

EFFICACY OF EKAVINSHATIKA GUGGULU IN THE MANAGEMENT OF VICHARCHIKA

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ABSTRACT :

The study of Indian medical classics reveals that all skin diseases were included under the broad heading of *Kushtha* and which is classified in two divisions i.e. *Mahakushtha* and *Kshudrakushtha*. *Vicharchika* is enlisted under *Kshudrakushtha*. All type of *Kushtha* is *Tridoshaja*, so *Vicharchika* is also having *Tridoshaja* origin with *Kapha* dominancy. Its similar clinical presentation in modern dermatology can be traced as Eczema. The modern science has greatly advanced, particularly in dermatology but there is no specific medicaments for sure cure of eczema but symptomatic treatments like steroids are used, but they produce serious side effects like nephrotoxicity, osteoporosis, skin cancer etc. Eczema also has tendency of recurrence which pose problems to the physician. Therefore, the whole world is looking towards *Ayurveda* for this problem to provide safe and effective remedy for *Vicharchika*. Considering all the above facts and figures in mind, the present study has been planned to assess the efficacy of *Ekavinshatika Guggulu* in the management of *Vicharchika*. For this purpose, 20 patients were selected from O.P.D. and I.P.D. of S.M.B.T. Ayurved College & Hospital, Dhamangoan and divided in two groups. In Group A: *Ekavishantika Guggulu* was given as internal medicine and *Ekavinshatika Taila* for external application, while in Group B: *Kaishora Guggulu* was given as internal medicine and *Ekavinshatika Taila* for external application. From obtained results it can be concluded that the efficacy of both groups are equal. *Vicharchika* (eczema) has tendency to recurrence. So, it was advisable to continue treatment for long time.

Key words: *Vicharchika*, Eczema, *Ekavinshatika Guggulu*, *Kaishora Guggulu*, *Ekavinshatika Taila*

INTRODUCTION: The human body is made-up of several organs, tissues and systems which perform different functions essential for maintaining the life process. Skin is the first and largest organ of the body interacting with environmental stimuli and natural ability of body, to deal with these causative factors result in

spontaneous remissions and relapses. Interaction with these factors results in specific reaction pattern producing characteristic skin lesions in different body parts. Large community prevalence studies have demonstrated that about 20-30% of the world population have various skin problems requiring attention¹. In 21st

century, life is very fast and competitive. Everyone wants to be the best. Because of this, persons of this era compromise with their food habits and routine life schedule. In this scenario, with its continuous changing life styles environment and dietary habits have made man as main victim of many diseases including skin diseases. Normal 10 - 15% of the general practitioners work is with skin disorders and about 30% of all the skin diseases are eczematous². Skin diseases are hazardous for physical as well as mental health because they disturb cosmetic harmony.

According to Ayurvedic literature *Kushtha* is the universal term for all type of skin disorders which means discoloration over skin region³. All types of *Kushtha* are *Tridoshaja Vikara*⁴ and which is classified in two divisions⁵ i.e. *Mahakushtha* and *Kshudrakushtha*. *Vicharchika* is enlisted under *Kshudrakushtha*⁶. Its similar clinical presentation in modern dermatology can be traced as Eczema, which is defined as a non-contagious inflammation of the skin characterized by pruritus, erythema, oedema, Papules, vesicles, scaling and lichenification. While acute eczema is exudative and chronic eczema is dry, scaly and lichenified⁷.

According to classical texts, *Vicharchika* has cardinal symptoms i.e. *Kandu* (Excessive itching), *Pidika* (Vesicle/ Boil/ Pustule), *Shyavata* (Discoloration), *Bahusrava*⁸ (Profuse oozing), *Lasikasrava*⁹, *Raji*¹⁰ (Marked lining/ Lichenification), *Ruja* (Pain), *Rukshata* (Excessive dryness). *Vicharchika* is *Kapha Pradhana Tridoshaja Vyadhi*¹¹ and *Rasa (Twak), Rakta, Mamsa* and *Kleda (Ambu)* are *Dushya*¹² of it. The main causative factor for all the *Roga* is *Agnimandhya*¹³. Thus, in these condition

drugs which correct *Dosha* vitiation, *Agnivaishamya* and *Dhatu dushti* seems to play an important role in its management. For this purpose, *Ekavinshatika Guggulu* from *Chakradatta*¹⁴ was selected as trial drug and *Kaishora Guggulu* as standard drug from *Yogaratanakara*¹⁵. Both of the compounds have *Deepana, Pachana, Tridoshahara* especially *Kaphahara, Langhana, Pitta-Rechaka*, Blood purifier, *Lekhana, Krimighna, Kandughna, Kushthaghna* and *Rasayana* etc properties. Hence *Vicharchika* is manifested in *Twacha* and *Ayurveda* equally emphasis on treating the *Sthana, Ekavinshatika Taila* was prepared from ingredients of *Ekavinshatika Guggulu*.

AIMS AND OBJECTIVES:

- 1) To study etiopathogenesis and symptoms of *Vicharchika* and eczema as per *Ayurveda* and modern medical science.
- 2) To compare the clinical study of *Ekavinshatika Guggulu* and *Kaishora Guggulu* in the management of *Vicharchika*.
- 3) To assess the effect of *Ekavinshatika Taila*.

MATERIAL AND METHOD:

The 20 patients of uncomplicated *Vicharchika* (eczema) were selected for present study from O.P.D. and I.P.D. of S.M.B.T. Ayurved College & Hospital, Dhamangoan, Nashik.

Criteria for Diagnosis:

The patients were diagnosed on the basis of classical signs and symptoms of *Vicharchika* described in *Ayurvedic* classics. A specific proforma was prepared and the patients of the present study were examined in detail as per proforma.

INCLUSION CRITERIA:

The patients between age of 16 to 70 years, having clinical signs and

symptoms of Vicharchika as per Ayurvedic texts were selected.

EXCLUSION CRITERIA:

The patients having age less than 16 years or more than 70 years and/or having systemic disorders like, D.M., AIDS, Tuberculosis, etc. were excluded.

INVESTIGATIONS:

- 1) Hematological investigations for Hb%, TLC, DLC, E.S.R.
- 2) Routine and Microscopic examination of urine and stool.
- 3) Biochemical examination for FBS, Sr. Cholesterol.

Management of the Patients:

Grouping: Selected patients were randomly divided into two groups.

Group – A: In this group, 10 patients of Vicharchika were treated internally with Ekavinshatika Guggulu and Ekavinshatika Taila was applied externally.

Dose: Ekavinshatika Guggulu – 4 tablets (Each tablet of 500mg) before food three times a day.

Anupana: Sukoshnajala (Warm water)

Ekavinshatika Taila – For local application three times a day.

Group – B: In this group, 10 patients of Vicharchika were treated internally with

Scoring criteria of *Kandu* (Pruritus):

Grade	Score
Nearly no itching	0
Mild or occasional itching (1-2 times in a day)	1
Itching on and off	2
Continuous itching without disturbance in routine	3
Continuous itching with disturbance in routine even in sleep	4

Scoring criteria of *Pidaka* (Papule):

Grade	Score
Nearly no papule in the lesion	0
Scanty papule in few lesion	1
Scanty papule in at least half of the lesion	2
All the lesions full of papule	3

Kaishora Guggulu and Ekavinshatika Taila was applied externally.

Dose: Kaishora Guggulu – 4 tablets (Each tablet of 500mg) before food three times a day.

Anupana: Sukoshnajala (Warm water)

Ekavinshatika Taila – For local application three times a day.

Duration: Eight weeks.

Follow up period: Four weeks

ASSESSMENT CRITERIA:

CRITERIA FOR ASSESSMENT:

- a. Subjective criteria: By observing clinical improvement in signs and symptoms of the disease as per proforma.
- b. Objective criteria: By comparing photographs and Pathological investigation of each group before and after treatment.

SUBJECTIVE CRITERIA: To assess the improvement in the clinical sign and symptoms of Vicharchika following scoring criteria was utilized. *Kandu*, *Pidaka*, *Vaivarnyata* and *Srava* are taking as cardinal symptoms while *Daha*, *Shotha* and *Vedana* are consider as associate symptoms of Vicharchika. It was designed on the basis of severity of symptoms. Specific symptom and its scoring criteria are as follows.

Scoring criteria of Vaiarnyata (Discoloration):

Grade	Score
Nearly normal skin color	0
Brownish red discoloration (<i>Rakta</i> or <i>Aruna Varnata</i>)	1
Blackish red discoloration (<i>Shyava Varnata</i>)	2
Blackish discoloration (<i>Krushna Varnata</i>)	3

Scoring criteria of Strava (Weeping):

Grade	Score
Nearly no weeping	0
Moisture on the skin lesion	1
Weeping from the skin after itching	2
Weeping from the skin	3
Profuse weeping making cloths wet	4

Scoring criteria of Daha (Burning sensation):

Grade	Score
Nearly no <i>Daha</i>	0
Sometimes <i>Daha</i>	1
Often <i>Daha</i>	2
Continuous <i>Daha</i> without disturbing routine	3
Continuous <i>Daha</i> with disturbed routine	4

Scoring criteria of Shotha (Swelling):

Grade	Score
Nearly no <i>Shotha</i>	0
Present in <25% of lesion parts	1
Present in 25-50% of lesion parts	2
Present in 50-75% of lesion parts	3
Present in >75% of lesion parts	4

Scoring criteria of Vedana (Pain):

Grade	Score
Nearly no <i>Vedana</i>	0
Mild <i>Vedana</i>	1
Moderate <i>Vedana</i>	2
Severe <i>Vedana</i>	3

Criteria for overall effect of the therapy:

- **Complete remission:** 100% relief in the signs and symptoms.
- **Marked improvement:** 76 - 99% relief in the signs and symptoms.
- **Moderate improvement:** 51 - 75% relief in signs and symptoms.
- **Mild improvement:** 26 - 50% relief in signs and symptoms.

- **Unchanged:** Below 25% relief in signs and symptoms.

STATISTICAL ANALYSIS: The informative data collected from observation at the end of treatment. They were subjected to statistical analysis in terms of mean score (\bar{x}), standard deviation (S.D.), standard error (S.E.), paired and unpaired 't' test was carried out at the level of 0.05, 0.01, 0.001 of 'p' level. The

results were interpreted as, if 'p' value more than 0.05 is considered as statistically insignificant while the value of 'p' is less than 0.05 is considered as statistically significant. If the value of 'p' is less than 0.01 or 0.001 is considered statistically highly significant.

OBSERVATIONS:The maximum patients i.e. 25% were in the age group of 31-40 years, 65% were male, 25% were housewives and 25% were doing service, while 80% were married, 85% were Hindu, 65% were belonging to lower middle class, 65% were vegetarian, 50% were having *Vishamagni*, 55% were with

lesions on both extremity. Regarding family history, 55% patients had positive history of Eczema in family, 25% had positive history of allergic disorders like Asthma, hay fever and other allergic condition.

In present study, cardinal symptoms of the disease *Vicharchika*, *Kandu*, *Pidaka*, *Vaivarnya* (*Shyavata*) and *Srava* were present in all the 20 patients i.e. 100%. While associate symptoms *Daha*, *Vedana* and *Shotha* were found in 75%, 25 % and 10% of patients respectively (Table 1).

Table 1: Symptoms wise distribution of 20 patients of Vicharchika:

<i>Pradhana Vedana</i>	Group – A	Group – B	Total	Percentage (%)
<i>Kandu</i>	10	10	20	100
<i>Pidika</i>	10	10	20	100
<i>Shyava</i>	10	10	20	100
<i>Sravata</i>	10	10	20	100
<i>Daha</i>	6	9	15	75
<i>Shotha</i>	2		2	10
<i>Vedana (Shula)</i>	2	3	5	25

Effect of the therapies on subjective parameters:

Group A: Highly significant ($p < 0.001$) results were obtained in 4 chief complaints, i.e. *Kandu* was relieved by 70.27 %, *Pidika* were decline by 82.14 %, *Vaivarnya* was reduced by 60 %, *Srava*

was diminished by 84.85 %. In *Daha* 92.86% relief was obtained which is highly significant ($p < 0.001$). 100.00% relief was obtained in *Vedana* & *Shotha* (Table 2).

Table 2: Effect of therapy on signs & symptoms in Group – A

Symptoms (n=10)	Mean score		X	%	S.D.	S.E.	‘t’	‘p’
	B.T.	A.T.						
<i>Kandu</i>	3.7	1.1	2.6	70.27	0.5164	0.1633	15.92	<0.001
<i>Pidaka</i>	2.8	0.5	2.3	82.14	0.6749	0.2134	10.78	<0.001
<i>Vaivarnya</i>	2	0.8	1.2	60	0.4216	0.1333	9	<0.001
<i>Strava</i>	3.3	0.5	2.8	84.85	0.7888	0.2494	11.22	<0.001
<i>Daha</i> (n=6)	2.33	0.17	2.17	92.86	0.7528	0.3073	7.05	<0.001
<i>Shotha</i> (n=2)	1.5	0	1.5	100	0.7071	0.5	3	>0.10
<i>Vedana</i> (n=2)	1.5	0	1.5	100	0.7071	0.5	3	>0.10

Group B: *Kandu* being a major symptom had 70.27 % relief which was statistically

highly significant ($p < 0.001$). In *Pidaka* 79.31% relief was obtained which is

highly significant (p <0.001). 55% relief with highly significant (p<0.001) was observed in *Vaivarnya*. In *Srava* & *Daha* 80% and 95.45% relief with highly

significant (p<0.001) were calculated respectively. In *Vedana* 100 % relief was observed (Table 3).

Table 3: Effect of therapy on signs & symptoms in Group – B

Symptoms (n=10)	Mean score		X	%	S.D.	S.E.	‘t’	‘p’
	B.T.	A.T.						
<i>Kandu</i>	3.7	1.1	2.6	70.27	0.5164	0.1633	15.92	<0.001
<i>Pidaka</i>	2.9	0.5	2.4	82.75	0.5163	0.1633	14.70	<0.001
<i>Vaivarnya</i>	2	0.9	1.1	55	0.5676	0.1795	6.13	<0.001
<i>Strava</i>	3.5	0.7	2.8	80	0.4216	0.1333	21	<0.001
<i>Daha</i> (n=9)	2.44	0.11	2.33	95.45	0.8660	0.2887	8.08	<0.001
<i>Shotha</i> (n=0)	-	-	-	-	-	-	-	-
<i>Vedana</i> (n=3)	1.33	0	1.33	100	0.5773	0.3333	4	>0.10

Effect of therapy on Objective Parameters:

Group A: The data obtained from investigation reveals that the significant results (p< 0.05) obtained in Heamoglobin with increase of -9.57 %. Significant (p< 0.05) result was observed decrease of 9.37% in Sr. Cholesterol and (Table 4).

Group B: The observation reveals that the highly significant results (p< 0.001) obtained in Heamoglobin with increase of -12.59 %. Also significant result was obtained (p< 0.05) with decrease of 61.71% in E.S.R. and Sr. Cholesterol is decrease 3.98% which is statistically significant (p<0.05) (Table 5).

Table 4: Effect of therapy on Haematological & Biochemical investigations in Group A

Symptoms (n=10)	Mean score		X	%	S.D.	S.E.	‘t’	‘p’
	B.T.	A.T.						
Hb%	11.91	13.05	-1.14	-9.57	1.1226	0.355	3.21	<0.05
TLC/cmm	6160	6030	130	1.90	1022.03	323.2	0.4022	>0.1
ESR (1st hr.)	18.4	12.1	6.3	34.24	15.58	4.93	1.28	>0.1
Sr. Cholesterol	187.25	169.7	17.25	9.37	19.99	6.32	2.78	<0.05

Table 5: Effect of therapy on Heamatological & Biochemical investigations in Group B

Symptoms (n=10)	Mean score		X	%	S.D.	S.E.	‘t’	‘p’
	B.T.	A.T.						
Hb%	12.55	14.13	-1.58	-12.59	0.9307	0.2943	5.37	<0.001
TLC/cmm	6850	6720	130	1.90	1022.03	323.20	0.4022	>0.1
ESR (1st hr.)	26.9	10.3	16.6	61.71	19.10	6.039	2.75	<0.05
Sr. Cholesterol	174.74	167.7	6.95	3.98	8.42	2.66	2.61	<0.05

Overall effect of therapies: (Table 6)

Group-A: 10% of patients had Complete remission, Marked improvement was found in 50% and 30% of the patients had Moderate improvement.

Group-B: Nobody was completely cured. Marked improvement was found in only 30%, where 70% of the patients were noted Moderate improvement.

Table 6: Total effect of the therapy in both groups

Results	Group-A		Group-B		Total	
	No.	(%)	No.	(%)	No.	(%)
Complete remission (100%)	1	10%	0	00%	1	05%
Marked improvement (>75%)	4	40%	3	30%	7	35%
Moderate improvement (50– 75%)	5	50%	7	70%	12	60%
Mild improvement (25 – 50%)	0	00%	0	00%	0	00%
Unchanged (<25%)	0	00%	0	00%	0	00%

DISCUSSION: The Group –A showed statistically highly significant effect on *Kandu, Pidika, Vaivarnya, Srava* and *Daha*, while insignificant effect was noted on *Vedana* and *Shotha*.

In Group – B, highly significant effect was observed on *Kandu, Pidika, Vaivarnya, Srava* and *Daha*, while insignificant effect was seen on *Vedana*.

While applying Unpaired ‘t’ test to compare the efficacy of both groups, but it was unable to provide significance on all the symptoms of *Vicharchika*. So, on the basis of obtained result it can be said that overall efficacy of both groups i.e. *Ekavinshatika Guggulu* and *Kaishora Guggulu* along with *Ekavinshatika Taila* are approximately equal.

Probable mode of action of drug:

Ekavinshatika Guggulu: This drug is mainly having *Katu* and *Tikta Rasa; Laghu, Ruksha, Tikshna* and *Sukshma Guna; Ushna Virya; Katu Vipaka; Deepana, Pachana, Kushthaghna, Kandughna, Krumighna, Rasayana, Lekhana* properties.

Katu and *Tikta Rasa, Laghu, Ruksha, Tikshna* and *Sukshma Guna, Ushna Virya* and *Katu Vipaka* are having *Kaphahara* properties. *Laghu, Ruksha, Tikshna, Sukshma Guna* and *Pachana* properties cause *Langhana* and *Rasashuddhi* in this way. *Deepana* and *Pachana* properties cause *Yakruta uttejana* hence *Pittarechana*. So, it corrects vitiated

Pachaka Pitta and helps in purifying *Raktadhatu*. *Pachaka Pitta* controls the other *Pitta* in the body including *Bhrajaka Pitta* which is also vitiated in *Vicharchika*. *Katu* and *Tikta Rasa* and *Lekhana* property cause *Lekhana* of *Malarupa Mamsa dhatu*. *Katu Rasa* has *Kledaupahanana* property and *Tikta Rasa* have *Kledopashoshana* property and so they correct vitiated *Kleda*. *Katu Rasa* and *Tikta Rasa, Laghu, Ruksha, Ushna, and Tikshna Guna, Deepana, Pachana* and *Lekhana* properties do *Aampachan* and also remove *Sanga* from *Srotasa* and do *Srotomukha Vishodhana*. *Rasayana* give strength to vitiated *Twak, Rakta, Mamsa* and *Lasika*, work as a *Naimittika Rasayana*, enhances the nature of relief & stop the recurrences.

Kaishora Guggulu: This drug is mainly having *Katu, Madhura, Kashaya* and *Tikta Rasa; Laghu, Ruksha, Tikshna* and *Sukshma Guna; Ushna Virya; Madhura Vipaka; Deepana, Pachana, Kushthaghna, Kandughna, Krumighna, Rasayana* and *Lekhana* properties.

Katu, Kashaya and *Tikta Rasa, Laghu, Ruksha, Tikshna* and *Sukshma Guna, and Ushna Virya* are having *Kaphahara* properties. *Laghu, Ruksha, Tikshna, Sukshma Guna* and *Pachana* properties cause *Langhana* and thus *Rasashuddhi* in this way. *Deepana* and *Pachana* properties cause *Yakruta uttejana* hence *Pittarechaka*. So, it corrects vitiated *Pachaka Pitta* and helps in purifying

Raktadhatu. Danti, Trivruta and Triphala are best Virechana which also cause Pitta Rechana and Raktashuddhi. Pachaka Pitta controls the other Pitta in the body including Bhrajaka Pitta which is also vitiated in Vicharchika. Katu and Tikta Rasa and Lekhan property cause Lekhana of Malarupa Mamsa dhatu. Katu Rasa has Kledaupahanana property and Tikta Rasa have Kledopashoshana property and correct vitiated Kleda. Katu Rasa and Tikta Rasa, Laghu, Ruksha, Ushna, and Tikshna Guna, Deepana, Pachana and Lekhana properties do Aampachan and also remove Sanga from Srotasa and do Srotomukha Vishodhana. Madhura Rasa and Madhura Vipaka work as Rasayana. Rasayana give strength to vitiated Twak, Rakta, Mamsa and Lasika, work as a Naimittika Rasayana, enhances the nature of relief & stop the recurrences.

In Kushtha especially in Vicharchika External application is very much important. Effect of Ekvinshatika Tail is similar to Ekavinshatika Guggulu.

CONCLUSION: Vicharchika is stated as a Kshudrakushtha and Sadhya Kushtha by all Acharya, but Kushtha is one among Ashta Mahagada. So, it is difficult to cure. It is seen at any age but frequently in young age. The poor and lower middle class people are more prone to the disease Vicharchika which gets aggravated in winter season. Now a day junk food, irregularity in food taking, suppression of natural urges and use of cosmetics and other chemicals, polluted environment, stressful life and emotional disturbances definitely play a major role in manifestation of Vicharchika. Excessive intakes of Santarpaka Nidana cause Agni Dushti and play an important role in manifestation of Kushtha. Hands and Feets (Pani-Pada) are the main culprit of the

disease. After obtaining the results, both groups show statistically highly significant results on the symptoms *Kandu, Pidika, Vaivarnya, Srava* and *Daha*. But Group A shows better percentage of relief in cardinal symptoms as compare to Group B. By applying unpaired 't' test, it can be concluded that the efficacy of both groups are equal. Vicharchika has tendency to recurrence. So, it was advisable to continue treatment for long time in addition of Panchakarma therapy.

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