

SHORT COMMUNICATION

A Cross-Sectional Study of Jihwa (Tongue) in Unmada with Special Reference to Schizophrenia

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ABSTRACT

Ayurveda describes the human body as having numerous channels called Srotas, which transport the by-products and nutrients of metabolism to their designated locations. These Srotas can vary in form, being circular (Vrtta), elongated (Drigha), gross (Sthula), or minute (Anu), and they may be either finite or infinite in number. The mind (Manas) also operates through distinct pathways, interacting with the senses spread throughout the body. According to Acharya Charaka, Manovaha Srotas facilitate the flow of Chetana (Consciousness) to all living cells, covering the entire body. These channels are crucial for processes associated with Manas and play a significant role in psychosomatic conditions, where mental disturbances (Manasa Dosha) lead to physical symptoms (Sharira Dosha). In diseases such as Unmada (insanity), Apasmara, Nidranasha, and others, the imbalance of Manasa Dosha affects the brain and heart (Hridaya), seats of intelligence and consciousness. This results in conditions termed Mano-Sharirika (psychosomatic disorders). An essential diagnostic tool in such conditions is Jihwa Pariksha (Tongue examination), which provides insight into Srotas imbalances, including those of Manovaha Srotas. Parameters like tongue color, coating, fissures, texture, and movements help assess the patient's overall health and associated disorders. A study was conducted to evaluate Jihwa Pariksha in 49 patients diagnosed with Unmada (Schizophrenia). (DR. ABHINAY AGRAWAL, 2023). The analysis revealed significant findings, with most patients exhibiting tongue coatings and fissures. These characteristics suggest Manovaha Srotodushti (channel vitiation), reflecting psychosomatic disruptions. This study underscores the relevance of Tongue examination in diagnosing and understanding the manifestation of Unmada.

Keywords: Jihwa, Manovaha Srotodushti Vikar, Unmada, Schizophrenia, Tongue examination.

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INTRODUCTION

Acharya Charaka emphasized the crucial significance of Rogi Pariksha, stressing that the doctor's job should only begin after a patient has undergone a comprehensive examination. According to the Vagbhata and Sushruta Samhita, srotas are compared to the tiny pores and canals in flower stems. These pathways allow Rasadi and Poshta dhatu to circulate throughout the body, providing important nutrients. (1) Asthavidha Pariksha, an eight-part Ayurvedic examination that is crucial for determining the different causes of illnesses, was first proposed by Acharya Yog-Ratnakara. This eightfold examination covers Nadi (Pulse), Mootra (Urine), Malam (Fecal matter), Jihwa (Tongue), Shabdham (Patient Voice), Sparsham (Touch), Druk (Eyes and Vision), and Akriti (General Body Build). Jihwa Pariksha holds special significance in Rogi Pariksha among these Techniques. Ayurveda considers the Tongue as a map of the body, with each feature reflecting a different component of the body's constitution or imbalance. The appearance of the tongue, particularly its coating and color, is used as a diagnostic tool to determine the body's primary imbalances. (2). Ayurveda, a holistic medical science, views both Sharira and Manasa as the "seat of disease," & Rogadhishthana. The concept of health, or Swasthya, is the fundamental balance of the mind (Manas), soul (Atma), and body (Sharira). A person who is referred to as "Swastha" has Atma, Indriya, and Manas in a great state (3). When Atma (Soul), Indriya (Organs), and Manas (mind) are in a

balanced condition, it signifies that the tissue elements (*Dosha*, *Agni*, *Dhatu*, and *Mala*) are kept in balance, promoting longevity and good health. According to *Swastha's* description, the most crucial element is *Manas*, who regulates the metaphysical faculty's spiritual, psychological, and bodily well-being. *Ayurvedic* settings According to *Thridanda*, the combination of *Sattva* (thought), *Atma* (soul), and *Sharira* (body) sustains the world (4). *Manas* is regarded as the most crucial component of this "*Tridanda Purusa*," which is the basis for *Ayurveda*, and the name "*Ayu*" refers to the Inceparable coherence of these Three pillars. The combination of *Tridanda Purusha*, the sentient and subject matter of *Ayurveda*, serves as the foundation for the individual's functioning in the world. The examination of *Manas* (Mind) and Psychological Disorders may be as difficult as that of the body and physical ailments (5). The Eighth Chapter of the *Bhela Samhita Cikitsa Sthana* describes the five varieties of *Unmada*, their causes, and signs of *Nidana* in cure. *Unmada* is defined as the various actions and behaviors of the senses or the components of sensory perception, *Buddhi* (The intellectual or Discriminative factor), and *Citta* (The Emotional or Heart element). *Unmada* has been described as nothing more than the breakdown of the Three fundamentals of emotion, cognition, and sensory experience. The five varieties of *Unmada* (Insanity) are described in Chapter 7 of *Charaka Samhita Nidansthana*. Insanity results from the intellect losing its Equilibrium and the Mind becoming severely affected by a vitiated and exacerbated *Dosha*, which also blocks the *Hridaya* and *Manovaha Srotas* (thought channels). According to the description, the distortion of the Mind, Intellect, Consciousness, Knowledge, Memory, Desire, Manners, Behavior, and Conduct are the hallmarks of *Unmada*.

In *Ayurveda*, *Unmada* refers to a range of Mental problems, including ailments that are comparable to psychiatric diseases in contemporary medicine. An imbalance of *Vata*, *Pitta*, and *Kapha doshas* impacting the *Manovaha Srotas* (Mental channels) causes *Unmada*, a chronic illness marked by disruptions in behaviour, emotions, perception, and thought processes. Globally, the prevalence of mental health conditions such anxiety, depression, Schizophrenia, Bipolar disorder, and Psychosis is rising, posing serious health risks. These diseases can have a negative impact on everyday functioning, interpersonal connections, and overall health. In order to mitigate these consequences, early diagnosis and efficient care are essential. An integrated strategy that incorporates *Ayurvedic* therapies, psychological interventions, lifestyle changes, and medication when required is used. It is common for *Unmada* to go undetected until serious Behavioural, Emotional, and Cognitive abnormalities appear. *Jihwa Pariksha* (Tongue Examination) can be used as a non-invasive, low-cost preliminary diagnostic method for detecting early indications of *Unmada*. *Ayurveda* believes that Tongue anomalies such as Tremors, Discolouration, Dryness, Excessive coating, or Stiffness may reflect underlying *Doshic* imbalances that impair mental health. Tongue examination is a simple but important method for evaluating the existence of *Ama* (toxins), the phases of *Doshik* imbalance such as *Sama* (With toxins) and *Nirama* (Without toxins), and the circumstances of *Vridhhi* (Aggravation) and *Kshaya* (Depletion) of the *Doshas* (6). It reflects the Body's Digestive, Nutritional, and Metabolic condition, Revealing information about internal biological processes. Tongue examination has little strong scientific backing, despite its important use in *Ayurvedic* medicine as an assessment technique. Tongue examination, however, may be very useful in the diagnosis of diseases like *Unmada* (Schizophrenia). The purpose of this study is to explore the changes in the Tongue linked with *Unmada*, adding to the *Ayurvedic* literature and improving diagnostic techniques (7). To conduct and analyse changes in *Jihwa* manifested in patients of *Unmada* with special reference to Schizophrenia.

MATERIAL AND METHODS

Sources of data:

(A) Literary Sources –

- All Available *Ayurveda* Texts,
- All Available Modern Books,
- Reviewed Research Articles,
- Research Papers,
- Authenticated Internet Sources.

(B) Clinical Sources –

Patients were taken from OPD & IPD from Parul Ayurved Hospital, Parul Sevashram Hospital, Khemdas Ayurved Hospital, Waghodia, Vadodara, Gujarat.

Subjective criteria: Classical lakshanas of *Unmada Vikaras* were assessed.

Type of Study: Observational study.

Details of Clinical Study: An observational trial on 49 diagnosed patients of *Unmada* was conducted for a Research study.

Data Collection: Separate case paper Performa had been prepared and observations were noted.

Study duration: 18 Months

IEC Certificate No: PU/PIA/IEC/07/2023/265

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Inclusion Criteria:

1. Selection of patients were done irrespective of gender, socioeconomic status.
2. The diagnosed patients with *lakshana of Unmada* (Schizophrenia) between the ages of 18-60 years were included in this study.

Exclusion criteria:

1. Patient with local tongue infection and congenital anomalies were excluded.
2. Patients having major ailments of other systems.

RESULTS AND DISCUSSION

Age

In this study, the majority of patients were between the ages of 30-60. The majority of persons at this age lead sedentary lifestyles. The majority of patients in this age range were employed, and their lifestyle, eating habits, and daily routine all had a role in illness development.

Gender:

In this study, 51.3% of the patients were female and 48.7% were male, and there was no clear correlation between *Manas roga* participation and gender. However, there is little variation between the genders in this research.

Religion:

It was found that 92% of the patients were vegetarians. This might be attributed to traditional vegetarian dietary practices, with the majority of patients using *viruddha ahara*, *mamsahara*, *ushna*, *tiksha ahara*, and other supplements that aggravate *Pitta Dosha* and produce *Swedavaha Srotodushti*. [4, 5].

Addiction:

Addiction is a key factor in the formation of *Manas roga*. Healthy individuals typically have a tea addiction, while diseased individuals may use alcohol, tobacco, or smoke, causing vitiation of the *Manas Dosha* and *Vibhrama* of *Mana* and *Buddhi*, ultimately leading to *Manas roga* formation.

Deha Prakruti

The study found that the majority of patients were in the *Vata - Pitta* group. This might be because *Pitta* and *Vata* are primarily responsible for the *Rajasic Dosha* imbalance that causes Schizophrenia.

Changes on Jihwa in Unmada:

Colour:

Most of the patients have normal colour of Tongue (Pink) i.e. Out of total patients of *Unmada* 49 (100%) had normal color of *Jihwa*.

Coating:

According to *Charak*, The *Mashtishka majja*, or *Mastulunga*, is the entity that becomes vitiated by the *Manoabhogata* and produces the *Unmada* and *Apasmara* among the *Alpa Satva* peoples. *Unmada* is seen as the *Sharir-mano Adhisthit roga* and has a tight relationship with *Rasavaha* and *Majjavaha Strotas*. Vitiation of *Mashtishka majja* is related to the *majja dushti* Lakshana, as reported in *Murcha Bhrama*, etc. *Jihwa* is a *rasneindriya* with two primary functions: Speaking and Tasting. The vitiation of *Majja dhatu* and *majjadhara kala* results in *Grahanidosha* and the production of *Ama*, which produces the tongue coating [6].

Fissures:

Maximum patients were found with multiple fissures in this disease. *Vata* and *Kapha doshas* affect the *Jihwa* due to *Agnimandhya*, *Rasa dushti*, and *Ajeerna*, followed by *Kapha*, *shonita* and *Mamsa dushti* (*Acharya Sushruta*) mentioned *Jihwa* is formed from these Three, so that can be a reason for the formation of fissure in *Jihwa* [5, 7].

Table 1: Jihwa Changes in Unmada Patients ⁽⁸⁾:

Sr. No	Unmada	Changes in <i>Jihwa</i> (Total = 49)		
1		Color of <i>Jihwa</i>	f	%
		Normal	49	100
		Abnormal	00	00
2		Coating on <i>Jihwa</i>		
		No Coating	06	12.3
		Patchy Coating	16	32.7
		Thin Coating	24	48.9
		Thick Coating	3	6.1
3		Fissure on <i>Jihwa</i>		
		No Fissure	1	2
		Fissures 1-3 in Number	31	63.2
		Fissure 4-10 in Number	16	32.5
		Fissures more than 10 in Number	1	2
4		Texture on <i>Jihwa</i>		
		Normal	48	98
		Mild Rough	01	2



Fig 1: Examination of Jihwa : A] Central Longitudinal fissure tongue, B] Central Transverse Fissure tongue, C] Central Longitudinal with random furrow tongue, D] Central longitudinal and Coated tongue

CONCLUSION

The study found that the majority of patients were between the ages of 30–60, with sedentary lifestyles, irregular eating habits, and employment-related stress contributing to illness development. Gender distribution was nearly equal, with 51.3% females and 48.7% males, showing no significant correlation between gender and Manas roga. A large proportion (92%) of patients followed vegetarian diets, often consuming viruddha ahara and other Pitta-aggravating foods, leading to dosha imbalance. Addiction, particularly to alcohol, tobacco, and smoking, was identified as a contributing factor to Manas dosha vitiation and the onset of the disease. Deha Prakruti analysis revealed that most patients belonged to the Vata-Pitta constitution, linked to Rajsik imbalance and schizophrenia. Examination of the tongue (Jihwa) showed that all patients had normal tongue color, but multiple fissures and coating due to vitiation of majja and other tissues were commonly observed, supporting the relationship between digestive and neurological disturbances and Unmada.

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