

UNDERSTANDING DESHA (BIOLOGICAL DISTRIBUTION OF HABITATS) THROUGH THE LENS OF HEALTH AND WELLNESS

Dr. Ankur Kumar Tanwar
Ph.D. Scholar,
Dept. of Kriyasharir (Ayurvedic Physiology)
All India Institute of Ayurveda, New Delhi.

ABSTRACT:

The habitat is called *Desha* which refers to a geographical area. *Ayurveda* separated *desha* into two types-*bhumidesha* and *dehadesha* or *aturadesha*. The ecological dispersion of habitats is known as *Bhumidesha*, also known as land and location. *Bhumidesha* refers to a certain area of land or geography. *Aturadesha* refers to the person or individual who is sick. According to *acharyacharak*, *desha* is an important aspect of *dashvidhparishyabhava* (Ten assessment factors). *Ayurveda*'s major goal is to treat sickness while also maintaining good health. For this, *Chikitsapurusha* or *karmapurusha*, is required. Every individual is distinct, according to *ayurveda*, and one should first analyze the variation in individuality before seeking treatment. Individual therapeutic approaches are mentioned in *Ayurveda* as being distinct. That is why for *aaturpariksha*, *acharya* described *dashvidhparikshyabhav*. This review focused on the therapeutic and clinical importance of *desha*.

KEYWORDS: *Desha*, Habitat, *Bhumi*, *Pariksha*

INTRODUCTION:

Desha denotes a location. *Desha* was divided into two categories by *Ayurveda*: *Bhumi Desha* and *Deha Desha* or *Atura Desha*.¹ *Bhumidesha*, which is another name for place and land, refers to the natural distribution of habitats. A sick person is referred to as *aturadesha*. Knowledge of *desha* is necessary for a thorough examination of the medicine and the patient.² Because the qualities of medication are dependent on its origin, growth, and storage site, we can analyze or understand its properties, acts, or *karma* by knowing the *bhumi* or *desha* of the *dravya* or drug. Understanding *desha* helps not only in drug selection but also in patient examination and prognosis of the disease. It has multiple applied aspects which everyone should be aware of.

Classification of Desha³:

Bhumidesha is classified into 3 categories i.e.

- a) *Jangaladesha* (~Dry forest land)
- b) *Anupadesha* (~Marshy land)
- c) *Sadharanadesha* (~Normal land)

Applied approach of desha :

1. **Desha as the factor for patient examination⁴:** *Desha* was described by *Acharya Charaka* as a factor to consider when examining a patient. When examining a patient, it's crucial to examine his or her environment to determine which treatment is best for her or him, as well as which diseases are more common in that place.
2. **Desha for determining the severity of disease:** If a person continues to eat foods and engage in activities that are comparable to the features of that *desha*, sickness is unlikely to emerge.
3. **Desha is best for the cultivation of medicinal plants:⁵** The Himalayan region has the best medicinal plant environment. The *dravya*, or medications, created in the Himalayan region are the best in terms of both quality and action. It is the best *desha* for growing medicinal plants.
4. **Desha as an etiological factor for disease:** People in the Eastern area eat a lot of fish and rice, therefore they have a higher risk of developing *kapha-pitta* disorders like *shlipad* (filaria).⁶ People in *bahlika*, *Saurashtra*, and *Sind* consume a lot of salt, and as a result, they suffer from disorders that do not arise in normal circumstances. People in the southern region eat river and sea fish, hence they are more likely to contract *kushta* (skin diseases). People who live in the *jangaladesha* are more prone to *pitta*, *asruka* (blood-related disorders), and *vata* disorders. *Anupadesha* people are more prone to *tokaphaja* and *vatajavikara*. *Sadharandesha* is the best *desha* since its residents are least prone to sickness. According to research conducted by Rohit Sharma et al among residents of Jamnagar, Gujarat, some poor dietary and lifestyle choices made in this area are to blame for the development of diabetes.⁷

Table 01: Association of *desha* and *dosha*³.

<i>Desha</i>	<i>Dosha</i>	Contemporary understanding
<i>Jangal</i>	<i>Vata</i> and <i>Pitta dosha</i>	<i>Vatadisorders-</i> Neurological, muscular-skeleton disorders <i>Pittadisorders-</i> Digestive disorders, disorders related to metabolism
<i>Anupa</i>	<i>Vata</i> and <i>Kaphadosha</i>	<i>Kaphadisorders-</i> Respiratory disorders, Obesity, Diabetes etc. <i>Vata disorders-</i> Neurological, muscular-skeleton disorders
<i>Sadharan</i>	An equal proportion of <i>dosha</i>	Less prone to sickness

5. ***Desha* as a factor for *janapadadvansa*(epidemic)⁸:** *Desha* is regarded as one of the most critical environmental factors that contribute to epidemic causation. When land or location has normal characteristics, epidemics do not occur; but, when a place is polluted in any way, epidemics arise. As a result, that specific land or *desha* becomes a significant etiological element in a condition.
6. **Application of *desha viruddha*⁹:** *Desha Viruddha* is an illness caused by individuals consuming food of equal quality to their local location or *desha*. For example, the usage of *Vata* dominant diets like having *Ruksha*(dry) and *Tikshana*(quick acting) properties in *Jangal-desha* (*Vata* dominant habitat). If residents in a given location contract *deshaviruddha*, the sickness is milder than that of those who have relocated to that area or *desha*.
7. ***Desha* is one of the factors of *astavidhaaharavidhivadhana* (eight factors about food intake):** These are the eight particular factors of dietary methods, and *Desha* is known as the Food Habitat in this regard. It symbolizes the location of growth as well as the distribution of substances or food items, as well as the suitability of the location. The quality of food changes as a result of differences in soil and climate.¹⁰ The consideration of *Matra*, *Desha*, and *Kala* in the taking of *Ahara* was shown to be helpful for health,

according to research by Rohit Dangayach et al. evaluating the effect of *Ahara* on Health concerning *Matra, Desha, and Kala*.¹¹

8. **Effect of *desha* on the quality of *ahara* (food):** According to the *Samhita*, animals that are born or migrate through water or marshy territory (*anupadesha*) have flesh that is more difficult to digest than animals born in deserts (*jangaldesha*).¹²
9. ***Desha* concerning strength or *bala*:** Peoples of *anupadesha* have more strength than *jangaldesha* and *sadharandesha*.
10. ***Desha* and therapeutic efficacy:** The gathering of drugs from their suitable habitat or natural habitat is known as *deshasampat*. *Desha sampata* has chosen medications with the highest therapeutic efficacy.
11. ***Desha* and *virya* (potency) of drugs:** Medicine grown in the *Vindhya* region has hot potency, whereas medicine grown in the Himalaya region has a cool potency (*virya*).
12. ***Jala* or water according to *desha*:** *Anupadesha*'s water is harmful to one's health. *Sadharandesha* water does not induce a burning feeling after digestion, is suitable for drinking, promotes happiness, and is chilly and light in potency. *Jangaladesha* water is slightly pleasant and a good source of vigor. Water from the river, which originated in Prachya, causes piles. River originated from Mahendra led to the formation of *Shlipad* (filaria).
13. ***Desha satmya*:** *Satmya* is defined as that which promotes body well-being even when taken over an extended length of time. If something is utilized for a long time, the body adapts to it, whether it is beneficial or negative.
14. ***Desha* and *sadhyta / asadhyata* (prognosis):** A disease that occurs in a not-similar geographical area is *sadhyta*. If the person living in *jangaladesha* suffers from *vatavyadhi* which is similar to *desham* makes the person unsuitable for the treatment.¹³
15. **Application of *desha* for assessment of therapeutic measure:** According to *Acharya*, therapeutic measures should be used keeping in mind the following – *desha, kala, pramana, satmya, asatmya*. So, *desha* is considered the channel of therapeutic measure.

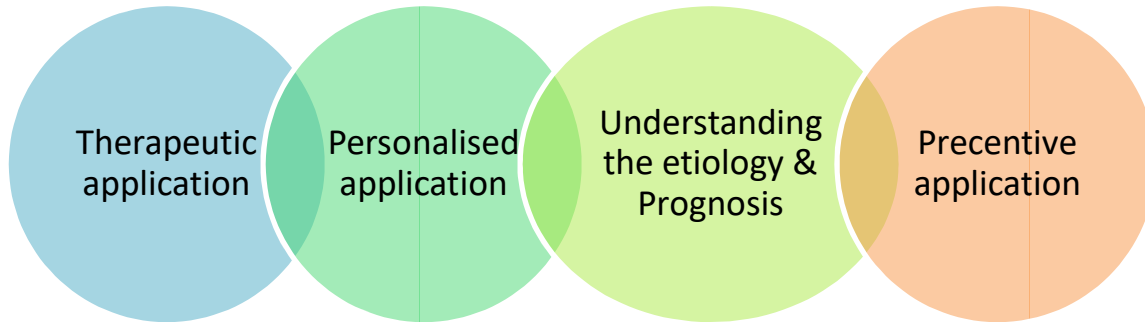


Figure 01: Clinical application of *desha*.

16. ***Deshaconcerningprakriti*¹⁴**: *Prakriti* is the Ayurvedic concept of individuality influenced by genetic and epigenetic factors. *Desha* is one such epigenetic factor. The role of the geo-climatic factor (*deshanupanti*) on the *tridosha* is important to understand the physiology of the body. The person habitant of dry land is *vata pitta* predominant and has a hard and sturdy body whereas people living in marshy land have a tender body and *vata kapha* predominant. In normal land, there is the equilibrium of *dosha*, so people living there have been endowed with strength, complexion, and compactness in nature.
17. ***Desha and vyadhinidana***: Dryland has a predominance of *vata dosha* so people of that habitant are more susceptible to *vata* disease. In *anupadesha* (marshy) land due to *kapha* dominance people are more susceptible to *kapha* disorders. So, understanding *desha* in *parikshyabhava* (assessment factor) is helpful to know the *nidana* (causative factor) of disease, prognosis, and in turn aids in treatment. The *vata* dominant *vikara* in *jangaladesha* which is *vata* dominant is *krichasadhya* (difficult to treat) due to the similar nature of *dushya*, *desha*, and *prakriti*. So the treatment opted for such a disease is opposite to the nature of *desha*.
18. ***Desha and maintenance of swasthya***: The role of *deshais* is found to fix the appropriate diet and activities pertaining to healthy living which is opposite to the *desha*. Like in *jangaladesha*, excessive intake of bitter, pungent, and astringent diet and vigorous physical exercise which provoke *vata* is avoided.

CONCLUSION:

In the classics, it's said that one who knows about drugs and knows to use them accurately according to *desha*, *Kalais* to be considered the best physician. So application of *desha* from diagnosis upto the treatment is important. One should know the *desha* of *atura* (diseased) for proper selection of drugs, for assessment of *prakriti*, for assessment of *nidana*, for opt the best treatment protocol, and lifestyle modification. It is essential in every phase of clinical practice.

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