When we start to use the art and science of Yoga as a therapy (Yoga Chikitsa) it is important that we realise the basic fact that Yoga has its own system of diagnosis and health evaluation. Please don’t forget that the mere use of Yoga techniques to suppress symptoms is Yogopathy!

The twelve diagnostic methods (dwadasha rogalakshna anukrama) have been very well described by Yogamaharishi Dr Swami Gitananda Giri, founder of Ananda Ashram at Pondicherry, India and one of the foremost authorities on Yoga in the 20th century as a method of self-analysis (swadhyaya) that enables not only the therapist to understand the patient better but also enables at the same time the patient to understand themselves better too. This may then stimulate the patients themselves to make a sincere and dedicated attempt to regain their lost health, happiness and wholeness through unitive methods. This is a “win-win” situation and benefits all!

The twelve major methods of diagnosis used in yoga that have been described by Swamiji include:

1. **Triguna**: This is most important as a person of a tamasic (dull and lazy) nature needs to be treated differently than rajasic (overactive) and sattwic (calm and composed) types. Western medicine treats everyone “democratically the same” and turns simple toxicity into permanent sickness. The trigunic nature must first be evaluated to bring about self-healing in a patient. The more sensitive and evolved the person, the more sensitive must be the treatment.

2. **Tridosha**: Without evaluating patients according to their dosha, modern medicine dries up the kapha, increases chemical poisoning and produces pressure conditions that are all chronic disorders, while the original dosha imbalances may be easily rectified and balanced.

3. **Trivasana**: The psychological background to one’s personal nature represents personal propensities that bind us to the wheel of birth and rebirth. Lokha vasana (attachment to one’s position in life), jnana vasana (attachment to one’s level of
education and knowledge) and deha vasana (hang-ups and attachments to the body). These may be considered to be the most ingrained of all human conditions.

4. **Prana:** One must determine which of the prana vayu is active or recessive, and which upa prana vayu is shut down, inactive, or recessive. Improper functioning of the various prana vayu leads to various conditions depending on the vayu involved. For example, if it is the samana vayu, then digestion is affected whereas the excretory function is affected in apana vayu malfunction. Loss of prana is death whereas disease is the manifestation of pranic malfunction.

5. **Abhyasa:** A disciplined patient can be trusted to carry out directions, while those who are undisciplined will be difficult patients, disobeying injunctions about life, transgressing body laws, and therefore, will remain disturbed, negative and ill. A disciplined person is seldom ill and is usually suffering only from ignorance or avidya. When truth is revealed they will immediately follow the truth. Most real Gurus will refuse to accept students unless they are disciplined but Yoga therapists don’t always really have that choice!

6. **Jiva Karma:** A healthy lifestyle is one where there is proper adherence to yama-niyama, the system of morality and ethics, as expounded by Maharishi Patanjali. Disobedience or lack of discretion in following these moral and ethical precepts are the cause of much sickness, pain, suffering and violence. A moral and ethical life is necessary for attaining and maintaining good health.

7. **Chetana:** The quality of thought of the individual matters! Are the patient’s thoughts idealistic, positive, and outgoing? Or are they lacking in ideals, reserved and negative? Thought is the cause of all body action and this is the rationale behind adhi-vyadhi, the Yogic concept of psycho-somatics. The Christ Yogi said, “As above, so below”- As we think so also we become. Nowadays we are faced with dangerous vyadhi-adhi, somato – psychic conditions where diseased condition of the body in turn produces mental disturbances. Talk of the tail wagging the dog!

8. **Vacha:** Much can be diagnosed from the way a person speaks, how they pronounce and enunciate language and how they deliver the “power of sound in speech”. Refined speech should be met with refined results. Crude and rough speech elicits crude and rough response. An understanding of the different regions related to production of sound such as the nabhi (navel), hridaya (heart), kanta (throat), rasana (tongue),
**nasa** (nose) etc are essential to be able to utilise this method properly. Saint Thiyagaraja, the great south Indian music composer has delineated these regions and their importance in producing the seven sacred notes of Indian music in his *krithi* (song) *shobillu saptaswara* (the seven beautiful heavenly notes of music).

9. **Ahara**: As food plays an important part in health or sickness, dietary habits must be examined in great detail. It is universally understood that a meat-eating diet is destructive, while a vegetarian diet is more conducive to good health, emotional equilibrium and unitive evolution. Junk foods especially must be curtailed. Tiruvalluvar, the great Dravidian poet-saint has emphasized the link between overeating and disease by saying, “the one who eats on an empty stomach gets health while with the greedy glutton abides ill-health” (*izhivu arindhu unbaankan inbampol nirikum kazhiper iraiyaankan noi*- Tirukkural 946). He offers sane advice on right eating when he says, “He who eats after the previous meal has been digested, needs not any medicine.” (*marunthuena vaendraa vaam yaakkaikkku arundiyathu atrathu poatri unnin-Tirukkural 942*). He also invokes the Yogic concept of *Mitahara* by advising that “eating medium quantity of agreeable foods produces health and wellbeing” (*maarupaaduillaatha undi marutthuunnin oorupaadu illai uyirkku*-Tirukkural 943).

10. **Viparita Buddhi**. There is no possibility of good health for a person who deliberately misuses tobacco, alcohol and illicit drugs. Other habits like over eating or under eating, over exercise and under exercise as well as sexual abuses must also be considered. **Viparita Buddhi** is considered one of the final steps on the road to self induced disaster as made clear by the common statement “vinashkale viparita buddhi” (when the end is near the intelligence is lost).

11. **Jiva Vritti**: Considerations such as periodicity of the nasal cycle, number of breaths per minute (whether deep or shallow, whether sectional or complete), periodicity and rate of the heart, blood pressure, regularity of passing urine and emptying of bowels etc are classified in this category.

12. **Sankalpa**: Aspirations of the individual which may only involve a desire to be well must also be examined. What are the beliefs of the patient? Are they negative or positive? High or low? Are they idealistic enough to accept help, suggestions, and spiritual advice, or are they the type who rejects positive help. It is most often the case
that the one who accepts is a ready listener, and usually follows up with direct actions leading to betterment of health and attainment of well being.

It is mind boggling to even contemplate the wisdom of the great minds (*Rishis*) who devised and codified such a complete system. When we make the effort to inculcate these concepts into our Yoga therapy practice, then we start to be real *Yoga Chikitsaks* (those practicing yoga as a therapy) -if not we will merely remain *YOGOPATHS* and nothing more nothing less!