

SHATKRIYAKALA: AN AYURVEDIC FRAMEWORK FOR EARLY DIAGNOSIS AND THERAPEUTIC INTERVENTION IN DISEASE PROGRESSION

¹*Dr. Pratima Kokane, ²Dr. Rajiv Mundane

¹PG Scholar, Rognidan Evum Vikriti Vigyan Dept., DMM Ayurved Mahavidyalaya, Yavatmal Maharashtra.

²Professor, Rognidan Evum Vikriti Vigyan Dept., and Principal, DMM Ayurved Mahavidyalaya, Yavatmal Maharashtra.

Article Received on 27 July 2026,
Article Revised on 17 August 2026,
Article Published on 01 Sept. 2026,

<https://doi.org/10.5281/zenodo.22160368>

*Corresponding Author

Dr Pratima Kokane

PG Scholar, Rognidan Evum Vikriti
Vigyan Dept., DMM Ayurved
Mahavidyalaya, Yavatmal
Maharashtra.



How to cite this Article: ¹*Dr Pratima Kokane, ²Dr. Rajiv Mundane. (2026). Shatkriyakala: An Ayurvedic Framework For Early Diagnosis And Therapeutic Intervention In Disease Progression. World Journal of Pharmaceutical Research, 15(17), 919-930.

This work is licensed under Creative Commons Attribution 4.0 International license.

ABSTRACT

Shatkriyakala is an important Ayurvedic concept that describes the sequential stages of disease development and identifies the appropriate time for therapeutic intervention. It is closely associated with the process of disease pathogenesis and emphasizes early diagnosis and timely management. Acharya Sushruta has elaborately explained the concept of Shatkriyakala in the 21st chapter of *Sutrasthana*. It comprises six progressive stages: **Sanchaya (accumulation)**, **Prakopa (aggravation)**, **Prasara (spread)**, **Sthanasamshraya (localization)**, **Vyakta (manifestation)**, and **Bheda (complication or differentiation)**. The term *Kriya* denotes action or treatment, while *Kala* signifies the appropriate time or stage; therefore, Shatkriyakala refers to the ideal stages for initiating therapeutic measures.^[1] Ayurveda aims to achieve two primary objectives: preserving the health of healthy individuals through the

adoption of **Dinacharya, Ritucharya, and Sadvritta**, and restoring health in diseased individuals through suitable therapeutic interventions. Prior to understanding the pathological manifestations of disease, a physician should thoroughly evaluate the condition of **Dosha, Dushya, and Srotas**, as these are fundamental to disease development. Knowledge of Shatkriyakala enables the physician to assess the stage of Dosha vitiation and formulate an appropriate treatment strategy based on clinical judgment and Ayurvedic principles.^[2]

KEYWORDS: Shatkriyakala, Dosha, Dhatu, Sanchaya, Prakopa, Prasara, Sthanasamshraya, Vyakta, Bheda, Ayurveda.

INTRODUCTION

According to Ayurveda, the pathogenesis of disease is primarily governed by the interaction between **Doshas** and **Dushyas** (body tissues and structural components). The equilibrium of the Doshas is essential for maintaining health, whereas their vitiation initiates a series of pathological events. If appropriate therapeutic measures are not instituted at an early stage, the vitiated Doshas progressively undergo sequential transformations, ultimately culminating in the manifestation of disease.

The concept of **Shatkriyakala** (six stages of disease progression) provides a comprehensive framework for understanding the evolution of disease from its inception to its fully developed state. It serves as a valuable diagnostic and prognostic tool by facilitating the identification of pathological changes before the appearance of overt clinical manifestations. This concept also emphasizes the importance of timely intervention, enabling the prevention or arrest of disease progression through appropriate therapeutic measures.

In Ayurveda, **Kriyakala** is broadly classified into two categories:

1. **Ritu Kriyakala** – the physiological cyclical changes in Doshas influenced by seasonal variations.
2. **Vyadhi Kriyakala** – the sequential stages involved in the pathogenesis and clinical manifestation of disease.

Ritu Kriyakala is described in Ashtanga Sangraha (Sutra Sthana, Chapter 12),^[3] where the seasonal dynamics of the Doshas are explained through three physiological stages: **Chaya** (accumulation), **Kopa** (aggravation), and **Prashama** (pacification). These stages occur naturally under the influence of seasonal changes. Adherence to appropriate **Ritucharya** (seasonal regimen) facilitates the maintenance of Doshic equilibrium by promoting the pacification of accumulated and aggravated Doshas, thereby preserving health and preventing the initiation of pathological processes.

The concept of **Vyadhi Kriyakala** was elaborately described by Sushruta, who classified the progression of disease into six distinct stages collectively known as **Shatkriyakala**. This

unique Ayurvedic framework provides a systematic understanding of the sequential development of disease, from its initial inception to its fully manifested state.

In contemporary medicine, disease is generally recognized after the appearance of clinical signs and symptoms, with subsequent emphasis on the diagnosis of complications. In contrast, Ayurveda describes six progressive stages of disease development, of which the clinically apparent manifestations and complications correspond only to the final stages. This approach enables the identification of pathological changes well before the onset of overt symptoms, thereby facilitating early diagnosis, timely intervention, and prevention of disease progression.^[4]

The pathogenesis of disease in Ayurveda is primarily attributed to the formation of **Ama** (metabolic toxins resulting from impaired digestion and metabolism)^[5] and the abnormal movement and vitiation of the **Doshas**.^[6] Ama acts as a pathogenic factor that obstructs physiological channels and disturbs normal tissue metabolism, while the vitiated Doshas spread throughout the body and interact with susceptible tissues, initiating pathological changes. Ayurveda considers all diseases to arise from systemic disturbances in the equilibrium of the three fundamental Doshas—**Vata**, **Pitta**, and **Kapha**.^[7] Therefore, a comprehensive understanding of **Shatkriyakala** is essential for early disease detection, accurate assessment of disease progression, effective therapeutic intervention, and the prevention of complications.

AIMS AND OBJECTIVES

AIM

To critically explore the concept of **Shatkriyakala** and evaluate its significance in the understanding, prevention, and management of diseases from an Ayurvedic perspective.

OBJECTIVES

1. To comprehensively understand the concept and fundamental principles of **Shatkriyakala**.
2. To evaluate the clinical significance of **Shatkriyakala** in the diagnosis and progression of diseases.
3. To examine the role of **Shatkriyakala** in the pathogenesis, early detection, prevention, and therapeutic management of various disorders.

MATERIALS AND METHODS

Literature Review

The present review is based on an extensive survey of classical Ayurvedic literature. Relevant information pertaining to **Shatkriyakala** was collected primarily from Sushruta Samhita and Ashtanga Hridaya, along with other authentic reference texts and published scientific literature where appropriate. The collected data were systematically compiled, critically reviewed, and analytically interpreted to provide a comprehensive understanding of the concept. The findings were further synthesized to draw meaningful conclusions regarding the clinical relevance and application of **Shatkriyakala** in disease prevention and management.

OBSERVATIONS AND RESULTS

1. Sanchaya Avastha (Stage of Accumulation)

Sanchaya represents the initial stage of Shatkriyakala, characterized by the accumulation of the Doshas in their respective physiological sites.^[8] During this stage, the aggravated Doshas remain localized and have not yet acquired sufficient strength to spread to other parts of the body.^[9] Since the pathological process is confined to its site of origin, therapeutic intervention at this stage is considered highly effective and offers the greatest opportunity to prevent disease progression.

One of the characteristic features of Sanchaya Avastha is the development of a natural aversion to factors that further aggravate the accumulated Dosha and a preference for substances or regimens possessing opposite qualities. This physiological response reflects the body's inherent mechanism to restore Doshic equilibrium. For example, an individual experiencing Kapha Sanchaya may develop a dislike for sweet, heavy, and unctuous foods while preferring light, pungent, or bitter substances that help pacify Kapha.^[10]

The accumulation of Doshas may occur due to Kala Swabhava (seasonal or natural influences) or Trividha Hetu (three principal etiological factors), namely Prajnaparadha (intellectual error), Asatmendriyarth Samyoga (improper utilization of the sense organs), and Parinama/Kala (the influence of time and seasonal changes). These factors gradually disturb the physiological balance of the Doshas, leading to their localized accumulation.

Although clinical manifestations during this stage are generally mild, they provide important diagnostic clues. Vata Sanchaya may present with abdominal distension or gaseous fullness, Pitta Sanchaya may manifest as mild yellowish discoloration of the eyes, nails, or urine, and

Kapha Sanchaya commonly produces a feeling of heaviness, lethargy, and reduced physical activity.

If the accumulated Doshas are not recognized and appropriately managed, they gradually gain strength and progress to the subsequent stages of Shatkriyakala, eventually resulting in disease manifestation. Therefore, early identification of Sanchaya Avastha and the timely administration of suitable dietary, lifestyle, and therapeutic measures are essential for restoring Doshic balance and preventing further pathological progression.

2. Prakopa Avastha (Stage of Aggravation)

Prakopa Avastha is the second stage of Shatkriyakala, during which the accumulated Doshas undergo further aggravation while remaining confined to their respective physiological sites. Although the Doshas have not yet disseminated throughout the body, their increased intensity marks the progression of the pathological process. According to the classical commentary of Dalhana, this stage represents the “liquefaction” or activation of the previously accumulated Doshas, making them more dynamic and capable of progressing to subsequent stages if left untreated.

Prakopa is broadly classified into two types:^[11]

a. Chaya Prakopa

Chaya Prakopa refers to the physiological aggravation of Doshas following their natural accumulation due to seasonal variations (Ritu or Kala Swabhava). This process is considered a normal biological phenomenon. However, if appropriate seasonal dietary and lifestyle measures are not adopted, the aggravated Doshas may give rise to pathological changes and disease. To prevent such progression, Ayurveda advocates the practice of Ritucharya (seasonal regimen), which helps maintain Doshic equilibrium and supports physiological adaptation to seasonal changes.^[12]

b. Achaya Prakopa

Achaya Prakopa is the sudden or direct aggravation of a Dosha without passing through the preceding stage of physiological accumulation (Sanchaya). This type of aggravation occurs due to the immediate influence of potent etiological factors, such as inappropriate diet, excessive physical exertion, emotional stress, or unhealthy lifestyle practices. For example, excessive physical activity may produce an immediate aggravation of Vata Dosha, resulting in symptoms without the gradual process of seasonal accumulation. This form of Prakopa

highlights the significant role of modifiable environmental and behavioral factors in the initiation of disease.

Recognition of Prakopa Avastha is clinically important because timely intervention through appropriate dietary regulation, lifestyle modification, and Dosha-specific therapeutic measures can arrest disease progression and prevent the transition to the subsequent stages of Shatkriyakala.

Table 1: Seasonal Stages of Dosha (Ritu Kriyakala)

Dosha	Chaya (Accumulation)	Kopa (Aggravation)	Prashama (Pacification)
Vata	Grishma	Varsha	Sharad
Pitta	Varsha	Sharad	Hemanta
Kapha	Shishira	Vasanta	Grishma

Table 2: Dosha Prakopa Karanas.

(a) Causes of Vata Prakopa

Category	Causes of Vata Aggravation (Vata Prakopa Karanas)
Aharaja (Dietary Factors)	Excessive intake of Katu (pungent), Tikta (bitter), Kashaya (astringent), Ruksha (dry), Laghu (light), and Sheeta (cold) foods; consumption of excessively dry foods; Anashana (fasting), Adhyashana (eating before the previous meal is digested), and Vishamashana (irregular eating habits).
Viharaja (Lifestyle Factors)	Ativiyayama (excessive physical exercise), Aptarpana (undernourishment), Bhagna (trauma/fracture), Prapatana (fall or injury), Jagarana (night vigil), and Vegadharana (suppression of natural urges).
Kalaja (Time/Seasonal Factors)	Aggravation of Vata during the Varsha Ritu (rainy season), evening, old age (Vridhnavastha), and at the end of the digestive process (post-digestive phase).

(b) Causes of Pitta Prakopa

Category	Causes of Pitta Aggravation (Pitta Prakopa Karanas)
Aharaja (Dietary Factors)	Excessive intake of Katu (pungent), Amla (sour), Lavana (salty), Ushna (hot), and Tikshna (sharp/penetrating) foods; frequent consumption of fish, goat meat, curd (dadhi), Madya (alcoholic beverages), and other Pitta-provoking food substances.
Viharaja (Lifestyle Factors)	Krodha (anger), Shoka (grief), Bhaya (fear), and Surya Santapa (prolonged exposure to sunlight or heat).
Kalaja (Time/Seasonal Factors)	Aggravation of Pitta during hot weather, the middle stage of digestion, midday, midnight, and middle age. Physiologically, Pitta aggravation is most prominent during Sharad Ritu (autumn season).

(c) Causes of Kapha Prakopa

Category	Causes of Kapha Aggravation (Kapha Prakopa Karanas)
Aharaja (Dietary Factors)	Excessive intake of Madhura (sweet), Amla (sour), Lavana (salty), Snigdha (unctuous/oily), Guru (heavy), and Ushna (hot) food substances.
Viharaja (Lifestyle Factors)	Diwaswapna (daytime sleep), Avyayama (lack of physical exercise), Atisantarpana (over-nourishment or excessive intake of food), and Adhyashana (eating before the previous meal is completely digested).
Kalaja (Time/Seasonal Factors)	Physiological aggravation of Kapha occurs during Vasanta Ritu (spring season), early morning, immediately after meals, and childhood (Balyavastha).

3. Prasara Avastha (Stage of Dissemination)

Prasara Avastha is the third stage of Shatkriyakala, characterized by the dissemination of aggravated Doshas from their normal physiological sites to other parts of the body through the Srotas (body channels). At this stage, the Doshas acquire increased mobility and are no longer confined to their original locations. Their movement is primarily facilitated by Vata Dosha, which acts as the driving force for the spread of pathological factors within the body.

The disseminating Doshas may migrate individually or in combination with other Doshas and Rakta, resulting in various patterns of pathological spread. Classical Ayurvedic literature describes fifteen types of Prasara, based on the different combinations of the involved Doshas and Rakta:

1. Vata Prasara 2. Pitta Prasara
3. Kapha Prasara 4. Rakta Prasara
5. Vata–Pitta Prasara 6. Vata–Kapha Prasara
7. Vata–Rakta Prasara 8. Pitta–Kapha Prasara
9. Pitta–Rakta Prasara 10. Kapha–Rakta Prasara
11. Vata–Pitta–Kapha Prasara 12. Pitta–Kapha–Rakta Prasara
13. Vata–Pitta–Rakta Prasara 14. Vata–Kapha–Rakta Prasara
15. Vata–Pitta–Kapha–Rakta Prasara^[13]

During this stage, the disseminated Doshas circulate through various channels and tissues, increasing the likelihood of interaction with susceptible sites (Khavaigunya). The direction and pattern of their movement (Gati) determine the subsequent localization of pathology and influence the progression of disease. Therefore, Prasara Avastha represents a critical transitional phase between localized Doshic aggravation and the establishment of disease at a

specific site. Early recognition and timely therapeutic intervention at this stage can effectively interrupt disease progression and prevent further complications.

Table 3: Directions (Gati) of Dosha Movement During Prasara Avastha.

Gati (Direction)	Description and Clinical Manifestations
Urdhwa Gati (Upward Movement)	Upward movement of the aggravated Doshas may result in disorders affecting the upper part of the body, including vomiting (Chardi), cough (Kasa), hiccups (Hikka), and diseases involving the ear, nose, throat, and eyes.
Adho Gati (Downward Movement)	Downward migration of the Doshas may manifest as diarrhoea (Atisara), Gridhrasi (sciatica), Bhagandara (fistula-in-ano), and other disorders affecting the lower part of the body.
Tiryak Gati (Transverse/Lateral Movement)	Lateral or transverse spread of the Doshas primarily involves the skin and peripheral tissues, leading to the development of various cutaneous disorders (Twak Vikaras) and related conditions.

Roga Marga (Pathways of Disease Manifestation)

Similar to the Gati (direction of movement) of the Doshas, Ayurveda classifies the pathways of disease manifestation (Roga Marga) into three categories based on the site of localization of the aggravated Doshas. The affected pathway influences the clinical presentation, severity, and therapeutic approach.

1. Abhyantara Roga Marga (Internal Pathway)

Abhyantara Roga Marga refers to the involvement of the internal organs and the Kosta (visceral cavity). When aggravated Doshas localize within the gastrointestinal tract and other internal structures, they give rise to diseases such as Chardi (vomiting), Atisara (diarrhoea), Grahani, Vibandha (constipation), and other disorders of the Mahasrotas (gastrointestinal system). These conditions are categorized under the internal pathway of disease.

2. Bahya Roga Marga (External Pathway)

Bahya Roga Marga involves the localization of aggravated Doshas in the peripheral tissues (Dhatus) and external body structures. This pathway is associated with diseases affecting the skin, blood, and superficial tissues. Clinical conditions such as Galaganda (goitre), Gandamala (cervical lymphadenopathy), Sthaulya (obesity), Napumsakata (impotence), and various Twak (skin) and Rakta (blood) disorders are included in this category.

3. Madhyama Roga Marga (Intermediate Pathway)

Madhyama Roga Marga refers to the involvement of vital structures, including Marma (vital organs), Asthi (bones), and Sandhi (joints). Localization of aggravated Doshas in these

tissues results in comparatively severe disorders, such as Hridroga (cardiovascular diseases), Sandhigata Vata (degenerative joint disorders), and other diseases affecting the musculoskeletal and vital systems. Since this pathway involves essential anatomical structures, diseases arising through Madhyama Roga Marga are generally more difficult to manage and require timely therapeutic intervention.

Table 4: Clinical Features of Dosha Prasara Avastha.

Dosha	Clinical Features (Prasara Lakshanas)
Vata	Vimarga Gamana (abnormal movement of Vata), Atopa (abdominal distension with flatulence and gurgling bowel sounds).
Pitta	Ushma (sensation of excessive heat), Paridaha (burning sensation), Chosha (sensation of internal dryness or squeezing).
Kapha	Aruchi (loss of appetite), Chardi (vomiting), Angasada (generalized heaviness, fatigue, and reduced physical activity).

4. Sthanasamshraya Avastha (Stage of Localization)

Sthanasamshraya Avastha is the fourth stage of Shatkriyakala, during which the disseminated Doshas localize at a susceptible site (Khavaigunya) within the body. Localization occurs only when the migrating Doshas encounter structurally or functionally weakened tissues or channels. At this stage, the interaction between the vitiated Doshas and susceptible Dushyas results in Dosha–Dushya Sammurchana, marking the initiation of disease at a specific anatomical site.

The circulating Doshas become lodged in weakened Srotas due to Srotovaigunya (defects or abnormalities of the body channels), leading to localized pathological changes. Clinically, this stage is characterized by the appearance of Purvarupa (prodromal or premonitory symptoms), which indicate the impending manifestation of a particular disease. Early recognition of these subtle signs allows timely therapeutic intervention and may prevent the progression to overt disease.

5. Vyakta Avastha (Stage of Manifestation)

Vyakta Avastha is the fifth stage of Shatkriyakala, in which the disease becomes fully expressed with characteristic clinical features. According to the classical commentator Dalhana, this is the stage at which the disease manifests in its recognizable form. The signs and symptoms become sufficiently distinct to establish a definitive clinical diagnosis and determine the nature of the underlying pathology.^[14]

6. Bheda Avastha (Stage of Differentiation)

Bheda Avastha represents the final stage of disease progression. During this phase, the disease undergoes differentiation into its specific subtypes based on the predominance of the involved Doshas and the extent of tissue involvement. Complications may develop, and the disease often progresses to a chronic (Chirakari) or, in severe cases, an incurable (Asadhya) state if appropriate management is delayed. Accurate assessment of this stage is essential for determining prognosis and selecting suitable therapeutic strategies.

Table 5: Stage-wise Therapeutic Approach According to Shatkriyakala.

S. No	Stage of Shatkriyakala	Recommended Therapeutic Measures
1	Sanchaya Avastha (Stage of Accumulation)	Nidana Parivarjana (elimination of causative factors) along with appropriate Shamana Chikitsa (pacifying therapy) to restore Dosha equilibrium.
2	Prakopa Avastha (Stage of Aggravation)	Vata: Vatanulomana (normalization of Vata movement). Pitta: Pitta Shamana and Mridu Virechana (mild therapeutic purgation). Kapha: Agni Deepana (enhancement of digestive fire), Pachana (Ama digestion), and Kapha-hara measures.
3	Prasara Avastha (Stage of Dissemination)	Vata: Basti (medicated enema). Pitta: Virechana (therapeutic purgation). Kapha: Vamana (therapeutic emesis).
4	Sthanasamshraya Avastha (Stage of Localization)	Samprapti Vighatana (interruption of the disease pathogenesis) through appropriate Dosha-specific therapeutic interventions.
5	Vyakta Avastha (Stage of Manifestation)	Symptomatic management (Lakshanika Chikitsa) along with treatment based on established Chikitsa Siddhantas (Ayurvedic principles of management).
6	Bheda Avastha (Stage of Differentiation/Complication)	Dosha Pratyanka Chikitsa (Dosha-specific therapy) combined with Vyadhi Pratyanka Chikitsa (disease-specific treatment), considering the stage, severity, and complications of the disease.

DISCUSSION

In their physiological state of equilibrium, the three Doshas function as Tridhatu, maintaining normal bodily functions and preserving health. However, due to continuous exposure to internal and external factors, the Doshas are prone to imbalance. Internal factors such as improper dietary habits, unhealthy lifestyle practices, and non-adherence to Dinacharya (daily regimen) and Ritucharya (seasonal regimen), along with environmental influences, contribute to Doshic vitiation. Once this imbalance begins, the pathological

process progresses through a series of well-defined stages collectively known as Shatkriyakala.

The concept of Shatkriyakala provides a systematic framework for understanding the sequential development of disease, beginning with subtle Doshic imbalance and culminating in fully manifested pathology. The initial stages, Sanchaya and Prakopa, are characterized by the accumulation and aggravation of Doshas before any tissue involvement occurs. During Prasara, the aggravated Doshas disseminate throughout the body and subsequently localize at susceptible sites (Khavaigunya) during Sthanasamshraya, where Dosha–Dushya Sammurchana takes place. This stage is marked by the appearance of Purvarupa (prodromal symptoms), which provide an opportunity for early diagnosis and preventive intervention.

As the disease progresses to Vyakta Avastha, characteristic clinical features become evident, allowing definitive diagnosis. At this stage, treatment is planned according to the predominance of the involved Doshas, affected Dushyas, Srotas, disease stage, and other pathological factors. If appropriate management is delayed or ineffective, the disease advances to Bheda Avastha, where complications, chronicity, or an unfavourable prognosis may develop.

The principle of Shatkriyakala highlights the preventive and predictive approach of Ayurveda by emphasizing the recognition of disease before the appearance of overt clinical manifestations. Timely identification of the stage of disease and appropriate therapeutic intervention can arrest disease progression, reduce the risk of complications, improve treatment outcomes, and decrease the overall burden of illness.

CONCLUSION

Shatkriyakala is one of the fundamental and distinctive concepts of Ayurveda, providing a comprehensive understanding of the natural history of disease. It enables physicians to recognize pathological changes at their earliest stage, thereby facilitating timely diagnosis, prevention, and appropriate therapeutic intervention. By identifying the stage of Doshic involvement and implementing stage-specific management, disease progression can be effectively arrested before irreversible tissue damage or complications occur.

The principles described by Sushruta emphasize that successful management depends upon the physician's ability to assess the condition of the vitiated Doshas and select the appropriate

line of treatment according to the stage of Shatkriyakala. Therefore, a thorough understanding and clinical application of this concept not only enhance diagnostic accuracy but also contribute to effective disease prevention, rational treatment planning, improved prognosis, and successful clinical practice.

REFERENCES

1. Kotur SB, Kotur S. A Textbook of Ayurvedic Physiology. Varanasi: Chaukhambha Orientalia.
2. Shastri AD, editor. Sushruta Samhita. Varanasi: Chaukhambha Sanskrit Prakashan; Sutrasthana, Chapter 21.
3. Tripathi R, editor. Ashtanga Sangraha. Varanasi: Chaukhambha Publication; Sutrasthana, Chapter 12.
4. Dwarakanath C. Introduction to Kaya Chikitsa. Varanasi: Chaukhambha Orientalia, p. 109.
5. Lad VD. Textbook of Ayurveda: A Complete Guide to Clinical Assessment. Vol. II. The Ayurvedic Press, 2006; 190–202.
6. Aggarwal BB, Prasad S, Kannappan R. Ayurvedic medicine for prevention of chronic diseases: Reverse pharmacology and bedside-to-bench approach, 2011–2012.
7. Sumantran VN, Tillu G. Cancer, Inflammation and Insights from Ayurveda, 2012.
8. Shastri KA, editor. Sushruta Samhita with Ayurveda Tattva Sandipika Commentary. Part I. Varanasi: Chaukhambha Sanskrit Prakashan; Sutrasthana, Chapter 21: 90.
9. Vaidya SL, editor. Ashtanga Hridaya of Vagbhata. Varanasi: Motilal Banarasidass; 2005. Sutrasthana, Chapter 12: 101.
10. Shastri AD, editor. Sushruta Samhita. Varanasi: Chaukhambha Sanskrit Prakashan; Chapter 21: 90.
11. Vagbhata. Ashtanga Hridaya. Paradkar HS, editor. Varanasi: Chaukhambha Sanskrit Sansthan; Sutrasthana 3/18: 42.
12. Chaple J, Kalpakwar S. Review article on Shatkriyakala: A novel concept for conservation of health.
13. Byadgi PS. Ayurvedic Vikriti Vigyanam and Roga Vigyanam. Varanasi: Chaukhambha Sanskrit Sansthan, 122.
14. Shastri AD, editor. Sushruta Samhita with Ayurveda Tattva Sandipika Commentary. Varanasi: Chaukhambha Sanskrit Sansthan; Sutrasthana 21/34.