



# A CASE REPORT ON THE POSITIVE CLINICAL OUTCOME OF *Shaman Chikitsa* AS AN *Ayurvedic* INTERVENTION IN THE MANAGEMENT OF *Vatarakta*(Gout)

Dr. Sachin Sheth<sup>1</sup>, Dr. Gangaprasad Asore<sup>2</sup>, Dr. Sakshi Hadap<sup>3</sup>

<sup>1</sup>Assistant Professor, Department of Rasashastra and Bhaishajya Kalpana, APM'S Ayurved Mahavidyalaya Sion, Mumbai.

<sup>2</sup>H.O.D., Professor, Department of Rasashastra and Bhaishajya Kalpana, APM'S Ayurved Mahavidyalaya Sion, Mumbai.

<sup>3</sup>Final year PG Scholar, Department of Rasashastra and Bhaishajya Kalpana, APM'S Ayurved Mahavidyalaya Sion, Mumbai.

## ABSTRACT

Gout is often classified under arthritis; it is a metabolic disorder caused by excess uric acid. In Ayurveda, Vatarakta is extensively described, showing its prevalence in ancient times as well. In today's era, due to lifestyle changes and altered food habits, the incidence of Vatarakta (gout) has significantly increased. In this study, a patient underwent a 45-day interventional, single study clinical trial. The treatment included Gandharvahastadi Kashayam (40 ml), Amrutadi Guggulu (two tablets of 500 mg each twice daily with Kashayam), Eranda Taila (5 ml HS), and local application of Pinda Taila. The patient was evaluated at two-week intervals during the 2nd, 4th, and 6th weeks. Both subjective and objective parameters were assessed, and the results showed encouraging improvement in the management of Vatarakta (gout) without any side effects.

**KEYWORDS:** Gout, Vatarakta, Uric acid, Gandharvahastadi kashayam, Amrutadi guggulu, Eranda taila.

## INTRODUCTION

Vatarakta is a disease caused by the imbalance of Vata and Rakta (Blood) in the body. It commonly affects delicate people who eat rich, spicy, salty and stale foods with low exercise, sleep during the day, or have indigestion. These habits disturb Vata and Rakta, depending upon site of impact it causes Pain and swelling in hands, feet, and joints. Acharya Agnivesha has foretold oleation therapy, bloodletting, medicated basti (enema) and Shamana chikitsa(therapeutic) intervention for the disease.<sup>1</sup> Whereas gout is caused by the buildup of uric acid crystals in the body, mainly around the joints. High uric acid in the blood is the main cause, which usually shows up first as sudden joint pain and swelling, which can be relieved with medicines like NSAIDs or colchicine.<sup>2</sup> Serum uric acid levels can be used as a marker to assess the effect of Ayurvedic treatment, since the symptoms of Vatarakta and gout are quite similar. The following is a case report of a patient treated in APM'S Ayurved Mahavidyalaya Sion. Ayurveda is not a singular based line of treatment for a particular, but it is different for each person as it perceives the individual entity with Dashavidh pariksha and try to treat its root cause.

### Objectives

To study combined clinical efficacy of Gandharvahastadi kashayam and Amrutadi Guggulu and Eranda Taila in the management of Vatarakta (Gout) by managing uric acid level.

### Materials & Methods

A single clinical case study was performed on the patient after taking informed consent before treatment. For study 52 years old female patient having symptoms of Vatarakta (Gout) for 3 months has been mentioned in detailed. Patient was treated with some Ayurvedic oral medication and oleation therapy

### Subjective parameters for Assessment

Sandhishula (Pain in Joints), Toda (Piercing pain), Sandhi shotha (Swelling), Sparshaashatva (Tenderness).

### Objective parameters for assessment

Serum Uric Acid.

## CASE PRESENTATION

A 52 year old female patient presented with a history of swelling on Left Knee and left ankle joint from 90 days, which initially started as a pain in left thumb of foot a classical symptom of Vatarakta. While other differential diagnostic symptoms were ruled out. Small swelling, then increased and complain of Sandhishula (Pain in joint), Toda (Piercing pain), Sandhi shotha (Swelling), Tenderness, on left ankle joint & knee joint. She had treatment from orthopaedic, but he noted temporary relief along with use of long-term painkiller.

**Duration-** last 3 months

**Aggravating factors-** Cold exposure, Fasting.

**Relieving factors-** Hot fomentation.

**Past medical history-** No such

**Past surgical history-** L.S.C.S. twice, D&C

**Menstrual history-** Menopause at 50 yrs of age.

**Family history-** Maternal- Essential Hypertension, Gout, Paternal- Diabetes mellitus type-2

### Local Examination

On examination there was a Sandhishula (Pain in Joints), Toda (Piercing pain), Sandhi shotha (Swelling), Tenderness, on Left ankle joint & Knee joint.



**Ashtavidh Pariksha (Eight-fold Ayurvedic examination)**

Parameter	Observation
<i>Nadi</i> (Pulse)	<i>Kapha</i> -predominant <i>Vata</i>
<i>Mala</i> (Stool)	<i>Vibandha</i> – (constipated)
<i>Mutra</i> (Urine)	Normal, 6–7 times per day
<i>Jihva</i> (Tongue)	Coated
<i>Shabda</i> (Speech)	Normal
<i>Sparsha</i> (Touch)	Normal
<i>Drik</i> (Eyes)	Normal
<i>Akruti</i> (Build)	Medium

**Dashavidh Pariksha (Ten- Fold Ayurvedic examination)**

Parameter	Observation
<i>Prakriti</i>	<i>Vata-Kaphaja</i>
<i>Sara</i>	<i>Meda Sara</i>
<i>Samhana</i>	<i>Madhyam</i>
<i>Satmya</i>	<i>Madhyam</i>
<i>Satva</i>	<i>Madhyam</i>
<i>Aharashakti</i>	<i>Avara</i>
<i>Jaranshakti</i>	<i>Madhyam</i>
<i>Vyayamshakti</i>	<i>Avara</i>
<i>Vaya</i>	<i>Madhyam Avastha</i>
<i>Bala</i>	<i>Madhyam</i>

**Vital Examination**

Parameter	Observation
Blood Pressure (B.P.)	120/80 mmHg
Pulse (P)	80/min
Weight	65 kg
Height	5 ft
Temperature	98.1 °F

**Personal History**

DIET- Mixed type with eating stale food, skipping urge of hunger and *Pitta vrudhikar* (spicy, salty, stale) food,  
 Sleep - Disturbed due to pain,

Bowel habit- irregular/unsatisfactory,  
 Micturition- Day- 4-5 times, Night- 2-3 times,  
 Addiction- Tea.

**Criteria for Assessment<sup>3</sup>**

**Table 3: Subjective criteria- Assessment of subjective parameters -**

Subjective Parameter	Observation	Scale
<i>Sandhi shula</i> (Joint Pain)	No Pain	0
	Mild Pain	1
	Moderate Pain	2
	Severe Pain	3
<i>Sandhisotha</i> (Joint Swelling)	No Swelling	0
	Swelling but not apparent	1
	Swelling obvious on lesser than 2 joints	2
	Swelling obvious on greater than 2 joints	3
<i>Toda</i> (pricking pain)	No Pain	0
	Mild Pain	1
	Moderate Pain	2
	Severe Pain	3
<i>Sparshaasahatva</i> (Tenderness)	No tenderness	0
	Mild, deep touch causes <i>sparshaasahatva</i>	1
	Moderate, deep touch causes <i>sparshaasahatva</i>	2
	Severe	3



The patient was diagnosed with *Vatarakta* (gout) based on the above criteria.

**Investigations**

Investigations done before treatment as follows: -

31/05/2025: Sr. Uric Acid- 7.8 mg/dl

Investigations done during and after treatment as follows: -

23/08/2025- Sr. Uric Acid- 4.5mg/dl

**Therapeutic Intervention**– As shown in Table no.1

Sr. No.	Dravya/Treatment	Dose	Duration/Frequency	Anupana (Vehicle)	Time
1	<i>Gandharvahastadi Kashayam</i>	40 ml	Twice daily	–	Before meals
2	<i>Amrutadi Guggulu</i>	2 tablets (500 mg each)	Twice daily	Above <i>Kwatha</i>	Before meals
3	<i>Eranda Taila</i>	5 ml	Once daily	Lukewarm Water	At bed time
4	<i>Pinda Taila</i> (local application)	As required	External application	–	Twice in a day

Patient follow-up was done every **15 days (on day 15, 30, 45)** during the treatment period.

food, tea with bakery products and other should be avoided.

- Eat more Fruit, Vegetables, Whole Grain, and Nuts.

**Dietary Management**

- Sugars and fruit high in fructose, Sugary beverages, Processed foods, meat, Certain fish and shellfish, stale

**Progress of Treatment**

Day	<i>Sandhishhula</i>	<i>Toda</i>	<i>Sandhi shotha</i>	<i>Sparsasathva</i>
<b>Day 0</b>	3	3	2	1
<b>After 15 days</b>	2	2	1	0
<b>After 30 days</b>	1	1	0	0
<b>After 45 days</b>	0	1	0	0

**RESULT**

*Sparshaasathva* and *Sandhi shotha* were reduced within 15 days, *Sandhishhula*, *Toda* at end of 45 days of treatment plan. And uric acid level reduced from 7.8 to 4.5 patient was completely asymptomatic at the end of 1.5-month treatment.

called *Avarana*. The disease can be mild (*Uthan* – affects only the outer) or severe (*Gambhira* – goes deeper into organs and tissues)<sup>6</sup>. In this case, the patient had pain in joints because *Vata* (the energy responsible for movement) was blocked, leading to a more serious form called *Dushti Pradhana Vatarakta*.

**DISCUSSION**

**Role of Management**

*Ayurveda* explains *Ama* as a substance which involves in the process of *paka* (digestion) without completion of the process. According to *Acharya Vagbhat*, *aam* is formed firstly during *Aahar rasa*, which is not formed due to hypo functioning of *Agni* being retained in *amasaya* and undergoing *dushti* (formation of toxins) of corresponding *dhatu* i.e. *Rakta* (blood)<sup>5</sup>. This pathological condition of *Agni* which here is *mandagni* leads to increase in *guru*, *manda*, *abhishyandi*, *avipaka gunas* in *Rakta* causing *srotha avarodha* (stagnation) result in formation of co-morbidities in the body. In short, this is the metabolic toxin leading to the disease. *Vatarakta* (Gout) as a disease caused by blockage in the body’s natural movement,

Treatment begins by removing the blockage (*Avarana*). Then, the focus is on balancing *Vata* and *Pitta*. According to *samprapti*(pathophysiology) of this case, medicines are used that help in digestion of *Aam* (undigested food) and *deepana* of *Agni*. Hence, this leads to separation *avarana* formed which relieved by *Vatanulomana*(release of the accumulated *Vata*) that stops the disease from progressing (*Samprapti Vighatana*)<sup>7</sup>.

**Mode of action of Ayurvedic medicine**

1. ***Gandharvahastadi Kashayam-*** *Gandharvahastadi kashayam* is indicated in *Vatavyadhi*. It has got *vatanulomana* property. It relieves constipation. *Gandharvahastadi kashayam yogam* is mentioned in *Sahasrayogam*. It is a combination of 8 drugs<sup>4</sup>. Table shows the contents of *Gandharvahastadi kashayam*<sup>8</sup>.



Name of the Drug	Parts Used	Effects	Rasa	Vipaka	Veerya
<i>Eranda</i> <sup>9</sup> ( <i>Ricinus communis</i> )	Roots	Carminative, purgative, diuretic	<i>Madhura</i>	<i>Madhura</i>	<i>Ushna</i>
<i>Chiribilva</i> <sup>10</sup> ( <i>Holoptelea integrifolia</i> )	Root	Useful in inflammation, gastritis, dyspepsia	<i>Tikta</i>	<i>Katu</i>	<i>Ushna</i>
<i>Chitraka</i> <sup>11</sup> ( <i>Plumbago zeylanica</i> )	Root	Gastric and nerve stimulant	<i>Katu</i>	<i>Katu</i>	<i>Ushna</i>
<i>Vishwa</i> <sup>12</sup> ( <i>Zingiber officinale</i> )	Rhizome	Increases intestinal motility	<i>Katu</i>	<i>Madhura</i>	<i>Ushna</i>
<i>Haritaki</i> <sup>13</sup> ( <i>Terminalia chebula</i> )	Fruit	<i>Tridoshasamana</i> , <i>deepana</i> , diuretic, <i>anulomana</i>	<i>Madhura</i> , <i>Amla</i> , <i>Lavan</i> , <i>Katu</i> , <i>Tikta</i>	<i>Madhura</i>	<i>Ushna</i>
<i>Punarnava</i> <sup>14</sup> ( <i>Boerhaavia diffusa</i> )	Root	Anti-inflammatory, anti-nociceptive, antioxidant, laxative	<i>Tikta</i> , <i>Kashaya</i>	<i>Katu</i>	<i>Shita</i>
<i>Yavasha</i> <sup>15</sup> ( <i>Fagonia cretica</i> )	Root	<i>Deepana</i> , <i>pachana</i>	<i>Madhura</i> , <i>Tikta</i>	<i>Madhura</i>	<i>Shita</i>
<i>Bhumithala</i> <sup>16</sup> ( <i>Curculigo orchoides</i> )	Root	Anti-inflammatory, antipyretic, demulcent	<i>Madhura</i> , <i>Tikta</i>	<i>Madhura</i>	<i>Ushna</i>

2. *Amrutadi Guggulu*- *Amrutadi Guggulu* is described in the *Chakradutta* under *Vatarakta Chikitsa Prakaranam*. It has *dipaniya* (appetizer), diuretic, digestive, and anti-inflammatory properties, making it useful in conditions like *Vatarakta*, *Amavata*, and *Agnimandya*. It also acts as a digestive and mild

laxative, proving beneficial in *Arsha* (piles) and *Bhagandara* (fistula-in-ano). Additionally, it possesses *raktashodhana* (blood-purifying) and *tridosha-shamaka* (balances all three doshas) qualities, which help in managing *Prameha* (diabetes) and *Adhyavata* (gout)<sup>17</sup>. Following table shows ingredient list:

Name of the drug	Rasa	Virya	Vipaka	Action & Indication
<i>Guduchi</i> <sup>18</sup> <i>Tinospora cordifolia</i>	<i>Katu</i> , <i>Tikta</i> , <i>Kashaya</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Grahi</i> , <i>Deepaniya</i> , <i>Rasayana</i>
<i>Guggulu</i> <sup>19</sup> <i>Commiphora mukul</i>	<i>Kashaya</i>	<i>Ushna</i>	<i>Katu</i>	<i>Hridya</i> , <i>Dipaniya</i> , <i>Sthaulya</i>
<i>Danti</i> <sup>20</sup> <i>Baliospermum montanum</i>	<i>Katu</i>	<i>Ushna</i>	<i>Katu</i>	<i>Virechak</i> (Purgative)
<i>Pippali</i> <sup>21</sup> <i>Piper longum</i>	<i>Katu</i>	<i>Anushashit</i>	<i>Madhura</i>	Thermogenic, Purgative, Expectorant, Digestive
<i>Maricha</i> <sup>22</sup> <i>Piper nigrum</i>	<i>Katu</i>	<i>Ushna</i>	<i>Katu</i>	Useful in Arthritis, Scorpion sting, Skin diseases
<i>Shunthi</i> <sup>12</sup> <i>Zingiber officinale</i>	<i>Katu</i>	<i>Ushna</i>	<i>Madhura</i>	Thermogenic, Laxative, Digestive
<i>Vidang</i> <sup>23</sup> <i>Embelica ribes</i>	<i>Tikta</i> , <i>Katu</i>	<i>Ushna</i>	<i>Katu</i>	<i>Krimighna</i> (Anthelmintic)
<i>Amalaki</i> <sup>24</sup> <i>Embelica officinalis</i>	<i>Amla</i> ( <i>Pradhana</i> ), <i>Madhura</i>	<i>Sheeta</i>	<i>Madhura</i>	Inflammation, Diuretic, Laxative
<i>Bibhitaki</i> <sup>25</sup> <i>Terminalia belerica</i>	<i>Kashaya</i>	<i>Ushna</i>	<i>Madhura</i>	Anti-inflammatory, Antipyretic, Antiemetic
<i>Haritaki</i> <sup>13</sup> <i>Terminalia chebula</i>	<i>Madhura</i> , <i>Kashaya</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Tridosha-shamaka</i>
<i>Dalchini</i> <sup>26</sup> <i>Cinamomum zeylanicum</i>	<i>Katu</i> , <i>Tikta</i> , <i>Madhura</i>	<i>Ushna</i>	<i>Katu</i>	Expectorant, Diuretic
<i>Trivrit</i> <sup>27</sup> <i>Operculina turpethum</i>	<i>Katu</i> , <i>Tikta</i>	<i>Ushna</i>	<i>Katu</i>	Hepatic stimulant

3. *Eranda Taila* (Castor oil) - *Acharya Chakrapani datta* has referred as the conditions like *Avarana*, *Eranda taila* is said to be best in use. It pacifies vitiated *Vata* by giving normal direction to *Vata* i.e. *Vatanulomana*, *Srotovishodhana*, *Kaphah ara*. *Anulomana* of *Vata* should be done using castor oil.

Because of its *Sukshma Guna* (subtle quality), castor oil can penetrate minute pores, and with its *Srotovishodhana property* (channel-cleansing action), it helps clear the bodily channels.<sup>28</sup>



Name of the drug	Rasa	Virya	Vipaka	Prabhava	Doshaghnta
<i>Eranda</i> <sup>9</sup> (Ricinus Communis)	Madhura, Tikta, Katu	Ushna	Madhura	Rasayana	Vata-Kapha hara

**Mode of action of Panchkarma therapy:** Oleation therapy (*Snehana*) – It works as a *Vataghna* (Decrease *Vata Dosha* in body), softness in *Dosha*, relief in pain.

**4. Pinda Taila-** *Pinda taila* is a classical *taila* preparation indicated for external application (*abhyanga*) in the case of *vatarakta* associated with *ruk* (pain) as per the Classical textbooks of *Ayurveda*.<sup>1</sup>

## CONCLUSION

Following conclusions can be drawn from the single case study:

- On the 15<sup>th</sup> day, improvement in signs & symptoms were seen.
- The treatment protocol used gives valid evidence with subjective and objective parameters in point.

The treatment formulation used in this case was as per the conditions and *nidana* (causative factors) mentioned. Also, *nidana parivarhjan* (avoid the causative factor) is the first line of treatment. As in this case, *Vata anulomana* and *Ama Pachana* was key to the reduce progression of disease. Medicines were selected with respect to this view.

*Gandharvahastadi kashayam* irrespective of its textual usage has been used in relief of various diseases like *Grudhrasi* (Sciatica)<sup>29</sup>, *Kashtartava* (Dysmenorrhoea)<sup>30</sup>, *Udavarta* (Acid reflux)<sup>31</sup>, *Klaibya* (Infertility).<sup>32</sup> These are the proof of use of *Kashayam* in different diseases with the key factor lies in *Agni Deepana*, *Aam Pachana* and *Vata Anulomana*. *Amrutadi Guggulu* has much evidence-based research articles in confirming the efficacy of the disease which also acts as a *Rasayana* (Rejuvenative) in function. *Eranda taila* is a mild laxative useful for *samprapti vighnana*. *Snehana* via *Pinda taila* overall provides relief in the progress. Further *Rasayana* therapy is planned for rejuvenation and to stop the recurrence of the disease.

## REFERENCES

1. Sharma PV (2014), "Charaka Samhita of Agnivesha, revised by Charaka and Dridhabala", with English translation, Vol. 1-4, Chaukhamba Orientalia, Varanasi p.p:486-502
2. Ragab G., Elshahaly M., & Bardin T. (2017), "Gout: An old disease in new perspective" - A review, Journal of advanced research, 8(5), 495-511.
3. Jaju S, Dipankar D (2022), "Ayurvedic Management of Vatarakata (Gout) - A Case Report", Research J. Pharm. and Tech 2022; 15(11):5026-5030.
4. Krishnan Vaidyan KV, Gopala Pillai S, (2007) "Sahasrayogam" (Sujanpriya Commentary), 27th ed, Alappuzha: Vidyarambham Publishers, p.78.
5. Garde K.G., "Sartha Vagbhat, AshtangaHridaya Vagbhatkrut", Pune, Shri. Gajanan Book Depot, Sutrasthana, Doshopakramaneeya, 13/23-25, P. 61
6. Garde K.G., "Sartha Vagbhat, AshtangaHridaya Vagbhatkrut", Pune, Shri. Gajanan Book Depot, Nidansthana, Vatashonitnidanam, 16/1-4, P. 213
7. Garde K.G., "Sartha Vagbhat, AshtangaHridaya Vagbhatkrut", Pune, Shri. Gajanan Book Depot, Ckikitsasthana, Vatashonitchikitsitam, 22/62-63, P. 334
8. Aravind A.T., Pradeep K., Bhojani M.K., (2023), "Study to assess the effect of gandharvahastadi kashayam in apana vaigunya (Apana Vata Vitiation) In the patients of katigraha (Low Back Ache)". Kerala Journal of Ayurveda, 2(3):27-32.
9. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.299
10. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.353
11. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.22
12. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.13
13. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.5
14. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.422
15. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.411
16. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.390
17. Kumar S., (online March 2022) "Conceptual Study Of Amrita Guggulu.", International Ayurvedic Medical Journal.
18. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.290
19. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.204
20. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.399
21. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.16
22. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.17
23. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.52
24. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.11
25. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.9
26. Chunekar K.C., PandeyG.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.226



27. Chuneekar K.C., Pandey G.S., (Reprint-2022), "Bhavaprakasa Nighantu of Sri Bhavamisra", Varanasi, Chaukhamba Bharati Academy, P.297
28. Singh R., Kakade R., Gulhane J., (2023) "Therapeutic aspects of Eranda Tail (Oil of Ricinus Communis)", *J Ayurveda Integr Med Sci*, 04:158
29. T, A. A., Dr. Pradeep K, & Dr. Meera K Bhojani. (2023), "Study to assess the effect of gandharvahastadi kashayam in apana vaigunya (apana vata vitiation) in the patients of katigraha (low back ache)", *Kerala Journal of Ayurveda*, 2(3).
30. Vijayan V., Rao H. P., & Rachana.C. (2024), "Management of Primary Dysmenorrhoea with Gandharvahastadi Kashayam", *International Journal of Ayurveda and Pharma Research*, 12(7), 31-34.
31. Menon A, Sariga KT, Suresh SP, "An Ayurvedic management of Udavarta - A Case Report", *J Ayu Int Med Sci*. 2025;10(1):284-288.
32. Barman J., Rout S., Moharana P., "Ayurvedic management of Klaihya - Case Study", *J Ayu Int Med Sci*. 2023;8(4):230-238.