

“Understanding Skin Disorders Through The Concept Of Rakta Pradoshaja Vikara”

Dr. Varsharani Kurrey¹, Dr. Nikhila Ranjan Nayak², Dr. Priyanka Kaushik³

¹PG Scholar Dept. of Roga Nidana Evam Vikriti Vigyana, Shri NPA Govt Ayurvedic College, Raipur, Chhattisgarh.

²Prof. & HOD Dept. of Roga Nidana Evam Vikriti Vigyana, Shri NPA Govt Ayurvedic College, Raipur Chhattisgarh.

³Lecturer, Dept. of Roga Nidana Evam Vikriti Vigyana, Shri NPA Govt Ayurvedic College, Raipur, Chhattisgarh

Corresponding Author : Dr. Varsha Rani Kurrey

Department of Roga Nidana evum Vikriti Vigyana Sharir,
Shri NPA Government Ayurvedic College, Raipur, Chhattisgarh
Email: varshar323@gmail.com

Abstract

Skin disorders constitute a significant group of diseases affecting individuals of all age groups and are often chronic, recurrent, and difficult to manage. In Ayurveda, the skin (Twaka) is closely related to Rakta Dhatu, and vitiation of Rakta plays a pivotal role in the manifestation of various dermatological conditions. The concept of Rakta Pradoshaja Vikara described in classical Ayurvedic texts provides a comprehensive understanding of the etiopathogenesis of skin disorders.

Rakta Pradoshaja Vikara occurs due to improper dietary habits, lifestyle factors, psychological stress, environmental influences, and suppression of natural urges (Vega Dharana), leading to qualitative and quantitative abnormalities in Rakta Dhatu. The vitiated Rakta, along with associated Doshas, particularly Pitta and Kapha, manifests as various skin diseases such as Kustha, Vicharchika, Dadru, Shitapitta, Shwitra and other Twaka Rogas. These conditions are characterized by symptoms like discoloration, inflammation, itching, burning sensation, eruptions, and chronicity.

Understanding skin disorders through the concept of Rakta Pradosaja Vikara helps in correlating classical Ayurvedic principles with modern dermatological perspectives. This conceptual framework not only elucidates the pathogenesis of skin diseases but also provides a rational basis for preventive and therapeutic approaches such as Raktashodhana, Dosashamana, dietary regulation, and lifestyle modification.

Keywords : Rakta Dhatu, Rakta Dushti, Twaka Vikara, Skin disorders, Pshychological, Vega Dharana Raktashodhana.

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Introduction

After the union of Shukra (male reproductive element) and Shonita (female reproductive element), and following the entry of the Bhutatma (soul), the developing Garbha (embryo) undergoes nourishment and progressive development under the influence of the Tridoshas with predominance of Pitta Dosha. During this process, multiple layers of the skin (Twakastara) are formed on the posterior aspect (Pristha bhaga) of the embryo. As the Sarvanga paripurna Garbha (fully developed embryo) attains completeness, these layers collectively constitute the Twaka (skin), which covers and envelops the entire body (Sarva-sharira-avarana). Thus, Twaka is the external covering organ of the body. Vata, Pitta, and Shleshma (Kapha) are the three pillars (Tristhuna) of the body. All normal (Prakrita) and abnormal (Vaikrita) physiological functions of the body are dependent upon them. Similarly, Rakta

constitutes the fourth essential component of the body. Although Rakta is not classified as a Dosha, its role in maintaining the body (Sharira dharana) and in the causation of diseases (Roga utpatti) is considered equivalent to that of the Doshas. Acharya Sushruta has clearly stated that Vata, Pitta, and Shleshma are the fundamental causes of the formation of the body (Sharira utpatti). These three uphold and sustain the body in the form of pillars; hence, several Acharyas have referred to them as Tristhuna. The body cannot exist without Vata, Pitta, Kapha, and Rakta. In Dehadhari Purusha, the Jalatmaka Ahara prasada Rasa, when it becomes Ranjita by the action of Visuddha Tejas in the form of Ranjaka Pitta and remains Avikrita and Nirmala, is known as Rakta Dhatu². Although the status of Rakta is considered equivalent to that of the Doshas, Rakta itself is not a Dosha. Rakta is always subject to vitiation (dushita), but it does not possess the

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capacity to vitiate (dushana) other bodily components. Doshas are those entities which initiate the Prakriti of the body and have the ability to vitiate the entire body, including the Dhatus.

The Rasa (Chyle) formed after the digestion of food, which possesses predominance of Jala Mahabhuta and provides nourishment and satiation to life similar to water, first reaches the Yakrita (liver) and Pliha (spleen). There, it attains Raga (red coloration) and is transformed into Rakta Dhatu³.

Thus, Rakta is considered a causative factor for both the maintenance of the body (Deha dharana) and its destruction (Deha vinasha), comparable to the three Dosas; however, Rakta is not a Dosha but a Dhatu. All the Dhatus of the body are nourished through Rakta, and it is by Rakta alone that the body is sustained. Rakta itself is life; therefore, Rakta should be protected and preserved with utmost care. Rakta itself is the substratum of Prana. Properly formed and purified Rakta endows living beings with Bala (strength), Varna (complexion), Sukha (well-being), and Uttama Ayu (excellent longevity). The Prana of living beings invariably follows Rakta.

The skin consists of seven layers and covers the entire body. Acharya Sushruta has described seven layers of the skin, whereas Acharya Charaka has mentioned six layers. In modern medical science, the skin is broadly divided into two main layers, the outer layer (epidermis) and the inner layer (dermis). However, since the epidermis is composed of five layers and the dermis consists of two layers, the skin in reality comprises seven layers, which corresponds well with the classical Ayurvedic description.

While describing the layers of the skin, Acharya Charaka has designated the first layer as Udakadhara and the second layer as Asrigdhara. The third layer is considered the site (adhithana) of Sidhma and Kilasa. The fourth layer is described as the seat of Dadru and Kustha. In the fifth layer, Alaji and Vidradhi are said to originate, while the sixth layer is considered the site of deep rooted, difficult to treat Arusi. Acharya Charaka and Sushruta have considered the fourth and fifth layers of the skin as the sites of origin for skin diseases^{4,5}.

Disorders arising from Pitta Dosa and Rakta Dhatu Pradosha are included under skin diseases (Twaka Vikara). This relationship is explained on the basis of Ashraya-Ashrayi Bhava⁶, wherein Rakta serves as the substratum and Pitta as the residing Dosha. Skin disorders caused by vitiated Pitta include Twaga daha (burning sensation of the skin), Twaga avadarana (cracking or fissuring of the skin), Charma dalana

(splitting of the skin), Rakta kotha, Rakta visphota, and Rakta-mandala (circular erythematous patches). Disorders such as Udara arise due to Kapha Dosha. Skin diseases originating from vitiation of Rakta Dhatu include Kustha, Visarpa, Pidika, Vyanga, Piplu, Tilakalaka, Dadru, Charma-dala, Shwitra, Pama, Kotha, and Rakta Mandala. Among the aforementioned conditions, some are classified under Kshudra Rogas.

Kustha as a Raktapradoshaja Disease

In Ayurveda, kustha is regarded as one of the most significant and complicated skin conditions. It is described as a tridosaja vyadhi with the involvement of Rakta, Tvaka, Mamsa, and Lasika. However, Rakta plays a dominant role, especially in inflammatory and discolorative lesions.

From the modern dermatological perspective, many chronic and recurrent skin disorders are now understood as conditions with significant systemic inflammatory, immunological, and metabolic involvement, rather than merely localized cutaneous pathology. Disorders such as psoriasis, eczema (atopic dermatitis), acne vulgaris, urticaria, and vitiligo are associated with immune dysregulation, chronic inflammation, oxidative stress, and altered cytokine activity circulating throughout the body. This modern understanding closely parallels the Ayurvedic concept of Rakta dushti, wherein vitiated Rakta Dhatu, often in association with aggravated Pitta dosha, circulates throughout the body and manifests pathological changes at the level of the skin (tvaka). In Ayurveda, Rakta serves as the primary medium responsible for maintaining normal skin colour, temperature, and texture; hence, its qualitative impairment results in inflammatory lesions, erythema, discoloration, pruritus, and suppuration features commonly observed in these dermatological conditions.

For instance, psoriasis may be correlated with chronic Rakta-Pitta dushti characterized by erythema, scaling, and recurrence. Eczema and urticaria, marked by itching, redness, and hypersensitivity reactions, reflect Rakta pradosha with Kapha association. Acne vulgaris, involving inflammation and suppuration, corresponds to Rakta and Pitta vitiation at the level of the skin and hair follicles. Vitiligo, characterized by loss of pigmentation, may be understood as a disorder of Rakta and associated dhatus affecting normal varna utpatti.

Causative factors of Kustha

Aharaja Nidana (Dietary factors)

- Intake of viruddha ahara (incompatible foods)

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- Excessive use of drava, guru, snigdha, abhishyandi ahara.
- Frequent consumption of dadhi (curd), dugdha (milk), matsya (fish) together
- Excess intake of amla, lavaṇa, kaṭu rasa
- Use of navanna (newly harvested grains)
- Excessive intake of madhura rasa
- Pishthanna (rice flour), tila (sesame seed)
- Overeating or eating before digestion of previous food (adhyashana)
- Consumption of sour, unhygienic food.

2. Viharaja Nidana (Lifestyle factors)

- Divasvapna (day sleep), especially after meals
- Suppression of natural urges (vega dharana)
- Excessive exposure to heat, cold, wind, or sunlight
- Sudden exposure to cold after heat and vice versa
- Excessive physical exertion or complete lack of exercise
- Improper seasonal regimen (rituviparyaya)
- Sexual indulgence during indigestion or illness
- Shrama, karma vaishamyata

According to modern perspectives⁷

- **Genetic factors** - Inherited susceptibility (e.g., psoriasis, atopic dermatitis)
- **Immunological factors** - Autoimmune and hypersensitivity reactions
- **Infectious agents** - Bacteria, fungi, viruses, and parasites
- **Environmental factors** - Climate, UV radiation, pollution, chemicals
- **Metabolic and endocrine disorders** - Diabetes, thyroid and hormonal imbalance
- **Drugs and chemicals** - Adverse drug reactions, contact allergens
- **Psychological stress** - Aggravates chronic skin disorders
- **Lifestyle & Dietary Choices** - High stress levels, poor diet, and inadequate sleep contribute to inflammatory conditions.
- **Hygiene & Products** - Excessive washing, and the use of aggressive skincare products can damage the skin barrier.

Causes of Rakta Dushti

- Consumption of impure or vitiated alcoholic preparations (Dushita Madya).
- Excessive intake of alcoholic drinks (Ati-Madya Sevana).
- Intake of strong or highly potent alcohol (Tikshna Madya).
- Use of intoxicating substances such as Ganja, Bhang, Charas, Opium, etc.

- Excessive consumption of Lavana (salty), Kshara (alkaline), Amla (sour), and Katu (pungent) substances.
- Continuous intake of Kulatha (horse gram), Masa (black gram), Sem (a type of pulse), and Tila taila (sesame oil).
- Excessive consumption of Pindalu (yam), Muli (radish), and green vegetables.
- Regular consumption of meat of aquatic animals, animals of marshy regions (Anupadesaja), and burrowing animals or birds (Prasaha mamsa).
- Intake of curd (Dadhi), sour substances, buttermilk or curd water, Sukta or Sattu preparations, Sura and Sauviraka (fermented drinks).
- Consumption of incompatible food considering quantity, place, and season (Matra, Desha, Kala Viruddha Ahara).
- Intake of stale, moist, or foul smelling food.
- Sleeping during the day after consuming thin, unctuous, and heavy foods.
- Overeating (Atibhojana).
- Excessive anger (Atikrodha).
- Excess exposure to sunlight and strong wind.
- Suppression of the urge for vomiting (Vamana Vega Dharana).
- Failure to perform bloodletting (Raktamokshana) at the proper time, especially in Sarad Ritu.
- Excessive physical exertion (shrama).
- Injury or trauma (Abhighata).
- Severe heat or stress (Santapa).
- Indigestion (Ajirna).
- Adhyasana – taking food again before the previously consumed food is digested.
- Seasonal influence of Sarad Ritu, which naturally aggravates Pitta and Rakta.

All these factors aggravate Pitta dosha, which in turn vitiates Rakta due to their ashraja-ashrayi bhava. The vitiated Rakta circulates through Raktavaha strotas, lodges in the skin (tvaka), and produces various skin manifestations. Whereas modern dermatology views skin diseases as multifactorial conditions with systemic involvement rather than purely local disorders.

Pathophysiology of Kustha

Improper Ahara and Vihara, especially intake of Guru (heavy), Viruddha (incompatible), and Asatmya (unsuitable) food, eating during Ajirna (indigestion), and consumption of Ahitakara food lead to vitiation of Doshas. Performing Vyayama (excessive exercise) and Maithuna (sexual activity) after Snehapana (intake of ghee or oil) or Vamana (therapeutic emesis), regular intake of meat of domesticated, marshy, and aquatic

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animals with milk, sudden exposure to cold water after heat exposure, and suppression of the urge of vomiting further aggravate the Doshas.

The aggravated Vata, along with vitiated Pitta and Kapha, enters the Tiryakgami Sira (transverse channels) and vitiates the external tissues such as Rakta (blood), Lasika (lymph), Tvaka (skin), and Mamsa (muscle). As these Doshas spread throughout the body, they produce Manḍala (patches or lesions) on the skin. If untreated, the vitiated Doshas progressively contaminate Rakta, Mamsa and other Dhatus, spread internally, and ultimately lead to the development of Kustha (skin disorders).

Clinical features

1. Changes in Skin Colour (Varna Vikriti)

One of the earliest and most prominent features of Rakta dushti is abnormal skin discoloration. These include:

- Raga (erythema or redness)
 - Syava, Nila or Krisha varṇa (dark, bluish, or blackish discoloration)
 - Pandutva (pallor)
 - Tilakalaka, Nilika, Vyanga (localized hyperpigmented or hypopigmented patches)
- These changes reflect impairment of the normal varna prasadana function of Rakta Dhatu.

2. Inflammatory Manifestations

Due to the close relationship between Rakta and Pitta, inflammatory signs are very common:

- Daha (burning sensation)
 - Ushnata (increased local temperature)
 - Shotha (swelling)
 - Raga and Vedana (redness with pain)
- These features are classically observed in conditions such as Visarpa, Pittaja Kustha, eczema, and acute urticaria.

3. Skin Eruptions and Lesion

Vitiated Rakta produces a variety of primary and secondary skin lesions, including:

- Piddaka (papules, pustules, acneiform eruptions)
 - Mandala (circular patches)
 - Sphota (vesicles and blisters)
 - Kotha (wheals)
 - Srava (oozing or discharge)
- These lesions indicate deeper involvement of Rakta along with Tvaka and Mamsa Dhatu.

4. Pruritus and Sensory Disturbances

Abnormal sensations are frequently reported:

- Kandu (itching)
- Toda (pricking pain)
- Supti (numbness)

- Sparsaasahatva (hypersensitivity or altered sensation)

These occur due to obstruction and irritation of channels (strotorodha) caused by vitiated Rakta.

5. Suppuration and Ulcerative Changes

In advanced or chronic stages, Rakta dushti leads to destructive lesions:

- Paka (suppuration)
 - Vrana utpatti (ulcer formation)
 - Vidradhi (abscess)
 - Durgandha srava (foul-smelling discharge)
- These features signify severe Rakta and Pitta involvement with secondary infection.

6. Chronicity and Recurrence

A hallmark of Raktapradoshaja skin disorders is their:

- Chirakaritva (chronic course)
- Punaravritti (recurrent nature)
- Daurbalya of skin healing

7. Systemic and Associated Symptoms

Since Rakta is a circulating dhatu, systemic features may also be present:

- Jvara (fever) in acute inflammatory states
- Trishna (excessive thirst)
- Daurbalya and klama (fatigue)
- Aruchi (loss of appetite)

These symptoms indicate generalized Rakta pradosaja rather than localized skin involvement.

The clinical presentation of Raktapradoshaja Vikara is characterized by discoloration, inflammation, eruptions, itching, suppuration, chronicity, and recurrence, reflecting systemic Rakta and Pitta vitiation. Recognizing these features helps in accurate diagnosis and guides comprehensive management through Raktasodhana, dosha samana, and lifestyle regulation, ensuring sustained therapeutic outcomes.

Preventive measures

Under the Mahakasayas, the Varnya (complexion-enhancing), Kusthaghna (anti-dermatological), Raktaprasadaka (blood purifying), and Kandughna (anti-pruritic) groups of drugs hold significant therapeutic value in the management of skin disorders. Their application is essential because most skin diseases are rooted in Rakta dushti and dosa imbalance, particularly involving Pitta and Kapha. These drug groups not only alleviate visible symptoms such as itching, discoloration, inflammation, and eruptions but also act at the systemic level by purifying Rakta and restoring normal skin physiology.

Hence, the rational selection and proper administration of these Mahakasaya dravyas play a crucial role in breaking the pathogenesis, preventing recurrence, and promoting long term skin health.

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Varnya Dravya - Chandana, Nagakeshara, Mulethi, Manjistha etc.

Kusthaghna Dravya - Khadira, Amla, Abhaya, Haridra etc.

Kadughna Dravya - Chandana, Jatamamsi, Nimba, Kutaja, Mulethi, Daruharidra etc.

Raktashodaka Dravya - Khadira, Nimba, Guduchi, Triphala etc.

Many medicinal formulations helps in the effective management and alleviation of skin diseases.

Kwatha/Asawa/Arishta	Churna	Lepa	Oil / Ghrita
Patoladi kwatha	Mustadi churna	Chitrak adi lepa	Shwetakar viradhya
Triphaladi kwatha	Triphaladi churna	Mansya dilepa	Kushtha taila
Guduchyadi kwath	churna	Kushtha di lepa	Kanakaksh iri taila
Triphalasawa	Pancha nimba churna	Sidhma lepa	Mahatiktaka ghrita
Madhwasawa	churna	Eladi lepa	Mahakhadi ra ghrita
Kanakarishtha	Sarshapadi churna	Pathyadi lepa	Panchatikta ghrita
Khadirasava	Vidangadi churna		Manjishthadi taila

Pathya in kushtha

Light and easily digestible food along with bitter-tasting vegetables. purified Bhallataka (Semecarpus anacardium), Triphala, and Nimba (Azadirachta indica) along with medicated ghee, and pointed gourd (Parvara), Ghrita pana, Tuvani, Jayaphala etc. are pathya in kushtha.

Vamana, Virechana, Nasya, Raktamokshana (siravedha), Lepa etc. are pathya in kushtha.

Apathya in Kustha

Heavy food, sour-tasting substances, milk, curd, meat of marshy animals (Anupa mamsa), fish, jaggery, and sesame, Udada, Viruddhahara, Madya, Amlarasa, Tila, Navanna and other Pittavardhaka ahara etc. are apathya in kushtha.

Vegadharana, Krodha, Chinta, Shoka, Excessive work, Vishamashana, Atirasanga, Swedana, Atapa sevana, Pittaprakopaka vihara etc. are apathya in kushtha.

Discussion

Skin disorders represent one of the most common health concerns worldwide and are increasingly understood as systemic conditions rather than isolated cutaneous abnormalities. The comparative exploration

of Raktapradoshaja Vikara in Ayurveda and modern dermatological causation reveals striking conceptual similarities despite differences in terminology and theoretical frameworks.

In Ayurveda, the foundation of skin pathology lies in the vitiation of Rakta Dhatu, often in association with Pitta Dosa. Rakta is responsible for maintaining normal complexion (varna), vitality, and nourishment of the skin. When exposed to improper diet (viruddha ahara, excessive amla lavana katu rasa), faulty lifestyle practices (divasvapna, vega dharana), and psychological stress (krodha, shoka, chinta), Rakta becomes vitiated. Due to its circulatory nature, vitiated Rakta disseminates throughout the body and manifests externally on the skin in the form of discoloration, inflammation, itching, eruptions, suppuration, and chronic lesions. This systemic origin explains the recurrent and resistant nature of many skin diseases described under Kushtha and other Raktapradoshaja conditions.

Modern dermatology similarly recognizes that chronic skin diseases such as psoriasis, eczema, acne, urticaria, and vitiligo involve complex interactions between genetic predisposition, immune dysregulation, inflammatory mediators, environmental triggers, metabolic disturbances, and psychological stress. The role of circulating cytokines, autoimmune mechanisms, and systemic inflammation parallels the Ayurvedic understanding of circulating vitiated Rakta producing cutaneous manifestations. Thus, both systems acknowledge that skin pathology often reflects deeper systemic imbalance.

The clinical features described under Raktapradoshaja Vikara such as erythema, burning sensation, discoloration, papules, pustules, wheals, pruritus, and chronic recurrence closely resemble the inflammatory and immunological presentations described in modern dermatology. Furthermore, the chronicity and relapsing nature of these conditions highlight the importance of addressing root causes rather than merely suppressing symptoms.

Therapeutically, Ayurveda emphasizes nidana parivarjana, systemic purification (shodhana), Rakta prasadana measures, and mental health regulation. Modern medicine focuses on immunomodulation, anti-inflammatory therapy, antimicrobial treatment, and lifestyle modification. Both approaches, though methodologically different, underline the necessity of comprehensive and individualized management.

Conclusion

Understanding skin disorders through the concept of Raktapradoshaja Vikara provides a profound and

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systemic insight into dermatological pathology. Ayurveda clearly establishes that the skin (twaka) reflects the internal state of Rakta Dhatu, and when Rakta becomes vitiated due to improper diet, faulty lifestyle, and psychological disturbances, it manifests externally in the form of various skin diseases. The features of discolouration, inflammation, itching, eruptions, suppuration, chronicity, and recurrence seen in many dermatological conditions can be logically explained through Rakta dushti, especially in association with Pitta Dosha. This perspective shifts the understanding of skin diseases from a purely local problem to a systemic imbalance involving dosa, dhatu, and strotas. When correlated with modern dermatology, which recognizes immune dysregulation, systemic inflammation, genetic predisposition, and stress as major contributors to chronic skin diseases, the Ayurvedic concept of Raktapradoshaja Vikara appears highly relevant and scientifically aligned. Thus, this concept not only deepens theoretical understanding but also guides comprehensive management through nidana parivarjana, shodhana, rakta prasadana, and mental health regulation. Ultimately, it reinforces the Ayurvedic principle that sustainable healing of skin disorders requires correction of internal pathology along with external care.

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