Alternat Med.*, 2005.
 10. Lad V. Textbook of Ayurveda: Fundamental principles. Vol. 1. *Albuquerque (NM): Ayurvedic Press.*
 11. Tewari PV. *Ayurvediya Vikriti Vigyana and Roga Vigyana*. 2nd ed. Varanasi: Chaukhambha Bharati Academy, 2014.
 12. Srikanth N, Kshama R. Clinical importance of Ashtasthana Pareeksha in disease diagnosis. *Ayu.*, 2017.
 13. Murthy KRS. *Ashtanga Hridaya: Text, English translation, notes, appendices and indices*. Vols. 1–3. *Varanasi: Chaukhambha Krishnadas Academy, 2012.*
 14. Dwivedi LN. Trividha Pariksha: An Ayurvedica pproach to clinical examination. *Int J AyurvedaPharma Res.*, 2018.
 15. Srikanth N, Kshama R. Clinical importance of Ashtasthana Pareeksha in disease diagnosis. *Ayu.*, 2017.
 16. Patwardhan B, Mutalik G. Integrative approaches for health: Biomedical research, Ayurveda and Yoga. London: Academic Press, 2017.
 17. Tewari PV. *Ayurvediya Vikriti Vigyana and Roga Vigyana*. 2nd ed. Varanasi: Chaukhambha Bharati Academy, 2014.

18. Shilpa S, Murthy CGV. Understanding personality from Ayurvedic perspective for psychological assessment: A case for prakriti-based classification. *Indian J Psychiatry*. 2011.
19. Hankey A. Establishing the scientific validity of Ayurveda. *J Altern Complement Med.*, 2010.