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Review Article

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CONCEPT OF *DHĀTWAGNI* VIKAR W. S. R TO HYPOTHYROIDISM AND ITS TREATMENT WITH SOME INDIGENOUS DRUGS

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ABSTRACT

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Associate Professor, Dept. of Kaya Chikitsā, MSM Institute of Āyurveda, PSMV, Khanpur Kalan. Thyroid hormone regulates the metabolic process of the body. Failure of thyroid hormone to meet the metabolic need of the body results in hypothyroidism. Hypothyroidism is posing a major clinical challenge for clinicians both in developing as well as developed world. The modern treatment has many adverse effects. So there is an urgent need of safe and effective $\bar{A}yurvedic$ management needs the proper understanding of pathogenesis of hypothyroidism as per the principles of $\bar{A}yurveda$. This review is made with an effort to understand the disease in $\bar{A}yurveda$ perspective. On reviewing the clinical presentation of hypothyroidism from various sources it is found that in hypothyroidism there is abnormality of $J\bar{a}thar\bar{a}gni$ and $Dh\bar{a}twAgni$

along with abnormality of *Kapha* and *Vāta Dosha* as well as *Rasavaha*, *Raktavaha*, *Medovaha*, *Sukravaha and Manovaha Srotas*. These factors should be addressed during *Āyurvedic* management of hypothyroidism.

KEYWORDS: Hypothyroidism, Samprāpti, Agni, DhātwAgni, Dosha, Rasavaha Srotas.

INTRODUCTION

Thyroid disorders are very common in Human beings. Hypothyroidism is a Hypo metabolic state caused due to deficiency of Thyroid hormones. Increasing trend of hypothyroidism is common to the society, more prevalent among the females. It is not only confined to

metropolitan population but also extends to rural and urban areas. Ratio of disease occurrence among females and males^[1] is 6:1. The term hypothyroidism has not been mentioned in $\bar{A}yurvedic$ texts. Many diseases described in modern medicine are not described by that name in $\bar{A}yurvedic$ text. It is suggested that $\bar{A}yurvedic$ scholar should diagnose and treat that diseases according to their lakshana(sign and symptoms), status of Agni, Dosha $Dh\bar{a}tu$ and Mala. When we analyzes the pathogenesis of hypothyroidism, Agni $M\bar{a}ndya$ seems to be the basic cause. In Charak $Samhit\bar{a}$ eight type of Nindita Purushas^[3] have been described, which can be taken as functional disorders of endocrine.

As per the concept of Agni, normalcy of Agni is must for body function rhythmicity. ^[4] According to the view of allopathic systems, metabolic activity of the body is controlled by thyroid hormone secretion and if we move our eyes towards $\bar{A}yurveda$, we will find that metabolic processes of the body are under the control of $J\bar{a}thar\bar{a}gni$, $Bhut\bar{a}gni$ and $Dh\bar{a}tw\bar{a}gni$. ^[5] So the cause of disease is alteration in metabolic activity which, according to $\bar{A}yurveda$, is vitiation of $Dh\bar{a}tw\bar{a}gni$.

This vitiation can occur in two ways – when *Jātharāgni* gets impaired, on one hand, its moieties which are distributed to *Dhātwāgni*s get impaired disturbing status of *Dhātwāgni*s too, while, on the other hand, this *Jātharāgnimāndya* leads to formation of Ama (qualitative) which in turn causes *Srotorodha*. Due to above pathological sequences, vitiated rasa *Dhātu*is formed causing impairment of other *Dhātu*s too and thus, a chain of pathological events is started. *Jātharāgni Māndya* once created can be corrected at earlier state but vitiation of *Dhātwāgni*s once created can't be purified easily. On this basis, we can assume disease chronicity and its kricchas*ādhyatā*. Moreover, longer duration of treatment is needed to cure *Āma* at *Dhātu* level. This *Dhātwāgni vikriti*, If not treated properly can reach up to genetic levels (*Sukra and Shonita*) which may give an idea about congenital Hypothyroidism (as per modern system)

NIDĀNA

Glancing at the nature of the disease, we come to the point that *Dhātwāgni vikriti* (Hypo functioning) plays very important role in causing pathogenesis which in turn is caused by *Jātharāgni Māndya*. As the prime factor in causation of the disease is *Agni Māndya*, therefore, factors causing vitiation of *Agni* can be considered under *Nidāna* factors of the disease.

- (1) Physiological factors affecting $Dh\bar{a}tw\bar{a}gni$ (described in concept of Agni) When, tend to be abnormal, cause pathogenesis.
- (2) Under Ādhyatamika hetus, Ādibala Pravritta, Janmabala Pavritta and Dosha bala pravritta hetus help in causing diseased condition.
- e.g. (a) In Adibala Pravritjanya Vyādhi, Bijabhāga Dushti takes place.

According to modern, inheritance may be the cause (Cong. Hypothyroidism).

- (b) Under *Janmabala Pravritta Vyādhis*, *Sushruta* has given examples of *Muka*, *Vāmana*, *Jada*^[6] types. Here, Jada (*Mandabuddhi*) can be considered as cretin baby (neonatal Hypothyroidism).
- (c) Vitiation of *Sharir* as well as *Mansika Doshas* may be the causative factors considered under *Dosha bala Pravritta Hetus*.
- (3) As we know that *Dhātu*parampara (qualitative and quantitative production of *Dhātus*) is maintained by two factors.
- (i) Intensity of Agni.
- (ii) Availability of the fuel (*Āhararasa*)

Therefore, anything affecting these two factors can be considered to cause disease.

These are as follows-

Excessive intake of water, erratic intake of food, *Vegavidhārana*, day sleep etc. and psychological factors^[7] e.g. Anxiety, fear, greed, Anger, Jealousy.

- (4) Non-gratification and dishonor of the desires of *Dauhrida* can lead to the occurrence of *Vyādhi*. This can be interpreted as follows-
- (a) According to *Sushruta*^[8], development of fetus takes place in fourth month which is also a stage of *Dauhrida* in mother. If, at this stage, mother's desires are not fulfilled then it may lead to the birth of a paralyzed, hump-backed, crooked arms lame, dwarfed, defective eyed child etc. This condition may be analyzed according to modern parlance as a child of congenital hypothyroidism (cretinism) (i.e. stunting of body growth and retardation of mental development).
- (b) According to modern science, thyroid is formed in 8th week and trapping of I2 occurs from 12th week (4th month) which is again, a period of *Dauhrida* as per *Āyurveda*. This may happen that non gratification of mother's desires at this stage may lead to deformity in particular organ functions. This hypothesis, however, needs further evaluation.

PURVARUPAS (PRODROMAL SYMPTOMS)

Purvarupas are the caution lights to warn the patient and doctor about the pathogenesis happening in the body and makes us run towards exact diagnosis of the disease. In Hypothyroidism, it goes unnoticed for several years. Therefore, prodromal features are not mentioned in books.

RUPA

Rupa is a manifested stage of disease. It, on one hand, provides clue for the confirmed diagnosis and simultaneously, on the other hand, tells about severity and chronicity of the diseased condition. Rupas always appear after Doshadushya Sammurcchnā, Rupa (symptomatology) of this disease as per Āyurveda is as follows-

Weight Gain: It may be due to *Meda* and *Kapha Dosha* involvement. Because of *Guru Guna* of *Kapha Dosha* and *Pruthvi* and *Jala Mahabhuta* involved in *Kapha Dosha*, the weight gain occur. It is also *Rasa Nimittaja Vyādhi* as shown by *Āchārya Shushruta*. It can also be considered as, Hypometabolism i.e. hypo functioning of *Dhātwāgni*. *Dhātwāgnimandhya* leads to less formation of *Dhātus* and thus, accumulation of *Mala* which may result in weight gain.

Hoarseness of voice: *Sharangdhara* has mentioned hoarseness of voice as a *Kaphaja Vikāra*. ^[10] It can be also said that, due to increase in *Manda Guna* of *Kapha*, Hoarseness of voice appears.

Anorexia: It is due to *Mandāgni* by influence of *Kapha Dosha*^[11] and *Rasa Dhusti*.

Coarse and Dry Skin: Augmented *Rasa* cannot nourish *Rakta Dhātu* leads to dryness and coarseness of skin. ^[12] Due to coarse and dry skin *Udard* may be occur, which is a *Nānātmaja Vyādhi* of *Kapha Dosha*.

Constipation: From the *Āyurvedic* point of view, the *Appakarshani Gati* of *Mahāsrotasa*, which plays a role in *Anulomana* of *Mala* and *Vāyu*, gets to slow down, owing to the aggravated *Kapha* in *Pakvāshaya* with increase of *Manda Guna* of *Kapha* and vitiated *Vāta* by obstruction of *Vriddha Kapha*. *Vāyu Prakopa* results in *Gādhavarchastvam*^[13] (constipation).

Anaemia: According to $\bar{A}yurveda$, $P\bar{a}ndut\bar{a}$ is due to $Rasa\ Dushtijanya$ as well as $Kapha\ Dosha$. [14]

Menstrual Disturbances: Rasa *Dushti* occurs in hypothyroidism. It may be unable to nourish *Upa Dhātu Ārtava*^[15] and *Uttar Dhātu Rakta*. As a result of this *Ārtava Pravriti* may be disturbed.

Cold Intolerance: *Kapha* and *Vāta Dosha* with its *Shita Guna* leads to coldness. ^[16]

Sluggishness: Sluggishness means slowness in performance. *Ālasaya* and *Anga Shatihlya* can be included in it. Due to the increased of *Manda Guna* of *Kapha*, results for lack of enthusiasm for performing any work. Modern medical science has mentioned that increase of the pressure of cerebrospinal fluid, lethargy, laziness, drowsiness etc. occurs. *Charaka* also mentions that *Shithilatā* as a *Rasaja Vikāra*. [14]

Puffiness of the face: Vitiated *Kapha* obstruct *Rasavāhini Strotāmsi*. As *Kapha* is composed by $\bar{A}pa$ and $P\bar{a}rthiva$ *Mahābhutas* and dominated by properties of heaviness and steadiness, thickened features and puffy features appears in patients.

Bilateral peripheral oedema: This non-pitting type of oedema found in hypothyroidism is due to increase in muco-protein ground substance. This is due to *Sthira Guna* of *Kapha Dosha*. All the above symptoms indicate the involvement of *Kapha Dosha*, *Rasa Dhātu*, and *Rasa Dhātwāgni* in the Hypothyroidism. Above all *Kapha Dosha* plays a major role in the disease Hypothyroidism. It can be correlated the features of *kaphaj Sotha*. [18]

Coarse and Dry Hair and Hair loss: *Dhātwāgnimāndhya* leads to augmentation of *Dhātu* which cannot nourish Uttar *Dhātu* i.e. *Asthi* which results in coarse and dry hair or hair loss.^[19]

Bradycardia: Bradycardia may result from propagation of *Kapha* with its *Manda Guna*.

Excessive sleep: Kapha Vriddhi causes Tandrā and Atinidrā. [20]

Forgetfulness: It is said that, natural state of *Kapha* is strength (*Bala*) for the body. But in hypothyroidism, *Kapha* is in vitiated state. As a result the three types of *Bala*, *Dehabala*, *Agnibala* and *Manobala* may be diminished. Abated *Manobala* may cause forgetfulness.

Generalized pain: Hypothyroidism can be considered as *Dhātwāgnimādhyajanya Vikāra*. Aggravation of *Vāta* by *Vaishmya* of *Dhātus* creates generalized aches and pain. *Angamarda* is mentioned as a *Rasaja Vikāra*. [21]

Weakness: Capability for work or for exercise or strength depends upon the normal state of *Deha Dhātu. Dhātu Vaishmya* leads to *Daurbalya* and *Klama. Balasaka* means *Bala Kshaya* which is included in a *Nānātmaja Vyādhi* of *Kapha Dosha*.

CONCEPT OF TRIDOSHAS

The features of hypothyroidism can be analyzed as per the predominance of *Dosha*s in the body.

Following table may be helpful in giving the clue about the involvement of *Doshas*:

Sr.no.	Symptom	Dosha involved	Reference
1.	Weight gain	Kapha vruddhi ,Pitta kshaya	Ch.Su.17/56; A.H.Su.11/7; Ch. Su.20/17
2.	Loss of appetite	Kapha Vruddhi, Pitta kshaya	A.H.Su.11/7; A.H.Su.11/16
3.	Puffiness of body features	Kapha Vruddhi	Ch.Su.18; A.H.Su.12/53
4.	Dry and coarse skin	Vāta Vriddhi; Pitta Kshaya	Ch. Su.20/17;Ch.Su.17/56
5.	Minimal/absent sweating	Pitta Kshaya	A.H.Su.12/52
6.	Anemia	Kapha Vriddhi; Pitta Kshaya; Vāta Vriddhi	Ch. Su. 17/56
7.	Constipation	Vāta Vriddhi	A.H.Su.11/6;Su.Su.15/18
8.	Hoarseness of voice	Kapha Vriddhi;Vāta Vriddhi	SharangdharCh.Chi.16/24; Su.Su.15/18
9.	Generalized aches, pain	Vāta Vruddhi	Ch.Su.17/44
10.	Muscular cramps, stiffness <i>Vāta</i>	Vāta Vriddhi	Ch.Su.17/47;Su. Su.20/11
11.	Sluggishness	Kapha Vriddhi	Ch.Su.17/55

From the above table, we may compare that *Kapha* is in augmented state, *Vāta* is in prorogated phase. However, *Pitta* is suppressed.

Most of the symptoms of hypothyroidism show *Kapha* dominance. Glycosaminoglycans deposition in the tissues can be considered as *Kapha Vargiya Dravya* which will cause obstruction in the channels and hence obstruction to the proper movement of *Vāyu* producing *Margavaranajanya Vāta Prakopa*. Impaired metabolism can be considered as *Pitta Dushti*.

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SAMPRĀPTI (Pathogenesis)

Different Āhāraja (dietary), Vihāraja (lifestyle) and Mānasika (psychological) etiological factors will lead to Tridosha vitiation including dominance of Kapha associated Pitta Dushti and Mārgāvaranajanya Vātaprokopa. This Dosha vitiation and Agnimāndyakara Nidāna will cause vitiation of Agni and vitiation of Annavaha Srotas. When Jātharāgni gets impaired, on one hand, this Jātharāgnimāndya leads to formation of Āma (qualitative) which in turn causes Rasavaha Srotodushti and Srotorodha. While, on the other hand, its moieties which are distributed to Dhātwāgnis get impaired disturbing status of Dhātwāgnis too. Due to above pathological sequences, vitiated Rasa Dhātu is formed causing impairment of other Dhātus too and Malarupi Kaphavriddhi will lead to Srotolepa causing again Rasavaha Srotodushti. Thus, a chain of pathological events is started producing symptoms of Rasa Dushti like Aruchi (loss of appetite), Gaurava (Heaviness), Tandrā (sleepiness), Pāndutā (pallor), Srotorodha(obstruction of channels) etc. Vitiated Rasa Dhātu will produce vitiated Uttarottara Dhātu with respective Sroto Dushti and thus a syndrome involving many organ systems will get developed. Hence Samprāpti Ghataka involved can be summarized as follows,

SAMPRĀPTI GHATAKA

• Dosha: Kapha Vriddhi associated with Pitta Dushti and Mārgavaranajanya Vāta Vriddhi

• **Dushya** : Rasa, Meda predominantly

• Agni : Jātharāgni, Dhātwāgni

• Ama : Jātharāgni Māndya Janita, Dhātwāgnimāndya Janita

• Srotas : Rasavaha Srotas, Medovaha Srotas predominantly

• **Srotodusti** : Sanga, Vimārga-gamana

• Adhisthana : Thyroid Gland

• **Udbhavasthana**: Āmāshaya

• Rogamarga : Bāhya

• **Vyaktisthana** : Sharira

Some Clinical Conditions Correlating With Hypothyroidism

Āchārya Charaka described a clinical condition in *Dosha Vikalpa Kalpanā* presenting as *Pitta Kshaya* with *Kapha* and *Vāta Vriddhi* which includes *Stambha* (*Stiffness*), *Shaitya* (*cold intolerance*), *Toda* (generalized aches), *Gaurava* (heaviness in the body), *Agni Māndya*

(impaired metabolism), *Bhaktaashraddha* (Loss of appetite) shows resemblance with clinical presentation of hypothyroidism.

- *Kaphāvritta Vāta*^[22]: Symptoms quoted by *Āchārya Charaka* in *Kaphavritta Vāta*, *Kaphavritta* Udana, *Kaphavritta Samana*, *Kaphavritta Vyana* conditions show similarity with clinical presentation of hypothyroidism to some extent.
- *Kaphaja Pandu*^[23]: *Gaurava* (heaviness in body), *Tandra* (sleepiness), *Panduta* (pallor), *Klama* (fatigue), *Shvasa* (dyspnoea on exertion), *Aalasya* (lethargy), *Aruchi* (loss of appetite), *Svaragraha* (hoarseness of voice), *Ushnakamita* are the symptoms of *Kaphaja Pāndu* which show similarity with hypothyroidism.
- Kaphaj sotha^[21] and Kaphaj Galaganda

Management

Management of hypothyroidism must be based on certain principle to curb the pathogenesis of the hypothyroidism. During treatment of Hypothyroidism we must follow following principle.

1. **Dhātwagnimandy Chikitsā-** treatment principle is to regulate proper function of *Agni* i.e. Jātharāgni, DhātwAgni and Bhutāgni. For this Pippali Vardhāman Rasāyana is depicted by Charak^[24] can be selected for internal use. For this purpose old long pepper is more efficacious than fresh one.

Method of Use

- **A.**) *Samsodhan Chikitsā-* Prior to *Rasāyana* therapy proper *Samshodhan karma* should be performed along with *Smsarjan karma*.
- **B.**) *Pippali Vardhamān Rasāyana* For a man of good strength 10 fruits of *Pippali* should be taken with milk on first day. The number of fruits, in this way be increased by ten a day. *Pappali* must be taken in *Ksheerapāka* form. When the medicine is digested, one should take boiled rice of the variety called "*Sasthika*" with milk and ghee. Use the medicine for ten days. From the eleventh day the number of *Pippali* should be decreased by ten every day. In this way one thousand *Pippali* must be consumed. The *Rasāyan* which begins with six and three fruits of *Pippali* are administered in a man of average strength and little strength respectively.

Anuloman Chikitsā- This disease is originated due to *Dhātwāgni Mā*ndy *Janya Āma*. So certain *Anuloman* like *Hareetaki choorna* must be given.

- **3. Medohar chikita:** *Maharshi Charak* has prescribed *Vidangādi Louha* in Ati Sthoulya. This can be taken in powder form (prepared from equal quantity of *Vidang, Nagar, Yav-Kshār, Louha Bhasma, Yava and Amalaka*) twice a day with *Madhu*. [25]
- **4.** Sothohar Chikitsā: After analyzing the clinical feature of hypothyroidism with the Tridosh, we can consider hypothyroidic sate as "Kapha Vātaj" variety of Sotha. Because in Kapha Vātaj Sotha not only the features of Vātaja and Kaphaj Sotha are present but also general features of Vāta and Kapha vitiation might be present according to our principle. Though Dasamoola has the property of Vāta shaman, Kapha Shaman and Shothahar, it can be prescribed to hypothyroid patients. Charak in his own text mentioned Dashmoola as Shothahara. Vitiaha Vāgbhatta also gives a specific indication of "Dashamoola" as Shothaghna. Vyosadi Choorna is also depicted by Charak for kaphaj Sotha can be given in hypothyroidism.

5. Kaphaj Galaganda Chikitsā

Shodhana- In *Āyurveda*, hypothyroidism is not as such mentioned but on basis of its clinical presentation we can co-relate it with *Kapha*ja *Galganda* for local symptom related with thyroid gland and *Kapha*ja - *Rasaja Vikāra* for its general symptoms. *Sushruta* and *Vagbhata*, both have prescribed *Vamana* Karma in the treatment of *Kapha*ja *Galganda*^[28] as *Kapha Dosha* plays a major role in the pathogenesis of Hypothyroidism.

Shaman-For the *Shamana Chikitsā Bhallātaka Vati* and *Galganda hara Vati* were used. *Bhallātaka Vati* contains *Bhallātaka*, *Haritaki, Guda* and *Tila. Bhallātaka* is considered as *Shothnashak, Dipana, Sheeta Prashamana, Hridyottejaka Kamottejaka, Agnivardhaka*. All these qualities of *Bhallātaka* may be beneficial for the treatment of the symptoms of Hypothyroidism. *Bhallātaka*^[29] is specially anti *Kapha Dosha*, which plays a major role in pathogenesis of hypothyroidism. The last three drugs are selected for avoiding the side effects of *Bhallātaka*. *Kanchnar Gutika*^[30] has been specifically prescribed for *Galganda* treatment.

CONCLUSION

Analyzing the symptomatology of the disease in view of \bar{A} yurvedic fundamental it is evident that Kapha dusti associated with vitiation of $V\bar{a}ta$ Dosha is the main event along with Agni $M\bar{a}ndya$. All these factors lead to Annavah and Rasavah Srotadusti.

HYypothyroidism is a *Vāta Kapha Pradhana Sannipātha roga*. So *Shodhana* which is *Kapha hara* and *Shamana* which is *Kapha Vāta*hara is adopted here.

The method of Samprāpti Vighatana must follow on below mentioned principle.

- Kapha Vāta hara Chikitsā
- Māmsa Medohara Chikitsā
- Srotho Sodhana Chikitsā
- Agni Deepana Chikitsā
- Vāta Anulomana Chikitsā
- Sothahara Chikitsā

REFERENCES

- 1. Dr. S.N. ChughText Book of Medicine for MBBS, 3rd Edition, Arya Publication, Delhi, 818.
- 2. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra sthana 18/44, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi.
- 3. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra sthana 21/3, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 398.
- 4. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 15/03, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 552.
- 5. Bagbhat, Astanga Hridaya, Vidyotini bhasa Teeka by Kaviraj Atridev Gupt, Sutra Sthana-11/34, twelfth edition, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 88.
- Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Sutra Sthana.- 24/5, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 100.

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- 7. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Vimana Sthana 02, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi.
- 8. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, sutra sthana.- 3/15-16, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 24.
- 9. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Sutra sthana.- 15/37, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 62.
- 10. Sharangadhara, Sharangadhara Sahmita, Deepika Hindi vyakhya, Edited by Dr Brahmananda Tripathy, Chaukhamba Sura Bharati prakashana, Reprint 2010, purvardha 7/27: 95.
- 11. Bagbhat, Astanga Hridaya, Vidyotini bhasa Teeka by Kaviraj Atridev Gupt, Sutra Sthana-11/7, twelfth edition, Chaukhamba Sanskrit bhawan, Varanasi, 1997.
- 12. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana 17/65, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 350.
- 13. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Sutra sthana.- 15/18, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 60.
- 14. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana 28/8, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 548.
- 15. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Sutra sthana.- 14/6, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 48.
- 16. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana 20/18, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 395.
- 17. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Sutra sthana.- 4/51, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 36.

- 18. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 12/14, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 440.
- 19. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana 17/67, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 351.
- 20. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Sharira sthana.- 4/55, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997; 37.
- 21. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana 28/8, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 548.
- 22. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 28/226,228,224, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 978-979.
- 23. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 16/25, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 594.
- 24. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 1/3/40, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 50.
- 25. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana -21, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi.
- 26. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Sutra Sthana 4/,38 Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi.
- 27. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 12/21, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 443.
- 28. Susruta, Susruta Sahmita, Ayurveda Tatwa Sandeepika Hindi Commentary, Edited By Kaviraj Ambikadatta Shastree, Chikitsa Sthana.- 18/50, 11th edition 2008, Chaukhamba Sanskrit bhawan, Varanasi, 1997.

- 29. Agnivesh, Charak, Charak Sahmita, Charak Chandrika Hindi Byaksha, Chikitsa Sthana 1/2/19, Edited by Brahmananda Tripathy, 5th edition, 1998, Chaukhamba Surabharati Prakasana, Varanasi, 41.
- 30. Bhaisajya Ratnavali, Vidyotini Hindi Vyakshya, Edited by Shri Ambikadutta Shartree, Chaukhamba Sanskrit Samsthan, Varanasi, 44/61-63: 583.