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## Management of Vicharchika (Eczema) an Ayurvedic Approach-A Case Report

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### Abstract

**Background:** In *Ayurveda*, all types of *Kustha* are believed to have a *Tridoshaja* origin, and they are classified into two categories: *Mahakustha* and *Kshudra Kustha*. *Vicharchika* is a type of *Kshudra Kustha*, characterized by symptoms such as *Kandu* (itching), *Srava* (discharge), *Pidaka* (vesicles), and *Shyava Varnata* (skin discoloration). In modern medical terms, *Vicharchika* closely resembles eczema and is considered a form of dermatitis, where the dermis becomes inflamed, often referred to as Atopic Dermatitis, characterized by pruritis, burning, oozing, papules, vesicles, dryness, scaling, discoloration and skin lichenification. *Vicharchika* affects psychological health causes anxiety, depression, disturbs the person's routine thus interrupts the ability to function normally and lead to social isolation. In classical text of *Ayurveda Shodhana* and *Shamana* therapy is explained best line of treatment for *Kushta*. Among *Shodhana* therapy *Virechana karma* is best purificatory therapy in *Vicharchika*.

**Material & Methods:** A case of 51 year old female patient, presented with excessive *Kandu* (itching), *Rukshata* (dryness), small eruptions, *Vedana* (pain), *Raji* (thick skin), *Vaivarnya* (discoloration) on her *Hasta Pradesh* (hands), *Ubhaya Pad Pradesh* (toes) and thigh region since 7 years. She had been taking oral anti-allergic medications for pruritus on and off but became frustrated with the frequent relapses. The condition was successfully managed through an *Ayurvedic* approach.

**Results:** The significant changes were observed after *Virechana karma* which was followed by *Shamana Aushadhi* for 3 months. So the patient showed much improvement in characteristics features of *Vicharchika*, hence it's proved *Shodhana Karma* followed by *Shamana Aushadi* is an effective treatment in *Vicharchika*.

**Discussion:** Favorable outcome was observed due to the *Kapha-Pitta* balancing, *Tridosha*-modulating, *Kusthaghana*, *Shothahara*, and *Kandughana* properties of the medications used in *Shodhana* and *Shamana* therapies.

**Conclusion:** Significant results were observed following *Virechana Karma* and *Shamana Chikitsa*, with no adverse side effects. This case study highlights that both *Shodhana (Virechana Karma)* and *Shamana Chikitsa* are safe and effective in treating *Vicharchika*.

**Keywords-** *Kushta*, *Vicharchika*, *Eczema*, *Shodhana*, *Shamana*, *Virechana*.

## Introduction:

The skin, as the largest organ and protective covering of the body, is an extraordinary structure.<sup>[1]</sup> It reflects an individual's overall health and well-being, and is one of the five sense organs.<sup>[2]</sup> Humans rely on this 1.7m<sup>2</sup> barrier to separate the body's vulnerable interior from the potentially harmful external environment.<sup>[3]</sup> Skin diseases are becoming more prevalent, impacting individuals of all ages, from children to the elderly. These conditions can lead to discomfort, disfigurement, disability, and, in rare instances, even death.<sup>[4]</sup> and their incidence is 2-3 percent of all medical problems seen in practice.<sup>[5]</sup> In *Ayurveda*, skin diseases are classified under the category of *Kustha* and are considered as a *Rakata Pradoshaj Vikar*.<sup>[6]</sup> and *Virechana Karma is described in the Ayurvedic Samhitas under Kustha Chikitsa*.<sup>[7]</sup> In modern science various facilities, new techniques and upgraded technologies for treatment are available, still many diseases are in progression state and *Vicharchika* is among one of them. Hence the main treatment in *Ayurveda* for *Vicharchika* is *Shodhana* i.e *Virechana* is indicated which eliminated vitiated *Dosha*, then followed by administration of *Shamana* drug.

## Case Study

### History of Present Illness:

A 51-year-old female patient, working as a staff nurse, has been suffering from ongoing issues of excessive itching, dryness (*Rukshata*), small eruptions, pain (*Vedana*), redness (*Raji*), and discoloration (*Vaivarnya*) on her hands (*Hasta Pradesh*), toes (*Ubhaya Pad Pradesh*), and thigh area. Despite using oral anti-allergic medications intermittently for relief, she got frustrated and fatigued by the recurrent nature of the condition and visited ayurvedic hospital for better solution.

## Patient's other Information:

- Past history- No any major illness/no previous operation done/no h/o any trauma.
- Family History- No Relevant Family history.
- Drug history- History of using anti- allergic drugs for pruritis on and off
- Personal history-Diet (Mixed), Dietary Habits- Three meals/day, Appetite-Normal, Sleep-Disturbed due to itching, Bowel habits -Regular, Addiction-She takes tea 5-6 times a day.

## Systemic Examinations

- On an Integumentary examination, distribution of the skin eruptions was over hands, toes and thigh area. Type of lesion was vesicles and scaly lesions. The colour was blackish associated with rough surface, lichenification and no discharge.
- Respiratory System- Bilateral air entry equal. No abnormality detected.
- Cardiovascular system- S1, S2 normal.
- Per-Abdomen- soft, non-tender, non-distended and no organomegaly detected.

## Asthavidhapariksha:

- *Nadi- Kaphavataj*
- *Mala- 2times/day*, bowel habit was regular.
- *Mutra- 5-6 times/day*
- *Jihva- Sama*
- *Shabda-Prakrita*
- *Sparsha- Anushna*
- *Drika-Prakrita*
- *Aakriti-Madhyam*

**Vital Data:** Blood pressure- 130/90mm of Hg, Pulse: 78/min, Temperature-98.6 °F, Respiratory rate- 14/min

**Diagnostic Assessment:** All routine Laboratory investigations were within a normal range (CBC, FBS, LFT and RFT). The patient was not willing for tissue biopsy due to unaffordable cost and fear.

Therefore, based on clinical presentation

**Subjective Criteria:**

**Table-1** Subjective Parameters :

| Sr. No | Parameter                 | Scoring Criteria   | Score |
|--------|---------------------------|--|-------|
| 1.     | <i>Kandu</i><br>(Itching) | No itching   | 0     |
|        |                           | Mild itching not disturbing normal activity                | 1     |
|        |                           | Occasional itching disturbs normal activity                | 2     |
|        |                           | Itching is present continuously and even disturbing sleep. | 3     |
| 2.     | <i>Daha</i><br>(Burning)  | No burning sensation                                       | 0     |
|        |                           | Mild type of burning not disturbing normal activity        | 1     |
|        |                           | Occasionally burning disturbing normal activity            | 2     |
|        |                           | Burning present continuously & even disturbing sleep       | 3     |
| 3.     | <i>Strava</i><br>(oozing) | No discharge   | 0     |
|        |                           | Occasional discharge after itching.                        | 1     |
|        |                           | Occasional oozing without itching.                         | 2     |
|        |                           | Excessive oozing making clothes wet                        | 3     |

| Sr. No | Parameter   | Scoring Criteria                                | Score |
|--------|---|---|-------|
| 4.     | <i>Rukshata</i><br>(Dryness)                      | No dryness                                      | 0     |
|        |   | Dryness with rough skin ( <i>Ruksha</i> )       | 1     |
|        |   | Dryness with scaling ( <i>Khara</i> )           | 2     |
|        |   | Dryness with cracking ( <i>Parusha</i> )        | 3     |
| 5.     | <i>Pidikotpatti</i><br>(Eruption)                 | No eruption in the lesion                       | 0     |
|        |   | Scanty eruptions in few lesions                 | 1     |
|        |   | Scanty eruptions in at least half of the lesion | 2     |
|        |   | All the lesions full of eruption                | 3     |
| 6.     | <i>Vaivarnyat</i><br><i>a</i><br>(Discolouration) | Nearly normal skin colour                       | 0     |
|        |   | Brownish red discoloration                      | 1     |
|        |   | Blackish red discoloration                      | 2     |
|        |   | Blackish discoloration                          | 3     |
| 7.     | <i>Rajii</i><br>(Thickening of skin)              | No thickening of skin                           | 0     |
|        |   | Thickening of skin but no criss-cross marking   | 1     |
|        |   | Thickening with criss-cross marking             | 2     |
|        |   | Severe lichenification                          | 3     |

**Blood investigations :**

**Table-2** Laboratory investigations :

All the blood tests were within normal limits.

| Sr. No. | Test                | Result                               |
|---------|---------------------|--------------------------------------|
| 1       | Hematological Test  | Hb% -10.9gm%                         |
|         |                     | TLC-7/cumm                           |
|         |                     | DLC- Gran%- 58.1, Lymph%- 35, mid%-4 |
|         |                     | ESR- 10mm/1 <sup>st</sup>            |
| 2       | Fasting Blood Sugar | 77mg/dl                              |
| 3       | Renal Function Test | Blood Urea- 22mg/dl                  |
|         |                     | S. Creatinine- 1.0mg/dl              |
| 4       | Liver Function Test | S. Bilirubin total - 0.5mg/dl        |
|         |                     | SGOT - 32 U/L                        |
|         |                     | SGPT -25U/L                          |
|         |                     | S. Alkaline Phosphate – 96U/L        |

### Methodology :

#### Patient selection :

The patient has been suffering from severe itching (*Kandu*), dry skin (*Rukshata*), discoloration (*Vaivarnaya*), cracked skin (*Raji*), and pain (*Vedana*) for the past 7 years. She was registered for the current study under IPD No- 2100254 at M.C DAV Hospital, Jalandhar, Punjab, and diagnosed with *Vicharchika* (Eczema) based on her clinical symptoms. The treatment involved a single session of *Virechana Karma*, followed by a 30-day course of *Shaman* drugs.

#### Treatment protocol

The need for *Shodhana* therapy ie *Virechan Karam* was first explained to the patient, with a clear emphasis on the importance of *Virechana Karma* in the treatment of *Kushta*, specifically for

*Vicharchika*. Various Previous scientific studies had shown that *Virechan Karam* plays a crucial role in the elimination of *Pitta Dosha*, as well as balancing *Kapha*, *Vata*, and *Rakta*.

*Pathya-Apathaya* (wholesome and unwholesome diet) was strictly instructed to the patient at the time of *Snehapana* and advised to use warm water, not to suppress natural urges and complete abstinence from sexual activity and avoid day sleep.

Patient was also instructed post procedure activities (*Ashta Pariharya Vishaya*) that should be avoided i.e load speech, chariot travelling, excess walking, sedentary lifestyle and day sleep, wrong intake of food and food intake during digestion etc

#### Management :

First, the patient's consent was obtained, and she was advised to avoid contact with gloves, detergents, soaps, and similar materials.

- ***Virechana Karma*** : Preparation of patient includes *Deepana Pachana*, *Snehapana*, *Sarvanga Abhyanga* and *Sarvanga Svedana* then administration of *Virechana* drug.
- ***Deepana Pachana***: with *Panchakola Churna* in a dose of 3gms three times a day with lukewarm water for 4 days, till *Nirama Lakshana* occurs.
- ***Snehapana***: *Panchatikta Ghrita* was given in increasing doses (Table-3) each morning on an empty stomach for a period of 6 days. The dosage was adjusted based on the patient's *Agni* and *Koshtha*, continuing until the appearance of *Samayak Snigdha Lakshana*.



**Table 3-** Snehapana chart

| Days            | Dose  |
|-----------------|-------|
| 1 <sup>st</sup> | 30ml  |
| 2 <sup>nd</sup> | 70ml  |
| 3 <sup>rd</sup> | 90ml  |
| 4 <sup>th</sup> | 120ml |
| 5 <sup>th</sup> | 160ml |
| 6 <sup>th</sup> | 180ml |

During *Snehapana* patient was advised to take hot water for drinking whole day and to avoid day sleep, exposure to direct wind, sunlight, excessive work and stress etc.

**Sarvanga Abhyanga and Svedana-** Three days gap was given. During these days *Sarvanga Abhyanga* and *Sarvanga Svedana* was carried out, then *Virechana Yoga* was given.

**Diet during VishramKala (After gap of 3 days)** – Diet includes *Jangala Mamsa Rasa*, *Yusha* with *Snigdha*, *Laghu*, *Ushna* quality and *Kapha Avridhikara Aahar*. *Acharya Sushruta* mentioned that on the previous day of *Virechana Laghu Aahar*, *Phalamla* and *Ushnodaka* should be administered.

**Virechana Yoga-** *Triphala Kwath* 100ml was given along with 3gms *Trivrit* and 3gms *DantiChooran*.

Total 15 Vega after administration of *Virechana Yoga*, it was *Kaphanta Virechana* and she felt lightness in whole body.

**Paschat karma-** Specified diet was followed for 5 days and that depends according to the *Shudhi* and known as *Samsarjana Karma*, which includes intake of *Peya*, *Vilepa*, *Mamsarasa* and *Yusha* preparations.

### **Shamana Aushadhi :**

**Table-4 - Shamana Aushadhi and follow-up chart**  
**AfterVirechana** - 1. *Navakashaya* 20ml twice a day was given for 1month.

| First Follow Up  | Second Follow Up                                     |
|--|--|
| 1. <i>Mahamanjishtadi kwath</i> 20 ml three times a day. | 1. <i>Navakashaya</i> 20 ml twice a day.             |
| 2. <i>Arogyavardhini vati</i> 1 tab three times a day.   | 2. <i>Haridra khand</i> 1tsf twice a day.            |
| 3. <i>Gandhak rasayan</i> 1tab twice a day.              | 3. <i>Nimbadi churan</i> 5 gms twice a day.          |
| 4. <i>Navakashaya</i> 20ml twice a day.                  | 4. <i>Panchatikta guggulu ghrita</i> 10 ml at night. |
| 5. <i>Khadirarista</i> 15ml three times a day.           | 5. <i>Khadirashtak kwath</i> 20 ml twice a day.      |

After *Virechana Karma Navakashaya* was given twice a day orally, patient showed marked improvement within one month. Then patient was followed up for two months and above *Shaman Aushadhi* was prescribed, she showed significant relief in the subjective parameters.

**Table-5** Subjective parameters :

| Sr No | Parameter                          | Before treatment | After treatment |
|-------|------------------------------------|------------------|-----------------|
| 1.    | <i>Kandu</i> (Itching)             | 2                | 0               |
| 2.    | <i>Daha</i> (Burning)              | 0                | 0               |
| 3.    | <i>Strava</i> (oozing)             | 0                | 0               |
| 4.    | <i>Rukshata</i> (Dryness)          | 3                | 0               |
| 5.    | <i>Pidikotpatti</i> (Eruption)     | 2                | 1               |
| 6.    | <i>Vaivarnyata</i> (Discoloration) | 3                | 1               |
| 7.    | <i>Rajii</i> (Thickening of skin)  | 1                | 0               |



Figure 1: Showing progress before and after Treatment

### Discussion :

*Kushta* is a *Vyadhi* (Disease) that originates due to vitiation of all the three *Doshas* and involvement of *Dushit Twaka*, *Rakta*, *Mamsa Dhatu* and *Jaliya Ansha* present in the body. *Kushta Roga* has specific *Nidana* so the first step of *Chikitsa* is *Nidana Parivarjan*, the patient is Staff nurse, had regular contact with gloves, sanitizer and other materials etc that's the one cause of hands eczema, during treatment patient strictly avoid contact with gloves. On the basis of symptoms the present case study is taken and considered as *Kshudra Kushta* i.e. *Vicharchika* with *Pitta Dosha Pradhanya* and *Kapha Dosha Anubandha*. A specific procedure for *Pitta Dosha* is *Virechana Karma* which moves vitiated *Dosha* towards *Adhobhaga*<sup>[8]</sup> and expels from *Guda* and also acts on vitiated *Kapha Dosha*. In this case study *Virechana Karma* was given and drugs *Trivrit Churan*, *Danti Churan* and *Triphala Kwath* was selected<sup>[9]</sup>. *Trivrit Churan* has *Madhura*, *Kashaya*, *Tikta Rasa*, *Katu Vipaka* and *Ushna Virya* so helps to pacify *Pitta Dosha* with *Kushtaghan*,

*Krimighan* and *Rakta Shodhana* properties. *Danti Churan* has *Katu Rasa*, *Tiksan Guna*, *Laghu Virya*, *Usna Vipaka* and has *Kaphahara*, *Vidahara* and *Shodhan* properties. *Triphala Churan* acts as *Dipana*, *Anulomana*, *Rasayana*, *Tridosahara*, *Bhedaka* and enriched with, *Katu Madhura*, *Ruksha*, *Ushna*, *Amla* etc properties. Thus through *Virechana Karma* pacified *Pitta* and *Kapha Dosha* and itching, dryness, eruption and discoloration also reduced. After *Shodhan* therapy, orally *Shaman Aushadhi* was given as follows: *Navakashya*<sup>[10]</sup> is composed of *Triphla*, *Kutaki*, *Neem*, *Manjishta*, *Haldi* etc and has *Tikta*, *Ruksha*, *Laghu*, *Sita*, *Katu Dravayas* and *Tridoshara*, *Kapha-Pittahara*, *Krimihara* and *Rakta Shodhak*, antifungal properties. *Mahamanjishtadi Kwath*<sup>[11]</sup> contents are *Manjishta*, *Triphla*, *Mustak*, *Gudhuchi*, *Kutha*, *Nimbi*, *Khadira*, *Chandana* etc and has *Guru*, *Ruksha Guna*, *Tikta*, *Kashaya Rasa*, *Madhura Vipaka* and *Usna Virya Dravya*. It has effect on *Tridosha*, balances *Kapha-Pitta* and recommended for all skin diseases. *Arogyavardhini Vati* is composed of *Shudha Parad*, *Gandhaka*, *Shilajit*, *Lauha*, *Tamra Bhasam*, *Triphala Churan*, *Kutaki*, *Chitrak Moola* and *Bhavita* with *Nimba Patra Swaras* and in *Kustha Rogadhikara* it's written. *Tikta Rasa* is recommended in *Kushta* disorders<sup>[12]</sup>. Hence it works as *Kaphahar*, *Kledhara*, *Lekhana*, *Bhedana* and *Yakrituttajak* and has capacity to normalize *Bhootagni* and *Dhatvagni*. It acts on diseases like skin problems, *Kandu*, psoriasis and eczema. *Gandhak Rasayan*<sup>[13]</sup> contains *Shudha Gandhak* and *Bhavana* of different *Kashaya Swaras* like *Go-Dhugadh*, *Guduchi Swaras*, *Adarak Swaras* etc and it's highly recommended in *Kushtha Vikar*. It contains *Tikta*, *Kashaya Rasa*,

*Usna Virya* and *Katu Vipaka Dravyas*. It has effect on *Tridosha Kushtahara*, *Kanduhara* anti-bacterial, anti-pruritis and anti-inflammatory, anti-fungal properties and a blood purifier. *Khadirarista*<sup>[14]</sup> has ingredients i.e. *Khadira*, *Devdaru*, *Bakuchi*, *Daruharidra*, *Triphala* and enriched with *Tikta*, *Kashaya Rasa*, *Laghu*, *Shita*, *Ruksha Katu Dravays*. Its properties are *Kapha Pitta Shamaka*, *Tridoshara*, *Kushtaghana*, *Shothahara*, *Krimihara*, anti-bacterial, anti-oxidant and antimicrobial. *Haridra Khand*<sup>[15]</sup> is a combination of *Haridra*, *Triphala*, *Trikatu*, *Kutaki*, *Nagarmotha*, *Nishotha*, *Chitrak*, *Ela*, *Dalchini*, *Jeera*, *Dhaniya*, *Lauha Abharak Bhasam* etc, which are enriched with *Tikta*, *Katu*, *Ruksha*, *Laghu*, *Usna*, *Katu Dravays* and has *Kapha-Pitta Shamaka*, *Tridosahara*, *Dipana*, *Chedana*, *Bhedan*, *Anulomana* properties. *Nimbadi Churan*<sup>[16]</sup> contains *Tikta*, *Kasaya Rasa*, *Laghu*, *Ruksha Guna*, *Sita Virya*, *Katu Vipaka Dravya* and *Kapha-Pittanasaka*, *Dipana*, *Shothara*, *Raktapittanasak* properties. *Panchatikta Guggulu Ghrita*<sup>[17]</sup> is the potent drug for the treatment of *Kushta Roga*. The contents are *Nimba*, *Guduchi*, *Patola*, *Kantakari*, *Vasa*. It has *Tikta*, *Kasaya*, *Laghu*, *Ruksha*, *Sita*, *Katu Dravayas* and *Pitta-Shamaka*, *Kapha-Vata samaka*, *Dipana-Pacana* properties. It's beneficial in skin disorders, acne, anti-bacterial and also an immunomodulator. *Khadirashtak Kwath*<sup>[18]</sup> – its composed of *Khadira*, *Amla*, *Triphala*, *Neem*, *Patola*, *Vasa*, *Guduchi* and has *Tikta*, *Kashaya Rasa*, *Laghu*, *Ruksha Guna*, *Anushna Virya* and *Madhura Vipaka Dravyas*. It has *Kandughana* and *Kushtaghan*, anti-microbial, anti-bacterial properties. As *Viruddha Aahar* is important factor for etiopathogenesis of skin ailments, so patient should avoid *Viruddha Aahar*

for better relief and speedy recovery and further recurrence of skin ailments, as first line of treatment that is said to be *Nidana Parivarjana*.

Hence the promising results in this case study are combined effect of *Shodhana*, *Shamana* and *Pathya Sevan* and patient followups.

### Conclusion :

Skin diseases have become increasingly common and significantly impact an individual's daily activities. The skin serves as an important reflection of our overall health, and to maintain its well-being, it is essential to avoid irritants and harmful chemicals. The first step in treatment is *Nidana Parivarjana* (elimination of causative factors), which trigger conditions like *Vicharchika* (skin disorders). In many cases, simply avoiding these triggers can alleviate half of the problem.

The next step is *Virechana Karma*, a *Shodhana* therapy that helps eliminate the vitiated *Doshas*. After *Shodhana*, *Shaman Chikitsa* is administered, which provides considerable relief from the signs and symptoms. This approach demonstrates that skin diseases can be effectively treated with *Shodhana Chikitsa* followed by *Shaman Aushadhi*. Moreover, with proper awareness, education, evidence-based studies, and the avoidance of trigger factors, skin problems can be effectively managed.

### Informed Consent

Patient consent was obtained for the photographs and before submitting this case study for publication.



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