

REVIEW ARTICLE

A Review on Parkinson's Disease and Cerebellar Ataxia and its Management through *Sarvangdhara*

Abhishek Yadav¹ , Ajay Kumar², Tina Singhal³

¹PG Scholar, Department of Panchakarma, Government Ayurvedic College and Hospital, Varanasi, Uttar Pradesh, India.

²Assistant Professor, Department of Panchakarma, Government Ayurvedic College and Hospital, Varanasi, Uttar Pradesh, India.

³Assistant Professor, Department of Rachana Sharir, Government Ayurvedic College and Hospital, Varanasi, Uttar Pradesh, India.

ARTICLE INFO

Article history:

Received on: 23-08-2024

Accepted on: 19-10-2024

Published on: 31-10-2024

Key words:

Cerebellar Ataxia,
Kampavata,
Mahanarayana Taila,
Parkinson's Disease,
Sarvangdhara

ABSTRACT

Parkinson's disease (PD) is a type of movement disorder that can affect the ability to perform common, daily activities. The most common motor symptoms of PD are *tremors* (a form of rhythmic shaking), stiffness or *rigidity* of the muscles, and slowness of movement (called *bradykinesia*). A person with PD may also have trouble with posture, balance, coordination, and walking. Common non-motor symptoms of PD include sleep problems, constipation, anxiety, depression, and fatigue, among others. This neurodegeneration disorder has a slow onset but is progressive. *Ataxia* (from the Greek, meaning "not ordered") is a term used to describe a number of abnormal movements that may occur during the execution of voluntary movements including incoordination, delay in movements, dysmetria (inaccuracy in achieving a target), dysdiadochokinesia (inability to perform movements of constant force and rhythm), and tremor. The role of the cerebellum is concerned with the timing, coordination, and integration of movements, including eye movements and speech. Therefore, lesions affecting the cerebellum would result in a disorder of movement coordination often termed as *cerebellar ataxia*. Ayurveda includes many different treatment regimes and one of them is *Sarvangdhara*. *Sarvangdhara* is a form of Ayurvedic massage remedy that involves pouring warm-treated oil over the whole body. The word "*Sarvangdhara*" is deduced from two Sanskrit words – *sarvang* means whole body and *dhara* means flow.

1. INTRODUCTION

Ayurveda – An eternal science of healthy living deals with the physical, psychological, and spiritual well-being of human beings and covers all the aspects of human life. It is not a materialistic science but a philosophical and factual truth, which is enhanced by our great ancient sages, through their experience, logic, and power of wisdom.

A group of neurological conditions that cause abnormal increased movements is referred as "movement disorders," which may be voluntary or involuntary. Movement disorders can also cause reduced or slow movements. The spectrum of movement disorders represented by "*The International Parkinson and Movement Disorders Society*" includes the following but is not limited to:

- Parkinson's disease (PD) and Parkinsonism
- Dystonia
- Chorea and Huntington's disease
- Ataxia
- Tremor and Essential Tremor
- Myoclonus and startle
- Tics and Tourette syndrome
- Restless legs syndrome
- Gait disorders
- Spasticity
- Stiff Person spectrum disorder.

1.1. Aims and Objectives of the Study

The present clinical study will be undertaken with the following aims and objectives-

- To find out the effectiveness of *Sarvangdhara* with *Mahanarayana taila* in the patients of the following disorders-
 - a. PD
 - b. Cerebellar ataxia
- To observe the quality of life of the patients.

Corresponding author:

Abhishek Yadav, PG Scholar, Department of Panchakarma,
Government Ayurvedic College and Hospital, Varanasi,
Uttar Pradesh, India.
Email: abhishekyadav2010@gmail.com

2. MATERIALS AND METHODS

2.1. Material

Different Ayurvedic and modern texts, research papers, etc. have been done for the review of this topic which includes:

- a. PD
- b. Cerebellar ataxia.

All the relevant descriptions about *Sarvangdhara karma*, its types, and probable mode of actions are collected.

2.2. Method

A systemic review of the topic with relevant material is included in this study.

2.3. PD

Over the past century, our understanding of the etiology of PD has evolved immensely. In 1919, it was first recognized that loss of pigmentation in the substantia nigra of the midbrain is a feature of the post-mortem brain examination of patients with PD. In the 1950s, it was further understood that the pigmented neurons that are lost in the substantia nigra are dopaminergic, and it is the loss of dopamine in subcortical motor circuitry that is implicated in the mechanism of the movement disorder in PD.^[1,2] PD is a disorder of the basal ganglia, which is composed of many other nuclei. The striatum receives excitatory and inhibitory input from several parts of the cortex. The key pathology is the loss of dopaminergic neurons that lead to the symptoms. An earlier feature of PD is tremor, typically unilateral and present at rest, which is usually the reason for seeking help at a neurology clinic.

After using the hands, such as to pick up a book, the tremor may vanish for some minutes, only to return when the patient is distracted and resting once again. This is the so-called reemerging tremor that is typical of PD. Although tremor is a prominent and early symptom of PD, it is not always present and is not a necessary feature for diagnosis. Slowness, or bradykinesia, on the other hand, is a core feature of PD. Patients will notice it takes them longer to do simple tasks, their walking is slower, and their ability to respond to threats is compromised. In the clinic, patients demonstrate an inability to tap their index finger and thumb rapidly, tap their foot rhythmically on the floor, or walk steadily. Rigidity is the third prominent feature of the examination. Patients appear stiff and find it difficult to rise out of a chair without support. While walking, there is reduced arm swing, more so on one side than the other, as PD typically is asymmetric at the onset. Checking muscle tone, lead pipe, and cogwheel rigidity can be appreciated. The fourth prominent feature of PD is gait disturbance, although this is typically a late manifestation.

2.4. Cerebellar Ataxia

Cerebellar ataxia refers to ataxia due to dysfunction of the cerebellum. Ataxia is the general term used to describe abnormal coordination of movements. It is demonstrated by deficits in speed, the amplitude of displacement, directional accuracy, and force of movement. This causes a variety of elementary neurological deficits including asynergy (lack of coordination between muscles, limbs, and joints), dysmetria (lack of ability to judge distances that can lead to under- or overshoot in grasping movements), and dysdiadochokinesia (inability to perform rapid movements requiring antagonizing muscle groups to be switched on and off repeatedly).

2.5. Movement Disorders in Ayurveda

Movement disorders have been previously identified many thousands of years ago in ancient Ayurvedic classics. As *Kampavata* (kamp means tremor and the word Vata means the bodily governing movements or tremors of Neurological origin. According to Ayurveda, *Kampavata* is a Nanatmaja disorder of Vata. In time of Caraka and Susruta cluster of signs and symptoms, such as *Kampa* (tremor), *Chestasanga* (bradykinesia and dyskinesia), *Vakavikruti* (disturbance in speech), *Vepathu* (out of alignment), *Prevepana* (excessive shaking), and *Spandana* (quivering) were described in different contexts, but they were not clubbed as part of one disease. As a separate clinical entity, *Kampavata* was first narrated by Acharya Madhavakara under the name of "*Vepathu*." However, it was the Basvarajiyam who for the first time gave an unambiguous description by explaining the clinical picture of *Kampavata* and all these clinical features are similar to that of PD.

2.6. Nidana

General etiology of the *vatavyadhi* considers for movement disorders. These are main causative factors:^[3]

- a. *Aaharaj* (Diet factors)
- b. *Viharaj* (life style)
- c. *Manasaj* (psychological)
- d. Others like *marma ghat* (head injury etc.)
 - Excessive use of rough, cold, little, and light food, excessive indulgence in sex, and night-vigil
 - Vata increasing lifestyle and constitutional tendencies are the responsible factors of the increase of *vata*
 - Psychological causes, such as *bhaya*, *krodha*, *chinta*, and *shoka*.
 - Other etiological factors are *Aamotpatti*(excessive secretion of gastric) and *Dhatukshaya* (decreasing amount of dhatu, such as blood and semen).

2.7. Charak Samhita

- The increased *Vata* affecting the *Marma* (vital parts) causes *Vepana*.^[4] This concept provides a base for understanding the pathology of tremors relating to the brain (*Marma*)
- Charaka includes *Stambha* in the vitiated symptoms of *Vata*^[5,6] mentions that *Stambha* is a disorder of *Snayu*
- The majority of the symptoms of *Kampavata* are also mentioned in different *Avarans* Charaka says that, *Avarana* of *Vyana* and *Udana* by *Kapha* produces symptoms, such as *Gatisanga*, *Vaksvara Graha*, *Gurugatrata*, *Stambhana*, and *Kampanam*.^[7]
- Charaka has also mentioned the tremors (*Kampa*) occurring in different organs like the head.^[8,9]
- *Shirokampa* has been considered as one of the most important diseases of *shira* (head).^[10]

2.8. Sushruta Samhita

- Susruta mentions in that the aggravated *Vayu* in *Snayu*,^[11] produces numbness, *Kampa*, and when incarcerated in *Sira* (veins) it produces stiffening and painful condition
- It has been mentioned that poisoning due to *Kalakuta* and *Mustaka* manifests as *Gatrastambha* (rigidity) and *Vepathu* i.e. tremors.^[12]
- *Vepathu* is also a long-term complication of *Dushivisha*.^[13]
- Diminished blinking slurred speech and tremor are complications of *Ardita*.^[14]

2.9. *Ashtang Hridaya and Ashtang Sangraha-*

- The Kampa has been mentioned as one of the symptoms of *Vata Prakopa*^[15] and has also been accepted as one of the symptoms of *Sarvanga Vata*.^[16]
- Astanga Sangraha and Astanga Hridaya both explained that *Stambha* occurs in the condition of *Mamsagata Vata, Medogata Vata, and Majjagata*.^[17,18]
- Astanga Sangraha mentions *Kayasya Vepathu* as a symptom of aging^[17] and *Kampa* is noted in *Raktakshaya, Pittakshaya, and Kaphakshaya* condition.^[18]

2.10. *Sarvang Dhara*

Panchakarma is one of the vital branches of Ayurveda, which deals mainly with the purification of the provoked doshas (physiological/pathological) from the body. Swedana is considered as *bahirparimarjana chikitsa* and one among the *shada-upkrama*. Swedana is the procedure that relieves stiffness, heaviness, and coldness of the body and produces sweating.^[19] Acharya Charak has mentioned that *swedana* therapy is the best treatment for the vitiated *Vata and Kapha* dominant diseases.^[20] Acharya Bhavprakash has mentioned that *drava sweda* is done by making the patient sit comfortable in a bathtub and *vatahara* decoction being poured over the shoulder of the patient in a stream continuously till the decoction in the tub rises up to 6 inches above the umbilicus of the patients. Such a *dhara* (continuous stream of liquid) can be done with warm tail, milk, or ghee.^[21] *Parisheka* is one variety of *drava sweda* in which medicated liquids or oils are filled into a pot, jug with a spout, or a tube and poured slowly and steadily over the affected areas or the whole body below the neck.

This is the form of *bahya snehana* (when cold-medicated liquids or oils are used) but when worm-medicated liquids or oils are used for inducing perspiration it is known as *Parisheka sweda*. When *Parisheka* is performed to the whole body including the head it is also called as *Kayashheka, Pizhichil, or Sarvang Dhara*.

The term *Sarvang Dhara* is made up of two words: *Sarvang* meaning full body and *Dhara* meaning stream pouring or showering or sprinkling of medicated liquids. Thus, *Sarvang Dhara* means stream pouring or showering of worm medicated liquids over the entire body.

2.11. *Sarvangdhara Guna*

- Improves stability as well as stamina of the body
- Increases the functioning of the digestive fire and corrects metabolism
- Renders excellence of the *ojas*
- Complexion of the skin becomes lustrous
- Work efficiency of the *indriyas* will be increased and they become more stable
- Reverses the aging process so a person stays young for a long time
- Useful in cases of fractures
- *Vatadi doshahara* – controls and creates equilibrium in all the doshas. Proved to be efficacious in patients suffering from different forms of paralysis
- Prevents wasting of muscles and degeneration of joints and soft tissues
- Soothes the nerves and improves blood circulation
- Removes stress and relaxes the mind
- Helps in easy delivery of the child during labor (difficult labor).

In short, the beneficial effects of the *snehana* and *swedana* may be obtained by this procedure.^[22]

2.12. Drug Review

Mahanarayana Taila Ingredients (Contents) are given in Table 1.

3. DISCUSSION

3.1. Probable mode of action of *Mahanarayana Taila*

Mahanarayana Taila contains a total of 56 ingredients and all the ingredients are herbal. In which, most of the ingredients possess *Tikta* (66.66%), *Madhura* (51.51%), *Katu* (42.42%), and *Kashaya* (33.33%) *Rasa*. Most of the ingredients have *Laghu* (72.72%), *Ruksha* (33.33%), *Guru* (27.27%), *Tikshna* (15.15%) *Guna*, followed by a maximum of 63.63% *Ushna* (and 36.36% *Sheeta*) *Virya*, and 57.57% *Katu* (and 42.42% *Madhura*) *Vipaka*. Most of the ingredient shows *V-K Shamaka* (48.48%) (18.18% V-P, 9.09% P-K) and *Tridosha Shamakata* (24.24%) property. Most of the ingredients possess *Dipana, Pachana, Lekhana, Vilayana, Shothahara, Mutrala, Krimighna, Basti-Shodhana, Srotoshodhana, Vedanahara, Dahashamaka, Jwaraghna, Pramehaghna, Ashmarinashana, Rasayana, Ojovardhaka, Balya, Vrishya*, etc. properties. It has various forms of route of administrations viz. internal (oral, per rectum) and external (*Abhyanga*) use. It is a unique *Taila Kalpana* that has a wide range of treatments for diseases and extensively indicated in *Vata Pradhana Vyadhi*.

3.2. Probable mode of action of *Sarvangdhara*

Sarvang dhara is the best treatment that Ayurveda provides for enhancing strength, immunity, and nutrition to the tissues, enhancing strength, immunity and nutrition to the tissues, to prevent degeneration and inflammation, to tackle pain, swelling, and catches related to Neuromuscular and Musculoskeletal disorders. An important thing to make note in this aspect is that *Sarvang dhara* is also useful in preventing and halting the progression of many psychosomatic disorders. *Sarvangdhara* brings *Dridta* (firmness) and *Vrishta* (vigour) in the body. It increases the *Agni, Oja* and enhances the complexion of the body. Regular practice of *Sarvangdhara* delays old age prevents fractures and dislocation and alleviates vitiated *Vata Dosha*. It results in the stability of *indriyas* and boosts its function. When *Sarvangdhara* is done with lukewarm medicated liquid it pacifies all the aggravated *Dosha*.^[23] *Sarvangdhara* acts due to its *Ushna* and *Teekshna* properties. The application of lukewarm liquid causes vasodilation of the blood vessels. Vasodilation opens the smaller channels and increases peripheral circulation. The pores in the skin open leading to an elimination of waste products through sweat. The increased circulation promotes better absorption of liquid into the body. The *Bhrajaka Pitta* present in the skin gets stimulated and helps in the transdermal absorption of the liquid. The liquid is poured from a height of 12 *angula* and the liquid falling creates a ripple effect. An impact force is generated which transfers into deeper tissues. This stimulus thus created stimulates the sympathetic nervous system. The fibers from the sympathetic nervous system innervates the tissues in every organ system and provide physiological regulation over diverse body processes.^[24]

4. CONCLUSION

Because of PD and cerebellar ataxia's crippling nature and non-availability of curative treatment PD and cerebellar ataxia has remained a great problem. Although in modern medical science, a lot of research works have been done but at present there is no therapy

that equivocally checks the progress of PD and cerebellar ataxia. In Ayurvedic classics, different types of treatment measures have been counseled to use in various types of *Kampavata*. Charaka has mentioned *Asthapana Basti for Vepathu* and Acharaya Vagasena has advised *Svedan, Snehena, Anuvasana, Niruha Basti, Shirobasti and Virechana*, etc. in the management of *Kampavata*. *Mahanarayana Tail* was recommended, which possesses *Vata kapha shamaka* properties with an ability to improve vitiated *Dosha* and *Dushya* and to disintegrate the pathophysiology of *Kampavata*.

5. ACKNOWLEDGMENT

Nil.

6. AUTHORS' CONTRIBUTIONS

All the authors contributed equally to the design and execution of the article.

7. FUNDING

Nil.

8. ETHICAL APPROVALS

This manuscript does not require ethical approval as it is a review study.

9. CONFLICTS OF INTEREST

Nil.

10. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

11. PUBLISHERS NOTE

This journal remains neutral with regard to jurisdictional claims in published institutional affiliation.

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How to cite this article:

Yadav A, Kumar A, Singhal T. A Review on Parkinson's Disease and Cerebellar Ataxia and its Management through *Sarvangdhara*. IRJAY. [online] 2024;7(10):52-56.

Available from: <https://irjay.com>

DOI link- <https://doi.org/10.48165/IRJAY.2024.71010>

Table 1: Mahanarayana Taila Ingredients (Contents)

Mahanarayana Taila Ingredients (Contents) ^[25]			
S.No	Name	Botanical name	Karma
1	Bilva	<i>Aegle marmelos</i>	Kapha-vata shamak, Shothahara, Shulahara, Agnivardhaka, Dipana, Pachana
2	Agnimantha	<i>Premna mucronata</i>	K-V shamaka, Shothahara, Vibandahara, Agnivardhaka, Dipana
3	Shyonaka	<i>Oroxylum indicum</i>	K- V shamaka, Shothahara, Dipana, Krimighna
4	Patala	<i>Stereospermum suaveolens</i>	Tridosha shamaka, Shothahara, Ruchikara, Shramahara, Dahahara
5	Paribhadra	<i>Erythrina variegata</i>	K-V shamaka, Shothahara, Dipana, Pachana, Anulomana, Shulahara, Krimighna, Mutrala
6	Prasaarni	<i>Paederia foetida</i>	V-K shamaka, Balya, Shothahara, Shulahara
7	Ashwagandha	<i>Withania somnifera</i>	K-V shamaka, Balya, Shothahara, Kandughna, Rasayana, Shukrala, Krimighna, etc
8	Brihati	<i>Solanum indicum</i>	K-V shamaka, Pachana, Ruchikara, Shulahara, Agnivardhaka
9	Kantakari	<i>Solanum surattense/Solanum xanthocarpum</i>	K-V shamaka, Dipana, Pachana, Krimighna, Kandughna, Balya, Shothahara
10	Bala	<i>Sida cordifolia</i>	V-P shamaka, Balya, Vrishya, Ojovardhaka, Ayurvedhaka, Brihana, Shothahara, Rasayana
11	Atibala	<i>Abutilon indicum</i>	V-P shamaka, Balya, Mutrala, Vrishya, Ojovardhaka, Krimighna, Dahahara, Brihana, Ashmarighna
12	Gokshura	<i>Tribulus terrestris</i>	Tridosha shamaka, Shothahara, Vrishya, Agnidipana, Anulomana, Ashmarinashana, Mutrala, Balya
13	Punarnava	<i>Boerhavia diffusa</i>	P-K shamaka, Dipana, shophahara, Shulahara, Bradhnahara
14	Shatapushpa	<i>Anethum sowa/Foeniculum vulgare</i>	K-V shamaka, Shothahara, Vedanahara, Dipana, Pachana, Anulomana
15	Devdaru	<i>Cedrus deodara</i>	K-V shamaka, Dipana, Krimighna, Kandughna, Shothahara
16	Jatamansi	<i>Nardostachys jatamansi</i>	Tridosha-shamaka, Dahahara, Balya, Medhya
17	Shaileyaka	<i>Barleria prionitis</i>	V-K shamaka, Shophahara, Dahahara, Dipana, Kandughna, Shulahara
18	Vacha	<i>Acorus calamus</i>	K-V shamaka, Medhya, Dipana, Vibandhahara, Shulaghna, Vrishya, Krimighna
19	Rakta Chandana	<i>Pterocarpus santalinus</i>	K-P shamaka, Vrishya, Dahahara, Krimighna
20	Tagara	<i>Valeriana wallichii</i>	V-K shamaka, Manodoshahara, Shulahara, Raktadoshahara
21	Kushta	<i>Saussurea lappa</i>	K-V shamaka, Shukrala, Kandughna, Shothahara, Shulahara
22	Ela	<i>Elettaria cardamomum</i>	Tridoshahara, Arshoghna, Dipana, Dahahara
23	Shalparni	<i>Desmodium gangeticum</i>	V-P shamaka, Brihana, Rasayana, Krimighna, Shophahara, Vrishya
24	Prishniparni	<i>Uraria picta</i>	Tridosha shamaka, Vrishya, Dahashamaka, Jwaraghna, Vranahara
25	Maashparni	<i>Teramnus labialis</i>	V-P shamaka, Shukrala, Shothahara, Jwaraghna, Dahahara, Vatavyaadhihara
26	Mudgaparni	<i>Phaseolus trilobus/Vigna trilobata</i>	Tridoshahara, Shukrala, Shothahara, Dahahara, Krimighna
27	Rasna	<i>Pluchea lanceolata</i>	K-V shamaka, Shophahara, Shulaghna, Pachaka, Vatavyaadhihara
28	Palaas	<i>Butea monosperma</i>	K-V shamaka, Balya, Shophahara, Rasayana, Shukrala, Krimighna
29	Granthiparni		P-K shamaka, Dipana, shophahara, Shulahara, Bradhnahara
30	Shatavari	<i>Asparagus racemosus</i>	V-P shamaka, Rasayana, Medhya, Pustivardhaka, Shukravardhaka, Balya, Shothahara, Vrishya
31	Saindhava lavana	<i>Sodii chloridum</i>	Tridoshahara (specially Vatahara), Dipana, Pachana, Ruchikara, Vrishya, Chakshush, Avidaahi
32	Godugdha	Cowmilk	Ojovardhaka, Jivaniya, Rasayana
33	Tila taila	Sesame oil	Vata shamaka, Brihaniya, Shodhaniya, Krimighna, Shulahara, Balya, Vrishya, Used as Basti to pacify the vitiated Vata dosha
34	Agru	<i>Aquilaria agallocha</i>	Kaphahar, vatahar
35	Nagkesar	<i>Mesua ferrea</i>	Kaphahar, varnya
36	Haridra	<i>Curcuma longa</i>	Krimighna, kapha-pittanut
37	Daru haridra	<i>Berberis aristata</i>	Doshapachan
38	Pushkarmool	<i>Inula racemosa</i>	Kapha-vatajit
39	Manjishtha	<i>Rubia cordifolia</i>	Kaphapittasamaka, Svarya, Krimighna, Rasayana, Sothaghna, Vrsya
40	Nagarmotha	<i>Cyperus rotundus</i>	Pittakaphahara, Dipana, Sothahara, Grahi, Pacana, Visaghna, Grahi
41	Tvakpatra	<i>Cinnamomum tamala</i>	Kaphavatahara, Rucya, Arsoghna
42	Bringaraaj	<i>Eclipta alba</i>	Kaphahara, Vatahara, Balya, Rasayana, Visahara
43	Jeevak	<i>Microstylis wallichii</i>	P-V hara, Balya, Rasayana, Sukrala, Bramhana, Jvaniya
44	Rishbhak	<i>Malaxis muscifera</i>	P-V hara, Balya, Rasayana, Sukrala, Bramhana, Jvaniya
45	Meda	<i>Polygonatum verticillatum</i>	V-pittahara, Kaphavardhan, Vrsya, Brmhana, Jvaniya
46	Mahameda	<i>Polygonatum verticillatum allioni</i>	V-pittahara, Kaphavardhan, Vrsya, Brmhana, Jvaniya
47	Ridhi	<i>Habenaria intermedia</i>	Pittahara, Rasayana, Vatahara, Vrsya
48	Vridhi	<i>Habenaria intermedia D</i>	Pittahara, Rasayana, Vatahara, Vrsya
49	Kakoli	<i>Roscoea purpurea</i>	Brmhana, Pittahara, Vatahara, Sukrala
50	Ksheerkakoli	<i>Lilium polyphyllum</i>	Brmhana, Pittahara, Vatahara, Sukrala
51	Sugandhabala	<i>Pavonia odorata</i>	Tridosahara, Vishghna, Raktadoshara
52	Chorak	<i>Angelica glauca edgew</i>	Kaphahara, medohara, Vatahara, Dipana, Pachana
53	Karpoora	<i>Cinnamomum camphora</i>	Kaphahara, reduces fat, and cholesterol levels
54	Kasmeera	<i>Crocus sativus</i>	Vatahara, varnya, rasayana, Vishghna
55	Mrigamada	Musk	
56	Pure water		