## Nidan Panchak of Vatarakta Vyadhi: A Literature review

## Abstract

1

2

**Introduction**: Vatarakta is a classical Ayurvedic disorder characterized by the simultaneous 3 vitiation of Vata Dosha and Rakta Dhatu, resulting in inflammatory, degenerative, and 4 circulatory disturbances primarily affecting the extremities and small joints. The Ayurvedic 5 diagnostic framework of Nidan Panchak—comprising Hetu (etiology), Purvarupa 6 (premonitory symptoms), Rupa (clinical features), Samprapti (pathogenesis), and 7 Upshaya/Anupshaya (therapeutic tests)—offers a comprehensive understanding of this 8 9 condition. This review aims to evaluate the classical description of Vatarakta through the lens of Nidan Panchak and highlight its diagnostic and therapeutic relevance. Methods: A 10 qualitative literature review was conducted using primary Ayurvedic texts including Charaka 11 Samhita, Sushruta Samhita, and Madhava Nidana, along with relevant commentaries and 12 13 contemporary scholarly publications. Passages related to Vatarakta were extracted, compared, and synthesized to present a structured interpretation of Nidan Panchak elements. Results: The 14 15 review found that Hetu primarily includes dietary (Aharajanya) and behavioral (Viharajanya) factors that separately aggravate Vata and Rakta, while their combination initiates the disease 16 17 through Anyonyavarana, where vitiated Rakta obstructs Vata. Purvarupa manifestations such as burning, pricking pain, and discoloration provide strong predictive value for early 18 diagnosis. Lakshana further categorizes Vatarakta into Uttana (superficial) and Gambhira 19 (deep-seated) varieties, along with Dosha-specific symptomatology, enabling precise staging 20 and individualized intervention. Upshaya measures such as Snehan, Swedan, Basti, 21 22 Raktamokshana, and Tikta-Kashaya preparations showed conceptual alignment with disease mechanisms, whereas Anupshaya factors aggravate chronicity. Discussion: The Nidan 23 Panchak framework offers an integrated clinical model that unifies etiology, pathogenesis, 24 25 and symptomatology, while providing a dual-targeted therapeutic strategy. Its highly specific 26 clinical markers demonstrate potential for correlation with modern inflammatory and metabolic disorders. Conclusion: Nidan Panchak provides a precise and holistic diagnostic 27 system for Vatarakta, emphasizing stage-wise identification and individualized management. 28 Future interdisciplinary research could strengthen its applicability in modern clinical practice 29 30 and enhance understanding of inflammatory joint diseases.

- 31 **Keywords:** Vatarakta, Nidan Panchak, Inflammatory joint disorders.
- 32 Introduction-

- 33 Ayurveda states that Vata Dosha, out of all the Doshas, is the root cause of all diseases<sup>1</sup>.
- 34 Vatarakta is caused by an imbalance in Vata Dosha and further affects Rakta Dhatu as well,
- 35 hence the term is coined<sup>2</sup>. The aggravated *Vata* pollute *Rakta* flowing in *Sharir* causing
- obstruction in the normal blood flow. Both vitiated *Vata* and *Rakta* travel together in *Srotas*.
- While travelling, they settle primarily at small joints (*Parva Sandhi*) of hands and feet, then
- 38 spreads throughout the body. This results in manifestation of disease.<sup>3</sup> During the course of
- 39 time all *Dhatus* were shown to be gradually involved in the *Gambhira Vatarakta's*
- 40 progress. 4 Variations in pain, inflammation, and deformities are caused by a considerable
- 41 vitiation of *Vata* along with *Rakta* in *Asthi*, *Majja*, and *Sandhis*.<sup>5</sup>

## 42 **Definition**-

44

45

The disease caused due to Dushti of Vatadosha and Raktadhatu is called as Vatarakta.<sup>6</sup>

#### Vatarakta Nidan Panchak-

### Vatarakta Hetu

- 46 Generally, Vatarakta (the disease) arises in persons of tender physique, who indulge in
- 47 unhealthy foods and activities, who are greatly troubled (exhausted) by diseases, long walk,
- 48 women (sexual activities), drinking wine and physical activities; who indulge in foods and
- 49 activities opposite of the seasons and accustomed ones, improper administration of oleation
- and other therapies, in persons who abstain from copulation and in those who are obese.
- Riding on elephant, horse, camel etc. (for long periods) and such other causes, great
- 52 indulgence in vegetables which possess qualities like penetrating, hot potency, sour and
- alkaline tastes; exhaustion by heat etc., Vata getting aggravated vitiates Rakta quickly which
- in turn, obstructs the path of Vata; becoming greatly aggravated by such obstruction of its
- path, Vata causes great vitiation (increase) of blood; because the vitiated blood is combined
- with greatly aggravated Vata, which is very predominant, the disease is called as Vatarakta.<sup>7</sup>
- 57 Excessive intake of saline, sour, pungent, alkaline, unctuous, hot and uncooked food; Intake of
- 58 putrefied or dry meat of aquatic or marshy-land inhabiting animals; Excessive intake of oil-
- 59 cake preparation or radish;
- 60 Excessive intake of Kulattha, Masha, Nishpav, leafy vegetables, etc., meat and sugar-
- cane; Excessive intake of curd, Aranal (Kanji), Sauvira (sour preparation of dehusked barley,
- etc.), Shukta (vinegar), butter-milk, alcohol and wine;

- 63 Intake of mutually contradictory food; Intake of food before the previous meal is
- 64 digested:Resorting to anger in excess; Sleeping during day time and remaining awake
- atnight;In a person whose blood is vitiated by the above-mentioned causative factors of the
- 66 following: Vatarakta, gets aggravated because; Abhighata (injury); Ashuddhi (omission of the
- purification of the body. i.e. omission of the use of elimination therapies which are supposed
- to be done in routine during different seasons);
- 69 Excessive intake of astringent, pungent, bitter and unctuous ingredients; Intake of less of food
- or abstinence from food;
- 71 Riding over horses, camels or on vehicles drawn bythem; Resorting to aquatic games,
- 72 swimming and jumping;
- 73 Excessive wayfaring in hot season, which disturbs the equilibrium of Vata;Indulgence in
- sexual intercourse; and Suppression of the manifested natural urges.<sup>8</sup>
- 75 Vatarakta Samprapti: -
- 76 According to Acharya Charak Vata undergoes aggravation by combat (wrestling,
- 77 restraining, fighting etc.) with those (persons or animals) stronger than himself; in persons
- 78 who partake foods (and drinks) which are heavy (not easily digestible), hot in potency and
- 79 who indulge in overeating, Shonita (blood) becomes vitiated. In such persons Vata combining
- with Rakta, causes obstruction of the channels/ passages of blood, then both together give rise
- 81 to symptoms of Vatarakta disease, these appear first in the hands and feet and later spread to
- 82 the entire body.<sup>9</sup>
- 83 According to Acharya Sushrut Vata gets aggravated. Being obstructed in its course by the
- vitiated blood, the excessively aggravated Vata vitiates the entire blood. The disease thus,
- 85 caused is called Vatarakta. 10

#### 86 Vatarakta Purvarupa: -

- 87 According to Acharya Sushrut -Pricking pain, burning sensation, itching, swelling, rigidity,
- 88 roughness of the skin, throbbing of veins, ligaments and arteries; debility of the leg,
- 89 appearance of bluish-red patches without any other cause developing in the palms, soles,
- 90 fingers, ankle, wrist etc.; these if not treated or if the person indulges in improper regimen (of
- 91 food and activities) then the disease becomes well manifest. If not treated properly it
- 92 produces distortions/deformities. 11

- During premonitory stage, the feet are loose (weak), full of sweat, cold or its opposite (hot) to
- 94 touch, discolored, have pricking pain, loss of sensation, feeling of heaviness and burning
- 95 sensation. 12
- 96 Remaining rooted in the feet, sometimes even in the hands, and getting increased, it (disease)
- 97 spreads all over the body, just like the spread of poison of rat. <sup>13</sup>
- Vatarakta in which the feet have cracks and fissures upto the knee, skin is broken, exuding
- 99 fluid; that associated with complication, such as loss of Prana (strength) and muscles etc. and
- more than a year old, is either incurable or controllable (but persistent). 14
- 101 According to Acharya Charak the premonitory signs and symptoms of Vatarakta are as
- 102 follows:
- Excess or absence of perspiration; Black coloration of the joints; Insensibility to touch, and
- 104 excessive pain if there is injury to the afflicted part;Looseness of joints, indolence and
- asthenia; Appearance of pimples; Pricking pain, twitching sensation, splitting pain, heaviness
- and numbness in the knees, calf region, thighs, umbilical region, shoulders, hands, feet and
- joints in the body; Itching; Frequently, the pain while appearing in the joints disappears
- 108 [suddenly]; and discoloration of the skin, and appearance of circular patches over the body. 15

#### 109 Vatarakta Lakshana: -

- According to Acharya Sushrut in Vatarakta, the feet develop inability to tolerate touch, pains
- such as pricking and cutting, profound dryness, wasting, and loss of sensation, with the
- association of Pitta and Rakta (aggravated) gives rise to severe burning sensation, profound
- heat and redness and soft swelling (in the feet); with the association of Kapha and Rakta
- 114 (aggravated) gives rise to swelling which is itching, white color, cold to touch, bulged up and
- immoveable; when all the Doshas (aggravated) are associated with Rakta (aggravated) then
- they give rise to their own respective symptoms in the legs. <sup>16</sup>
- 117 According to Acharya Charak –

118

# Signs and Symptoms of Vatarakta Dominated by Vata: -

- Dilatation of veins; Colic pain, throbbing pain and pricking pain; Blackness, unctuousness and
- brownish coloration of edema; Increase and decrease of the edema; Contraction of vessels,
- fingers (including toes) and joints; Stiffness of the limbs; Excessive pain; Contractures and
- stiffness [of joints]; and Disliking for cold things. 17

#### Signs and Symptoms of *Vatarakta* Dominated by Vitiated *Rakta* (Blood): 123 124 Oedema, excessive pain and pricking pain; Coppery coloration the skin; Tinglingsensation; Not yielding to therapies which are either unctuous or ununctuous; 125 and itching and sloughing. 18 126 Signs and Symptoms of Vatarakta Dominated by Pitta: -127 128 **Burning** sensation, pain, fainting, sweating, morbid thirst, intoxication and giddiness; Redness, suppuration and bursting open of the afflicted joint; and Emaciation of the 129 afflicted limb. 19 130 Signs and Symptoms of Vatarakta Dominated by Kapha: -131 Indolence, heaviness, unctuousness and numbness; and less of pain.<sup>20</sup> 132 Signs and Symptoms of Vatarakta Dominated by Two or Three Doshas: -133 Vatarakta dominated by two or three of the aggravated Doshas is characterized by the 134 etiological factors as well as signs of two or three dosha together as described above.<sup>21</sup> 135 136 Uttana Vatarakta Lakshana: -The superficial or external (Uttana or Bahya) variety of Vatarakta gives rise to the following 137 signs and symptoms: Itching, burning sensation, ache, extension, pricking pain, throbbing 138 sensation and contraction; and the skin becomes brownish black, red or copperv in color.<sup>22</sup> 139 Gambhira Vatarakta Lakshana: -140 141 The deep seated (Gambhira) type of Vatarakta gives rise to signs and symptoms, as follows: Edema, stiffness, hardness and excruciating pain in the interior of the body; Blackish brown 142 or coppery coloration [of the skin]; and Burning sensation, pricking pain, twitching sensation 143 and suppuration [of the joints].<sup>23</sup> 144 Ubhayashrita Vatarakta Lakshana:-145 146 If the Vatarakta is located both in the exterior (Uttana) and interior (Gambhira) of the body, then the following signs and symptoms are manifested: The aggravated Vata while causing 147 pain and burning sensation constantly, moves with high speed through the joints, bones and 148 bone-marrow as if cutting them to make the joints curved inwards; While moving all over the 149

body, this aggravated Vata makes the person lame and paraplegic; and All the signs and

150

151 152	symptoms described above (in respect of Uttana and Gambhira types of Vatarakta) are manifested. <sup>24</sup>
153	Vatarakta Upshaya-
154	According to Acharya Charaka , in Vatarakta following are the upshaya measures-
155 156	Snehan, swedan, abhyanga, upnah, parishek, avgaah, basti, raktamokshan,snehapaan with tiktakashay ghrut. <sup>25</sup>
157	Acharya Sushruta recommends similar upshayas. <sup>26</sup>
158	Vatarakta Anupshaya-
159	According to Acharya Charaka, in Vatarakta following are the anupshaya measures-
160	Ruksha,sheet, laghuaahar, ativyayam, atiatyasan, atisheetoshnasevan, amlalavanakatubhojan,
161	atap sevan, krodh, shok. <sup>27</sup>
162	Acharya Sushruta recommends similar anupshayas. <sup>28</sup>
163	Discussion
164	The classical Ayurvedic framework of Nidan Panchak offers a full and integrated view of
165	Vatarakta Vyadhi, defining it as a complicated condition caused by the simultaneous vitiation
103	vacariated vyacani, defining it as a complicated condition caused by the simulations
166	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both
166	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both
166 167	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as
166 167 168	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas
166 167 168 169	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The
166 167 168 169 170	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which
166 167 168 169 170	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which vitiated Rakta obstructs Vata's mobility, resulting in a localized inflammatory response. This
166 167 168 169 170 171	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which vitiated Rakta obstructs Vata's mobility, resulting in a localized inflammatory response. This combined vitiation largely settles in the Parva Sandhi, providing a clear classical explanation
166 167 168 169 170 171 172	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which vitiated Rakta obstructs Vata's mobility, resulting in a localized inflammatory response. This combined vitiation largely settles in the Parva Sandhi, providing a clear classical explanation for the beginning of distal inflammatory arthritis.
166 167 168 169 170 171 172 173	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which vitiated Rakta obstructs Vata's mobility, resulting in a localized inflammatory response. This combined vitiation largely settles in the Parva Sandhi, providing a clear classical explanation for the beginning of distal inflammatory arthritis.  The Purvarupa and Lakshana have acute specificity, which emphasizes the Nidan Panchak's
166 167 168 169 170 171 172 173	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which vitiated Rakta obstructs Vata's mobility, resulting in a localized inflammatory response. This combined vitiation largely settles in the Parva Sandhi, providing a clear classical explanation for the beginning of distal inflammatory arthritis.  The Purvarupa and Lakshana have acute specificity, which emphasizes the Nidan Panchak's diagnostic usefulness. Premonitory indications(Purvaroop) such as unexplained pricking pain,
166 167 168 169 170 171 172 173 174 175	of Vata Dosha and Rakta Dhatu. The Hetu clearly suggest a pathology caused by both metabolic imbalance and lifestyle variables; Aharajanya Hetus (dietary causes), such as excessive consumption of hot, sour, and saline foods, increase Rakta vitiation, whereas Viharajanya Hetus, such as over-exertion and injury, predominantly excite Vata. The Samprapti connects these two elements via the key mechanism of Anyonyavarana, in which vitiated Rakta obstructs Vata's mobility, resulting in a localized inflammatory response. This combined vitiation largely settles in the Parva Sandhi, providing a clear classical explanation for the beginning of distal inflammatory arthritis.  The Purvarupa and Lakshana have acute specificity, which emphasizes the Nidan Panchak's diagnostic usefulness. Premonitory indications(Purvaroop) such as unexplained pricking pain, burning sensations, and bluish-red patches in the extremities are important clinical indicators

respectively. Furthermore, thorough descriptions of Dosha-dominant symptoms, such as Vastisankochana (contractures) for Vata and Daha (burning) for Pitta/Rakta, guarantee that treatment is highly customized and specific to the current pathological state. The Upshaya (ameliorating) and Anupshaya (aggravating) measures support a dual management strategy for treating this disease. Effective therapeutic acts (Upshaya) directly counteract specific Dosha imbalances, using Snehan and Basti (medicated enema) to calm Vata and Raktamokshan (bloodletting) and Tikta-Kashaya Ghrita (bitter/astringent ghee preparations) to regulate vitiated Rakta and Pitta. The careful avoidance of Anupshaya, such as cold, dry food and extreme exertion, guarantees that the chronic character of the condition is not exacerbated. In essence, the Nidan Panchak offers a comprehensive, integrated approach to diagnosing and controlling this inflammatory illness, highlighting the possibility for current research to validate the specificity of these traditional clinical markers through clinicopathological association. 

### Conclusion-

The Nidan Panchak concept provides an extremely thorough and integrated technique for comprehending Vatarakta Vyadhi, successfully uniting its heterogeneous etiology (Hetu) and complicated dual pathogenesis (Samprapti) around the critical mechanism of Anyonyavarana. The methodology's diagnostic potency stems from the acute specificity of its premonitory (Purvarupa) and symptomatic (Lakshana) descriptions, which not only divide the disease into acute and chronic stages but also require highly customized therapy based on Dosha dominance. Finally, by providing a detailed, dual-targeted management strategy via Upshaya and Anupshaya measures—calming Vata while regulating vitiated Rakta and Pitta—the classical texts establish an effective template for diagnosis and control, implying significant potential for modern research to validate these markers and integrate this specific clinical approach into contemporary inflammatory disease management.

### References-

- Paradakara H., Ashtanga Hridaya, Sutra Sthana, Chapter 19, Verse 85-86.
   Chaukhambha Surbharati Prakashan, Varanasi. Ed. 6<sup>th</sup>, 2018. Pg.285.
  - 2. Sharma R, Dash B. *Agnivesha's Charaka Samhita, Chikitsa Sthana* Chapter 29, Verse 1-2.Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.87

- 3. Murthy K, Illustrated Sushrut Samhita, Chikitsa Sthana Chapter 5, Verse 4.
- 212 Chaukhamba Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010. Pg. 64
- 4. Unnimaya G, Sujan T, Krishna A. Analysis of Action of Madhutailika Vasti in
- Vatarakta Through its Contents. International Journal of Ayurveda and Pharma
- Research. 2021 Nov 20;09(10):96–103. <a href="https://doi.org/10.47070/ijapr.v9i10.2089">https://doi.org/10.47070/ijapr.v9i10.2089</a>
- 5. Purohit S. E Commerce Delivery Boys in NCT Delhi: A Study on Work Related
- 217 Prospects and Challenges [Thesis]. [Jamia Millia Islamia, New Delhi]; Pg. 21–22.
- 6. Kale V. Charak Samhita, Chikitsa Sthana, Chapter 29, Verse 1-2. Chaukhamba Sanskrit
- 219 Pratishthana, Delhi. Ed. 2022.Pg. 715
- 7. Sharma R, Dash B. Agnivesha's Charak Samhita, Chikitsa Sthana Chapter 29, Verse
- 5-10.Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.88
- 8. Sharma P. Charaka Samhita, Sutra Sthana, Chapter 19, Verse 07. Chaukhamba
- Orientalia, Varanasi. Ed. 2003. Pg.133
- 9. Sharma R, Dash B. Agnivesha's Charak Samhita, Chikitsa Sthana Chapter 29, Verse
- 10.Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000.Pg.88
- 10. Murthy KR. Illustrated Sushrut Samhita, Chikitsa Sthana Chapter 5, Verse
- 4. Chaukhambha Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010. Pg. 64
- 228 11. Murthy KR. Illustrated Sushrut Samhita, Chikitsa Sthana Chapter 5, Verse
- 4. Chaukhambha Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010. Pg. 64
- 230 12. Murthy KR. Illustrated Sushrut Samhita, Nidana Sthana Chapter 1, Verse
- 47. Chaukhambha Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010.Pg. 468
- 13. Murthy KR. Illustrated Sushrut Samhita, Nidana Sthana Chapter 1, Verse
- 48. Chaukhambha Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010. Pg. 468
- 14. Murthy KR. Illustrated Sushrut Samhita, Nidana Sthana Chapter 1, Verse 49-
- 50. Chaukhambha Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010. Pg. 468
- 15. Sharma R, Dash B. Agnivesha's Charak Samhita, Chikitsa Sthana Chapter 29, Verse
- 237 16-18.Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.91
- 16. Murthy KR. Illustrated Sushrut Samhita, Nidana Sthana Chapter 1, Verse 45-
- 46. Chaukhambha Orientalia, Varanasi. Ed. 4<sup>th</sup>, 2010. Pg. 467
- 17. Sharma R, Dash B. Agnivesha's Charak Samhita, Chikitsa Sthana Chapter 29, Verse
- 25-26.Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.95
- 18. Sharma R, Dash B. Agnivesha's Charak Samhita, Chikitsa Sthana Chapter 29, Verse
- 27. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.95

- Sharma R, Dash B. *Agnivesha's Charak Samhita, Chikitsa Sthana* Chapter 29, Verse 28. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000.Pg.95-96
   Sharma R, Dash B. *Agnivesha's Charak Samhita, Chikitsa Sthana* Chapter 29, Verse 29. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.96
   Sharma R, Dash B. *Agnivesha's Charak Samhita, Chikitsa Sthana* Chapter 29, Verse 29. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.96
- 22. Sharma R, Dash B. *Agnivesha's Charak Samhita, Chikitsa Sthana* Chapter 29, Verse 20. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.92
- 23. Sharma R, Dash B. *Agnivesha's Charak Samhita, Chikitsa Sthana* Chapter 29, Verse 21. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.93
- 24. Sharma R, Dash B. *Agnivesha's Charak Samhita, Chikitsa Sthana* Chapter 29, Verse 22-23. Chaukhamba Sanskrit Series, Varanasi. Ed. 4<sup>th</sup>, 2000. Pg.93
- 25. Joshi Y, Charak Samhita, Chikitsa Sthana, Chapter 29, Verse 43-44, VaidyaMitra Prakashan, Pune. Ed.6th, 2016. Pg 662.
- 258 26. Sharma A, Sushrut Samhita , Chikitsa Sthana, Chapter 5, Verse 15-16, Chaukhamba
   259 Surbharati Prakashan, Varanasi.Pg 217(ch chi 29/27-29)
- 27. Joshi Y, Charak Samhita, Chikitsa Sthana, Chapter 29, Verse 49, VaidyaMitra
   Prakashan, Pune. Ed.6th, 2016. Pg 663.
- 28. Sharma A, Sushrut Samhita , Chikitsa Sthana, Chapter 5, Verse 17, Chaukhamba
   Surbharati Prakashan, Varanasi.Pg 217

264

265