

Shatkriya Kala in Ayurveda: A Comprehensive Framework for Understanding the Stages and Mechanisms of Disease Pathogenesis

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Abstract

The Ayurvedic concept of Shatkriya Kala represents a systematic framework for understanding the sequential development, progression, and clinical manifestation of diseases. Rooted in classical Ayurvedic principles, this concept describes six progressive stages of disease evolution: Sanchaya (accumulation), Prakopa (aggravation), Prasara (dissemination), Sthana-Samshraya (localization), Vyakti (clinical manifestation), and Bheda (differentiation or complication). Unlike disease models that primarily emphasize the identification of established clinical symptoms, Shatkriya Kala provides a stage-oriented perspective in which pathological changes are recognized as progressive processes influenced by Dosha, Dhātu, Agni, and Srotas. The present review aims to examine the theoretical foundation, functional organization, and clinical significance of Shatkriya Kala as an integrated model of Ayurvedic etiopathogenesis. A conceptual narrative review approach was adopted through examination and synthesis of the thirteen references supplied, including classical Ayurvedic texts, foundational publications, and contemporary discussions of disease progression. The analysis identifies the six stages as an interconnected pathological sequence that provides a theoretical basis for understanding early disturbances, disease localization, clinical presentation, and subsequent complications. The framework also emphasizes the importance of early recognition and stage-specific therapeutic planning. However, its contemporary application requires clearer operational definitions, standardized clinical indicators, and systematic validation. Shatkriya Kala therefore offers a valuable conceptual architecture for studying Ayurvedic pathogenesis and developing structured approaches to preventive and individualized healthcare.

Keywords: Shatkriya Kala, Ayurveda, Etiopathogenesis, Samprapti, Dosha, Disease Progression, Pathophysiology, Preventive Medicine, Clinical Assessment.

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1. Introduction

1.1 Background

Ayurveda is a traditional medical system that conceptualizes health and disease through the dynamic interaction of physiological, pathological, environmental, and behavioral factors. Its fundamental approach emphasizes the maintenance of equilibrium among Dosha, Dhātu, Mala, and Agni, together with the

appropriate functioning of bodily channels and physiological processes. Disease is understood not merely as the presence of symptoms but as the outcome of progressive disturbances in the internal regulatory mechanisms of the body (Sharma PV, 2005).

Within this theoretical structure, Shatkriya Kala occupies an important position in explaining the sequential development of pathological conditions. The term Shatkriya Kala refers to six distinct stages through which

a disease-producing process develops and becomes clinically recognizable. These stages provide a structured explanation of how an initial functional imbalance may gradually progress toward an established disease state (Shastri AD, 2015).

The concept is particularly relevant because it distinguishes between the early development of pathological disturbances and their eventual clinical manifestation. This distinction provides a theoretical foundation for understanding preventive interventions, early diagnosis, and the selection of therapeutic measures according to the stage of disease progression.

1.2 Problem Statement

Conventional descriptions of disease frequently emphasize recognizable clinical symptoms, diagnostic classifications, and established pathological conditions. However, such approaches may not fully communicate the gradual development of disease from initial physiological disturbances to clinically apparent manifestations.

Ayurvedic etiopathogenesis addresses this conceptual requirement through Samprapti, which describes the process by which causative factors disturb normal physiological functions and produce disease. Nevertheless, the relationship between individual stages of Shatkriya Kala and their potential clinical indicators requires systematic explanation to facilitate consistent interpretation and practical application (Dwivedi, 1998; Gupta, 2011).

1.3 Research Relevance and Objectives

A systematic examination of Shatkriya Kala is relevant to the development of a comprehensive understanding of Ayurvedic disease progression. Its stage-based approach may help organize clinical observations, identify early pathological changes, and establish a theoretical connection between preventive healthcare and disease management.

The primary objectives of this review are to:

- Explain the theoretical foundations and principles of Shatkriya Kala.
- Examine the functional characteristics of its six pathological stages.

- Analyze the relationship between Dosha disturbance, disease progression, and clinical manifestation.
- Develop an integrated conceptual framework for understanding Ayurvedic etiopathogenesis.
- Evaluate the clinical relevance, limitations, and future research requirements of this model.

1.4 Scope and Significance

The present article focuses on the classical and conceptual interpretation of Shatkriya Kala, particularly its contribution to understanding disease development and progression. It examines the six stages as interconnected components of a broader pathological process rather than isolated clinical events. The discussion is based exclusively on the references supplied and does not claim experimental validation or establish equivalence between Ayurvedic pathological categories and modern biomedical diagnoses.

2. Literature Review

The theoretical development of Shatkriya Kala is associated with the broader Ayurvedic understanding of Dosha imbalance, physiological disturbance, and disease manifestation. Classical Ayurvedic literature provides the conceptual basis for interpreting pathological processes through sequential stages, while later publications discuss their physiological and clinical relevance.

Shastri AD (2015), through the Sushruta Samhita, provides an important classical foundation for examining the six stages of disease progression. The framework describes how pathological disturbances evolve progressively rather than appearing exclusively at the point of symptom recognition. This perspective establishes the importance of identifying disease development before the emergence of fully established clinical manifestations.

Sharma PV (2005) discusses the foundational principles of Ayurveda, including its integrated understanding of physiological equilibrium, pathological disturbance, and therapeutic intervention. These principles are relevant to Shatkriya Kala because the development of disease is interpreted in relation to the changing condition of Dosha

and the body's capacity to maintain physiological stability.

Dash (2001) and Sharma RK and Dash (2018) provide broader Ayurvedic theoretical and textual foundations for understanding disease, its causative factors, and the principles governing clinical assessment. Their contributions support the interpretation of pathological progression within the wider framework of Ayurvedic diagnosis and treatment.

Dwivedi (1998) addresses the Ayurvedic concept of pathology, offering a theoretical context for examining how disturbances develop into recognizable disease conditions. Similarly, Gupta (2011) discusses disease progression in Ayurveda, making the relationship between early pathological changes and established disease manifestations particularly relevant to the present review.

Kotur (2014) contributes a physiological perspective through Ayurvedic concepts of bodily functioning. Such a perspective is important because disease progression cannot be interpreted independently of the physiological systems and functional relationships that maintain health.

Lad (2002) provides an explanatory foundation for Ayurvedic principles and their application to clinical understanding. Tripathi (2019), through Ashtanga Hridaya, and Valiathan (2007), through the legacy of Sushruta, provide additional textual and historical contexts for interpreting classical Ayurvedic knowledge.

Contemporary discussions are represented by Singh (2016) and Rathour et al. (2024), whose publications specifically address Shatkriya Kala and its clinical importance. These works establish the relevance of examining the concept beyond its classical description and considering its contribution to clinical interpretation.

The World Health Organization (2013) provides a broader policy context for traditional medicine. Its inclusion is relevant to discussions concerning the systematic study and responsible integration of traditional medical knowledge.

Research Gap: The supplied literature provides conceptual, classical, physiological, and clinical perspectives; however, there remains a need for a consolidated analytical presentation that connects all six stages through a single disease-progression framework.

In particular, the operational identification of stage-specific indicators and the systematic evaluation of their clinical applicability require further research.

Theoretical Positioning: This review positions Shatkriya Kala as a sequential and interconnected model of Ayurvedic etiopathogenesis, with emphasis on the relationship between physiological imbalance, pathological progression, and clinical manifestation.

3. Methodology

3.1 Research Design

The present study adopts a qualitative, descriptive, and analytical narrative review design to examine Shatkriya Kala as a comprehensive framework of Ayurvedic etiopathogenesis. The methodology is based on conceptual analysis of the thirteen references provided, comprising classical Ayurvedic texts, foundational literature, publications on Ayurvedic physiology and pathology, and contemporary discussions of Shatkriya Kala.

The study does not involve primary patient recruitment, laboratory investigations, clinical trials, or statistical analysis. Instead, it develops a structured interpretation of the six stages by examining their theoretical relationships and potential clinical implications.

3.2 Conceptual Framework of Shatkriya Kala

Shatkriya Kala can be organized into six interconnected stages. Each stage represents a particular development in the pathological process, beginning with the accumulation of disturbed Dosha and progressing toward the manifestation and differentiation of disease.

The framework can be represented as:

Sanchaya → Prakopa → Prasara → Sthana-Samshraya → Vyakti → Bheda

This sequence represents a conceptual progression rather than an assertion that every disease necessarily follows an identical, uninterrupted pathway. The rate, intensity, and clinical expression of progression may vary according to individual constitution, causative factors, physiological status, and the nature of the pathological disturbance.

3.3 Functional Analysis of the Six Stages

3.3.1 Sanchaya: Initial Accumulation

Sanchaya represents the initial accumulation of a particular Dosha within its respective physiological location. At this stage, the equilibrium of the internal regulatory system begins to shift, although a fully developed disease condition may not yet be apparent.

The accumulation may be associated with inappropriate dietary habits, irregular daily routines, environmental exposure, or behavioral factors. The nature of the disturbance depends upon the characteristics of the involved Dosha and the individual's physiological condition.

From a functional perspective, Sanchaya represents an early warning phase. The body may exhibit subtle changes in appetite, digestive comfort, energy, or other functional characteristics. Such observations should be interpreted within the complete Ayurvedic assessment rather than considered independently diagnostic.

For example, an individual with repeated dietary irregularities may develop digestive discomfort and a perceived disturbance in digestive functioning. In the Shatkriya Kala framework, such changes may be examined as potential indicators of an initial imbalance.

The importance of this stage lies in the possibility of recognizing and addressing disturbances before their further progression. Sharma PV (2005) provides the foundational Ayurvedic context for understanding physiological equilibrium and the relationship between internal balance and health.

3.3.2 Prakopa: Aggravation of Dosha

Prakopa refers to the aggravation of the accumulated Dosha. The initial imbalance becomes more pronounced, and the pathological disturbance acquires greater intensity.

At this stage, continued exposure to causative factors may increase the severity of functional disturbances. The aggravated Dosha may exhibit characteristics that indicate a worsening of its physiological imbalance.

For example, an individual experiencing recurring digestive discomfort may develop more pronounced

symptoms following repeated exposure to unsuitable dietary practices. The progression from initial accumulation to aggravation demonstrates why identifying and eliminating causative factors is important.

Therapeutically, this stage emphasizes the importance of appropriate dietary regulation, behavioral modification, and individualized management based on the involved Dosha. However, the presence of aggravated Dosha should be evaluated through a comprehensive clinical examination rather than inferred from a single symptom.

3.3.3 Prasara: Dissemination of Pathological Disturbance

Prasara represents the movement or dissemination of aggravated Dosha beyond its original location. The pathological process becomes more widespread and may affect additional physiological systems.

This stage is particularly significant because it indicates a transition from localized imbalance toward broader systemic involvement. The movement of aggravated Dosha creates the possibility of interaction with other bodily structures and functional pathways.

For example, a disturbance initially associated with digestive functioning may gradually become associated with changes in other physiological functions. Such an example illustrates the conceptual possibility of systemic involvement; it does not establish a specific biomedical mechanism.

The analytical significance of Prasara lies in recognizing that pathological disturbances may extend beyond their initial location. It therefore emphasizes the importance of examining the overall physiological condition rather than restricting assessment to the initially affected system.

3.3.4 Sthana-Samshraya: Localization at a Susceptible Site

Sthana-Samshraya refers to the localization of aggravated Dosha at a susceptible bodily site. This stage represents an important transition in disease development because the pathological disturbance becomes associated with a particular tissue, organ, or functional location.

In Ayurvedic interpretation, this localization is related to the interaction between aggravated Dosha and a susceptible site. The concept of Khavaigunya is relevant to understanding why certain bodily locations may become more vulnerable to pathological involvement.

For example, an individual with a pre-existing functional weakness in a particular physiological system may be understood, within this framework, as having increased susceptibility to localization of a pathological disturbance.

The significance of this stage is its potential to explain variations in disease expression among individuals exposed to similar causative factors. However, the assessment of susceptibility and localization requires further standardization to improve consistency in clinical interpretation.

3.3.5 Vyakti: Clinical Manifestation

Vyakti represents the stage at which disease becomes clinically recognizable through the appearance of characteristic signs and symptoms.

At this point, the pathological process has developed sufficiently to produce a recognizable clinical pattern. The nature of the manifestation depends on the involved Dosha, affected Dhatu, location of pathology, and the overall progression of Samprapti.

For example, when a pathological disturbance becomes sufficiently established within a particular functional system, the individual may develop recognizable symptoms associated with that system. The specific clinical features require assessment according to the individual disease presentation.

Vyakti is particularly important in clinical practice because it provides a basis for disease identification, differential assessment, and therapeutic planning. Nevertheless, the model also emphasizes that the disease process may have commenced considerably earlier than the point of recognizable symptom development.

3.3.6 Bheda: Differentiation and Complication

Bheda represents the advanced stage of disease development, in which the condition may acquire distinct forms, develop complications, or demonstrate a more differentiated pathological presentation.

At this stage, the disease may exhibit increased complexity, chronicity, or structural and functional consequences. The clinical significance of Bheda lies in understanding how an established pathological condition may evolve into more specific or complicated forms.

For example, a persistent untreated condition may develop additional manifestations or complications that require a modified therapeutic approach. This illustrates the importance of early recognition and appropriate intervention during earlier stages.

The Bheda stage also emphasizes the need to evaluate prognosis and disease complexity rather than relying exclusively on the initial diagnostic classification.

3.4 Integrated Analytical Model

The six stages can be interpreted through three broad functional phases:

Early pathological development: Sanchaya and Prakopa represent the accumulation and aggravation of Dosha. These stages emphasize physiological imbalance and the potential for early preventive intervention.

Systemic progression and localization: Prasara and Sthana-Samshraya describe the dissemination of pathological disturbance and its localization at susceptible sites. These stages explain the transition from general imbalance toward more specific pathological involvement.

Clinical establishment and differentiation: Vyakti and Bheda represent recognizable disease manifestation and subsequent differentiation or complication.

This three-phase organization provides an analytical simplification of the six-stage model while retaining the distinct characteristics of each stage. It also demonstrates how the framework may be used to connect early physiological disturbances with established clinical conditions.

3.5 Analytical Parameters

For systematic interpretation, the six stages may be examined through five conceptual parameters: the nature of Dosha disturbance, the extent of pathological involvement, the location of disturbance, the degree of

clinical manifestation, and the possibility of progression or complications.

These parameters are proposed as an analytical structure for future clinical research rather than as an already validated diagnostic scoring system. Their operational definitions would need to be established through expert consensus and prospective evaluation.

3.6 Ethical and Methodological Considerations

As this study is a literature-based conceptual review, it does not involve human participants or personal clinical records. No experimental outcomes are claimed. The interpretation remains restricted to the supplied references, and hypothetical examples are used only to clarify the theoretical framework. The absence of a formal systematic database search and independent evaluation of source quality limits the generalizability of the conclusions.

4. Results

The conceptual analysis identifies Shatkriya Kala as a sequential framework that organizes Ayurvedic understanding of disease development into six distinguishable but interrelated stages. The central finding is that disease progression is conceptualized as a dynamic process involving changes in the intensity, movement, localization, and clinical expression of pathological disturbances.

4.1 Identification of the Six-Stage Progression

The analysis establishes that each stage contributes a distinct functional dimension to the overall disease process. Sanchaya represents initial accumulation, while Prakopa indicates increased pathological intensity. Prasara introduces the dimension of dissemination, and Sthana-Samshraya explains localization at susceptible sites. Vyakti represents recognizable clinical manifestation, whereas Bheda addresses disease differentiation and complications.

This progression provides a conceptual distinction between early pathological changes and established clinical disease. It therefore suggests that clinical assessment should consider not only the presence of symptoms but also the possible developmental stage of the underlying disturbance.

4.2 Relationship Between Physiological Imbalance and Disease Development

A second finding concerns the importance of physiological equilibrium in Ayurvedic disease theory. The development of pathology is interpreted through disturbances involving Dosha and their interactions with bodily structures and functional pathways.

The literature reviewed provides a theoretical basis for examining this relationship through Ayurvedic physiology and pathology (Kotur, 2014; Dwivedi, 1998). Sharma PV (2005) further provides a foundational perspective for understanding the relationship between physiological balance and pathological disturbance.

The analysis indicates that Shatkriya Kala offers a framework for interpreting disease as a progressive disruption of physiological organization rather than an isolated clinical event.

4.3 Identification of Early Intervention Opportunities

The distinction between early and advanced stages represents an important practical finding. Sanchaya and Prakopa provide a conceptual basis for identifying disturbances before their progression into more widespread or clinically established conditions.

Prasara and Sthana-Samshraya highlight the importance of recognizing systemic dissemination and site-specific susceptibility. Vyakti and Bheda emphasize the need for appropriate disease identification, management, and evaluation of complications.

This stage-based interpretation supports the theoretical importance of preventive approaches and individualized therapeutic planning.

4.4 Development of an Integrated Pathogenesis Architecture

The analysis also supports a three-phase organization of the six stages: initial imbalance, pathological progression, and clinical establishment. This arrangement offers a simplified analytical structure without replacing the original six-stage classification.

The first phase concerns the accumulation and aggravation of Dosha. The second concerns

dissemination and localization. The third concerns recognizable disease manifestation and differentiation.

This organization may facilitate educational interpretation, clinical documentation, and the development of future research instruments.

4.5 Major Research Implications

The findings indicate three major implications. First, Shatkriya Kala provides a theoretical basis for studying disease development before the emergence of recognizable symptoms. Second, it offers a structured way to examine individual variation in disease progression through the concepts of susceptibility and localization. Third, it provides a foundation for developing stage-oriented clinical assessment methods.

However, the review does not establish that all diseases progress through these stages in an identical manner. Nor does it demonstrate the predictive accuracy of the framework through empirical data. Its findings should therefore be interpreted as conceptual outcomes derived from the supplied literature, not as experimentally established clinical evidence.

5. Discussion

The findings of the present review demonstrate that Shatkriya Kala provides a structured theoretical architecture for understanding the progression of disease within Ayurveda. Its primary contribution lies in explaining how pathological disturbances may develop gradually through identifiable stages rather than being interpreted exclusively through their final clinical manifestations. This perspective is consistent with the broader Ayurvedic understanding of disease progression and the importance of recognizing disturbances in their earlier phases (Gupta, 2011; Singh, 2016).

5.1 Theoretical Significance of the Six-Stage Framework

The six stages collectively establish a relationship between the initial disturbance of physiological equilibrium and the subsequent development of clinically recognizable disease. Sanchaya and Prakopa explain the development and intensification of Dosha imbalance, whereas Prasara and Sthana-Samshraya introduce the dimensions of movement and localization.

Vyakti and Bheda represent the establishment and differentiation of disease.

An important theoretical feature of this arrangement is the distinction between the initiation of pathology and the appearance of clinical symptoms. This distinction supports the Ayurvedic emphasis on understanding the underlying disease process rather than limiting assessment to symptomatic presentation. The classical foundation represented by the Sushruta Samhita provides an important context for this interpretation (Shastri AD, 2015).

5.2 Implications for Preventive and Clinical Healthcare

The framework has particular relevance to preventive healthcare because it recognizes the potential significance of pathological changes before advanced disease manifestation. Early identification of disturbances may support individualized dietary regulation, lifestyle modification, and appropriate therapeutic planning.

For example, an individual demonstrating an initial functional disturbance may require a different assessment and management approach from someone presenting with established disease and complications. The distinction between these conditions illustrates the importance of stage-sensitive clinical reasoning.

The concept also highlights the importance of understanding individual susceptibility. Sthana-Samshraya suggests that similar pathological disturbances may become localized differently depending on the condition of the affected bodily site. This provides a theoretical explanation for variations in clinical presentation.

Sharma PV (2005) provides a foundational Ayurvedic perspective for understanding the relationship between physiological equilibrium, disease development, and individualized healthcare. In this context, Shatkriya Kala can be interpreted as a framework connecting preventive principles with the broader process of clinical disease management.

5.3 Relationship with Contemporary Pathological Thinking

The sequential organization of Shatkriya Kala offers an opportunity for conceptual comparison with contemporary approaches that distinguish between early pathological changes, progression, tissue involvement, and clinically apparent disease. However, such comparison should remain conceptual rather than implying direct equivalence between Ayurvedic and biomedical categories.

The Ayurvedic framework incorporates Dosha, Dhatu, Agni, Srotas, and individual susceptibility into its explanation of disease. These concepts belong to a distinct theoretical system and require appropriate interpretation within their original context.

Publications addressing Ayurvedic physiology and pathology provide a basis for understanding these relationships (Kotur, 2014; Dwivedi, 1998). Contemporary discussions of Shatkriya Kala further demonstrate the relevance of examining its clinical significance (Rathour et al., 2024).

5.4 Critical Limitations and Methodological Challenges

Despite its theoretical relevance, the practical application of Shatkriya Kala presents several challenges. The boundaries between individual stages may not always be clearly distinguishable in clinical situations. A patient may present with overlapping features, making precise stage classification difficult.

Another limitation concerns the absence of universally standardized clinical indicators for identifying each stage. Without clearly defined assessment criteria, different practitioners may interpret similar clinical presentations differently.

Furthermore, the framework should not automatically be considered a universally validated predictive model. Its ability to identify early disease development, predict progression, or guide treatment outcomes requires prospective clinical investigation.

The present review also has methodological limitations because it relies exclusively on the thirteen supplied references and does not constitute a systematic review of all available Ayurvedic literature. Consequently, the findings should be regarded as a conceptual synthesis rather than comprehensive evidence of clinical effectiveness.

5.5 Future Research Directions

Future investigations should focus on developing operational definitions for each stage, establishing standardized clinical assessment parameters, and examining inter-practitioner agreement in stage identification. Prospective observational studies could investigate whether stage-based assessment contributes to improved clinical documentation and preventive decision-making.

Such research would help determine the practical applicability of Shatkriya Kala while preserving the integrity of its classical theoretical foundations.

Overall, the discussion indicates that Shatkriya Kala provides a meaningful conceptual approach to Ayurvedic etiopathogenesis. Its potential contribution to contemporary research depends on careful interpretation, methodological standardization, and evidence-based evaluation.

6. Conclusion

Shatkriya Kala represents an important conceptual framework within Ayurveda for understanding the progressive development and clinical manifestation of disease. Through its six stages—Sanchaya, Prakopa, Prasara, Sthana-Samshraya, Vyakti, and Bheda—it provides a structured explanation of how initial physiological disturbances may develop into established and differentiated pathological conditions.

The present review demonstrates that the framework integrates several important dimensions of Ayurvedic etiopathogenesis, including Dosha imbalance, pathological dissemination, tissue susceptibility, clinical manifestation, and disease complications. Its principal theoretical contribution is the recognition that disease development is a progressive process and that early pathological changes may hold significance for preventive healthcare and individualized clinical assessment.

The proposed three-phase analytical organization further provides a simplified approach for interpreting the six stages: initial imbalance, systemic progression and localization, and clinical establishment and differentiation. This organization may prove useful in Ayurvedic education, clinical documentation, and the development of future research methodologies.

Nevertheless, the clinical application of Shatkriya Kala requires further investigation. Standardized diagnostic indicators, operational definitions, prospective observational studies, and interdisciplinary methodological research are necessary to establish the consistency and practical utility of stage-based assessment. The conceptual framework should be evaluated within its own theoretical foundations without assuming direct equivalence with modern biomedical disease classifications.

In conclusion, Shatkriya Kala offers a comprehensive Ayurvedic perspective on disease progression and provides a theoretical foundation for integrating preventive understanding with clinical pathogenesis. Its systematic investigation may contribute to the documentation, interpretation, and evidence-informed development of Ayurvedic clinical practice.

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