Journal of Pharmacognosy and Phytochemistry
Available online at www.phytojournal.com

E-ISSN: 2278-4136
P-ISSN: 2349-8234
Impact Factor (RJIF): 6.35
www.phytojournal.com
JPP 2025; 14(5): 610-613
Received: 03-07-2025
Accepted: 09-08-2025

Dr. Avadhesh Banshraj Sharma
PG Scholar, Department of Samhita and Siddhanta, Yashwant Ayurvedic College and Postgraduate Training Center, Kodoli, Kolhapur, Maharashtra, India

Dr. Sachin Waghmare
Professor and HOD, Department of Samhita and Siddhanta, Yashwant Ayurvedic College and Postgraduate Training Center, Kodoli, Kolhapur, Maharashtra, India

Corresponding Author:
Dr. Avadhesh Banshraj Sharma
PG Scholar, Department of Samhita and Siddhanta, Yashwant Ayurvedic College and Postgraduate Training Center, Kodoli, Kolhapur, Maharashtra, India

Applied aspects of abhava in ayurvedic research methodology: A critical review

Avadhesh Banshraj Sharma and Sachin Waghmare

DOI: https://www.doi.org/10.22271/phyto.2025.v14.i5h.15623

Abstract
The concept of *abhava* (non-existence), though metaphysical in origin, plays a vital role in Ayurvedic epistemology, clinical practice, and research methodology. This review critically examines the applied dimensions of *abhava* by correlating its four classical types-*pragabhava*, *pradhwansabhava*, *atyantabhava*, and *anyonyabhava*-with modern research paradigms such as baseline assessment, symptom resolution, relapse-free outcomes, and comparative trials. Drawing from classical texts including *Charaka Samhita*, *Tarkasangraha*, and *Saptapadarthi*, as well as contemporary biomedical literature, the study highlights how the Ayurvedic framework of negation aligns with principles of hypothesis testing, falsifiability, and preventive medicine. Clinically, *abhava* guides diagnosis through absence of function, prognosis through absence of complications, and therapy through *apunarbhava chikitsa* (relapse-free treatment). Thus, *abhava* serves as a methodological bridge linking ancient philosophical insight with evidence-based research, reaffirming Ayurveda's capacity to articulate the logic of absence as an active principle in health science.

Keywords: Abhava, ayurvedic research methodology, apunarbhava chikitsa, non-existence, hypothesis testing

Introduction
The exploration of existence and non-existence has remained a central theme in Indian philosophical traditions. Among the fundamental categories of knowledge, six positive entities-substance (*dravya*), qualities (*guna*), action (*karma*), universals (*samanya*), particulars (*vishesha*), and inherence (*samavaya*)-are commonly recognized as *bhava padarthas* [1]. Distinct from these stands *abhava*, the category of non-existence, whose unique negative character sets it apart from the rest [2]. Though intangible, the *Vaisheshika* school accepted its reality, assigning it a place similar to space and direction. This recognition not only deepened metaphysical inquiry but also opened possibilities for understanding absence as a meaningful construct rather than a mere void.

Over time, different philosophical schools offered their perspectives on *abhava*. While Kanada's *Vaisheshika Sutra* originally listed six categories, later works such as Shivaditya's *Saptapadarthi* introduced *abhava* as the seventh *padartha* [3]. The Navyanyaya tradition further consolidated its position, describing non-existence as an indispensable tool of reasoning. Nyaya identified *abhava* as an object of knowledge (*prameya*), and Bhatta Mimamsa as well as Vedanta associated it with *anupalabdhi* or non-cognition [2]. The four classical types of *abhava*-antecedent, destructional, absolute, and mutual-were thus integrated into the epistemological framework of Indian thought, allowing both relation-based and identity-based negations to be studied with rigor [3].

Ayurveda, though primarily engaged with the restoration of *dhatu samya*, did not ignore this dimension. Charaka acknowledged both existence (*sat*) and non-existence (*asat*), and through principles such as *svabhavaparamavada* (natural destruction) and *hetohavartanam* (cessation of causes), the functional role of *abhava* was indirectly emphasized [4]. In clinical contexts, absence itself becomes a marker of health or disease: the lack of sleep in insomnia, the absence of digestive fire in indigestion, or the disappearance of symptoms after treatment. Similarly, the concept of *apunarbhava chikitsa*, or therapy that ensures the absence of relapse, exemplifies the practical value of negation in achieving sustainable health outcomes [5].

When this philosophical idea is carried into the domain of research methodology, its relevance becomes even more evident. Modern scientific practices such as hypothesis testing and null hypothesis rejection find close resonance with these categories, suggesting that the foundation of research inquiry is already embedded in the Ayurvedic understanding of existence and non-

existence [6]. In this sense, *abhava* is not merely a metaphysical abstraction but a critical lens for structuring research, guiding clinical evaluation, and setting ethical benchmarks such as relapse-free treatment.

This critical review, therefore, seeks to examine the applied aspects of *abhava* within Ayurvedic research methodology. By moving from its philosophical roots to its clinical expressions and finally to its methodological applications, the discussion highlights how a concept grounded in negation can offer positive contributions to evidence-based Ayurveda.

Materials and Methods

This work is designed as a critical review. Primary sources included classical Ayurvedic texts such as the *Charaka Samhita*, *Tarkasangraha*, and *Saptapadarthi*, with supportive interpretations from Nyaya and Vaisheshika philosophies. Secondary sources comprised contemporary publications in philosophy of science and biomedical research. A critical-analytical approach was employed to compare classical notions of *abhava* with their methodological and clinical applications in Ayurvedic research, and to apply these with modern scientific frameworks.

Results

Philosophical Grounding of Abhava in Ayurveda

The concept of *abhava*, literally meaning non-existence, is recognized in Ayurveda as a distinct philosophical category. While six *padarthas-dravya* (substance), *guna* (quality), *karma* (action), *samanya* (universality), *vishesha* (particularity), and *samavaya* (inherence)-describe entities that possess existence, *abhava* differs by its negative character. Ayurveda accepts a twofold classification of reality into existent (*sat*) and non-existent (*asat*), where *abhava* belongs to the latter.

Although absent in Kanada's original *Vaisheshika Sutra*, later schools such as Navyanyaya incorporated *abhava* as the seventh *padartha*, acknowledging that the absence of cause inevitably results in absence of effect. Shivaditya's *Saptapadarthi* first described *abhava* explicitly in this context. Nyaya philosophy identified *abhava* as an object of knowledge, while Mimamsa and Vedanta traditions equated it with *anupalabdhi* (non-cognition).

Without this recognition of non-existence, destruction and impermanence could not be explained. Acceptance of *abhava* thus became necessary to account for processes of transformation, dissolution, and liberation.

Etymology, Synonyms, and Definition

The word *abhava* is derived from the prefix *a-* (absence, negation) attached to *bhava* (existence, state, being). It literally denotes absence of being [7]. Synonyms include negation, non-existence, and non-entity. In classical texts, *abhava* is defined as the negation or non-existence of things. Cognition of *abhava* is always relational, because the absence of a pot can only be perceived once the existence of the pot is known [2].

Acceptance of Abhava as Padartha

Several authoritative texts acknowledged *abhava* as a padartha: *Charaka Samhita* (which classified entities into *sat* and *asat*), *Tarkasangraha*, and *Saptapadarthi*. The reasons for its acceptance are rooted in three requirements of a *padartha*: existence (*astittva*), knowability (*jneyatva*), and expressibility (*abhidheyatva*). Though apparently negative, *abhava* fulfills these conditions by allowing differentiation, knowledge through absence, and communicability through language [2].

Reasons for Acceptance

In the absence of *abhava*, all entities would be eternal, as destruction would not be conceivable. Vaisheshika philosophy distinguishes between causal elements (*kaarana dravya*) and acting elements (*kaarya dravya*), the latter being perishable. Without *abhava*, the transient nature of these elements would be inexplicable. Moreover, Navyanyaya philosophers employed *abhava* to explain liberation as the absolute abolition of pain [2].

Types of Abhava and Research Analogues

Classical philosophy describes two broad categories-absence in relation (*samsargabhava*) and mutual negation (*anyonyabhava*). These are further divided into four types[3].:

- **Pragabhava (antecedent absence):** Absence of an effect before its manifestation, beginningless but ending upon creation. For example, the pot does not exist before it is made. In research, this corresponds to baseline conditions prior to intervention.
- **Pradhwansabhava (destructional absence):** Absence following destruction, beginning with dissolution and persisting indefinitely. For instance, the pot ceases to exist after breaking. In methodology, this parallels symptom resolution during therapy.
- **Atyantabhava (absolute absence):** Eternal non-existence across past, present, and future. For example, form (*rupa*) never exists in *vayu mahabhuta*. In research, this equates to permanent remission or relapse-free absence of disease.
- **Anyonyabhava (mutual absence):** Non-identity of one entity with another, such as a pot never being cloth. In research, this reflects comparative trials where Drug A is not Drug B or placebo.

This typology provides Ayurveda with a logical system that can be directly mapped onto research methodology.

Clinical Relevance of Abhava [8]

In Ayurveda, *abhava* finds expression in both diagnostic and therapeutic contexts. Absence of normal functions often signals pathology: *anidra* (absence of sleep), *agnimandya* (absence of proper digestion), or absence of balance in *dosha*, *dhatu*, and *mala*. Prognosis is guided by absence of complications, such as absence of fever in recovery or absence of relapse in chronic disorders.

Therapeutically, the principle underlies *apunarbhava chikitsa*, or relapse-free treatments, particularly embodied in Rasayana therapies. Interventions such as Agnikarma and Balya chikitsa also aim to ensure lasting absence of disease states. The mind itself is described as alternating between states of presence and absence of knowledge, highlighting the role of *abhava* in cognition.

Applications in Research Methodology

The methodological value of *abhava* is particularly significant. In hypothesis testing, the null hypothesis represents non-existence of effect, while rejection demonstrates emergence of effect. Clinical trials may be described in terms of *abhava* stages:

- **Baseline Absence (Pragabhava):** Effect absent prior to treatment.

- **Therapy-Induced Absence (Pradhwansabhava):** Disappearance of symptoms with intervention.
- **Permanent Absence (Atyantabhava):** Long-term absence of recurrence.
- **Comparative Absence (Anyonyabhava):** Differentiation of therapies or placebo.

This mapping shows that *abhava* offers not only philosophical clarity but also a framework for structuring and interpreting research outcomes.

Biomarker-Based Insights

Modern integrative research further supports this framework. For example, the development and validation of an *Agnibala* self-assessment tool showed correlations between subjective states and serum lipid parameters. The absence of pathological biomarkers aligned with favorable clinical states, reflecting *abhava* of disease at a molecular level [9]. This demonstrates the methodological utility of *abhava* in both classical assessment and modern biomedical evaluation.

The results demonstrate that *abhava*-while originating as a philosophical category-functions as a practical tool across Ayurveda. It defines disease states by absence, directs therapeutic goals toward relapse-free absence, informs prognosis through absence of complications, and structures research methodology through stages of baseline absence, resolution, permanence, and comparative absence. In integrative contexts, absence of biomarkers further validates its continued relevance.

Discussion

The Ayurvedic concept of *abhava* demonstrates that absence is not a void but a functional and methodological category that carries epistemic and clinical importance. In the classical framework, non-existence explains diagnosis through missing signs, prognosis through absence of complications, therapy through the principle of relapse-free treatment, and research methodology through structured stages of baseline absence, symptom disappearance, and relapse-free continuity. When placed alongside modern philosophy and science, the universality of absence as a category becomes even more evident.

Heidegger's existential philosophy emphasizes that human existence acquires meaning only in relation to death [10]. Non-existence, or nothingness, is what defines and gives shape to being. This perspective strongly resonates with the Ayurvedic understanding of *atyantabhava*, or absolute non-existence, where health is defined not only by the presence of balance but also by the long-term absence of disease or relapse. Just as Heidegger recognized death as the horizon that grants meaning to life, Ayurveda views the permanent absence of disease as the true marker of well-being. Here absence is not emptiness but a boundary condition that shapes existence.

A different yet related parallel is observed in Heisenberg's uncertainty principle. In quantum mechanics, the expelled electron is interpreted as not having existed in the nucleus before emission [11]. This idea reflects the Ayurvedic *pragabhava*, the antecedent non-existence of an effect before its manifestation. The pot that does not exist prior to its creation serves as the classical analogy. In research, this is mirrored in the baseline condition before therapy, when the effect of an intervention has not yet appeared. Thus, both Ayurveda and modern physics acknowledge that absence before manifestation is an essential part of understanding transformation.

The philosophy of science further deepens this dialogue. Karl Popper positioned falsifiability as the criterion that separates science from non-science, placing absence at the heart of knowledge [11]. The null hypothesis is an assumption of non-existence, and its rejection through evidence marks the transition to demonstrated presence. This is conceptually identical to *pradhwansabhava*, the disappearance of a disease condition following therapy. However, critiques of Popper by Derksen, Maxwell, and Gillies show that absence cannot always be evaluated in isolation, as multiple interacting factors shape outcomes [12]. Ayurveda acknowledges this complexity as well: the absence of symptoms after therapy often arises not from a single herb but from a combined intervention of medicines, diet, and lifestyle. Both systems therefore highlight absence as central, while also recognizing the layered context in which absence is interpreted.

Carl Sagan's dictum that "absence of evidence is not evidence of absence" also parallels classical Indian thought [13]. The Nyaya school described *anupalabdhi*, or non-cognition, as a valid form of knowledge. In research contexts, a lack of sufficient trials represents the *pragabhava* of knowledge, demanding further study rather than dismissal. At the same time, repeated negative results across multiple trials signify the *pradhwansabhava* of efficacy, justifying the abandonment of ineffective therapies. This nuanced interpretation of absence reflects a shared understanding in both Ayurveda and modern science that absence must be critically contextualized before being equated with inefficacy.

The role of absence becomes even more tangible in statistics. A non-significant p-value reflects the possibility that absence of effect cannot be ruled out, while effect size and confidence intervals attempt to quantify how much presence or absence can be inferred [14]. Ayurveda too recognizes measurable absence: absence of relapse in *apunarbhava chikitsa*, absence of pathological biomarkers during recovery, and absence of adverse effects during therapy. The validation of tools such as the *Agnibala* self-assessment instrument, which correlated states of digestive fire with lipid profiles, demonstrates how absence of deranged biomarkers reflects restoration of health. In this sense, statistical measures of absence align with Ayurvedic applications of *abhava*.

Preventive medicine further strengthens this connection. Modern community health initiatives measure success by non-occurrence, whether it is the prevention of prematurity, avoidance of psychiatric complications, or reduction of relapse in chronic illness. Ayurveda anticipated this orientation through its emphasis on *dinacharya* and Rasayana, which seek the absolute non-existence of disease when preventive regimens are maintained [15]. The idea of *apunarbhava chikitsa* embodies this philosophy by ensuring that the disease does not return after initial treatment. Absence here is the ideal outcome rather than a secondary marker.

Taken together, the comparison demonstrates that absence is a universal epistemological principle. In Ayurveda, *abhava* organizes diagnosis, prognosis, and therapy, while in modern philosophy, absence gives meaning to existence and provides a basis for knowledge. In contemporary science, it governs falsifiability, quantum physics, statistics, and preventive medicine. Rather than being a passive void, absence functions as an active marker of success, validity, and health. Through this lens, *abhava* can be understood as a bridge between ancient Ayurvedic research methodology and modern scientific inquiry, uniting traditions under the shared recognition that non-existence defines the meaning of existence itself.

Conclusion

The present review establishes *abhava* as more than a philosophical abstraction; it is a methodological and clinical tool that shapes Ayurvedic research. From baseline absence to relapse-free outcomes, the typology of *abhava* provides a coherent framework for designing, interpreting, and validating clinical studies. Its resonance with modern concepts such as falsifiability, statistical inference, and preventive health underscores its continued relevance. Thus, *abhava* serves as a bridge linking ancient Ayurvedic thought with contemporary scientific methodology, affirming the role of absence as central to the pursuit of evidence and healing.

References

1. Sharma PV, editor. Caraka Samhita. Sutrasthana 1, verse 28-29 (Vol. 1). Varanasi: Chaukhambha Orientalia; 2001.
2. Chatterjee SS. Nyaya theory of knowledge. Delhi: C.O. Gautam Bharatiya Kala Prakashan; 2008.
3. Sivaditya. Saptapadarthi. Edited by Amarendra Mohan Tarkatirtha and Narendra Chandra Vedantatirtha. Calcutta: Metropolitan Printing and Publishing House Limited; 1934.
4. Sharma PV, editor. Caraka Samhita. Sutrasthana 11, verse 17 (Vol. 1). Varanasi: Chaukhambha Orientalia; 2001.
5. Joshi VN. Importance of Pathyapthya and Apunarbhava Chikitsa in management of Kushtha (skin disorders) - Ayurvedic purview. International Journal of Scientific Research. 2019 Jul;8(7):1-3.
6. Manohar PR. Research for understanding as opposed to evaluating Ayurveda. Ancient Science of Life. 2014;34(2):61-63. DOI: 10.4103/0257-7941.153456.
7. Radhakantdev R, editor. Shabdakalpadruma. Delhi: Amar Publication; 2018.
8. Bhojani MK, Jain R, Tanwar AK, *et al*. Abhava. In: Deole YS, editor. Charak Samhita New Edition. 1st ed. Jamnagar, India: CSRTSDC; 2020. Available from: https://www.carakasamhitaonline.com/index.php?title=Abhava&oldid=44623. Accessed October 19, 2025.
9. Bodaghi A, Fattahi N, Ramazani A. Biomarkers: Promising and valuable tools towards diagnosis, prognosis and treatment of COVID-19 and other diseases. Heliyon. 2023;9(2):e13323. DOI: 10.1016/j.heliyon.2023.e13323.
10. Al-Kashab AY. Existence and non-existence in the philosophy of Martin Heidegger. 2020.
11. Spencer H. Problems of quantum mechanics: A natural philosophical critique. 2018.
12. Maxwell N. A critique of Popper's views on scientific method. Philosophy of Science. 1972;39:131-145. DOI: 10.1086/288429.
13. Antonelli P, Leandro C, Rutz S, *et al*. Mario Livio - The golden ratio: The story of phi, the world's most astonishing number. Broadway Books; 2003.
14. Di Leo G, Sardanelli F. Statistical significance: p value, 0.05 threshold, and applications to radiomics-reasons for a conservative approach. European Radiology Experimental. 2020;4:18. DOI: 10.1186/s41747-020-0145-y.
15. Jagdale S, Dhurde S. Dinacharya and stress management: A preventive approach. Journal of Pharmacognosy and Phytochemistry. 2024;13(5):395-397. DOI: 10.22271/phyto.2024.v13.i5f.1510.