



UNDERSTANDING KLEDA AND ITS SAMPRAPTI IN MANAGEMENT OF KLEDA PRADHANA VYADHI – AN ANALYTICAL REVIEW

Anagha.H.A.¹, Shrinath. M. Vaidya²

¹ First year PG Scholar, Dept of Ayurveda Samhita and Siddhanta, Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan, Karnataka

² Professor, Dept of Ayurveda Samhita and Siddhanta, Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan, Karnataka

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ABSTRACT

INTRODUCTION: The term *Kleda*, an *Apya Dravya*, refers to the general wetness or moisture component found in all *Shārīrika Avayavās*. *Kleda* is in two forms - *Prākṛuta* and *Vikṛuta Avasthā* and is the reason for sustenance and destruction of *Dhātu* respectively. This demands a precise grasp on crucial role of *Kleda* in both wellness and illness.

METHODS: 1) From *Bṛhatṛayi* detailed literary study and content review of references related to *Kleda* was performed. 2) A rigorous analysis of involvement of *Kleda* in *Samprāpti* of *Vyādhi* is being done.

RESULTS: *Samsarga* / *Sannipātaja* / *Avarana* are the possible presentations of *Kleda Pradhāna Vyadhi*. Upon investigation, the principles behind dynamics of *Kleda* and its *Vikṛuti* are to be applied for enhancing accuracy and efficacy in treatment. It is impossible to stop the risks caused by persistent disease if one is unaware of role of *Kleda* in the manifestation of *Roga*.

DISCUSSION AND CONCLUSION: Water is a major component of our body, accounting for 50–60% of your total weight and is vital for human physiology. *Kleda* is identified by more than just the obvious water component; perhaps there is more to know about *Kleda* and its role in the pathophysiology of *Kleda Pradhāna Vyadhi*, which still needs to be explored. *Jātharāgni*, *Dhātāvāgni*, *Bhūtāgni* and *Tridoshas* have their own specific roles to play in homeostasis of *Kleda* through numerous metabolic processes. As a result of which *Kleda* is constantly produced and lost from our body. When optimum excretion of *Kleda* is violated and stagnation occurs, it manifests *Roga*. Success in both diagnosed and undiagnosed medical conditions requires a thorough understanding of *Kleda* in relation to *Nidāna*, *Samprāpti* and to aim for *Samprāpti Vighatana*. Therefore, in order to appropriately handle *Kleda Pradhāna Vyadhi*, it is necessary to grasp *Vikṛuta Kleda* and its *Samprāpti*. The present paper throws a light to understand above aspects.

KEY WORDS: *Kleda*, *Ardrata*, *Prākṛuta Kleda*, *Vikṛuta Kleda*, *Samprāpti* etc

INTRODUCTION

Ayurveda defines '*Sharīra*' as '*Tatra sharīram nāma chetanādhishthānabhūtam panchamahābhūta -vikāra - samudāyātmakam samayogavāhī*'¹. Hence *Sharīra* is living entity in itself and not motionless (*Jada*). According to *Ayurveda*, the human body originates, persists, and dissolves in *Pānchabhautikā*. Because of this, all the elements that comprise the *Sharīra* i.e., *Dosha*, *Dhātu*, *Mala* are *Pānchabhautika* and their sustenance derives from *Ahāra* which is also *Pānchabhautika* in nature².

The *Guna* and *Karma* of each *Panchamahābhūta* are discussed independently by the *Bṛhatṛayees*. The explanation goes beyond *Guna* and *Karma* alone. In *Shad Dhātāvātmaka Purusha* (*Sūkshma Purusha*), *Prithvi* plays a role for *Murti*, *Apah* for *Kleda*, *Tejha* for *Abhisantāpa*, *Vāyu* for *Prāṇa*, *Viyat* for *Sushira* and *Brahma* for *Antarātmā*³. *Sūkshma Tattva* which was previously elucidated, would also shed light on *Sthūla Avayavas* based on *Shilāputraka Nyāya*. *Ambu* / *Ap Mahābhūta*, which represents *Kleda* in *Sharīra*, is called *Yoni* - beholder, originator, or inventor of life. Hence this article attempts to go into great detail regarding *Kleda*, a *Shārīrika Avayava*⁴, that is core to any ramifications.

The term "*Kleda*" refers to the general wetness, dampness, and/or unctuous component found in all *Shārīrika avayavās*. Given that *Kleda* comes in two important forms— *Prākṛuta avasthā* and *Vikṛuta avasthā*, it is important for understanding physiology, diagnosing diseases, and treating them. The term *Kleda* is rarely explained in a single quote in *Ayurvedic* texts; instead, it is likely used more frequently in conjunction with a variety of clinical conditions to explain physiological and pathological states. An *Ayurvedic* researcher becomes intrigued by this and becomes eager to examine the *Kārya Vyāpti* of *Kleda* in *Sharīra* in great detail.

KLEDA AS DRAVYA

Apya Dravyas are those substances that are cold, stable, unctuous, slow, heavy, fluid, dense, soft, slimy and abundant in the quality of taste (*Rasa guṇa*)⁵. There is a predominance of '*Ambu Guṇa*' (*Ambu Guṇa Utkarsha*) in *Apya Dravyas*. *Ap mahābhūta* is essential (instrumental) for *Kleda*. Hence *Kleda* is an *Apya Dravya*⁶ since it shares characteristics with *Ap mahābhūta*.

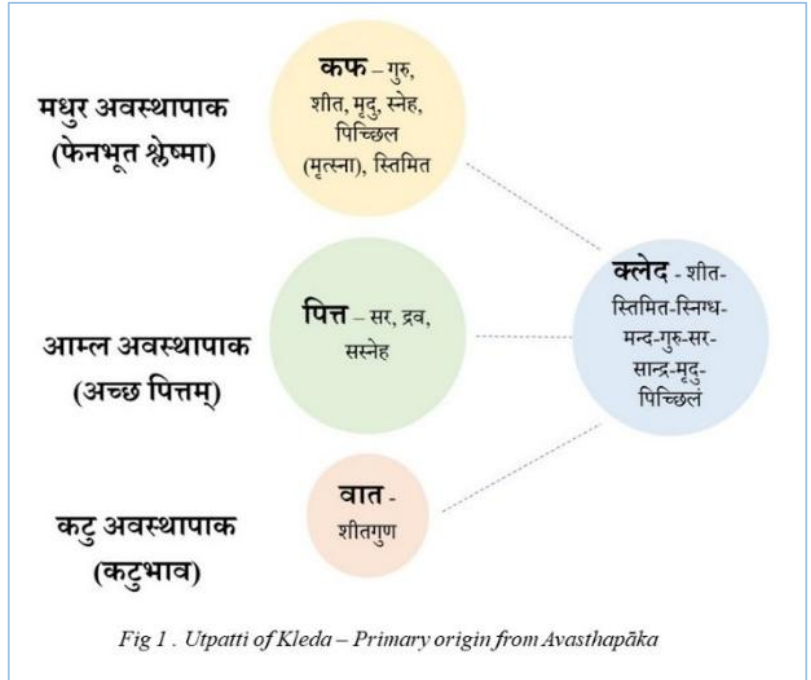
KLEDA GUNA

According to Acharya Charaka⁷, *Kleda*, being an *Apya Dravya*, possesses qualities: *Drava*, *Sara*, *Manda*, *Snigdha*, *Mrudu*, and *Picchila*. The following are the attributes and purposes of *Kleda*, according to Acharya Vagbhata⁸: it imparts *Snehana*, *Vishyandana*, *Kledana*, *Prahlidana*, and *Bandhana* with its qualities: *Drava*, *Shīta*, *Guru*, *Snigdha*, *Manda*, and *Sāndra*.

Hemadri clarifies that the innate nature of *Sneha Guṇa* is to impart *Kledana* i.e., moisture content, while the inherent nature of *Drava Guṇa* is to impart *Vilodhana Shakti* i.e., to flow. Each of these innate capabilities can be understood with *Medas* and *Mutra* as an example respectively.

KLEDA SWARUPA

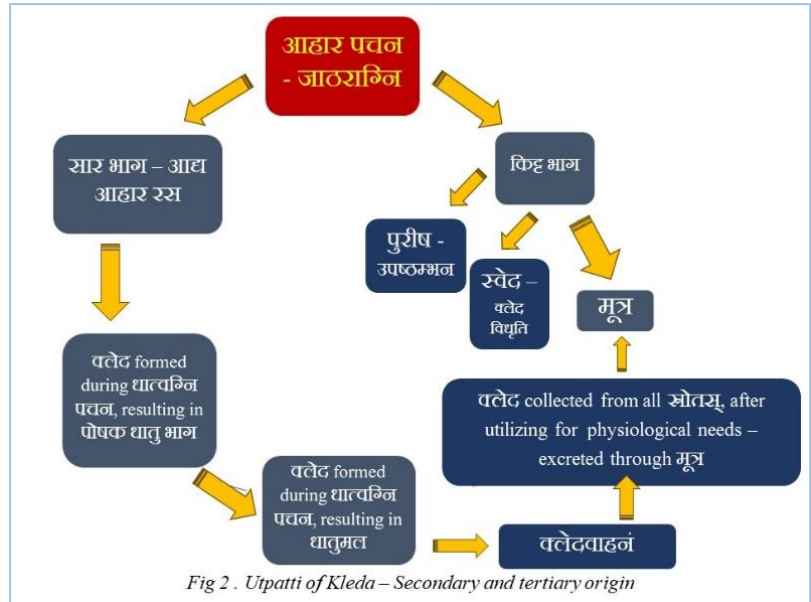
Apya Dravya can be broadly classified into two types. Both *Dravya* and *Guṇa* acknowledge these classifications. First is *Ardra Bhāva*, followed by *Sneha Bhāva*. *Ardra Bhāva* primarily consists of *Drava* (wetness / liquid component) whereas *Sneha Bhāva* mostly consists of the unctuous components. Thus, the *Ardra Bhāva* is composed of *Rasa*, *Rudhira*, *Kapha*, *Pitta*, *Mutra*, *Sweda*, and *Lasikā*, and *Sneha Bhāva* is composed of *Meda*, *Māmsa*, *Majjā* and *Vasā*. *Ardra Bhāva* because *Udaka* (water) makes up the majority of the human body, and *Sneha Bhāva* does unctuousness the reason being “*Snehasāro Ayam Purushah*”⁹.



KLEDA UTPATTI

Primary origin: In each *Avasthāpāka*¹⁰, *Kleda* is generated in varying amounts. Due to the similarity in *Guṇa*, during *Madhura Avasthāpāka*, more *Kleda* is produced, less in *Amla Avasthāpāka* and the least amounts produced in *Katu Avasthāpāka*. As a result, diseases linked to *Kleda* appear in *Annavaha Srotas* and eventually affect *Shākhā Pradesha*. [Fig 1]

Secondary origin: *Sāra* or *Kitta Bhāga* is the source from which all creation and eventual bodily circulation originate. This division, called *Sāra* or *Kitta Vibhajana*, occurs at *Koshtha*. Hence, *Mūlasthanā* for *Kleda* is *Annavaha Srotas* suggesting that *Sharīraja Kleda* or *Poshaka Rūpī Kleda* originates from the *Pachanakriyā* by *Jātharāgni*. Then gains momentum to reach individual *Dhātvāgni* to undergo *Pachana* and eventually form respective *Dhātu*. [Fig 2]



Tertiary origin: *Nishthāpāka* is the next stage of digestion, after *Sthūlapāka* and *Aṅgupāka*. It includes all the metabolic phenomenon that occurs once the *Sāra Bhāga* exits the *Pakvāshaya*. This will be detailed under the section *Dhātu Kleda Kalpana*.

KLEDA PARIMAANA

Since *Kleda* is an *Apya Dravya*, the amount of it present in the *Sharīra* equals the total amount of *Apya*, also known as *Udaka Bhāva*. It is acknowledged that this is 10 *Anjali Pramāṇa*. This is explained in (दशोदकस्याञ्जलयः शरीरे स्वेनाञ्जलिप्रमाणेन)¹¹. Even though an exact amount is known to be *Apya Dravya*, this amount varies depending on how other body components' proportions change. However, only *Kleda Pradhana Vyadhis* exhibit significant variances.

KLEDA STHANA

○ **Kleda in Koshtha**

A. *Amashaya* – *Kledaka Kapha* resides in *Amashaya*, which does the function of *Anna Kledana*. This *Kledaka Kapha* in its *Prākṛuta* state governs all the *Saumya Bhāva* present in the entire *Sharīra*. Hence, *Udaka Bhāva* or *Sharīraja Kleda* is no exception. Hence through *Anuamāna Pramāṇa*, *Koshtha* specific to *Paktisthāna* (*Amashaya & Pakvāshaya*) is recognized as *Mūlasthana* of *Sharīraja Kleda*.

B. *Kleda* is present in the entire *Koshtha* as *Picchābhāga*¹², nourished by *Dhāturūpī Kapha*.

○ **Kleda in Shākhā**

Once the circulation of *Sāra Bhāga* commences from *Koshtha* to *Shākhā*, *Kleda* associates with *Annarasa* or *Adya Ahāra Rasa*. This *Kleda* reaches all *Paramāṇu Rūpī Dhātu* in the entire *Sharīra* (***Sarvasharīra***). Hence it is mentioned in the context of *Madātyaya* that *Annarasa* has *Kleda*¹³.

○ **Srotas**

Apya Bhāva circulates majorly in *Udakavaha*, *Rasavaha*, *Raktavaha*, *Mutravaha* and *Swedavaha srotas*.

KLEDA TYPES

Each physiological factor exists in two states: one maintains physiology or helps keep body components in their natural state, while the other induces physiology to deviate. This holds for every physiological component, not simply *Dosha*. In this context, *Prākṛuta* (*Deham Vartayanti Yāpayanti*) is that which upholds equilibrium, while *Vikṛuta* (*Deham Ghnanti*) is that which disturbs it (hampers the equilibrium)¹⁴. *Kleda* thus exists in two states *Prākṛuta Kleda* and *Vikṛuta Kleda*.

A. **Formation of Prākṛuta Kleda:** *Prākṛuta Ahāra*, *Shuddha Ahāra Rasa* and *Prākṛuta Doshadhātumala* leads to *Prākṛuta Kleda*. This circulates in the body for *Poshaṇa* of *Dhātu*- विकारान् न कुर्वते. *Prākṛuta Kleda* transforms / metabolizes the *Dhātus* and is responsible for demarcating between *Dhātu* and *Ashaya*.

B. **Formation of Vikṛuta Kleda:** *Vikṛuta Ahāra*, *Ashuddha Ahāra Rasa*, *Vikṛuta Doshadhātumala* leads to *Vikṛuta Kleda*. *Vikṛuta Kleda* circulates in the body and manifests *Vyadhi* - विकारान् कुर्वते बहून् / जनयत्यामयान् बहून्

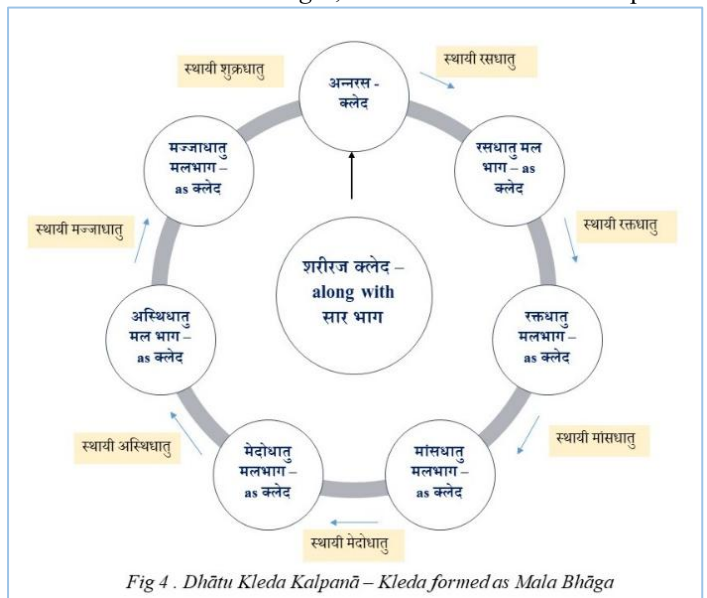
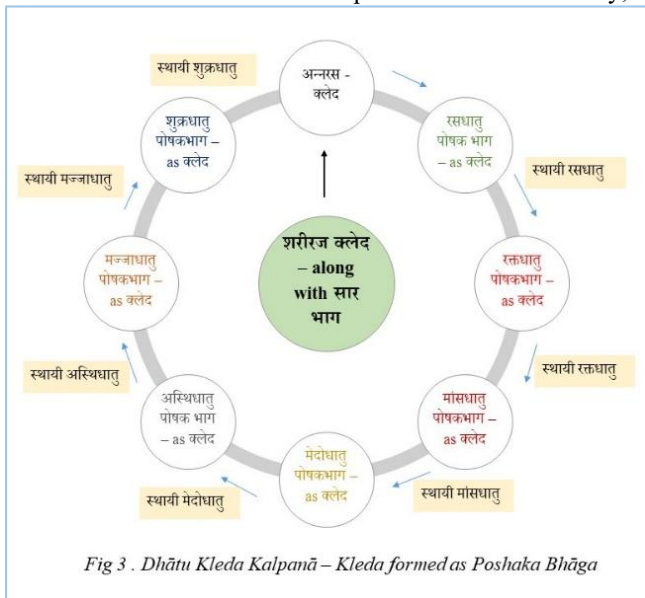
Similar to *Saptadhātu*, *Kleda* is depicted in three different ways. There are three types of *Bhāvas*: *Poshya*, *Poshaka*, and *Mala*. Here *Poshya Bhāva* nourishes its site, *Poshaka Bhāva* nourishes the dependant sites and *Mala Bhāva*, which exceeds the physiological limit is expelled from the body.

DHĀTU KLEDA KALPANA

The term "*Kalā*" refers to a thin membrane separating the vital elements from the cavities containing them. The vital components are kept within these cavities, which have an internal lining known as *Kalā*. Additionally, the literature describes the multi-stage process by which *Dhātu* and *Kalā* form. *Dhātu* starts as a *Dhāturasa*, a liquid that subsequently transforms into *Dhātu*¹⁵.

During this process, a very small amount of *Kleda* remains between *Dhātu* and *Ashaya* aiding the *Kalā* formation. This *Kleda* doesn't transform either into preceding or succeeding *Dhātu* but rather sustains the physiology of *Kalā* formation. *Kleda* is therefore created and used during *Kalā* development. [Fig 3, Fig 4, Fig 5]

Also in this process, the preceding *Dhātu* produces '*Poshaka Bhāva*'¹⁶ for the *succeeding Dhātu*. This *Poshaka Bhāva* is in the form of *Kleda* associated with respective *Dhātu*. Similarly, upon interaction with *Dhātuvāgni*, *Poshaka Bhāva* from the previous



Dhātu splits to form *Sthūla*, *Sūkshma* and *Mala Bhāga*. This *Mala Bhāva* is produced concerning *Kleda*. Hence at every stage of *Dhātu* formation, *Kleda* will be produced. The below images depict the process of *Dhātu Kleda Kalpanā*.

PRAKRUTA KLEDA

Be it any *Kārya Dravya*, will have their momentum in their formation, sustenance and destruction. Referring to *Prākṛuta Kleda*, these are termed *Utpatti*, *Stithi* (*Dhātu Rūpa*) and *Laya* (*Nirharaṇa*). *Utpatti* has already been discussed. Now *Samasthi*, *Karma*, *Ardrata* and *Nirharaṇa* of *Prākṛuta Kleda* will be discussed in detail.

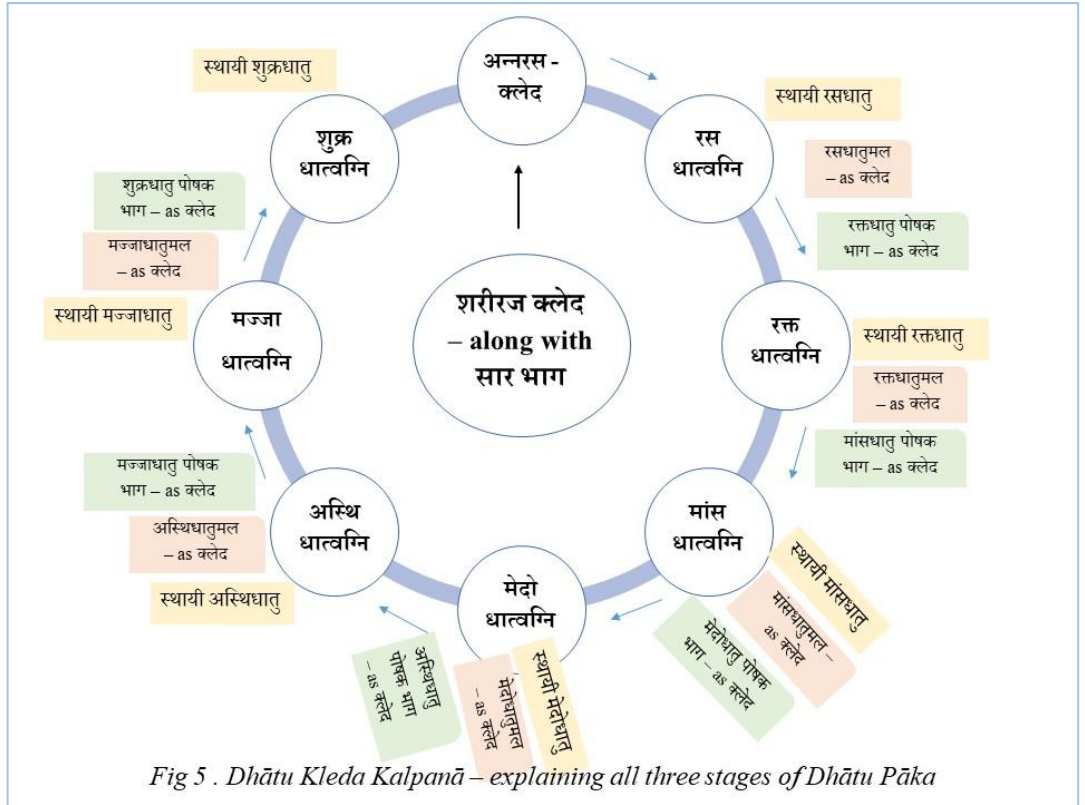


Fig 5 . Dhātu Kleda Kalpanā – explaining all three stages of Dhātu Pāka

A. SAMATA OF PRAKRUTA KLEDA

It is a significant physiological phenomenon that there will be less *Kleda* accumulation (more involvement in ongoing physiology) during the day owing to the influence of the Sun and more *Kleda* accumulation at night (less ongoing physiological activities) due to the influence of the Moon (*Rātri Prabhāva*)¹⁷. This demands clarity in the physiology of Srotas. In the daytime, due to the influence of the Sun, there will be vitality in each living component and hence the Srotas remain open i.e., receptive. This doesn't let the *Kleda* get over accumulated or stagnated (*Sroto Sphutana – Vivaraṇa*). But, at night, there is more chance for the stagnation of *Kleda* (*Sroto Samvaraṇa*). As a result, *Kleda* changes throughout the day, owing to the dynamics of the human body. Not only that, *Kleda* has physiological adaptations based on seasonal fluctuations as well. It falls in *Ushna Kala* and rises well inside the bounds of nature in *Shīta Rutu*.

In both ascending and descending pathways of *Kleda* formation, normalcy is to be maintained. If the food that is taken is balancing the *Doshas* well, then *Kleda* formed during *Avasthāpāka*, *Nishthāpāka* and *Malapāka* will be in optimum amounts. This is the ascending pathway. W.r.t descending pathway, when *Mala* formed is excreted at appropriate time and amounts, then *Dhātu* formation, *Sāra* or *Kitta Bhāga* formation also will be at optimum levels.

B. KARMA

- *Shakti Rūpī Dosha*¹⁸ – *Kleda*, being *Apya* is more related to *Kapha* among the *Tridoshas* due to similarities in properties and *Jaliya Dharma*. *Kapha Dosha*, the *Shakti* of which is *Soma Bhāva* (*Ap Bhāva*), *Dārdhyatā* (imparts steadiness), *Upachaya* (optimum nourishment), *Utsāha* (enthusiasm/willingness), *Vrushatā* (libido), *Jnāna* (perception of knowledge) and *Buddhi* (intelligence) to a human being. Here *Dārdhyatā* (imparts steadiness) is of prime importance to the understanding of *Kleda*. Formation of *Kleda* also needs the involvement of *Pitta* as a function of *Avikruta Pitta*¹⁹ is *Kleda* (*kledo – malādravatvam*)]
- *Dhātu - Kleda* is *snehāmsha* present in *Dhātu*. It is formed inside the body during the process of digestion and metabolism. The technical terms such as '*Tvaggata kleda*', '*Māmsagata kleda*', '*Snāyugata kleda*', and '*Raktagata kleda*' suggest the formation of *Kleda* at different tissue levels in the body. '*Dhātu kleda*' a special term has been used which shows the possibility of *Kleda* formation in all *Dhātus*. This *Kleda* further aids in the formation of *Kalā*.
- *Mala* – No *Mala* is entirely dry or rough. Depending on the *Kleda* factor present, each *Mala* varies in its liquidity, softness and viscosity. This is understood as *Kleda*. Based on this, at normalcy, the *Kleda* factor present in *Mūtra* is more than that of *Sweda*, *Purisha*, *Karṇa Gūtha*, *Singhāṇaka* etc.
- *Ahāra Pariṇāmakara Bhāva* – For digestion of *Ahāra – Ushma*, *Vāyu*, *Kleda* and *Sneha* are contributing factors. Thus, in great detail, they play a role in digesting and metabolizing the consumed *Ahāra*. Here *Kleda* causes loosening or softening of hard particles in the food (*Kledah Shaithilyamāpādayati*). *Dravaih bhinnasanghaatam, snehena mrudutaam gatam*²⁰.



C. NIRHARANA

Prākṛta Kleda exits the body through *Mūtra*, *Sweda*, and *Purīsha*. Examining each of these *Mala*, it is evident that the quantity of *Kleda* excreted through the above three is in descending order. *Kleda* which is produced as a by-product of digestion in *Grahaṇi* exits the body majorly in the form of *Mūtra* and sparsely in the form of *Purīsha*. The byproduct of metabolism at various *Dhātvāgni* sites exits the body in the form of *Sweda*.

▪ **Mūtra**

- i. *Indu* commentary describes *Mūtra* as that which conducts the *Annarasa Kleda*, meaning that which conducts moisture or wetness component present in *Annarasa*.
- ii. Acharya Sushruta recognises the function of *Mūtra* as ‘*Basti Pūraṇa*’ – pooling of wetness component into the water collection/regulation site of the body i.e., *Basti* or conducting water content towards *Basti* and ‘*Basti Vikledakrut*’²¹ – imparting more wetness in this *Basti*.
- iii. Acharya Vagbhata has said that *Mūtra* does ‘*Kledavāhana*’, meaning conduction or transportation of *Kleda* towards the external environment, which *Arunadatta* describes as ‘*Mūtram Kledam Nirvāhayati*’ and *Hemadri* as ‘*Kledasya Bahirnirgamanam*’²² in *Ashtanga Hridaya*.

All these are regulated by *Samāna Vāyu*, *Pāchaka Pitta*, *Vyāna Vāyu* and *Apāna Vāyu*.

▪ **Sweda** –

Sweda holds the *Kleda Bhāva* necessary for the sustenance of the body, regulates temperature by optimum excretion of withheld *Kleda* concerning external and internal factors and brings softness to *Tvak* (skin).

All these are regulated by *Samāna Vāyu*, *Pāchaka Pitta* and *Vyāna Vāyu*

▪ **Purīsha**

Purīsha holds the *Kleda Bhāva* necessary for the sustenance of the *Pakvāshaya* and *Koshtha*, regulates temperature and internal environment of *Pakvāshaya* by optimum excretion of withheld *Kleda* along with *Purīsha* and brings softness to excreted *Pindavat Purīsha*.

All these functions are regulated by *Samāna Vāyu*, *Pāchaka Pitta* and *Apāna Vāyu*

▪ **Khamala**

Khamala are *Kapha (Rasa Mala)*, *Pitta (Rakta Mala)*, *Karṇa Mala - Karṇa Gūtha*, *Nāsāmala - Singhāṇaka*, *Akshi mala - Netravat / Picholikā*, *Asya Mala*, *Tvak Sneha*, *Prajanana Mala* etc. At normalcy, the optimum level of *Kleda* will be maintained in these *Khamala* and also excreted out at regular intervals.

Hence, it is inferred that *Kleda* should be excreted out of the body at regular time intervals to balance the softness and hardness of each component of the *Sharīra*, for regulating water quantity, temperature balance, internal environment of *Koshtha*, softness of *Srotas* and other bodily constituents.

D. ARDRATA – SWAROOPA

Pitta karma and *Kaphaja karma kleda* because in both²³ ‘*JALA*’ component is there as *Drava* and *Guru Bhava* respectively. *Udakavaha*, *Rasavaha*, *Raktavaha*, *Mutravaha* and *Swedavaha srotas* all transport *Kleda* in different modes. Though all carry different proportions and forms of *Kleda* in them, still can maintain the equilibrium of the *Kleda* component in the *Sharīra*, hinting at a common regulator for all *Srotas* related to *Apya Amsha*. This commonality comes from their channelizer *Samāna Vāta*. The function of *Samāna Vāta* is to regularly channel *Dosha*, *Sweda* and *Ambuvaha Srotas*²⁴. This explains how one entity can singlehandedly balance the equilibrium of *Kleda*, be its diurnal relation, sustenance and excretion. *Samāna Vāta* acts along with *Prāṇa Vāta* for diurnal variations related to *Kleda*, while with *Vyāna Vāta* for Sustenance and with *Apāna Vāta* for excretion of *Kleda*.

VIKRUTA KLEDA

A. HETU

1. **KLEDA AT DIVA AND RATRI** – By nature’s law, the dynamics of *Kleda* follow the diurnal cycle of the Sun and moon. Such that *Kleda* is innately less during the day but increased at night. Hence food is to be consumed in optimal amounts in the day and should avoid late night food consumption. If food is taken late in the night, the *Kleda* which has accumulated due to night’s influence further increases due to *Amāvasthā*, owing to the physiological low state of *Agni*. This deviation in physiology results in the formation of *Vikruta Kleda*.
2. **DIVASWAPNA AND RATRI JAGARANA** – *Divā Swapna* causes *Kapha Prakopa* while *Rātri Jāgarana* (being awake at night) causes *Vāta Prakopa*. Hence the practice of *Divā Swapna* for a longer time results in *Vikruta Kleda*, i.e., qualitative increase. Also, the practice of *Rātri Jāgarana* for a longer time results in *Vikruta Kleda*, i.e., qualitative and quantitative decrease. The former causes *Shithilathā* of *Dhātu* by *Atikledana* while the latter causes *Shoshana*. This condition is generally observed in Night duty factory workers and IT professionals working night shifts.
3. **ABHISHYANDI AHARA**²⁵ – *Abhishyandana* means the phenomenon by which *Dosha*, *Dhātu* and *Mala* attain an aggravated state of *Kleda*. In other words, those food items that cause liquefaction of *Shleshmā* deviating from normal physiological standards are called *Abhishyandana*. Hence, those food items that impart *Abhishyandana* to *Dosha*, *Dhātu* and *Mala* aggravate *Kleda*. Ex. *Māsha* (Urad dal), *Dadhi* (Curds).

- AJEERNA HETU²⁶ – Drinking excess water (*Atyambupāna*), *Vishmāshana*, *Akāla Bhojana* (untimely food intake), *Viruddha-Ahāra Sevana* (consuming naturally incompatible food items), *Atimātra Ahāra Sevana* (excess food intake), *Adhyashana* (consuming food before previously ingested meal is completed digested).
- SANTARPANA JANAYA HETU²⁷ - Excessive consumption of unctuous, sweet, heavy to digest and slimy food, new grains (especially new rice), new wine, the flesh of animals living in marshy areas or born in water, cow's milk and its products, and those prepared with sugar or molasses, varieties of cakes lead to *Santarpana*. Those who indulge in sedentary, inactive lifestyles and sleep during the day are prone to *Santarpaniya vyadhis* (i.e. *Santarpana*-induced diseases).
- PRAMEHA EVAM KUSHTRUPI HETU²⁸ - Frequent and excessive intake of: Newly harvested grains like *Hayanaka*, *Yavaka* (a variety of *Hordeum vulgare* Linn), *Chinaka*, *Uddalaka*, *Naishadha*, *Itkata*, *Mukundaka*, *Mahavrihi*, *Promodaka*, and *Sugandhaka*; Newly harvested pulses like *Harenu* (*Pisum sativum* Linn.) and *Masha* (*Phaseolus radiates* Linn.), consumed with ghee; The meat of domesticated, marshy and aquatic animals; Vegetables, *tila* (*Sesamum indicum* Linn.) oil, cakes of *tila*, pastries, *Payasa* (milk-based pudding), *Krisara* (gruel prepared of *Tila*, rice, and black gram), *Vilepi* (a type of thick gruel), and sugarcane-based food preparations; Milk, new wine, immature curd (curd which is mostly liquid and sweet); Various dietary regimen that produces excess kapha, fat, and urine; Lifestyle related activities, including Avoidance of physical exercise; and Excessive sleep, bed rest and sedentary habits;
- Current Age practices (other cause)

- Intake of Cold water in morning especially in the *Kapha Pradhāna Kāla*
- Sedentary lifestyles while exposing to cold wind from the AC
- Extended night life
- Drinking water based on quantity and not upon natural urge
- Activities related to *Tāmasa* and *Rājasa Bhāva*, causing great variations to the expected state of *Dhātu Samatā*
- Eating foods like Pizza, Burger, Sandwich, Mayonnaise cheese, Hamburgers, Hotdogs and other Maida related products which have long digesting period leading to *Apakva Rasa*, in other form - *Kleda* formation.
- Dependency on machines over Human efforts in everyday household activities where *Sweda* generation is less and *Kleda* accumulation is more.

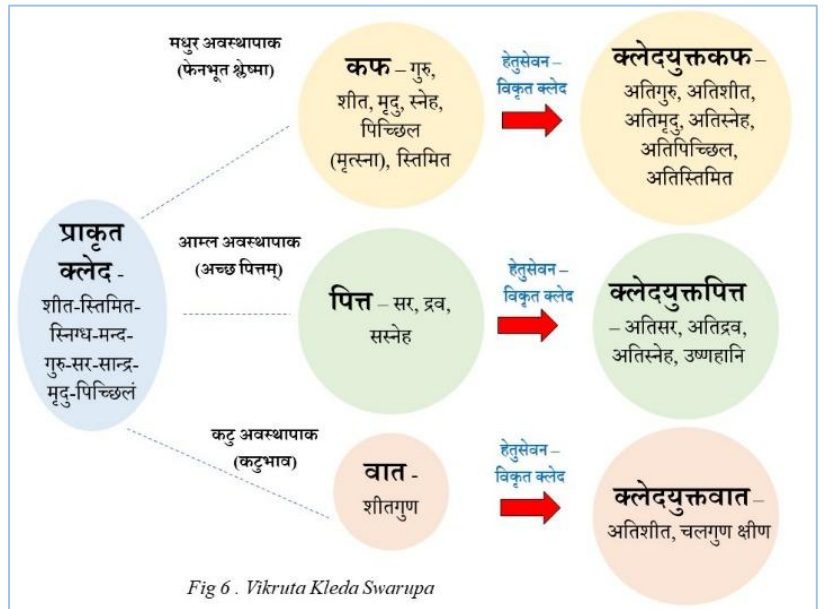


Fig 6. Vikruta Kleda Swarupa

B. SWAROOPA

When *Kleda* combines with *Vāta*, produces *Ama*. With *Pitta*, *Ushna Guṇa* rises with *Dravatva*. And with *Kapha*, due to *Shīta*, there is *Anubandha*. Hence even the minutest changes in relation to *Kleda* occur in *Paramānu Swarūpa*²⁹ (just like *Paramānu Swarūpa* of *Dosha* and *Dhātu*).

Given the *Utpatti Sthāna* of *Kleda* is *Koshtha* (especially the *Annavaha srotas*), physiology may be impaired during the *Avasthāpāka* due to practice of one or more *Hetu* mentioned. *Kleda* takes the form of *Phenabhūta Kapha*, *Accha Pitta* and *Katu Bhāva* during each *Avasthāpāka* to nourish *Kapha*, *Pitta* and *Vāta Dosha* in the *Sharīra* respectively. The ideal *Kledatā* to be formed in each *Avasthāpāka* would differ significantly depending on the aetiology, changing the *Prākṛta Guṇa* of *Dosha*. The modified physiologies of *Dhātu* and *Dhātu Mala* formation also exhibit this [Table 1]. In *Avasthāpāka*, once *Kleda* is changed, there is no returning back. Every subsequent physiology is reliant on the quality of *Avasthāpāka*. For example, the quality of *Dhātu* and *Dhātu Mala* creation determines how *Avasthāpāka* is established. *Dhātu* may therefore be associated with either *Kleda Kshaya* state or *Kleda Vrddhi*

<i>Kleda Vrddhi</i>	<i>Guṇa</i>	<i>Kleda Kshaya</i>
<i>Ati – Shīta</i>	<i>Shīta</i>	<i>Shīta Kshaya</i>
<i>Ati – Stimīta</i>	<i>Stimīta</i>	<i>Stimīta Kshaya</i>
<i>Ati – Guru</i>	<i>Guru</i>	<i>Guru Kshaya</i>
<i>Ati – Sāndra</i>	<i>Sāndra</i>	<i>Sāndra Kshaya</i>
<i>Ati – Drava</i>	<i>Drava</i>	<i>Drava Kshaya</i>
<i>Ati – Sara</i>	<i>Sara</i>	<i>Sara Kshaya</i>
<i>Ati – Snigdha</i>	<i>Snigdha</i>	<i>Snigdha Kshaya</i>
<i>Ati – Manda</i>	<i>Manda</i>	<i>Manda Kshaya</i>
<i>Ati – Mrudu</i>	<i>Mrudu</i>	<i>Mrudu Kshaya</i>
<i>Ati – Picchīla</i>	<i>Picchīla</i>	<i>Picchīla Kshaya</i>

Table 1: *Kleda Vrddhi* & *Kleda Kshaya* as per the *Guṇa*

state. The 'Gati' i.e., development, and physiology of a subsequent *Dhātu* can be modified by preceding *Dhātu*. *Dushti* of *Samānavāta* greatly imbalances the natural state of *Kleda*, as this *Vāta* is the controller of *Ambuvaha Srotas*. This *Samānavāta* always works in combination with *Jātharāgni*. Therefore, *Dushti* of *Samānavāta* alongside *Agni Dushti* imbalances *Kleda*. In turn *Dushti* of *Kleda* causes *Dushti* of *Samānavāta* alongside *Agni Dushti*. Hence a mutual relation is established among the three components. This mutual imbalance makes the pathology of *Kleda Pradhāna Vyādhi* more complex deranging the physiology of almost every *Srotas*.

Kleda Vriddhi [Fig 7] also called *Atikleda Avasthā* causes diminution of *Agni*³⁰ and hence gives rise to ill formation of *Dhātu* (*Asmayak Ahāra Pāka + Asamyak Dhātu Pāka*). While *Kleda Kshaya* [Fig 8] also causes diminution of *Agni* in such a way that there is no fuel for *Agni* to digest, this eventually causes *Vāta Prakopa* and 80 *Vātaja Nānātmaja Vyādhi*. Both *Kleda Vriddhi* and *Kleda Kshaya* (दोषसंशोषणः शरीरक्लेदसंशोषणः)³¹ can be assessed as Acute and Chronic stages. Here, Acute stage of *Kleda Vriddhi* causes *Agni Dushti*, Chronic stage of *Kleda Vriddhi* causes *Mandāgni*. Acute stage of *Kleda Kshaya* increases *Agni* (due to sudden increase in *Rūksha Bhāva*) while Chronic stage of *Kleda Kshaya* causes *Mandāgni*. *Agni* being the modulator of all bodily components, also modifies *Kleda Swarūpa* when specific *Hetu* is/are practiced continuously.

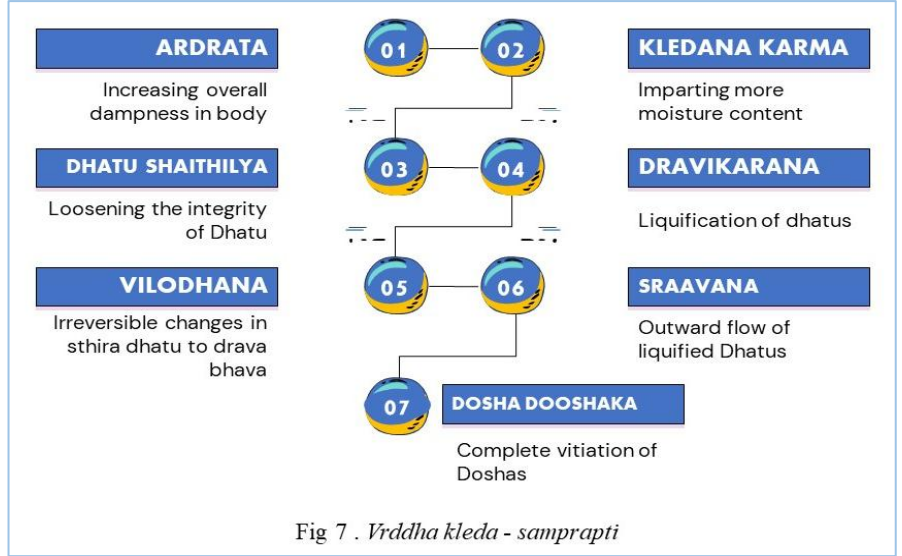


Fig 7 . Vriddha kleda - samprapti

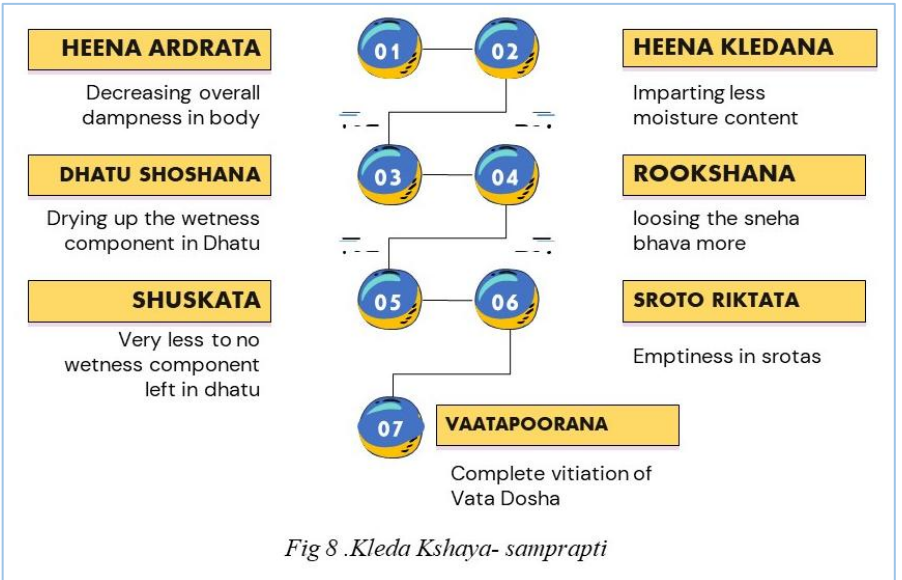


Fig 8 .Kleda Kshaya- samprapti

C. VYADHI

Sl no	Guṇa	Kleda Vriddhi	Vyadhi
1.	Shīta	Ati - Shīta	Āma vraṇa
2.	Stimīta	Ati - Stimīta	Kaphaja Shotha
3.	Guru	Ati - Guru	Kaphaja Vrana – Srāva
4.	Sāndra	Ati - Sāndra	Māmsadhātu pradoshaja Vikāra / Granthi
5.	Drava	Ati - Drava	Atīsāra
6.	Sara	Ati - Sara	Visarpa
7.	Snigdha	Ati - Snigdha	Medodhātu pradoshaja Vikāra / Prameha
8.	Manda	Ati - Manda	AmāAjīrṇa / Ama Vāta
9.	Mrudu	Ati - Mrudu	Pittaja Kushta
10.	Picchila	Ati - Picchila	Kaphaja Yonivyapat

Table 2 : *Kleda Guna, Kleda Vriddhi and the Vyadhi resulting from it*

With practice of specific aetiologies, optimum *Kledatā* will not be produced in each *Avasthāpāka*, alters the *Prākṛta Guṇa* of *Dosha* and leads to *Kledapradhāna Vyādhi*. Few examples of the same are as below.



Kledayukta Kapha	Kledayukta Pitta	Kledayukta Vāta
<i>Prameha</i>	<i>Jwara</i>	<i>Amavāta</i>
<i>Sthoulya</i>	<i>Raktapitta</i>	<i>Pakshāghāta</i>
<i>Kushta</i>	<i>Visarpa</i>	<i>Urustambha</i>
<i>Shlīpada</i>	<i>Pidakā</i>	
<i>Udāvarta</i>	<i>Amlapitta</i>	
Kledayukta Rasa Dhātu	Kledayukta Medo Dhātu	Kledayukta Majjā Dhātu
<i>Prameha</i>	<i>Sthoulya</i>	<i>Shirah Shūla</i>
<i>Sthoulya</i>	<i>Prameha</i>	<i>Pakshāghāta</i>
PCOD	<i>Madhumeha</i>	<i>Krimija Shiroroga</i>
<i>Krimija Hrudroga</i>		
Kledayukta Purīsha	Kledayukta Mūtra	Kledayukta Sweda
<i>Pittaja Ajīrna</i>	<i>Jwara</i>	<i>Kushtha</i>
<i>Pittaja Gulma</i>	<i>Amavāta</i>	<i>Vātarakta</i>
<i>Pittaja Pittaja Grahaṇī</i>	<i>Prameha</i>	<i>Pidakā</i>
<i>Atīsāra</i>	<i>Madhumeha</i>	

Table 3: *Kledapradhāna Vyādhi* according to its *Dushya* association

It can also be analysed according to *Sthānasamshraya*.

Amāshayagata Kleda	Bastigata Kleda	Rasagata Kleda	Pakvāshaya gata Kleda	Rasa-Rakta gata Kleda	Koshtha āshrita Kleda
<i>Chardi Anāha</i>	<i>Prameha</i>	<i>Amavāta Jwara</i>	<i>Atīsāra</i>	<i>Pāndu</i>	<i>Udara</i>

Table 4: *Kledapradhāna Vyādhi* according to its *Sthānasamshraya*

The *Kleda* paradigm can be effectively applied to comprehend disorders detected by modern science as well. As a result, Ayurveda diagnosis and treatment become more accurate.

Amāshayagata Kleda	Bastigata Kleda	Rasagata Kleda	Pakvāshaya gata Kleda	Majja gata Kleda	Rakta gata Kleda
1. GERD (Acid reflux) 2. Zollinger Ellison Syndrome (excess Gastrin hormone secretion leading to increased secretions of Stomach acid) → <i>Kledayukta Pitta</i>	Protenuria Hypernatraemia Hyperkaelaemia Hypercalcaemia UTI Cystitis → <i>Kledayukta Mutra</i>	Hyper-tension Hyper thyroidism	IBS → <i>Kledayukta Purīsha</i>	Gullian Barre syndrome	Capillary leak syndrome

Table 5: *Kledapradhāna Vyādhi* according to its *Sthānasamshraya* and correlative modern diagnosis

KLEDA DUSHTI ³²

[Table 6]

KLEDA VISHESHATA

Kleda can be understood as *Sharīrika Dhātu*, *Dosha*, *Mala* and also as *Vyādhi Ghataka*.

CHIKITSA

The above-mentioned detailed understanding of *Kleda* must be taken into consideration when designing the *Chikitsā* principle. It would require the treatment modalities to be categorized.

A. BASED ON HETU

- i. *Santarpanajanya hetu* ii. *Apatarpanajanya Hetu*

B. BASED ON DOSHA

- i. *Kledayukta Vata* ii. *Kledayukta Pitta* iii. *Kledayukta Kapha*

Ways in which <i>Kleda</i> causes <i>Srotodushti</i>	<i>Vyadhi</i>
<i>Sanga</i> of <i>Kleda</i>	<i>Udara Vyadhi</i>
<i>Gatishīla</i> / <i>Sarpaṇa</i> of <i>Kleda</i>	<i>Visarpa</i>
<i>Atipravritti</i> by <i>Sarpaṇa</i> of <i>Kleda</i>	<i>Atīsāra</i> , <i>Chardi</i>
<i>Atipravritti</i> followed by <i>Vimārgagamana</i> of <i>Kleda</i>	<i>Raktapitta</i>
<i>Gati</i> followed by <i>Sanga</i> of <i>Kleda</i>	<i>Kushta</i>
<i>Sanga</i> followed by <i>Vimārgagamana</i> of <i>Kleda</i>	<i>Udara</i>
<i>Sanga</i> followed by <i>Atipravritti</i>	<i>Grahani</i>

Table 6: *Kleda* related *Srotodushti* & *Vyadhi* as examples



C. BASED ON AHARA RASA

Usage of optimum amounts of *Madhura*, *Lavana* and *Amla Rasa*, eases the excretion of *Kleda* in optimum amounts through flatus, urine and stool, as these Rasa have *Snigdha Bhāva*³³. While continuous practice of *Katu*, *Tikta*, *Kashaya Rasa*, causes difficulty for excretion of *Kleda* in optimum amounts through flatus, urine and stool, as these Rasa have *Rūksha Bhāva* which is not in lines with *Guṇa* of *Apya Dravyas*. This principle is better utilized in treatment of *Kleda Pradhāna Vyadhi* and also *Heena Kleda Janita Vyadhi* (80 *Vātaja Nānātmaja Vyādhi*).

Kleda Pradhāna Vyadhi will have excess *Kleda*, hence those *Rasas* which have *Ruksha Guṇa* are to be prescribed.

- i. *Katu rasa – Kleda Upahanana*
- ii. *Tikta rasa – Kleda upashoshana*
- iii. *Lavana Rasa – Kleda Chedana*
- iv. *Kashaya Rasa – Kleda-Medo Vishoshana*

Based on above principles one must carefully prescribe medicines which are of *Katu*, *Tikta*, *Kashaya* tastes especially when there is *Atikleda Avasthā* causing *Mandāgni*, as they act as the best *Pāchana* and *Dīpana Dravyas*.

Vātaja Nānātmaja Vyādhi will have decreased amounts of *Kleda*, hindering the natural passage of *Apāna* related *Vega*. Here, those *Rasas* which have *Snigdha Bhāva* are to be prescribed, such that increase in the amounts of *Kleda* can be achieved naturally. This is applied in '*Kevalam Nirupasthambam Adau Snehaihi Upacharet*', the *Chikitsa* principle of *Kevala Vata Janya Roga*.

D. BASED ON VYADHI AVASTHA

- Where there is *Atikleda Avasthā* causing *Mandāgni*, *Dīpana* is needed.
 1. *Jwara* – To cause *Sweda Prādurbhāva*, where *Sweda* is one exit way of *Kleda*,
 2. *Raktapitta* – To limit *Pitta* from succumbing into aggravated *Drava* State
 3. *Udara* – *Shoshana* and *Bhedana Dravya* to reduce stagnation of *Kleda* in *Koshtha* and redirect towards *Mūtra*, by regularizing / redirecting *Kleda*.
 4. *Mūtrakrcchra* – *Mūtrala Dravya*, to induce *Mūtra*, by imparting *Kledatā*
 5. *Atisāra* – to dry up the Excess *Kleda* and to cause *Dīpana* of *Agni* such that *Kleda* is properly digested.
 6. *Vātavyādhi*³⁴ – to refill the *Srotas* by *Sneha Amsha* (*Kleda Amsha*), *Sneha* through all forms – *Abhyāsa Santarpana* – *Grāmya*, *Anūpa*, *Oudaka Māmsa*; *Pravichāraṇa Snehapāna* – *Pāyasa*, *Krushara* along with *Sneha*; *Tarpana Anna*, *Accha Snehapāna*, *Nāvana*, *Sneha Basti* is administered well in accordance with level of *Kleda Dushti*.
- Where decreased *Kleda* in the *Sharīra*, causes *AgniVrddhi* - Ex. *Hīna Pitta*, *Vrddha Shleshma* coupled with *Vrddha Vāta*³⁵. Here, *Chikitsa* principle should be to increase *Sneha Amsha*
- In chronic phase of decreased *Kleda* state, *Agni* becomes *Manda*. Ex. *Ojo Kshaya*³⁶

Conclusion

Vikruta Kleda Samprāpti when best understood, aids for pin point diagnosis and enhances the accuracy in treatment. *Agni* is vital for every human for his living. Hence *Kleda* also to be evaluated from the perspective of *Jatharāgni*. Once is evaluated at three levels namely – *Abhyavaharana*, *Jarana*, *Mala-Mutra pravrtti*, the optimal functioning of *Samana Vāta* and *Vyāna Vāta* has to be investigated. When these are deranged, they point directly at imbalance of *Kleda* as they have potential to directly influence the formation and conduction of *Kleda*. This direct involvement is crucial for identifying *Vikruta state* of *Kleda* in the *Sharira* and hence the *Samprāpti* of *Vyādhi* involving *Vikruta Kleda*. This is stage of *Kleda Prakopa*, which is to be categorized as conditions manifested by *Kleda Vrddhi* or *Kleda Kshaya*. One need to identify the key areas of *Sthanasamshraya* of this *Vikruta Kleda*, being associated with *Sama* or *Niram Avastha of Dosha*, to finally make the diagnosis.

Once the diagnosis is clear, physician must proceed for *Chikitsa*. Identify whether there is *Kleda vrddhi* or *Kleda Kshaya* state. If there is *Kleda Kshaya*, then *Snehamsha Vrddhi* has to be done by *Tarpana* line of treatment. This may include, *Drava-Snehayukta-Ushna-Guru Ahara*. When there is *Kleda Vrddhi*, *Langhana*, *Pachana*, *Shodhana* has to be performed, followed by *Shamana Aushadhi*. This *Shamana* line of treatment includes both *Anna* and *Aushadha*.

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