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Shodhana and Shamana Chikitsa in Pakshaghata - A Conceptual Study

Alka¹, Parveen Kumar², Gayathri M Prakash³, Chander Shekhar Sharma⁴

- 1. PG Scholar, Department of PG Studies in Panchakarma, Dayanand Ayurvedic College and Hospital, Jalandhar, Punjab
- 2. Associate Professor, Department of PG Studies in Panchakarma, Dayanand Ayurvedic College and Hospital, Jalandhar, Punjab
- 3. Assistant Professor, Department of PG Studies in Panchakarma, Dayanand Ayurvedic College and Hospital, Jalandhar, Punjab
- 4. Prof. & HOD, Kayachikitsa, Dayanand Ayurvedic College and Hospital, Jalandhar, Punjab

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Corresponding author-

Alka, PG Scholar, Department of PG Studies in Panchakarma, Dayanand Ayurvedic College and Hospital, Jalandhar, Punjab

Email:

drpardeepalka@gmail.com

ABSTRACT:

Vata Vyadhis (diseases due to vitiated Vata) are becoming most prevalent diseases now a days. Diseases caused by Vata (Dosha responsible for cognition and movement) in its vitiated condition are called Vata Vyadhis. Pakshaghata is one of the Vata Vyadhis which can be correlated with Hemiplegia/Stroke in accordance with the clinical presentation. In the present era due to bad eating habits and sedentary life style, many diseases are manifesting like diabetes mellitus, hypertension etc resulting in more complicated conditions like stroke. A stroke is described as a sudden neurological episode brought on by reduced blood flow to the brain which lasts for more than 24 hours or leading to death, with no probable cause other than a vascular one. Around 1.8 million people in India suffer from stroke every year. According to the modern sciences the brain cells once damaged cannot be repaired and regenerated, resulting in poor prognosis. So the treatment of *Pakshaghata* (Hemiplegia/Stroke) is challenging in itself. Ayurveda emphasize on three line of treatment i.e Nidana Parivarjana (Avoidance of etiological factors) Shodhana (Purification) and Shamana (Pacification). It has shown by the different studies that Shodhana Chikitsa, Shamana Chikitsa and Pathya Sevan (Intake of Wholesome food) seems to be very effective in alleviating the disease, improving the quality of life of the affected individual. Therefore it is assumed that Nidan Parivarjana, Shodhana and Shamana Chikitsa, will be of great help in alleviating the disease. Keeping the above said fact in mind present the present article emphasizes on the compilation of various Shodhana and Shamana therapies mentioned in the classics of Ayurveda for the management of Pakshaghata.

Keywords: Pakshaghata, Hemiplegia, Stroke, Chikitsa

INTRODUCTION

The term *Pakshaghata* comprises of two words *Paksha* and *Aghata*. *Paksha* or *Parshva Matre* means side/half part of body and *Aghata* means killing or destruction. So *Pakshaghata* can be defined as the paralysis of one half of

the body. It is one of the *Vataja Nanatamaja Vikaras*. (diseases due only to vitiated *Vata*) also described under *Maha Vatavyadhi*. In almost all the *Ayurvedic* literatures, *Pakshaghata* has been specified under *Vata*



Vyadhis which can be defined as an Asaadharana Vyadhi (uncommon, special diseases) caused by the Vikruta Vata. (vitiated Vata).

The clinical features of *Pakshaghata* bear a resemblance to those of stroke. Stroke is defined as the clinical syndrome of rapid onset of cerebral deficit (usually focal) lasting more than 24 hours or leading to death, with no apparent cause other than a vascular one. Stroke is the third commonest cause of death in the developed countries.³

There are two major causes of stroke-

- 1. A blocked artery which leads to Ischemic Stroke
- 2. Rupture of an artery which leads to Hemorrhagic stroke. 85% of Stroke are ischemic in nature and 15% are primary hemorrhages.⁴

The incidence rate of stroke in India ranges from 105 and 152/100,000 people per year based on the latest research studies.⁵ In the present era due to bad eating habits and sedentary lifestyle strokes are becoming one of the leading causes of death and disability in India. Hence it is the need of hour to find out best possible way for the prevention and treatment of consequences produced herein. Ayurveda offers a hope for the same with the Shodhana (Purification) and Shamana (Pacification) therapies mentioned in the ancient literature.

MATERIALS AND METHODS

Different *Ayurvedic* texts, previously published research papers, the accessible material on the internet have been reviewed for the collection of data as the present study is a review article. All the *Brihatrayi* and *Laghutrayi* has been reviewed. Different modern texts related to the topic has also been reviewed.

Review Of Literature

Pakshaghata

In *Pakshaghata* the vitiated *Vata* by beholding either side of the body, dries up the *Sira* (Any tubular vessel of the body) and *Snayu* (Ligaments and tendons) of that side producing the loss of movements and contraction of the hand or leg, along with *Ruja* (Pain) and *Vaakstambha* (Impediment of speech). In the pathogenesis of *Pakshaghata*, *Dhaminis* (Arteries) (*Urdhvaga*, *Adhoga* and *Tiryaka Dhaminis*) play a very important role, the vitiated *Vata* transverses through the *Dhaminis* and loosens the *Sandhi Bandhan* (laxity of the joints) which ultimately leads to *Paksha Hanan* (Hemiplegia/Hemiparesis) so that half of the body loses its function and sensibility. Hence it can be concluded that the *Vayu* by beholding the half of the

body, dries the *Sira* and *Snayu*, loosens the *Sandhi Bandhan* making that half inoperative and leads to *Ardhakaya Akarmanyata* (loss of function of half side of the body) and *Vichetnam* (loss of sensation).⁸

Stroke

The commonest cause of paralysis is Stroke. Stroke syndrome is the cardinal feature of cerebrovascular diseases. Cerebrovascular diseases are all those diseases in which one or more of the blood vessels of the brain are involved in the pathological processes like thrombosis, embolism, atherosclerosis, rupture of a vessel etc. resulting in two main types of parenchymal diseases of the brain.

- 1. Ischemic brain damage caused either due to generalized reduction in blood flow or local vascular obstruction causing infarcts.
- 2. Intra cranial hemorrhage caused either due to intra cerebral hemorrhage or sub-arachnoid hemorrhage. The symptoms of stroke depend on the part of the brain that is damaged as different portions of the brain controls the different parts of the body.

Some of the common signs and symptoms of the stroke are: Weakness and numbness of one side or both sides of the body, drooping of one or both sides of the face, slurring of speech, difficulty in swallowing, sudden severe dizziness, loss of balance, very severe headache, double vision, confusion, changes in the breathing pattern, heart rate, and blood pressure and so on. The age adjusted annual death rate from strokes is 116 per 100000 population in the USA and some 200 per 100000 in the UK, some 12 % of all the deaths. It is higher in black African than in Caucasian. Stroke is uncommon below the age of 40 and is more common in males. ¹⁰

Nidana (Causative Factors)

Nidana of Pakshaghata has not been described specifically in Ayurvedic texts. General Nidana of Vata Vyadhi can be taken as a token for Pakshaghata also.¹¹

- 1. Aaharajanya (Diet related causes) Excessive intake of Annadravya which are Ruksha, Shita, Laghu in Guna, Alpa Anna Sevana, Langhana and Ama.
- 2.Viharajanya (Lifestyle related causes) Ativyavaya, Atiprajagarana, Atiplavana, Ativyayama, Dukhashaiyya, Dukhasana, Divaswapna, Vegadharana and Atiaadhava.
- 3.*Manasa* (Psychological causes) *Atichinta, Shoka, Krodha* and *Bhaya*.
- 4. Aagantuja (External causes) Abhighata, Marmaghata, Gaja, Ushtra, Ashwa sheeghra yaan prapatanam.
- 5. Miscellaneous: Vishama Upachara, Dosha Atisravana, Asruka Atisravana, Dhatu Sankshaya, Rogaatikarshana and Rikta Srotasa are other Nidana of Vatavyadhi.

Poorvarupa (Prodromal Symptoms)

Pakshaghata's Poorvarupa has not been described separately in any of the text and can be given due consideration with Vata Vyadhi, as Pakshaghata is also one of the Vata Vyadhis. In Ayurvedic texts Avayakta Lakshanas (unmanifested symptoms) are considered as the Poorvarupa of Vata Vyadhi.

Rupa (Cardinal Symptoms) Table No. 1 Showing the Rupa (Cardinal Symptoms) of Pakshaghata

Upashaya (Favorable Treatment And Intervention)

As the specific *Upashaya* factors have not been described in the *Ayurvedic* texts, so the factors opposite to *Nidana* can be acknowledged as the *Upashaya* for *Pakshaghata*.

Samprapti (Pathogenisis)

Two factors help in the vitiation of *Vata Dosha 1. Dhatu kshaya 2. Margaavrana*¹⁷

1. Dhatukshaya Janya Vata Prakopa: Langhana, Annnashana, Ruksha Aahar, are the factors which are responsible for Dhatukshaya that ultimately bring about Vata Prakopa. So this Prakupita Vata diffuse through the Rikta Strotasa of the body, eventually manifesting the various Vata Vyadhis.

2. Margavarana Janya Vata Prakopa: Ama, Marmaghata are the factors which causes Margavarana. Margaavarana means hindrance/blockage in the path, so the Strotas (Functional channels) become Rikta besides the site of obstruction leads to Vata Prakopa, ultimately leading to Vata Vyadhis.

Samprapti Ghatakas (Pathogenic Factors)- Table No. 2 Showing the *Samprapti Ghatakas of Pakshaghata*

Bheda (Classification)

Acharya Sushruta ¹⁸has described its classification according to its etiology while explaining the prognosis of *Pakshaghata*.

Shudhavata Janya Pakshaghata: When *Pakshaghata* is caused only due to vitiated *Vata* which is aggravated on account of its own *Nidana*.

Anayadosha Samshrita Pakshaghata: When Pakshaghata is caused by the vitiated Vata which is associated with other Dosha (Pitta and Kapha).

Kshaya Hetuka Pakshaghata: When Pakshaghata is caused due to vitiated Vata which is vitiated as a result of Dhatu Kshaya.

Sadhya-Asadhayata (**Prognosis**)- Table No 3 Showing the *Sadhya Asadhyata* (Prognosis) of *Pakshaghata*

Chikitsa (Treatment)

The measures by which the bodily *Dhatus* are brought back to equilibrium constitutes the therapeutics.

Different treatment modalities that are mentioned in the

various *Ayurvedic* classics for *Pakshaghata* are as under: Table 4

Snehana (Oleation Therapy)

Snehana can be achieved by two ways internal oleation and external oleation.

Internal oleation: *Snehana* is the first line of treatment in Kevala Vatajanya Roga.²⁷ So it is wise to give internal oleation therapy in the patients of Kevala Vata Janya Pakshaghata. Ghrita, Taila, Vasa, Majja are indicated for the purpose of internal oleation. In the patient of Pakshaghata when Vata is associated with Pitta Dosha then Ghrita should be used for internal oleation i.e Ghrita²⁸, Nakuladi Ghrita²⁹. Sarvaamyaantak Brahitchagaladi Ghrita²⁹, Hansadi Ghrita²⁹. When Vata is associated with Kapha Dosha then Taila can be given for internal oleation. for eg Balaashwagandhaadi Taila³⁰, Karpasasthyadi Taila³⁰, Narayan Taila³¹, Nakul Taila³¹, Masha Taila³¹. Vasa and majja can also be given for the purpose of internal oleation only if the patient of Pakshaghata is having the good digestive fire.

As in *Pakshaghata*, the vitiated *Vata* plays a major role, *Sneha* by the virtue of its *Snigdha*, *Picchila* and *Guru Gunas* helps in the pacification of *Vata Dosha*.

Snehas (lipids) are hydrophilic in nature. After the Snehapana (oral administration of lipids) the cells of the body get saturated with fats and by the process of osmosis the fat material is transported to the extracellular fluid resulting in high plasma volume. To maintain the equilibrium of plasma level, the extra amount of fluid reaches to gastrointestinal tract, to be expelled out of the body. So when emetics and purgatives are given they evacuate the increased amount of body fluid along with the vitiated Dosha and Mala that may help in the management of the disease.³²

External oleation: External oleation can be achieved by Abhyanga, Moordhini Taila. Abhyanga can be done by Tailas like Masha Taila, Mahamasha Taila, Nakul Taila, Narayana Taila, Shatavari Taila, Vishgarbha Taila (only for external use as contains Visha i.e Dhatura and Vatsnabha). Moordhini Taila is of four types Shirobasti, Shiropicu, Shiroseka, Shiro abhyanga. Abhyanga is said to be Vata Kapha Shamaka³³ nutrition to the body and also strengthens the muscles. Dhatu Kshaya is found in Pakshaghata so Abhyanga with these different Tailas will be of great help in combatting the Dhatukshaya. Impediment of speech is one of the symptom of Pakshaghata, Mordhini Taila is found to be effective in combatting this symptom as Swarbalam is one of the characteristic feature of Mordhini Taila.

Massage can increase the fresh oxygenated blood supply to the muscles resulting in strengthening of the muscles. It also helps to maintain the equilibrium in the nervous system.³⁴

Swedana Therapy (Fomentation Therapy)

Nadi Sweda, Pinda Sweda (Patrapinda Sweda, Shashtikashali Pinda Sweda) Parisheka Sweda, Awagaha Sweda, Upnaha Sweda (Shalvana Upnaha Sweda, Mahashalvana Upnaha Sweda) are some of the Swedana thearpies that can be given. All types of Swedana therapies helps in the pacification of Vata Dosha, removes stiffness and heaviness, also provides strength to the muscles. Shastishalipinda Sweda is a specific Sweda therapy that makes the body supple, removes stiffness of the joints, cleans the Srotasa of the body, improves blood circulation. In Ischemic Stroke there is a disruption in the blood flow to the brain. Fomentation therapy increases the blood flow to the brain by the process of vasodilatation which is brought by inhibiting the sympathetic centres in the posterior thalamus which causes the

vasoconstriction.35

Vamana (Emesis)

Mridu Vamana is indicated in the treatment of Pakshaghata.³⁶

Virechana (Purgation Therapy)

In the Ayurvedic classics Mridu Samshodhana has been indicated in the treatment of Margaavarana,³⁷ therefore in Margaavarana Janya Pakshaghata, Mridu Virechana should be advocated with Gandharvahasta Taila. Also in the Samprapti of Pakshaghata there is involvement of Sira and Snayu. Sira and Snayu are the Updhatu of Rakta Dhatu. So Virechana is the best treatment modality for Rakta Dhatu as Rakta Dhatu and Pitta Dosha are synergistic to each other. Virechana Karma can be used in the disorders of the brain as different neuropeptides of gut are found in brain and they have great effect on action of neurons. By cleansing the gastro-intestinal tract with Virechana Karma, the number of neuropeptides can be improved. Hence functions of the brain can be modified with the help of Virechana

Karma.38

Basti (Medicated Enema)

Basti Chikitsa is considered to be best treatment modality for Vata dosha. It is described as the Ardh Chikitsa in the classics.³⁹So, it has prime importance in Panchakarma. Basti helps in the eradication of vitiated Vata from its root hence it should be implicated in Kevala Vatajanya Pakshaghata. Brihmana Basti can be used in Dhatuksahya Janya Pakshaghata. Various Basti preparations has been

mentioned in the classics for the treatment of *Vata Dosha* i.e *Rasnadi Asthapana Basti*, *Guduchi Triphaladi Asthapana Basti*. *Anuvasana Basti* with *Masha Taila*, *Mahamasha Taila*, *Nakul Taila*, *Prabhanjan Vimardan Taila*, *Sarvaamyaantak Taila*.

Enteric nervous system is the network of nerve fibers located in gastrointestinal tract, also called Gut brain. ENS works in synergism with central nervous system. Hence stimulation of ENS with *Basti Karma* may lead to stimulation of CNS.⁴⁰

Nasya (Errhine Therapy)

In case of unconscious patients of Pakshaghata, Avapeeda Nasya can be given as it helps to revive the cousnoiusness. 41 Sameerpannaga Rasa is indicated especially for Nasya when the patient is in unconscious stage. Pradhamana Nasya can be given repeatedly to revive the consciousness. Snaihika Nasya can be given with Mahamasha Taila, Karpasasthyadi Taila. In Pakshaghata Prana and Udana Vayu are vitiated. Shira (Head) is considered as the main seat of Prana and Udana Vayu. In the Ayurvedic texts it is said that Nose is the gateway for Shira. So, the drug administered through nose reaches the head and scratches the morbid Dosha from the Shira. The drugs administered through nose stimulates the higher centres of the brain through the olfactory nerve pathway which is connected to the hypothalamus and limbic system. 42 Hence the nasal drug administration will ultimately have an effect on the functions of CNS.

Raktamokshana (Blood Letting)

Raktamokshana can be done when *Suptavata* (Numbness) condition is there in the patient of *Pakshaghata*.⁴³

Shamana Chikitsa (Pacification Therapy)

Shamana Chikitsa helps in pacification of Dosha, thereby maintaining the equilibrium of the all the Doshas. Some of the Ayurvedic formulations that can be given orally to pacify the vitiated Vata Dosha. Table 5

DISCUSSION

Pakshaghata is one among eighty Vataja Nanatamja Vikara which has the poor prognosis as it makes the patient disable and dependent on others, impacting the quality of life. As a result the patient may develop neuropsychiatric problems. Since Pakshaghata is very difficult to manage, its treatment become challenging in itself. Ayurveda plays a very important role in managing this crucial disease. Ayurveda emphasize on three line of treatment i.e Nidana Parivarjana, Shodhana and Shamana. Nidan Parivarjana. As Pakshaghata is manifested by Vata Dosha so

Vatavardhak Aahar and Vihar should not be taken by the patient, So that the disease should not progress in later stages. Shodhana is the procedure by which vitiated Dosha are expelled out from the body from their roots. Shodhana therapies presents remarkable beneficial effects and posseses great symptomatic relief in the patient of Pakshaghata. Shamana is a procedure by which the normalcy of the Doshas is achieved with the help of Shamana drugs. Various Shamana drugs are there that can be used in Pakshaghata to pacify the Doshas. It has shown by the different studies that Shodhana Chikitsa, Shamana Chikitsa and Pathya Sevan (Intake of Wholesome food) seems to be very effective in alleviating the disease, hence improves the quality of life of the affected individual. So Nidan Parivarjana, Shodhana Chikitsa followed by Shamana Chikitsa will be of great help in alleviating the disease.

CONCLUSION

Ayurveda's holistic approach presents an opportunity for the patients of Pakshaghata to get rid from this crucial disease which has physical as well as psychological impact on the life of suffering individual. Nidan Parivarjana, Pathya Sevan, Shodhana Chikitisa followed by Shamana Chikitsa is best and effective treatment. As Pakshghata is a Vata Vyadhi, increased Ruksha Guna of Vata increases Rukshta and Parushta in the Srotasa, so as to rectify Ruksha Guna of Vata, Snehana in the form of Abhyanga, Nasya, Basti and Snehayukta Virechana are quite beneficial. Brihmana Basti is very useful in Dhatukhshaya Janya Pakshaghata. Mridu Virechana is indicated when there is a Margaavarana Janya Samprapti in Pakshaghata and the above mentioned *Shamana Aaushadis* are helpful in the pacification of Vata Dosha. Though Pakshaghata is difficult to manage, but early diagnosis, management and logical use of internal and external medicine helps in obtaining good results.

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ORCID

Alka D, https://orcid.org/

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Table No. 1 Showing the Rupa (Cardinal Symptoms) of Pakshaghata

Symptoms	C.S ¹	Su. S ¹³	A.H ¹⁴	M.N ¹⁵	B.P ¹⁶
Anaytara Paksha Hanan (Hemiplegia/Hemiparesis)		+	+	+	+
Chestaanivritti (Loss of Motor function)	+	+	-	-	-
Ruja (Pain)	+	-	-	-	-
Vaakstambha (Impediment of speech)	+	-	-	-	-
Sira Snayu Vishoshaya (Wasting of vessels, ligaments		-	+	+	+
and tendons)					
Hasta Pada Sankocha (Contractures of Hands and	+	-	-	-	-
Feet)					
Toda (Pricking pain)	+	-	-	-	-
Shoola (Pain)	+	-	-	-	-
Vichetana (loss of sensation)	-	+	+	+	+
Akarmanyata (Inability to do movement)	-	+	+	+	+
Sandhi Bandhana Vimokshayam (laxity of joints)	-	+	+	+	+
Patatya (Falling down)	-	+	-	-	-
Daha, Santap (Burning sensation)	-	-	-	+	+
Moorcha (Syncope/Attacks of Swooning)					
Shaitaya (Cold on touch of affected part of the body)	-	-	-	+	+
Shotha (Odema)					
Gurutva (Heaviness)					

Table No. 2 Showing the Samprapti Ghatakas of Pakshaghata

Dosha (Regulatory functional factor of the	Vata as Pradhan Dosha (Especially Prana, Udana, Vyana vayu
body)	
Anubandha Dosha (Associated Dosha)	Pitta and Kapha
Dushya (Tissue involved)	Rasa, Rakta. Mamsa, Meda, Manas
Updhatu (Secondary tissue involved)	Sira, Snayu, Kandara
Agni (Digestive or metabolic factor)	Jatharagni, Dhatvaagni
Ama (Undigested food)	Dhatavagni Mandya Janya
Srotasa (Systems involved)	Rasavaha, Raktavaha, Mamsavaha, Medovaha
Srotodushti (Mode of systemic involvement)	Sanga, Atipravriti, Siragranthi, Vimargagamana
Udhbhava sthana (Origin place)	Pakvashaya
Sanchara sthana (Circulating place)	Vama/Dakshina Sira, Snayu, Dhamini
Adhisthana (The place where the disease is manifested)	Shira
Vyaktasthana (The place where the disease is expressed)	Ardhasharira either Vama/Dakshina
Rogamarga (Specific route)	Madhyama Roga Marga

Table No 3 Showing the Sadhya Asadhyata (Prognosis) of Pakshaghata

Acharya	Sadhya-Asadhyata
Charaka ¹⁹	Yatnasadhya or Asadhya
Sushruta ²⁰	Shudhavata janya- Krichsadhya
	Annyadosha samshrita- Sadhya
	Kshaya hetuka – Asadhya
Vagbhata ²¹	Shudhvata janya pakshaghata- Krichasadhyatam
	Anayadosha janya pakshaghata – Krichsadhya
	Kshaya hetuka – Asadhya

Table no 4 Showing the Chikitsa Sutra (line of treatment) of Pakshaghata

Acharya	Line of treatment
Charaka ²²	Swedana and Sneha Yukta Virechana
Sushurta ²³	Snehana and Swedana are to be provided first then it should be followed by Mridu
	Samshodhana, Afterwards Anuvasana and Asthapana Basti should be administered. After the
	Snehana, Swedana, Mridu Shodhana and Basti procedure, it should be followed by line of
	treatment of Aakshepaka. The specific measures which are described for Pakshaghata are
	Mastishkaya Shirobasti, Abhyanga by Anu Taila, Shalvana Upnaha Sweda and Anuvasana
	Basti with Bala Taila. This treatment should be followed carefully for the continous period of
	3-4 months. ¹⁷
Vridhavagbhata ²⁴	Specific Kukkuti Rasayan Kalpa that can be used according to Dosha Sangraha in Pakshaghata.
Vagbhata ²⁵	Followed Charaka Opinion, but instead of Swedana he has mentioned Snehana and Snehayukta
	Virechana line of treatment for Pakshaghata
Sharangdhar	Some formulations to be used in Pakshaghata like Maharasnadi Kwatha, Narayan Taila,
	Mashadi Taila, Dhatur Taila
Bhavmishra	Formulations like Mashadi Kwatha, Mashadi Taila, Granthikadi Taila etc
Siddhi nandan	Mridu Virechana is suggested for Pakshagahta. But in Bhaishjaya Ratnavali , Tikshana
mishra ²⁶	Virechana is stipulated along with Shodhana Basti.

Table no 5 showing formulations for shamana chikitsa in pakshaghata

Kwatha Kalpana	Balaadi Kwatha, Gokshuradi Kwatha, Mashabalaadi Kwatha, Rasnadashmooladi			
	Kwatha, Maharasnadi Kwatha, Sahacharadi Kwatha, Mashaatmaguptadi Kwatha.			
Ghrita Kalpana	Nakuladi Ghrita, Brhitchagaladi Ghrita, Hansadi Ghrita. Brahmi Ghrita helps in Vaak			
	Shudhi so can be given especially when there is difficulty in speech in the patient of			
	Pakshaghata.			
Taila Kalpana	Sidhartaka Taila, Vishnu Taila, Bala Taila, Prasarini Taila, Narayan Taila,			
	Laghuvishgarbha Taila, Dhanwantra Taila, Ksheerbala Taila			
Choorna Kalpana	Rasnadi Choorna is suggested for all the 80 Vataja Nanatamaja Vikaras.			
Guggulu preparations	Dwatrinshak Guggulu, Yograj Guggulu, Tryodashanga Guggulu			
Arishta prayoga	Ashwagandhadi Arishta, Bala Arishta			
Leha Kalpana	Kalyanaka Leha is indicated in difficulty in speech			
Ras Aushadhi	Swachand Bhairav Rasa, Vatavidhvansa Rasa, Vatarakshasa Rasa, Pratapagnikumar			
	Rasa, Lakshminarayan Rasa, Vatari Rasa. Vatagajankusha Rasa, Mahavatagajankush			
	Rasa, Chintamani Rasa, Brhitvatachintamani Rasa, Lagvaaananda Rasa			