

## CONCEPTUAL INSIGHTS INTO SAMSARGA AND SANNIPATA WITH SPECIAL REFERENCE TO AYURVEDIC PATHOGENESIS

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### ABSTRACT

*Āyurveda* is a holistic system of medicine based on the fundamental theory of *Tridoṣa*, namely *Vāta*, *Pitta* and *Kapha*. The equilibrium of these *Doṣas* is essential for maintaining health, whereas their vitiation leads to disease manifestation. Among the various patterns of *Doṣas* involvement described in *Āyurvedic* classics, *Samsarga* and *Sannipāta* are important concepts that explain the simultaneous participation of multiple *Doṣas* in the pathogenesis of diseases. Although these terms are often interpreted as dual and triple *Doṣas* involvement respectively, classical texts indicate that their definitions are closely associated with the nature of *Doṣas* vitiation, particularly *Swatantra* (independent) and *Paratantra* (dependent) aggravation. The present review aims to critically analyze the concepts of *Samsarga* and *Sannipāta* and explore their significance in *Āyurvedic* diagnosis, prognosis and treatment planning. For this purpose, references were collected

from classical *Āyurvedic* texts such as *Caraka Saṃhitā*, *Suśruta Saṃhitā*, *Aṣṭāṅga Hṛdaya* and their commentaries and were critically reviewed. The analysis reveals that *Samsarga* refers to the simultaneous independent vitiation of two *Doṣas*, where as *Sannipāta* denotes the simultaneous independent vitiation of all three *Doṣas*. These conditions differ from *Dvidoṣaja* and *Tridoṣaja* states, where one or more *Doṣas* may be involved secondarily through dependent mechanisms. A proper understanding of these concepts helps in

identifying disease complexity, assessing prognosis and formulating individualized treatment strategies. Therefore, the concepts of *Samsarga* and *Sannipāta* continue to hold significant relevance in contemporary *Āyurvedic* clinical practice and research.

**KEYWORDS:** Samsarga, Sannipāta, Tridoṣas, Dvidoṣaja, Tridoṣaja, Doṣas.

## INTRODUCTION

*Āyurveda* is a holistic system of medicine that explains health and disease through the principles of *Doṣas*, *Dhātu* and *Mala*. Among these, the *tridoṣas* theory occupies a central position. *Vāta*, *Pitta* and *Kapha* collectively regulate all physiological functions of the body. Any disturbance in their normal state results in pathological changes leading to disease.<sup>[1]</sup>

Diseases may arise due to the vitiation of a single *Doṣas*, two *Doṣas* or all three *Doṣas* simultaneously.<sup>[2]</sup> To explain such conditions, *Āyurvedic Ācāryas* described the concepts of *Samsarga* and *Sannipāta*. These concepts are not merely numerical combinations of *Doṣas* but represent specific pathological states characterized by the nature of *Doṣas* aggravation.

A thorough understanding of *Samsarga* and *Sannipāta* is essential for clinicians because these conditions influence diagnosis, prognosis and therapeutic decision-making. Despite their importance, confusion often exists regarding their distinction from *Dvidoṣaja* and *Tridoṣaja* disorders. Therefore, a detailed review of these concepts is necessary.

## DISCUSSION

### Concept of Doṣas Vitiating

According to *Āyurveda*, *Doṣas* can undergo vitiation either independently or dependently. *Ācāryas Caraka* describes two forms of *Doṣas* aggravation<sup>[3]</sup>:

#### 1. Swatantra (Independent) Doṣas Prakopa

A *Doṣas* becomes independently aggravated when it is exposed to etiological factors possessing similar qualities. Such a *Doṣas* exhibits clear clinical manifestations and responds directly to *Doṣas* specific treatment.

For instance, the excessive consumption of foods possessing hot (*uṣṇa*), pungent (*kaṭu*), sour (*amla*) and salty (*lavaṇa*) properties can directly provoke *Pitta Doṣa*, resulting in the appearance of clinical features associated with *Pitta* aggravation.

## 2. Paratantra (Dependent) Doṣas Prakopa

A *Doṣas* may become aggravated secondary to another pathological process such as *Āma* formation, *Agnimāndya*, *Srotorodha* etc. In such situations, the *Doṣas* does not exhibit its classical manifestations distinctly and often subsides when the primary pathology is treated.

For instance, during *Śarada Rtu* (autumn), *Kapha* may become aggravated secondary to *Pitta* provoking factors, such as substances producing an *Amla Vipāka* (sour post-digestive effect). In such cases, although *Kapha* manifestations may be present, the pathology is primarily driven by *Pitta*. Therefore, the aggravated *Kapha* subsides with *Pitta* specific therapeutic measures, such as *Tikta Ghṛta* and other bitter formulations, demonstrating its role as an *Anubandha* (secondary associated *doṣa*) rather than an independent pathogenic factor.<sup>[4]</sup>

This distinction between *Swatantra* and *Paratantra Doṣas* vitiation forms the basis for understanding *Saṃsarga* and *Sannipāta*.

### Concept of Saṃsarga

The term *Saṃsarga* literally means association or combination. In *Āyurvedic* pathology, it refers to the simultaneous independent aggravation of two *Doṣas*.

When two *Doṣas* are aggravated by their respective causative factors and exhibit their characteristic manifestations, the condition is termed *Saṃsarga*. Both *Doṣas* actively participate in disease pathogenesis and influence the clinical presentation.

**Depending upon the *Doṣas* involved, *Saṃsarga* may be classified as:**

- *Vāta-Pitta Saṃsarga*
- *Pitta-Kapha Saṃsarga*
- *Vāta-Kapha Saṃsarga*

The clinical picture in *Saṃsarga* is generally mixed, showing symptoms attributable to both *Doṣas*. Therefore, treatment requires careful planning to pacify both *Doṣas* without aggravating either of them.

### Concept of Sannipāta

*Sannipāta* refers to the simultaneous independent aggravation of all three *Doṣas*. It is regarded as one of the most complex pathological states described in *Āyurveda*.

When *Vāta*, *Pitta* and *Kapha* are aggravated by their respective etiological factors, they collectively contribute to disease manifestation. The resulting symptomatology becomes highly variable and often difficult to categorize under a single *Doṣas* predominance.

Because all three *Doṣas* are involved, *Sannipāta* conditions are generally associated with greater severity, diagnostic complexity and therapeutic difficulty.

### Classical References

#### Charaka Samhita

The concepts of *Saṃsarga* and *Sannipāta* are primarily based on the distinction between *Anubandhya* (primary or independent) and *Anubandha* (secondary or dependent) *Doṣa* vitiation described by *Ācārya Caraka*. In *Caraka Saṃhitā*<sup>[5]</sup>, it is stated:

*Svatantraḥ vyakta-liṅgo yathokta-samutthāna-prāśamo bhavaty anubandhyaḥ, tadviparīta-lakṣaṇas tv anubandhaḥ |*

*Anubandhya-lakṣaṇa-samanvitās tatra yadi doṣā bhavanti tat trikaṃ sannipātam ācakṣate, dvayaṃ vā saṃsargam ||*

*Anubandhya* refers to the predominant *doṣa* that independently produces distinct clinical manifestations and responds to specific etiological and therapeutic measures. *Anubandha* denotes the associated or secondary *doṣa* that does not exhibit such dominance. When all three *doṣas* simultaneously behave as principal pathogenic factors, the condition is known as *Sannipāta*; when only two *doṣas* act as principal factors, it is termed *Saṃsarga*.

Based on this principle, *Sannipāta* occurs when *Vāta*, *Pitta*, and *Kapha* are all independently aggravated and exhibit the characteristics of *Anubandhya Doṣas*. Similarly, *Saṃsarga* refers to the simultaneous independent aggravation of any two *Doṣas*. Therefore, the concepts of *Saṃsarga* and *Sannipāta* are closely related to the nature of *Doṣa* vitiation and provide a deeper understanding of complex disease pathogenesis in *Āyurveda*.

This description emphasizes that the defining feature of *Saṃsarga* and *Sannipāta* is not merely *Doṣas* number but independent *Doṣas* participation.

#### Ashtanga Hridaya

*Ācārya Vāgbhaṭa* has described the concept of *Saṃsarga* and *Sannipāta* in *Aṣṭāṅga Hṛdaya Sūtrasthāna*<sup>[6]</sup>:

*Saṃsargaḥ sannipātaś ca tad-dvi-tri-kṣaya-kopataḥ|*

*Saṃsarga* and *Sannipāta* are pathological states resulting from the aggravation or depletion of two and three *doṣas*, respectively. Thus, the involvement of multiple *Doṣas* is not limited to their increase alone but may also occur due to their depletion or a combination of both states.

According to this principle, *Sannipāta* may manifest when all three *Doṣas-Vāta, Pitta* and *Kapha* undergo *kṣaya, vṛddhi* or varying combinations of depletion and aggravation due to their respective *sva-hetu*. Similarly, *Saṃsarga* develops when two *Doṣas* simultaneously exhibit such pathological alterations.

*Miśrībhāvāt samastānām sannipātas tathā punaḥ |*

*Sannipāta* refers to the pathological state resulting from the simultaneous combination and interaction of all three *doṣas*.<sup>[7]</sup>

*Vyantarān vidyād eteṣām eva saṅkarāt ||*

*Vyāmiśra-lakṣaṇās te hi sannipāta-prakopānāḥ |*

The various intermediate subtypes originate from different combinations of the *doṣas*. Consequently, they present with a mixture of clinical features corresponding to the involved *doṣas* and contribute to the development or exacerbation of *Sannipāta* conditions.<sup>[8]</sup>

According to the classical definition, *Sannipāta* is the simultaneous association of all three *doṣas*, whether in a state of aggravation (*vṛddhi*) or depletion (*kṣaya*). However, the involvement of the three *doṣas* does not always occur in an identical proportion. Due to variations in the degree and pattern of *doṣic* interaction (*saṅkara*), several intermediate or mixed forms arise. These forms exhibit a combination of signs and symptoms of the participating *doṣas* (*vyāmiśra-lakṣaṇāḥ*) and represent the diverse clinical manifestations of *Sannipāta*.

Commentator Hemādri describes *Saṃsarga* and *Sannipāta* as "*Avasthā Viśiṣṭa Sa ṃyoga Nimitta Doṣa Saṃjñā*," indicating that these conditions represent specific pathological states resulting from particular combinations of *Doṣas* based on their altered functional status.

The pathological complexity of *Sannipāta* arises from the simultaneous independent involvement of all three *Doṣas*. Since each *Doṣa* is aggravated by its own etiological factors

(*sva-hetu*), the condition presents with diverse and often overlapping clinical manifestations. Consequently, accurate diagnosis becomes difficult and therapeutic planning becomes more challenging.

Classical *Ayurvedic* texts consider *Sannipāta* to possess an unfavorable prognosis because the principles of *sādhāraṇa cikitsā* cannot be easily applied. Therapeutic measures aimed at pacifying one *Doṣa* may inadvertently aggravate another. Therefore, *Sannipāta* is often regarded as *asādhya* or difficult to manage. In contrast, *Tridoṣaja* conditions involving secondary (*paratantra*) *Doṣa* participation may be comparatively *sādhya* or *kaṣṭa-sādhya*.

### Samsarga and Dvidoṣaja: A Comparative Analysis

Although both conditions involve two *Doṣas*, they are not identical.

S.No	Samsarga	Dvidoṣaja
1.	Two <i>Doṣas</i> independently aggravated	One or both <i>Doṣas</i> may be secondarily involved
2.	<i>Swatantra</i> vitiation predominates	<i>Paratantra</i> involvement may be present
3.	Clear manifestation of both <i>Doṣas</i>	Symptoms may be less distinct
4.	More complex treatment planning	Treatment often focuses on primary pathology

### Sannipāta and Tridoṣaja: A Comparative Analysis

Similarly, *Sannipāta* should not be considered synonymous with *Tridoṣaja* disorders.

S.No	<i>Sannipāta</i>	<i>Tridoṣaja</i>
1	All three <i>Doṣas</i> independently aggravated	One or more <i>Doṣas</i> may be secondarily aggravated
2	Represents severe pathology	Variable severity
3	Complex symptomatology	Symptoms depend on dominant <i>Doṣas</i>
4	Difficult prognosis	Comparatively better prognosis

Hence, *Sannipāta* represents a specific and more severe form of *Tridoṣas* involvement.

### Importance in Diagnosis

The concepts of *Samsarga* and *Sannipāta* provide valuable diagnostic clues. A physician should carefully assess:

- Etiological factors responsible for *Doṣa* aggravation.
- Nature and intensity of symptoms.
- Dominance of individual *Doṣas*.
- Stage of disease progression.
- Presence of associated pathological factors such as *Āma* or *Srotorodha*.

Such assessment helps distinguish true *Samsarga* and *Sannipāta* conditions from ordinary *Dvidoṣaja* or *Tridoṣaja* disorders.

### Prognostic Significance

*Āyurvedic* classics describe prognosis based on the number and severity of *Doṣa* involvement. *Ekadoṣaja* disorders generally have a favorable prognosis, whereas diseases involving multiple *Doṣas* are comparatively difficult to manage.

*Sannipāta* conditions are often associated with greater pathological complexity because all three *Doṣas* participate in disease progression. The therapeutic challenge lies in correcting one *Doṣa* without aggravating the others. Therefore, early recognition of *Sannipāta* is essential for achieving successful treatment outcomes.

### Clinical Importance of *Samsarga* and *Sannipāta*

The concepts of *Samsarga* and *Sannipāta* have significant practical implications in *Āyurveda*.

They help clinicians to:

- Understand disease complexity.
- Identify predominant *Doṣas*.
- Assess disease severity.
- Determine prognosis.
- Plan individualized treatment.
- Avoid therapeutic contradictions.
- Improve treatment outcomes.

Proper recognition of these conditions enables the physician to formulate rational therapeutic strategies according to *Āyurvedic* principles.

### Need for Understanding *Samsarga* and *Sannipāta* in Contemporary Clinical Practice

In the present era, changing dietary habits, sedentary lifestyles, psychological stress, environmental pollution and irregular daily routines have contributed to the emergence of complex disease conditions. Many patients present with symptoms that cannot be explained by the involvement of a single *doṣa*. Instead, a mixed pattern of *doṣa* vitiation is frequently observed. In such situations, the concepts of *Samsarga* and *Sannipāta* become highly relevant.

A proper understanding of these concepts enables *Āyurvedic* physicians to identify the predominant *doṣas* involved in the disease process and formulate an appropriate treatment plan. Failure to recognize multiple *doṣa* involvement may result in incomplete treatment and recurrence of disease. Moreover, the assessment of *Samśarga* and *Sannipāta* helps in determining prognosis, selecting suitable *Pancakarma* procedures and planning dietary and lifestyle interventions.

The increasing prevalence of chronic disorders such as metabolic syndrome, autoimmune diseases, cardiovascular disorders and degenerative conditions highlights the importance of revisiting classical *Āyurvedic* concepts. *Samśarga* and *Sannipāta* provide a theoretical framework for understanding the multifactorial nature of such diseases and facilitate a holistic approach to patient care.

## CONCLUSION

*Samśarga* and *Sannipāta* are important pathological concepts in *Āyurveda* that explain the simultaneous involvement of multiple *Doṣas* in disease manifestation. These conditions are not merely numerical combinations of *Doṣas* but are distinguished by the nature of *Doṣas* aggravation. *Samśarga* represents the independent vitiation of two *Doṣas*, whereas *Sannipāta* denotes the independent vitiation of all three *Doṣas*. Their differentiation from *Dvidoṣaja* and *Tridoṣaja* conditions is essential for accurate diagnosis, prognosis and treatment planning. In the era of increasing chronic and multifactorial diseases, these classical concepts continue to provide valuable insights for *Āyurvedic* clinicians and researchers.

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