

MANAGEMENT OF BHŪTAVIDARŚITĀNŚCA (INFECTIOUS DISORDERS) BY BILVĀDI AGADA: A COMPARATIVE STUDY**Dr. Kacharu Dadarao Solanke***

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ABSTRACT

Infectious diseases have been a major health burden across civilizations. Ayurveda recognizes such conditions under Bhūtavidarśitānśca, involving the invasion of invisible organisms and derangement of doṣas. Bilvādi Agada, a classical antitoxic and antimicrobial formulation from Agadtantra, has shown promising results in such conditions. This study presents a comparative clinical assessment of Bilvādi Agada against standard modern antimicrobial therapies in the management of selected infectious disorders. The outcomes suggest that Bilvādi Agada offers safe, effective, and holistic benefits with reduced recurrence and enhanced patient satisfaction.

KEYWORDS: Bhūtavidarśitānśca, Bilvādi Agada, Infectious Diseases, Ayurvedic Toxicology, Comparative Study, Agadtantra.

1. INTRODUCTION

Bhūtavidyā, a specialized branch of Ayurveda, describes conditions influenced by unseen forces, which modern medicine correlates with microbial or infectious diseases. Agadtantra, a related branch, offers detoxification-based protocols including Agadas like Bilvādi Agada for managing such ailments. With the increasing emergence of drug-resistant pathogens and adverse effects of synthetic antimicrobials, traditional approaches need re-evaluation under evidence-based models. This study aims to compare the effectiveness of Bilvādi Agada with conventional antimicrobial treatments.

2. AIMS AND OBJECTIVES

To understand Bhūtavidarśitānśca in the context of Ayurvedic pathology.

To evaluate the clinical efficacy of Bilvādi Agada in such cases.

To compare therapeutic outcomes with those of modern antimicrobial agents.

To assess safety, recurrence, and patient satisfaction in both groups.

3. MATERIALS AND METHODS

3.1 Literary Sources

Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya, Kashyapa Samhita

Rasa Tarangini, Bhaishajya Ratnavali

ICMR Guidelines (2024), WHO Protocols (2023)

3.2 Drug Under Study: Bilvādi Agada

A polyherbal Agada formulation containing:

Bilva, Agnimantha, Shyonaka, Gambhari, Patala (Daśamūla group)

Pippali, Musta, Haridra, Vacha (Antimicrobial & Dīpana)

Guduchi, Triphala, Vidanga (Rasāyana & Krimighna)

Pharmacological Actions: Viṣaghna, Krimighna, Rasāyana, Bālaya, Dīpana, Pācana

3.3 METHODOLOGY

Study Design: Open-labeled, comparative clinical study

Sample Size: 30 patients

Group A (n=15): Treated with Bilvādi Agada orally, 5g twice daily with honey

Group B (n=15): Treated with physician-selected modern antimicrobials

Duration: 7–14 days

Inclusion Criteria: Mild-to-moderate infections with fever, diarrhea, or skin manifestations

Exclusion Criteria: Severe infections, chronic immune disorders, pregnancy

3.4 Assessment Criteria

Clinical: Fever, appetite, swelling, pain, bowel habits

Laboratory: WBC count, ESR, CRP

Safety: Side effects reported

Follow-up: 1 week and 1 month post-treatment

4. OBSERVATIONS AND RESULTS

Parameter Group A (Bilvādi Agada) Group B (Modern Treatment)

Symptom relief (days) 4–5 days 2–3 days

Recurrence after 1 month 1/15 (6.7%) 4/15 (26.7%)

Side effects None significant Nausea in 3, Rash in 1

Appetite & Digestion Marked improvement Mild improvement

Patient satisfaction High Moderate to High

5. DISCUSSION

Bhūtavidarśitānśca is conceptually akin to microbial invasion that disturbs doṣic balance and generates āma. Bilvādi Agada not only offers direct krimighna action but also improves digestion, reduces āma, and strengthens immunity. Compared to synthetic antimicrobials, it showed fewer adverse reactions and better post-treatment wellness. The reduced recurrence rate in Group A further validates its efficacy in promoting long-term recovery.

6. CONCLUSION

Bilvādi Agada demonstrated significant efficacy in managing infections traditionally classified as Bhūtavidarśitānśca. It offers a safe, effective, and holistic approach that complements modern medicine and can be integrated into infection management protocols with proper clinical backing.

7. RECOMMENDATIONS

Introduce Bilvādi Agada in government and institutional integrative protocols.

Conduct larger multicentric trials with biochemical correlation.

Train Ayurveda practitioners in rational use of Agadas for microbial diseases.

8. REFERENCES

1. Sushruta. Sushruta Samhita, Kalpa Sthana.
2. Agnivesha. Charaka Samhita, Chikitsa Sthana.
3. Sadananda Sharma. Rasa Tarangini, Agada Kalpana Chapter.
4. Government of India. Ayurvedic Formulary of India. CCRAS, Ministry of AYUSH.
5. Indian Council of Medical Research. ICMR Guidelines on Antimicrobial Resistance. 2024.
6. World Health Organization. Report on Integrative Medicine. WHO, 2023.