CODEN: WJAPAC Impact Factor: 3.87 ISSN: 3049-3013



World Journal of Advance Pharmaceutical Sciences



Volume 2, Issue 2. Page: 17-23

Review Article

www.wjaps.com

GRAHA ROGAS: A COMPREHENSIVE SCIENTIFIC REINTERPRETATION OF AYURVEDIC INFECTIOUS DISEASE PARADIGM

Dr. Sushant Bhandari¹*, Dr. Achyut Acharya² and Dr. Prashanna Nepal³

¹Consultant Ayurveda Physician, Shrikhanda Ayurveda Centre, Kathmandu, Nepal.

How to cite this Article Dr. Sushant Bhandari, Dr. Achyut Acharya and Dr. Prashanna Nepal (2025). *GRAHA ROGAS*: A COMPREHENSIVE SCIENTIFIC REINTERPRETATION OF AYURVEDIC INFECTIOUS DISEASE PARADIGM. World Journal of Advance Pharmaceutical Sciences, 2(2), 17-23.



Copyright © 2025 Dr. Sushant Bhandari | World Journal of Advance Pharmaceutical Sciences

This is an open-access article distributed under creative Commons Attribution-Non Commercial 4.0 International license (CC BY-NC 4.0)

Article Info

Article Received: 09 May 2025, Article Revised: 29 May 2025, Article Accepted: 19 June 2025.

DOI: https://doi.org/10.5281/zenodo.15756305

*Corresponding author:

*Dr. Sushant Bhandari

Consultant Ayurveda Physician, Shrikhanda Ayurveda Centre, Kathmandu, Nepal.

ABSTRACT

Graha Rogas represent one of Ayurveda's most enigmatic yet profound clinical concepts, deeply rooted in the pediatric of Kaumarabhritya. Historically classified under Bhuta Vidya (knowledge of supernatural entities), these disorders have been marginalized in contemporary discourse due to their mythological framing and perceived lack of scientific validity. Texts like the Ashtanga Sangraha and Sushruta Samhita dedicated entire sections to Graha Chikitsa, while later works (Kumara Tantra, Chakradatta) preserved detailed descriptions of these acute, life-threatening conditions. Modern skepticism arises from the personification of Grahas as entities like Skanda, Putana, or Revati-a language reflecting the cultural milieu of ancient scholars rather than literal belief. This review posits that Graha Rogas constitute Ayurveda's sophisticated framework for infectious diseases, with "Grahas" symbolizing pathogenic microorganisms (viruses, bacteria, protozoa). We deconstruct this paradigm through epidemiological, clinical, and pathophysiological correlations, arguing for its urgent integration into modern infectious disease models. This review article aims to demystify Graha Rogas by reinterpreting their characteristics, causative factors, clinical presentations, and management principles through a contemporary scientific lens, particularly concerning microbial infections and their impact on physical and psychological well-being.

KEYWORDS: Bala Graha, Graha Rogas, Infections, Chikitsa.

1. INTRODUCTION: Re-evaluating an "Outdated" Concept

The study of *Graha Rogas* (diseases caused by "*Grahas*" or subtle entities) in Ayurveda has frequently been relegated to the periphery of modern Ayurvedic discourse, largely due to its seemingly mythological explanations and perceived lack of immediate clinical utility. This review article provocatively asks, "Why it looks like an outdated topic?" and rightly points out that "Scientific truth has been explained under religious bottle." This review embarks on a journey to unlock that

scientific truth, exploring *Graha Rogas* not as mere superstitions, but as ancient descriptions of complex disease phenomena, many of which bear a striking resemblance to what we now understand as microbial infections.

Ayurveda, especially branches like *Kaumarabhritya* (pediatrics), dedicates significant attention to *Graha Rogas*, particularly in infants. While *Acharya Charaka* remains largely silent on *Bala Grahas*, *Sushruta* and *Astanga Sangraha* elaborate on them, with *Astanga*

²PG Scholar, Department of Roga Nidana Evam Vikriti Vigyana, National Institute of Ayurveda, Jaipur, Rajasthan.

³Assistant Professor, Patanjali Ayurveda Medical College and Research Centre, Dhulikhel, Kavrepalanchok, Nepal.

Sangraha even dedicating separate chapters in *Uttara Tantra*. Later texts like *Ravana krita Kumara Tantra*, *Chakradatta*, *Gadanigraha*, and *Bhaishajjya Ratnavali* further reinforce their importance. This historical emphasis suggests a profound, albeit metaphorical, understanding of certain acute, severe, and rapidly progressing illnesses, especially those affecting vulnerable populations like children.

2. METHODOLOGY

This review employed a tripartite analytical approach:

- 1. Textual Analysis: Primary Sanskrit sources (Ashtanga SanGraha Uttara Tantra, Kashyapa Samhita, Bhaishajya Ratnavali) were examined for Graha Roga descriptions, focusing on etiology, symptomatology, and management.
- 2. Scientific Correlation: Clinical features were mapped to modern infectious diseases using ICD-11 criteria. Microbiological properties (antigenicity, incubation periods) were compared to *Graha* characteristics.
- 3. Evidence Validation: PubMed, Scopus, and AYUSH Research Portal were searched (2000–2024) for studies on Ayurvedic antimicrobial interventions (e.g., *Dhoopana* fumigation, medicated *Ghritas*). Inclusion criteria prioritized peer-reviewed studies validating traditional practices. Historical narratives were contextualized without literal interpretation.

3. Distinguishing Graha Roga from Graha Badha

A crucial distinction is drawn between *Graha Roga* and *Graha Badha*. While often conflated, highlights with their differences:

- Graha Roga: Characterized by "less subjective more objective symptoms," definite morphological structures (metaphorically speaking), definite causative factors, no periodicity, definite Dosha vitiation and pathological changes, and a very rapid onset and progression, making diagnosis and treatment challenging. This description aligns strongly with acute infectious diseases where a specific pathogen causes measurable physiological changes.
- *Graha Badha*: Involves sudden personality and behavioral changes, where a normal person begins behaving like *Deva*, *Gandharva*, or *Asura*. Fever, a common *Poorva Roopa* (prodromal symptom) in *Graha Rogas*, is notably absent in *Graha Badha*.^[2] These points towards psychological or behavioral disorders, perhaps even conditions like psychosis, rather than purely physical ailments. The focus of this review remains primarily on *Graha Roga* as it relates to infectious pathology.

4. Unraveling the Invisible Cause: Ayurveda's Perspective on the Unknown

Ayurveda, rooted in the *Karya-Karana Vada* (cause-effect principle), asserts that no disease exists without a cause. ^[3] When causes are invisible, contemporary

science resorts to investigations, eventually categorizing such diseases as "idiopathic" or "of unknown origin" (e.g., Fever of Unknown Origin, Idiopathic Epilepsy).

Ayurveda, however, provides a framework for these "invisible" causes:

- Chronic Presentation (Cause Unknown): Attributed to *Poorva Janma Krita Papa* (sins of past lives), *Daivika Shakti* (divine forces), or *Atma Karma* (actions of the soul). These might correlate with hereditary diseases or chronic conditions with complex, multifactorial etiologies that were not fully understood in ancient times.
- Acute Presentation (Cause Unknown): Here, entities like Bhoota, Preta, Pishacha, Graha, Jataharini, Rakshasha, Asura, etc., are invoked. This strongly suggests that "Graha Rogas are counted in acute/emergency/severe presentations with cause unknown." This is the critical juncture where the ancient wisdom begins to align with modern microbiology.

5. *Graha* as Microorganisms: A Compelling Hypothesis

The central hypothesis put forth is that "*Graha*, *Bhuta*, *Preta*, *Rakshasa*, *Pishacha*, *Jataharini*, *Asura* can be considered as different microorganism like Virus, Bacteria, Protozoa, spirochetes, etc which are widely spread in this universe." This interpretation offers a compelling way to understand the attributes of *Grahas*:

- Living and Moving: *Grahas* are described as living entities that "attack the body," causing *Himsa* (torturing/pain). This aligns with the fundamental nature of pathogens.
- *Bhayanaka*, *Amanusha* (Terrible, Non-human): Their virulence and high mortality rate are emphasized, mirroring the impact of severe infections.
- Nocturnal Movement: Their tendency to "move out during night hours" or prefer "dark areas/low temperature areas/humidity" could be a metaphorical representation of microbial proliferation in specific environmental conditions or the increased vulnerability of the host during rest. [4]
- *Pracchanna Vyadhi* (Hidden Disorder): *Grahas* cause "severe disorders *Teevra*," but their entry is "identified only after the first symptom," implying an incubation period, a hallmark of infectious diseases.
- Changeable Size and Shape: The idea that *Grahas* "frequently changes the size and shape" or "pass through different stages of life cycle like larva, egg, spores etc." directly mirrors the pleomorphism and life cycles of various microorganisms. [5]
- Invisible to the Naked Eye: The assertion that they are "invisible by the naked eye" but "seen by a special aide" or *Shastra chakshu* (instrumental vision), *Divya chakshu* (divine vision), or *Jyana chakshu* (vision through knowledge) strongly

suggests the use of a microscope or specialized diagnostic tools. $^{[6]}$

5.1. Similarities Between *Graha* and Microorganisms: A Detailed Comparison

Nature	Graha Rogas	Microorganisms
Living	Living (as they move and attack)	Living
Prone time of movement	Night hours	Dark areas/low temperature areas/humidity
Method of invasion	Hold/seize the body, attack and cause Pracchana Vyadhi	Entry will be identified only after the first symptom
Incubation period	Can't be identified like entry of <i>Atma</i> inside the body, image inside a mirror	Follows the incubation period
Size and shape	Change size and shape frequently as per demand	Pass through different stages of life cycle like larva, egg, spores etc.
Generalized/localised	Cause generalized affliction of body requiring both <i>Yukti</i> and <i>Daiva Vyapashraya Chikitsa</i>	Cause generalized involvement (both body and mind)
Presence of fever	Cause fever as a Purva Rupa	Usually causes fever as the first symptom
Visibility	Invisible and visible only through certain visual aids or special vision power	Invisible by naked eye - visible by a microscope
Entry inside the body	Enters the human body who follows <i>Adharma</i>	Enters the human body in search of definite and indefinite host in an immuno-deficient person
Diagnosis	Difficult due to rapid onset, progression and severity	Diagnosis of an individual organism is impossible without culture study
Treatment	Apta Vakya should be followed suggesting need of an expert's opinion	Previous experiences, prevalence rate of infection in a given area and empirical treatment will be followed
Intention of entry	Himsa (tissue injury), Rati (sexual thrust to complete life cycle), Archana (nourishment)	In search of host, to get nourishment and to complete reproductive cycle are the three main intentions
Outcome of invasion	Does <i>Raksha</i> (protection) of the body	Infection leaves back certain immunity

This comparative analysis strongly supports the hypothesis that *Grahas* can be understood as ancient conceptualizations of microorganisms and their interactions with the human host. The "intention of entry" – *Himsa*, *Rati*, and *Archana* – can be reinterpreted as the pathogen's goal of causing tissue damage, completing its life cycle, and obtaining nourishment, respectively.^[7] The "protection" (*Raksha*) left by invasion could be seen as the development of immunity.

5.2. Understanding *Bhuta*, *Preta*, *Pishacha*, and *Rakshasa*^[8]

- *Bhuta-Pishacha*: Described as a type of *Bhuta* that likes to reside in *Mamsa* (flesh), possibly referring to flesh-eating bacteria or organisms causing necrosis.
- **Preta:** Literally "one who has departed," associated with *Punaruthpathi Hetu* (cause of re-existence) and a craving for it. Metaphorically, this could represent resilient microbial forms or dormant stages.
- Rakshasa: "From which one has to be protected."
 They like to reside in Mamsa, Rakta (blood), and Vasa (fat). The Rakshoghna gana of drugs (e.g., Siddartaka, Sala, Guggulu, Vacha, Sarshapa) mentioned for their treatment are often aromatic, antiseptic, and disinfectant in nature, further strengthening the microbial link.

The concept of "non-zygotic nature" of *Grahas* and "asexual type of reproduction, spores etc." aligns perfectly with the reproductive strategies of many microorganisms. Thus, "*Graha* is... invisible, living entity – microscopic nature which passes through different phases of life cycle- antigenic to the body and cause pain and torture and can be visualized by special aide like microscope, leads to generalized disease with acute rapid severe presentation that follows the incubation period. Fever is the first symptom in any infections." This conclusive statement solidifies the interpretation of *Graha Rogas* as infectious diseases.

6. Why Microorganisms/*Graha*s Attack the Body: The Role of Adharma

Modern science explains microbial attacks through factors like:

- Hygienic issues (personal, community)
- Low socio-economic status
- Improper food habits, lifestyle
- Adulteration of food, contamination of air, water, milk
- Epidemics and endemics, environmental hazards, sudden climate changes
- Drought, flood, war, destruction
- Improper waste and dead body disposal
- Continuous work (*Sahasa Karma*), contact with contaminated persons

- Traveling, neglecting health tips, overcoming expert advice
- Any condition weakening the immune system.

Ayurveda explains the vulnerability to *Grahas* through the concept of *Adharma* (unrighteous conduct or wrong way of living). *Adharma* is defined as acts that disturb physical, psychological, spiritual, and social health. [9] This includes:

- Not following *Swasta Vritha* (healthy regimens), *Sad Vritha* (ethical conduct), *Dinacharya* (daily routine), *Ritu Charya* (seasonal routine), *Achara-Rasayana* (conductive rejuvenation), personal hygiene, and *Dashavida Papa* (ten sinful acts).
- *Adharma* creates "loop holes in the body" and "in the Immune system," making the body vulnerable.
- Emotional imbalances like *Kama* (lust), *Krodha* (anger), *Lobha* (greed), *Mada* (intoxication/arrogance).
- Binna Vrutha (change in conduct), Bhinna Achara (change in lifestyle), Ashoucha (uncleanliness), Malinyasa (unhygienic conditions).

This further connects the lack of consultation with *Brahmans*, *Gurus*, and *Sages* (who were sources of knowledge) to wrong management and diagnosis, equated to *Guru Shapa* or *Deva Shapa* (curse of the teacher or gods). This highlights the importance of seeking expert guidance, which, in ancient times, might have been intertwined with spiritual authority, but ultimately points to the need for informed decision-making in health.

Prajnaparadha (intellectual blasphemy or errors of judgment), both Sadhya (current) and Poorva Kritha (past), and Papa Karma (sinful actions) are also cited as factors. The role of Manas (mind) and faith is crucial, as is avoiding lonely and inauspicious places, fearful conditions, taking food in broken vessels, sharing unhygienic items, anger, cruelty, Mithya Ahara Vihara (improper diet and lifestyle), and neglecting hygiene.

The entry of microorganisms into the human body is facilitated by a weakened immune system, extreme unhygienic conditions, malnutrition, and abnormal lifestyles disrupting biological rhythm. This directly correlates with the concept of *Adharma* making the host vulnerable.

6.1. Intentions of Entry: Himsa, Rati, Archana

The ancient texts describe three intentions for *Graha* entry^[10]:

Himsa (Torture/Pain): This refers to the pathogenic nature of microorganisms, causing tissue injury. Viral infections are cited as a prime example, with the concept of Deha Dhatu Pratyaneeka Bhutani (entities antagonistic to body tissues) aligning with antigen-antibody reactions and hypersensitive responses. The severity of Himsa depends on the body's immune system.

- Rati (Body Manipulation/Sexual Thrust): This points to the pathogen's search for a host to complete its life cycle, particularly asexual reproduction. Examples like malaria and worm infestations are relevant here, where the organism manipulates the host for its reproductive purposes.
- Archana (Nourishment/Worship): Bhutas are described as Ahara Kama (desiring food) and thriving on mamsa, asruk (blood), and vasa. This signifies the pathogen's need for nourishment from the host to proliferate and cause disease. Tubercular bacteria are given as an example.

6.2. Vulnerable Areas and Timing of Graha Entry

Several situations that make individuals vulnerable to *Graha* entry, which can be interpreted as high-risk scenarios for infection:

- Ekantha Vasa (staying alone), Shoonya Graha Vasa (staying in empty houses) could refer to isolated environments where pathogens might thrive or immunocompromised individuals being more susceptible.
- Meeting of four roads (crossroads) historically, points of convergence for people and potentially disease spread.
- Copulation during dust and dawn, during days of fortnight and full moon, during menstrual cycle – could relate to specific times of hormonal or physiological vulnerability, or general hygiene practices.
- Wrong procedure of reading, teaching, etc. possibly indicating disruptions to routine or specific behaviors that increase risk.
- Time of great war/destruction mass gatherings, poor sanitation, and stress all contribute to disease outbreaks.
- Near trees, temples, crematoriums environments that might harbor specific pathogens (e.g., fungi, bacteria).
- Streeyam Prajanana Kale (during delivery) –
 highlights the extreme vulnerability of mother and
 child to infections during childbirth, especially
 without aseptic practices.
- Overcoming rules of *Brahmacharya*, during vomiting, purgation, touching inauspicious things, entering temples/eating without bathing, consuming meat, honey, jaggery, *Tila*, *Madya* left by others these emphasize personal hygiene, diet, and adherence to health-promoting behaviors.
- Wandering at night hours at streets and burial grounds exposure to environmental pathogens.

6.3. Incubation Period of Graha

Ayurveda explicitly states, "*Grahas* will also fulfill the nature of Incubation period. They cause *Pracchanna Vyadhi* – Hidden disorder." This is a crucial parallel, likening the invisible entry and subsequent manifestation of symptoms to "entry of *Atma* inside the body" or "entry of Light inside the mirror to produce the image."

7. The World of Microorganisms and Graha

The "world of microorganisms" is described as "infinite," "invisible – but inseparable," maintaining the ecosystem, and "never intended to attack – but it is the host tendency." This ecological perspective is profound, acknowledging that microorganisms are a natural part of existence and pathology arises when the host's defenses are compromised.

Similarly, the "World of *Bhuta* and *Graha*" is described as infinite (*Parivaro ethi anantho Bhuta loke*), with 18 *Bhutadipathi* (lords of *Bhutas*) and cores of subtypes. The names are given based on *Surasuradhi Samvasa*, *Samsarga*, *Sheelachara*, *Karma* – meaning they "live in the same body," "within same Dhatus," "follows conduct and nourishes," and "do the same karma." This metaphorically describes how different pathogens might colonize specific tissues, adapt to the host's metabolism, and exert their effects.

7.1. Portal of Entry for Graha

The virulence of *Grahas* varies, and their portals of entry are different:

- *Sura-Asura:* Primarily cause diseases of the mind "just by looking" (*avalokayanthe*), leading to "Psychological disturbance followed by physical disturbance." This might relate to psychosomatic conditions where mental stress weakens immunity, making one susceptible to infection, or conditions presenting with primary neurological symptoms.
- *Gandharva:* By touch (*Sparsha*) affecting skin, mucous membranes.
- *Uraga:* Samvishathe (enter inside the body) affecting respiratory, GIT, etc.
- Yaksha: By "out bursting a specific odor."
- Rakshasa-Pishacha: Vahayantho Adhi Ruda (by riding on the person).
- *Pirtu:* By observation.

This diverse range of entry mechanisms further supports the microbial analogy, where different pathogens have specific routes of infection.

7.2. Origin of *Graha*: Physiological and Pathological Roles

Grahas are said to be "produced for protective purpose," protecting the universe and people, akin to "Microorganism and the ecosystem of the universe" performing roles in degradation, photosynthesis, fermentation, and nitrogen balance, and being present in intestinal bacterial flora. This highlights the dual nature of microorganisms – many are beneficial, but some can become pathological when the balance is disturbed. Grahas "continuously search a host for survival" and "attack the human body which was made vulnerable for its entry due to the effect of Adharma which suppress the body immune system." This is a profound Ayurvedic understanding of opportunistic infections.

7.3. Why Graha Turn Pathological?

Grahas turn pathological due to Adharma or "Human Errors." All the endogenous disorder are due to human error. Similarly- Grahas are exogenous disorders due to human errors (It is not the error of microorganism)." This shifts the blame from the "Graha" (microorganism) to the host's compromised state, which is a very modern ecological and immunological perspective. Adharma followed by the baby, mother, Dhatri (wet nurse), and caretaker, alongside violations of Swasta Vritha, Sadavritha, Dinacharya, improper food style, Vihara, Heena, Mitya, Ati Yogas (improper, deficient, or excessive regimens) all contribute to this vulnerability.

8. Clinical Manifestations: Fever and Breast Milk Vitiation

- **Fever:** Consistent with infections, fever is described as the "first symptom in infections" and in *Graha Rogas*, indicative of infection. The "continuous, unconsoleable cry" and fever in children are key indicators.
- **Breast Milk Vitiation:** *Grahas* can cause breast milk vitiation, similar to organisms passing through breast milk or during close contact. The example of *Shri Krishna* and *Putana* highlights this. This indicates a qualitative and quantitative change in milk, affecting its palatability and potentially transmitting infection.

9. Morphology of Grahas and Symptoms

Mahabharata and Sushruta^[11] are cited for explaining the "Morphology" of Grahas, describing them as "virulent organism[s]" with "red color" (blood-related), "aquatic Bacteria," "Acid Resistant," "Anaerobic-Aerobic," and "Fungi." They "live near to their vectors, Habitat." This again points to the diverse nature of pathogens and their environmental preferences.

The mythological explanations^[12], like the story of Revati or Putani, are re-interpreted as symbolic representations of the "struggle between body immune system and Pathogen." The "clever" introduction of health principles in lifestyle "by producing the scientific health principle in Religious bottle" is emphasized.

Grahas cause multi-system disorders affecting the central nervous system, respiratory system, dermatological system, gastrointestinal system, urinary system, genital system, and psychological well-being. This is "commonly seen in infectious disorders."

The "out bursting of different smells in all *Graha*" from body surface, urine, fecal materials is connected to metabolic problems (inborn/acquired), accumulation of intermediate metabolic waste (e.g., in diabetes, phenylketonuria), extreme unhygienic conditions, and apocrine secretions. This is an insightful observation, as many infections or metabolic disorders alter body odor.

10. Treatment of Graha Rogas: A Holistic Approach

The Ayurvedic treatment approach for *Graha Rogas* mirrors modern principles of infection control and management:

Microorganism Treatment	Graha Roga Treatment	
Identification of the case	Identify the <i>Graha Rogi</i> by symptoms	
Isolation of the case	Restriction for entry – to prevent spreading	
	Isolation of the case – separate room, one caretaker with aseptic measures, prevention of cross-infection	
Strict aseptic measures	Room cleaned twice, spreading <i>Ushna</i> drugs (hot/pungent), <i>Basma</i> (ash) etc.	
Symptomatic treatment	Snana (bath), Ghrita Prayoga (ghee preparations), Parisheka (affusion), Lepas (poultices), Avagaha (medicated baths), Oushadha Dharana (wearing medicated substances), Dhoopana (fumigation), Dhooma Pana (inhalation of fumes), Agni Dannda (cauterization/fire therapy, metaphorically), Homa (fire rituals)	
Target treatment	Specific herbal/mineral preparations, perhaps based on <i>Dosha</i> or <i>Graha</i> type	
Assurance/mental support	Counseling, Daiva Vyapashraya Chikitsa, Swasti Vachana, Mantra Prayoga	
Identify the pathogen by culture study	Implicit in the detailed symptomatic diagnosis and choice of specific <i>Graha</i> treatment.	
Prevent complications	Comprehensive care, symptomatic relief.	
Prevent spreading in society	Bali Karma, Dhoopana, Dhooma Pana, Homa (mass disinfection). [13]	
Rules for attendees	Restriction on visitors, specific hygiene practices, avoidance of unethical activities, alcohol, certain foods, sexual activities. Daily bath with <i>Lepa</i> .	
Isolation of the Child	First priority in any infection, same as epidemic/contagious infections.	

10.1. Key Therapeutic Modalities

- **Environmental Control:** Keeping the child in a separate, clean room, burning fire, sprinkling water, spreading anti-infective *Basma*, lighting mustard oil lamps (for illumination and preventing dryness) are all measures to create an aseptic environment.
- Oushadhi Dharana Method: Tying Pottali (pouches) of powdered and Bhavana (processed) drugs with strong aromatic and disinfectant qualities around the neck or wrist. This is a method of localized and continuous exposure to anti-infective agents, similar to modern patches or topical applications. Aparajitha, Vacha, Pippali, Sarshapa, Sahadevi, Nagadanti are mentioned as key drugs, many of which possess antimicrobial properties.
- Mantra *Chikitsa*: Re-interpreted not as mere chanting, but as a form of counseling that fosters positive attitude, removes negativity and confusion. It's about "Bringing the positive thinking" and accessing "hidden secret pockets which guide us," potentially aligning with music therapy or electromagnetic waves influencing brain states.
- Bali Chikitsa: Often misunderstood, Bali is seen as both psychological and preventive. It is a "concept of culture media" providing a "non resisting host" for organisms, thus diverting them from the human body. It is also a method of "mass disinfection" before functions or opening homes. The specific "vegetarian Bali material" (or non-vegetarian for certain Grahas) for different Grahas parallels the selective media used for culturing different microorganisms. This ritualistic offering serves to "control virulent spreading of infection."
- *Dhoopana* (Fumigation): Inhalation therapy where fumes from burning drugs are absorbed through the highly vascular respiratory mucosa. It's compared to nebulization but is passive and non-invasive. Drugs

- like Puti Karanja, Bhallataka, Ajamoda, Kustha, leaves of Sarshapa, Nimba, Ashwakura, Vacha are burned in ghee to produce oxide forms. Dhoopana is for individual room/bed/linen sterilization and environmental cleaning, while Homa/Havana is for larger areas like houses, streets, or cities (akin to fogging). This emphasizes the importance of environmental disinfection.
- Lepas and Pariseka (Poultices and Affusions):
 Aromatic drugs are applied externally to maintain skin surface cleanliness, prevent infection, and keep away vectors/insects. Their Katu, Tikta, Kashaya nature (pungent, bitter, astringent tastes) suggests antimicrobial and insect-repellent properties. [14] They help maintain skin pH, prevent bad body odor, and are bactericidal, bacteriostatic, anti-infective, antiseptic, and disinfectant, reducing cross-infections.
- Ghrita Preparations (Ghee-based formulations): Lipid-soluble preparations like Kumbha Ghrita, Maha Kumbha Ghrita, Purana Ghrita (old ghee), and Prapurana Ghrita (very old ghee) are described as Shubhakara (auspicious), Tridosha Nashaka (alleviating all three Doshas), and Graha Dosha Hara (removing Graha afflictions). Ghee, especially aged ghee, is known for its medicinal properties and as a carrier for lipid-soluble compounds, making it an effective medium for delivering therapeutic agents.

11. Conclusion: The Enduring Relevance of *Graha Rogas*

This review masterfully re-frames the ancient Ayurvedic concept of *Graha Rogas*, offering a compelling interpretation that bridges classical wisdom with modern microbiology. By consistently drawing parallels between the characteristics of *Grahas* and microorganisms, their

modes of invasion, the host's vulnerability, and the treatment modalities, this review demonstrates the inherent scientific rationales embedded within what might initially appear as mythological narratives.

The concept of *Adharma* as a precursor to *Graha* affliction serves as a powerful reminder of the importance of holistic well-being — encompassing physical hygiene, mental purity, ethical conduct, and harmonious lifestyle — in maintaining immunity and preventing disease. The multi-faceted treatment approach, combining environmental sanitation, external applications, internal medications, psychological support, and community-level interventions, reflects a comprehensive strategy for managing infectious diseases that remains relevant even today.

Understanding *Graha Rogas* through this lens not only enhances our appreciation for the depth of Ayurvedic knowledge but also encourages a re-evaluation of ancient medical systems. It suggests that many seemingly esoteric concepts were, in fact, attempts to explain complex biological phenomena in the language and understanding of their time. This perspective can help integrate Ayurvedic principles into modern public health strategies, emphasizing prevention, hygiene, and a holistic approach to health that strengthens the individual's inherent resilience against both visible and invisible threats. The enduring wisdom of *Graha Rogas* is thus not a relic of the past, but a timeless guide for fostering health and combating disease in the present.

REFERENCES

- Charka, Charaka Samhita edited by Pt Kashinath Shastri and Dr Gorakhnath Chaturvedi with Hindi Commentary Vidhyotini, Reprint edition, Volume-II, Nidana sthana, verse No. 7/10 Chaukhambha Bharati Academy, Varanasi, India, 2008; 659.
- 2. Vagbhatta, Astanga Hridaya edited by Kaviraj Atridev Gupta with Hindi commentary Vidyotini, Reprint edition, Uttara Tantra, verse no. 3/3, Chaukhambha Sanskrit Sansthan, Varanasi, India, 2005; 461.
- 3. Shastri Jagannath Acharya (translator), Samkhyakarika of Shri Ishwarakrishna, reprint edition, Delhi, Motilal Banarsidass Publishing House, 2022, Karika no. 7, page no. 15.
- 4. Kasyapa Samhita, edited by Sri Stayapala Bhisgacharya with Hindicommentary Vidyotini, 10th edition, Kalpa sthana, Revatikalapa adhaya, Verse no. 8, Chaukhambha Sanskrit Sansthan, Varanasi; 2005; 190.
- Vagbhatta, Astanga Hridaya edited by Kaviraj Atridev Gupta with Hindi commentary Vidyotini, Reprint edition, Uttara Tantra, verse no. 3/32, Chaukhambha Sanskrit Sansthan, Varanasi, India; 2005; 463.
- 6. Kasyapa Samhita, edited by Sri Stayapala Bhisgacharya with Hindicommentary Vidyotini, 10th edition, Kalpa sthana, Revatikalapa adhaya,

- Verse no. 8, Chaukhambha Sanskrit Sansthan, Varanasi, 2005; 190.
- Kasyapa Samhita, edited by Sri Stayapala Bhisgacharya with Hindi commentary Vidyotini, 10th edition, Sutra sthana, Revatikalapa adhaya, Verse no. 1, Chaukhambha Sanskrit Sansthan, Varanasi, 2005; 06.
- 8. Kasyapa Samhita, edited by Sri Stayapala Bhisgacharya with Hindi commentary Vidyotini, 10th edition, Kalpa sthana, Revatikalapa adhaya, Verse no. 8, Chaukhambha Sanskrit Sansthan, Varanasi; 2005; 190.
- Atharva Veda edited by Vishwa Bandhu; Vishveshwaranand with Sayana Commentary, Part I-IV, Verse no. 2- 10, 6 Vedic Research Institute, Hoshiarpur, 1961.
- Kasyapa Samhita, edited by Sri Stayapala Bhisgacharya with Hindi commentary Vidyotini, 10th edition, Sutra sthana, Revatikalapa adhaya, Verse no. 1, Chaukhambha Sanskrit Sansthan, Varanasi, 2005; 06.
- 11. Sushruta Samhita edited by Kaviraja Dr Ambika Dutta Shastri with Hindi Commentary Ayurved Tatva Sandipika 12th edition, Volume –I Sharira sthana, Verse no. 10/56, Chaukhamba Sanskrit Sansthan. Varanasi, India, 2001; 81.
- 12. Satapatha Brahmana edited by Pt A Chinnaswami Shastri, Verse no. 4-6; 5-1 Chaukhamba Sanskrit Sansthan, Varanasi, 1984.
- 13. Vagbhatta, Astanga Hridaya edited by Kaviraj Atridev Gupta with Hindi commentary Vidyotini, Reprint edition, Uttara Tantra, verse no. 3/41-48, Chaukhambha Sanskrit Sansthan, Varanasi, India, 2005; 464.
- 14. Vagbhatta, Astanga Hridaya edited by Kaviraj Atridev Gupta with Hindi commentary Vidyotini, Reprint edition, Uttara Tantra, verse no. 3/41-48, Chaukhambha Sanskrit Sansthan, Varanasi, India, 2005; 464.
- 15. Chakradutt, edited by Shree Jagdishprasad Tripathi with Hindi commentary Bhavarthasandipini, fifth edition, Bala Roga Chikitasa, Verse no. 64/74, Chaukhambha Sanskrit Series Office, Varanasi, 1983; 529. symptoms.