

DRAVYA PRAYOGA IN VISARPA

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Dravyaguna.**ABSTRACT**

Dravyaguna is a unique fundamental branch in ayurveda which deals with different *dravyas* along with their application in healthy and diseased conditions. Herbs are the major sources of medicine for different types of diseases. Classical text describes the *prayoga* of these *dravyas* based on the disease conditions. *Visarpa* is a disease manifested due to the involvement of *Pittapradhana tridosha dusti*. As this disease is of acute onset and immediate spread, it should be treated in earlier stage only. It is classified into different types based on predominant dosha involved. The treatment principle includes

shodhana of vitiated *dosha* followed by different types of local applications. The clinical features of *visarpa* correlates with that of Herpes zoster which is characterized by discrete vesicles and burning discomfort in the affected dermatomes. Antiviral therapy is the main line of management in this condition. The present work tries to compile different types of *dravya prayoga* internally and externally as explained by *Brahatrayi*, *Laghutrayi* and other classical literatures along with online articles related to clinical study on *Visarpa*.

KEYWORDS: *Ayurveda*, *Visarpa*, Herpes zoster, *Virechana*, *Raktamokshana*.**INTRODUCTION**

Ayurveda classifies the diseases based on the *Srotas*. *Visarpa* is one of the diseases caused because of the vitiation of *Raktavaha Srotas* mainly involving *Pittadosha* and *Sapta dushyas*. The name *Visarpa* is due to its acute onset and rapid spread in different directions all over the body. It is called as a *daruna Vyadhi* and it spreads like *Asheevisha* (Cobra venom).^[1] *Acharya Charaka* and *Sushruta* had explained 7 types and 5 types of *Visarpa* respectively. The manifestation of *Shopha* (swelling) along with *Sphota* (Blisters) are the main symptoms

of *Visarpa*.^[2] It can be correlated to Herpes zoster Infection. Herpes zoster is the result of reactivation of the Varicella zoster virus that has lain dormant in a nerve root ganglion following Chickenpox earlier in life.^[3] Systematically conducted literature search yielded 27 studies, published between January 2011 and May 2020, reporting 3124 HZ clinical cases, with high proportions in older adults (> 50 years of age: 15.0 to 81.3%). Thoracic dermatome was consistently reported as the most frequent site affected by HZ (38.9 to 71.0 %). Post-herpetic neuralgia and secondary bacterial infections were the two most frequent complications (10.2 to 54.7% and 3.5 to 21.0% respectively).^[4] The treatment of *Visarpa* mainly aims at normalizing vitiated *pitta*. It is planned based on the site of lesion. In this disease treatment, more emphasis is given to external applications along with internal medications.

***Nidana*^[5](Etiology)**

Visarpa is a disease mainly caused because of the vitiation of *Raktavaha Srotas*. Mainly *Rakta pitta prakopaka ahara vihara bhava* will cause *Visarpa*. It is also a disease caused because of *Chardi vegadharana*.^[6]

<i>Aharaja Nidana</i>	<i>Viharaja Nidana</i>	Others
<i>Ati Amla Lavana Ahara Sevana</i> (Excessive intake of Sour and salt food)	<i>Diva swapna</i> (Day sleep)	<i>Ajeerna Ashana</i> (Taking the food prior to the digestion of previous meal)
<i>Shaka Harita sevana</i> (Intake of leafy vegetables in excess)	<i>Atyadana</i> (Exposure to sunrays in excess)	<i>Adhyashana</i> (Taking the food immediately after the meal)
<i>Dadhi</i> (curd)- <i>Amla</i> (Sour)- <i>Mastu</i> (The liquid portion in the upper part of the curd)- <i>Shukta</i> (Vinegar)- <i>Sura</i> (Alcoholic drinks)- <i>Sauveera</i> (A sour drink prepared of dehusked barley) <i>Atisevana</i>	<i>Karma Atisevana</i> (Excessive physical work)	<i>Viruddha ashana</i> (Taking incompatible food)
<i>Kurchika</i> (Inspissated milk)- <i>Kilata</i> (Cheese)- <i>Mandaka</i> (immature curd) <i>Sevana</i>	-	<i>Visha – Vata- Agni dosha</i> (Exposure to poison, strong wind and fire)
<i>Tila</i> (<i>Sesamum indicum</i> L.) – <i>Masha</i> (<i>Vigna mungo</i> L.)- <i>Kulatha</i> (<i>Dolichos biflorus</i> Linn.)- <i>Taila</i> (different types of oil)- <i>Lashuna</i> (<i>Allium sativum</i> L.) <i>sevana</i>	-	<i>Kshata</i> (Injury).

Sapta dushyas* involved in *Visarpa Samprapti

Rakta (Blood), *Laseeka* (Lymph), *Twak* (Skin), *Mamsa* (Flesh), *Tridosha* (*Vata*, *Pitta* and *Kapha*)

Samprapti

Nidana Sevana – Pittapradhana Tridosha Dusti- Ashraya in Twak, Rakta, Mamsa and Laseeka – Leading to Twagashrita, Abhyantarashrita and Ubhayashrita Visarpa based on its ashraya in Twak, Abhyantara Dhatu - Both of these producing Vishruta, Anunnata Shopha.

Samprapti Ghataka^[7]

- *Dosha- Pitta Pradhana Tridosha*
- *Dushya- Rakta, Mamsa, Laseeka, Twak*
- *Agni- Jataragni and Dhatwagni*
- *Agnidusti- Mandagni*
- *Srotas- Raktavaha Srotas*
- *Srotodusti- Sanga followed by Vimarga gamana*
- *Adhistana- Twak*
- *Udbhava Sthana- Amapakvashaya*
- *Sanchara Sthana- Twak and other Dhatus*
- *Vyaktha Sthana- Twak*
- *Vyadhi Swabhava- Ashukari*
- *Roga marga- Bahya and abhyantara*

Bheda (Types)**Based on Dosha**

<i>Charaka Samhita</i>	<i>Sushruta Samhita^[8]</i>	<i>Yogaratanakara^[9]</i>	<i>Madhava Nidana^[10]</i>
<i>Vataja</i>	<i>Vataja</i>	<i>Vataja</i>	<i>Vatika</i>
<i>Pittaja</i>	<i>Pittaja</i>	<i>Pittaja</i>	<i>Paittika</i>
<i>Kaphaja</i>	<i>Kaphaja</i>	<i>Kaphaja</i>	<i>Kaphaja</i>
<i>Granthi</i>	<i>Sannipataja</i>	<i>Sannipataja</i>	<i>Agneya</i>
<i>Kardama</i>	<i>Kshataja</i>	<i>Vatakaphaja</i>	<i>Granthi</i>
<i>Agni</i>	-	<i>Pittakaphaja</i>	<i>Kardama</i>
<i>Sannipataja</i>	-	<i>Kaphavataja</i>	<i>Sannipataja</i>

Based on Adhithana^[11]

1. *Bahya Adhithana (Twagashrita)*
2. *Abhyantara (Antarika Dhatu)*
3. *Ubhayashrita*

Lakshana

Vataja Visarpa	Pittaja Visarpa	Kaphaja Visarpa
<i>Bhrama</i> (Giddiness) <i>Davathu</i> (Burning sensation in eyes) <i>Pipeelika sanchara eva ca angeshu</i> (Feeling as if ants are crawling over the body) <i>Toda</i> (Pricking type of pain) <i>Shoola</i> (Colicky pain) <i>Angamarda</i> (Malaise) <i>Shyava arunabhasa</i> <i>Shwayathu</i> (The area becomes greyish or pinkish and edematous)	<i>Jwara</i> (pyrexia) <i>Trishna</i> (Morbid Thirst) <i>Murcha</i> (Fainting) <i>Atimatra Sweda</i> (Excessive sweating) <i>Antardaha</i> (Burning sensation) <i>Aswapna</i> (Lack of sleep) <i>Harita Haridra Netra Mutra Varchas</i> (Green-Yellow colouration of the eyes, urine and the stool) <i>Harita Haridra Roopa darshanam</i> (Green and Yellow vision of objects) <i>Achirakari Sphota</i> (Pustules which suppurates quickly)	<i>Sheeta Jwara</i> (Fever with chills) <i>Gaurava</i> (Heaviness) <i>Nidra</i> (Excessive sleep) <i>Arochaka</i> (Anorexia) <i>Asyopalepa</i> (Coating in the oral cavity) <i>Pandu- Alpavedana-Shwayathu</i> (The oedema will be pale yellow and with less pain) <i>Krichrapaki sphota</i> (Delayed suppuration) <i>Shweta -picchila- tantumat-snigdha srava</i> (Exudate will be white, slimy, knotty and unctuous in nature)

Agni Visarpa (Vatapittaja Visarpa)	Kardama Visarpa (Pittakaphaja Visarpa)	Granthi Visarpa (Kaphavataja Visarpa)
<i>Sarvashareeram Angaraihi avakeeryamanam manyate</i> (Feeling of whole body sprinkled with charcoal) <i>Shanta angara Prakasha Atirakta avakasha</i> (The area appears like extinguished charcoal or excessively red) <i>Agnidagdha prakara sphota</i> (Pustules similar to those of burns) <i>Marmanusari</i> (Afflicts the marmas)	<i>Rakta -peeta- pandu Pidaka</i> (Eruptions will be of red, yellow and pale yellow colour) <i>Avakeerna eva mecakabha</i> (The area looks muddy) <i>Stimita vedana Shwayathu</i> (Edema with dull pain) <i>Gambheera paka Nirasravaha</i> (Deep seated suppuration without exudation) <i>Puti mamsa twak</i> <i>Avadeeryate</i> (Eruptions get cracked and putrified muscle tissue comes out) <i>Sira snayu darshi</i> (Vessels and ligaments can be seen) <i>Kunapa Gandhi</i> (Smells like a cadaver)	<i>Krichrapaki Granthimala</i> (Enlarged glands get suppurated very slowly) <i>Pradushya Raktam sira snayu mamsa twagashrita Granthimala</i> (Vitiates the blood giving rise to a series of glandular enlargements located in vessels, ligaments muscles and skin) <i>Teevra ruja</i> (Extremely painful)

Sannipata Visarpa will be manifested with all the signs and symptoms of *ekadoshaja* and *dwandwaja visarpa*. It is considered as *Asadhya* (Incurable).

Sadhya sadhyata

Ekadoshaja Visarpa is said to be *Sadhya* (Curable).

Agni and *Kardama Visarpa* are said to be *Sadhya* if it does not involve *Marma* (vital organs). If not treated properly, it may cause instant death like snake poison.

Granthi Visarpa should be treated only if complications are not manifested.

Sannipataja and *Kshataja Visarpa*^[12] is said to be *Asadhya* (Incurable) because it pervades all the tissue elements, spreads instantaneously and treatment involves mutually contradictory therapeutic measures.

***Upadrava*^[13]**

Jwara (Pyrexia), *Atisara* (Diarrhea), *Vamathu* (Vomiting), *Twak mamsa Darana* (tearing of skin and muscle), *Klama* (Tiredness), *Arochaka* (Anorexia), *Avipaka* (Indigestion).

Modern correlation^[14]

It can be correlated to Herpes zoster Infection. Herpes zoster is the result of reactivation of the Varicella zoster virus that has lain dormant in a nerve root ganglion following Chickenpox earlier in life. Reactivation may be spontaneous (as usually occurs in the middle-aged or elderly) or be due to immunosuppression (As in patients with Diabetes, malignancies or AIDS).

Clinical features -Burning discomfort in the affected dermatome progresses to frank neuralgia. Discrete vesicles appear in the dermatome 3-4 days later and often coalesce. This is associated with a brief viraemia and influenza- like features and potentially produces distant satellite 'Chickenpox' lesions elsewhere.

Complications- The most common and most troublesome complication is post-herpetic neuralgia, which is persistence of pain for 1-6 months or more following healing of the rash.

Diagnosis- Usually diagnosed clinically from the classical appearance of the rash. Aspiration of the vesicular fluid and PCR or tissue culture will confirm the diagnosis.

Management- Early therapy with Acyclovir 800 mg 5 times daily or valaciclovir 1g 8th hourly, or in severe infection and in the immunocompromised acyclovir 10mg/kg 8th hourly intra-venously has been shown, especially in patients over 65, to reduce both early and late onset pain.

Post-herpetic neuralgia requires aggressive analgesia plus the use of transcutaneous nerve stimulation (TENS machine) and neurotransmitter modification with agents such as amitriptyline 25-100mg daily.

Chikitsa sutra (Treatment principle)^[15]

Sthana / Lakshana	Chikitsa (Treatment)
<i>Kaphasthanagata visarpa (Sama)</i>	<i>Langhana</i> (fasting), <i>Ullekhana</i> (emesis), <i>Tiktaka sevana</i> (Intake of bitter items), <i>Ruksha Sheeta Pralepa</i> (Application of ununctuous and cold paste)
<i>Pittasthanagata Visarpa (Sama)</i>	In addition to the above treatment, <i>Virechana</i> (Purgation), <i>Raktamokshana</i> (Bloodletting) should be advised
<i>Vatasthanaagata Visarpa (Sama)</i>	<i>Virukshana</i> (Ununctuous therapies) should be administered in the beginning since the disease involves the vitiation of <i>Rakta</i> and <i>Pitta</i> the <i>Snehana</i> (Oleation therapy) is not useful in the beginning.)
<i>In Vatolbana Avastha</i>	<i>Tiktaka Ghrita</i> (Ghee prepared from bitter medicines)
<i>In Pittolbana Avastha</i>	<i>Virechana</i> (Purgation)

Dravya prayoga in Visarpa

Internal administration

1. *Amalaka* (*Embllica officinalis* Gaerth.) juice is mixed with Ghee is given.^[16]
2. Soup of *Mudga* (*Phaseolus radiatus* L.), *Masoora* (*Ervum lens* Linn.) or *Chanaka* (*Cicer arietinum* L.), soured or unsoured with *Dadima* (*Punica granatum* L.), mixed with *Patola* (*Trichosanthus dioica* Roxb.) and *Amalaka* (*Embllica officinalis* Gareth.) is useful.^[17]
3. Patient should be given with the decoction of *Patola* (*Trichosanthus dioica* Roxb.), *Mudga* (*Phaseolus radiatus* L.) and *Amalaka* (*Embllica officinalis* Gareth.) mixed with Ghee.^[18]
4. *Trivrut* (*Operculina terpeethum* Linn.) along with *Ghrita* (Ghee) / *Guda* (Jaggery) / *Ushnodaka* (Warm Water) is given for purgation.^[19]

External application

1. The leaves of *Aragwadha* (*Cassia fistula* Linn.) and the bark of *Shleshmataka* (*Cordia dichotoma* Forst.) should be used separately or in combination as a local paste added with ghee.^[20]
2. In *Vataja Visarpa*, *Kantaka-Laghu-Mahath Panchamula dravyas* are used as paste, bath, ghee and oil.^[21]
3. Cold paste of *Nyagrodha* (*Ficus bengalensis* Linn.), *Udumbara* (*Ficus racemosa* Linn.), *Plaksha* (*Ficus lacor* Buch.Hum.), *Vetasa* (*Salix caprea* L.) and *Ashwattha* (*Ficus religiosa* Linn.) added with profuse Ghee should be applied.^[22]

4. Application of *Amalaki* (*Emblica officinalis* Gaertn), *Vibhitaki* (*Terminalia belerica* Gaertn.) Roxb., *Haritaki* (*Terminalia chebula* Retz.) *Padmaka* (*Prunus cerasoides* D.), *Usheera* (*Vetiveria zizanoids* L.), *Samanga* (*Rubia cordifolia* L.), *Karaveera* (*Nerium indicum* Mill.) and *Nala* (*Arundo donax* Linn.) root and *Ananta* (*Hemidesmus indicus* L.) cures *Kaphaja Visarpa*.^[23]

5. Bathing of the affected part with *Ikshu* (*Saccharum officinarum* Linn.) *rasa* (sugarcane juice) is recommended.^[24]

6. Hot paste of *Karanja* (*Holarrhena antidysenterica* Wall.), bark or *Mulaka* (*Raphanus sativus* Linn.) or *Vibhitaka* (*Terminalia belerica* Roxb.) bark should be applied.^[25]

7. Ghee cooked with the juice of *Durva* (*Cynodon dactylon* L.) should be applied externally which helps in the healing of the ulcers caused by *Visarpa*.^[26]

8. In *Granthi Visarpa*, *Amalaki* (*Emblica officinalis* Gaertn), *Vibhitaki* (*Terminalia belerica* Gaertn.) Roxb., *Haritaki* (*Terminalia chebula* Retz.) and *Pippali* (*Piper longum* Linn.) is added with Honey, *Devadaru* (*Cedrus deodara* Roxb.) and *Guduchi* (*Tinospora cordifolia* Miers.) is given for external application.^[27]

FORMULATIONS

According to AFI^[28]

Churna	Ghrita	Taila	Asavarista	Bhasma
<i>Trayanthyadi Kwatha Churna</i>	<i>Tikthaka Ghrita</i>	<i>Nalpamaradi Taila</i>	<i>Duralabharista</i>	<i>Kasisa Bhasma</i>
<i>Nimbadi Kwatha Churna</i>	<i>Patoladi Ghrita</i>	<i>Brahath Guduchi Taila</i>	-	<i>Sphatika Bhasma</i>
<i>Panchavalkala Kwatha Churna</i>	<i>Triphala Ghrita</i>	<i>Maharudraguduchi Taila</i>	-	<i>Harathala Bhasma</i>
	<i>Mahatiktaka Ghrita</i>		-	

According to *Bhaishajya Ratnavali*^[29]

1. *Amrutadi Kwatha*

2. *Navakashaya guggulu*

3. *Dashanga lepa*

4. *Kalagni rudra rasa*

5. *Vrishadya taila*

6. *Karanja taila*

Pathya apathy^[30] - Pathya- Apathya is the special concept explained in ayurveda for different diseases. Pathya helps in prevention of *srotodusti* and aid in proper functioning of it. It is explained in the form of *ahara*, *vihara* and *aushadha*. The *pathya-apathya* for this disease is explained in the following table.

Pathya	Apathya
Intake of <i>Yava</i> (<i>Hordeum vulgare</i> L.), <i>Godhuma</i> (<i>Triticum aestivum</i> L.) <i>Shasthika Shali</i> (<i>Oryza sativa</i> Linn.) <i>Jangala mamsa rasa</i> , <i>Mudga</i> (<i>Phaseolus radiatus</i> L.), <i>Masura</i> (<i>Ervum lens</i> Linn.) Fruits and vegetables - <i>Draksha</i> (<i>Vitis vinifera</i> L.), <i>Karavellaka</i> (<i>Momordica charantia</i> L.), <i>Dadima</i> (<i>Punica granatum</i> L.)	<i>Viruddha annapana</i> (Taking incompatible food) <i>Divaswapna</i> (Day sleep) <i>Krodha</i> (anger) <i>Surya-Agni-Pravata</i> (Exposure to sunrays-heat-breeze)

Research updates on Visarpa

1. Ayurvedic Management of *Visarpa* with special reference to Herpes Zoster -A Case Study.^[31]

Female patient of age 70 years complaints of acute skin eruptions preceding severe pain and burning sensation over right scapular region and right side of chest for 3 days. *Patola katuohinyadi Kashaya* 3tsp TID, *Kamadugha rasa* 1TID, *Nimbadi guggulu* 1BID and *Shatadhoutha Ghruta* was given for external application for 7 days. On depiction of overall effects of therapy (Both subjective and objective assessment) it shows >75% improvement i.e., excellent result is noted.

2. Study of topical application of *Himawan agada* in *Pittaja Visarpa*.^[32]

A Randomized, Clinical, Active controlled trial was designed to compare their efficacies. The control and trial groups received the respective drugs for topical application in t.i.d. for 10 days as symptoms of *Visarpa* show self-reduction in severity after 10-12 days. In the subjective parameters, *Daha* and *Shoola* showed early and statistically significant reduction in gradation of severity whereas *Srava*, *Paka*, *Sphota*, *Jwara* were also reduced effectively but statistically insignificant as compared to *Shatadhauta ghruta*. Thus, the topical application of *Himawan agada* with *Madhu* is proven effective remedy in *Pittaja Visarpa*.

3. A successful clinical study on management of *Visarpa* (Herpes zoster) through Ayurveda^[33]

The case presented here of 19-year-old female who came with complaints of *Sukshma Pidika* over the *Udara* and *Prushtha Pradesha* along with other associated complaints severely at night time and mild fever since 3 days. As an emergency treatment immediately, *Siravedhana*

was done and along with that *Shamana Aushadhi* like *Chandrakala vati* 2 QD, *Panchatiktaghruta Guggulu* 250 mg 2 QD, *Katuki churna* 3gm + *Avipattikara Churna* 2gm at bed time with Water and *Gairika Churna* 5gm + *Yastimadhu Churna* 3gm for *Lepa* (external application) twice daily with *Dugdha* was given to the patient for a week. Consecutively 2 sittings of *Siravedhana* were done at an interval of 3 days. Assessment of the treatment was done on the basis of improvement in signs and symptoms of *Visarpa*. Lesions of *Visarpa* (Herpes Zoster) were found completely crusted and healed within 1 week of treatment.

4. Management of herpes zoster in Ayurveda through medicinal leeches and other composite Ayurveda treatment^[34]

A 65-year-old female patient known case of Type 2 Diabetes Mellitus was treated for Herpes zoster on the basic principles of management of *Pittaja Visarpa*. Rapid decrease in pain severity was observed after the 1st sitting of leech therapy according to Zoster Specific Brief Pain Inventory (ZBPI) Questionnaire. After each sitting pain reduction was observed. Repeated application of *Jalauka* along with internal medications like powders of *Shatavari* 2gm, *Gokshura* 2 gm and *Lodhra* 1gm. Fisillax ointment was given for local application for 8 days. On day-9 *Narikela Mashi* was added along with other medications. Patient got relief from pain, burning related to herpes.

5. Ayurveda management of oro-facial herpes: a case report, Journal of Ayurveda and Integrative Medicine^[35]

A male patient of 72 years presented with sudden onset of edema over upper gums, with 3 to 4 vesicles over the left upper lip, left part of face within 2 days, along with reduced sensation to touch and temperature. The patient had redness, watering and burning sensation of left eye. Clinically the patient was diagnosed with "Oro- Facial Herpes". Patient was advised daily cleaning of the affected part with *panchavalkala* decoction for 10 days, topical application of *mahatiktaka ghrita* ointment. Virocil syrup 15 mL TID, the powder of *Guduchi*, *Nimba*, *Sariva*, *Vasa* and *Amalaki* 4 gm TID, Tab *Sootashekara* with gold 1Tab. BID, Tab *Nirocil* 1 tablet TID and *Avipattikara churna* 10 gm HS. The patient did not complain of any pain or burning sensations and lesions were healed. The same medicines were continued and *Nimbaamrutadi Eranda Taila* 10 mL at bed time for three days was added after completing the dose of *Avipattikara churna*. The complaints of pain in the lesions reduced from 8 to 2 and burning sensation reduced by 90%.

DISCUSSION

The name *Visarpa* is due to its rapid spread all over the body in all directions. It is the disease caused by the vitiation of *pitta-rakta* and involvement of both *Bahya* and *abhyantara rogamarga*. *Chardi vegadharana* is considered to be one of the important nidana causing *Visarpa*. Presence of *Sphota* (Blisters) and *Shopha* (Swelling) are the cardinal features of this disease. Based on dosha involvement, *Visarpa* is mainly classified into 7 types. Herpes zoster is a viral infection caused by Varicella zoster which can be considered as *Visarpa* in which there will be burning discomfort in the affected dermatome progresses to frank neuralgia. Discrete vesicles appear in the dermatome 3-4 days later and often coalesce. In this case, antiviral treatment is ideal whereas ayurveda mentions wide range of treatment modalities in which *Virechana-Raktamokshana*, *Sheeta pralepa* are of importance. These therapies help in *Shodhana* and *Shamana* of *pitta dosha* respectively. All these treatment modalities will either eliminate or pacify the aggravated *pitta* and *rakta*. *Tikta Kashaya rasa dravyas* helps in alleviating the *Shopha* and *Sphota*. *Sheeta veerya* of various drugs helps in alleviating the *ushnatva*. *Shatadhouta ghrta* is the one which helps in reducing *daha* produced from the lesions. *Dadima*, *Draksha*, *Karavellaka* and other *dravyas* which are easy to digest are given as *Pathya*. The patient should avoid exposure to sunrays, breeze, anger, day sleep, etc.

CONCLUSION

Visarpa is a disease caused by the vitiation of *raktavaha srotas* and *Pitta -rakta prakopaka nidanas*. As it is a disease which spreads immediately in all directions as that of snake poison, it should be treated in earlier stage with proper medications. The main treatment includes *Virechana*, *Raktamokshana*, *Tiktha Ghrta pana* and *Sheeta pralepa*. *Shodhana* therapies like *Virechana* and *raktamokshana* will help in elimination of vitiated *pitta* and *Ghrta pana*. Other internal and external medicines will help in *shamana* of *pitta dosha*.

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