

ROLE OF TAILA IN SANDHIGATA VATA

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ABSTRACT

Among various diseases mentioned in classics *vatavyadhi* acquires special importance the disease *sandhigatavata* is one of the *nanatmajavatavyadhi*. The incidence of the illness is most common in old age due to *dhatukshaya*. The disease belongs to *madhyamarogamarga* where in *sandhies* are involved. It is articular joint disease presenting with clinical features like painful joint movements, swelling and limitation of daily activities like dressing, walking, bathing. As it is *nirupastambitavatavyadhi*, *snehana* therapy in the form of *Abhyanga*, *paana* and *basti* plays an important role. Various *tailayogas* are explained for internal and external therapy and these *taila* should be selected as per the stage of the illness, *doshic* predominance and as per the *agni*.

Keywords: *Sanadhigatavata*, *Dhatukashaya*, Osteoarthritis, *Bahyasnehan*, *Abhyantarsnehana*, *Abhyanga*,

INTRODUCTION

Janusandhigatavata is caused due to vitiation of *vata-dosha* in joints. It is a condition of *Gatavata* where in *vyanavata* afflicts *asthi sandhi*¹. *Lakshanas* of *janusandhigatavata* are pain swelling, *vatapurnadrit-isparsa*, restricted movement of joints. These clinical findings simulate with the disease Osteoarthritis, a chronic degenerative inflammatory disease which has a great impact on quality of life.

It is the second most common musculoskeletal problem in the world population (30%) after back pain (50%). Osteoarthritis is one of the 10 most disabling diseases in developed countries². Osteoarthritis is explained as "Global Disease Burden" by WHO. Main characteristic features of disease are *sandhishoola*,

sandhishotha and *sandhigraha*. This disease mainly afflicts the knee joint of old age and obese group of people. *Sandhigatavata* is mainly a *dhatukshayajan-yavatavyadhi*, for *sandhigatavata* treatment modalities like *snehan*, *swedan*, *basti*, *agnikarma* are explained. *Snehana* is explained one among *shadvida upakramas*³ and *snehana* is indicated for *nirupastambhavatavyadhi*. Among the four *sneha* i.e. *sarpi*, *taila*, *vasa* and *majja*, *taila* is considered as the best *sneha* for *sandhigatavata* because *sandhigatavata* is *vatapradhanadhatukshayajatavyadhi* having increased *rukshata*, *kharata*, *shoola* and *stamba*. *Taila* having opposite quality i.e. *marutaghna*, *balavardhana*, *ushnata*, *sthirikarana* which helps to

subside *vata dosha*⁴. So different *taila prayoga* in *sandhigatavata* plays prime role. In *Pathya prayoga madhura, amla, lavana rasa pradhan ahara* along with *snigdha ahara* are the best.

Sneha in therapeutics

Sneha exhibits the qualities of *Snigdha, guru, shita, mrudu, drava, picchila, sara, manda, sukshmaguna*. It is used for *dheergayu*, prevention of diseases and maintenance of the health of a healthy person. Different *snehas* are explained for therapeutic purpose and they are classified into *sthavara sneha* and *jangamasneha* as per the origin⁵.

Sthavara sneha are obtained from plant seeds like *sarshapa taila, tilataila* etc. Among all *taila, tilataila* is considered as best one⁶. *Tilataila* is used as the base for preparing many medicated oil. *Jangama sneha* is obtained from animal. E.g. *navaneeta, ghrita, majja*.

Ghrita exhibits the quality of *vatapittahara*⁷ does not increase *kaphadosha*, does *agnideepana, chakshushya, prajakam, rasayana* and increases the intellectual power. *Taila* is best in *vatavyadhies*. It imparts the qualities of *twachya, snigdha, shlakshna, tanutwak, medaska, laghutwam, vatakaphanashaka*. *Vasasneha* is obtained from the *mamsa*, preferably given in *teekshnaagni* person *vatamargavarana*, to whom *vasa* is *satmya, yonishula, vishapidita, bhagnaroga, karnashula*, daily who are doing *vyayama*. *Majjasneha* is obtained from bone marrow. And it takes little more time to digest as it is *guru* in nature. It has benefit of *balavardhana, rasa* and *shukravardana, shleshma, meda* and *majjavardana*, and increases digestive function, good for *krurakosta* person and *vatadosha*.

Table 1: List of *taila* mentioned in classics:

Sl. No.	Name	Rogadikara/ indication	Reference	Mode of administration
1.	<i>Tila taila</i> ⁸	<i>Tailaguna / Sarvavataroga</i>	<i>Y. R.</i>	<i>Bahyaand abhyantar</i>
2.	<i>Mahavishagarbha taila</i> ⁹	<i>Vatavyadhi / sarvavataroga</i>	<i>B.R.</i>	<i>Abhyanga</i>
3.	<i>Vishagarbhataila</i> ¹⁰	<i>Vatavyadhi</i>	<i>B.R.</i>	<i>Abhyanga,</i>
4.	<i>Prasarinitaila</i> ¹¹	<i>Vatavyadhiniidanam/ gridrasiardita</i>	<i>Y. R</i>	<i>Abhyanga</i>
5.	<i>Saindhavadyataila</i> ¹²	<i>Amavata/ sarvavataavikaara</i>	<i>B. R.</i>	<i>Abhyanga, basti, virechan</i>
6.	<i>Nakulataila</i> ¹³	<i>Vatavyadhi</i>	<i>B. R</i>	<i>Abhanga</i>
7.	<i>Siddhartakataila</i> ¹⁴	<i>Vatavyadhi / sandhigatavata</i>	<i>B.R</i>	<i>Abhyanga</i>
8.	<i>EkadashatikaPrasirinitaila</i> ¹⁵	<i>Vatavyadhi</i>	<i>B.R</i>	<i>Abhyanga</i>
9.	<i>Vishnu taila</i> ¹⁶	<i>Vatavyadhi / sandhigatavata</i>	<i>B. R.</i>	<i>Abhyanga</i>
10.	<i>Narayana taila</i> ¹⁷	<i>Vatavyadhi</i>	<i>Chakradatta</i>	<i>Pana, Abhyanga, bhojana</i>
11.	<i>Masha balataila</i> ¹⁸	<i>Vatavyadhi chi / sarvavataroga</i>	<i>Chakradatta</i>	
12.	<i>Moolakadya taila</i> ¹⁹	<i>Vatavyadhi chi / sarvavataroga</i>	<i>Chakradatta</i> 22/146	<i>Pana</i>
13.	<i>Tritiya masha taila</i> ²⁰	<i>Vatavyadhi chi / janurujashoola</i>	<i>Chakradatta</i> 22/162	<i>Abhanga, basti</i>
14.	<i>Saptaprasthabrihanmasha taila</i> ²¹	<i>Vatavyadhi chi / sarvavataroga</i>	<i>Chakradatta</i> 22/165	<i>Pana, Abhyanga, basti</i>
15.	<i>Trishatiprasarini taila</i> ²²	<i>Vatavyadhi chi / sandhigatavata</i>	<i>Chakradatta</i> 22/215	<i>Abhyanga</i>
16.	<i>Prabhanjanavimardana taila</i> ²³	<i>Tailaprakarana / sarvavataroga</i>	<i>Sahasrayoga</i> 3/7	<i>Abhyaga,</i>
17.	<i>Karpasathyadi taila</i> ²⁴	<i>Tailaprakarana / sarvavataroga</i>	<i>Sahasrayoga</i> 3/15	<i>Pana, navana, Abhyanga</i>
18.	<i>Tintriniswarasadi taila</i> ²⁵	<i>Tailaprakarana / sarvavataroga</i>	<i>Sahasrayoga</i> 3/33	<i>Abhyanga</i>
19.	<i>Dashamoola taila</i> ²⁶	<i>Tailaprakarana / sandhigataroga</i>	<i>Ayurveda</i>	<i>Abhyanga</i>

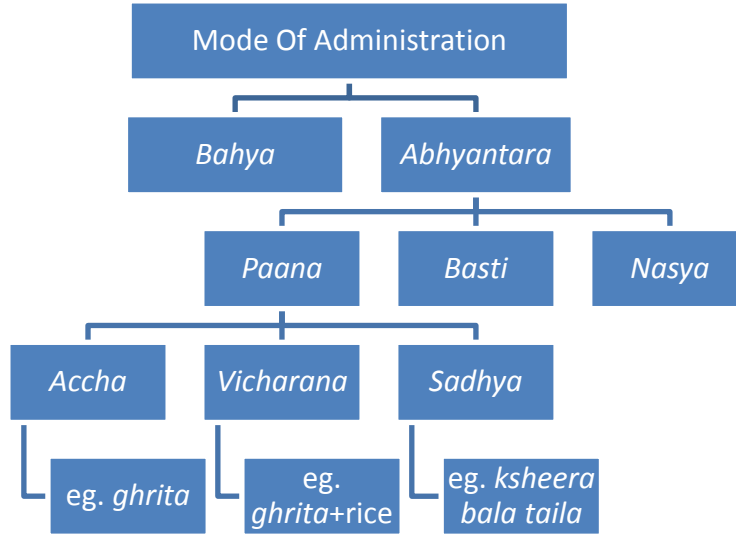
			<i>sarasan-graha</i>	
20.	<i>Brihatsaindhavadi taila</i> ²⁷	<i>Tailaprakarana / sandhi shoola, jaanushoola</i>	<i>Ayurveda sarasan-graha</i>	<i>Pana, Abhyanga</i>
21.	<i>Chinchadi taila</i> ²⁸	<i>Tailaprakarana / sarvavataroga</i>	<i>Ayurveda sarasan-graha</i>	<i>Basti, abhyanga</i>
22.	<i>Vishatinduka taila</i> ²⁹		<i>Rasa-tarangini</i>	<i>Abhyanga</i>
23.	<i>Kottumchukkadi taila</i> ³⁰	<i>Vataroga</i>	<i>sahasrayoga</i>	<i>Abhyang</i>
24.	<i>Vijayabhairav taila</i> ³¹	<i>Sarvavataroga</i>	<i>sahsrayog</i>	<i>Abhanga</i>
25.	<i>Lakshadi taila</i> ³²	<i>Balya</i>	<i>sahasrayoga</i>	<i>Abhyanga</i>
26.	<i>Murivenna taila</i> ³³			<i>Abhyanga</i>
27.	<i>Anutaila</i> ³⁴	<i>Greevashushkata</i>	<i>AstangaHridaya</i>	<i>Nasya</i>
28.	<i>Ksheerabalataila</i> ³⁵	<i>Vataroga,</i>	<i>AstangaHridaya</i>	<i>Abhyanga</i>
29.	<i>Dhmvantara tail</i> ³⁶	<i>Vataroga, pakshavadha, sar-vangavata</i>	<i>Vaidyayogar atnavali</i>	<i>Abhynga and dhara.</i>
30.	<i>Parinatakeriksheeradyataila</i> ³⁷	<i>Vatavyadhi/Apabahuka</i>	<i>Sahasrayog.</i>	<i>Nasya and abhyanga</i>
31.	<i>Baladhatryadi taila</i> ³⁸	<i>Vataroga</i>	<i>Sahasrayog</i>	<i>Abhyanga nasya</i>
32.	<i>Balashwagandhalakshadi taila</i> ³⁹	<i>Vataroga</i>	<i>Sahasrayog</i>	<i>Abhanga</i>
33.	<i>Brahatmasha taila</i> ⁴⁰	<i>Vatavyadhi, avabahuka, vishwachi</i>	<i>BhaishajyaRatnavali</i>	<i>Basti, abhanga, nasya.</i>
34.	<i>Sahacharaditaila</i> ⁴¹	<i>Vataroga</i>	<i>AstangaHridaya</i>	<i>Abhyanga</i>

Sneha is administered in different routes for therapeutic purpose i.e. *bahya* and *abhyantaar*⁴². In *bahya sneha lepa*, *mardana*, *snehaavgaha*, and *parisheka* are explained. *Snehapaana*, *basti*, *nasya* are included in *abhyantara snehapana*. *Snehapana* can be done in the form of *acchasneha*, *vicharanasneha* and *sadyasneha*. Internally *snehan* is administered for the purpose of *shaman*, *shodhan* or *bramhan*. For *brimhana*⁴³ effect *sneha* is administered along with different dishes, about 10 to 20 ml of *ghrita* is mixed with food, like in rice or other food preparations, in *sandhigatavata* orally *ksheerabala* tail is given as it reduces the *rukshata* and *stamba*. *Shodhanangsneha*⁴⁴ is given for *dosha utklesha* and to bring *doshas* from *shakha* to *kosta*. The basic unit of any living being is cell. The primary aim with *snehan* is to make sure that all the cells in the body are saturated with so much fat that its

ready to expel everything out at first chance and in the process flushing out toxins as well, once the cell expels the fat plasma level increases and to maintain the normal equilibrium, excess plasma level increases and to maintain the normal equilibrium the excess plasma is transported back to the GIT. Administration of *vamana* or *virechana* at this stage will complete the detox or *shodhana* process. Many research works have been conducted on reduction high lipid profile by *shodhananga snehana* therapy. In *Shamanangasneha*⁴⁵ for *doshashaman* purpose *sneha* is administered in less quantity of *madhyamamatra* of *sneha* during *annakaala* in empty stomach when person feels hungry. *Shamanasneha* normalizes the aggravated *doshas* without disturbing normal *doshas*. Internally when *ghrita* is administered in *shamnanga sneha* it may reach upto stem cells present in stratum basalis

and may reduce the proliferation rate by acting as *vatashamaka*. *Ksheerabalataila* is given as *shamanangasneha* in *vatavyadhi* like e.g. *sandhigatavata* and *dhatukshayavatavyadhi*.

Chart 1: Mode of administration



Taila is applied differently according to the different anatomical structure like *murdhnitaila*, *nasatarpana*, *nasapoorana*, *akshitarpana*, *gandoosha*, *kavala*, *Abhyanga*, *lepa*, *mardana*, *padaagata*, *snehaavgaha*, *udvartana* and *parisheka*. *Snehana* has the effect of *vishyandan*, *kledana*, *mardavakara*.

Mode of action of *Abhyanga*

The seat of *vatadosha* is *twacha* and the qualities of *vatadosha* is *ruksha*, *sheeta* etc. and qualities of *taila* are *vatahara* and it is not going to aggravate *kaphadosha*, gives strength to the body along with lustre to the skin. *Ushnaguna* having the opposite quality of *vatadosha* helps to relieve from stiffness

caused by *sheetaguna* of *vata*. Due to *sookshma guna* it easily penetrates all the *srotas*. Due to its *sara* and *dravaguna* it helps in the liquefaction of the *doshas*. Among all *taila*, *tilataila* is considered as best⁴⁶. *Abhyanga* direction improves the blood circulation, helps to remove toxins from the tissue and improves the function of the musculo-skeletal system. *Bhrajaka pitta* having the function of *Deepana* and *pachana* which is seated on skin helps in the digestion of *sneha* which is applied on knee joint in circular direction thus enters the *romakoopa* and *srotas*. By this it shows systemic action of *taila* on external application.

Table 2: Penetration of *taila* in different *matra kala*

Sl no.	Dhatu	Matra kala	Time in seconds
1.	<i>Romakoopa</i>	300	96
2.	<i>Twacha</i>	400	128
3.	<i>Rakta</i>	500	160
4.	<i>Mamsa</i>	600	192

5.	<i>Meda</i>	700	224
6.	<i>Asthi</i>	800	256
7.	<i>Majja</i>	900	288

So, the oil applied on the skin enters the deeper structures of the body in about 288 seconds or approximately 5 min⁴⁷. By doing *Abhyanga* arterial and venous and lymphatic blood flow to the skin and muscles is increased, softens the skin, and stimulates the nerve endings. Expels the metabolic waste product from the body and reduces the swelling and by *snehana* pain and swelling will be reduced and helps in movement of body and joint. As it is *jaranashana* property *abhyanga* is advised daily as a part of *dinacharya*⁴⁸. So, the Simile of stick is told that we can soften the hard stick by dipping it in oil similarly stiffness of the joint is reduced and helps for easy movement of the joint and body. And tonicity of the muscle is maintained. And dryness of the skin will be reduced by *snehana* therapy.

Principles of drug absorption to the skin is explained that, A topical drug aims at providing high concentration of the drug at the site of application with the minimal systemic absorption, to avoid systemic adverse effects. Therapeutic effects depend not only on pharmacological properties of the active drug but also on physical properties of the vehicle.

Absorption of the drug depends on the partition coefficient of the drug between the vehicle and stratum corneum, which depends upon lipid solubility of the drug. The state of hydration of the stratum corneum, drug concentration in the vehicle and thickness of the skin, thicker the skin lowers the drug penetration⁴⁹. This is important as the thickness of the skin varies in the different regions of the body and with the age. Oil applied on the skin will help to retain the water in the skin

There are three major mechanisms by which oil absorption occurs these are, through the transcellular absorption chemical is transferred through the keratin packed corneocytes by partitioning into and out of the cell membrane. And by intercellular absorption chemical is transferred around the corneocytes in the lipid-rich extracellular regions and by appendageal absorp-

tion chemical bypasses the corneo-cytes, entering the shunts provided by the hair follicles, sweat glands, and sebaceous glands.

Basti Chikitsa: Here the medicine is administered through the rectal route and *basti* is classified as *niruha* and *anuvāsana basti*⁵⁰. In *anuvāsana basti sneha* is the main ingredient of the *basti* so it is also called as *snaihikabasti*, this *basti* will not produce the diseases even after longterm administration and as per the dose it can be administered in three forms i.e. *snehabasti* it is one fourth quantity of *niruhabasti* i.e. six *pala*. In *anuvāsana basti* dose of the *sneha* is half of the *snehabasti* is used i.e. three *pala* and in *matrabasti* one and half *pala* of *sneha* is used i.e. dose is half of *anuvāsana basti*⁵¹. In *nirupastambhitavatavyadhi snehabasti* is routinely practiced, because it has opposite qualities to *vata dosha* and it does *snehana* to the body like *bramhanbasti* increases *rasadi dhatu* in the body *dashamuladi anuvāsana basti* which is mainly prepared out of *vasa* of *anupamamsa* and *kalka* of *jeevaniyagana oushadhies* is given in *vatarogas*, *shatahwadianuvāsana basti* in *vatarogas*, and for *balavardanjeevantyanuvāsana basti* is used. And for *vata shamanghritabasti* is used, *chandanadibasti* for *pittashaman*. *Panchatiktaguggulughritamatrabasti* is most practiced in *sandhigatavata*, as it is *madhyamarogamargavyadhi* where in *asthi* and *vata dosha* are afflicted mainly and for *asthidhatu* impairment *tikta* and *dravyasnidhadravayas* plays an important role. *Tikta* rasa is predominant in *vayu* and *aakashamahabhuta* so it has got affinity towards *asthi*.

In *niruha basti*⁵² *kwathadravyas* are administered through the rectal route and specially given in *avarana* conditions. *Niruhabasti* is classified into *utkleshanabasti* where in *doshautklesha* and liquefaction of *dosha* and *malas* are observed. *Shodhanabasti*, *lekhanabasti*, *shaman*, *brimhana*, *karshana* and *rasayanabasti*. Examples are *lekhanabasti* in *sthoullya*, *erandamuladiniruhabasti* in *gridrasi*, *ksheerabasti* in *vatarakta*, *vaitaranabasti* in *amavata*, *sahacharadi-*

basti in *gridrasi*, *baladyabasti* in *vridha* and *durbala* persons, *panchamuladibasti* for *balavardan*, *mustadiyapanabasti* in *janujanghagatavyadhies* and *vatarakta*, *adman* and *ksheerabasti* in *vatarakta*.

Probable mode of action of *basti*

Action of *basti* depends on the ingredients. The main ingredients of *niruhabasti* includes *saindhava*, *makshika*, *sneha*, *kalkaandavapa*. Due to *sukshma* and *teekshnaguna* of *saindhavalavan* it can easily enter the *srotu* and breaks the *doshasanghata*. *Singdhaguna* of *snehadravaya* protects mucus membrane and helps for liquefaction of *doshas*, produces *snigdghata*. Honey forms homogenous mixture with *saindhava* and it is easily absorbed in the body. *Kalka*, *kwatha* and *avapadravyas* are selected as per the *doshadushya* predominance so it helps in *sampraptivighatana*. The given *basti* will reach *nabhipradesha*, *kati*, *parshwa*, *kukshi*, and the *veerya* of *basti* spread throughout the body and will churn the *doshachaya* and *mala chaya* and expel out *purisha* and *dosha* completely without any complications. *Veerya* of the medicine is carried by *vadosha* through the *siras* and spread throughout the body. *Veerya* of given *basti* is immediately transferred to *apanavata*, from *apana* to *samana*, thus to *vyana* and then to *udana* and then to *prana*. Then the *veerya* reaches to *pitta sthana* and *kaphasthanana* and bring them back to normalcy. The given *basti* will reach *nabhipradesha*, *kati*, *parshwa*, *kukshi*, and the *veerya* of *basti* spread throughout the body and will churn the *doshachaya* and *mala chaya* and expel out *purisha* and *dosha* completely without any complications. Similarly, how the sun evaporates the water from the earth by his rays in the similar way *basti* in the *pakwashaya* drags the *doshas* from whole body by its *ushna* and *teekshnaguna*. *Anuvasanbasti* does nourishment of the whole-body simile given for this *basti* is by watering the roots of plant whole plant is nourished.⁵⁴

As per the modern science mode of action of *basti* is explained by four mechanisms⁵⁵, administered *bastidravya* will penetrate through the epithelial cells, and phytochemicals in *basti dravyas* absorbed into systemic circulation. Certain hypothesis can be postulated like absorption mechanism, neural chemical and me-

chanical stimulation, Administered *bastidravya* will penetrate through the epithelial cells of GIT and absorbed into systemic circulation, *niruhabasti* is hyper osmotic solution which causes movement of solvent from cells of colon to the lumen containing *bastidravya* facilitates the absorption of endotoxin and produce detoxification during elimination. *basti* has got irritant property along with other ingredients which may induce colonic distension. The distension stimulates pressure which produces evaculatory reflex. The sigmoidal, rectal and anal regions of large intestine are considerably better supplied with parasympathetic fibers than other part of intestine. Even though the *basti* given is expelled out immediately as such or mixed with feces, the *veerya* of *basti* is spread throughout the body by *vata*. From this it can be understood that the action of *basti* is possible through nervous stimulation so that within seconds itself the action of *basti* is spread. Certain mechanical and chemical stimulation is responsible for the action of *basti*. Both cause nervous stimulation and there produces the effect.

Mode of action of *Nasya*

Nasa is the portal gateway of *shira*⁵⁶, *nasa* being the doorway *toshira*, *andshiras* is the main seat for *indriyas*, so the diseases where *adhistan* is *shiras* there all *nasya* plays a vital role. The drug administered through nostrils, reaches *shringhataka* by *nasa* and spreads in the *murda* taking route of *netra*, *shrotra*, *siramukha* and scrapes the morbid *dosha* in supra clavicular region and expels them from the *uttamanga*.

As per modern science⁵⁷, nasal route is easily accessible, convenient and reliable with a porous endothelial membrane and a highly vascularized epithelium that provides a rapid absorption of compounds into the systemic circulation, avoiding the hepatic first pass elimination. The nasal tissue is highly vascularized making it a good site for rapid and efficient site for absorption. Olfactory nerve is chemoreceptor in by nature. It is known that through olfactory pathway this nerve relates to limbic system and hypothalamus which are having control over endocrine secretions and hypothalamus stimulate the higher centers of brain which shows action on regulation of endocrine

and nervous system. And the diffusion of the drug is through mucus. Drug administered through the nasal cavity rapidly transverse through the cribriform plate into the CNS by three routes directly by olfactory neurons, through supporting cells and the surrounding capillary bed, directly into the cerebro-spinal fluid (CSF). Some of the examples of *nasya* in *vatavyadhi*, *karpasastyaditailanasya* in *greevastambha*, *naavananasya* in *ardita*.

Some research works:

1. Application of *NirgundiTaila* along with internal administration of the same has a considerable reduction in the pain and inability to perform joint movements
2. *NirgundiTaila* has shown the preventive effect on the development of formaldehyde-induced experimental arthritis.
3. Studies have revealed that the lipid medium is highly suitable for penetration of the drug molecule through stratum corneum on this basis; it can be assumed that the oil used in *Nirgundi Patra Upanaha* serves as a lipoidal medium for penetration of drug molecules and exerts an immediate anti-inflammatory effect.
4. A comparative study using orange oil/ginger oil for a massage with olive oil as control conducted in Hong Kong showed a significant reduction in knee pain, stiffness, and enhanced the physical function of the joint.
5. *Karpasastyaditailanasya* in cervical spondylosis a case study was done
6. *Laghumashataila* in *apabahuka*
7. *Parinatakeriksheeraditaila nasya* in *apabahuka*
8. *Janubasti* with *mahanarayan tail* and *naadisweda* in *janusandhigatavata*
9. *Anuvasana basti* with *ksheerabala taila* in *sandhigatavata*, a study was conducted on 30 patients of *janusandhigatavata*.
10. *Hapushadiyapanabasti* in *sandhigatavata*.
11. *Erandamuladiyapanabasti* in lumbar spondylosis.

CONCLUSION

Taila has *madhura*, *tikta*, *kashayarasa*, *tikshna*, *guru snigdha*, *vikasi* and *sara gunas* and *ushnaveerya* and *madhurvipakavatahar* not increases *kaphadosha*. *Karmas* are *krimihar*, *sthirikar*, *tvachya*, *balakara*, *yonivishodhaka* and it is best administered in *pravrita* and *sheetakaal*. *Taila* is explained as best in *vatavyadhi* (*nirupastambhavatavyadhies*), different *taila* should be selected as per the *avasthavishesha* and *doshavishesha* of the *vatavyadhi*, and these *tailas* can be administered in *abhyantara* or *bahya* form. *Taila* exhibits the qualities of *teekshna*, *vyavayiguna*, *sukshmasrotogami*, by giving *sanskar* to *taila* it can be used in both *krisha* and *sthoora* persons. It is best *vatahara* among all *chatusnehas*, it increases *bala* of the person suffering with *vatavyadhi*. *Purana* of *rikta srotus* will be done by *taila* by its *snigdha*guna, so *taila* plays vital role in *vatavyadhi* as a preventive and therapeutic effect. In *dinacharyataila abhyanga* is included to prevent *jarajanyavyadhies* and to prevent diseases like *sandhigatavata*.

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