

REVIEW OF JIVHA PARIKSHAN: AS DIAGNOSTIC TOOL

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Mahavidyalaya, Pune.**ABSTRACT**

Jivha(Tongue) is important accessory organ in digestive and metabolic system as it helps with taste, mastication, deglutition and speech activity but however examining the jivha image is not an easy task to carry out. In modern medicine various appearance of the jivha related to specific conditions are given and In ayurveda classics acharya has described about how jivha can tell u about imbalance of doshas, state of agni (digestive fire) and koshttha (annavaha strotas) any impairment in it gets reflected by jivha can be evaluated by visually understanding the jivha and with help of different types of pariksha (diagnostic method) given by acharya. Jivha parikshan is one of them helps in prognosis

and diagnosis of disease. Considering importance of jivha this article throws light on various jivha parikshan (examination) techniques its importance and clinical findings in jivha disease pathology making it more easier to reach with modern and ayurvedic view collectively.

INTRODUCTION

Hippocrates and Galen, were studied different characteristic of the jivha. Ayurveda, unani, siddha, chinese medicine systems also considered importance of jivha and included refined methods of jivha diagnosis.^[1] There are lot of study going on all over world on jivha as many reaserchers have tried to collaborate ancient wisdom with modern scientific practices.^[2] *Dashpranayatna* includes jivha.^[3] In ayurveda one of *Dnyanendriya* and *Karmendriya* effective in perceiving their topic only when they are supported by soul-body(sense organ)-mind via which the knowledge is percieved. According to modern science jivha is vital sensory organ that plays role in digestive system of our body describing about shape, colour, coating, texture and also variety of other characteristics that aid in determining patients state of illness. In ayurveda, *acharya Yogratnakara* mentioned the jivha parikshan under ashtvidha

parikshan(Nadi, Mutra, Mala, Shabda, Sparsha, Druka, Akrti And Jivha) Trividha parikshan by *acharya Charaka* (Darshan, Sparshan, Prashna) also used to inspect the any areas of our body. These are simple to do and have lot of value in determining state of physiological and clinicopathological condition of body's digestive and metabolic system. There by with help of this both view the line of management will be easier to design properly.

AIM

- 1) To review jivha parikshan as diagnostic tool.

OBJECTIVE

- 1) To review jivha parikshan as per ayurveda and modern aspect.
- 2) To review jivha parikshan as diagnostic tool for evaluating various kind of disease conditions.

MATERIAL

Ayurvedic Samhita And Their Commentry, Ayurvedic Textbooks, Modern Literature through textual Reference Books, Published Research Articles And Journals, Information available on internet, Various websites Etc.

METHODS

As this is conceptual and textual review, jivha parikshan methods according to ayurveda science and modern literature are discussed

PRAKRUT JIVHA (HEALTHY JIVHA)^[4,5]

Colour: Shyavarakta (uniformly pink or pinkish red)

Shape: Tanu (symmetric with even length andwidth or oval shape)

Moisture: Slakshna (moist i.e neither too dry nor too wet and with transperent layer of saliva)

Coating: Nirlipta or ishatlipta (transperent or thin layer of white coating)

Shuchi (clean without any bad odour or taste)

Movement: Akampa – steady (when protruded)

Other: Free of crack, Deep cuts, Lines, Patches, Bumps, Teeth mark and should be with taste buds which are free of above criteria.

EXAMINATION OF JIVHA (JIVHA)^[6,7]**Position**

- 1) Sitting or Supine,
- 2) Open mouth and protrude the jivha for the clear visualization and observation

Requirement: Good illuminating light source and mouth mirror or Natural sunlight

When jivha parikshan is to be done?

Morning hours as an ideal time (not clearly mentioned in ayurved samhitas but we can descide by taking reference of other pariksha ex. nadi, mutra)

Things should be followed before parikshan

It should be done before brushing as this would disturb the jivha coating, Empty stomach before breakfast, tea, coffee etc.

Examine: Entire oral mucosa, ventral and dorsal surface, move sideways, look for healthy jivha features and the abnormal features if any then it should be noted.

Observation

- 1) Colour 2) Size 3) Shape 4) Surface 5) Movement

Methods for examination

रोगमादौ परीक्षेत ततः नन्तरमौषधं | च.सु 20/20

The physician should examine first thoroughly and treat the patient skillfully. There are various effective diagnostic tool mentioned from which ashtsthana pariksha is the one and also there are other methods:

- 1) *Trividha Pariksha*: Darshan (Inspection), Sparshan(Palpation), Prashna (Interrogation)^[8]
- 2) *Chaturvidha Pariksha*: Pratyksha(Direct Observation), Anuman(Inferential) Aptopdesha(Authorative Statement), Yukti (Experimental)^[9]
- 3) *Shadvidha Pariksha*: With 5 Sense Organ and Prashna^[10]
- 4) *Dashvidha Pariksha*: Prakriti - Vikriti-Sara-Samhanana-Pramana – Satmya- Satva-Aharashakti – Vyayamshakti – Vaya^[11]

The jivha is one of the important organ helps in digestion and metabolic activity (which works as an organ of taste sensation, mastication, deglutition and speech) if any impairment

in this activity which can leads to various physiological and clinicopathological condition. For it we can use *Trividha pariksha* as diagnostic method for jivha parikshan which will leads to proper information about diagnosis and also easy to impliment in the clinical practise.

Jivha parikshan with help of above trividha parikshan methods as per ayurveda and modern aspect collectively given as blow

1) Darshan pariksha (Inspection)

By directly inspecting jivha from tip to root with naked eyes gives us clean findings about the pathology regarding jivha for example –

Doshic jivha: Acharya Yogratnakara has mentioned Vataj, Pittaj, Kaphaj, Sannipataj, Dwandwaj jivha lakshana which helps to know our improper doshic state of body given in table.1 below

Size: 1) Dirghjivha (macroglossia) - Jivha is larger than normal, with indentation of teeth on outer surface.

1) Hriswjivha (microglossia) - Deficient, Atrophic, Thin, Leathery with Concave upper surface, Hollowed out, Thin laterally, there are conditions related to above given in table.

2 below

Colour: Gives general body blood circulation, basic balance of nitrients as any impairment in dosha (Vata, Pitta, Kapha) can leads to colour variation other than normal with their clinical conditions in table. 1 and 3 respectively.

Surface: If vata get affected it will be Kharasparsha(Rough), Sphutita(Cracked) In Sannipataja (tridosha) it will be Sakantaka (Thorny) etc given in table. 1 and other like -

- 1) Fissured jivha - With deep grooves (physiological opening of jivha fissure any trapping of food can lead to inflammation of it)
- 2) Geographic jivha- Irrregularly shaped, red and white patches on dorsal and lateral surface of jivha
- 3) Hairy jivha -Elongation of filiform papillae
- 4) Bald jivha - Smooth surface
- 5) Median rhomboid glossitis - Smooth, nodular, red areas in posterior mid line

All above jivha types with their clinical conditions mentioned in table.4 below

Movements: Normaly jivha is steady when it protruded but any pathological condition in body leads to other than above movement as mentioned in table. 5 below

2) Sparshan pariksha (Palpation)

By using finger and thumb of one hand carefully palpate the whole area of jivha it should feel soft, symmetric with even length and width, with no palpable crack, deep cuts, masses, patches, bumps, teeth mark etc observe for any abnormal finding.

Example –

1. If vata affected it will be Kharasparsha(Rough), Sphutita(Cracked) In Sannipataja (Tridosha)it will be Sakantaka (Thorny) etc.
2. Jivha surface regarding features as given in table.4 can be palpated and observed like Fissured Jivha, Geographic Jivha, Bald jivha etc.

3. Prashna pariksha (Questioning)^[12,13]

Only by questioning, we know about feeling of abnormal taste by the patient which lead us to know about specific dosha vitiation occurred

Example

- 1) Vata vitiation - Kasayasyata (Astringent taste Or Loss Of taste)
- 2) Pitta vitiation – Katukasyata (Pungent Or Bitter taste)
- 3) Kapha vitiation - Mukhamadhuryam (Sweetness)

Any disorder in taste sensation interfere with access of taste receptors cells of taste buds (Transport loss, Sensory loss Or Neural loss) This disturbance categorized by either patients complaints or sensory measurement like inability to detect -

- 1) 4 taste qualities – Total ageusia
- 2) Any 1 taste quality – Partial ageusia
- 3) Certain substances taste quality – Specific ageusia
- 4) Decreased sensitivity to all taste quality – Total hypogeusia
- 5) Perception of wrong or no taste quality – Dysgeusia

Hence by means of the above trividha pariksha (3 folds of examination) we can add our contribution in diagnosis of disease and treatment management of that disease.

VIKRUT JIVHA (ABNORMAL JIVHA)

Specific jivha features regarding specific clinical disease condition from both ayurvedic and modern view collectively mentioned below

Table. 1: According to dosha.^[14]

जिव्हा शीता खरस्पर्शा स्फुटिता मारुतेऽधिके।

रक्ता श्यामा भवेत्पिते कफे शुभ्राऽतिपिछिला॥1॥

कृष्णा सकण्टका शुष्का सन्निपाताधिके तु सा।

मिश्रीते मिश्रीता ज्ञेया सर्वलक्षणविवर्जिता॥2॥ यो र पू जिव्हापरीक्षा पृ क्रं २५

Dosha	Features of the jivha
Vataja	Sheeta(Cold), Kharasparsha(Rough), Sphutita(Cracked)
Pittaja	Raktashyama (Reddish Black)
Kaphaja	Shubhra(Whitish), Pichhila (Sticky)
Sannipataja	Krushna(Blackish), Sakantaka (Thorny), Shushka (Dry)
Dwandwaja	Mixed Symptoms

Table 2: According to size /shape.^[15,16]

Dirghajivha – Bijadosha	Macroglossia –Acromegaly, Myxoedema, Amyloidosis, Downs Syndrome Tumours, Angioedema
Hriswajivha – Bijadosha	Microglossia– Pseudobulbar Palsy, Facial Hemiatrophy, Starvation, Marked Dehydration

Table 3: According to colour.^[17,18]

Shwetabh -	Pandu
Shweta-	Ojakshaya
Paridaghdha –	Sannipataj Jwara, Pittaj Jivhakantak
Neelabh –	Asadhya Madatyaya Lakshana, Visuchika Asadhya Lakshana
Krushnaraktabha -	Sannipataja Jwara
Pitabha –	Kamala, Kumbhkamala

Pale –Anemia, Malnutrition	
White- Centrally coated (Enteric fever), Leukoplakia, Excessive furring	
Pale Or White - Over Nourishment, Anemia, Leukoplakia, Excessive Furring, Pneumonia	
Red Raw / Angry Looking – Pellagra	Bright Red – Acute Glossitis, Typhoid
Scarlet Red – Niacin Deficiency	Dark Red –Polycythemia, Riboflavin Deficiency
Dark Brown – Addisons Disease	Orange Red – Polyarthrititis Nodosa
Strawberry Like – Kawasakis Disease, Scarlet Fever	
Bluish – Alcohol Intoxication, Central Cynosis	

Blackish Red / Purple – Anemic Glossitis (Beefy Jivha), Polycythemia, Riboflavin Deficiency
Yellowish – Jaundice, Acute Hepatic Necrosis
Blackish- Iron, Bismuth, Melanoglossia, Penicillin Injections
Brownish- Uremia, Acute Liver Necrosis

Table 4: According to surface.^[19]

Fissured jivha -	Downs Syndrome, Vit B Deficiency, Acromegaly, Congenital Malformation
Geographic jivha-	Asymptomatic Inflammatory Conditions With Rapid Loss and Regrowth Of Filiform Papillae, Benign Glossitis
Hairy jivha -	Poor Oral Health
Hairy leukoplakia -	Epstein Barr Virus (At Lateral Margin of jivha and is Diagnosis Of AIDS)
Bald jivha -	Diffuse Atrophy Of Papillae seen In Pellagra, Xerostomia, B12 Deficiency, Pernicious and Iron Deficiency Anemia
Median rhomboid glossitis -	Marker Of Immune Deficiency Disorder (Depapilation Of Jivha With Candidiasis), Smoking, Denture Wearing, DM
Ulcers -	Single – Tb, Carcinoma, Syphilis, Dental Irritation Multiple – Apthous Ulcer, Herpes, Secondary Syphilis, Pemphigus, Chicken Pox, Vit B Deficiency Recurrent – Apthous Ulcer, SLE, Coeliac Disease, Behcet Syndrome, Lichen Planus, Pemphigus, Nueropenia

Table 5: According to movement.^[20]

Slow rhythmic tremors -	Kampvaat
Backward and forward -	Adhijivhika
Lizard jivha (jack in the box or watch spring jivha, Jivha vepan) –	Trushnanirodhaj daha
Severe ulcerations –	Mukhapaka
Immobile tongue –	Facial Paralysis (Ardit / Pakshahat), Jivhastambh

Table 6: According to moisture.^[21,22]

Dryness of jivha -	Vatavridhhi Dehydration, Uremia, Haemorrhage, Coma, Atropine / Belladonna, Sjogrens Syndrome
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SOME DIFFERENT FEATURES HELPS IN JIVHA PARIKSHAN MENTIONED IN AYURVED SAMHITA GIVEN AS FOLLOW

Dirghayubalak jivha lakshana^[23]

आयामविस्तारोपपन्ना श्लक्षणा तन्वी प्रकृतीवर्णयुक्ता जिह्वा | च शा ८/५१

Jivha has the same length and breadth as sufficient, smooth, thin(slender), right colour.

Dirghayu purusha jivha^[24]

जिव्हा तु कोमला यस्य स रोगी न विनश्यती | भा प्र पू खंड ६/५६ मिश्रप्रकरण

The patient with soft jivha will never die.

Alpayu purusha jivha^[25]

कृष्णा तथा अणुलिप्ता च जिव्हा शुना च यस्य वै |

कर्कशा वा भवेद्यस सोऽचिराद्विजहात्यसून || यो र पू पृ क्रं ८६/२०

The patient will die soon whose jivha turned black or dragged in or furrowed.

Arishta lakshana related to jivha^[26]

स्तब्धा निश्चेतना गुर्वी कंटकोपचिता भ्रुशम |

श्यावा शुष्का अथवा शूना प्रेतजिव्हा विसर्पिणी || च इं ८/१४

- 1) Stabdha – Hard And Tight
- 2) Nischetana – Insensitive to Touch or Type of taste
- 3) Gurvi – Heaviness
- 4) Kantkopacita – Covered by thorn like eruptions
- 5) Bhrushyam Shyava – Bluish Black
- 6) Shushka – Dry Or Inflamed
- 7) Shuna – Swollen
- 8) Visarpini – Constantly Mobile

Jivha in Grahabadhaaj balak^[27]

- 1) Skandapsmarand Shwana graha - Child bites his or her own jivha
- 2) Shakuni graha -Child got wound at jivha and soft or hard palate
- 3) Shushkarewati graha-Child gets pits on middle of jivha

DISCUSSION

with help of rog -rogi pariksha, The physician should be skilled in history taking and performing clinical examination Out of all ashtsthana pariksha jivha parikshan is important diagnostic tool but it is more neglected part of zone of interest. Which is important for showing health status of our internal organ particularly our digestive system. Jivha have

typical features of its colour, size, surface, movement etc for typical conditions as explained earlier above from both ayurvedic and modern science view. Apart from dosha imbalance in ayurveda also has mentions about characteristic of dirghayu balak and purusha, arishta lakshana, also the grahbadha regarding lakshana in children leads us to think about jivha parikshan in fresh and comprehensive manner. This all can lead to better diagnosis of disease condition of not only jivha but also of our internal organs.

CONCLUSION

Jivha is reflection of what is going inside our body. With help trividha pariksha the prakriti and vikruta lakshana, effect of kshaya- vrudhhi avastha of dosha and its typical features on jivha along with given peculiar characteristic of jivha for peculiar disease in modern view becomes easy to understand roga samprapti (pathogenesis) vyadhi vinischaya, at least helping for vyadhi vyavchedak nidana so that earlier diagnosis and easier management can be established.

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