



Case Study

INFLUENTIAL EFFECT OF DIET AND *PANCHAKARMA* THERAPY IN LIVER DISEASE: A CASE STUDY ESPECIALLY REFERENCING TO THE *VATAJA YAKRITA VIKARA*

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ABSTRACT

Ayurveda can offer promising improvement in liver diseases within a short period of time. Currently, there is a rapid rise in chronic liver disease (CLD) cases due to factors like alcohol intake, viral infections, and poor dietary habits. The most common cause nowadays is a long-term unhealthy lifestyle. In Ayurveda, *Yakrit Vikara* are described across various chapters and are considered disorders of *Raktavaha Srotas*. As the liver plays a key role in digestion and metabolism, liver disorders often present with digestive symptoms. This article presents a case of a 33-year-old male who visited Jeena Sikho Lifecare Limited Hospital, Jodhpur, Rajasthan, on 09/09/2024, with complaints of indigestion, constipation, and body pain. His liver function test showed elevated SGOT and SGPT levels. He had not started any modern medicine. Based on Ayurvedic assessment, he was admitted for *Panchakarma* therapy followed by a DIP diet. After 16 days of treatment, a positive improvement in LFT values and clinical symptoms was observed.

INTRODUCTION

In today's era digestive problems are considered to be common. But it does not always a superficial condition. It could be a chronic liver disease and yet people are ignoring to it. Therefore, liver diseases are now becoming prevalent. Even though hepatic diseases vary, they often have features in common like loss of appetite, fatigue, constipation etc. Global burden of liver diseases is increasing rapidly. In some cases liver diseases may not reveals symptoms (asymptomatic phase) and process of damage and repairing of liver tissue occurs internally that patient don't even know about. This condition for long time converts into chronic liver disease and sometimes it cannot be manageable. 2023 update of liver disease showed that, over 2 million deaths are happening annually due to liver disease and it accounts for 4% of all deaths globally.^[1]

According to Ayurveda manifestation of digestive symptoms is not only acute condition. It causes due to *Ama sanchiti* (accumulation of toxins)

over a long period. Considering its seriousness it is necessary to take measures. Formerly *Acharya's* mentioned *Yakrit dushti* (liver vitiation) in various conditions like *Pandu* (anemia), *Kamala* (jaundice), *Raktavaha sroto dushti lakshan*, *Rakta dhatu dushti lakshan* etc. But no one clearly mentioned the word *Yakrita dushti* or *Yakrit vikara*. *Yakritodar* is the type of *Udara vyadhi* (ascites) mentioned by all *Acharyas* in which there is *Yakrit dushti* occurs.^[2,3] Later, *Acharya Madhavkara* presented *Yakrit roga* (liver disorders) which includes etiological factors along with symptomatology of *Yakrit vridhhi*.^[4] *Acharya Bhavmishra* for the first time introduced *Yakrit aamayasa* (liver disorders) and there 4 types in detail.^[5] First he mentioned *Pleehaamayasa* and then said that *Pleehamayasya hetvadi samastam yakrutamaye*. It means that etiological factors, types, treatment etc of *Yakrit vikara* is same as that of *Pleeha vikara*. Difference is only that *Pleeha* is located at *Vamaprshva* (left side) and liver is located at *Dakshina parshva* (right side). For the management of *Yakrit vikruti* we have to keep in mind that *Rakta dhatu* and *Ranjaka pitta* get vitiated in liver disorders. Because *Yakrit* is a storehouse of *Rakta dhatu* so it is also named as *Raktashaya* by *Acharya Sushruta*.^[6] He also mentioned the *yakrit* as a place of *Ranjak pitta*.^[7] Function of *Ranjak pitta* is *Ranjakam rasa ranjanat*, means to colour *Rasa dhatu* which circulates in all over the body

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to nourish the all-body tissues. So, the disease which causes change in colour than normal are considered to be caused by *Yakrit dushti* for ex. *Pandu* (anemia), *Kamala* (jaundice), *Halimaka* (chronic stage of anemia or jaundice). *Raktavaha sroto dushti hetu* should be considered in liver diseases because *Moolasthanas* (root places) of *Raktavaha srotas* are *Yakrit* (liver), *Pleeha* (spleen) and *Raktavahi dhamanya* (portal blood vessels). [8,9] So the disorders of *Raktavah srotas* also come under *Yakrit vikara*.

This article is presenting a case of 33-year old male patient who had been suffering from liver disease. He had visited to the hospital for complains like indigestion, constipation etc. He wanted to manage the disease by ayurvedic therapeutics. Liver disorders are lifestyle disorders. So, they can be manageable through DIP diet together with Ayurvedic *Pathya apathya* (do's & don'ts) without oral medication. But to get symptomatic relief *Panchakarma* therapy should be advised along with it. He was at young age, hence it was easier to treat without medication.

Case Report

This is a case of male patient of age 33 years had come to Jeena Sikho Life Care Limited Hospital, Jodhpur, Rajasthan, on 09/09/2024. He had complaining of:

Table 1: Symptomatology

Symptom	Duration
Body ache and stiffness in the morning ⁺⁺	Since past few days
Indigestion	Since 1 year
Mild constipation	Since 1 year

History taking

- He had no history of diabetes, hypertension, thyroid disorder, or any other chronic illness.
- He had never been diagnosed with any eating disorder such as anorexia nervosa, binge eating, or bulimia.
- He was not allergic to any food or drink.
- Occupation: He was employed in the private sector, working approximately 9 to 10 hours a day.

Examinations: It included general, *Ashtavidha* and *Dashavidha parikshan* followed by local examination.

Table 2: General examination

Parameters	Remark
Height	178 cm
Weight	81 Kg
BP	124/88 mm of Hg
Kshudha	Prakrita
Nidra	Prakrita
Mutra	Prakrita / Ishatpita

Table 3: Ashtavidha Parikshan

Assessment	Remark
Nadi (pulse)	Vata Kaphaja
Mala (bowel)	Baddhata (constipated)
Mutra (urine)	Prakrita (Normal)
Jivha (tongue)	Sama
Shabda (pronunciation)	Spashta (clear)
Sparsh (touch)	Anushna Sheet (normal)
Drika (eyes)	Prakrita (no pallor)
Aakriti (physique)	Madhyama (average)

Table 4: Dashvidha Parikshan

Assessment	Remark
Prakriti (physical constitution)	Vata Pitta
Vikriti (pathological constitution)	Vata
Sara (excellence of tissues)	Madhyam
Samhanan (body compactness)	Madhyam
Praman (measurements of body parts)	Madhyam
Satmya (homologation)	Madhyam
Sattva (mental constitution)	Madhyam

<i>Aaharshakti</i> (capacity ingesting, digesting and assimilating the food)	<i>Madhyam</i>
<i>Vyayamshakti</i> (capacity to exercise)	<i>Avara</i> (low)
<i>Vaya</i> (age)	<i>Madhyam aayu</i>

Local examination: Per abdomen was examined locally to find tenderness or swelling if any. But per abdomen was normal. No edema over lower limb or no other local abnormality.

Investigation: He did LFT (liver function test) 3 days prior to visit the hospital. It showed elevated parameters as given below in the table 5. He also did Vitamin D3 and Vitamin B12 assays along with thyroid hormone test. Results of these tests were within biological reference.

Table 5: Biochemistry of LFT

Parameters	06/09/2024	Biological reference
SGOT	366 U/L	21 to 72 U/L
SGPT	343 U/L	< 50 U/L
Total Bilirubin	1.4 mg/dl	0 to 2.0 mg/dl
Direct Bilirubin	0.3 mg/dl	0 – 0.4 mg/dl
Indirect Bilirubin	1.10 mg/dl	0.0 - 0.6 mg/dl
Serum Globulin	2.4 gm/dl	2.5-3.5 gm/dl

Ayurvedic Intervention

This included *Panchakarma* therapies followed by diet recommendation, Ayurvedic *Pathya-apathya* and exercise. He was advised to go through *Panchakarma chikitsa* for 16 days. It included following therapies mentioned in table no. 6. Before *panchakarma*, written consent was taken by patient that he informed about all the procedures along with its effects and side effects. All therapies were done in the morning time as it is the best time for *Panchakarma* treatment.

Table 6: Panchakarma procedures

Procedure name	Medicine used	Quantity	Duration
<i>Abhyanga</i>	<i>Bala ashwagandha taila</i>	150ml	30 min.
<i>Patrapottali swedan</i>	<i>Bala ashwagandha taila</i>	90ml	30 min.
<i>Shirodhara</i>	Milk with coconut water	150ml	30 min.

Follow up during IPD: During IPD period his blood pressure, pulse rate, respiratory rate and temperature was monitored regularly for 16 days and it was found normal.

Bowel: Not cleared during first 4 days and started to get clear from 5th day onwards.

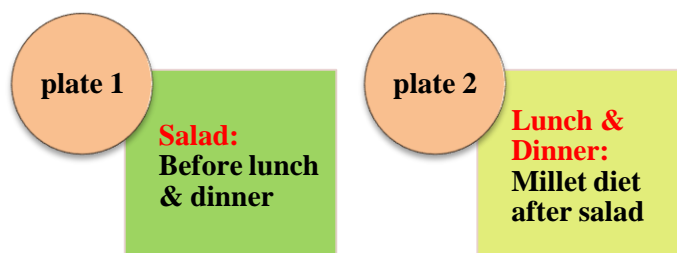
Pain: Mild relief in pain on 6th day of therapy. His pain score was

Table 7: Pain score

Days of IPD	Pain score
First 5 days	3
Next 5 days	2
From 11 to 16 th day	1

Diet recommendation

It included DIP diet. DIP stands for discipline and intelligent plan.^[10] He was advised to take *Laghu supachya aahar* (light and easy to digest food) and told to divide food into 2 plates for having as below.



DIP diet also included quantity of fruits and salad to have. It was calculated by formulas given below. Also table no 8 mentioned the time, what to have food and calculated quantity of food.

Fruits: Patients weight in grams $\times 10$ = fruits in grams

Salad: Patients weight in grams $\times 5$ = salad in grams

Table 8: DIP diet schedule

Time	What to have	Quantity
Early morning (6.45 to 7.15 am)	Herbal tea	1 cup
Breakfast (9.00 to 10.00 am)	3-4 types of seasonal fruits like orange, grapes, apples etc.	810 gm
Salad (just before lunch and dinner)	Cucumber, beetroot, tomato, radish, cabbage etc.	405 gm
Lunch (1.00 to 2.00 pm)	Millet diet with vegetables Fresh food and little bit alkaline water	According to hunger
Afternoon (4.00 to 5.00 pm)	Dry fruits like almond, pistachios, dates + herbal tea	1 fist dry fruits and 1 cup tea
Dinner (7.00 to 8.00 pm)	Millet diet with vegetables. Fresh food and little bit alkaline water	According to hunger

Pathya-apathya

Table 9: Do's and don'ts

Have to follow	Don't have to follow
Millet diet/ multigrain diet	Packaged and salty food, spicy, oily
All leafy and fruit vegetables	Dairy and bakery products, sugar products
Fresh food	Stale food
Semi-solid diet	too liquid or too dry/solid diet
All lentils especially green gram	Black gram
Eat only after sunrise and before sunset	Eating after 8.00 pm
Regular exercise	Heavy exercise

RESULTS

Symptoms of patient nearly diminished after 16 days of *Panchakarma* therapy. His after treatment LFT values reduced to normal range. Although some readings are not within range or nearly to borderline yet it can be considered normal because biological references of LFT tend to vary between laboratories. So, the borderline readings are not abnormal or may be slightly abnormal. In some cases, complete normalization is often not achievable if the disease is chronic.

Indigestion and constipation were completely subsided after 16 days of treatment. But pain score was 3 which should be 0 for complete relief in pain. Therefore after discharge he was advised to continue DIP diet and Ayurvedic *Pathya-pathya* till pain subsides completely. This diet was also helpful to recover liver tissue damage if any present minutely as shown below in table no 11. Tabular presentation of before and after treatment changes is given below in table no. 10 and 11.

Table 10: Before and after treatment parameters

Parameters	Before treatment	After treatment
Symptoms	Indigestion	Indigestion absent on 16 th day
	Mild constipation	Constipation cleared on 5 th day
	Body ache and stiffness more in the morning	Mild relief in pain on 6 th day and better relief in pain on 16 th day.
Examination	<i>Sama jivha</i> (white coating over tongue)	<i>Niram jivha</i> (clear tongue) on 5 th day
Pain score	1 st day: 3	11 th day: 1
Investigation	8 to 10 times elevated reading of SGOT	SGOT comes back to normal range
	6 to 7 times elevation in SGPT reading	SGPT approximately to borderline
	Fewer elevation in indirect bilirubin	Indirect bilirubin remains fewer elevated

Table 11: LFT improvement

Parameters	Before treatment 6/09/2024	After treatment 21/09/2024	Biological reference
SGOT	366 U/L	38 U/L	21 to 72 U/L
SGPT	343 U/L	55 U/L	< 50 U/L
Total Bilirubin	1.4 mg/dl	1.98 mg/dl	0 to 2.0 mg/dl
Direct Bilirubin	0.3 mg/dl	0.72 mg/dl	0 – 0.4 mg/dl
Indirect Bilirubin	1.10 mg/dl	1.26 mg/dl	0.0 - 0.6 mg/dl
Serum globulin	2.4 gm/dl	2.4 gm/dl	2.5-3.5 gm/dl

DISCUSSION

The condition which damages the liver tissue and prevents it from functioning properly is termed as liver disease. Liver is an expandable organ and that's why it stores large quantities of blood. It performs variety of body functions like metabolism, secretion of bile, removing of toxins, maintaining blood hemostasis etc. Liver diseases show the symptoms related to abnormality in these functions and as it stores blood it shows abnormality in blood concentration as well. [11] *Ayurvedic* description of *Yakrit vikara* is already explained previously in introduction. Here types and treatment of *Yakrit vikara* related to current article will be discussed. Acharya Bhavmishra classified *Yakrit vikara* in 4 types of as given below:

1. *Vataja Yakrit vikara*
2. *Pittaja Yakrit vikara*
3. *Kaphaja Yakrit vikara*
4. *Raktaja Yakrit vikara*

This article is about a case of male patient of aging 33 years he had been suffering from indigestion and constipation since 1 year. Along with this he had complaining of body pain and stiffness more in the morning. Now the *Nidan-panchaka* (pathogenic process) of this case is as follows:

- I. **Hetu (etiological factors):** Patient was used to have spicy and oily food. Acharya Bhavmishra noted the *Hetu* of *Pleeha-yakrit vikara* are *Vidahi* (Spicy) and *Abhishyandi aahara* (heavy food substances like curd).
- II. **Purvroopa (pre-symptomatic phase):** There is no reference about *Purvaroop* of *Yakrit vikara* but Acharya Vagbhata stated that *Purvaroop* is the *Alpa vyakta* (scanty manifestation) phase of *Roopavastha* (symptomatic phase). [12] In this case patient had given the history that his symptoms from which he was suffering were mildly presented initially.
- III. **Roopa (symptoms):** Patient had symptoms of indigestion and constipation since 1 year. There was morning stiffness and body ache also for the past few days. Acharya Bhavmishra explained both *Samanya* and *Doshaja lakshana* of *Yakrit vikara*.

Samanya means symptoms of all *Yakrit vikaras* and *Doshaja* means specific symptoms according to types. Symptomatology of this case is identical to *Vataja yakrita vikara* as given in *Shloka* no 1.

Shloka no. 1

“नित्यबद्धमानकोष्ठः स्यात् नित्य उदावर्त पीडितः।
वेदनाभिः परीतश्च प्लीहा वातिक उच्चते॥”

Bhavaprakasha madhyamkhand 33

As stated in introduction, *Yakrit vikara* are considered to be same as *Pleeha vikara*. So, in the above *Shloka* there should be a consideration of *Yakrit* in place of *Pleeha*.

- I. *Nityaman baddhakoshtha* is persistent constipation.
 - II. *Nitya udavarta pidita* means patient suffers from *Udavarta* persistently. *Udavarta* is a *Vyadhi* (disease) mentioned by Acharya's. Acharya Charaka mentioned the following symptoms of *Udavarta* which are identical to this case. [13] *Udavarta* symptoms which are identical to this case are given as,
- “*Basti hrutkukshi udareshu sa prushtha parshwveshu ruk abheekshana atidaruna*” it means that severe pain in the region of bladder, heart, central and side of abdomen, back and at side of chest wall.
 - *Avipaka* means indigestion and *Varcho apravrutti* means constipation.

Investigation: As mentioned in table 5 of the Biochemistry section of the LFT, there was an increase in SGOT and SGPT values, along with a slight increase in indirect bilirubin. For early diagnosis of liver disease, SGOT and SGPT tests are essential. These serum levels increase when there is damage to the tissues that produce them. [14]

1. SGOT (Serum glutamic oxaloacetic transaminase) or ALT i.e. Serum alanine transaminase is a mitochondrial enzyme present in liver, kidney and heart tissues.
2. SGPT (serum glutamic pyruvate transaminase) or AST i.e. Serum Asparate transaminase is as Cytosolic enzyme primarily present in the liver.

3. Indirect bilirubin: It increases when the body breaks down RBCs (red blood cells) faster than the liver can process them. So many factors are responsible for it like, some medications, hemolytic anemia, liver diseases etc.

IV. Samprapti: Hetu sevan causes Rakta and Kapha dusthi in all Yakrit vikaras. Predominance of any one Dosha leads into specific type of Yakrit vriddhi. Pathogenic process in leading of the Vataja yakrit vriddhi is given below in flow chart:



Table 12: Dosha-dushya sangrah

Factor	Vitiation of
Dosha	Vata dosha predominance along with Kapha, Pitta dushti
Dhatu	Asruka (blood)

Diagnosis

Observation by Ayurvedic perspective like Yakrit dushtijanya hetu sevan by the patient, symptoms of Yakrit vikara as given in Nidan-panchaka and Dosh-dushya sangraha mentioned in Samprapti clued towards the diagnosis of this case as Vataja yakrit vikara. This condition can be termed as chronic liver disease.

Ayurvedic Intervention

Management of this case is done only by Panchakarma therapy and Ayurvedic Pathya-apathya followed by DIP diet. Along with this he was advised to exercise regularly. Panchakarma therapy was given for 16 days of IPD as follows.

Panchkarma therapy

By keeping in the mind that this is a case of Vataja yakrit vikara management was done according to Dosha dushti as mentioned in Samprapti. Abhyang and Patrapottali swedan were done to pacify Vata dosha.

1) **Abhyang:** It is a body massage with Bala-Ashwagandha taila. Bala (*Sida cordifolia*) is included in Agrya dravya for its property of Vataharanam. [15] It means that Bala is the excellent herb to pacify Vata dosha. Ashwagandha (*Withania somnifera*) has hot potency drug which helps to reduce Vata and Kapha dosha. It has anti-stress, anti-anxiety and CNS inhibitory properties. [16]

2) **Patrapottali swedana:** It done to relive pain and stiffness. Procedure includes steam with massage. Leaves of Nirgundi (*Vitex nigundo*) & Erand (*Ricinus*

communis) were used to massage by dipping into the Bala-Ashwagandha taila (oil). Nirgundi is a Vata-kaphashamaka dravya with hot potency. [17] Eranda also mentioned by Acharya Charaka in Agrya sangraha as 'Vrushyavataharanam' means excellent as aphrodisiac and Vatahar. [15]

3) **Shirodhara:** Shirodhara is a form of independent Abhyang procedure, which involves gently pouring liquids over the forehead. In this case Shirodhara was given with milk + coconut water. It was advised to reduce his anxiety and stress. Both milk and coconut water have cool potency and pacifies Prakupit pitta dosha. This procedure increases circulation to brain and thereby helps to reduce body stress.

Diet management

In all Yakrit vikaras asruk (blood) and Kapha vitiation occurs mainly. Acharya Bhavmishra said that Asruk is Samandharmi (equivalent) to Pitta dosha. So, in symptoms of all Yakrit vikara he said that, Kaphapittalingaih upadrutah means there is manifestation of symptoms of Kapha and Pitta dusthi. But this case is of Vataja Yakrit vikara & it involves vitiation of Vata dosha predominantly. So, the diet recommendation should be according to predominant dosha followed by other vitiation of Doshas involved. Acharya Charaka in Udavarta chikitsa mentioned about diet and said to prefer 'अनुलोमस्य अन्नैः'. It means that the food which causes Anuloman of Vata dosha due to which body functions in proper way.

Diet: Diet should not be including only what to eat but also should include how to eat and at which time. For this patient's diet was planned according to DIP diet plan. DIP diet focuses on the foods sourced from natural plants and trees. This diet plan is explained by a nutritionist and it is proved beneficial to overcome lifestyle disorders like diabetes, thyroid, cancer, hypertension etc.

Significant role of DIP diet in this case is as follows:

1. Natural healing of liver tissues
2. Immunity booster
3. Improved digestion and metabolism
4. Toxins get eliminated naturally
5. Disciplined to unhealthy lifestyle

Water drinking recommendation: Acharya Vagbhata mentioned the different ways of intake of water. Among this one way is that Toyam kwvathit sheetlam means alkaline water. Patient was told to drink alkaline water means to drink boiled water after cooling. This is water is Anabhishtyandi (easy to digest) which is opposite of Abhishtyandi hetu responsible for Yakrit vikara. Also, it has Deepana property (appetizer), pacifies Vata kapha dosha, Bashtishodhanam (cleanses urinary bladder) thereby removes toxins from the body.

What to avoid

He was suggested to avoid those things which are responsible for causing liver diseases. *Acharya*

Madhava nidana explained in detail about *Yakrit roga nidana* (causative factors of liver disease) and these factors should be avoided in all types of liver diseases.

Yakrit roga hetu	Avoid them
<i>Madyatipan</i>	Alcohol
<i>Vegarodha</i>	To control natural urge like urine and bowel.
<i>Atyushna anna</i>	Too hot food. It does not only mean about hot food in touch but also mean the food of hot potency like spices, jaggery, non-veg etc.
<i>Guruanna</i>	Foods which are heavy to digest
<i>Swapa diva</i>	Day sleeping
<i>Jagarato ratrav</i>	Night awakening
<i>Guru padarthan vahatam naranam</i>	Lifting heavy weights can injure to liver.

Further Scope of Study

Liver disorders are becoming increasingly common in both males and females, often appearing at a younger age due to unhealthy lifestyles. Chronic Liver Disease (CLD) can severely impact health, and in advanced stages, liver transplantation may be required. Timely and effective management is crucial to prevent progression. In Ayurveda, proper identification of *Yakrit Vikaras* based on symptoms is essential, as treatment varies with the type. Accurate diagnosis helps determine the appropriate formulation. To develop an effective Ayurvedic protocol, large-scale data collection on *Yakrit Vikaras* and their therapeutic outcomes is urgently needed.

CONCLUSION

It is concluded that, proper symptomatology can help to diagnose the disease with its sub-type. Accuracy in the diagnosis and pathogenic factors gives clue to about that, which type of therapy and formulations should be given to the patient.

Symptoms (Before → After Treatment)

- Indigestion → Completely relieved by day 16
- Mild constipation → Resolved by day 5
- Body ache and morning stiffness → Improved significantly by day 16
- *Sama Jivha* (coated tongue) → *Niram Jivha* (clear tongue) by day 5
- Pain score: 3/5 → 1/5 by day 11

Investigations (06/09/2024 → 21/09/2024)

- SGOT: 366 U/L → 38 U/L
- SGPT: 343 U/L → 55 U/L
- Total Bilirubin: 1.4 mg/dL → 1.98 mg/dL
- Direct Bilirubin: 0.3 mg/dL → 0.72 mg/dL
- Indirect Bilirubin: 1.10 mg/dL → 1.26 mg/dL
- Serum Globulin: 2.4 gm/dL → 2.4 gm/dL

The patient was managed with Ayurvedic *Panchakarma* therapy and a DIP (Detoxification and Immunity Protocol) diet, without any oral medication.

Comprehensive study of this article concludes that chronic liver disease can be managed with Ayurvedic *Panchkarma* therapy and diet even without any oral medication in a very short period like 16 days.

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