

Review



Drugs used for *Virechana* (therapeutic purgation) from Charaka Samhita Chikitsa Sthana- A narrative review

¹Arundhati Mukhedkar R, ²Anup Thakar B

ABSTRACT:

Background: *Virechana* (therapeutic purgation) is one of the *Shodhana* procedures with multiple alternatives for carrying out *Virechana*, which leads to ambiguity in selection of disease-specific medicine, and hence, limited use of medicines. **Aim:** The present review thus, aims to analyze the drug-disease specificity, with primary reference to the *Chikitsa Sthana* of Charaka Samhita, a principal text in the domain of therapeutics. **Methods and materials-** The Charaka Samhita Chikitsa Sthana is screened manually. *Virechana* drugs are considered for review, on the basis of disease use, form of medication for *Virechana* and other purposes. The rationale behind drug selection and the form of drug, its pharmacological, pharmaceutical aspects, is scrutinized based on the proven studies by following a search strategy, from PubMed, Google Scholar, PubMed Central. **Results:** Total references for *Virechana* in Charaka Samhita Chikitsa Sthana are 91, where specific condition is mentioned in 43 references. Drugs used for *Virechana* are 22. 17 different forms of *Virechana* medicines are mentioned in Chikitsa Sthana. The total articles studied were 51 in number. *Triphala* is the commonest (119 times) drug mentioned. It is also proven as safe drug, due to its peristaltic-soothing qualities, along with purgation. Other drug used for *Virechana* extensively, is *Haritaki* (55 times). Foremost action proven by *Virechana* drugs is anti-inflammatory and hepatoprotective activity. Though anti-inflammatory activity is proven of 11 drugs, the specificity of *Draksha* to *Kaasa*, i.e. respiratory system inflammations, *Haritaki* to *Arsha*, *Trayamana* to inflammations related to fever is evident. *Neelini* and *Trivrut* act better on renal system related inflammations, along with ascites; while *Indravaruni* is indicated in immunocompromised or autoimmune skin conditions, and *Dravanti* in microbe-induced skin problems. **Conclusion:** This review, therefore, provides a systematic appraisal of suitability, diversity, modality of disease-specific *Virechana* drugs; inducing a suitable decision during clinical practice.

KEYWORDS: Polypharmacology, Purgation, Narrative Review, *Triphala*, *Virechana*

RECEIVED ON:

27-08-2025

REVISED ON:

28-10-2025

ACCEPTED ON:

31-10-2025

Access This Article Online:

Quick Response Code:



Website Link:

<https://jahm.co.in>

DOI Link:

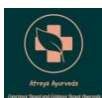
<https://doi.org/10.70066/jahm.v13i10.2307>

Corresponding Author Email:

mukhedkararundhati7@gmail.com

CITE THIS ARTICLE AS

Arundhati Mukhedkar R, Anup Thakar B. Drugs used for *Virechana* (therapeutic purgation) from Charaka Samhita Chikitsa Sthana- A narrative review. *Journal of Ayurveda and Holistic Medicine (JAHM)*.2025;13(10):40-57



1. INTRODUCTION

Ayurveda is most celebrated for its personalized medicine, thus, provides an extensive variation and hence, alternatives for treatment protocols, drugs used, mode of administration, etc. Even amongst *Shodhana* (eliminatory) procedures, *Virechana* (therapeutic purgation) is known to provide numerous options literally and practically. But, for obvious causes, there is motive behind selection of specific drugs for specific action. Thus, a review study on specific drugs of *Virechana* and diseases is chalked out.

There are various articles related to the proven actions of drugs, and also various studies related to *Virechana* activities. This article aims to collaborate the study under one comprehensive review, where the rationale is explored from the point of view of Ayurveda, as well as contemporary science. *Virechana* (therapeutic purgation), one of the eliminatory procedures is mentioned as the best treatment modality for *Pitta* or *Pitta* dominant *Doshas* (humors). [1] Under the description of *Virechana Karma*, its suitability is mentioned. But, the specific conditions or *Avastha* of those diseases which require *Virechana* is mentioned extensively in Chikitsa Sthana of Charaka Samhita. The suitable intensity of *Virechana*, e.g. Intense, moderate or very mild form of *Virechana* is also mentioned in diseases. Various drugs are cited under the specific condition of diseases. But, the question arises whether the *Virechana Karma* is helpful in treating the disease, or even the certain drug used has the activity towards disease pathology. Leading from this research question, was the study started and the hypothesis of use of a

certain drug for a certain condition from the Charak Samhita was explored from various articles.

2. METHODOLOGY

Charaka Samhita has been thoroughly scrutinized and the conditions apt for *Virechana*, the intensity of *Virechana*, formulations consisting *Virechana* drugs, and their forms were collected together manually. Data was compiled in two forms, with direct references for *Virechana* and/or intensity and indirect references with mention of drugs. Details like- references, drugs, adjuvants, dosage form, the intensity of *Virechana* were recorded. The compilation was made only from *Chikitsa Sthana* of *Charaka Samhita*. For the studies regarding the pharmaceutical, pharmacological actions of these drugs, proven studies, review studies were obtained from PubMed, Google Scholar, Scopus with the search words being their botanical names. The Boolean Operator used was-‘AND’, ‘OR’. The search words were- ‘Pharmaceutical’, ‘Pharmacological’, ‘Chemical Constituents’ ‘Review’, related to each *Virechana* drug mentioned. The filters used were-‘All fields.’ Language used was-‘English’. Text availability was selected as- ‘Full text available.’ The inclusions of article types were- ‘Books and documents, clinical trials, meta-analysis, randomized clinical trial, systematic review. In google scholar, where my words occur was selected as- ‘Anywhere in the article’. The articles before 10 years were included in the study. The exclusion criteria were articles before that, single case studies, and articles just describing the physical characteristics of drugs. The search strategy is tabulated in [Table 1]. The study result is as shown in [Fig 1].

Table 1: Search Strategy Database

	Search terms used	Filters applied	Notes
PubMed	Every drug name AND (pharmaceutical)OR (pharmacological)OR (review) OR (chemical constituents)	Language English Less than 10 years	Full text free articles only Screened manually
Google Scholar	Every drug name AND (pharmaceutical) (pharmacological) (review) (chemical constituents)	Any type	First 100 screened manually
PubMed Central	Every drug name AND (pharmaceutical) (pharmacological) (review) (chemical constituents)	10 years Published journal article PMC open access subset	Full text free articles only Screened manually

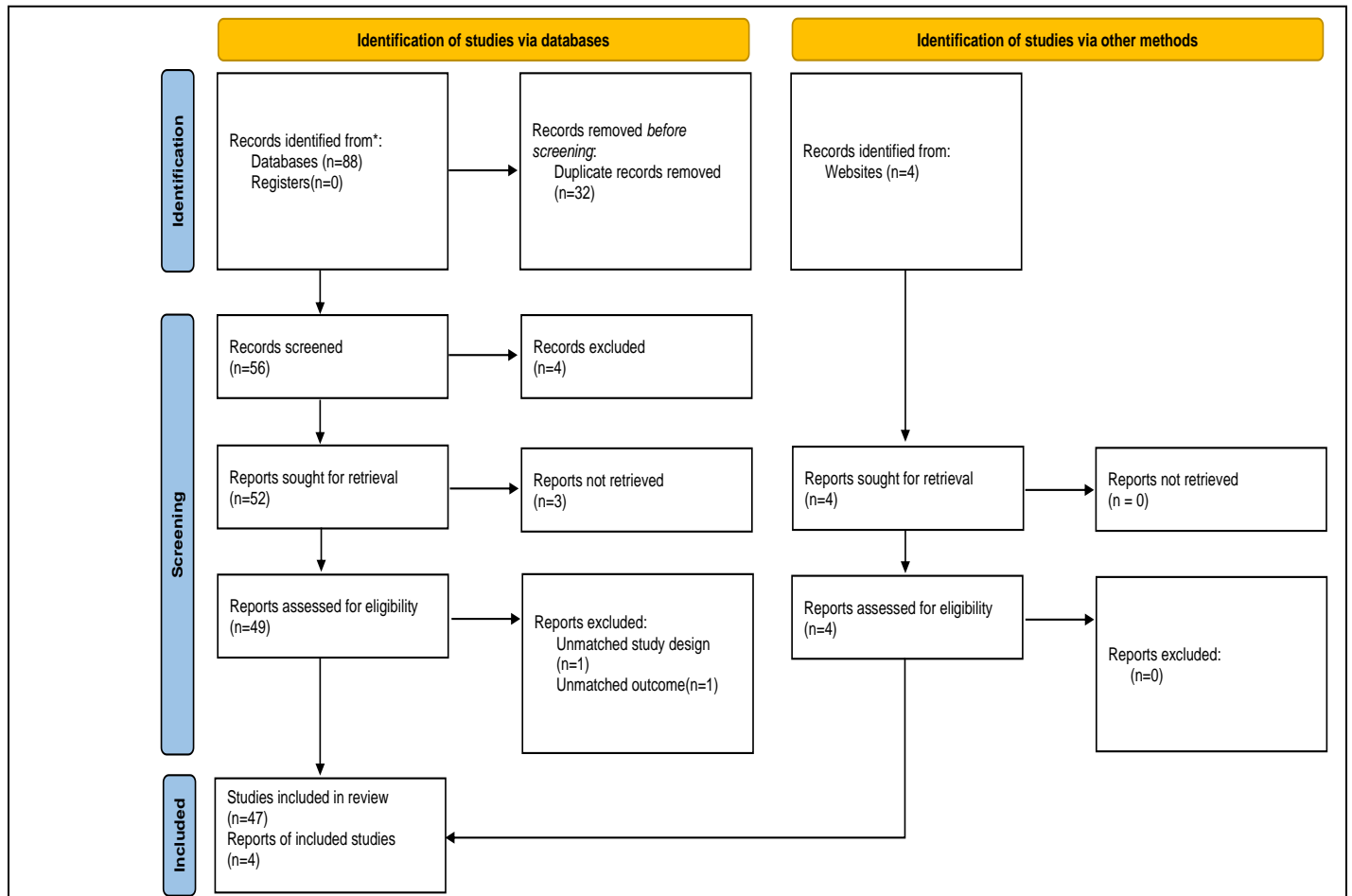


Fig 1: Description regarding studies included for review

From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews BMJ2021;372:n71. Doi: 10.1136/bmj.n71. For more information, visit: <http://www.prisma-statement.org/>

3. RESULTS

Direct references for '*Virechana*' treatment in Charaka Chikitsa Sthana are 91 in total, as denoted in [Table 2]. Direct reference for intensity of *Virechana* in diseases is mentioned in 14 diseases, which is presented in [Fig 2], and Chakrapani has mentioned the intensity at 2 places. The *Avastha* or specific condition is mentioned at 43 places. Different drugs used for *Virechana* are total 22 in number, as denoted in [Table 3]. Various forms of medicines used for *Virechana* are 20 in number, which is depicted in [Fig 3].

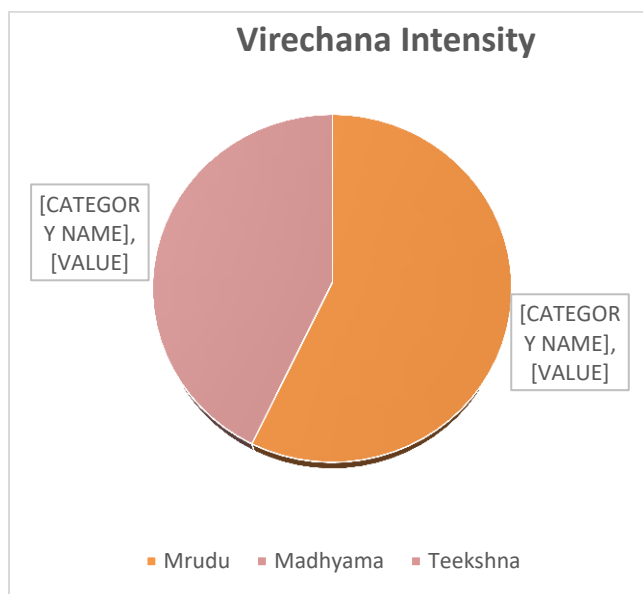


Fig 2: *Virechana* Intensity References

Table 2: Total direct references for *Shodhana*

<i>Vyadhi</i> (disease)	Total References
<i>Jwara</i> (Pyrexia)	9
<i>Raktapitta</i> (Bleeding disorders)	2
<i>Gulma</i>	7
<i>Prameha</i> (Diabetes)	2
<i>Kushtha</i> (Skin diseases)	3
<i>Rajayakshma</i> (Wasting diseases)	1
<i>Unmada</i> (Psychosis disorders)	1
<i>Apasmara</i> (seizure disorders)	1
<i>Kshataksheena</i> (emaciation)	-
<i>Shotha</i> (swellings)	6
<i>Udara</i> (ascites)	5
<i>Arsha</i> (hemorrhoids)	1
<i>Grahani</i> (diseases of digestion)	3
<i>Pandu</i> (Anemia)- <i>Kamala</i> (jaundice)	4
<i>Hikka-Shwasa</i> (dyspnea)	1
<i>Kaasa</i> (Cough)	2
<i>Atisaara</i> (Diarrhea)	3
<i>Chhardi</i> (Vomiting)	2
<i>Visarpa</i> (Erysipelas)	4
<i>Trushna</i> (Thirst)	-
<i>Visha</i> (Poisoning)	2
<i>Madatyaya</i> (Intoxication)	-
<i>Vrana</i> (Ulcers)	-
<i>Trimarmiya</i>	11
<i>Urustambha</i>	-
<i>Vatavyadhi</i>	10
<i>Vatarakta</i> (Gout)	7
<i>Yonivyapada</i>	4
Total	91

Table 3: Total *Virechana* drugs reference

Sr. No.	<i>Dravya</i>	Botanical Name	English Name [2]	Number of <i>Yoga</i>	Number of <i>Yoga</i> used for <i>Virechana</i>
1	<i>Triphala</i>	Combination of (<i>Terminalia chebula</i> Retz., <i>Emblica officinalis</i> Gaertn., <i>Terminalia bellerica</i> (Gaertn) Roxb))		119	50
2	<i>Draksha</i>	<i>Vitis vinifera</i> Linn	Grapes	83	27
3	<i>Haritaki</i>	<i>Terminalia chebula</i> Retz	Chebulic myrobalan	68	55
4	<i>Amalaki</i>	<i>Emblica officinalis</i> Gaertn.	Indian gooseberry	51	18
5	<i>Trivrut</i>	<i>Operculina terpepethum</i> L. Silva Manso	Indian jalapa	48	38
6	<i>Katuka</i>	<i>Picrorrhiza kurroa</i> Royle ex Benth	-	48	25
7	<i>Danti</i>	<i>Balospermum montanum</i> (Willd) Mull. Arg.	-	40	28
8	<i>Trayamana</i>	<i>Gentiana kurroo</i> Royle	-	33	18
9	<i>Aragwadha</i>	<i>Cassia fistula</i> Linn	Purging cassia	26	19
10	<i>Erandamoola</i>	<i>Ricinis communis</i> Linn	Castor plant	17	14
11	<i>Indravaruni</i>	<i>Citrullus colocynthis</i> (L.) Schrad.	-	14	14
12	<i>Kampillaka</i>	<i>Mallotus philippensis</i> (Lam.) Muell. Arg.	Monkey face tree	14	9
13	<i>Eranda Taila</i>	<i>Ricinis communis</i> Linn	Castor oil	12	10
14	<i>Snuhi</i>	<i>Euphorbia neriifolia</i> Linn	Indian spurge tree	10	9
15	<i>Shyama</i>	<i>Ipomoea petaloides</i> Choisy	Indian jalap	10	4
16	<i>Neelini</i>	<i>Indigofera tinctoria</i> Linn	True indigo	8	8
17	<i>Swarnaksheeri</i>	<i>Argemone Mexicana</i> Linn.	-	6	6
18	<i>Saptala</i>	<i>Acacia concinna</i> (Willd.) DC	Soap pod	5	5
19	<i>Tilwaka</i>	<i>Symplococos racemosa</i> Roxb	Symplocos tree	4	4
20	<i>Dravanti</i>	<i>Jatropha curcas</i> Linn	Edible chlorophytum	4	3
21	<i>Shankhini</i>	<i>Euphorbia dracunculoides</i> Lam.	-	3	2
22	<i>Patolamoola</i>	<i>Tricosanthes diocia</i> Roxb.	-	2	2

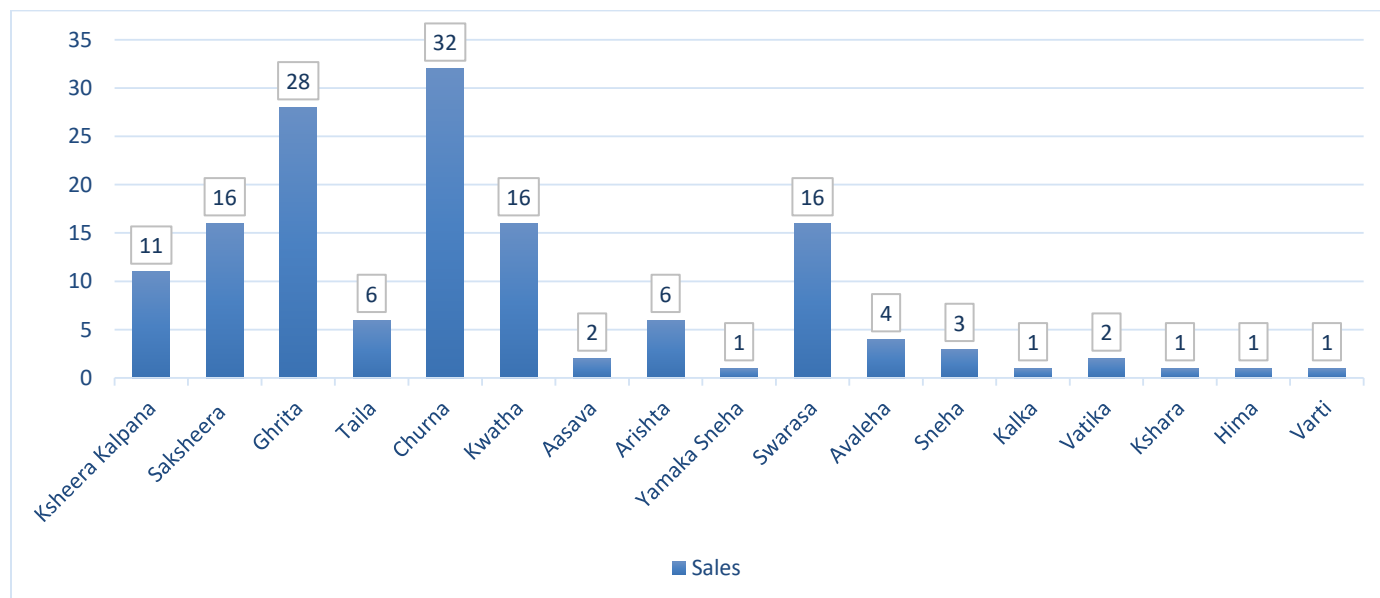


Fig 3: Virechana drug formulations used for Shodhana

1) *Triphala* – It is used maximum in treating *Kushtha*-14 references, 12 references for *Pandu*, eight references for *Jwara*, seven references for *Shotha*, six references in *Udara*, five references for *Arsha*, *Visarpa*, *Vrana*, four references in *Kamala*, *Mukharoga*, *Netraroga*, *Kaasa*, three references for *Grahani*, *Apasmara*, *Shiroroga*, *Ashmari*, *Stanyadosha* each. It is used twice for *Shiroroga*, *Unmada*, *Yonivyapad*. It is used once for *Rajyakshma*, *Chhardi*, *Visha*, *Urustambha*, *Vatavyadhi*, *Vatarakta*, *Asrugdara*, *Shwetapradara* and *Shukradosha*. It is used most times in the form of *Kwatha* (decoction) (27), *Ghrita* (ghee) (23), *Churna* (powder) (23), 4 times in the form of *Lepana* (paste). It is used in the form of *Hima*, *Kshara* (alkalis), *Varti* (suppository), *Taila* (oil) thrice each. It is used twice in the form of *Gutika* (tablets), *Arishta*(fermented), *Lehana*, *Asava* and once for *Aschotana* (eyewash), *Leha*, *Nasya* (nasal instillation), *Kalka*.

2) *Draksha*- It is used maximum times for treating *Kasa* (15), nine times in *Vatarakta*, seven times in *Kshataksheena*, six times for *Madatyaya*, five times for *Chhardi*. It is used four times for treating *Pandu*, thrice for *Visarpa*, *Raktapitta*, twice for *Gulma*, *Hikka*, *Trushna*, *Mutrakrucchra*, *Hrudroga*, *YoniVyapad*, *Stanyadosha*. It is used once for *Rajyakshma*, *Shotha*, *Udara*, *Arsha*, *Grahani*, *Kamala*, *Haleemaka*, *Peenasa*, *Shiroroga*, *Mukharoga*, *Arochaka*, *Swarabheda*, *Vatavyadhi*. The major form of medicine used is *Ghrita* 20 times, *Swarasa* (juice) 20 times, seven times in the form of *Lehana*, four times in the form of *Kwatha*, thrice for *Avaleha*, *Hima*, *Tarpana*, twice in the form of *Kalka*, *Arishta*, *Sarpiguda*, *Taila*, *Arishta*, *Ksheera* once in the form of *Peya*, *Asava*, *Pralepa*, *Parisheka*, *Gutika*, *Nasya*.

3) *Haritaki*- This is used maximum for treating *Arsha*, i.e. eight references, six references in *Grahani*, five references in *Shotha*, four references in *Udara*, *Pandu*, *Kaasa*, *Stanya dosha*, used thrice in *Atisara*,

Hridroga, Urustambha, twice in *Prameha, Kushtha, Visarpa, Chhardi, Udavarta, Mukharoga*. It is used once for *Jwara, Raktapitta, Unmada, Apasmara, Haleemaka, Hikka, Vatarakta, Yonivyapad*. The mode of medicine used majorly is *Churna*, i.e. 17 references, *Ghrita*-eight references, *Kwatha* six references, *Lehana, Avaleha*, alongwith *Guda*, five references. It is used in the form of *Kalka*, four references. It is used thrice in the form of *Arishta, Lepa*. *Yavagu* is prepared twice from it and once *Asava*.

4) *Amalaki*- It is used 10 times in treating *Jwara* maximum times, 7 times in *Netraroga*, 5 times in *Arsha*, three times in *Kasa, Kshatksheena, Vatarakta*. It is used thrice for treating *Kshataksheena, Kasa, Pandu, Vatarakta*. It is used twice in *Shweta pradara, Shotha, Prameha* and once for *Gulma, Kushtha, Grahani, Kamala, Haleemaka, Hikka Shwasa, Chhardi, Visarpa, Madatyaya, Mutrakrucchra* and *Mukharoga*. It is used majorly in the form of *Arishta*(six), *Ghrita, Swarasa*- five references, *Taila-Churna-Rasakriya* three times, twice in the form of *Kwatha, Sarpiguda, Siddha Ksheera, Avaleha*; and once in the form of *Yavagu, Yusha, Asava, Vataka, Kavala, Anjana, Lepa* and *Kalka*.

5) *Trivrut*- It is used majorly in *Udara*, i.e. nine references, *Gulma*, five references, four references in *Jwara, Kushtha*, three times in *Pandu, Vatarakta, Arsha*. The maximum form of medicine used is *Churna*, 23 times, *Ghrita* eight times, two *Kwatha, Siddha Ksheera*, one *Leha, Varti* each.

6) *Katuka*- It is used in treating *Jwara*, maximum times(eight). It is also used in *Kushtha*(seven), *Grahani*(six), *Urustambha*(five), *Shotha*(three),

Pandu(three), *Udara*(two), *Mukharoga*(two), once in *Unmada, Prameha, Apasmara, Arsha, HikkaShwasa, Atisara, Visarpa, Visha, Hrudroga*. The major form used is *Ghrita*-11 times, *Kwatha*- ten times, *Churna* nine times, *Kalka-Lehana* three times, *Hima-Taila-Ghrita* two times, once as *Lepa*, and once in *Asava*.

7) *Danti*- It is used majorly in *Udara*, i.e. seven references, five times in *Shotha, Arsha, Kushtha* each. It has four references in *Panduroga*. It is used thrice for *Gulma*, twice for *Prameha* and *Urustambha*, and once in *Unmada, Apasmara, Grahani, Visarpa, Peenasa, Shiroroga*, and *Yonivyapad* each. The major form of medicine used is *Ghrita*(four), *Ksheera, Arishta, Asava* and *Lepa* are used three times. It is used in the form of *Taila* for *Nasya*, twice. It is used for *Lehana* once and once as a content of *Avaleha*.

8) *Trayamana*- It is used seven times for treating *Jwara*, four in *Gulma-Kushtha*, thrice for *Visarpa*. The majority of the form used is *Ghrita* (11), followed by *Kwatha*(seven). *Churna* is used thrice, with milk twice, once used in *Niruha, Avaleha*, and *Hima*.

9) *Aragwadha*- It is used six times to treat *Kushtha*, thrice in *Jwara*, twice for *Apasmara, Kasa, Visarpa, Urustambha*; once for *Raktapitta, Shotha, Grahani, Pandu, Visha, Udawarta, Mutrakrucchra, Peenasa, Shiroroga* each. It is used maximum times in the form of *Kwatha*(seven), *Churna*(five), *Ghrita*(four), twice as *Lepa*, twice for *Nasya* and once as *Hima, Swarasa, Gutika, Kshara*, once as *Dhoomavarti*, and once in *Arishta*, and once in *Niruha*.

10) *Erandamoola*- It is used four times in treating *Vatarakta*, twice in *Jwara*, and *Netraroga*. It is used

once each in treating *Shotha, Udara, Hikka, Pravahika, Udavarta, Ashmari, Peenasa, Shiroroga, Shukradosha*. It is used in the form of *Ksheera* four times, in *Kwatha* and *Dhoomavarti* thrice each, two times in *Taila*, once in *Niruha, Falavarti, Ghruta* and *Mahasneha* each.

11) *Indravaruni*- It is used thrice in treating *Kushtha*, twice for *Prameha, Udara, Arsha* and once for *Unmada, Shotha, Kamala, Kaasa* and *Visha*. The form used is *Churna* four times, *Ghruta* and *Kwatha* three times, twice as *Arishta* and once as- *Asava, Kalka*.

12) *Kampillaka*- It has two references each in *Gulma, Kushtha, Visha, Vrana* and *Udavarta*, and one in *Prameha, Udara, Visarpa, Ashmari*(renal stones). The form of medicine used is thrice in *Taila*, thrice in *Churna*, 2 times for *Abhyanga*, 2 times in *Varti*, once in *Ghruta*, once for *Lehana*.

13) *Eranda Taila*- It is used thrice in treating *Visha*, twice for *Udara* and *Vatavyadhi*, and once in diseases like- *Gulma, Shotha, Grahani, Visarpa, Vatarakta*.

14) *Snuhi*- It is used thrice for *Arsha, Udara*, twice for *Gulma* and *Udavarta*. It is used maximum times in the form of *Pralepa*, and as a content of *Ghruta*. It is used once in *Phalavarti* and once for *Yoni Purana*.

15) *Shyama*- It is used twice to treat *Udavarta, Arsha*, once for *Kushtha, Apasmara, Shotha, Grahani, Pandu, Yonivyapad*. It is used thrice for *Lepa*, two times

as *Kalka, Siddha Ksheera*, once for *Nasya, Pradhamana*, and in *Falavarti*.

16) *Neelini*- There are four references in *Udara*, three references in *Gulma* and once in *Udavarta*. It is used four times in the form of *Ghruta*, three times in the form of *Churna* and once in *Falavarti*.

17) *Swarnaksheeri*- It is used twice in *Udara*, once in *Shotha, Pandu, Visha* and *Urustambha*. It is used thrice in the form of *Churna*, once for *Vatika* and once as *Kalka*.

18) *Saptala*- It is used four times in *Udara*, and once in *Vatavyadhi*. It is used twice in *Churna, Ghruta* and one as *Kwatha*.

19) *Tilwaka*- It is used in four diseases, once in *Shotha, Grahani, Kaasa, Vatavyadhi* each. The form of medicine used are two *Ghruta*, and two *Churna*.

20) *Dravanti*- It is used in four diseases- *Kushtha, Udara, Visha, Urustambha* once each. The forms of medicines used are four - one *Lepa, Taila, Ghruta* and *Kwatha* each.

21) *Shankhini*- It is used twice to treat *Udara*, and once in *Visha*. The forms used are one *Churna*, one *Kalka*, and one *Patra*.

22) *Patolamoola*- It is used once for *Kushtha*, and once in *Udara*. The forms used are one *Kwatha* and one *Churna*.

Table 4: Proven activities of *Virechana* drugs in Charaka Samhita

Sr. No.	Drug name	Textual reference for disease	Proven Action on various systems	Chemical constituents
1	<i>Triphala</i>	i) <i>Kushtha</i> , ii) <i>Pandu</i> , iii) <i>Jwara</i> ,	i) Immunomodulatory, [3] ii) increases RBCs, increases hemoglobin.	Tannins, gallic acid, chebulinic acid, ellagic acid, etc. [5]

		iv) <i>Shotha</i> , v) <i>Udara</i> , etc.	[4] iii) Antipyretic, antibacterial. [5]	
2	<i>Draksha</i>	i) <i>Kasa</i> , ii) <i>Vatarakta</i> , iii) <i>Kshata</i> <i>ksheena</i> , etc.	i) Antiviral, antibacterial, anti-allergic, antihistaminic, antitussive. [6] ii) Anti-inflammatory [6]	183 phenolic compounds, 70%-80% water, phytochemicals, 15 hydroxycinnaminic acid, 17 flavon-3-ols, catechins, etc. [7]
3	<i>Haritaki</i>	i) <i>Arsha</i> , ii) <i>Grahani</i> , iii) <i>Shotha</i> , etc.	i) Anti-inflammatory, analgesic, [8] ii) wound healing. [8]	Tannins (24%-32%), chebulagic acid, chebulinic acid, resins, anthraquinone, anthocyanins, etc. [8]
4	<i>Amalaki</i>	i) <i>Jwara</i> , ii) <i>Netrarogam</i> iii) <i>Arsha</i> , iv) <i>Kasa</i> , etc.	i) Antipyretic, [9] ii) Reduces intraocular pressure. [10] iii) anti-inflammatory, [11] iv) Antibacterial.	Tannins, phyllembin, chebulagic acid, Vitamin C, etc. [12]
5	<i>Trivrut</i>	i) <i>Udara</i> , ii) <i>Gulma</i> , iii) <i>Jwara</i> , iv) <i>Kushtha</i> , etc.	i) Antihepatotoxic, hepatoprotective, antinephrotoxic, [13] anti-inflammatory, hydragogue, [14] iii) antipyretic.	Turpethin, turpethinic acids, scopoleptin, betulin, glycosidic resins, etc. [13]
6	<i>Katuka</i>	i) <i>Jwara</i> , ii) <i>Kushtha</i> , iii) <i>Grahani</i> , etc.	i) Liver stimulatory, hepatoprotective, [15] immunomodulatory, [16] cholagogue, ii) Antifungal. [15]	Kutkiol, kutkisterol, kutkoside, kutkin, glycosides, alkaloids, iridoids, phenolics, terpenes. [15]
7	<i>Danti</i>	i) <i>Udara</i> , ii) <i>Shotha</i> , iii) <i>Arsha</i> , iv) <i>Kushtha</i> , etc.	i) Hepatoprotective, hydragogue [17] iii) anthelmintic	Baliospermin, montanin, 5-phorbol esters, glycosides, terpenoids.
8	<i>Trayamana</i>	i) <i>Jwara</i> , ii) <i>Gulma</i> , iii) <i>Kushtha</i> , iv) <i>Visarpa</i> , etc.	i) Antibacterial (gram positive and negative), antipyretic [18] ii) anti-inflammatory, [18] iii) analgesic [18]	Iridoids, xanthones, C-glucoxanthone mangiferin, C-glucoflavones. [18]
9	<i>Aragwadha</i>	i) <i>Kushtha</i> , ii) <i>Jwara</i> , iii) <i>Apasmara</i> , etc.	i) Antimicrobial, antibacterial, [19] ii) Antipyretic, [20] febrifuge.	Anthraquinone, fisulic acid, resins, flavonoids, rhein glycoside, barbaloin, etc. [20]
10	<i>Erandamoola</i>	i) <i>Vatarakta</i> , ii) <i>Jwara</i> , iii) <i>netraroga</i> , etc.	i) Analgesic activity [21]	Ricin A, B, C, tannins, alkaloids, glycosides, saponin, terpenoids.
11	<i>Indravaruni</i>	i) <i>Kushtha</i> , ii) <i>Prameha</i> ,	i) Immunomodulatory, antiallergic, antimicrobial, [22]	Colocynthin, colocynthein, cucurbitacin, polyphenols, flavonoids,

		iii) <i>Udara</i> , iv) <i>Arsha</i> , etc.	ii) Anti-diabetic, hypoglycemic [23] iii) Anti-inflammatory, iv) analgesic [24]	etc. [24]
12	<i>Kampillaka</i>	i) <i>Gulma</i> , ii) <i>Kushtha</i> , iii) <i>Visha</i> , iv) <i>Vrana</i> , v) <i>Udavarta</i> , etc.	ii) Antiallergic, [25] antibacterial, anthelmintic, [26] iv) wound healing activity. [26]	Rottlerin, Many natural compounds, phenols, diterpenoids, steroids, flavonoids, coumarins, etc. [27]
13	<i>Eranda Taila</i>	i) <i>Visha</i> , ii) <i>Udara</i> , iii) <i>Vatavyadhi</i> , etc.	Stimulant laxative [28]	Fatty acids, ricinoleic acid, oleic, stearic, palmitic, linoleic acids. [29]
14	<i>Snuhi</i>	i) <i>Arsha</i> , ii) <i>Udara</i> , iii) <i>Gulma</i> , iv) <i>Udavarta</i> , etc.	i) Anti-inflammatory, analgesic. ii) Hepatoprotective [30]	Euphol, triterpenes, etc. [30]
15	<i>Shyama</i>	i) <i>Udavarta</i> , ii) <i>Arsha</i> , iii) <i>Kushtha</i> , etc.	-	-
16	<i>Neelini</i>	i) <i>Udara</i> , ii) <i>Gulma</i> , iii) <i>Udavarta</i> , etc.	i) Anti-inflammatory, antihepatotoxic, nephroprotective, hepatoprotective. [31]	Indigotone, apigenin, deguelin, dehydrodeguelin, galactomannan, etc. [32]
17	<i>Swarnaksheeri</i>	i) <i>Udara</i> , ii) <i>Shotha</i> , iii) <i>Pandu</i> , etc.	i), ii) Anti-inflammatory, antihepatotoxic. [33]	Berberine, dehydrocordydalmine, reticuline, allocryptopine, etc. [34]
18	<i>Saptala</i>	i) <i>Udara</i> , ii) <i>Vatavyadhi</i>	-	Holoptelin, naphthalendione, Stigmasterol, Octamethylcyclohexane, di-myo-inositol, etc. [35]
19	<i>Tilwaka</i>	i) <i>Shotha</i> , ii) <i>Grahani</i> , etc.	i) Anti-inflammatory [36]	Alkaloids, terpenoids, flavonoids, holeptin A-B, etc. [36]
20	<i>Dravanti</i>	i) <i>Kushtha</i> , ii) <i>Udara</i> , etc.	i) Antimicrobial ii) Anti-inflammatory [37]	Gallic acid, gentisic acid, catechol, vitexin, etc. [37]
21	<i>Shankhini</i>	i) <i>Udara</i> , ii) <i>Visha</i>	i) Hepatoprotective, Anti-inflammatory. [38]	Rutin, Daphnoretin, isofraxidin, scopoletin, kaempferol, etc. [38]
22	<i>Patolamoola</i>	i) <i>Kushtha</i> , ii) <i>Udara</i>	i) Antibacterial, antimicrobial ii) anti-inflammatory [39]	Quercetin, rutin, p-coumaric acid, kaempferol, etc. [40]

4. DISCUSSION:

a) Regarding direct reference for *Virechana* types, based on intensity:

The direct references for *Mrudu Virechana* (mild purgation), are mentioned in nine conditions, viz. *Punaravartaka Jwara*, [41] *Pittotara Kushtha*, [42] *Vataja Unmada* with *Margavarodha*, [43] *Kamala*, [44]

Kshayaja Kaasa, [45] *Vatavyadhi*, [46] *Avruta Vatavyadhi*, [47] *Vatarakta* [48] and *Malavruta Vatarakta*. [49] *Teekshna Virechana* is indicated in six conditions, viz. *Apasmara*, [50] *Baddha Gudodara*, [51] *Pandu*, [52] *Mrudbhakshanajanya Pandu*, [53] *Udavarta*, [54] *Kaphavruta Vata*. [55] *Sransana* as a method of *Shodhana* has been described in two conditions, in *Jwara*, [56] when *Dosha* are in *Pakwashaya*, and in *Shwitra*. [57]

Mrudu Virechana is where patient gets *Manda Vega* (slow evacuation). [58] It is indicated in diseases where intensity of symptoms is less and/or strength of patient is minimal. [59] *Vata Dosha* should be treated with *Mrudu Shodhana*. [60] Thus, the indications mentioned above are where *Vata Dosha* is dominantly involved in the disease process or where *Dhatu* (bodily elements) are weak and patient strength is hampered, either due to chronicity or recurrence. *Teekshna Virechana* (intense purgation) is when *Dosha* are expelled out, in more quantity but don't cause any discomfort to patient. [61] Considering the references, *Teekshna Virechana* should be indicated in diseases where the *Srotorodha* (occlusion of channels) is dominantly present, like *Baddhagudodara*, *Udavarta*, *Pandu*, *Kaphavruta Vata* or *Kapha Dosha* is involved. There is no direct reference for *Madhyama Virechana*. It can be used in conditions, where strength is not too hampered, and *Dosha* is not *Kapha* or *Vata* dominant.

b. Regarding use of specific drugs in diseases:

The drug used maximum is *Triphala*, and its form used majorly is *Kwatha* form (decoction). The aqueous extracts have greater efficacy than ethanol extracts, on

E.coli and *St. Aureus*. [62] *Triphala* promotes the growth of Bifidobacteria and Lactobacilli species, while flushes undesirable gut microbes. [63] Moreover, embellic and belleric myrobalans are proven to increase the purgative activity of chebulic myrobalans; but also soothe the peristalsis. It produces uniformly progressive movements, till maximum purgation effect is achieved. [64] Thus, it makes the best drug for *Virechana*, whose frequency in text is also noted the highest. It is extensively used for *Kushtha*, which justifies its action of *Shodhana*, and *Rukshana* at the same instance. It is used in *Pandu* multiple times, which is present in the preparations for *Shodhana*, as well as *Shamana*. Thus, *Triphala* can be utilized as for *Shodhana*, *Shamana* (pacifying) both, in different forms. The next majorly used drug is *Draksha*. Its use as *Shodhana* is done in the form of *Swarasa*. It is 70%-80% water, in its contents. Thus, *Swarasa* use is substantiated. It is noted widely for *Kaasa*, and told for *Lehana* purpose dominantly. It has inhibitory action on leukotriene system. It is anti-allergic, as it reduces eosinophil count and IgE, which affects inflammatory response, and reduces airway hyperreactivity and mucus production; hence, proven for allergic as well as bacterial cough. But its use for *Shodhana* is limited as compared to other drugs, where *Tarpana* processes, and *Raaga*, *Paanaka*, *Shadava*, *Anna Kalpana* are prescribed mostly, it being a regular consumable. Its *Rasa* is prescribed for *Nasya*, in *Raktapitta*. Its external use is mentioned as *Parisheka* and *Pralepa* for *Vatarakta*, and *Stanyadosha* respectively. It is *Sheeta* in nature, and thus, applaudable for *Pitta* dominant conditions, like the ones

mentioned above. The next drug is *Haritaki*, which is used extensively in *Arsha*, compared to others. The anti-inflammatory and analgesic activity both are useful in hemorrhoids, as it helps to relax the inflamed veins around anus, rectum; and also helps in reducing pain. It is used in combination of buttermilk or jaggery or ghee. The combination with which it is used depends on *Dosha*, i.e. Jaggery for *Vata*, ghee for *Vata-Pitta*, buttermilk for *Kapha-Vata*. The form used is *Churna* (powder). It is also used as *Prayoga*, i.e. *Nitya virechana* (daily purgation), in *Kushtha*, [65] *Pandu*, [66] *Urustambha*. [67] Its use is also mentioned externally for *Visarpa*. [68] *Amalaki* is used maximum times for *Jwara*, as *Kashaya* and *Hima*. It is maximum as a constituent of *Arishta*. *Amalaki* has antioxidants which are water soluble, and partly extractable by ether. [69] Moreover, it is a good Vitamin C source, which is again water soluble and causes softening of stool osmotically.[70] Thus, water related forms of *Amalaki* are more suitable for *Virechana*. Moreover, *Amalaki* is also used for *Netraroga* (eye disorders), and it increases the lens glutathione content, total lens and soluble protein content and decreases malondialdehyde content. [71] *Trivrut*, which is *Sukha Virechana* (easy purgation), is used mostly in *Udara*, and its major form is as *Churna*. Turpethin, the glycoside responsible for purgation is insoluble, [72] thus its maximum use as *Churna* alone is justified. *Trivrut* being hydragogue, as well as proven antihepatotoxic, and anti-nephrotoxic drug, works on kidneys and liver at the same time; assisting in the treatment of ascites. *Katuka* is used largely for *Jwara*, and for *Shodhana* as well as *Shamana*,

as it acts on *Pitta Dosha*, which is dominant in the pathophysiology of *Jwara*. Its activity for repigmentation, as well as antifungal action on dermatophytic fungi [73] proves the action on skin, which helps in *Kushtha*. *Danti* is also used for *Udara* maximum times, with *Ghrita* as its dominant mode of medicine. It is also noted in *Shotha*, *Kushtha* like conditions, which denote *Bahu Dosha*. *Danti* is more intense in its purgation. Thus, its use for grave diseases is warranted. Its action is hepatoprotective, which helps in ascites. *Trayamana* is noted for conditions which involves *Rakta* and *Pitta* dominance, i.e. *Jwara*, *Kushtha*, etc. It is used in the form of ghee, which again helps in *Pitta* dominance. It is also suitable as a substitute to *Katuka*, for similar qualities. [74] *Aragwadha*, according to its qualities is seen used maximum times in treating *Kushtha*, and in the form of *Kwatha*. It is noted in diseases with *Vata* and *Pitta* dominance, which is reasonable as *Aragwadha* is *Sheeta Virya* (cold in potency), and *Mrudu* in nature. *Erandamoola* is used as *Ksheera Kalpana* (milk-based) major times, and in treating *Vatarakta*, which involves *Shuddhi* for elimination of *Avarana*. The analgesic activity is proven, mainly for neurogenic pain. *Indravaruni*, a *Teekshna Virechana*, is used in *Kushtha*, more times, which is a condition of *Bahudosha*. It is also used in *Prameha*, *Udara*, *Arsha*, where *Agni* (digestive fire) is more involved, compared to other diseases. Its ethnomedicinal use in diabetic patients, for healing of wounds, is noted. [75] *Eranda Taila* is used in treating *Visha*, which shows its capacity to eliminate the *Dosha* residing in *Dhatu*. It is stable oil, where ricinoleic acid is

broken by lipase and absorbed in intestine. The EP3 and EP4 receptors are activated, and cause transient calcium surge, which cause propulsive movement in intestine. [76] It is noted in *Udara* and *Vatavyadhi*, where it is also used for *Nitya Virechana*. It is *Madhyama* in intensity, and being *Sneha* based, is useful in *Vatavyadhi*. It is also used best for *Avarana*, according to the combination used. *Snuhi* is used majorly in the form of *Lepa* than internal use, and dominantly for *Arsha*, which secures the local *Dosha* elimination from the *Arsha*. Similarly, *Shyama* is noted for *Lepa* highest times. These both drugs are very *Teekshna* in nature. *Neelini*, *Swarnaksheeri*, *Saptala* is used in the form of *Churna*, ghee for *Udara*, which expects greater *Dosha* expulsion. These drugs are also *Teekshna* in nature, but prescribed internally too, along with external application. *Neelini* enhances renal creatinine clearance and decreases renal total protein loss, thus, useful in ascites. [77] *Shankhini* leaves are used ethnobotanically for snake bites. *Patola* was studied as a component of polyherbal combination for skin disorder, and no side effect was observed. [78]

c. Regarding proven activities:

The maximum activity proven is anti-inflammatory, of *Draksha*, *Haritaki*, *Trivrut*, *Trayamana*, *Indravaruni*, *Snuhi*, *Neelini*, *Swarnaksheeri*, *Tilwaka*, *Dravanti*, *Shankhini*. Hepatoprotective activity is proven for *Trivrut*, *Katuka*, *Danti*, *Snuhi*, *Neelini*, *Swarnaksheeri*. Analgesic activity is demonstrated in *Haritaki*, *Trayamana*, *Erandamoola*, *Indravaruni*, *Snuhi*. Immunomodulatory activity is verified in *Triphala*, *Amalaki*, *Katuka*, *Indravaruni*. Anti-pyretic activity is

proven for *Triphala*, *Trivrut*, *Katuka*, *Aragwadha*. Anti-bacterial activity of *Triphala*, *Trayamana*, *Aragwadha*, *Kampillaka*; anti-microbial activity of *Aragwadha*, *Indravaruni*, *Dravanti*, *Patolamoola*; anti-fungal activity of *Katuka*, *Aragwadha*, *Patolamoola*; anti-allergic of *Draksha*, *Indravaruni*, *Kampillaka*; wound healing of *Haritaki*, *Indravaruni* and *Kampillaka*; and nephroprotective activity of *Trivrut* and *Neelini* is proven by various references mentioned above.

d. Way ahead to clinical decision of drug selection:

Multiple drugs have similar proven actions, but still drug affinity is the deciding point, where drug specificity is achievable. For example, anti-inflammatory activity of various drugs is mentioned above, but, textually, *Draksha* has been recommended in *Kaasa*, which may postulate its affinity towards respiratory system for anti-inflammatory activity. *Draksha* is also the first component of *Kaasahara Gana*, by Charak Samhita. [79] *Haritaki* is prescribed in *Arsha*, which shows its area of anti-inflammatory action more on ano-rectal route. Similarly, *Trivrut* in *Udara*, *Trayamana* should be selected in inflammation related with fever, *Indravaruni* is advisable in inflammations, involving skin or blood disorders, as it is prescribed in *Kushtha*; *Snuhi* is advisable in *Arsha*, which denotes its role in ano-rectal route, just as *Haritaki*. But, *Snuhi* is intense than *Haritaki* in purgation. So, *Snuhi* is indicated in diseases where more strength of disease and patient is present, while *Haritaki* is advisable in patients with lower strength. Anti-inflammatory activity of *Neelini* in *Udara* can be substantiated, which is also present in *Trivrut*. Moreover, they both possess nephroprotective and

hepatoprotective activity, hence, they both are advisable for *Udara*. But, *Trivrut* is *Ruksha* in nature, and is believed to vitiate *Vata Dosha*, while *Neelini* is strong purgative. Hence, again in the disease pathology, *Trivrut* and *Neelini* have their own place in *Udara* itself. *Swarnaksheeri* also is indicated for *Udara*, but it is hepatoprotective, and nephroprotective activity is not proven yet. So, in ascites, if related to or collateral renal system damage, *Neelini* or *Trivrut* are better option than *Swarnaksheeri*. *Tilwaka* is indicated in *Shotha* itself, so its anti-inflammatory action can be multi-system, multi-organ oriented. *Dravanti* is indicated in *Kushtha*, similar to *Indravaruni*. But, *Indravaruni* has proven immunomodulatory activity, anti-allergic activity, along with antimicrobial activity, which is present in *Dravanti* too. So, specifically, immunity-compromised patients with skin disorders, who may/may not have allergic conditions, should be treated with *Indravaruni*, while just microbial infestation-related skin problems should be treated with *Dravanti*. On similar lines, other activities and diseases can be studied in detail, based on the results provided in the present article. This will lead to calculated decision-making process clinically.

Limitations- The certain limitations of the study are inclusion of *Virechana* medicines only from the *Chikitsa Sthana* of *Charaka Samhita*, as well as articles only in English language are assessed.

5. CONCLUSION:

The review on *Chikitsa Sthana* of *Charaka Samhita*, reveals the tendency of drugs to act on particular diseases. *Triphala* is the safest and commonest drug

mentioned for *Shodhana*, as well as *Shamana*. For *Kushtha*, *Triphala*, *Aragwadha*, *Kampillaka*, *Dravanti*, *Patolamoola* are the ones which are used extensively; *Amalaki*, *Katuka*, *Trayamana* are used highly for *Jwara*; *Trivrut*, *Danti*, *Dravanti*, *Neelini*, *Swarnaksheeri*, *Saptala*, *Shankhini*, *Patolamoola* are used widely to treat *Udara*. The maximum activities proven of *Virechana* drugs are anti-inflammatory, followed by hepatoprotective activity. The formulations prescribed are also evidently soluble in that forms, so culminated in that form of medicine itself. For practical decision making, the collective study of drug-disease and system specificity; using textual references and proven activities is the way out. Studies of this type can also boost the reverse pharmacology studies, specific to *Virechana*.

Authors Details:

^{1*} PhD Scholar, Dept of Panchakarma, ITRA, Jamnagar.

²HOD, Dept of Panchakarma, ITRA, Jamnagar.

Authors Contribution:

Conceptualization: AM

Data collection and literature search: AM

Writing-original draft: AM

Reviewing and editing: AT

Approval of final manuscripts: All authors

Declaration of Generative AI

The authors declare this manuscript was written without the use of generative artificial intelligence tools. All the content, including text generation, data analysis and references was developed and reviewed by the author without assistance from AI technologies.

Conflict of Interest – The authors declare no conflicts of interest.

Source of Support – The authors declare no source of support.

Additional Information:

Authors can order reprints (print copies) of their articles by visiting:

<https://www.akinik.com/products/2281/journal-of-ayurveda-and-holistic-medicine-jahm>

Publisher's Note:

Atreya Ayurveda Publications remains neutral with regard to jurisdictional claims in published maps, institutional affiliations, and territorial designations. The publisher does not take any position concerning legal status of countries, territories, or borders shown on maps or mentioned in institutional affiliations.

REFERENCES:

1. Yadavji Trikamji (editor). Charaka Samhita of Charaka, SiddhiSthana, chapter 2, verse no.13. Reprint edn, Varanasi; Choukhambha Orientalia;2015;688
2. Kalburgi N, Patil V, Kulkarni H. Scientific review on Virechana Dravya (Purgative drugs) of Charaka Samhita. Journal of Ayurveda & Holistic medicine. 2023; 11(11):44-59. <https://jahm.co.in/index.php/jahm/article/view/1116/746>
3. Ahmed S, Ding X, Sharma A. Exploring scientific validation of Triphala Rasayana in ayurveda as a source of rejuvenation for contemporary healthcare:An update. J Ethnopharmacol. 2021; 273:113829. <https://doi.org/10.1016/j.jep.2021.113829>
4. Baliga MS, et al. Scientific validation of the ethnomedicinal properties of the Ayurvedic drug Triphala: A review. Chin J Integr Med. 2012;18(12):946-954. <https://doi.org/10.1007/s11655-012-1299-x>.
5. Jantrapirom S, Hirunsatitpron P, Potikanond S, Nimlamool W, Hanprasertpong N. Pharmacological benefits of Triphala: A perspective for Allergic rhinitis. Front Pharmacol. 2021 Apr 30; 12:1-24. <https://doi.org/10.3389/fphar.2021.628198>.
6. Baloni V, Upadhyay PS. Phytochemical study of the contents of Duralabhadi Yoga, Vasa and Kantakari extract. Journal of Drug Research in Ayurvedic Sciences. 2024;9(5):325-334. https://doi.org/10.4103/jdras.jdras_369_23
7. Yeola K, Bhambar R S, Pande S, Karanjkar D. A brief overview of Vitis vinifera L. (Draksha) and its health benefits. International Journal of Botany Studies. 2023;8(4):4-10. <https://doi.org/10.36347/sajp.2021.v10i12.005>
8. Andarkhor P, Sadeghi M, Khodadoost M, Kamalinejad M, Gachkar L, Abdi S, Zargaran A. Effects of Terminalia chebula Retz. In treatment of hemorrhoids: A double-blind randomized placebo-controlled clinical trial. European Journal of Integrative Medicine. 2019;30:100935. <https://doi.org/10.1016/j.eujim.2019.100935>
9. Yadav N, Singh AK. Amalaki(*Emblca officinalis* Gaertn.): A review on its therapeutic properties. 2023;8(8):155-162. <https://doi.org/10.21750/jaims.8.8.23>
10. Sharma S, Tripathi A. Critical analysis of Amalakyadi Gana in eye disorders: A review. Int J Res Ayurveda Pharm. 2021;12(2):65-67. <https://doi.org/10.7898/2277-4343.120247>
11. Li W., et al. Bioactivity-guided isolation of anti-inflammatory components from *Phyllanthus emblica*. Food Sci. Nutr. 2020 8(6):2670-2679. <https://doi.org/10.1002/fsn3.1553>
12. Prananda AT, Dalimunthe A, Harhap U, et al. *Phyllanthus emblica*: A comprehensive review of its phytochemical composition and pharmacological properties. Front Pharmacol. 2023;14:1288618. <https://doi.org/10.3389/fphar.2023.1288618>
13. Hemant, Phull R, Rohilla R. Trivrut as a drug for Virechana Karma. Cuest.fisioter. 2025.54(2):1694-1716. <https://doi.org/10.48047/evcxyp72>
14. Jalaj AV, Madhavan Rp. Pharmacognostic studies on leaf of *Operculina terpehum*(L.) Silva Manso. Int j Adv Res. 2014;2: 585-90. https://doi.org/10.4103/phrev.phrev_6_17
15. Raina D, Raina S, Singh B. Katuki(*Picrorrhiza kurroa*)- A promising Ayurvedic herb. Biomed J Sci & Tech Res. 2021;36(1):28238-42. <https://doi.org/10.26717/BJSTR.2021.36.005805>
16. Almeebia TM, Alasayari A, Wahab S. Pharmacological and Clinical Efficacy of *Picrorrhiza kurroa* and its secondary metabolites: A Comprehensive review. Molecules. 2022 Nov 29;27(23):8316. <https://doi.org/10.3390/molecules27238316>
17. Gawai A, Chalak S. Hepatoprotective activity of Nagdantyadi Ghrita a literature review. Journal of Indian System of Medicine. 2019;7(3):142-145 https://doi.org/10.4103/JIOSM.JISM_55_19
18. Chauhan D, Mittal A, Sharma Y, Tyagi M. Trayamana(*Gentiana Kurroo* Royle): A bitter marvel. World Journal of Pharmaceutical Research. 2023;12(13):639-654. <https://doi.org/10.20959/wjpr202312-29180>
19. Nandakumar A. Ayurvedic Management of Pityriasis versicolor in children: A Case report. Journal of Ayurveda Case Reports.

- 2021 Oct-Dec;4(4):150-153. https://doi.org/10.4103/jacr.jacr_75_21
20. Chauhan P., Tiwari R.C., Bhutiani R., Ahamad F., Study of Aragvadha(*Cassia fistula* Linn.) with special reference to pharmacological properties: An overview. Environment Conservation Journal. 2019;20(1):133-138. <https://doi.org/10.36953/ECJ.2019.1008.1219>
21. Bingi A, Mallya S, Bhat S, Lacitha CV. Experimental Evaluation on analgesic activity of *Erandamoola*(*Ricinis communis*) collected in three different seasons wsr to *Dravya Sangrahana Kaala*. JPHYTO. 2022;11(3):164-166. Available on: www.phytopharmajournal.com
22. Kapila A, S Johar. Review of Marichyadi Taila in Fungal Infections: A comprehensive review. HTML Full Text. 2024;3(4): 43-49. Article ID: AYU_129_02_25; Available on: <https://ijim.co.in>
23. Kurele RK, Upadhyay S, Upadhyay P, KS Rohit, Pawar G, Srinivasulu B. A review on Ayurvedic Prospective and curative herbs for Type II diabetes. Ayushdhara. 2017;4(1): 1036-1044. Available from: <https://ayushdhara.in/index.php/ayushdhara/article/view/250>
24. Li QY, Munawar M, Saeed M, Shen JQ, Khan MS, Noreen S, Alagawany M, Naveed M, Madni A, Li CX. Citrullus colocynthis(L.) Schrad (Bitter apple fruit): Promising traditional uses, pharmacological effects, aspects and potential applications. Front Pharmacol. 2022 Jan 25;12:791049. <https://doi.org/10.3389/fphar.2021.791049>.
25. Hewageegana HGSP, Hewageegana AU. Medicinal potential and Scientific validations of *Mallotus philippinensis* (Lam.) Muell. Arg. (*Kampillaka*): A review. Journal of Natural & Ayurvedic Medicine. 2021;5(3):00314. <https://doi.org/10.23880/ionam-16000314>
26. Buha M, Acharya R. Ethnomedicinal Claims on *Mallotus philippinensis* (Lam.) Muell. Arg.: A Review. Journal of Drug Research in Ayurvedic Sciences. 2020;5(3):184-195. <https://doi.org/10.5005/jdras-10059-0103>
27. Tripathi V, Kumar R, Patil S. A review on Phytochemical and Ethanopharmacology of *Mallotus Phillipensis*. Journal for research in Applied Sciences and Biotechnology. 2024 Oct;3(5):293-302. <https://doi.org/10.55544/jrasb.3.5.30>
28. Alookaran J, Tripp J. Castor Oil. 2024 May 24. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan. PMID:31869090 Available on: <https://share.google/ISD2F3q4olyBp3AEf>
29. Yeboah, Akwasi & Ying, Sheng & Jiannong LU, Yu XIE, Amoanimaa-Dede, Hanna & Agyenim-Boateng, Kwadwo & Miao CHEN, & Xeugui YIN. Castor oil(*Ricinus communis*):A review on the chemical composition and physicochemical properties. Ciencia e Tecnologia de Alimentos. 2020;1-15. doi: <https://doi.org/10.1590/fst.19620>
30. Sayli W. Wadhai *et al.* *In Vivo* pharmacological activities of upavisha snuhi (*Euphorbia neriifolia* Linn.): A review. Int. J. Res.Ayurveda Pharm. 2022;13(3):79-85 <http://dx.doi.org/10.7897/2277-4343.130364>
31. Mohammed E Abd et al. The efficacy of applying some plants and herbs in cancer therapy for humans and animals-A comprehensive review. Ann Anim Sci. 2023;23(2): 315-338. doi: <https://doi.org/10.2478/aoas-2022-0078>
32. Kushwaha AK. A review on Nilini: An Important Ayurvedic Medicinal Plant; JOASSR Conference Proceedings, Apr 2022;4(4):84-87. Available on: <http://www.joaasr.com>
33. Villegas J, Ball BC, Shouse KM, VanArragon CW, Wasserman AN, Bhakta HE, Oliver AG, Orozco-Nunnelly DA and Pruet JM. Synthesis and biological evaluation of Argemone Mexicana-inspired antimicrobials. Beilstein J Org Chem. 2023;19:1511-1524. <https://doi.org/10.3762/bjoc.19.108>
34. Chanda, Gupta P, Kumari N, Bhattacharya A, Chakraborty S, Pal S, Bhattacharjee R. A review on pharmacological potential of Argemone Mexicana in management of wound healing & antidiabetic activity. 2022;11:21-27. <https://doi.org/10.35629/6718-11022127>
35. Sukdee, S., Meepowpan, P., Nantasaen, N., Jungstittiwong, S., Yodsinn, N., & Pompomon, W. New Chemical Constituents from the leaves and twigs of *Holoptelea integrifolia*. Journal of Natural Remedies. 2021;20(4):240-248. <https://doi.org/10.18311/jnr/2020/24479>.

36. Acharya N, Acharya S, Shah U, Shah R, Hingorani L. A Comprehensive analysis on *Symplocos racemosa* Roxb.: Traditional Uses, botany, phytochemistry and pharmacological activities, Journal of Ethnopharmacology. 2016;181:236-251. <https://doi.org/10.1016/j.jep.2016.01.043>
37. Rahu MI et al. Determination of antimicrobial and phytochemical compounds of *Jatropha curcas* plant. Saudi Journal of Biological Sciences. 2021;28(5):2867-2876. <https://doi.org/10.1016/j.sjbs.2021.02.019>
38. Majid M, Khan MR et al. Studies on phytochemical, antioxidant, anti-inflammatory and analgesic activities of *Euphorbia dracunculoides*. BMC Complementary and Alternative medicine. 2015;15:349. <https://doi.org/10.1186/s12906-015-0868-0>.
39. Chacko J, Varshanath B, Delvin T R, Mohan P. Ayurveda Treatment Protocol in the management of Relapse of palmo-plantar pustulosis (PPP)-A Case report. Journal of Natural Remedies. 2023 Apr;23(2):629-636. <https://doi.org/10.18311/jnr/2023/31888>
40. Zilani, M.N.H., Uddin, S.J., Hossain, H. et al. Chemical characterization and bioactivity of *Trichosanthes dioica* edible shoot extract. *Orient Pharm Exp Med* 2018;167-175. <https://doi.org/10.1007/s13596-018-0310-5>
41. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 3, verse no.340. Reprint edn, Varanasi; Choukhambha Orientalia;2015;427
42. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 7, verse no.40. Reprint edn, Varanasi; Choukhambha Orientalia;2015;452
43. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 9, verse no.25. Reprint edn, Varanasi; Choukhambha Orientalia;2015;470
44. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 16, verse no.40. Reprint edn, Varanasi; Choukhambha Orientalia;2015;528
45. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 18, verse no.150. Reprint edn, Varanasi; Choukhambha Orientalia;2015;545
46. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 28, verse no.83. Reprint edn, Varanasi; Choukhambha Orientalia;2015;620
47. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 28, verse no.241. Reprint edn, Varanasi; Choukhambha Orientalia;2015;627
48. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 29, verse no.41. Reprint edn, Varanasi; Choukhambha Orientalia;2015;629
49. Vaidya Yadavji Trikamji Acharya. editor, Charaka Samhita of Agnivesa. Chikitsa Sthana Chapter 29 Verse 87. Reprint edn, Varanasi: Choukhambha Orientalia;2015;631
50. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 10, verse no.14. Reprint edn, Varanasi; Choukhambha Orientalia;2015;475
51. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 13, verse no.90. Reprint edn, Varanasi; Choukhambha Orientalia;2015;496
52. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 16, verse no.40. Reprint edn, Varanasi; Choukhambha Orientalia;2015;528
53. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 16, verse no.118. Reprint edn, Varanasi; Choukhambha Orientalia;2015;531
54. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 26, verse no.16. Reprint edn, Varanasi; Choukhambha Orientalia;2015;591
55. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 28, verse no.87. Reprint edn, Varanasi; Choukhambha Orientalia;2015;624
56. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 3, verse no.171. Reprint edn, Varanasi; Choukhambha Orientalia;2015;413
57. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 7, verse no.162. Reprint edn, Varanasi; Choukhambha Orientalia;2015;458
58. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 12, verse no.56. Reprint edn, Varanasi; Choukhambha Orientalia;2015;673

59. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 12, verse no.58. Reprint edn, Varanasi; Choukhambha Orientalia;2015;673
60. Tripathi B (editor). Ashtanga Hrudayam of Vagbhata, Sutra Sthana, chapter 13, verse no.1. Reprint edn, Delhi; Chaukhamba Sanskrit Pratishthan;2019;144
61. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 12, verse no.5. Reprint edn, Varanasi; Choukhambha Orientalia;2015;673
62. Peterson CT, Denniston K, Chopra D. Therapeutic Uses of Triphala in Ayurvedic Medicine. J Altern Complement Med. 2017 Aug;23(8):607-614. <https://doi.org/10.1089/acm.2017.0083>.
63. Peterson CT, Denniston K, Chopra D. Therapeutic uses of Triphala in Ayurvedic medicine. The Journal of Alternative and Complementary Medicine. 2017;23(8):607-614. <https://doi.org/10.1089/acm.2017.0083>
64. Gaiind KN, Mittal HC, Khanna SR. A study on the purgative activity of Triphala. Dept of Pharmacy, Punjab University. Oct 16, 1962. Available on: <https://www.ijpp.com>
65. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 7, verse no.61. Reprint edn, Varanasi; Choukhambha Orientalia;2015;453
66. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 16, verse no.6. Reprint edn, Varanasi; Choukhambha Orientalia;2015;459
67. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 27, verse no.28. Reprint edn, Varanasi; Choukhambha Orientalia;2015;614
68. Yadavji Trikamji (editor). Charaka Samhita of Charaka, Chikitsa Sthana, chapter 21, verse no.76. Reprint edn, Varanasi; Choukhambha Orientalia;2015;563
69. Sanjana Shrivastava et al., Emblica officinalis (Amla): A comprehensive review of the miracle berry. The Pharma Innovation Journal. 2022;11(6): 06-16. <https://doi.org/>
70. Hoyt, C. Diarrhea from vitamin C. JAMA. 1980;244(15):1674. <https://doi.org/10.1001/JAMA.1980.03310150014012>.
71. Kumar E, Kumar M, Lal R, Soni P, Sharma AK. Role of Amalakyadi Gana in Eye disorders: A review. World Journal of Pharmaceutical Research. 2023;12(12):223-230. Available on: www.wjpr.net
72. Gupta S, Ved A. Operculina terpepethum (Linn.) Silva Manso as a medicinal plant species:A review on bioactive components and pharmacological properties. Pharmacogn Rev. 2017;11(22):158-166. https://doi.org/10.4103/phrev.phrev_6_17
73. Tahani M.Almeleebia, Abdulrhman Alsayari, Shadma Wahab. Pharmacological and clinical efficacy of picrorrhiza kurroa and its secondary metabolites:A comprehensive review. Molecules. 2022;27:8316. <https://doi.org/10.3390/molecules27238316> .
74. Karki A; Rath SK; Sharma T. Trayamana (*Genitiana kurroa* Royle): A Substitution or an adulteration to Katuki(*Picrorrhiza kurroa* Royle ex Benth.) AYUHOM. 2023 July-Dec;10(2):74-77. https://doi.org/10.4103/AYUHOM.AYUHOM_13_23
75. Lakhan, Singh DC, Yadav C. Review on Indravaruni(*Citrullus colocynthis* Schrad): An Ethnomedicinally rich plant w.s.r. to its therapeutic uses. International Journal of Ayurveda and Pharma Research. 2017;5(7):32-36. Available on <https://www.ijapr.in>
76. Tunaru S, Althoff TF, Nusing RM, Diener M, Offermans S. Castor oil induces laxation and uterus contraction via ricinoleic acid activating prostaglandin EP3 receptors. Proc Natl Acad Sci U.S.A. 2012. Jun 05;109(23):9179-84. doi: <https://doi.org/10.1073/pnas.1201627109>
77. Amarnath V, Bangar MG, Saralaya. Anti Hyperglycemic activity of ethanol extract and chloroform extract of *Indigofera tinctoria* leaves in streptozocin induced diabetic mice. 2011;2(1):445-455. Available on: <https://www.researchgate.net>
78. Patil PS, Jadhav S. Prospective clinical study to assess efficacy and safety of Charakokta Raktapachaka Yoga in treatment of Dooshivishajanya Vicharchika with special reference to eczema. School of Ayurveda, Padmashree Dr.D.Y.Patil Vidyapeeth, Navi Mumbai. 2022. <http://hdl.handle.net/10603/430095>.
79. Yadavji Trikamji (editor). Charaka Samhita of Charaka, SutraSthana, chapter 4, verse no.16(36). Reprint edn, Varanasi; Choukhambha Orientalia;2015;34