

Exploring Post-COVID Syndrome as *Anukta Vyadhi* through the Insightful Lens of *Trividha Bodhya Samgraha*

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Abstract

Ayurveda is comprehensive in its approach which emphasizes naming a disease is not necessary rather understanding its pathological factors is crucial for the management of the disease. Acharyas have commented that, it is not necessary to know the exact nomenclature as that is not always possible. However, it does not mean that one cannot diagnose such a condition. It can be considered as *Anukta Vyadhi* and diagnosed by the virtue of *Trividha Bodhya Samgraha*.

The disease post COVID syndrome (PCS) affects multiple systems producing diverse multisystem sequelae without confined set of cardinal symptoms and cannot be directly correlated with any of previously listed Ayurvedic disease mentioned in classics and hence should be considered as *Anukta Vyadhisankara* and can be efficiently managed applying Ayurveda treatment principles.

Post COVID syndrome is the later complication of COVID 19 which may not be co-relatable with any of the previously listed Ayurvedic diseases, hence it

might be considered as *Anukta Vyadhi* as per Ayurveda and can be understood by *Trividha Bodhya Samgraha* described by Acharya Charaka and managed according to fundamental principles given for the treatment of *Anukta Vyadhi*. The Nidanapanchaka of post-COVID syndrome indicates that COVID-19 can be viewed as an *Ekarthakari Nidanarthakara Roga* leading to the development of post-COVID syndrome (PCS). This may arise from direct viral toxicity or improper treatment of acute COVID-19. Contributing factors include *Vataprakopa*, *Agnidosha*, *Ojokshaya*, *Alpasatva*, and lifestyle issues. The disease progression involves the SARS-CoV-2 virus affecting weak immune responses, leading to the accumulation of *Doshas* and prolonged recovery. Additionally, complications may arise from inadequate treatment in the acute phase, culminating in the emergence of PCS. The Ayurvedic fundamental principles if applied as per the *Dosha* and disease condition can certainly prevent the disease at the very first stage.

Key words: Post COVID Syndrome, Anukta Vyadhi, Trividha Bodhya Samgraha

Introduction

On an average, after every decade, new deadly diseases are reported. Ayurvedic texts have proposed model to predict the outbreaks of epidemics as well as its general guidelines for prevention and management.

As of February 2025, India has experienced several waves of COVID-19, with the most significant surge occurring during the third wave in late 2022. This surge was primarily driven by the Omicron variant, which resulted in less severe illness compared to previous variants. However, many individuals have reported ongoing health issues commonly referred to as post-COVID sequelae or long COVID. A study conducted by the Indian Council of Medical Research (ICMR) surveyed 8,042 patients 30 to 60 days after their discharge from hospitals. The findings revealed that 18.6% of these patients experienced shortness of breath, 10.5% reported fatigue, and 9.3% faced mental health challenges. One year later, these percentages decreased, with 11.9% reporting dyspnoea, 6.6% experiencing fatigue, and 9% dealing with mental health issues.ⁱ

Post-COVID complications can impact various organs, with potential causes including immune dysregulation and autoimmunity.ⁱⁱ While the immediate impacts of COVID-19 have lessened, the

ongoing presence of post-COVID symptoms continues to pose a significant public health issue in India, necessitating ongoing research and healthcare initiatives.

Numerous attempts have been made to understand the exact pathogenesis of Post-COVID Syndrome (PCS) and its correlation with diseases described in Ayurvedic texts. However, it is challenging to classify PCS under any single Ayurvedic disease due to the inconsistent presentation of symptoms and the unpredictable progression or development of post-disease sequelae seen in different individuals. These variations may be influenced by several factors, including individual constitution, diet, lifestyle, and immunity. Therefore, rather than forcing a correlation between Post-COVID Syndrome and previously documented diseases, it is more appropriate to consider it as *Anukta Vyadhi*ⁱⁱⁱ.

Acharyas have predicted that new diseases may emerge in the future due to changes in the environment, diet, and individual behavior. This is why they have articulated the theory of *Anukta Vyadhi* within the comprehensive science of Ayurveda. Consequently, Ayurvedic texts emphasize that correctly diagnosing a disease is more important than simply naming it.^{iv}

The clinical features of COVID-19 and post-COVID syndrome resemble those of several previously described diseases in conventional medicine, such as pneumonia, acute respiratory distress syndrome (ARDS), influenza, and viral

fevers. However, due to the presence of new causative factors and a distinct set of symptoms, conventional physicians classify it as a new disease and have given it a new name. Similarly, Ayurvedic practitioners can likewise view it as a new disease without attempting to correlate it with previously documented Ayurvedic diseases and may further elaborate it using the concept of *Anukta Vyadhi*.

Review Methods

For the current review article, various Ayurvedic texts were referred to establish co-relation of Post COVID syndrome with comparable described disease or diseased condition from Ayurvedic literature like Bruhatrayi and Laghutrayi. Also, research articles in co-ordinance with Post COVID syndrome published by scholars of Ayurveda, Ayurvedic authorities & institutes were referred. Total of 2441 articles were found, out of which 104 articles were referred on the basis of full text and relevancy. The findings are also derived from published health data, secondary research, and electronic search of conference proceedings, brochures, government policy documents, press releases etc. All collected information is described under the heads in narrative and tabular form.

Various correlations of post COVID syndrome with Ayurvedic Diseases (Based on scientific publications)

Post-COVID conditions have been correlated with various diseases described in Ayurveda, as

indicated in published articles. Below is a compilation of all these correlations.:

➤ *Jwara*^v

In Ayurveda, *Jwara* (Fever) has been mentioned as response of the body in terms of inflammatory reaction (Ama) and if remained under treated or ill-treated has further clinico-pathological consequences and affecting sequential tissues which can be understood as post COVID. Fever leading to bleeding disorders may have involvement of increased pro-inflammatory cytokines which causes platelet dysfunction, vascular abnormality, coagulation defects and fibrinolytic defects similar to post COVID hematological sequelae^{vi}.

➤ *Vata-Kaphaja Jwara*^{vii}

The prognostic outlook of long COVID-19 in Ayurveda perspective can be understood as *Vata-Kaphaja Jwara* which can develop *Raktapitta* (hematic pathologies) or *Shwasa* and *Kasa* (severe respiratory distress) in later stage.

➤ *Sannipata Jwara*

Post Covid disease has identified as a *Vata-kapha* dominant *Sannipata Jwara* of *Agantu* origin with *Pittanubandha* on the basis of clinical symptomatology of the disease and its classification in accordance with Ayurvedic principles, i.e. standard methodology of deciphering the *Dosha*-based pathology through signs and symptoms, is equally applicable in understanding the disease spectrum of post COVID^{viii}.

Another researcher opines that in Ayurveda, initial phases of the manifestation of COVID 19 can be comparable to *Agantuja Vata Kaphaja Jwara*. Uncontrolled conditions further vitiate other *Doshas* and another *Rasa, Rakta, Mamsadi Dushyas*, thus entering *Sannipataja* condition as in post COVID^{ix}.

One more research article states, while interpreting the disease on the basis of *Samprapti Ghataka*, by considering the causative agent and the clinical features mentioned above can be contemplated as an *Agantuja Vyadhi* which later on due to the involvement of *Nija Dosha* (faulty diet and lifestyle) develops to *Nija Vyadhi* as *Vata Kapholbana Hina Pitta Sannipataja Jwara*^x.

Agantuja varieties of any diseases can complicate into *Sannipatika* state with severe prognosis. The viral or bacterial fevers, along with malignancy, auto immune diseases, etc. are needed to be considered as *Sannipatika* state^{xi}.

➤ *Vata Prakopavastha*^{xii}

Post COVID problems are manifestations of *Vata Prakopa*. According to Ayurveda concepts, the symptoms of COVID-19 are similar to *Vata Kapha Pradhan Sannipataj Jwara* and there will be *Dhatukshaya & Agnimandya Avastha* in Post-COVID 19. *Vata Vyadhi* can appear due to *Dhatukshaya* or *Avarana*, according to the classics. Hence Post COVID symptoms can be executed due to *Dhatukshaya* and *Avarana*. *Dhatukshaya* occurs as a result of inappropriate *Chaya Upchaya* in

chronic *Sannipataja Jwara*, and all *Sapta Dhatus* are affected to some extent.

➤ Dhatu-Kshaya & Agnimandya Avastha^{xiii, xiv}

Instead of correlating post COVID with any disease, many researchers considered it as *Dhatu-Kshaya & Agnimandya Avastha*. When *Dhatvagni* decreases, the formation of the successive *Dhatu* may be hampered leading to *Dhatukshaya* which in turn causes a decrease of immunity (*Ojakshaya*).

➤ *Jirna Abhishangaja Jwara*^{xiii, xiv}

Abhishangaja Jwara which is one of the forms of *Agantuja Jwara* is the term for those caused by the contact of the poisonous air or toxic plants or other such toxins (*Visha*). Chakrapanidatta clarifies that *Bhuta* means *Vishakṛimi* or a virulent organism. Thus, *Abhishangaja Jwara* can be correlated with Covid 19. However, this *Abhishangaja Jwara* later may complicate with involvement of multiple tissues and organs. The initial stage of Covid 19 is exogenous disease which later converts into systemic (*Nija Jwara*) disease. Thus, Post COVID is later stage of *Abhishangaja Jwara*. Post Covid Syndrome can be correlated with *Jirna Abhishangaja Jwara* which lasts for more than 21days^{xv}.

➤ *Kshayaja Kasa*^{xvi}

In *Kshayaja Kasa*, there are symptoms which mimic Covid 19 and its chronic stage may present with

chest pain, runny nose, anorexia, fever, weakness, disturbed bowel function and slurred speech.

➤ ***Majja Dhatu Gata Jwara***^{xvii}

Hiccup, dyspnoea, cough and complications in vital organs are symptoms when pathogenesis of *Majja Dhatu Gata Jwara* occurs. Thus, the later stage of Covid 19 with aggravated immune response indicates invasion of *Jwara* in *Uttarottara Dhatu*.

➤ ***Jirna Jwara***

Post COVID condition can be referred as *Jirna Jwara* due to chronicity of symptoms.

➤ ***Punaravartaka Jwara***^{xix}

If a person, who has become free from *Jwara*, resorts to prohibited factors listed in the context of *Jwara* before gaining strength, then the *Jwara* reappears. Thus, few authors have correlated post COVID syndrome as *Punaravartaka Jwara*.

From the author's perspective, it is challenging to correlate post-COVID conditions with a specific Ayurvedic terminology due to the remarkable diversity and inconsistency of symptoms. The conditions described above represent particular diseases that have distinct cardinal symptoms and identifiable causes. In contrast, post-COVID is regarded as a syndrome rather than a disease, as the symptoms encountered are often inconsistent and cannot be traced back to a single cause.^{xviii}

Most of above correlated Ayurvedic diseases are the types of *Jwara*. Acharya Charaka says, the clinical

features invariably associated with *Jwara* are the feeling of heat or increased body temperature and discomfort in body and mind. Every living being suffering from *Jwara* have to experience *Santapa* , .

According to Chakrapani commentary, *Santapa* with respect to *Sharira* (physical condition) can be taken as increased body temperature or burning sensation; while regarding *Manasa* (mental condition) *Santapa* can be taken as *Vaichitya* i.e.

confusion or absence of mind^{xix}.

Though, some mental health conditions are linked to post-COVID, but they are not cardinal symptoms and do not occur in every post-COVID patient. Additionally, fever is not typically observed as a persistent symptom in post-COVID cases.^{xx}. In *Jirna Jwara* context also, it has described as due to the weaken body constituents fever remains persistent^{xxi}.

While in *Punaravartaka Jwara*, fever relapses^{xxii}.

In *Jwaramukti* features, Acharya have stated that when the person gets cured from *Jwara*, he will not experience any kind of *Santapa* (*Sharira-Manasa-Tapa*)^{xxiii}. This statement also supports the phenomena that PCS is not *Jwara*.

Hence post COVID syndrome may not be correlatable with any of the *Jwara* as it is devoid of the cardinal symptoms of *Jwara*. Although, *Jwara* can serve as causative factor for the development of PCS, hence PCS can be a complication of *Jwara*.

Some researchers have correlated PCS with *Kasa*. As discussed, regarding *Jwara*; the cardinal feature of *Kasa* is not mandatorily with PCS. Though, *Kasa* is observed in some of the post COVID patients, it is not always associated with PCS as cardinal symptom.

In one study, PCS has correlated with *Vataprakopavastha* and later in description part it has stated as *Vatavyadhi*. However, in some conditions of PCS *Vataprakopavastha* is observed, but it may not be taken as *Vatavyadhi* as even minimal symptoms doesn't match between PCS and *Vatavyadhi*.

Although, many researchers have stated that there is *Agnimandya* and *Dhatukshaya* in PCS without directly correlating it with any previously listed Ayurvedic disease.

By keeping in mind, all these facts, in the present study efforts have taken to elaborate the post COVID syndrome as *Anukta Vyadhi* as there are no specific relationship observed between PCS and any previously listed Ayurvedic disease.

UNDERSTANDING THE POST COVID SYNDROME AS ANUKTA VYADHI

Ayurveda addresses every aspect of human life. Its principles are timeless and can be adapted to align with changes in society, the environment, and emerging health conditions. The ancient sages, or Acharyas, foresaw the emergence of new diseases and introduced the concept of *Anukta Vyadhi*. These are diseases that are neither elaborated upon nor

described in the classical Ayurveda texts. The concept of *Anukta* serves as a valuable framework for understanding new diseases. It provides a textual background that facilitates the understanding, analysis, and application of knowledge related to these conditions. By employing the *Anukta* approach, healthcare practitioners can clarify the confusion that may arise from newly emerging illnesses that do not have precise counterparts in traditional Ayurvedic literature.

To understand the pathogenesis of *Anukta Vyadhi*, Acharya Charaka has mentioned the concept of *Trividha Bodhya Samgraha* (*Vikara Samuthana*, *Vikara Adhishthana* and *Vikara Prakriti Vishesha*) that deals with the principles of etiology and different stages of pathology of a disease. This concept holds basis for *Ukta Gada* (listed diseases) as well as for *Anukta Gada* (unlisted diseases). Thus, it can be applied to diagnose any of the disease. The logic behind this is that to recognize the *Sampraptighatakas* such as *Dosha-Dushya-Srotas* involvement in the pathogenesis of that particular disease; since without the involvement of these, the disease cannot get manifested and hence the thorough knowledge of these basic factors helps to understand the pathology for any disease, which may not have generated or a new disease and accordingly the treatment can be planned. If accurate diagnosis is made in proper and sequential manner, it provides the best outcome by assessing the response to multimodal approach of Ayurveda through treatment modality.

In context to *Anukta Vyadhi*, concept of *Trividha Bodhya Samgraha* has been mentioned that comprehends the pathological process of illness, it emphasizes on *Nidana*, *Dosha Dushya Sammurchana*, *Lakshanas* and *Adhishthanas* of the undescribed diseases^{xxiv}.

❖ *Samuthana Vishesha*

Samuthana means fundamental factor for initiation or origin of disease process. *Samuthana* is one of synonym of *Hetu* mentioned in Samhita. *Vikara Samuthana* refers to etiological factors that are responsible for causation of diseases. As per Acharya Sushruta, diseases do not occur without involvement of *Doshas* so an intelligent physician should perceive the symptomatology of unnamed ailments based on the manifestation of the signs and symptoms of vitiated doshas^{xxv}.

Chakrapani opines that successful treatment depends on proper understanding about *Nidana* of the disease^{xxvi}. Knowing the causative factors (*Dosha* etc.) is much beneficial in treating the disease rather than just naming the disease.

Vikara Samuthana Vishesha with respect to PCS

COVID 19 is *Agantuja*^{xxvii} (exogenous), *Janapadodhvamsa*^{xxviii} (epidemic) or *Upsargika*^{xxix} (infectious) disease as per Ayurveda. Post COVID syndrome is a complication or nuisance stage – *Upadrava Avastha* of COVID 19. To understand the etiology of post COVID syndrome according to Ayurveda, the related causative factors responsible

for PCS have to be categorized according to *Samuthana* principle described in Ayurveda.

▪ **Post COVID syndrome as *Nija Vyadhi***

COVID 19 is *Agantuja Vyadhi*, but post COVID syndrome can be considered as *Nija Vyadhi*; as PCS is nuisance stage produced by the further progressing pathology of COVID 19 and no viral residues have observed in post COVID. The sequelae in PCS are either due to immunosuppression by acute disease or due to detrimental effects of treatment taken for acute COVID; and no exogenous factor directly produce PCS. Acharya says exogenous diseases may further progress as endogenous diseases^{xxx} which is observed regarding PCS.

▪ **COVID 19 as *Nidanarthakara Roga* for post COVID syndrome**

According to Acharya Chakrapani, *Nidanarthakara Roga* means one disease act as causative factor for other disease^{xxxi}.

The main cause of *Nidanarthakara Roga* may be lack of proper treatment of previous disease or weak immunity of patient regarding that particular system.

Acharya says after noticing the disease manifestations, appropriate treatments should be adopted quickly, otherwise the disease can become severe.

Initially *Nidanarthakara Roga* manifests independently as a disease and later serve as an

etiological factor for another disease. Sometime the primary disease persists own and simultaneously produces another disease; such a condition is termed as *Ubhayarthakari Roga*. Besides sometimes the primary disease subsides by giving rise to secondary disease which is termed as *Ekarthakari Nidanarthakara Roga*. Means the primary disease may or may not continue to exist with the secondary disease. If the primary disease exists after the onset of a secondary then it is *Ubhayarthakari* and if primary one subsides after the onset of secondary it is *Ekarthakari*.^{xxxii}

COVID 19 can be considered as *Nidanarthakara Roga* for the evolution of PCS, as the PCS occurs in individuals having a history of SARS-CoV-2 infection, with persistent or recurrent symptoms and cannot be explained by any alternative diagnosis. COVID 19 is *Ekarthakari Nidanarthakara Roga* for PCS, because the set of cardinal symptoms present in acute COVID condition such as fever, sore throat, anosmia, ageusia etc. may not continue in PCS. While many multiorgan sequelae can develop in the later stages of COVID-19, these may not be present during the acute phase of the illness. Some common symptoms, such as dyspnea, cough, and fatigue, can occur in both acute and post-COVID conditions. However, these symptoms are not necessarily linked exclusively to either stage; for instance, if dyspnea, cough, or fatigue occur during the acute phase, it does not mean they will always be present during the post-COVID phase, and vice versa. Acharya Charaka also notes that the same symptoms can appear in more than one disease..^{xxxiii}

The median Viral clearance time for SARS-CoV-2 has been observed as 13 days^{xxxiv}. That means after average 13 days SARS-CoV-2 gets cleared out from the body. Hence by conventional science also, the disease condition after viral clearance has termed by different nomenclature as post COVID syndrome.

Nidanarthakara Roga manifest the secondary disease due to two condition –

1. If the disease manifestations are neglected leading to chronicity of disease and immune-suppression, thus ultimately producing complications^{xxxv}
2. Improper treatment of primary disease of primary disease (*Ashuddha Chikitsa*)^{xxxvi}

Both conditions can be understood in the context of post-COVID syndrome. Research has shown that ongoing immunosuppression, regardless of its cause, be it negligence or delayed treatment, can exacerbate long COVID symptoms..^{xxxvii}

Research has shown that the vigorous use of drugs to treat acute COVID-19, combined with noticeable instances of inappropriate self-medication during the pandemic, has led to various side effects. These include antibiotic resistance caused by the overuse of antibiotics, bleeding associated with aspirin, arrhythmias related to hydroxychloroquine, and immune suppression due to corticosteroids. Such side effects can result in delayed recovery for COVID-19 patients and, in some cases, may contribute to the development of long COVID..^{xxxviii}

Hence by all the reasons demarcated above; it can be stated as the post COVID syndrome is *Paratantra Vyadhi* i.e. the secondary or associated disease which have arisen as *Upadrava* (nuisance condition/sequela) of COVID 19. Also, COVID 19 serve as *Ekarthakari Nidanarthakara Roga* for the development of PCS.

▪ ***Trividha Hetu* responsible for post COVID syndrome**

To understand the etiopathogenesis of the disease, the following three kinds of *Hetu* described namely *Samavayi* (inherent), *Asamavayi* (non-inherent) and *Nimitta Karana* are necessary^{xxxix}.

Samavayi Hetu (inherent cause) - The cause which has an inseparable relation (*Samavaya Sambandha*) with disease; means it is present before the manifestation of disease; thus, causing the disease and remains throughout the full course of disease i.e. the cause and disease are intimately connected. For complete eradication of the disease, it is necessary to find out *Samavayi Hetu* and accordingly the treatment have to be planned. Improper diet and lifestyle habitat leading to *Sthanavaigunya* and decreased immunity are the *Samavayi Hetu* in case of PCS.

Asamavayi Hetu (non-inherent cause) - The cause which contributes to the production of the disease is *Asamavayi Hetu* i.e. *Dosha-Dushya Sammurchana*. Invasion of virus into multiple organs having ACE 2 expression and release of viral toxins therein

producing sequelae of related organs can be considered as *Asamavayi Hetu* regarding PCS.

Nimitta Hetu (Instrumental Cause or Occasional Cause) - *Nimittakarana* can be said as supportive factor for the production of disease. It helps the *Samavayi* and *Asamavayi Hetu* in the production of disease and after production of disease it gets extinct. Prior infection with SARS-CoV-2 is *Nimitta Hetu* of PCS. (Table 1)

Ayurveda believes that even if there is a virus as a causative factor, until there is no vitiation of *Doshas* primarily in the body, none can infect the human system in a way that it manifests as disease. That means, even if there is an infection, disease can happen only if immunity is weakened or there is dysregulated immune response which ultimately depends upon the diet and lifestyle habitat of the individual. Particularly the asymptomatic acute COVID stage highlight the concept of viral infection as *Nimitta Karana*, since there is no production of symptoms in these cases due to *Dhatu Samyata* owing to balance state of body constituents and proper immune defense. Hence, viral infection should be taken as secondary, and primary importance should be given to host factors or *Nija Doshas*.

Knowledge of *Vikara Samuthana* can be used for diagnostic purpose, to estimate prognosis of the disease as well as helpful for treatment purpose as avoidance of causative factors itself is a treatment in brief^{xl} as it prevents further pathogenesis. Since the

sequela is consequent of the primary disease, it generally gets alleviated by treating the underlying disease^{xli}.

❖ *Vikara Prakriti Vishesha*

Vikara is a sort of *Dosha Vaishamy* either in the form of *Dosha Kshaya* (decrease in the properties of respective *Doshas*) or *Dosha Vriddhi* (increase in the properties of respective *Doshas*) leading to manifestation of *Lakshanas*^{xlii}. *Dhatu* and *Agni* also get vitiated due to vitiated *Doshas* and further progresses the disease. The evaluation of *Vikara Prakriti* can be done by knowing presenting clinical features of the specific disease. *Rogi-Roga Pariksha* (*Trividha*, *Shadvidha*, *Ashtavidha*, *Dashavidha* and *Dwadasha*) is essential to know about manifestation of disease. *Vikara Prakriti Vishesha* gives information about *Sampraptighataka* (elements of pathogenesis) i.e. the *Dosha-Dushya* involvement

Vikara Prakriti Vishesha with respect to PCS

PCS is *Vyadhisankara* as it manifests due to conglomeration of diseases. According to Acharya Chakarpani, *Vyadhisankara* means *Vyadhimelaka* i.e., mixture or combination or group of two or more diseases .

व्याधिसङ्करा व्याधिमेलकाः | (Chakrapani

Cha.Ni. 8/22)

According to conventional science, long term effects of COVID 19 are referred to as syndrome rather than a single disease. A syndrome refers to a recognizable complex of symptoms, that are present

usually not consistent, and definitely not traceable to a single cause. A disease usually has a defining cause, distinguishing symptoms and treatments. A syndrome, on the other hand, is a group of symptoms that might not always have a definite cause . Syndrome can be taken as *Vyadhisankara* as per Ayurveda. Though cardinal feature of the PCS is ambiguous as there is diversity of symptoms individual wise. But having the history of COVID 19 infection and persistent or relapsing symptoms after COVID that cannot be explained by an alternative diagnosis can be diagnosed as PCS. Accordingly, the clinical manifestations and thorough examination, *Sampraptisghatakas* can be elaborated. The subtle changes in the state of diseases (i.e. aggravated, normal and diminished) should be observed carefully by properly assessing the patient's body strength, digestive power and mental ability, so as to determine the variations in disease stages in the patient and accordingly treatment should be planned^{xliii}.

Acharya Vagbhat says, the symptoms of *Doshadi Kshaya-Vriddhi* which have been described separately, should be anticipated in other cases also^{xliv}.

As far the symptomatology reviewed of PCS, the *Doshadi* involvement observed is enlisted in Table 2 & 3.

The symptoms related to *Dosha* and *Dushya* (*Dhatu*) mentioned in the tables (table no. 2 & 3) are just the compilation of symptoms having

similarity to the symptoms found in post COVID syndrome in general. It cannot be stated that all these symptoms will occur in each patient of post COVID syndrome.

Vikara Prakriti is imperative to decide the disease-specific drug/therapy of choice i.e. *Vyadhi Pratyanka Chikitsa*^{xlv}. Besides, based on manifestation of *Lakshanas*, prognosis of disease can also be assessed.

❖ *Adhithana Vishesha*

Adhithana refers to the location where disease manifests due to *Dosha Dushya Sammurcchana*. *Vikara Adhithana* can be *Sharirika* or *Manasika Adhithana*^{xlvi}. It can also include *Srotasa* and *Anga- Pratyanga*. Agitated and disturbed *Doshas* amalgamated with *Dhatus* and results in *Dosha Dushya Sammurcchana* leading to manifestation of disease at particular location referred to as *Sthanavaigunya*.

Adhithana Vishesha with respect to PCS

PCS can manifest in *Sharirika* and *Manasika Adhithana*. Site of manifestations of PCS depends upon the ACE2 expressions existing at various organs as ACE2 sites are recognized as functional receptors for SARS-CoV-2. Still all the ACE2 sites are not affected in every patient. Here the concept of *Adhithana Vishesha* or *Sthanavaigunya* plays pivotal role; that virus can produce lingering sequelae at only those sites where *Sthanavaigunya* has been generated already due to improper diet and lifestyle or compromised immunity.

Sthanavaigunya can be identified according to specific symptoms generated in that related location. Instead of specific organ, *Srotasa* are described as sites of localization for disease in Ayurveda. *Srotasa* can be defined as a systemic biological transport system comprising of gross and minute as well as very subtle channels transporting not only fluids, nutrients and waste products but also energies and impulses in different biological settings. *Adhithana Vishesha* with respect to PCS has been elaborated in Table 4.

Vikara Adhithana is essential for planning the treatment modality. Only the symptoms of respective *Srotodushti* that resembles with post COVID syndrome are listed above.

➤ **Post COVID syndrome management principle as per *Anukta Vyadhi Chikitsa***

In Ayurvedic classics, it is stated that there cannot be a definitive standardization of names for all diseases. Diseases that are not specifically named should be treated based on the involvement of the *Doshas*. The *Doshas*, due to the variety of causes and their localization in different regions of the body, lead to a range of diseases. Therefore, treatment should begin after diagnosing the nature of the disease, its specific location, and the unique causative factors involved. Acharya Charaka noted that anything that opposes the morbid humor, the affected body element, and the etiological factors is generally beneficial for treating unnamed or unclassified diseases. If treatment is carried out

correctly according to this principle, the disease can be effectively cured.^{xlvi, xlviii}

It has been observed that after testing negative for the virus, some individuals have stopped taking their medications despite experiencing persistent symptoms and have ignored lingering issues. Many of these patients later developed post-COVID multiorgan complications. According to Ayurvedic treatment principles, addressing a disease in its early stages is crucial; if left untreated, it can become deep-rooted and severely impact a person's health and vitality over time. Therefore, anyone who is concerned about their well-being should prioritize early intervention and seek appropriate therapies to address the disease before it fully manifests.^{xlix}

It is important to carefully observe the subtle changes in the state of diseases, such as when they are aggravated, normal, or diminished. This assessment should take into account the patient's body strength, digestive capacity, and mental ability. The symptomatology of post-COVID-19 shows significant diversity, so treatment plans must be tailored accordingly. .

Conclusion

When a new emerging disease cannot be directly compared to any previously described conditions in Ayurvedic texts, it should be considered an *Anukta Vyadhi*. Instead of forcing a correlation with known diseases, we should focus on understanding its

pathophysiology. Utilizing the framework of *Trividha Bodhyasamgraha* can aid in effectively treating the disease with the appropriate Ayurvedic treatment protocols.

ⁱ<https://www.downtoearth.org.in/health/icmr-post-covid-dyspnoea-fatigue-and-mental-health-issues-were-reported-among-18-6-10-5-and-9-3-respectively-92332>

ⁱⁱ<https://theprint.in/india/fatigue-mental-health-issues-among-most-common-post-covid-symptoms-mos-health-tells-rs/2198487>

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