

**ANUBANDHA CHATUSHTAYA: A FOUNDATIONAL FRAMEWORK FOR
UNDERSTANDING THE PHILOSOPHY AND STRUCTURE OF AYURVEDIC SAMHITA**¹*Dr. Shaniya Sharma, ²Dr. Devesh Panwar, ³Dr. Aaditya Bhardwaj¹PG Scholar, Department of Ayurveda Samhita Evam Siddhanta, Patanjali Bhartiya Ayurvigyan Evam Anusandhan Sansthana, Haridwar, Uttarakhand.²Associate Professor, Department of Ayurveda Samhita Evam Siddhanta Patanjali Bhartiya Ayurvigyan Evam Anusandhan Sansthana, Haridwar, Uttarakhand.³Assistant Professor, Department of Rachana Sharir Quadra Institute Of Ayurveda, Roorkee Road, Haridwar, Uttarakhand.***Corresponding Author: Dr. Shaniya Sharma**PG Scholar, Department of Ayurveda Samhita Evam Siddhanta, Patanjali Bhartiya Ayurvigyan Evam Anusandhan Sansthana, Haridwar, Uttarakhand. DOI: <https://doi.org/10.5281/zenodo.21785998>**How to cite this Article:** ¹*Dr. Shaniya Sharma, ²Dr. Devesh Panwar, ³Dr. Aaditya Bhardwaj (2026). Anubandha Chatushtaya: A Foundational Framework For Understanding The Philosophy And Structure Of Ayurvedic Samhita. World Journal of Pharmaceutical and Medical Research, 12(8), 378-381.
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ABSTRACT

Background: Ancient Indian philosophical systems and classical biomedical texts require a structured introductory framework known as Anubandha Chatushtaya (the fourfold prerequisites) to establish their scientific validity, scope, and purpose before a scholar begins comprehensive study. This framework contains four basic components: Abhidheya (subject matter), Prayojana (ultimate objective), Adhikari (the eligible reader), and Sambandha (inter-relationship). While these elements are deeply woven into the structural design of the foundational Ayurvedic treatises (Samhitas), their systematic application within modern educational paradigms and clinical research design remains under-examined. **Objective:** This review critically analyzes the philosophical architecture and operational mechanics of Anubandha Chatushtaya within the major Ayurvedic texts, evaluating its importance to modern scientific education, clinical reasoning, and the validation of research protocols. **Materials and Methods:** A thorough textual exegesis was conducted using primary classical sources, including the Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, alongside historical commentaries by Chakrapanidatta, Dalhana, and Arunadatta. Electronic databases including PubMed, DHARA, and Google Scholar were searched up to 2026 for relevant modern literature on textual hermeneutics and research methodology. Explicit inclusion and exclusion parameters guided data extraction and thematic synthesis. **Major Findings:** Anubandha Chatushtaya functions as an essential quality assurance framework that prevents aimless study and ensures every therapeutic principle aligns directly with defined patient outcomes. Critical appraisal shows that Abhidheya provides a comprehensive blueprint for healthcare, Prayojana sets a firm goal for preventive and curative treatments, Adhikari defines the competencies required of a clinician, and Sambandha establishes internal logical consistency. A conceptual workflow diagram and comparative tables illustrate how these traditional concepts map onto modern scientific research parameters. **Conclusion:** Anubandha Chatushtaya is highly relevant to contemporary clinical medicine and academia. Incorporating this framework into institutional education and research design provides a logical, systematic method for clinical training and helps generate valid hypotheses for evidence-based medicine.

KEYWORDS: Anubandha Chatushtaya, Ayurveda, Epistemology, Hermeneutics, Research Methodology, Samhita Architecture.**INTRODUCTION**

The classical treatises of Ayurveda, known collectively as the Samhitas, are not merely collections of empirical observations or isolated therapeutic recipes. Instead, they represent sophisticated, logically structured medical

systems built upon a robust epistemological foundation.^[1] To ensure that a scientific work is approached with clarity, precision, and a defined purpose, ancient Indian text traditions (Shastras) developed a mandatory introductory framework called

Anubandha Chatushtaya.^[2] This term is a compound of Anubandha (that which binds or attaches to the subject, a prerequisite) and Chatushtaya (fourfold). Together, these four foundational criteria must be explicitly declared at the beginning of any authoritative scientific text to justify its creation and guide the reader's journey.^[3]

Philosophically, no intelligent person engages in an activity or studies a complex subject without understanding its scope, utility, eligibility, and internal relationships.^[4] The four pillars of this framework address these fundamental questions directly.

- Abhidheya: The exact subject matter to be expounded.
- Prayojana: The ultimate goal or outcome achieved through study and practice.
- Adhikari: The qualified person possessing the prerequisites to study the text.
- Sambandha: The precise relationship linking the text, the reader, and the objectives.

Within the major Ayurvedic texts (Brihatrayi), this framework is integrated directly into the opening chapters.^[5] For example, the Charaka Samhita begins its first chapter (Sutra Sthana, Dirghanjivitiya Adhyaya) by framing medicine around the pursuit of longevity and health, outlining these four criteria right from the start.^[6]

MATERIALS AND METHODS

Literature Sources

The primary literature used for this review consists of the foundational classical treatises (Brihatrayi) and their most authoritative commentaries. This approach matches historical analytical traditions where specific textual tools are evaluated across generations.^[7]

Electronic Databases

To assess modern scientific relevance, educational adaptations, and research connections, electronic databases were searched up to June 2026. These included PubMed/MEDLINE, the Digital Helpline for Ayurveda Research Articles (DHARA), Google Scholar, and the institutional portals of the National Commission for Indian System of Medicine (NCISM).^[8]

Inclusion Criteria

1. Unabridged Sanskrit verses and authorized commentaries defining or applying Anubandha Chatushtaya, Abhidheya, Prayojana, Adhikari, or Sambandha.^[9]
2. Peer-reviewed journal articles, indexed review papers, and academic publications exploring text architecture, research methodology, and pedagogy in traditional Indian medicine.
3. Comparative literature matching traditional epistemology with modern research frameworks.

Exclusion Criteria

1. Non-peer-reviewed articles, informal online commentaries, and introductory textbook prefaces that do not provide rigorous scientific analysis.^[10]

2. Conceptual papers discussing general Indian philosophy (Darshana) without making a direct link to Ayurvedic medicine or clinical research.

Search Strategy and Critical Analysis

The search string combined Boolean operators and specialized terms: ("Anubandha Chatushtaya" OR "Abhidheya" OR "Prayojana") AND ("Ayurveda" OR "Research Methodology"). Data was evaluated using a three-phase hermeneutic model to map structural parameters onto modern clinical research design rules.^[11]

RESULTS AND DISCUSSION

Definition and Etymology

The term Anubandha is derived from the Sanskrit root Bandh with the prefix Anu, signifying a close link, an indispensable attachment, or a necessary prerequisite. In literary theory and epistemology, an Anubandha is a mandatory element that binds the reader to the text, ensuring their attention is grounded in logic rather than curiosity.^[12] Chatushtaya denotes a collection of four specific elements.

Chakrapanidatta explains that without clearly stating these four factors, a text lacks scientific authority (Shastratva), as serious students will not dedicate time to a work unless its scope, purpose, audience, and internal logic are clearly defined.^[13]

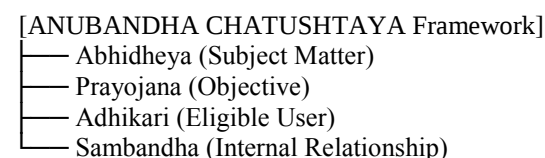


Figure 1: Conceptual framework of Anubandha Chatushtaya.

Classical References and Conceptual Explanation

The four components form an integrated system of logic across all classical texts.

1. Abhidheya (Subject Matter): Abhidheya represents the core content of the text. In Ayurveda, this is the study of life (Ayu), balancing the body's humors (Doshacikitsa), and maintaining health across the lifespan. It includes the foundational triad of causes (Hetu), signs (Linga), and therapeutics (Aushadha), known as the Trisutra.^[14]
2. Prayojana (Objective): The purpose of the system is practical and clearly stated. Charaka outlines this goal as maintaining the health of healthy individuals and treating the diseases of those who are sick (Svasthasya svasthyarakshanam aturasya vikaraprashamanam cha).^[15]
3. Adhikari (The Eligible Reader): The text is designed for a specific reader. In antiquity, this meant students possessing focus, analytical capability, intellectual integrity, and a compassionate drive to practice medicine.^[16] In a modern sense, it defines academic criteria and professional competency profiles.
4. Sambandha (Inter-relationship): Sambandha explains how these elements connect to one another. The text (Vachaka) explains the subject matter (Vachya), and

studying it leads directly to achieving the clinical objective (Prayojana).^[17]

[Treatise text: Vachaka] —(Explains)—> [Pathophysiology/Therapeutics: Vachya/Abhidheya] —(Leads directly to)—> [Preservation of Health: Prayojana]

Figure 2: Flowchart showing the logical chain of Sambandha connecting text to practical outcome.

Comparative Analysis and Critical Appraisal

To understand its methodological value, we can map Anubandha Chatushtaya onto modern scientific research concepts. For instance, it shares strong functional similarities with the foundational components of a contemporary clinical research protocol or a structural thesis design.^[18]

Table 1: Comparative operational matrix of Anubandha Chatushtaya and modern research parameters.

Classical Component	Primary Definition in Ayurveda	Corresponding Modern Parameter	Function in Research & Writing
Abhidheya	Trisutra (Etiology, Symptomatology, Therapeutics); Ayu (Life science).	Scope of Study, Variable Definition, Core Hypothesis.	Establishes boundaries, preventing scope creep and unfocused data gathering.
Prayojana	Preservation of wellness; mitigation of active disease processes.	Primary and Secondary Endpoints; Clinical Relevance.	Clearly defines target outcomes, ensuring the study remains focused on practical utility.
Adhikari	Virtuous, rational student/physician committed to clinical ethics.	Inclusion/Exclusion Criteria; Investigator Competency.	Filters target populations and ensures researchers have the skills needed for the study.
Sambandha	Structural alignment of medical literature with real-world outcomes.	Internal Validity; Conceptual Framework; Rationale.	Validates the research design, showing how data collection directly supports the study's goals.

Modern Scientific and Clinical Relevance

In the era of personalized and evidence-based medicine, this framework provides a structured approach to clinical reasoning. When a physician encounters a complex case, they can apply these four criteria to organize their clinical approach: (1) Define the Patient's State (Abhidheya); (2) Establish the Goal (Prayojana); (3) Evaluate Suitability (Adhikari); (4) Align the Therapy (Sambandha). This method ensures that therapies are carefully matched to the patient's specific metabolic capacity and unique constitution (Prakriti), supporting safer and more effective outcomes.^[19]

Patient State (Abhidheya) —> Establish Goal (Prayojana) —> Evaluate Suitability (Adhikari) —> Align Therapy (Sambandha)

Figure 3: Four-step clinical decision framework modeled on Anubandha Chatushtaya.

Educational and Research Significance

The institutional curriculum overseen by the NCISM can benefit from integrating this framework into everyday teaching.^[20] Rather than presenting Samhita study as memorization, educators can use these four pillars to cultivate active problem-solving, creating a standard guideline for contemporary literary and reverse pharmacology protocols.

CONCLUSION

Anubandha Chatushtaya remains a highly operational quality framework for understanding the core philosophy and foundational layout of classical Ayurvedic literature. It distributes an integrated structural check ensuring that

medical text study, research hypotheses, and clinical endpoints align safely with holistic principles. Future academic curricula and clinical validation trials must continue utilizing this logical system to structure scientific papers and bridge traditional text hermeneutics with evidence-based medicine frameworks.

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