

Contemporary Understanding Of Srothas Described Outside Systemic Classification In Ayurveda W.S.R. To Manovaha, Sanjavaha, Buddhivaha, Ojovaha, Swaravaha And Doshavaha Srothas

N.V.Y. Diloopa*, Divya P.

Department of Roga Nidana evum Vikriti Vigyana, Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan, Karnataka, India

ABSTRACT

Srothas; the pathways responsible for Sharira Upachaya and Apachaya (growth and development) constitute a fundamental concept in understanding Roga Samprapthi (pathogenesis of diseases) and are necessary for accurate diagnosis and treatment. However, several Srothas in the human body are not systematically described or explicitly named with respect to their Mula (origin), Dushti Karana (causes of vitiation), Dushti Lakshana (clinical manifestations of vitiation), Srotho Viddha Lakshana (features of injury), although they are referred in the contexts of various diseases. This review focuses on the conceptual understanding of these Anuktha Srothas. This review identifies Manovaha, Sanjavaha, Buddhivaha, Ojovaha, Swaravaha and Doshavaha Srothas within this category. Various pathological conditions such as Unmada, Apasmara, Swapna, Athathvabhinivesha, Swarabheda, Mada, Murccha, Sanyasa have been explained in relation to the involvement of these Srothas. These conditions may be relatively understood with diseases involving the brain-heart-vascular axis, autonomic pathways, cognitive and behavioral coordination, consciousness, inflammatory pathways, homeostatic regulation, disease-resistance mechanisms, anatomical and neurological pathways responsible for phonation and speech production etc. Hence, the anatomical and physiological involvement of these Anuktha Srothas in Roga Samprapthi may contributed to improved diagnosis and management of both Uktha Vyadhi and Anuktha Vyadhi (existing and emerging diseases).

Keywords: Anuktha Srothas, Buddhivaha, Doshavaha, Manovaha, Ojovaha, Sanjavaha, Swaravaha.

INTRODUCTION

The term ‘Srothas’ is derived from the word root ‘Sravana’, which means ‘to flow’, ‘exude’, or ‘to ooze’.^{1,2} Srothas are defined as the channels responsible for transportation of the substances within the body; which are considered as pathways responsible for Dhathu Upachaya, and Apachaya (growth and development) of the body.³

Sira, Damani, Rasayani, Rasavahini, Naḍi, Pantha, Marga, Sharirachchidra, Sauvruththa, Asavruththa, Sthana, Niketha, Ashaya, etc. are synonymous to Srothas in different angles of anatomy, and physiology. Those may be reflet organs, veins, arteries, capillaries, lymphatics, nerves, or any other passages, orifices, and some organs occupying body constituents.^{4, 5} Although Srothas are innumerable,

they can be classified as *Sthula* (gross) or *Sukshma* (minute). Further, *Sthula Srothas* are classified into 10 *Bahya Srothas* in males, and 12 of the same in female. Other than this, it explains 13 *Abhyanthara Srothas*.^{4,6,7} However, some Srothas in the human body are not systematically described or explicitly named, although they are referred in the contexts of various diseases. This review is based on the conceptual understanding of such Srothas.

Anuktha Srothas

The term ‘Anuktha’ derived from Sanskrit words; ‘Anu’ (not) and ‘Uktha’ ‘said’, collectively meaning ‘not explicitly stated’. In Ayurveda, the term ‘Anuktha Srothas’ represents the Srothas that are mentioned in the classical texts, but lack a systematic explanation regarding their Mula (origin), Dushti Karana (causes

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to vitiation of *Srothas*), *Dushti Lakshana* (clinical features denoting vitiation of *Srothas*), *Srotho Viddha Lakshana* (features of injured *Srothas*).⁸

AIMS AND OBJECTIVES

To compile the clinically significant *Srothas* described in Ayurvedic literature outside the systematic classical classification and explore their conceptual and clinical relevance in Ayurvedic and contemporary perspectives.

METHODOLOGY

This narrative review was conducted using Charaka Samhitha, Sushruta Samhitha, and Asthanga Samgraha to identify the *Srothas* not systematically classified under *Bahya*, and *Abhyanthara Srothas*, though termed in different explanations of diseases. The compiled references were analyzed to evaluate their conceptual relevance and clinical significance. Contemporary scientific literature related to the

particular *Srothas* was reviewed in textual editions and web sources (PubMed, ResearchGate etc.) to identify possible functional interpretations of the described *Srothas*. Therefore, the interpretations proposed in this review are comparative and conceptual in nature and are intended to provide contemporary perspectives for understanding the functional relevance of particular *Srothas*.

RESULTS AND DISCUSSION

The review identified several clinically significant *Anuktha Srothas*, including *Manovaha Srothas*, *Buddhivaha Srothas*, *Sanjavaha Srothas*, *Ojovaha Srothas*, *Swaravaha Srothas*, and *Doshavaha Srothas*. Table 01 demonstrates the different contexts explaining *Manovaha Srothas*, and *Buddhivaha Srothas* in the referred Ayurveda texts.

Classical references - *Manovaha*, *Sanjavaha*, and *Buddhivaha Srothas*

<i>Manovaha and Buddhivaha Srothas</i>	
Text and the chapter	Charaka Samhitha, <i>Apasmara Chikithsa</i>
Context and explanation	<i>Athathvabhinivesha</i> ⁹
<u>Nidana (etiology)</u> Habitual indulgence to consume <i>Malina Ahara</i> (contaminated food) <i>Vegan Prapya Nigruhnatah</i> (suppression of the natural urges) <i>Shita, Ushna, Snigdha, Ruksha Ati Sevana</i> (excessive use of the substances having properties; cold, hot, unctuous, rough). <u>Samprapthi (pathogenesis)</u> Aggravated <i>Dosha</i> reaches <i>Hridaya</i> and afflicts the <i>Mano- Buddhivaha Sira</i>, and causing <i>Avrutha</i> (covered) by <i>Rajas</i> and <i>Tamas</i> manifest <i>Athathvabhinivesha</i> <u>Treatment</u> • Subsequent application of <i>Snehana, Swedana, Shodhana, Samsarjana</i> • <i>Medhya Rasayana</i> • <i>Dharma</i> with <i>Sahrudaya</i> (virtuous rights with mutually cordial persons)	
<i>Manovaha Srothas</i>	
Text, and the chapter:	Charaka Samhitha, <i>Unmada Nidana</i> , Asthanga Samgraha, <i>Unmada Prathishedha Adhyaya</i>

Context and explanation	<i>Unmada</i> ^{10, 11}
The susceptible persons to begin <i>Unmada Samprapthi</i> by consuming <i>Nidana</i> to vitiate <i>Dosha</i> as a prerequisite to afflict <i>Manas</i> , and <i>Buddhi</i> . The aggravated <i>Dosha</i> reaches <i>Hridaya</i> causing <i>Avrutha</i> of <i>Manovaha Srothas</i> (obstruction to the <i>Manovaha Srothas</i>)	
Text, and the chapter	Charaka Samhitha, <i>Purvarupiya Indriya</i>
Context and explanation	<i>Swapna</i> ¹²
<i>Manovaha Srothas</i> filled with vitiated <i>Dosha</i> (can be afflicted with one <i>Dosha</i> also), cause to <i>Swapna Darshana</i> when person is not in <i>Ati Prasuptha</i> (deep sleep). In <i>Vimana Sthana</i> , it explains that <i>Chethana</i> , which is synonymous to <i>Manas</i> , moves through the entire channels of the body. On the other hand, <i>Hridayashritha Dasha Dhamani</i> are considered as <i>Manovaha Srothas</i> . Acharya Chakrapani also further elaborates the same concept.	
Text, and the chapter	Ashthanga Samgraha, <i>Duthadi Vignaniya Adhyaya</i>
Context and explanation	<i>Swapna</i> ¹³
<i>Prabala Mala</i> (vitiated <i>Tridosha</i>) afflicting <i>Manovaha Srothas</i> resulting in <i>Daruna Swapna</i> (dreadful dreams)	
Text, and the chapter	Ashthanga Samgraha, <i>Shvayathu Chikitsa Adhyaya</i>
Context and explanation	Effect of medicine on <i>Manovaha Srothas</i> ¹⁴
Affliction of particular compound medicines to effect on <i>Manovaha Srothas</i>	
Text, and the chapter	Charaka Samhitha, <i>Madathya Chikitsitam</i> ¹⁵ (Commentary)
Context and explanation	<i>Madhya- Prabodhaka</i> action
Explains the effect of <i>Madhya</i> to afflict to reduce the obstruction to <i>Manovaha Srothas</i> in <i>Nidra</i> ; “ <i>Nidrahetu manovaha srotorodhadihanthrutayaa</i> ”	
<i>Sanjavaha Srothas</i>	
Text, and the chapter	Charaka Samhitha, <i>Vidhishonithiya Adhyaya</i> (along with Chakrapani Tika)
Context and explanation	<i>Mada, Murccha, Sanyasa</i> ¹⁶
<i>Malinahrashili</i> causes to <i>Rajo</i> , and <i>Tamas</i> to cover the <i>Manas</i> . In turn, vitiated <i>Dosha</i> obstruct the <i>Rakta Vaha Srothas</i> , <i>Rasa Vaha Srothas</i> , and <i>Sanjna Vaha Srothas</i> . Further, Chakrapani commentary emphasizes the interrelationship between <i>Sanjaavahaa</i> , and <i>Manovaha Srothas</i> as <i>Sanja</i> is responsible for consciousness; “ <i>Sanjaahetu Manovahani</i> ”.	
Text, and the chapter	Sushritha Samhitha, <i>Murcchapratishedha Adhyaya</i> (along with <i>Nibaddha Samgraha</i> commentaries)
Context and explanation	<i>Moha/ Murccha</i> ¹⁷

Obstructed (<i>Pihita/ Avarodha</i>) <i>Sanjavaha Nadi</i> by <i>Vatadi Dosha</i> , leading to <i>Tamo Upaita</i> , <i>Sukhadukkha Upahata</i> , <i>Patati Kashtavath</i> (fallen down) causing <i>Moha/ Murccha</i> . <i>Tikshna Nasya Prayoga</i> described as a treatment to remove <i>Sanjavaha Sroto Avarodha</i> in <i>Murccha</i> .	
Text, and the chapter	Sushritha Samhitha, Apasmara pratishedha Adhyaya
Context and explanation	<i>Samprapti</i> of <i>Apasmara</i> ¹⁸
<i>Sanjavaha Srothas</i> affected with <i>Doshavyapath</i> , <i>Raja</i> and <i>Tamas</i> leading to <i>Apasmara</i>	
Text and the chapter	Sushrutha Samhitha, <i>Sharirasthana</i>
Context and explanation	<i>Nidra</i> ¹⁹
Characteristics of <i>Nidra</i> according to dosha predominance and its effect on <i>Sanjavaha Srothas</i>	

Table 01: Explanations on *Manovaha*, *Sanjavaha*, and *Buddhivaha Srothas* in different contexts

These explanations indicate that particular *Nidana* may lead to the vitiation of *Manovaha Srothas*, *Buddhivaha Srothas*, and *Sanjavaha Srothas*. *Hridaya* is described as an important functional center associated with *Manovaha Srothas*, indicating a systemic relationship between mental functions and physiological regulation. As *Hridaya* is the site of *Vyana Vata*, which circulates all over the body, the presence of *Manas* throughout the body can be conceptually understood in a manner comparable to *Raktha*, and *Rasa*.²⁰ This also explains the interrelationship between *Manovaha Srothas* and other *Srothas*, namely *Buddhivaha Srothas*, and *Sanjavaha Srothas*.

These observations indicate the possible role of *Manovaha Srothas* in the psychosomatic disease manifestations through interactions between cardiac and systemic physiological pathways represented through the concept of *Srothas*. Although *Manas* and *Manovaha Srothas* have not yet been demonstrated as possessing a distinct anatomical locality in contemporary understanding, these conceptual explanations provide a basis for interpreting *Manas* as a structural, and functional component influencing the entire body.

Emerging concepts such as the brain-heart-vascular axis, autonomic pathways involved in mental stress-induced cardiac disease, and the effects of cardiac dysfunction on cognitive and behavioral coordination through secondary inflammatory mechanisms provide useful contemporary parallels for understanding

Manovaha Srothas.^{21, 22} Thus, different *Nidana* may contribute to the manifestation of defects in *Manovaha Srothas*, and subsequently lead to vitiation of *Manas*. Similarly, higher mental function assessment and current explanations of cognition support the conceptual relationship between *Manovaha* and *Buddhivaha Srothas*.

The dream mechanisms associated with NREM sleep and arousal pathways may support the concept of widespread functional distribution of *Manovaha Srothas* throughout the body, although the root of *Manas* is considered to be *Hridaya*.^{23, 24} Furthermore, it suggests the interrelationship between these three *Srothas* and thereby supports the concept of their systemic distribution.

The *Nidana* responsible for *Sanjavaha Srotho Dushti* appear to involve both *Sharirika* and *Manasika Dosha* disturbances affecting higher neurological functions. The interrelationship between *Sanjavaha* and *Manovaha Srothas* suggests their role in the functioning of higher mental processes. The therapeutic role of *Nasya* in relieving *Sanjavaha Sroto Avarodha* suggests the involvement of functional obstruction in the pathogenesis of altered consciousness. Furthermore, this demonstrates their ability to be involved in physiological and anatomical consequences even in the absence of immediate *Indriyarthas* *Sannikarsha*, suggesting the subtle nature of their action. Moreover, the effects of medicines and *Madhya* on *Manovaha Srothas* further support the interpretation of *Manovaha Srothas* as structural and

functional entities of the body within the Ayurvedic perspective. Table 02 presents selected examples of the contemporary understanding of *Manovaha*, *Sanjavaha*, and *Buddhivaha Srothas*.

Components assessing	<i>Manovaha Srothas</i>	<i>Sanjavaha Srothas</i>	<i>Buddhivaha Srothas</i>
Function/ attribute related to the <i>Srothas</i>	<i>Chintha, Vicharya, Uhya, Dhyeya, Samkalpa, Indriya Abhigraha Karma, Svasya Nigraha, Uhya, Vichara</i>	<i>Nama Grahana</i>	Differentiation
Functional interpretation in contemporary perspective	Thinking, emotions	Consciousness, arousal, wakefulness, alertness	Reasoning, planning, discrimination
Contemporary systems related to <i>Srothas</i> functions	Prefrontal cortex, limbic system, brain- heart axis, autonomic nervous system	Ascending reticular activating system, temporal lobe	Prefrontal cortex, thalamo- cortical system
Possible diseases in derangement of these areas	Major depressive disorders, schizophrenia, anxiety disorders	Delirium, Epilepsy, disorders of consciousness, alzheimer's disease, dementia, stroke, traumatic brain injury, hypersomnia	Schizophrenia, Bipolar disorder, major depressive disorder, autism spectrum disorder, parkinson's disease, epilepsy
Possible Ayurvedic understanding to derangements	<i>Unmada, Athathvabhinivesha, Arishta lakshana</i>	<i>Apasmara, Mada, Murccha, Sanyasa, Swapna Viparyaya</i>	<i>Apasmara, Mada, Murccha, Sanyasa</i>

Table 02: Some examples for contemporary understanding of *Manovaha*, *Sanjavaha* and *Buddhivaha Srothas*^{25, 26, 27, 28, 29}

Classical references and conceptual *Ojovaha Srothas* interpretation- *Ojovaha Srothas*, *Svaravaha Srothas*, and *Doshavaha Srothas*

Context	Explanation
Text and the chapter: Charaka Samhitha, <i>Arthedasha Mahamuliya Adhyaya</i> ³⁰	
<i>Ojovaha Srothas</i>	Ten great vessels connected to the heart carrying <i>Ojas</i> throughout the body
Text, and the chapter: Charaka Samhitha, <i>Sharira Samkhya Sharira</i>	
<i>Apara Ojas/ Shleshmika Ojas</i> circulate throughout the body	

Table 03: explanations on *Ojovaha Srothas* in different contexts

Ojas is considered an important life-sustaining component of the body. *Para Ojas* is regarded as essential for the sustenance of life from birth and is described as residing in the heart. *Apara Ojas* circulates throughout the body and is responsible for maintaining the qualitative and the quantitative integrity of the body tissues. Therefore, *Ojas* may be comparatively interpreted in relation to mechanisms involved in immune regulation and systemic resistance.

Furthermore, as *Ojovaha Srothas* share similar roots of origin with *Manovaha Srothas*, the inflammatory mechanisms involved in the heart-brain axis during psychological and somatic disease manifestations may also be interpreted through the concept of *Ojovaha Srothas*. Thus, inflammatory pathways, homeostatic regulation, and disease-resistance mechanisms may be understood in parallel with the functions of *Ojas* and its associated pathways.

Classical references and conceptual interpretation- *Swaravaha Srothas*³¹

Sushruta Samhitha emphasizes the involvement of *Swaravaha Srothas* in the *Samprapthi* of *Swarabheda*. The manifestations of various speech and voice disorders may be explained based on the involvement of *Swaravaha Srothas*. *Swaravaha Srothas* may be functionally correlated with anatomical and neurological pathways responsible for phonation and speech production. The channels responsible for voice manifestation can be comparatively understood as the neurological and anatomical pathways involved in speech production, including Broca's area, the recurrent laryngeal nerve, the larynx, and speech- motor pathways.

Classical references and conceptual interpretation- *Doshavaha Srothas*³²

Although *Srothas* are described as innumerable and subtle, *Srothas* remain difficult to observe directly even with technological advancement, they should be understood based on their functional definitions. Therefore, various transport mechanisms, including those occurring at the cellular level, may be comparatively interpreted through the concept of *Srothas*.

Cellular transport mechanisms may be comparatively interpreted through the broader functional concept of *Srothas*, wherein abnormalities in the *Gathi* of specific transport components within a particular *Srothas* may contribute to the manifestation of *Srotho Dushthi Lakshana* through *Dosha- Dushya Sammurchchana*. As explained in the context of *Vata Vyadhi*, channels carrying *Dosha* are distributed throughout the body. Due to *Dosha- Dushya Sammurchchana* and *Kha Vaigunya*, pathological changes may occur in any *Srothas*, thereby initiating *Roga Samprapthi*. Thus, cellular transport systems, intercellular signaling pathways, and related physiological mechanisms may be interpreted as components of *Doshavaha Srothas* along with their associated physiological pathways.

Accordingly, although all *Srothas* are not individually described under separate nomenclature, innumerable classification and functional interpretations may still be possible based on their physiological roles.

Clinical and research implications of *Anuktha Srothas*

Understanding *Anuktha Srothas* may help broaden the conceptual interpretation of disease mechanisms in Ayurveda beyond conventionally classified *Srothas*. Those may provide supportive background for understanding *Uktha* and *Anuktha Vyadhi* through an integrative perspective.

Limitations

The contemporary correlations proposed in this review are interpretative and conceptual in nature and should not be considered direct anatomical equivalences. Conclusive establishment of the specific *Srothas* in direct correlation with modern biomedical perspectives is not presently possible. However, these functional interpretations may help emphasize the broader importance of understanding *Srothas* according to their classical definitions.

CONCLUSION

The *Srothas* explained in this review as *Anuktha Srothas* emphasize the anatomical, physiological, and pathological perspectives of these *Srothas* and their interrelationship in disease manifestations. This suggests the importance of understanding *Srothas* as

a broader conceptual framework applicable to diagnosis and treatment beyond the conventionally described *Uktha Srothas*. As *Srotho Dushti* and *Avarana* of their components may contribute to the manifestation of both *Uktha* and *Anuktha Vyadhi*, understanding *Srothas* as a concept related to body transport mechanisms may provide useful insights for the contemporary understanding and management of emerging diseases.

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