Conceptual Understanding of Arbuda and Granthi in Sushruta Samhita: Relevance to Contemporary Oncology

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***Abstract*— Ancient Indian medical literature presents a structured understanding of disease causation, diagnosis, and management. Among the foundational Ayurvedic texts, the Sushruta Samhita is highly regarded for its detailed surgical and clinical knowledge. The concepts of Arbuda and Granthi have been widely discussed by scholars due to their resemblance to abnormal tissue growths. This article analyzes these concepts in the framework of Sushruta Maharshi's philosophy and evaluates their relevance to modern oncology. A descriptive and textual analysis approach was adopted using classical Ayurvedic texts and contemporary research literature. Findings indicate that Sushruta's observations demonstrate early clinical reasoning in tumor-like conditions, though not equivalent to modern cancer pathology.**

***Index Terms*— Sushruta Samhita, Arbuda, Granthi, Ayurveda, Oncology, Ancient Surgery**

I. INTRODUCTION

Sushruta Maharshi is recognized as one of the earliest surgeons in medical history. His text, the Sushruta Samhita, provides systematic descriptions of anatomy, pathology, and surgical procedures (Sharma, 2014). Among the diseases described, Arbuda and Granthi are often interpreted as tumor-like conditions (Bhishagratna, 2016).

These descriptions reflect early attempts to classify abnormal growths based on observable clinical features. However, direct equivalence with modern cancer is not scientifically accurate due to differences in conceptual frameworks (Meulenbeld, 1999).

II. RESEARCH METHODOLOGY

This study adopts a qualitative textual analysis approach.

Sources of Data

The research is based on:

- Sushruta Samhita (Sharma, 2014; Bhishagratna, 2016)
- Charaka Samhita (Sharma & Dash, 2010)
- Ashtanga Hridaya (Vagbhata, 2015)
- Peer-reviewed Ayurvedic oncology studies (Panwar & Gupta, 2022; Jat et al., 2020)
- Modern oncology references (WHO, 2025; National Cancer Institute, 2025)

Method of Analysis

A descriptive and comparative textual analysis method was used to interpret Ayurvedic descriptions of Arbuda and Granthi and compare them with modern oncological concepts (Meulenbeld, 1999).

III. SUSHRUTA'S PHILOSOPHY OF HEALTH AND DISEASE

Sushruta explains health as a balance of Vata, Pitta, and Kapha doshas. Disease arises when this equilibrium is disturbed (Sharma, 2014). He emphasized environmental, dietary, and lifestyle factors in disease development (Dash, 2001).

His preventive approach included:

- Dietary regulation
- Hygiene practices
- Seasonal lifestyle adjustments
- Early disease detection

This holistic model is still relevant in preventive medicine (Lad, 2002).

IV. CONCEPT OF GRANTHI AND ARBUDA

Granthi

Granthi refers to localized nodular swellings caused by doshic imbalance, mainly Kapha (Sharma, 2014).

Key features include:

- Localized structure
- Slow progression
- Nodular appearance
- Limited spread

Arbuda

Arbuda is described as a deeper and more serious growth condition (Bhishagratna, 2016).

Characteristics include:

- Deep tissue involvement
- Slow but progressive growth
- Firm consistency
- Resistance to spontaneous healing

Modern scholars interpret these descriptions as early clinical observations of tumor-like conditions (Panwar & Gupta, 2022).

V. CLASSIFICATION OF ARBUDA

Sushruta classifies Arbuda based on doshic predominance (Sharma, 2014):

Vataja Arbuda

Characterized by pain, irregular growth, and dryness.

Pittaja Arbuda

Marked by inflammation, heat, and faster progression.

Kaphaja Arbuda

Slow-growing, firm, and heavy in nature.

Raktaja Arbuda

Associated with blood tissue disturbance and severity.

Mamsaja Arbuda

Originates in muscle tissue and shows larger growth potential.

These classifications reflect an attempt to categorize disease based on clinical presentation (Bhishagratna, 2016).

VI. THERAPEUTIC APPROACHES (SUSHRUTA PERSPECTIVE)

Sushruta emphasizes surgical intervention as a primary treatment method for accessible growths (Sharma, 2014).

Other approaches include:

- Shastra Karma (Surgery): Excision of growths
- Agni Karma (Cauterization): Heat-based treatment
- Kshara Karma: Chemical cauterization
- Herbal therapy: Restoration of doshic balance
- Diet regulation: Supportive healing approach

These interventions demonstrate early surgical oncology concepts (Dash, 2001).

VII. COMPARISON WITH MODERN ONCOLOGY

Modern oncology defines cancer as uncontrolled cellular proliferation with invasion and metastasis (National Cancer Institute, 2025).

Ayurveda (Sushruta)	Modern Oncology
Arbuda	Tumor
Granthi	Benign swelling
Surgical excision	Tumor removal surgery
Doshic imbalance	Cellular mutation

However, differences remain fundamental due to:

- Cellular vs. doshic theory
- Diagnostic methods
- Pathophysiological models

Therefore, Arbuda is best understood as a conceptual precursor, not a direct equivalent of cancer (Meulenbeld, 1999).

VIII. LIMITATIONS AND DISCUSSION

Sushruta's work reflects advanced clinical reasoning based on observation and classification. His emphasis on surgery, prevention, and holistic care aligns with modern principles of medicine (Sumantran & Tillu, 2012).

Although Ayurvedic pathology differs from modern biomedical science, both systems aim at understanding abnormal growth and restoring health.

Limitations

- Ayurvedic and modern medical terminologies are not directly interchangeable.
- Arbuda cannot be scientifically equated with cancer.
- Interpretation depends on historical context.

IX. CONCLUSION

The Sushruta Samhita provides one of the earliest systematic discussions on tumor-like conditions. While Arbuda and Granthi cannot be equated with modern cancer, they represent significant early medical observations. Sushruta's contributions remain relevant

for understanding the historical evolution of surgical and clinical medicine.

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