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“CRITICAL ANALYSIS OF AWASTHIKI CHIKITSA IN UDARA”

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Abstract

Udara roga, one of the *ashta mahagada*, is a severe disorder in ayurveda, primarily caused by *agnimandya* and *vata* vitiation, leading to fluid accumulation and metabolic dysfunction. It progresses through different stages like *ajatodakawastha*, *picchavastha* and *jatodakawastha* which manifesting as abdominal swelling, indigestion, and systemic complications. The *ayurvedic* approach emphasizes *nidana parivarjana*, *deepana-pachana* and detoxification through *virechana* and *basti*. Herbal formulations like *trivrut leha*, *eranda taila*, and *gomutra* aid in toxin clearance, while *takra* and *dugdha prayoga* help restore balance. *Dosha*-specific treatments for *vatodara*, *pittodara*, and *kaphodara* ensure personalized management. *Pathya-apathya* plays a crucial role, promoting light, digestible foods and restricting heavy, incompatible diets. By integrating *shodhana*, *shamana* and dietary discipline, ayurveda provides a holistic and structured approach to treating *udara roga*, aiming for long-term digestive and systemic health.

Keywords: *Udara Roga, Ayurveda, Agnimandya, Vata vitiation, Jalodara, Virechana, Basti, Deepana-Pachana, Shodhana, Pathya-Apathya*

Introduction:

Mandagni is considered the fundamental cause of most diseases in ayurveda, mainly in *udara roga* it plays a central role¹. *Sushrutacharya* classifies *udara* under *ashtamahagada*, indicating its severity and complexity in management. When digestion is weakened, the improper metabolism of food leads to the formation of *ama*, which further obstructs the *udakavaha* and *swedavaha srotas*, causing fluid retention in the abdominal cavity.

यस्यवातः प्रकुपितत्वकमांसान्तरमाश्रितः ।
शोथंसंजनयेत्कुक्षावुदरंतस्यजायते ॥² (Cha Su 28/31)

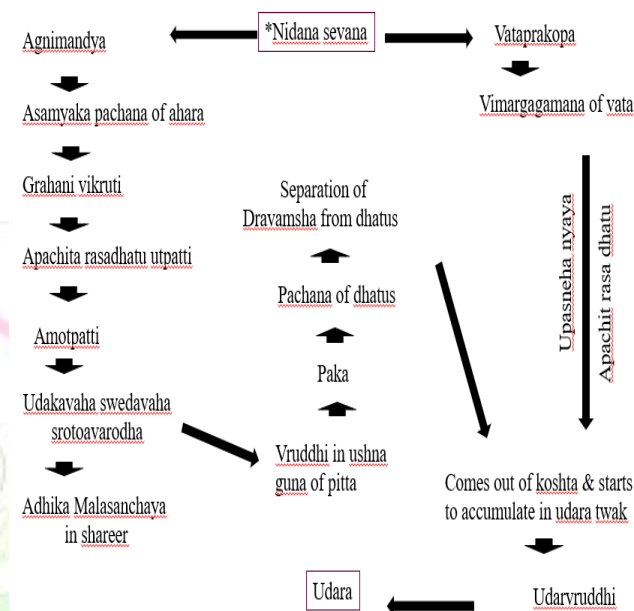
Here, aggravated *vata*, along with other *doshas*, accumulates in *twak* and *mamsantara*, leading to *shotha* in the abdominal region, which manifests as *udara roga*. Though all three *doshas* are involved, *vata* is the primary factor, disturbing digestion and metabolism. This results in symptoms like *shushka vaktra*, *krusha gatra*, *adhma*, *pranashta agnibala*, *kukshi adhma*, and *shotha in padas* and *karas*.³

कुक्षेराध्मानमाटोपःशोफःपादकरस्यच ।

मन्दोऽग्निःश्लक्ष्णगण्डत्वंकार्श्यंचोदरलक्षणम् ।

⁴ (Cha Chi 13/21)

Samprapti of udara

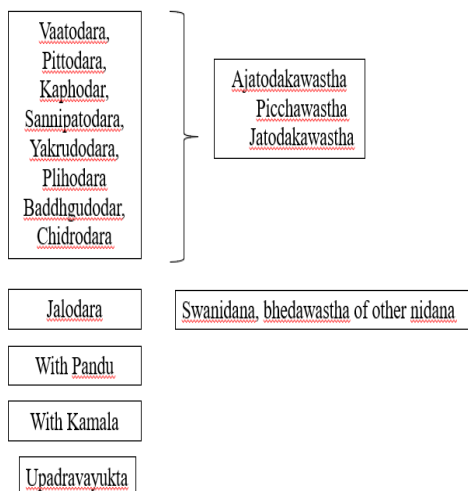


In *udara*, the root of the problem lies in *agnimandya* and *vimargagamana* of *vata*. When digestion weakens, it disrupts *grahani*, leading to improper formation of *rasadhātu* and the accumulation of *ama*. This *ama* clogs the *udakavaha* and *swedavaha srotas*, disturbing the body's natural fluid balance. As a result, *pitta's ushna guna* intensifies, causing *pachana* of *dhatus*. This entire process leads to the separation of *dravamsa* from the *dhatus*, which then starts accumulating in *koshta*, eventually manifesting as *jalodara*.⁵

Awasthas of udara

Udara roga progresses through three distinct *awasthas*, namely *ajatodakawastha*, *picchawastha* and *jatodakawastha*.⁷ In *ajatodakawastha*, there is a mild reddish discoloration (*arunavarna*), abnormal abdominal sounds

(*sashabda*), heaviness (*natibharikam*), prominent veins (*sirajalagavakshitam*), excessive salivation (*lalasrava*), and



altered taste perception (*asyavairasya*)⁶. As the condition advances to *picchawastha*, fluid starts accumulating, leading to *guru kukshi*, *stimita udara*, *aakothita shabda*, and *mrudu sparsha*⁷. In *jatodakawastha*, the abdomen becomes excessively enlarged (*kuksheratimatravruddhi*), veins disappear (*sirantardhanagamanam*) and *udakpurnadrutisakshobha* and *samsparsatvam* confirms the presence of severe ascitic fluid⁸. Every types of *udar* will present with these three *awastha*'s. Some patient may approach with *pandu*, *kamala*, and in *upadrava awastha*, so this also considered as *awastha of udara*.

Ayurvedic management of udara roga:

Understanding these progressive stages allows for timely intervention and a structured treatment approach. In *udara*

roga, the treatment isn't just about managing symptoms—it's about addressing the root cause. The first step is *nidana parivarjana*, avoiding what's triggering the imbalance. Then comes *deepana-pachana*, rekindling digestion, followed by *tridosahara chikitsa* to restore *doshika* balance, and *nitya virechana* to keep the system clear of accumulated toxins⁹.

Since *udara roga* involves *shotha*, reducing inflammation is key. *Vastraveshtana* helps prevent bloating post-*virechana*, while *basti* ensures proper *vata* regulation. *Takra* and *ksheer prayoga* support digestion and nourishment. If fluid retention becomes severe, *jalavisravana* helps drain excess accumulation. Together, these treatments create a well-rounded, holistic approach to healing *udara roga* from its core¹⁰.

Nidana parivarjana: *nidana parivarjana* involves avoiding causative factors such as *atyushna*, *amla*, *lavana*, *kshara*, and *mithya samsarjana*.

Deepana-pachana: is essential to restore *agni* and prevent further formation of *aama* with *pippali*, *musta*, and *trikatu* being commonly used.

उदरेदोषसम्पुरणकुक्षौमन्दोयतोऽनल :

।तस्माभोज्यानियोज्यनिदिपनानिलघुनिच॥¹¹

(Bh.Ra 40/2)

Tridosha chikitsa: since *tridosha prakopa* is present in *udara roga*, *tridosahara* therapies are implemented.

सर्वमेवोदरंप्रायोदोषसंघातजंयतः ।
अतोवातदिशमनिक्रियासर्वत्रशस्यते ॥¹² (Bh. Ra. 40/1)

Virechana:

Regular *virechana* is highly beneficial as it removes excessive *doshas* and *mala sanchaya*, relieves *srotavarodha*, and improves *agni*.

दोषोतिमात्रोपचयात्स्रोतोमार्गनिरोधनात्।संभव
त्युदरं तस्मान्नित्यमेनं विरेचयेत् ॥¹³ (Cha Chi 13/61)

Virechana is considered the primary *shodhana* therapy for *udara roga*. In *ajatodakawastha*, *mrudu virechana* using *trivrut kalka siddha dugdha*, *eranda taila*, and *aragvadh kalka* is recommended. In *picchawastha* and *ajatodakawastha*, where *dosha atimatra upachaya* is present, *tikshna virechana* with *gomutra* is advised. Classical formulations like *haritaki churna*, *ichhabhedi rasa* and *jalodarari rasa* are useful.

Following *virechana*, *vastraveshtana* is essential to prevent *kukshi adhma* due to the sudden evacuation of *doshas*, maintaining abdominal integrity.

वेष्टयेद्वाससोदरम्। तथाऽस्यानवकाशत्वाद्धा
युर्नाध्मापयेत्पुनः।¹⁴ cha chi 13/60

Basti:

सुविरिक्तस्यनरस्ययस्यपुनराध्मानं स्यात्तंतु
दिरणं नरं पुनरेव निरुहैः

सुस्निग्धैरम्ललवणैश्चोपाचरेत्।¹⁵ (A.H Chi 15/51)

Basti is indicated in *ajatodakawastha* when associated with *punaradhmana*. *Niruha basti* with *snigdha*, *amla*, *lavana* has to be given. *Kapha-pitta avarana* of *vata* is treated with *tikshna basti* using *kshara* or *gomutra*, while *ruksha baddha shakrut* is managed with *anuvastana basti* using *til taila* and *eranda taila*.¹⁶

Takra prayoga in udara:

गौरवारोचकार्तानां समन्दाग्नतिसारिणाम्। तक्रं
वातकफार्तानाममृतत्वाय कल्पते ॥¹⁷ (Cha chi 13/102-106)

In *udara roga*, *takra* isn't just a drink—it's a powerful healing remedy when used the right way. The key is to keep it neither too thick nor too watery, just the perfect balance, with a mildly sweet (*madhura*) taste to support digestion and dosha balance.

For *vataja udara*, adding *pippali* and *saindhava* helps warm things up and regulate digestion. In *pittaja udara*, a

cooling touch is needed, so *sharkara* and *yashtimadhu churna* work wonders. If kapha is the troublemaker, then *ajamoda*, *saindhava*, *jeeraka*, *trikatu*, and a little *madhu* (honey) help cut through the heaviness and boost metabolism. when all three *doshas* are out of control (*sannipataja udara*), a stronger mix of *trikatu*, *yavakshara*, and *saindhava* is needed to reset the system. And in *jalodara*, where excess fluid is a concern, *trikatu churna* is the go-to, helping to remove the excess buildup and improve digestion.¹⁸

Dugdha prayoga in udara:

प्रयोगाणांतुसर्वेषामनुक्षीरं प्रयोजयेत्। दोषानुबन्धरक्षार्थं बलस्थैर्यार्थमेव च॥¹⁹(Cha Chi 13/193)

शुद्धानां क्षामदेहानां गव्यं छागं समाहिषम्²⁰(Cha Chi 13/108)

According to Sushrutacharya, *kevala dugdha pana* is highly beneficial in *udara roga*. In cases of *jalodara*, continuous milk consumption for six months is recommended as a therapeutic approach. Milk acts as a *virechaka*, helps in *balavardhana*, and supports *dhatuvridhi*, making it a crucial part of the treatment plan.^{19,20}

Dosha-specific chikitsa for udara roga

With this general line of management specific treatment options

considering *doshika* predominance has to be considered, as follows.

Vatodara:

वातोदरं बलवतः पूर्वस्नेहैरुपाचरेत्। स्निग्धायस्वेदितागायंदद्यात्स्नेहविरेचनं॥²¹(Cha Chi 13/59)

Vatodara is managed with *snehana* using *vidarigandhadi ghrita*, *swedana*, *sneha virechana* and *basti* therapy using *dashmoola kwath* and *eranda taila*.²¹

In *ajatodakawastha*, after *agnidipti*, *asthapana basti* with *dashmoola kwath* and *tikshna virechana aushadhi kalka* is used to clear toxins and balance vata. If the patient is weak for *virechana* or has symptoms like *spurana*, *akshepa*, *asthi-sandhi-parshava-prushta-trik vedana*, *mala baddhata*, and *rukshata*, *anuvāsana basti* with *dashmoola* and *amlakanji siddha eranda taila* or *tilataila* is preferred for nourishment and detoxification.²²

For *udara roga*, treatment varies by stage. Sushrutacharya recommends *snehana* with *vidarigandhadi gana siddha ghrita* and *salvana upanaha*, while *ashtanga hridaya* suggests *mishraka ghrita pana* and *bhaishajya ratnavali* advises *lasun taila pana* to regulate digestion and vata.²³

In *jatodakawastha*, *nitya virechana* is crucial, especially for *balawan rogi*, using *snehavirechana* with *eranda taila* or

lodhrasiddha ghrita to eliminate *doshas* and maintain digestion. According to *bhaishajya ratnavali* and *yogaratanakara*, *eranda taila prayoga* is effective in *udara roga*, especially for *vata* regulation and detoxification.²⁴ When combined with *dashmoola kwath*, it reduces inflammation, while *triphala kwath* and *gomutra* enhance bowel movements and toxin elimination. For deeper cleansing, *dashmoola kwath* and *gomutra* with *eranda taila* help strengthen digestion and clear *ama*.²⁵

Pittodara

पित्तोदरेतुबलिनंपुर्वमेवविरेचयेत्।दुर्बलंत्वनुवा
स्यादौशोधयेत्क्षीरबस्तिना॥²⁶(ChaChi 13/68)

पुनःक्षीरंपुनबस्तिपुनरेवविरेचयेत्।²⁷

(A.H.Chi 15/65)

In *pittodara*, treatment varies based on the patient's strength. A *balavana rogi* should first undergo *virechana*, while a *durbala rogi* should initially receive *anuvasana basti*, followed by *shodhana* using *ksheera basti*. For *snehana*, *sushrutacharya* prescribes *kakolyadi gana siddha ghrita*, which nourishes and prepares the body for detoxification. Ashtanga hridaya emphasizes a stepwise approach: *ksheera pana*, *basti*, and repeated *virechana*.²⁸ *Anuvasana basti* is specifically recommended for *durbala* patients, where *dugdha yukta samshodhana basti* and *kakolyadi gana*

kwath are used for gentle purification. For *virechana* in *balavana rogi*, *charaka* prescribes formulations like *trivrut kalka siddha dugdha*, *eranda taila siddha dugdha*, and *aragvadha kalka siddha dugdha*, while *Sushrutacharya* suggests *trivrut triphala siddha ghrita*. If *kapha* association (*kaphanubandha*) is present, *gomutra-yukta dugdha* is used, whereas for *vata* involvement (*vatanubandha*), *tikta ghrita* with *dugdha* is preferred for effective detoxification and *doshic* balance.²⁹

Kaphodara

यच्छितलंशुक्लसिरावनध्दंगुरुस्थिरंशुक्लान
खाननस्य।³⁰ (Su Ni 7/10)

Charakacharya recommends *snehana*, *swedana*, and *tikshna virechana* to eliminate toxins, along with a diet rich in *katudravya* and *ksharayukta dravya* to support digestion.³¹ According to *Sushrutacharya*, *snehana* with *pippalyadi gana siddha ghrita* prepares the body for detoxification, while *virechana* using *snuhiksheer siddha ghrita* helps eliminate aggravated *doshas*. *Basti* therapy with *maricha*, *pippali*, *gomutra*, and *yavakshara-mishrita taila* is used to regulate *vata* and clear blockages. For external application, *udaralepa* with *moolakabeeja kalka* or *kulathya kwath* mixed with *trikatu churna* is

suggested.³² Additionally, *bhaishajya ratnavali* prescribes *punarnavarishta*, *abhayarishta*, and *kumaryasava*, which aid in digestion, detoxification, and liver support.

Sannipatodara:

सन्निपातोदरेसर्वायथोक्ताः

कारयेत्क्रियाः।³³ Cha Chi 13/ 74

In *sannipataja udara*, treatment is guided by dosha involvement, and as per *charakacharya*, all standard therapies should be applied accordingly. For *virechana*, *Sushrutacharya* prescribes *saptala-sankhini siddha ghrita*, along with stronger eliminative therapies like *snuhi dugdha*, *sura*, and *gomutra siddha ghrita* to clear deep-seated *doshas*. *Ashtanga hridaya* recommends *danti-dravanti phala taila* for internal administration to enhance detoxification and regulate metabolism.³⁴ The key to managing *sannipataja udara* is balancing all three *doshas* while ensuring proper elimination and digestive strength.

Udara with kamala:

Some *Udara* cases may present with *kamala*. In such cases, treatment variation needed by differentiating between *Koshtashakhashrita kamala* and *shakhashrita kamala*.

In *koshtashakhashrita kamala*, purification should be done using mild and

tikta virechana dravyas, as recommended in *charaka Samhita*

संशोध्योमृदुभिस्तिक्तैःकामलीतुविरेचनै

³⁵(Ch. Chi. 16/ 40). For *shakhashrita kamala*, where obstructive pathologies are involved, *kapha*-reducing and *pitta*-increasing therapies are essential, as per *chakrapani's*

commentaryकफहरंपित्तवृद्धीकरंसमंचिकि

त्सितमं³⁶ Treatment focuses on *srotoshodhana* using *katu rasa*, *tikshna* and *ushnadravys* to clear blockages and restore bile flow. A combination of *trikatu churna* with *matulunga swarasa* and *madhu* is effective in breaking down *kapha* obstruction. Once *pitta* returns to its normal pathway, indicated by yellow-colored stools (*purisha pittrarangita*) and resolution of complications, the standard *kamala* treatment line is followed, as described in *charaka Samhita*

"स्वस्थानमागतेपित्तेपुरीषेपित्तरञ्जिते।

निवृत्तोपद्रवस्यस्यात्पूर्वःकामलिकोविधि

³⁷(Ch.Chi.16/131-132).For

koshtashakhashrita kamala, where both *koshta* and *shakha* are affected, the treatment approach includes a balance of *kapha*-reducing, *pitta*-enhancing, and detoxifying therapies to restore normal liver function. Ayurvedic formulations like *patolmooladi kashaya*, *patolkatukrohinyadi*

kashaya, and vasa guduchyadi kashaya are used to detoxify the liver, improve digestion, and reduce inflammation, ensuring proper metabolic function.

Udara with pandu:

तत्रपाण्ड्वामयीस्निग्धस्तिक्ष्णैरुर्ध्वानु
लोमिकैः।³⁸Cha Chi 16/40

In the treatment of *udara* with *pandu*, use *snigdha-tikshna* dravyas with *urdhvabhagahara* and *anulomana* properties to restore blood quality and digestion. Ayurvedic formulations like *mandura vatika*, *punarnava mandura*, and *dhatrī loha* are beneficial in managing anemia, improving hemoglobin levels, and supporting liver function.

Upadravayukta awastha:

छर्दितिसारतमकतृष्णाश्वासकासहिक्कादौरब
ल्यपार्श्वशूलअरुचिस्वरभेदमुत्रसंगादयः।³⁹Cha
Chi 13/49

In *asadhya avastha*, symptoms like *chhardi*, *atisara*, *tama*, *Trishna*, *shwasa*, *kasa*, *hikka*, *daurbalya*, *parshva shula*, *aruchi*, *swarabheda* and *mutra sanga* indicate a severe prognosis. Treatment should be disease-specific, focusing on palliative care and symptom management.

Depending on severity:

The treatment approach for *jalodara* varies based on its severity. In uncomplicated cases, *samanya chikitsa* is

followed, using *goarka*, *haritaki*, *snuhi*, *icchabhedi rasa*, and *jalodaradi rasa* to regulate fluid balance and digestion. In severe cases, where complications like hemorrhoids or esophageal varices arise, *jalodara chikitsa* is applied while avoiding *tikshna virechana* using *gomutra* or *snuhi*. Instead, milder therapies like *eranda taila*, *dugdha*, and *trivrut lehya* are preferred. In complicated cases with ruptured esophageal varices, encephalopathy, or hepatorenal syndrome, the prognosis is poor, requiring a combination of *jalodara chikitsa*, *shotha chikitsa*, and *raktapitta chikitsa* for symptomatic relief and palliative care.

Shamana:

The *samanya chikitsa* for *udara roga* follows fundamental principles aimed at balancing *tridoshas*, correcting *agnimandya* through *deepana* and promoting light, easily digestible food. Beneficial therapeutic formulations include *gomutra*, *ikshurasa*, *dugdha*, and *takra*, which help regulate metabolism and support overall digestive health.⁴⁰ Few shamana medicines indicated in *udara* are *dashamoola panchakoladi kashaya*, *patola muladi kashaya*, *punarnavadi kashaya*, *avipathikara choorna*, *mandoora vatakam*, *yakrut pleehodarari vati*, *rohitakaristam*, *kumaryasavam*, *gomutra haritaki*, *dashamoola hareetaki*.

Pathya and apathya in udara roga

In udara roga, dietary regulation plays a crucial role. Pathya includes milk, *jangala mamsa rasa*, and easily digestible grains *likeshashtikashali*, *yava*, *godhuma* etc which help maintain digestive strength and metabolic balance.⁴¹

औदकानूपजंमांसंशाकंपिष्टकृतंतिलान्॥व्याया

माध्वदिवास्वप्नंयानयानंचवर्जयेत्॥

तथोष्णलवणाम्लानिविदाहीनिगुरुणिच॥ना

द्यादन्नानिजठरीतोयपानंचवर्जयेत्⁴²(Cha

Chi 13/99-100

On the other hand, *apathya* include aquatic meat, heavy foods, processed grains, sesame and incompatible food combinations. Activities such as excessive exercise, long-distance travel, day sleep and intake of excessively salty, sour, spicy, or heavy-to-digest foods should also be avoided. Overeating and excessive water intake further disturb digestion and should be restricted.

Conclusion

Udara roga, a severe disorder linked to agnimandya and vata vitiation, demands a holistic ayurvedic approach. Nidana parivarjana eliminates causative factors, while *deepana-pachana* restores agni. *Virechana* is the primary purification therapy, supported by *basti*, *takra*, and

dugdha prayoga for digestion and fluid balance. Tailored treatments for *vatodara*, *pittodara*, *kaphodara*, and *sannipatodara* ensure targeted dosha management. Herbal formulations like *dashamoola kashaya*, *punarnavadi kashaya*, and *mandura vatika* aid detoxification and liver function. *Pathya ahara* like light, digestible food support recovery, while *apathya ahara* like heavy, incompatible foods must be avoided. Lifestyle modifications further enhance treatment efficacy. Thus, ayurveda provides a structured, root-cause approach to *udara roga*, focusing on detoxification, *dosha* balance, and digestive restoration for long-term health.

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