

THE EFFECT OF VIRECHANA KARMA AND SHAMANA CHIKITSA IN DADRU KUSHTHA WITH SPECIAL REFERENCE TO TINEA CORPORIS: A CASE REPORT

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ABSTRACT

Dadru is a type of *Kushtha* (skin disorder) described in Ayurveda, characterized by circular lesions, redness (*raga*), itching (*kandu*), and elevated margins. Acharya Charak and Acharya Sushrut have classified *Dadru* under *Kshudra Kushtha* and *Mahakushtha* respectively with predominance of *Kapha–Pitta dosha*. Clinically, above mentioned features closely resembles clinical features of *Tinea corporis* which refers to a superficial dermatophytic infection affecting the skin. Modern treatment of *Tinea corporis* often includes antifungal agents, which may have limitations such as recurrence and side effects. Ayurveda offers a holistic approach focusing on the elimination of *doshas*, especially *Pitta* and *Kapha*, which are predominantly involved in *Dadru Kushtha*. A 36-year-old male patient presented with chronic, recurrent, pruritic, annular erythematous lesions over the groin, thigh, and abdominal region for four months, previously treated

unsuccessfully with conventional therapy. Based on classical Ayurvedic parameters, the condition was diagnosed as *Dadru Kushtha* with *Kapha–Pitta* predominance. The management included a combined *Shodhana Shamana* approach, *Virechana karma* was performed following proper *poorvakarma* to eliminate vitiated *Pitta–Kapha* and purify *Rakta dhatu* with internal formulations possessing *Kushtaghna*, *Kandughna*, *Raktashodhaka*, and *Krimighna* properties, along with external applications like *Dashang Lepa* and medicated oils. This integrative protocol addresses root pathology (*samprapti vighatana*) and symptomatic relief, adding practical clinical evidence to existing Ayurvedic literature. Marked improvement was observed within one month, with complete relief in itching and burning, significant reduction in lesion elevation and discoloration, and no adverse effects. The intervention demonstrated effective disease control with improved patient compliance and reduced risk of recurrence. This case highlights the efficacy of a classical Ayurvedic treatment protocol combining *Virechana* and *Shamana chikitsa* in the management of *Dadru Kushtha* (Tinea corporis). The approach offers a safe, sustainable, and scientifically relevant alternative for chronic dermatophytic infections, contributing valuable clinical evidence to integrative dermatological practice.

KEYWORDS: Dadru, Tinea corporis, Virechana, Kushtha, Kapha-Pitta, Shodhana, Shamana, Case report.

INTRODUCTION

Skin disorders have long been recognized in both Ayurvedic and modern medical systems due to their impact on health, hygiene, and aesthetics. Tinea corporis is a dermatophyte-induced superficial infection of the skin. Typically, lesions are erythematous, annular and scaly, with a well-defined edge and central clearing.^[1] Tinea corporis is highly prevalent worldwide. Excessive heat, high relative humidity, and fitted clothing have correlations to more severe and frequent disease.^[2] The dermatophytes responsible for tinea corporis belong to the genera *Trichophyton*, *Epidermophyton*, and *Microsporum*. Over the past seven decades, *Trichophyton rubrum* has consistently been the leading causative species of dermatophyte infections. *T. rubrum* accounts for 80% to 90% of the pathogenic strains.^[3] While conventional medicine offers antifungal treatments along with glucocorticosteroids, issues such as drug resistance, recurrence, and side effects are common, prompting the need for a more holistic and sustainable approach.

In Ayurveda, *Dadru* is classified under *Kshudra Kushtha* in classical texts like *Charaka Samhita* while as a *Mahakushtha* in *Sushruta Samhita*.^{[4][5]} It is predominantly a *Kapha-Pitta dosha*^[6] vitiated disorder characterized by *kandu* (intense itching), *raga* (redness), *pidaka* (eruptions), and *utsanna mandala* (raised circular patches).^[7] These clinical features of *Dadru Kushtha* are strikingly similar to the presentation of *Tinea corporis*, allowing for a comparative and integrative approach to diagnosis and management.

The Ayurvedic line of treatment focuses on breaking the *samprapti* (pathogenesis) through *Shodhana* (purificatory therapies like *Vamana*, *Virechana*) and *Shamana* (palliative measures), along with the use of herbal formulations and topical applications such as *Lepa* and *Kashaya* prepared from antifungal and *krimighna* herbs. These not only alleviate the symptoms but also address the root cause of the disease by restoring *dosha* balance.

This article aims to explore the correlation between *Dadru Kushtha* and *Tinea corporis*, and evaluate the efficacy of Ayurvedic interventions in its management based on classical references and clinical experiences.

Need of study: There is a paucity of well-documented Ayurvedic case studies demonstrating the role of classical *Shodhana* procedures like *Virechana*, along with rational *Shamana* therapy, in the management of chronic and recurrent *Tinea corporis*. Hence, the present case was undertaken to evaluate the clinical efficacy of a classical Ayurvedic treatment protocol and to contribute evidence-based documentation to the existing scientific and Ayurvedic literature.

Present Case Report

A 36-year-old male patient, who is an industry worker, came to the outdoor patient department of the Kayachikitsa department on 18/11/2024 of D.M.M. Ayurved Mahavidyalaya and L.K.Ayurved Rugnalaya, Yavatmal, Maharashtra with complaints i.e. Elevated ring-like patches over the groin, upper thigh, around umbilical region, lower abdominal region, Severe itching at the patches that get worsen at night, Itching followed by burning, Spots with reddish discoloration in and around them develop gradually, one after the other since 4 months, and no relief even by allopathic treatment.

Past History

No history of similar complaints in past and patient not having any systemic/chronic major illness.

Past Treatment History

Tb. Levocet, Tb fluconazole OD for 15 days before 1 month prior to patient approached to our hospital. This treatment relieves symptoms temporarily and recurrence occurs.

Family history

No any family history of such disease.

Personal history

Marital status— Married

Addiction—Alcohol

Sleep—Normal

Bowel—Regular one time/day

Diet—Non vegetarian

Medical history - No drug allergy history

General Examination

Pulse – 78/min

BP – 120/70 mm of Hg

R.R. – 18/min

Wt. – 51 kg

Ht. -153cm

BMI – 21.7

Systemic Examination

RS – B/L Clear

CVS – S1 S2 Heard Normal

CNS – Conscious and Well Oriented

P/A – Soft, Non tender, No signs of organomegally.

Ashtavidha Pariksha

Nadi- 78/min

Mala – *Samyak*

Mutra - Samyak

Jivha – Niram

Shabda – Spashta

Sparsha – Ruksha

Druka – Prakrut

Akruti – Madhyam

Local Examination

Joined 3-4 elevated circular ring-like, reddish coloured patches over the groin, upper thigh, around umbilical region, lower abdominal region with no discharge from the lesion.

Samprapti Ghatak

Dosha- Tridoshaj (Kapha-Pitta Dominance)

Roga marga: Bahya

Dushya- Twaka, Rakta, Mamsa, Lasika

Udbhavsthana: Amashaya

Vyaktasthana: Twacha

Rog swabhav: Chirkari

Strotas -Rasavaha, Raktavaha

Srotodushti prakara: Sanga

Sadhya Sadhyata: Sadhya

Agni – Mandagni

Dashvidha Pariksha

Dushya : Twaka, Rakta, Mamsa, Lasika

Desha : Sadharana, Twacha

Bala : Madhyam

Kala : Hemant Rutu, Chir kala

Anala : Mandagni

Prakruti : Pitta pradhan Tridoshaj

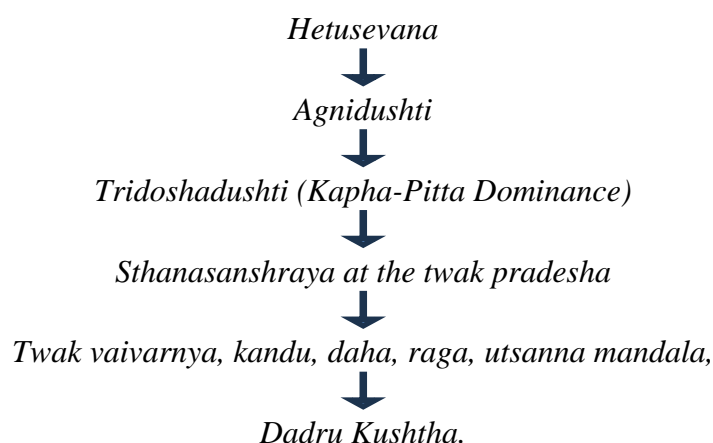
Vaya : Madhyam

Satwa : Alpa

Satmya : Madhur rasatmak laghu ahar, Shit ahar vihar

Aahar : Abhyavaran shakti : Alpa

Jaran shakti : Madhyam

Samprapti**Diagnosis: Dadru Kushtha****Chikitsa*****Bahudoshaha Sansodhyaha Kusthi Bahushonurakshata Pranana (Ch.Ch.7/41)*^[8]**

Dadru Kushtha is described in classical Ayurvedic texts as a *Kapha–Pitta* predominant skin disorder requiring *Shodhana* and *Shamana chikitsa*. Based on *Charaka* and *Sushruta* principles, this episode of care included *Virechana karma* to eliminate vitiated *doshas* and purify *Rakta dhatu*, followed by internal *Kushtaghna* and *Raktashodhaka* medicines with external *Lepa* and *Taila* application. The treatment was planned in phases— *Poorvakarma*, *Pradhana karma*, *Paschat karma*, and *Shamana* therapy. The total duration of treatment was one month.

Table 1: Shamana Chikitsa (Internal and External Medications) Administered During the Study.

Sr. No.	Formulation	Dose	Duration	Frequency	Anupana
1	<i>Kaishor Guggul</i>	500mg	After meal	Twice a day	Luke warm water
2	<i>Arogyavardhini vati</i>	250mg	After meal	Twice a day	Luke warm water
3	<i>Khadiradi vati</i>	250mg	After meal	Twice a day	Luke warm water
4	<i>Gandhak Rasayana</i>	250mg	After meal	Twice a day	Luke warm water
5	<i>Sariva Manjishtha</i> <i>Haridra Khadir</i>	1 gram each churna	After meal	Twice a day	Luke warm water
6	<i>Panchsakar churna</i>	3 gram	At bed time (After meal)	HS	Luke warm water
7	Purnil oil+ Dermocare oil	As required	-	Once a day	For local application
8	<i>Khadir + Guduchi bharad kwath</i>	20ml	Before meal	Twice a day	Luke warm Water
9	<i>Dashang Lepa</i>	As required (2-3mm)	-	Once a day	For local application

Shodhana Chikitsa (virechana karma)***Poorvakarma***

Deepana Pachana:- given with *Aampachak vati* 250mg for 5 days.

Snehapana:- *Snehapana* was administered as a part of *Poorvakarma* prior to *Virechana karma* using *Panchatikta Ghrita*, considering the *Kapha–Pitta* predominance and involvement of *Rakta dhatu* in *Dadru Kushtha*. The *ghrita* was given early morning on empty stomach in gradually increasing doses for six consecutive days to achieve proper *dosha utkleshana*. The dose was started at 25 ml on the first day and increased sequentially to 50 ml, 60 ml, 70 ml, 85 ml, and 100 ml based on the patient's digestive capacity and tolerance. The patient was advised to take only warm water during the *Snehapana* period and to avoid heavy, oily, spicy, and incompatible food items. Adequate signs of *Samyak Snigdha Lakshana* such as *snehodvega*, *mridu mala pravrutti*, *twak snigdhata*, and improvement in appetite were observed, indicating proper internal oleation.

Bahya Snehana: *Bahya Snehana* was performed as part of *Poorvakarma* prior to *Virechana Karma* using warmed *Til Taila*. Whole-body *Abhyanga* was done for 20–30 minutes daily for two consecutive days, following *Anuloma gati*.

Bashpa Swedana: Followed by *snehana*, the patient was subjected to steam sudation using a *Swedana yantra* for 10–15 minutes daily for two consecutive days. Care was taken to protect the head and eyes, and mild to moderate sweating was induced until the appearance of *Samyak Swinna Lakshana* such as lightness of the body (*laghuta*), relief in stiffness, and mild perspiration.

Pradhan karma

Virechana Karma was performed as the principal *Shodhana* therapy considering *Kapha–Pitta* predominance and *Rakta dhatu* involvement in *Dadru Kushtha*. After adequate *Poorvakarma*, 40 ml of freshly prepared *Virechana Kashaya* containing *Kutaki*, *Aragvadha majja*, *Haritaki*, *Draksha*, and *Eranda Taila* was administered early morning on an empty stomach. Lukewarm water was given intermittently. The patient passed eight *vegās* with *Madhyama Shuddhi*, without any complications.

Paschat karma

Sansarjana Kram Post-procedure, *Sansarjana Krama* was followed for seven days to restore *Agni* and maintain *dosha* balance.

Criteria For Assessment

Clinical assessment was done using a four-point grading scale (0–3) for major symptoms of *Dadru Kushtha*. Scores before and after treatment were compared to evaluate therapeutic response.

Table 2: Criteria for Assessment of Clinical Symptoms.

Sr. No.	Symptoms	Grade 0	Grade 1	Grade 2	Grade 3
1	Elevated ring-like patches	Absent	Mild	Moderate	Severe
2	Itching(<i>Kandu</i>)	Absent	Mild	Moderate	Severe
3	Burning(<i>Daha</i>)	Absent	Mild	Moderate	Severe
4	Discolouration(<i>Vaivarnya</i>)	Absent	Mild	Moderate	Severe

RESULTS

Table 3: Comparative Assessment of Clinical Symptoms Before and After Treatment.

Sr. No.	Symptom	Before	After
1	Elevated ring-like patches	3	0
2	Itching	3	0
3	Burning	3	0
4	Discolouration	3	1

RESULT

Before T/t



Image 1

After T/t



Image 3



Image 2



Image 4

The before-treatment image 1 and image 2 show elevated, erythematous, annular lesions with active margins and discoloration. After treatment, in image 3 and image 4 there is marked

reduction in lesion elevation and redness with near-normal skin appearance. Itching and burning subsided completely, and only mild residual pigmentation remained. This demonstrates effective resolution of Dadru Kushtha following Ayurvedic management.

DISCUSSION

Virechana Karma^[9]

1. Dosha Elimination

Since *Dadru* involves *Pitta-Kapha* dominance, *Virechana* helps in pacifying and eliminating these *dosha* through the gastrointestinal tract. This leads to a reduction in systemic inflammation and hypersensitivity responses.

2. *Shodhana* (Purificatory) Action

Virechana removes *ama* (toxins) and purifies the *rakta dhatu* (blood tissue), which is considered a key element in skin pathology. It addresses the root cause of recurrence by detoxifying deeper tissues.

3. Improvement in Skin Health

After *Virechana*, this patient showed reduced itching, inflammation, and lesion size. The skin texture improves, and there is a noticeable decline in lesion spread.

4. Supportive Role of *Pathya-Apathya*

Along with *Virechana*, strict adherence to *pathya* (wholesome diet and lifestyle) enhances results and prevents relapse. Avoidance of *Kapha-Pitta* aggravating factors (e.g., oily, spicy food, excessive exposure to heat and moisture).

Kaishor Guggul^[10] is a well-established Ayurvedic formulation widely used in the management of *Dadru Kushtha* and other fungal skin disorders. It exhibits potent *Raktashodhana* and anti-inflammatory actions while effectively pacifying *Pitta* and *Kapha* doshas. Ingredients such as *Guggul*, *Guduchi*, *Manjishtha*, and *Triphala* help alleviate itching, erythema, and scaling, enhance digestive function, and strengthen immunity, thereby reducing the likelihood of recurrence.

Gandhak Rasayana^[11] is highly effective in dermatological conditions including *Tinea corporis* due to its *madhura*, *amla*, and *kashaya rasa* along with properties such as *Kushtaghna*, *Kandughna*, *Dahaprashamana*, *Raktashodhaka*, *Vranaropaka*, *Twachya*, and *Krimighna*. The purified sulphur component possesses proven antimicrobial activity and aids

in reducing infection, irritation, and inflammation while supporting skin regeneration and digestive health.

Arogyavardhini Vati^[12] plays a crucial role in correcting *Grahani Vikruti*, which is considered a fundamental pathological factor in *Kushtha Vyadhi*. Impaired digestive and metabolic function leads to *Ama* formation and subsequent *Dhatu Dushti*. *Arogyavardhini Vati* helps normalize *Grahani* and *Pakwashaya* functions, thereby improving digestion, eliminating metabolic toxins, and supporting systemic detoxification.

Khadiradi Vati^[13] is beneficial in *Dadru Kushtha* owing to its antiseptic, anti-inflammatory, and blood-purifying properties. The presence of *Khadira*, *Kattha*, and *Javitri* helps in reducing itching, healing lesions, and correcting *Pitta–Kapha* imbalance. It also supports oral hygiene and systemic purification.

Panchsakar Churna^[14] acts as a mild laxative and aids in bowel regulation, removal of *Ama*, and balancing *Vata* and *Pitta doshas*. In chronic skin disorders like *Dadru*, it serves as a supportive therapy by improving digestion and facilitating detoxification, especially during and after *Shodhana* procedures.

Dashang Lepa^[15], composed of ten herbal drugs such as *Haridra*, *Daruharidra*, *Musta*, *Rakta Chandana*, and *Ushira*, possesses antifungal, anti-inflammatory, antiseptic, and cooling properties. Topical application of *Dashang Lepa* provides significant relief from itching, erythema, burning sensation, and lesion elevation in *Dadru Kushtha*.

Sariva^[16] is indicated in *Kushtha Vyadhi* due to its effectiveness in alleviating *Daha* and improving *Vaivarnya*. Acharya Charaka has included *Sariva* in *Dahaprasamana* and *Varnya Mahakashaya*, highlighting its *Raktapachaka* and complexion-enhancing actions.

Manjishtha^[17], described by Charaka in *Varnya* and *Vishaghna Mahakashaya* and by Sushruta in *Pitta Shamana Mahakashaya*, acts as a potent *Kaphapittashamaka*. Its *Tikta*, *Kashaya*, and *Madhura rasa* make it effective in *Kushthaghna* and *Krimighna* actions, particularly useful in *Dadru Kushtha*.

Khadira^[18] is recognized as a prime *Kushtaghna dravya* in classical texts. Its *Tikta* and *Kashaya rasa* with *Sheeta virya* render it effective in pacifying *Pitta* and *Kapha doshas* and alleviating *Kandu*, making it highly beneficial in skin disorders.

Guduchi^[19], possessing *Tikta rasa* and *Madhura vipaka*, pacifies *Pitta dosha* and purifies *Rakta dhatu*. Described by Charaka in *Dahaprashamana Mahakashaya*, it also acts as a *Rasayana* and supports overall tissue nourishment and immune modulation.

Dermocare Oil: Dermocare oil is effective in skin disorders such as Tinea, eczema, and pruritic conditions due to its *Kushtaghna* property. Its constituent drugs help pacify *Tridosha*, provide moisturization, reduce inflammation, and improve skin complexion.

CONCLUSION

Dadru Kushtha, correlating closely with Tinea corporis, is a chronic and recurrent dermatological disorder requiring an approach that addresses both systemic and local pathology. The present case demonstrates that an integrative Ayurvedic treatment protocol combining *Shodhana (Virechana Karma)* and *Shamana chikitsa* is effective in disease control and prevention of recurrence. *Virechana* played a pivotal role in eliminating vitiated *Kapha–Pitta dosha* and purifying *Rakta dhatu*, thereby interrupting the disease pathogenesis.

The subsequent administration of classical *Shamana* formulations helped maintain doshic balance, improve digestive function, enhance immunity, and promote tissue healing. External therapies such as *Dashang Lepa* and medicated oils provided rapid symptomatic relief and improved patient compliance. The overall clinical outcome—marked by complete relief from itching and burning, significant reduction in lesion elevation and discoloration, and absence of adverse effects—highlights the safety, efficacy, and sustainability of this Ayurvedic treatment protocol. Further large-scale controlled studies are recommended to substantiate these findings and develop standardized therapeutic guidelines.

Patient Perspective

The patient reported significant relief from symptoms after receiving this Ayurvedic treatment. He expressed that the most troublesome complaints—severe itching and burning sensation—reduced completely within a few weeks of therapy, which greatly improved his comfort and sleep quality. The patient also observed gradual flattening of the lesions and reduction in redness and discoloration, which enhanced his confidence and daily functioning. Unlike previous treatments, he felt a sense of overall lightness and well-being after undergoing *Virechana Karma*.

The patient appreciated the holistic nature of the treatment, including dietary advice and lifestyle modifications, and did not experience any adverse effects during or after therapy. He expressed satisfaction with the sustained improvement and absence of recurrence during follow-up, and showed willingness to opt for Ayurvedic management again if required.

Informed Consent

Written informed consent was obtained from the patient prior to initiation of treatment. The patient was clearly explained the nature of the disease, treatment procedures, potential benefits, and possible risks. Consent was also obtained for the use of clinical data and photographs for academic and publication purposes, ensuring confidentiality.

REFERENCES

1. Ralston SH, Penman ID, Strachan MWJ, Hobson RP, editors. Davidson's Principles and Practice of Medicine. 23rd ed. Edinburgh: Elsevier, 2018; P 1240.
2. <https://pubmed.ncbi.nlm.nih.gov/11398256/> Taplin D. Dermatophytosis in Vietnam. *Cutis*, 2001 May; 67(5 Suppl): 19-20. PMID: 11398256.
3. Seebacher C, Bouchara JP, Mignon B. Updates on the epidemiology of dermatophyte infections. *Mycopathologia*, 2008 Nov-Dec; 166(5-6): 335-52.
4. Acharya YT Charak samhita, Vidhyotini tika, Chikitsa sthana, Chapter no. 7, Shloka no.26, Choukambha Orientalis Delhi, 2009; pp. 252.
5. Shastri AD Sushrut samhita, Ayurvedatva sandeepika, Nidana sthana, chapter no. 5, Shloka no. 5, Choukambha Orientalis Delhi, 2007; Pp. 320.
6. Acharya YT Charak samhita, Vidhyotini tika, Chikitsa sthana, Chapter no. 7, Shloka no.30, Choukambha Orientalis Delhi, 2009; pp. 253.
7. Acharya YT Charak samhita, Vidhyotini tika, Chikitsa sthana, Chapter no. 7, Shloka no.23, Choukambha Orientalis Delhi, 2009; pp. 252.
8. Agnivesha. Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta. Chikitsasthana, Kushtha Chikitsa Adhyaya (7), Shloka 41. Varanasi: Chaukhambha Surbharati Prakashan; Reprint edition, P. 452.
9. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta, Chikitsasthana, Kushtha Chikitsa Adhyaya (7). Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 451–456.
10. Sharangdhara. Sharangdhara Samhita with Dipika commentary. Madhyama khanda, Guggulu Kalpana Adhyaya (7). Varanasi: Chaukhambha Orientalia; Reprint, P. 204–206.

11. Govinda Das Sen. Bhaishajya Ratnavali with commentary. Kushtha Rogadhikara (54). Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 861–865.
12. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta, Chikitsasthana, Kushtha Chikitsa Adhyaya (7) Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 445–460.
13. Bhavmishra. Bhavprakash Nighaṇṭu. Haritaki Varga, Varanasi: Chaukhambha Bharati Academy; Reprint, P. 187–189.
14. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta sutrasthana, Virechanopakrama Adhyaya (16). Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 98–102.
15. Sushruta. Sushruta Samhita with Nibandha Sangraha commentary of Dalhana Chikitsasthana, Kushtha Chikitsa Adhyaya (9). Varanasi: Chaukhambha Orientalia; Reprint, P. 471–474.
16. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta sutrasthana, Mahakashaya Adhyaya (4). Dahaprashamana Mahakashaya. Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 64–66.
17. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta sutrasthana, Mahakashaya Adhyaya (4). Varnya Mahakashaya —Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 72–74.
18. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta sutrasthana, Mahakashaya Adhyaya (4). Kushthaghna Mahakashaya —Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 86–88.
19. Agnivesha, Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta sutrasthana, Mahakashaya Adhyaya (4). Dahaprashamana Mahakashaya —Varanasi: Chaukhambha Surbharati Prakashan; Reprint, P. 64–66.