



ROLE OF UPASHAYA IN THE MANAGEMENT OF VIPADIKA KUSHTHA – A CASE REPORT

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ABSTRACT

Upashaya refers to an "Aushadhadijanitasukhanubandhaupashaya" that brings in the comfort, relaxation, and relief of symptoms through *Aushadha*, *Ahara* and *Vihara*. It can be considered a symptomatic treatment, actual treatment, and diagnostic tool. In today's context, utilising *Upashaya* is crucial for guiding the appropriate treatment plan, especially in specific disease-related conditions. *Upashaya* is classified into two main types: *Vipareeta* and *Vipareetaarthakari*. Among these, *Vipareeta Upashaya* is the most commonly referenced and practiced; Ubhaya *Vipareeta Aushadha* is one among the *Vipareeta Upashaya*, which means Medicines that act as both the cause of the disease and the disease itself. To highlight its role in *Upashaya*, it is necessary to analyse this concept with the intention of practically validating it, for which *Vipadika kushta* has been taken up for the study. *Vipadika kushta* is one of the *Kshudra Kushta*. It is *Vata Kaphaja Vyadhi*, which is characterised by *Sphutana*(Fissure)either in *Pani* (palm) or *Pada*(soles) or both with *Teevra Vedana* (severe pain). Based on the sources, the incidence rate is 3–4%, but it is one of the major cosmetic issues as well as a hurdle for carrying out routine work. This is the case report of the successful management of *Vipadika Kushtha* with a single formulation, *Tila kusumadi Lepa*—a 35-year-old male patient who presented with a complaint of Cracks on both feet with severe pain. The patient was given *Ayurveda* treatment for 15 days. After follow-up, significant improvement was

observed in signs and symptoms. The present case highlights the potential of a single formulation in managing *Vipadika Kushtha*.

Keywords: *Upashaya, Ubhaya Vipareeta Upashaya, Vipadika Kushtha, Pani-pada Sphutana* (Fissure in palm and soles), *Teevra vedana* (with severe pain).

INTRODUCTION

In Ayurveda, diseases are managed in *Aushadha*, *Ahara*, and *Vihara*, called *Upashaya*. It is one of the *Nidana panchaka*, which is explained in Ayurvedic literature. As the definition suggests, "*Aushadhadi-janitasukhanubandhaupashaya*,"¹ i.e., comfort, relaxation, and relief of symptoms through *Aushadha*, *Ahara* and *Vihara*. *Sukhanubandha* is attained through *Vipareeta* and *Vipareetaarthakari*. *Vipareeta Upashaya* is further classified into *Hetu*, *Vyadhi* and *Ubhaya*, which are medicines antagonistic to the cause of the disease, to the disease itself and to both the cause and the disease itself. *Vipareetaarthakari* is *Avipareeta* to the disease but still acts as *Vipareeta* and pacifies the disease. It is further classified into *Hetu*, *Vyadhi*, and *Ubhaya*, which are medicines that are not antagonistic to the cause, the disease itself, and both the cause and disease itself.

Bahirparimarjana refers to external applications such as *Churna* (Powder), *Taila* (oil), *Malahara* (ointment) and *Lepa* (*External application*), administered through methods like *Abhyanga*, *Avagaha* and *Sweda*. The medicines in the form of paste used for external application are called *lepa*.⁸ Topical application also known as *Lipta*, *Lepa* or *Lepana* and is of three types viz *Doshaghna*, *Vishaghna* and *Varnya*.⁹ In *Vipadika Kushtha*, *Lepa Chikitsa* is mentioned more frequently, which is why *Lepa* is used for treatment in this context.

Vipadika Kushta is one of the *KshudraKushta*.² It is *Vata Kaphaja Vyadhi*.³ As well as one among the *Vataja Nanatmaja Vyadhi*.⁴ Its signs and symptoms are *Pani Pada Sphutana* and *Teevra Vedana*,⁵ *Kandu*, *Daha*, *Ruja*,⁶ *Mandakandu*, *Raga* and *Pidaka*.⁷ It is one of the significant cosmetic issues as well as a hurdle for carrying out routine work. It is one of the most neglected conditions. This negligence affects the living conditions.

In this article *Tila kusumadi lepa* has been selected, is mentioned in the context of *Vipadika chikitsa*.¹⁰ So, here *Upashaya* is used in the form *Ubhaya Vipareeta Aushadha* by using *Tila kusumadi Lepa*.

Patient Information

A 35-year-old middle-class male farmer from a Rural area visited Sri Sri Ayurveda Hospital. The patient was 160 cm tall, weighed 60 kg, and looked tired. The patient mainly complained about Cracks on both feet and mild pain in the cracks for 3 years. The pain has been seen for 3 months. It has been difficult to walk properly due to the pain in the cracks for 15 days.

History of present illness:

A 35-year-old male patient came with a complaint of Cracks on both feet with severe pain. The patient is a farmer who has been working in the field, mostly barefoot, for 10 years. Part of his working routine involves standing and walking. As the days passed, the patient began to feel dryness and itching in the feet. He applied Petroleum jelly (Vaseline) for the same issue, but the symptoms were not reduced. After a year, cracks started to develop on the feet, which he neglected. Later, he experienced pain in cracked feet; later pain was increased for 3 months. He consulted a homoeopathy physician for the same issue and received temporary relief. For 15 days it was difficult to walk properly due to pain in cracked feet. Due to the recurrence of the symptoms, he approached Ayurvedic Hospital for further treatment. On examination, multiple moderate fissures were present on both feet with severe pain. According to clinical features, the patient was diagnosed as a case of *Vipadika Kushtha*.

Clinical Findings

The patient's respiration rate was 17/min, blood pressure was 130/90 mmHg and pulse rate were 72b/min

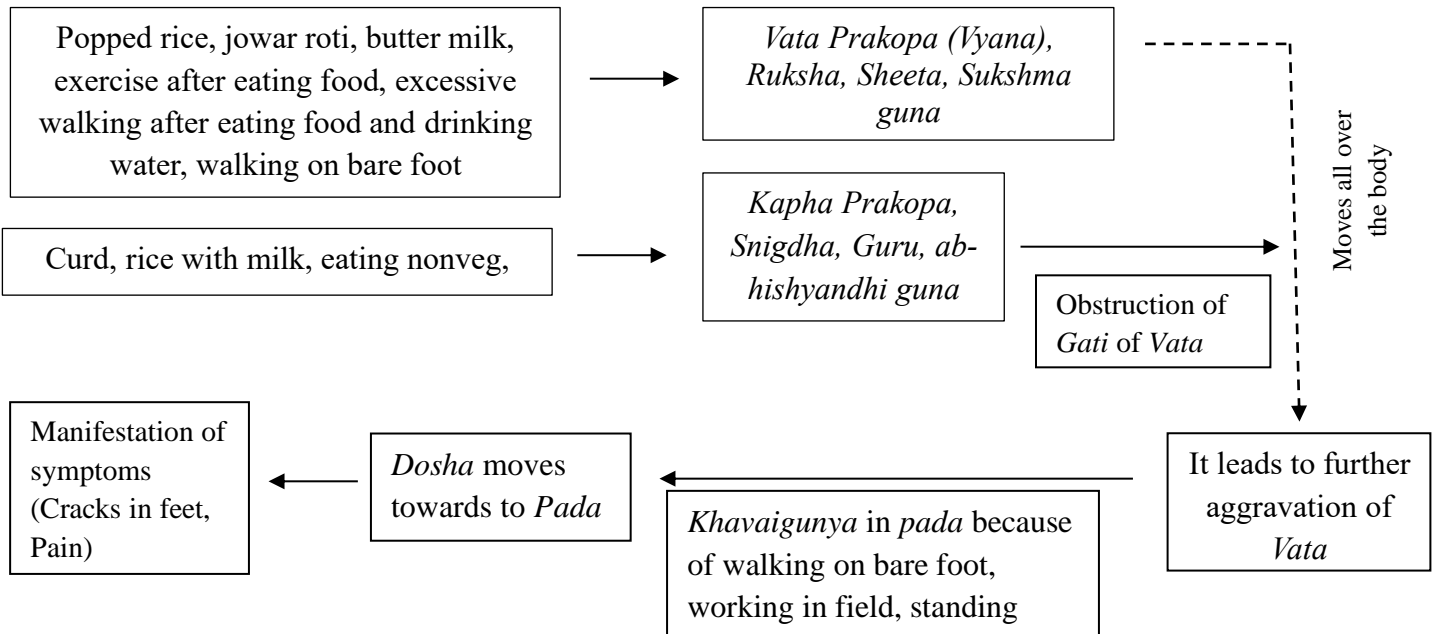
at the consultation time. Normal body temperature was present. There were no aberrant clinical findings for the cardiovascular, Central nervous, and pulmonary systems on assessment. During the examination of the integumentary system, dryness and cracking of feet were seen (*Pada Sphutana*), which was painful and symmetrically distributed in both feet. The surface of the cracks of the feet was rough and dry, and the margin was irregular. The patient's *Dasha vidha Pareeksha* (Tenfold of comprehensive bio-psychospiritual clinical review) was revealed as *Vatapittala Prakruti* and *Satvika-Rajasika Kaya Prakruti* (genetic constitution). Through *Vikruti Pareeksha*, it was found that the causes were found as consumed *Ruksha Ahara* (dry foods)(Jowara roti, *Takra*, popped rice)*Dadhi sevana* (curd), *Vidagdha Ahara Sevana*(Bajji, Bonda, fried food) *Mamsa Sevana*(Mutton, Chicken), rice with milk, walking after excessive consumption of food and drinking water, *Atapa sevana* (excessive exposure to sunlight), Drinking water excessively after exposure to sunlight, Work prolonged hours, walking to the field most of the time with bare foot. A conducive factor that supports the causative factor was the winter sea-

son. *Sara* (tissue excellence), *Samhanana*, *Pramana*, *Sattva* (psychic condition), *Satmya* (homologation), *Abhyavarana* (power of appetite), and *Jaranashakti* (digestive power) were *Madhyama*. The *Vyayama shakti* (power of performing exercises) was *Avara* (poor). The patient's *Asta Vidha Pareeksha* (eight-fold examination) is Vata pitta Nadi, with normal Micturition and incomplete evacuation of bowel and *Alipta* (not coated) tongue.

Regimen:

He wakes up at around 5 am. After getting fresh, he used to take 1 cup of tea on an empty stomach. He starts doing household chores like cleaning outside the home and has breakfast at around 8 am. Later, he will go to the farm, walking barefoot (most of the time) (around 2 km from his house). Lunch at 2 pm. After lunch, he rests sometimes. He will return home around 7 pm either by walking or by bike. He used to take more water continuously after coming to the house. His dinner time was usually around 8 pm. He applies Vaseline over the cracked foot, after which he gets mild relief. Generally, he sleeps from around 9.30 to 10 pm.

Samprapti:



Timeline

The treatment plan is for *Shamana Chikitsa* in the form of *Lepa–Tilak kusumadi Lepa* for 15 days.

Drug – *Tila kusumadi Lepa*

Time of application – 10 pm,

Time of removal – 6 am,

Duration of study – 21days,

Trial period – 15 days,

Assessments – 0th day, 7th day, 21st day, Follow up – on 21st day.

Table No.1: Ingredients of *Tila kusumadi Lepa*

Ingredients	<i>Tilakusuma</i> ¹¹	<i>Saindhava Lavana</i> ¹²	<i>Gomutra</i> ¹³	<i>Sarshapa Taila</i> ¹⁴
Latin name	<i>Sesamum indicum</i> Linn.	<i>Potassium Chloride</i>	<i>Bos indicus</i>	<i>Brassica integrifolia</i> west.
Family	<i>Pedaliaceae</i>	-	-	<i>Cruciferae</i>
Part used	<i>Kusuma</i>	-	-	<i>Sarshapa beeja-Taila</i>
Rasa	<i>Kashaya, Madhura,</i> <i>Tikta, Katu</i>	<i>Lavana</i>	<i>Katu, Tikta, Kashaya</i>	<i>Katu, Tikta</i>
Guna	<i>Snigdha, Guru</i>	<i>Laghu, Snigdha,</i> <i>Sookshma</i>	<i>Laghu, Tikshna,</i> <i>Kshara</i>	<i>Teekshna, Laghu,</i> <i>Snigdha</i>
Veerya	<i>Ushna</i>	<i>Sheeta</i>	<i>Ushna</i>	<i>Ushna</i>
Vipaka	<i>Katu</i>	<i>Madhura</i>	<i>Katu</i>	<i>Katu</i>
Karma	<i>Vatanashaka, Bala-</i> <i>karaka, Tvachya,</i> <i>Vranahara, Ropana</i>	<i>Tridosha Nashaka,</i> <i>Deepana, Pachana,</i> <i>Ruchya, Vrushya.</i>	<i>Kaphavata Nashaka,</i> <i>Deepana, Kandughna,</i> <i>Kushtaghna, Shoola-</i> <i>ghna.</i>	<i>Kaphavata nashaka,</i> <i>Kushtaghna,</i> <i>Kandughna, Kotha</i> <i>nashaka.</i>

Table No.2: The timeline of the treatment

Events	Timeline
The patient came to the Ayurveda hospital and was diagnosed with <i>Vipadika Kushtha</i> . For external application, the patient was described as <i>Tila kusumadi Lepa</i> .	December 16 th 2023
First, follow up	December 22 nd 2023
Second, follow-up	December 29 th 2023
Third follow-up without intervention.	January 5 th 2024

Assessment Parameters ¹⁵

Objective parameters:

Grade	Number of cracks
Mild	0-5
Moderate	6-10
Severe	More than 10

Sphutana (Cracks).

Grade	Length	Depth
Mild	≤ 1 cm	≤ 2 mm
Moderate	1 to 2 cm	2 to 5 mm

Severe	≥ 2 cm	≥ 5 mm
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Subjective parameters:

Vedana (Pain)	Gradations
No Vedana	0
After pressing	1
Only by touching	2
Without touching	3

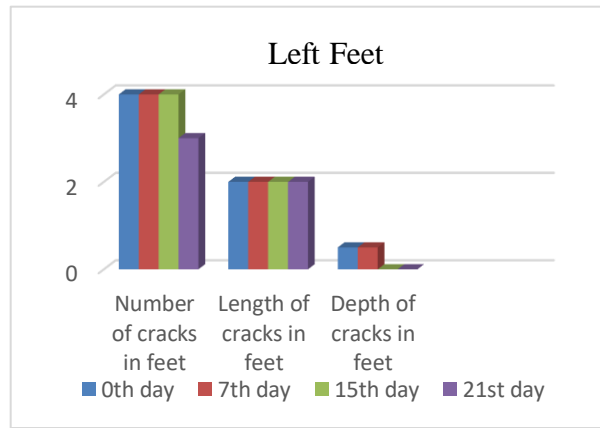
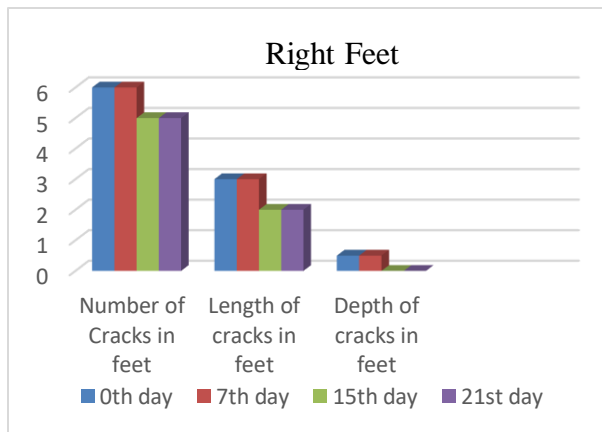
Diagnostic Assessment:

Table No. 3: Assessed symptoms before and after treatment

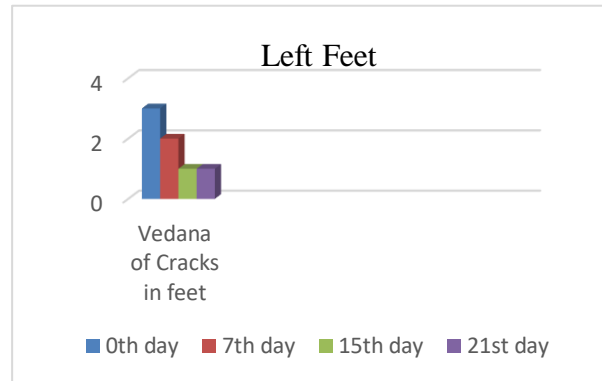
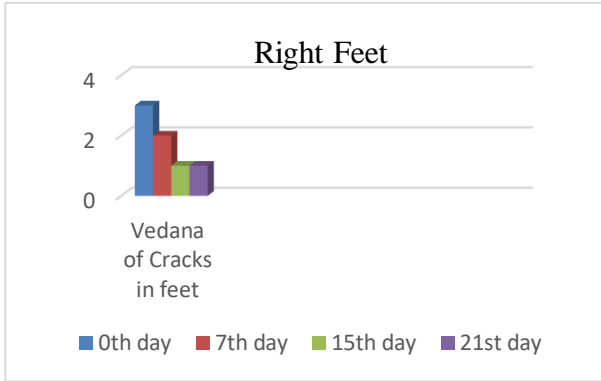
Sphutana (Cracks in feet).

Variable	BT		DT 7 TH DAY		AT 15 TH DAY		PTFU	
	Foot		Foot		Foot		Foot	
	Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt
No. of Cracks in feet	6	4	6	4	5	4	5	3
Length of cracks in feet	3	2	3	2	2	2	2	2
Depth of cracks in feet	0.5	0.5	0.5	0.5	0	0	0	0

Graphical representation of objective parameters before and after treatment in Right Feet and Left Feet
Subjective parameters:



Variable	BT		DT 7 TH DAY		AT 15 TH DAY		PTFU	
	Foot		Foot		Foot		Foot	
	Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt
Vedana of cracks in feet	3	3	2	2	1	1	1	1



Before Treatment



After Treatment



Therapeutic Intervention

The patient was given an application of Tila kusumadi Lepa in sufficient quantity based on cracks in feet at 10 pm and removal at 6 am for 15 days. The authors prepared the formulation itself.

Follow-up and Outcome

The patient was advised to visit our hospital once after 21 days—symptomatic improvement in both feet Number, Length, depth and Pain in cracked feet. The patient reported a feeling of betterment physically and psychologically. The patient was observed for improvement in symptoms related to *Vipadika Kushtha* on the four-point grading system (none, mild, moderate, and severe)

Table No.4: Details of the recorded observations

Variable	BT		DT 7 TH DAY		AT 15 TH DAY		PTFU	
	Foot		Foot		Foot		Foot	
	Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt
No. of Cracks in feet	Moderate	Mild	Moderate	Mild	Mild	Mild	Mild	Mild
Length of cracks in feet	Moderate	Moderate	Moderate	Moderate	Moderate	Moderate	Moderate	Moderate
Depth of cracks in feet	Mild	Mild	Mild	Mild	None	None	None	None

Pain in cracks of feet	Severe	Severe	Moderate	Moderate	Mild	Mild	Mild	Mild
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DISCUSSION

Table 5: Analysis of Gunas that Nidana Sevana probably vitiates:

<i>Nidana sevana</i>	Probably Gunas/Dosha involved
<i>Takra</i> (Buttermilk)	<i>Pittakara, Ushna</i> (hot), <i>Amla</i> (sour)(su.su.45/84)
<i>Dadhi</i> (Curd)sevana	<i>Kshara</i> (alkaline), <i>Vidahi, Amla rasa</i> (sour), <i>Pittakara</i> (ca.su.27) (su.su.21/21)
<i>Vidagdha ahara sevana</i> (spicy food)	<i>Pitta prakopa</i> (su.su.21/21)
<i>Mamsa Sevana</i> (nonvegetarian)	<i>Guru guna</i> (heavy), <i>Kapha prakopa</i> (ca.su.27/56-60)
Jowar roti, Buttermilk	<i>Vata Kopana, laghu</i> (light), <i>ruksha</i> (dry) (<i>Rajanighantu</i>)
Walking after excessive consumption of food and drinking water	<i>Tridosha prakopa</i>
Excessive exposure to sunlight	<i>Rakta dushti</i> (ca.su.24/10)
Work prolonged hours	<i>Vatakara</i>
Walking to the field most of the time barefoot	<i>Vatakara</i>

- **Hetuvyadhivipareetaushada**

The *aushadha* is unfavourable, contrary or opposite to the *Hetu* and *Vyadhi*.

वातशोथेवातहरंशोथहरं च दशमूलं।

Usage of *Dashamoola Kwata* in *Vataja Shotha*, which subsides *Vata* and *Shotha*.

Because *Ushna Veerya* (hot potency) acts against *Sheeta Guna* (cold quality) of *Vatadosha*, it also helps to do *Paka* of *Shotha*, which is *Shothahara Dravya*. (ca.su.4/15)

- **Samprapti Vighatana of Vipadika:**

Acharya Sushruta explained the mode of external applications in the context of *Dhamanis*, stating that the *lepa*s should be applied against the follicular hair direction; this facilitates the quicker absorption of the drugs through *Romakoopa*(hair roots), *Swedavahini* (sweat glands) and *Siramukha*(blood capillaries). *Bhrajaka Pitta* absorbs the *Veerya* (potency) of the applied medicine, which is then carried through the *Tiryak Dhamanis*. In

the case of *Vipadika Kushthia*, when the *Lepa* was applied, it acted locally by pacifying the doshas. The *Lepa* performed *Vata Shamana* through its *Snigdha* and *Ushna* properties. The *Sukshma* and *Teekshna Guna* of the *Lepa* allowed it to penetrate deeper into the *Srotas*, where it dissolved the blockage of *Kapha Dosha* with its *Ushna Veerya* and *Katu Vipaka*. The *Madhura* and *Kashaya rasa*, which possess *Sandhaneeya* and *Vrana Ropana* properties, helped heal the cracks on the feet. Meanwhile, they nourished the skin (*Twachha*) through their *Snehana* effect. This way, the *Samprapti Vighatana* (pathological process disruption) was achieved.

- **Discussion on action of Tila kusumadi Lepa**

Table No. 6: Rasa, Guna and Karma of Tila kusumadi Lepa

<i>Rasa/Guna</i>	<i>Karma/Guna</i>
<i>Kashaya</i> (Astringent)	<i>Kaphanashaka</i> (Reduces <i>Kapha</i>), <i>Ropana</i> (Healing), <i>Sandhaneeya</i> (binding)
<i>Madhura</i> (Sweet)	<i>Sandhaneeya</i> (binding), <i>Mardava</i> (softening), <i>Snehana</i> (nourishing)
<i>Tikta</i> (Bitter)	<i>Kaphaghna</i> (reduces <i>Kapha</i>), <i>Lekhana</i> (scraping), <i>Kushtaghna</i> (treats skin diseases),

	<i>Kandughna</i> (relieves itching)
<i>Katu</i> (Pungent)	<i>Kaphaghna</i> (reduces <i>Kapha</i>), <i>Krimighna</i> (antimicrobial), <i>Lekhana</i> (scraping), <i>Kushthaghna</i> (treats skin diseases), <i>Kandughna</i> (relieves itching)
<i>Lavana</i> (Salt)	<i>Kaphanissaraka</i> (eliminates <i>Kapha</i>), <i>Ushna</i> (heating), <i>Snigdha</i> (moisturizing)
<i>Snigdha</i> (Oily/Unctuous)	<i>Vatahara</i> (reduces <i>Vata</i>), <i>Kledana</i> (moisturising)
<i>Guru</i> (Heavy)	<i>Vatahara</i> (reduces <i>Vata</i>), <i>Upalepakrut</i> (enhances tissue growth)
<i>Laghu</i> (Light)	<i>Kaphaghna</i> (reduces <i>Kapha</i>)
<i>Sookshma</i> (Subtle)	<i>Kaphahara</i> (removes excess <i>Kapha</i>)
<i>Teekshna</i> (Sharp/Intense)	<i>Lekhana</i> (scraping), <i>Kaphavata hrut</i> (reduces <i>Kapha</i> and <i>Vata</i>)
<i>Kshara</i> (Alkaline/Sharp)	<i>Ushna</i> (Hot), <i>Teekshna</i> (sharp), <i>Ropana</i> (healing), <i>Krimighna</i> (antimicrobial)
<i>Ushna</i> (Hot)	<i>Vatakaphahara</i> (reduces <i>Vata</i> and <i>Kapha</i>)

• Discussion on Result

Tila kusumadi lepa has shown a good effect on the Number, length, depth and pain of cracks in feet.

Length of foot cracks: The *Kashaya* and *Madhura Rasa* of *Tila kusuma* and *Gomutra*, which possess *Ropana* (healing) and *Sandhaneeya* (binding) properties, along with the *Tvachya* (skin-benefiting) *karma* of *Tila kusuma*, helped reduce the length of foot cracks.

Depth of cracks of feet: The *Snigdha guna* of *Tila kusuma*, along with *Saindhava lavana* and *Sarshapa taila* in the *Lepa*, which is predominantly composed of *Jala* and *Prithvi Mahabhutas*, helped in *Kledana* (moisturising). According to Hemadri, *Snigdha's property moistens and binds the cells and tissues, alleviating the dryness caused by Vata*. The *Guru guna* of *Tila kusuma*, primarily related to the *Prithvi Mahabhuta* (A.H. Su. 6/10), contributes to *Lepa's* ability to enhance tissue growth, especially muscle tissue. With its *Tvachya*, *Vranahara* and *Ropana* qualities, *Tila kusuma* helps reduce the depth of cracks in the feet.

Number of cracks of feet: The *Guru guna*, *Snigdha guna*, *Tvachya*, and *Ropana* properties of *Tila kusuma*, along with the *Snigdha guna* of *Saindhava lavana* and *Sarshapa taila*, contributed to reducing the number of cracks on the feet. The reduction in the depth and length of the cracks also led to a decrease in their overall number.

Pain in cracks of feet: The *Snigdha guna* of *Tila kusuma*, *Saindhava lavana* and *Sarshapa taila* in the *Lepa* acted against the *Ruksha guna* of *Vata*, while the *Shoolaghna* property of *Gomutra* in the *Lepa*,

along with the *Ushna veerya* of *Tila kusuma*, *Gomutra* and *Sarshapa taila*, counteracted the *Sheeta guna* of *Vata*. This combination helped to reduce the pain in the cracks of the feet.

CONCLUSION

After analysing the results, it is evident that the Ayurvedic interventions used in this case have proven effective in managing *Vipadika Kushtha*. In this case, *Vipadika Kushtha* affected the *Pada* (feet), indicating that the *Doshas* were moving towards the feet due to the *Khavaigunya* (defect) in the feet. *Bahirparimarjana chikitsa*, in the form of *lepa*, played a crucial role in *Vipadika Kushtha*. *Sukshma* and *Teekshna Guna* of *Tila kusumadi lepa* enable it to penetrate deeply into the *Srotas*, where it dissolves the blockage of *Kapha Dosh*a with its *Ushna Veerya* and *Katu Vipaka*. *Tila kusumadi lepa* acts against the *Hetu* and *Vyadhi* through its *Rasapanchaka* properties. Further continuation of the medication can result in the complete cure of the condition.

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