

Comprehensive Clinical Evaluation of Mala (Purisha) Pariksha through Trividha Pariksha for Assessment of Agni and Dosha Status: A Classical and Contemporary Integrative Study

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Abstract: *Purisha (feces), is one among the principal shaaririk Mala, that serves as a crucial indicator of digestive efficiency, metabolic status, and systemic health in Ayurveda. In our classics, particularly Yogaratnakara, has emphasize detailed examination of mala (purisha) characteristics for assessing Agni (digestive fire), Dosha imbalance, and disease prognosis. This article presents a comprehensive clinical framework for mala (purisha) pariksha through trividhaa pariksha that is darshan, sparshan and prashna segregated with modern stool examination techniques. Special importance is given to stool colour (varna) and its disease correlations, along with sama-nirama differentiation and prognostic indicators. The study highlights the relevance of our ancient Ayurvedic diagnostics in contemporary to that of clinical practice.*

Keywords: *Purisha pariksha, Mala Examination, Agni, Dosha, Trividhaa pariksha, Stool Analysis, Yogaratnakara*

I. INTRODUCTION

Ayurveda, is the ancient science of life, fundamental principle of which is based on the concept of *Dosha, Dhatu and Mala Siddhanta*, which controls both physiological and pathological processes within the body.^[1] Among these three pillars, *Mala* represents the metabolic waste products that are essential for maintaining internal homeostasis through proper timely evacuation.^[2] *Ayurveda* considers mala as a very important indicator of internal functional status specially which is reflecting the efficiency of digestion, metabolism and systemic balance on the contrary to this modern science consider it as merely the metabolic excretory material.

Malas are classified into 2 types: first is *Shaaririk* or *Anna mala – Mutra, Purisha, Sweda* which are formed during the process of digestion while *Dhatu Mala – By-products of tissue metabolism*.^[2]

Among these *shaaririk mala*, *Purisha* (feces) holds prime clinical importance as it represents the end product of digestion. It is formed from the *kitta bhaga* after the separation of *saara bhaga* from the total waste components. It is mainly the solid waste product colour of which varies from yellow to brown.^[3] The main Pathophysiology behind formation of various diseases are vitiation of *dosha* and *agni dusthi*.^[4] Hence the formation, consistency, quantity, quality of evacuation of *mala (purisha)* is directly influenced by the status of *agni*, the normalcy of *doshas*, dietary intake and functional integrity of gastrointestinal tract.

Yogaratnakara has described *mala (purisha) pariksha* under the *asthasthana pariksha* which provides valuable insights into the internal functionality of the body.^[5] It helps in assessing *Agni bala*, identifying *Dosha prakopa*, detecting the presence of *ama*, and understanding disease progression as well as prognosis of the various diseases.^[3] Subtle variations in mala (*purisha*) characteristics such as colour (*varna*), consistency (*sanghata*), odour (*gandha*), and associated features like mucus, blood, or undigested food can indicate underlying pathological processes even before the



manifestation of unconcealed clinical symptoms. With the help of *trividha pariksha* mentioned by *Vagbhatacharya* that is *darshan* (inspection), *sparshan* (palpation) and *prashna* (interrogation)^[6] one can provide a structured and comprehensive approach for evaluating *mala (Purisha)*. This tri-modal assessment enhances diagnostic accuracy. According to modern science stool examination remains a fundamental investigation in diagnosing gastrointestinal disorders, infections, malabsorption syndromes, and systemic diseases. Parameters such as colour, odour, PH, consistency, presence of occult blood, parasites, and biochemical markers are routinely assessed.^[7] Interestingly, many of these observations completely matches the descriptions provided in our classical texts. Therefore, *Purisha Pariksha* stands as a unique intersection between ancient *Ayurvedic* diagnostics and modern science.

Aim:

To evaluate the clinical significance of *mala (purisha) pariksha* through *trividhaa pariksha* for assessing the status of *agni* and *dosha* imbalance with integration of *Ayurvedic* and modern diagnostic perspectives.

Objective:

To analyze *mala (purisha)* as a diagnostic parameter in *Ayurveda*.

To study characteristics of *mala (purisha)* based on *dosha* and *Agni* status.

To elaborate *Trividhaa Pariksha* in *mala (purisha) pariksha*.

Materials and methods:

This study is a narrative review based on classical *Ayurvedic* texts which includes *Charaka samhita*, *Sushruta samhita*, *Astanga Hrudaya*, and *Yogaratanakara*, along with relevant modern literature. Data was systematically analyzed and synthesized to correlate *Trividha Pariksha* findings with contemporary stool examination.

Conceptual Basis of Purisha Formation and Examination:

Mala (purisha) is the waste product of food formed at the end of *sthula pachan*.^[3] *Avasthambha* is main function of *mala (purisha)*.^[8] *Panchabhautik* composition of which comprises of *agni* and *vayu mahabhuta*. Its constituents are undigested food material and *sneha* of *majja mala*.^[3] *Purishvaha srotas* which comprises of *pakvashaya* and *sthula guda* forms the site for evacuation of the *mala (purisha)*, important function of which is *dharana* of *vayu* and *agni*. Formation and regular timely evacuation of *purisha* maintains balance state of *vata dosha* and *jatharagni*.^[8]

The elimination of *Purisha* maintains the cycle of:^[8]

Strength and type of *agni*

Urge of hunger

Ingestion and digestion of food

Excretion of waste products and integrity of gastrointestinal function

Disturbances in digestion and metabolism are invariably reflected in *purisha* characteristics, making it a reliable indicator of internal physiological states.

Collection of Stool Sample (Purisha Samgraha):

Proper collection of stool is essential for accurate *mala (Purisha) Pariksha*. The specimen is collected with a swab or with a spatula at the time of defecation. Make sure that it is not contaminated with urine or water. Stool should be collected in a clean, dry, wide-mouthed container. Morning sample before the breakfast is most desirable approximately 5–10 g of sample is sufficient for routine examination. The sample must be processed within 2-3 hrs after the discharge, Delay in examination may alter physical and microbiological properties, including loss of parasite motility.

If immediate analysis is not feasible, the sample may be temporarily refrigerated, though prolonged storage should be avoided.^[9]



Mala (purisha) Pariksha by Trividhaa Pariksha:

1. Darshana Pariksha (Inspection)

This is the primary and most important method involving visual examination of stool.

A. Colour of Stool

Colour	Ayurvedic Interpretation ^[14]	Modern Correlation ^[11]
Brown	Normal (<i>Samagni</i>)	Bile pigments
Black (melena)	<i>Vata</i> aggravation	Upper GI bleeding, iron administration
Yellow	<i>Pitta</i> aggravation	Infection, bile excess
White/Pale	<i>Kapha</i> aggravation	Barium meal ingestion
Bright Red	<i>Rakta Dushti</i>	Lower GI bleeding, bleeding hemarroids, fissure, contaminated with menstrual flow
Clay	<i>Ruddhapatha kamala</i>	Post hepatic jaundice, obstruction to the flow of bile in intestines

B. Consistency

Consistency	<i>Dosha</i> ^[10]	Clinical Meaning ^[12]
Hard, dry	<i>Vata</i>	Constipation
Loose, watery	<i>Pitta</i>	Diarrhea
Sticky, mucoid	<i>Kapha</i>	Mucus/inflammation
Frothy	<i>Vata-Pitta</i>	Malabsorption
Dense, slimy	<i>Kapha-Pitta</i>	Chronic GI disorder
Pale, bulky, frothy	<i>Sannipatik</i>	Steatorrhea

C. Shape and Form

Type ^[12]	Interpretation
Pellet-like	<i>Vata</i> (dryness)
Flattened and ribbon-like	Intestinal obstruction
Bulky	<i>Kapha</i> / malabsorption
Fragmented	<i>Vata</i> imbalance
semisolid	Mild diarrhea, after taking laxatives
watery	Bacterial infection
Rice water stool	Cholera
Pea water stool	Typhoid

D. Additional Findings

Finding	Interpretation ^[14]
Mucus	<i>Kapha</i> disorder
Blood	<i>Rakta Dushti</i> / pathology
Worms	<i>Krimi roga</i>
Undigested food	<i>Agnimandya</i>
Stool sinks in the pan	<i>Sama purisha</i>
Stool floats in the pan	<i>Nirama purisha</i>



2. Sparshana Pariksha (Palpation / Inference)

Though direct palpation is limited, characteristics are inferred:

Feature	Dosha Interpretation
Dry, rough	Vata
Hot, irritating	Pitta
Cold, slimy	Kapha
Sticky	Ama presence

3. Prashna Pariksha (Interrogation)

A. Detailed patient history:

Symptom	Dosha
Constipation	Vata
Burning sensation	Pitta
Heaviness, sluggishness	Kapha
Incomplete evacuation	Vata
Frequent loose stools	Pitta

B. odour

Type	Indication ^[13]
Foul smell	Ama / infection, undigested protein and excess intake of carbohydrates
Mild odour	Normal digestion
Putrid odour	Severe diarrhea of malignancy or gangrenous dysentery

Agni and purisha relation:

Agni Type	Purisha Features	Clinical Interpretation
Samagni	Normal, well-formed	Healthy digestion
Mandagni	Sticky, foul, heavy	Ama formation
Tikshnagni	Dry, hard	Excess Pitta/Vata
Vishamagni	Irregular	Vata imbalance

Discussion:

Mala (purisha) Pariksha, serves as a clinically significant diagnostic tool which helps in reflecting the functional status of *agni* and the condition of *Dosha* (specially *vata dosha*). The present review emphasizes that the characteristics of *Mala (purisha)* are not isolated findings but are direct manifestations of digestive efficiency governed by *agni*. Qualitative and quantitative attributes of *purisha* completely depends upon the alteration in normal functioning of *agni* specifically *jatharagni* depending upon whether it is *mandagni*, *tikshnagni* or *vishamagni*. hence stool examination can be considered as an indirect yet reliable marker of metabolic and gastrointestinal function.

The application of *trividha Pariksha* provides a structured and multidimensional framework to assess the changes in the status of *agni* and *dosha*. *darshan pariksha* enables direct visual evaluation of features and characteristics of *mala (purisha)* such as colour, consistency, shape, and form. For instance, poorly digested, sticky stool, which sinks in the pan indicates *mandagni* and the presence of *ama*, whereas dry and hard stool reflects *tikshnagni* or aggravated *Vata dosha*. Similarly, variations in colour and consistency can be marked as to *Doshik* predominance and underlying metabolic disturbances.

Sparshana Pariksha further aids in understanding the physical properties of *mala (Purisha)*, such as dryness, viscous, sticky, irritability, and temperature, which are reflective of internal digestive states and tissue interactions. Although



less emphasized in modern practice, it conceptually supports the assessment of *agni* mediated transformations within the gastrointestinal tract.

And finally, *Prashna Pariksha* plays a crucial role in correlating patient recorded symptoms with observed signs and clinical findings, thereby completing the diagnostic triad. Clinical features such as constipation, diarrhea, burning sensation, heaviness, and incomplete evacuation provide indirect evidence of *agni* dysfunction and *doshik* imbalance. This integrative approach ensures that diagnosis is not limited to observation alone but is supported by functional and experiential data.

From a modern perspective, the concept of *agni* can be correlated with digestive enzymes, metabolic activity, gut motility, and microbiota composition. Disturbances in these parameters are reflected in stool characteristics, validating the *Ayurvedic* understanding. Thus, *trividha pariksha* serves as a bridge connecting clinical assessment with physiological processes.

II. CONCLUSION

Purisha Pariksha, when evaluated through the *trividha pariksha siddhant*, it provides a detail and clinically valuable assessment of status *agni* and *dosha*. *Mala (purisha)* characteristics serve as a direct reflection of digestive and metabolic processes, making them a reliable indicator of internal physiological balance.

The integration of *darshana*, *sparshana*, and *prashna Pariksha* allows for a better understanding of disease processes by combining visual data, inferential, and clinical insights. The central role of *agni* in determining the nature of *Mala (purisha)* highlights its importance in both diagnosis and therapeutic planning. Incorporating this *mala (purisha) pariksha* into routine practice may contribute to early diagnosis, improved disease understanding, and personalized patient management.

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