

Research Article International Ayurvedic Medical Journal ISSN:2320 5091

ROLE OF PATHYA-APTHYA AND YOGIC PROCEDURES IN THE MANAGEMENT OF AMLAPITTA

Sandeep Kumar¹ Mannat Marwaha²

¹PG Scholar, ²Assistant Professor; Department of Swasthvritta, Uttaranchal Ayurvedic College, 17 Old Mussorie Road, Rajpur, Dehradun, UttarKhand, India

ABSTRACT

Busy schedules with abnormal-stressed lifestyle, changed eating habits and their patterns, inadequate sleep and non-observance of *Dincharya*, *Ritucharya*, *Ratricharya* and *Sadvritta* are the reasons for growing metabolic diseases in society. *Amlapitta* is one among these diseases which can give rise to accumulation of *Aama* further leading to *Aamadoshaja Vikaras* viz. *Visuchika* and *Alsaka*. *Agnimandya* is the underlined cause which should be treated in *Amlapitta*. It is the disease of *Annavaha Srotasa*. A holistic approach is required to tackle such problem. Treatment modalities like *Asthapana Vasti* in chronic *Amlapitta* and *Dehsantragamana Chikitsa* explains widened approach of *Acharyas* for this disease. *Nidanaparivarjana*, *Prakritivighata chikitsa*, *observance of Dincharya* and *Ritucharya* regimens, lifestyle modifications, yoga and meditation along with *Pathya Apathya* mentioned in *Samhitas* are studied and analysed to form a *Pathya-Apathya* diet chart for *Amlapitta*. Further, Yogic modalities recommended in the management of *Amlapitta* are, *Asanas: Pawanmuktasana*, *Vajrasana*, & *Shavasana*. *Shatkriyas: Vaman Dhauti*. *Pranayama: Anuloma-Viloma & Kapalbhati*, are found beneficial in management of *Amlapitta*. **Key words**: *Amlapitta*, *Agnimandya*, *Ritucharya*, *Asanas*, *Pathya-Apathya*, *Pranayama*, *Shatkriyas*.

INTRODUCTION

Ayurveda is the only medical science which has insisted more importance on prevention of diseases & maintenance of health rather than treating any disease¹.

Amlapitta is an Annavaha Srotas Vyadhi and its incidence is increasing due to non-observance of Dincharya, Ritucharya, Ratricharya and Sadvritta regimens, Virudha Anna (unwholesome diet), Apathya Sevana and disturbed Treya-Upstambha i.e. Ahara, Nidra and Brahmacharya. The incidence of Amlapitta in India is approximately 3 in 869 that are about 12, 25,614

people are suffering from this disease out of total 1,06,50,70,607 population². Charaka, Sushruta and Vagbhata has not mentioned Amlapitta as disease. However, Kashyap Samhita is the first available text describing Amlapitta a separate clinical entity. Further, Madhavakara described its Nidana (aetio-pathogenesis), Lakshana (symptoms) & Bheda (two subtypes).³ Chakarpani in his commentary on Charaka Samhita states that "Amalgunodriktam Pitta Amal Pitta", Here, Udrikta stands for increase or excessive, which means that there is quantitative

How to cite this URL: Sandeep Kumar Mannat Marwaha: Role Of Pathya-Apthya And Yogic Procedures In The Management Of Amlapitta International Ayurvedic medical Journal {online} 2016 {cited 2016 December} Available from: http://www.iamj.in/posts/images/upload/3577_3586.pdf

in Pitta. However, its Amal and Drava Guna is more vitiated.

AIMS & OBJECTIVES:

The main aim of the article is how *Pathya Apathy*a and different *Yogic* procedures are effective in management of *Amlapitta*.

DEFINITION OF AMLAPITTA:

Chakarpani in his commentary on Charaka Samhita states that "Amalguno-driktam Pitta Amal Pitta", Here, Udrikta stands for increase or excessive, which means that there is quantitative in Pitta. However, its Amal and Drava Guna is more vitiated.

NIDANA:

Hurry, Worry and curry found to cause *Amlapitta*. *Mandagni* is the cause of

all type of *rogas* (diseases), but especially *Udara Rogas* occurs due to *Mandagni*⁴. However, *Nidanas* (cause) can be classified into four groups:-

- 1. Aaharjanya (Food habits):- Virudh, Dushta, Amla, Vidahi, Pitta Prakopaka Ahara, Adhayashana, Pishtanna, Apakava, Madya Atisevan, intake of water during food etc.
- 2. Viharjanya (Activities):- Immediately Divasawapna after food intake, living in Aanoopdesha, Varsha Ritu.
- 3. *Mansika Bhawas* (Psychological factors):- Presence of *Mansik Doshas* like *Krodha, Shoka, Bhaya, Chinta* etc.
- 4. *Kalaja Bhavas:* (Seasonal variations): *Agni* is observed weak during *Vasant* and *Varsha Ritu*.

SAMPRAPTI:

Nidana sevana

Varsha ritu & Anupdesha Intake of Pittaja Aahara Pitta become Vidagadha Pitta become Amalibhava Amalodgardi Lakshnotpati

Amlapitta

LAKSHANA: Avipaka (indigestion), Kalma (tiredness without exertion), Utklesha (nausea), Tiktamlodgara (acid eructation), Hridkantha Daha (burning sensation in chest and throat), Aruchi (anorexia)⁵.

CHIKITSA: A holistic approach is must, which includes *Nidanaparivarjana*, *Prakritivighata Chikitsa*, observance of *Dincharya*, *Ritucharya*, *Ratricharya*, *Sadvritta* and rules to be followed accordingly, life style modification and recommended *Yoga* viz. *Asana*, *Satkriyas*, *Pranayama along* with *Pathya-Apathya* Diet chart.

Recommended Yoga package for *Amlapit-ta*:

1. Vaman Dhauti: on first visit, repeat same after 15 days. (I.e. two times only) Yogic

Procedure Schedule (35 min.)

Asana:

- 1. Vajrasana: 5 min.*
- 2. Pawanamuktasana: 10 min.
- 3. Shavasana: 10 min.

Pranayama:

- 1. Anuloma-Viloma: 5 min.
- 2. Kapalabhati: 5min.
- *Vajrasana can be done immediate after meals.
- **All above yogic procedures should be done in morning hours at least 1 hour before breakfast.

Probable mode of action of Vaman Dhauti:

It is one among the *Shatkriya* mentioned in *Hathyoga Pradipika*. This method

is used as Samshodhan Chikisa for the removal of Kapha Dosha. Acharya Vaghbata while describing Kapha Chikitsa in Sutra sthana explains that which of the two Vaman, Virechana procedures when done through proper channels is the best remedy for the treatment of Kapha Dosha⁶. Even he mentioned the food having Ruksha, Tikshna, Alpa, Ushna Katu, Tikta and Kashaya properties suitable for the treatment of Kapha dosha.

Acharya Shrangdhara while explaining the Seven Aushad Kala says that when Kapha Dosha is in excess, to extract the Kapha Dosha from its seat one should practice Vaman Karma empty stomach⁷.

Also, Vaman Dhauti should be practiced empty stomach in the morning hours because Kapha Dosha is more predominant in morning hours. Washing up of the entire track is done. The stomach is filled up with luke warm water and the same water is expelled out from the mouth, hence the stomach and oesophagus are washed from inside. It is a digestive cleansing part of duodenum. Jala guna has been described in Bhavaprakash Nigantu, Vaari Varga as it pacifies the Ajeerna and is Sheetal, Laghu, Swatcha etc. in nature. The properties of Lavana as described in Charka Sutra Sthana are that they oleate the body, Ushana, Tikshna in guna and are the best enhancers of Agni. It is best in extraction of waste materials from the upper tract; also it is indicated in Shastra karmas like Lekhana, bhedana etc.8

The Gunas mentioned are Agni Deepan, Sheetal virya, Pchak, Laghu, Snighda, Ruchikarak, Sukshma.⁹

Nimbu is Kapha Utkleshaka. The Kapha utkleshaka properties of Nimbu, including of Tikshna, Laghu Snighda Gunas Lekhana Bhedhan properties of Saindhav lavan and Prakshalan gunas of Swachha jala

expels the Kapha- pitta dosha¹⁰.

Probable mode of action of Asanas: Vajrasana:

Vajrasana can help to make a number of physical discomforts-for example, problems related to poor circulation, digestion, elimination, low energy, depression etc. People in today's life usually do not sit straight even after meals or they even lie down and sleeps immediately after food consumption.

Also eaten food when comes in contact with digested enzymes causes reactions, which releases gases. It is assumed that lying down immediately after food intake causes epigastric sphincture to close physiologically, which obstructs release of gases causing belching, regurgitation resulting in GERD. Sitting in *Vajrasana* after meals helps the eaten materials to move forward to duodenum for further level of digestion. This forward movement is acted upon due to force of gravity during sitting in *Vajrasana*

Pawanmuktasana:

As this Asana is done before Pranayama deep breathing increases the oxygen intake to the body cells and the oxygen carrying capacity of the blood is increased and it provides more nourishment to the organs. When this Asana is practiced the breathing is deep and synchronized and at the end of inhalation the forehead .nose, chin, cheek should touch or be as close as possible. This Asana give the excellent massage to the abdomen. In this pose the abdominal muscles are tensed and simultaneously the internal organs are compressed by the folded legs. This increases the blood circulation and stimulates the nerves which connect the organs to the brain. Moreover upward pressure is also applied through the forward bending of neck, head. On completing this Asana fresh blood is soaked up into the muscles. The increase blood flow causes the increased functioning of the organs and increases the secretion that can be related to "Jatharagni". Therefore this Asana may correct the vitiate Agni which is also causative of Amlapitta.

Shavasasana:

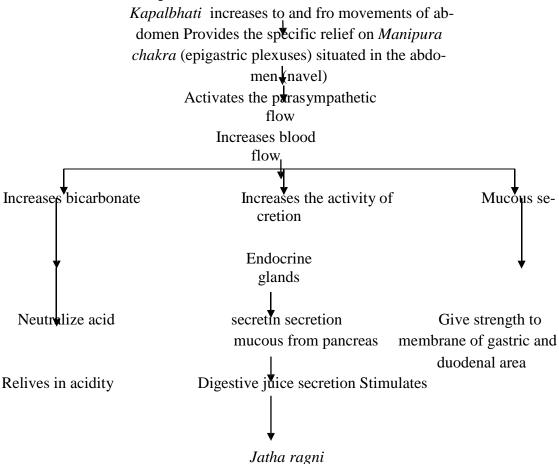
Basically Shavasana relaxes the whole physiological and psychological system of the body. It aims at slowing down the breathing rate to improve the exchange of oxygen and carbon dioxide in the lungs as well asnas to induce mental tranquility. Digestive ailments are generally caused by tension. Tension interferes with the normal digestive function which in turn cause ailment. Therefore, as the mental cause the damage to gastric mucosa results in fluctuations in the production of gastric secretions. All the tension, stress, problem etc. are flowing out via the exhaled breath. Also this is a meditation procedure and it calms the mind, reduces stress and emotional tension.

Probable mode of action of *Pranayam: Anuloma Viloma Pranayama:*

Whenever some air is forced to pass through a pipe of irregular cross section then the flow rate remains same. In this *Pranayama* when air flows in respiratory system the

fast flowing air impart force on fine arteries and vein so that blood flow will be accelerated. Oxygen carrying blood hits the constraint in our body at different positions. The individual nostril will create different action on its inner wall. As the velocity increases the kinetic energy increases and pressure energy decreased so the pressure on the walls of respiratory tract will be towards the tube causing the impurities breathes out. The practitioner experiences the positive effects right from the day first and immediately after practicing, the body feels relaxed and full of energy. The mind becomes calm and thoughtless. The practitioner feels life pleasant and full of optimism. Poor oxygen in the body's cells give rise to muscle aches, poor digestion, dizziness, depression, irrational behavior, weakness, irritability, memory loss, circulation problems and stomach acidity. Due to increased oxygen intake during h this Pranayam, one feels clear headed and calm. Regular practice helps in relieving stress, cold, mil fevers, eye and ear problems, etc. It is also beneficial in migraine, chronic sinus problems, blockages in the arteries of the heart are removed and blood circulation is also improved.

Probable mode of action Kapalbhati:



Pathya-Pathya-Ahara-Vihara schedule: Rules to be followed:

- 1. Wake up time- 5:30-6:00 a.m.
- 2. Yoga Schedule as advised above.
- 3. Vihara:
- Stop smoking stop alcohol.
- Compulsory 30 minutes walk daily.
- Lose your weight.
- Avoid stress. Do *yoga* and meditation.
- Avoid *Divaswapana* (Day sleep/ evening sleep) and *Ratrijagrana* (Night awakening)
- Non-suppressible urges are: *Mutra* (urination), *Purisha* (defecation), *Vashpa* (lacrimation), *Kshudha*
- (Hunger), *Chardi* (vomiting), *Udgara* (Eructation).
- Develop a habit to walk or at least sit straight (or in *Vajrasana*) immediately after consuming food.
- Raise the head of your bed (6-8 inches) if

- symptoms interfere with sleep.
- Sleeping time: 10:30-11:00 p.m. (Minimum 2 hours gap should be maintained between last meal and sleep.

4. Ahara:

- Never eat to your full satisfaction.
- Avoid packed, tinned, re-cooked, Stale foods
- Choose high fiber diet. Eat diet rich in vegetables and fruits (avoid citrus fruits).
- Avoid food at night. Eat two times a day.
 (in this case breakfast should be at 09:00-10:00 A.M. and dinner in late evening at 7:30-8:00 P.M.). Eat 2-3 hours before getting to bed.
- Always drink luke warm water. Water intake during, in between and just after meals should be avoided. Avoid carbonated drinks.
- Avoid Eggs. Non-vegetarian items includ-

- ing fish and sea food can be consumed only two times in a week which should be boiled, grilled (but not fried).
- Avoid deep fried food items like *Samosa*, *Pakoda* etc.
- Eliminate bread and bread items of any type from your meals.
- No bakery items (chocolates, toffees, pastries, cakes etc.)
- No coffee, tomatoes, onions. No salty fried chips, potato chips, peanuts etc.
- No frozen or packed items. No gravy, pickles (*Achara*), chutney, Jam, Sauce.
- Fermented food viz. *Uttapam, Sambhar, Idali, Dosa* etc. (south Indian foods) can be consumed.
- Avoid butter, cheese, cream (mallai),

- ice cream, cream sauces, pizzas, burger, Chinese food i.e. fast foods.
- Milk should only be consumed during morning hours.
- Eat small meals instead of having large amount at once.
- Eat slowly.
- Recommended Sweets: Petha-Ki-Methai, Payasa (sweet dish prepared from rice and milk).
- Mulethi (Liquorice bark) can be chewed 3-4 times a day, must for peptic ulcer disease.
- A probiotic sip can be taken half hour before second meal (late evening).

Pathya-Apathya Diet Chart:

Timings	Food items	Amount	Instructions
Early	1.Cow Milk	1 glass (300-	-Do not add sugar.
morning	OR	350	-Do not add Elachi (carda-
(6:00-	1. Coconut water	ml)	mom).
7:00 am)	OR		- Avoid buffalo milk.
	1.Aloe vera juice.	1 glass	
	OR		
	1. Fennel (Saunf)	½ glass	
	Tea		
	OR	1 cup (150 ml)	
	1. Dhanyaka Him		
		1 cup	

Breakfast	1.Oats/ corn flakes	1 bowl (200 ml)	-Cooked in olive
(9:00-	OR	1 00 111 (200 1111)	oil/canola
10:00am)		1 serving	oil/safflower oil/ vegetable oil.
	1.Dal (<i>Munga, Masura, Matar</i>) OR	1 bowl	- Avoid mustard oil and butter.
	1.Vegetable (<i>Kaddu</i> (Pumpkin)/		-No om-
	Gheeya (Bottle gourd/ Karela (Bitter	1 bowl	lette.
	gourd)/broccoli/ spinach/ carrots/		-No sauces,
	Beans/ Bathua Saaga (white goose		pickles.
	foot)/ Green Peas/ cauliflower/ / Tori/		-Go for Home made <i>Pudina</i>
	dark green and orange vegetables)		(mint) or Imily (Tamrind)
	2.Chappati		chutney.
	OR	2-3	-Always add
	Poha		Mridvika
		1 bowl	(<i>Kishmisha</i>) in above chutneys.
			-Avoid any type of bread.
Mid	Amala (Indian gooseberry), Kela	1 bowl	-Avoid citrus fruits in-
	,	(2-3	cluding
morning	(Banana), <i>Naspatti</i> (pear), <i>Seba</i> (Apple), <i>Anara</i> (pomegranate), <i>Aloobakha</i> -	fruits)	
(12:30-	ra (plums), Tarbuja (water melon)	ituits)	Gauva, Mango, orange, Mausambi (sweet
1:00)	Chiku (Sapota), Papita (Papaya),		lime).
	Kharbuja (Musk melon).		-Sprinkle <i>Lavana</i> (Table salt)
			and <i>Kalimaricha</i> (black pep-
			per)
Lunch	1.Mudaga Yusha – corn/vegetable etc.	1 bowl	Spices- Methi (fenu-
(1:30-	with added veggies, dried beans.		greek),
2:00pm)			Lavanga (cloves), Haldi
			(Turmeric), Jeera (cumin),
			Dhaniya (coriander),Adraka
			(Ginger), Lahsuna (Garlic)
			can only be used.

Г	1 C' T (A '1 CC)	1	NT 1: '/ 1:
Evening	1.Ginger Tea (Avoid coffee)	1 cup	-No biscuits, cookies,
(4:30-	OR		candy,
5:00pm)	1.Fennel tea (Saunf)	1 cup	frozen foods, muffins, pan-
	OR	1 cup	cakes, chocolates etc (no ba-
	1. <i>Guda</i> (jaggery) Tea		kery items).
	1.Guud (Juggery) Teu	1 cup	-No maggi, No pasta, No
		1	nuddles.
			-No jam, jellies,
			Sauces
			-Avoid caffeine, alcohol,
			processed foods.
Late	1.Dahi (yoghurt)	1 bowl	-Add <i>Jeera</i> powder
Evening	2.Chapatti	2-3	(crushed
(7:30-	3. Vegetable (<i>Gheeya</i> , <i>Saag</i> , <i>Palak</i>)	1 bowl	and roasted) and salt in
,			curd according to need.
8:00pm)	4.Dal	1 bowl	-Sprinkle Liquorice (Mule-
	5.Salad – (Chukundar (beet root),	Half plate	thi) or
	Khira (cucumber), lemon, Draksha		Jeera (cumin) on salad.
	(Dried grapes), pomegranate, garlic		-Avoid Heavy pulses
	paste)		(Masha, channa, Kultha)
Dinner	Avoid dinner		No curd at night.
(8:30-			No milk at night.
9:00pm)			

DISCUSSION:

Yogasanas like Vajrasana, Shashankasana and Pawanmuktasaana gives excellent massage to the abdomen. Therefore organs of the abdomen get more blood supply and the product localized in that part is removed and helps to correct gastric juice formation. Certain Yogic procedures likes Tratkakriya, Kapalbhati and and Anauloma-Viloma Pranayama helps to pacify the symptoms of Amlapitta produced due to Manskika Bhavas (Mental factors).

CONCLUSION:

1. Amlapitta as a disease has Aharaja, Viharaja, Mansika and Kalaja Nidana. Mandagni and formation of Ama Dosha leads to Amla Pakka of Ahara. Ayurveda believes that Doshas subsided by Shodhana procedures will

not aggravated in future. 11 Hence Vaman Dhauti (a Shatkarma Procedure) is recommended for removal of Kapha and Ama 12 for Bahudosha conditions. Aharaja and Viharaj causes needs Nidana Viprita Chikitsa 13 including life style modification by adopting Asana viz. Shalabhasana, Shashankasana and Pawanamuktasana, whereas Mansika Nidana are treated by relieving stress through Trataka and Shavasana. However, Kalaja Nidana should be counteracted by increasing Kayagni by observance of Ritucharya.

2. Amlapitta is classified as *Urdhavga* and *Adhoga*. *Vamana* is advised in *Urdhavga Amlapitta* which is *Kapha* dominant and *Virechna* in *Adhoga Amlapitta*¹⁴. Here, *Vaman Dhauti* is recommended in *Urdhava Amlapitta*.

- **3.** In acute cases of *Amlapitta*, *Vaman Dhauti* will provide immediate relief as "*Pittantanishtamvamanam*"¹⁵ repeating same after fifteen days. Whereas, in chronic cases, lifestyle modifications including sitting in *Vajrasana* immediate after meals, and adopting sixty minutes yoga schedule in morning hours for *Pawanamuktasana*, *Shalabhasana*, *Kapalabhat*, & *Anuloma-Viloma*.
- 4. Kalaja Amalapitta should be dealt by increasing Jatharagni during the months of Varsha and Vasant Ritus¹⁶ Vaman Dhauti should be done as an preventive procedure as recommended by Acharya Charaka in Dosha Nirharana Kala¹⁷. Also, Prakritivighata, Nidana Parivarjana and Ritucharya should be followed during the month of Sharad, like use of Madhura, Tikta, Kashaya, Laghu, Sheeta Virya Dravyas Viz. Tori (Lufa Acutangula/Cylindrica), Parval (Trichosanthes dioica), Loki (Lagenaria siceraria), Karela (Momordica charantia), Tinda (Praecitrullus fistulosus) etc.
- 5. Mansika Bhavas (Mental factors) viz. Kaama (Lust), Krodha (Anger), Lobha (Greedyness), Moha (Attachment), Irsha (Jealsy), Lajja (Shyness), Shoka (Grief), (Mental Manodvega disturbance), Bhaya (fear), Dukhashaya (Uncomfortable bed), Prajagran (Late night sleeping) also found to be the major causes behind Ajirna and Agnimandya causing Amlapitta¹⁸. Hence, Meditation including Shavasana and Trataka should be performed on daily basis to keep mind free from Mental factors inducing Amlapitta.

REFRENCES:

- 1. Charaka Samhita of Agnivesh with Vidyotini hindi commentary by pt. KashinathaS hastri and Dr. GorakhaNatha Chaturvedi, part- 1, ChaukhambaBharti Academy, Varanasi, 2003. Sutra Sthana 30, verse 26.pg. 587.
- 2. http://saspublisher.com/wp-

- content/uploads/2013/04sjams12101-110.pdf.
- 3. Madhava Nidana, Madhukosha Vyakhaya- Madhavavimarshni, hindi vyakhaya by Dr. Anant Ram Sharma, Chaukhamba Sanskrita Pratishthana, Delhi, vol-2, 2007. Chapter 15, verse 1-12.pg. 199-202.
- 4. Ashtanga Hirdyam of Shrimadvagbhata, Part-2, Nirmala Hindi commentary by Dr Brahmanand Tripathy, Chaukhamba Sanskrita Pratishthana, 2011, Nidana Sthana, chapter 12, verse 1.pg.512
- Madhava Nidana, Madhukosha Vyakhaya- Madhavavimarshni, hindi vyakhaya by Dr. Anant Ram Sharma, Chaukhamba Sanskrita Pratishthana, Delhi, vol-2, 2007. Chapter 15, verse 2.pg. 199.
- 6. Ashtanga Hirdyam of Shrimadvagbhata, Part-2, Nirmala Hindi commentary by Dr Brahmanand Tripathy, Chaukhamba Sanskrita Pratishthana, 2011, Sutra Sthana, chapter 13, verse 10-11.pg.519.
- 7. Sharangdhara Samhita of Acharya Sharangdhara, Jivanprada Hindi commentary by Dr. Smt. Shailaja Shrivastava, Chaukhamba Orientalia, Varanasi, I.S.B.N: 978-81-7637-005-9, 2011, Purvakhanda, Chapter 2, verse 3-4.pg. 15.
- 8. Charaka Samhita of Agnivesh with Vidyotinihindi commentary by pt. KashinathaShastri and Dr. Gorakha Natha Chaturvedi, part- 1, Chaukhamba Bharti Academy, Varanasi, 2003. Sutra Sthana 1, verse 91-93.pg.44.
- 9. Bhavaprakasha Nighantu (Indian Material Medica) of Shri Bhavmishra, commentary by Prof. K.C.Chunekar, Chaukhambha Bharati Academy, Varanasi, 2013, Haritkiyadi varga.241.
- 10. Bhavaprakasha Nighantu (Indian Material Medica) of Shri Bhavmishra, commentary by Prof. K.C.Chunekar, Chaukhambha Bharati Academy, Varanasi, 2013, Aamradi Phala varga.140.
- 11. Charaka Samhita of Agnivesh with Vi-

- dyotini hindi commentary by pt. Kashinatha Shastri and Dr. GorakhaNatha Chaturvedi, part- 1, Chaukhamba Bharti Academy, Varanasi, 2003. Sutra Sthana 16, verse 20.pg.321.
- 12. Hatha Yoga Pradipika by Swami Shri dwarikadasha Shastri, ChaukhambaVidya Bhavan, Varanasi, 2009. Trityaupdesha,shloka-25. Pg 31.
- 13. Charaka Samhita of Agnivesh with Vidyotini hindi commentary by pt. Kashinatha Shastri and Dr. Gorakha Natha Chaturvedi, part- 1, Chaukhamba Bharti Academy, Varanasi, 2003. Viman Sthana 3, verse 42-44.pg 702-703.
- 14. Kashyapa. Kashyapasamhita. Hemraj Sharma, editor. 8th ed. Varanasi: Chukhambha Sanskrit Sansthan; 2002, Khila Sthana 16. Verse-19.pg.336-337.
- 15. CharakaSamhita of Agnivesh with Vidyotinihindi commentary by pt. Kashinatha-Shastri and Dr. GorakhaNathaChaturvedi, part- 1,ChaukhambaBharti Academy, Varanasi, 2003. Sidhisthana 1,verse 14, pg.962.
- CharakaSamhita of Agnivesh with Vidyotinihindi commentary by pt. Kashinatha-Shastri and Dr. GorakhaNathaChaturvedi, part- 1, ChaukhambaBharti Academy, Varanasi, 2003. Sutra Sthana 6, verse 22,34. pg.141,143.

- 17. CharakaSamhita of Agnivesh with Vidyotinihindi commentary by pt. Kashinatha-Shastri and Dr. GorakhaNathaChaturvedi, part- 1, ChaukhambaBharti Academy, Varanasi, 2003. Sutra Sthana 7, verse 46.pg.168.
- 18. CharakaSamhita of Agnivesh with Vidyotinihindi commentary by pt. Kashinatha-Shastri and Dr. GorakhaNathaChaturvedi, part- 1, ChaukhambaBharti Academy, Varanasi, 2003. Vimana Sthana 2, verse 8.pg.688.

CORRESPONDING AUTHOR

Dr. Sandeep Kumar

PG Scholar

Department of Swasthvritta,

Uttaranchal Ayurvedic College,

Rajpur, Dehradun, UttarKhanda, India

Email: Dr.vanshandeep@gmail.com