ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 12| Issue: 4| April 2026|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2026: 8.753 || ISI Value: 1.188

AUSHADH SEVANA KALA: A CONCEPTUAL REVIEW

VD. Bhagyashri Wani[1], VD. Sanjay Satpute[2], VD. Ganesh Puradkar[3], VD. Shivani Swami[4]

[1]Final Year PG Scholar, [2]Professor, [3]HOD & Professor, [4]BAMS
Dept. of Ayurved Samhita and Siddhant
[1]Department of Ayurved Samhita and Siddhant
[1]AVPM Ayurved Mahavidyalaya, Sion, Mumbai, India.

ABSTRACT

In Ayurveda, the concept of Trisutra holds importance in patient, encompassing Hetu, Linga, and Aushadh. Acharya Charaka emphasized that successful treatment depends upon the appropriate consideration of Desha, Kala, Pramana, Satmya, Asatmya, Pathya and Apathya. Ayurveda being science of life, gives emphasis on the concept of Kala. Aushadhi Sevana Kala refers mainly to oral administration, where medicines are placed on the tongue and followed by an Anupana, initiating action immediately. Except for Asava and Arishta, other forms such as Guti, Vati, Parpati, Churna, Kwatha act only after digestion. Aushadh Sevan Kala plays a crucial role in optimizing food–drug interactions, thereby helping achieve faster and more sustained relief for the patient. Kala is a significant factor that should always be considered during treatment. Our Acharyas have described the interrelationship between Kala and Dosha as an essential aspect in disease management.

KEYWORDS: *Aushadhi Sevana Kala, Asatmya, Anupana. Trisutra*

INTRODUCTION

Kala is a distinct and fundamental factor responsible for all types of effects, and at the same time, it cannot be avoided. Therefore, as a science of life, Ayurveda places great importance on the concept of Kala. Kala is placed second, highlighting its crucial role in therapeutic planning. Kala is categorized as Niyat or Nityaga and Aniyat or Awasthik Kala. Aushadhi Sevana Kala is taken into consideration under Awasthik Kala. It is considered as:

1.Shad Aveksha Kala
2.Bheshaj Kala
Shad Aveksha Kala are observed as:
1)Dina(day)
2)Rogi(patient)
3)Aushadha(medicine)
4)Vyadhi(disease)
5)Jeerna Lakshan
6)Ritu(seasons).

Bheshaj kala:-

Acharya	Enumeration
Charak,Sushrut, Ashtang Hriday	10
Ashtang Sangraha	11
Sharangdhar Samhita	5

Name of Aushadh Sevan Kala according to different Acharyas:

Charak	Sushrut	Ashtang Hridayam	Ashtang Sangraha	Sharangdhar
Abhakta	Abhakta	Ananna	Abhakta	Suryaodhya
Pragbhakta	Pragbhakta	Annadau	Pragbhakta	Divasabhojane
Adhobhakta	Adhobhakta	Ante	Adhobhakta	Sayante Bhojane
Madhyebhakta	Madhyebhakta	Madhyanna	Madhyabhakta	-
Antarabhakta	Antarabhakta	-	Antarabhakta	-
Sabhakta	Sabhakta	Saanna	Samabhakta	-
Samudga	Samudga	Saamudga	Saamudga	-
Muhurmuhu	Muhurmuhu	Muhurmuhu	Muhurmuhu	Muhurmu
Grasa Bhakta	Grasa	Grase	Sagraasa	-
Grasantara Bhakta	Grasantara Bhakta	Kawalantare	Grasantar	-
-	-	Nishi	Nishi	Nishi

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 12| Issue: 4| April 2026|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2026: 8.753 || ISI Value: 1.188

Indications of Aushadh sewan kala

SN	Aushadh Kala	Indications
1.	Abhakta	1. Diseased and disease with good strength. 2. Pancha Vidha Kashaya Kalpana: need strong Agni to digest them. 3. Lekhanartha and Utklishta Kapha Pitta. 4. Sukumara, Vriddha, Bala, Kapha Udreka Avastha Gata Kala. 5. Rasayanarth.
2.	Pragbhakta	1. Vitiated Apana Vaayu 2. Gudagata Vayu. 3. Vriddha, Bala, Bhiru 4. Krishanga (emaciated)or weak 5. Diseases of lower body 6. Obesity
3.	Madhyabhakta	1. Samana Vaya Vikruti 2. Koshtagat Vyadhis 3. Pittaja diseases 4. Mandagni
4.	Adhobhakta	1. Vitiated Vyana Vayu. 2. Vitiated Udana vayu
5.	Antarabhakta	1. Hridya, Deepak, Manobalakara 2.Vitiated Vyana Vayu
6.	Sabhakta	1. Aruchi 2.Bal, Stree, Vridha, Sukumara,Ksheena 3.Sarvangagata Vikaras
7.	Samudga	1. Hikka Roga 2. Kampa,Akshepa 3.Pravisruta , Urdhwa and Adha Visruta Dosha,
8.	Muhurmuhu	1. Shwasa, Kasa, Hikka, Twakvikara 2. Trishna, Chardi, Visha 3. Swarabhanga
9.	Grasa Bhakta & Grasantara Bhakta	1. Vitiated Prana Vayu Dushti 2. Vajeekarnarth 3. Agni Sandeepnartha.
10.	Nishi	Urdhwajatrugata Rogas

Abhakta Kala

Rasayana is optimally administered during Abhakta Kala to ensure maximum absorption and efficacy. In day time, all the Srotas are dilated and Heart is active similar to the lotus which blossoms with sunrise. The stomach and body channels are free from ahara dravya and obstructions, thereby maximizing potency and ensuring rapid therapeutic action. The Yakrit functions continuously in digestion and metabolism, but when the Amashaya is empty, its workload is reduced, hunger is less pronounced, and medicines aimed at enhancing hepatic function and Pitta secretion act directly without interference from ongoing digestion. The presence of food predominantly Parthiva element creates obstruction, thereby diminishing the potency of medicines. Akasha-Vayu predominant formulations found most effective at this time. In Kashyapa Samhita, A simile is given stating that just as a Balavan overpowers a Durbala in the same way Aushadhi over powers Vyadhi if given in this Kala.

Pragbhakta Kala

At this time, the patient does not experience weakness because of annasaṃsarga. This timing is particularly suitable in cases of Apana Vayu imbalance, in disorders associated with the lower limbs, and when the therapeutic goal is weight reduction. At the time of medicine intake, the amashaya is empty, as the previously consumed food has already reached the grahaṇi. In this state, only Vata sancaraṇa occurs due to the empty stomach, and it is this Vata activity that propels food through the digestive process. When vitiated Apana Vayu moves in pratiloma gati, it carries the heat derived from malarupi dravyas. Therefore, medicine is advised before food intake to correct the direction of Apana Vayu.

Madhyabhakta Kala

Samana Vayu area of activity extends from Amashaya to the Pakvashaya. The formation and nourishment of the Tridoṣha occur within the domain of Samana Vayu. During the Madhura Avasthapaka Kapha is formed. In the Grahani, during the second stage of digestion, Pitta is produced. Finally, in the Pakvashaya, during the third stage of digestion, Vata is generated. Therefore, to act upon the Doṣa, administration of medicine during Samana Kala is needed. Besides urine, stool and sweat, Samana Kala medication also helps regulate Kha Mala, useful in conditions like absent sweating, excessive sweating, or foul-smelling sweat. Reproductive tissues (Shukra and Artava) depend on proper digestion and metabolism. Disturbances in Shukra Dhatvagni are linked to sperm abnormalities, reduced motility, necrospermia, poor follicle development, and PCOD. Strengthening Shukra Dhatvagni with suitable formulations during Samana Kala supports

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 12| Issue: 4| April 2026|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2026: 8.753 || ISI Value: 1.188

healthy reproduction.For disorders of the Ambuvaha Srotas, such as those caused by undigested food, dryness, excess water intake, or stress, medicines given at Samana Kala are effective. Disorders such as atisara and grahaṇi arise due to antra daurbalya. When the food reaches the functional domain of samana vayu, during process of munchti karma, medicine reduce the excess dravansha of the ingested food and increase strength of intestine and agni. Acharya Sharangadhara mentions it under Divasa Bhojane Acharya Sushruta says that because of Avisaari Bhaava of Aushadha, it acts on Madhya Deha Rogas. Even Acharya Kashyapa mentions that because of Avarodha of Aushadhi by food, it acts in Antaraashaya Rogas.

Adhobhakta Kal

Adhobhakta Kala refers to the administration of medicine immediately after food intake. When given after the morning meal, it is indicated in conditions involving Vyana Vata vitiation.When administered after the evening meal, it is prescribed for conditions involving Udan Vata vitiation.Panchbhautik Saṅghaṭan of Vyana Vayu is described as being primarily composed of Vayu and Akash. main quality of Akasha is Apratighatatva—If the space in the heart is blocked, then Vyana Vayu cannot work properly. Vyana Vayu lives in the heart. Two major qualities of Vyana Vayu are Kritsna-deha-charah and Shighra-tara-gatih. Medicine quickly spreads throughout the body and performs its action. Medicines recommended during Vyana Kala in systemic diseases. The tissue most responsible for contraction and relaxation in the body is Mamsa Dhatu. For the proper function of contraction and relaxation, medicines must be planned during Vyana Kala. For example, sudden psychological trauma can disturb Vyana Vayu, leading to rapid heartbeat. Because the contraction-relaxation cycle of the cardiac muscle disturbs due to Vyana Dushti. Another function of Vyana Vayu is Utkṣepana–Avakṣepana. In clinical practice, we often see displacement of organs or tissues from their natural position, leading to conditions such as herniation, joint dislocation, prolapse of the anus or uterus, or intervertebral disc prolapse. The local muscle tissue becomes weak. Important function of Vyana Vayu is Unmesha–Nimesha. Disorders such as Krichronmila, Nimesha, and Vata-ahata are primarily linked to disturbed Vyana Vayu. Jṛmbha is linked to Vyana Vayu. When it appears as a symptom in conditions like Ama and Jvara , medicines should be given during Vyana Kala.Increase of Pṛthvi and Apa Mahabhuta leads to blockage, and therefore substances dominated by Agni, Vayu, and Akasha should be administered during Vyana Kala. Vyana Vayu governs sweating (sveda) and circulation of blood (asṛk sanchara). Thus, anorexia, yawning, impaired sweating, and blocked channels—all functions of Vyana Vayu—are disturbed in Jvara, Here, Tikta rasa medicines administered during Vyana Kala. “yonau ca shukra pratipadanam” denotes deposition of semen in the female reproductive tract. In infertility (vandhyatva), where ovum and uterus are normal but conception fails, medicines given during Vyana Kala aid in proper retention of semen. In males, pathological increase of Tejas Mahabhuta may lead to shukralpata. In such cases, semen-enhancing and nutritive substances administered during Vyana Kala help restore balance and promote fertility. “vibhajya c annasya” refers to the division of ingested food into sara and kitta, and the sequential nourishment of dhatu. Although primarily attributed to Samana Vayu, Vyana Vayu helps in srotomukha vishodhana. In disorders like atisara and grahaṇi, this is impaired. Medicine taken in Vyana Kala (the second prahara, a Pitta-dominant period) is considered most effective because the ushna and Tikshna qualities of Pitta are heightened at this time. These qualities influence the movement of Vata & medicines act quickly on the seven dhatus, especially on Rasa and Rakta dhatu.

The evening meal, usually around 7–8 PM, falls in a Vata-dominant period. Just after eating, madhura avasthapaka occurs, which increases Kapha. Here, ushna and Tikshna medicines are preferred, as they act on Udana Vayu, reduce Kapha, and balance Vata. The time that promotes the growth and strength of muscle tissue is Udana Kala. Hence,appropriate Mamsa Rasayana should be given during Udana Kala.When the tamadi guna of the Prithvi increase, they may lead to manovasad (depression). In Unmada (psychosis), when the mind is obscured by Tamas, therapy at Udana Kala works. Age-related memory decline (Smṛty-alpata) is a condition of senescence. Old age is characterized by predominance of Vata doṣa. From the Panchbhautik perspective, both Dhi & Dhriti are functions governed by the Pṛthvi Mahabhuta within the Manovaha Srotas. In senescence, the qualities of Pṛthvi, Apa, and Tejas decline. In such cases, medicines with ushna and tikshna properties that act on the mind should be administered during Udana Kala. Priṇana (nourishment) is the primary function of Rasa Dhatu. When Rasa Dhatu is depleted, clinical signs such as dryness and roughness of the skin become evident. Among the manifestations of Rasa-kṣaya, Piṇḍiko-dveṣṭana is described, which is linked to Maṃsa Dhatu. Similarly, dehydration of any etiology may lead to Hypotension, a clinical feature associated with the Raktavaha Srotas. Thus, Rasa, Rakta, and Mansa Dhatu function interdependently, and share a close relationship with Udana Vayu. Accordingly, Bala, Varṇa and Priṇana are all governed by Udana Vayu. Sayam Bhojana Anta Kaala is mentioned by Shaarangadhara under Sayam Bhojane.

Antarabhakta

Antarabhakta Kala denotes the therapeutic window for drug administration after complete digestion of the morning meal. Once the administered medicine has itself been digested, the evening meal should be taken. This regimen is specifically indicated in therapies aimed at agnidipana karma and in disorders of vyana vayu vikriti.

Sabhakta

This method is particularly preferred in individuals with sukumara,bala, sarvanga-vyadhi, and in cases of aruci. According To Shaarangadhara Samhita,it is metioned as Mishra, under Divasa Bhojane.

Samudga

This regimen is recommended in conditions such as kampa, akṣepa , hikka, and urdhva–adhah sharirashrit vyadhi. In these cases, formulations that promote pachana such as avaleha and churna are preferred, along dipanadi anapayakara dravya. Sharangadhara Samhita mentions it as Purvam Ante under Divasa Bhojana.

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 12| Issue: 4| April 2026|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2026: 8.753 || ISI Value: 1.188

Muhurmuhu

Muhur-muhu Bheshaja Sevan Kala refers to the schedule of repeated administration of medicine at short intervals, irrespective of food intake. This regimen is preferred in acute and distressing conditions such as swasa, kasa, hikka, tṛuṣhṇa, chardi, and poisoning-related disorders (viṣhaj vyadhi). The primary action is directed towards Praṇa Vayu and Udana Vayu.

Sagrasa & Grasantar Bheshaja sevan

Primarily indicated in disorders of Prana Vayu. Formulations with Agnidipana and Vajikara properties, ensuring continuous assimilation of the drug during the act of eating. It can be said that absorption is facilitated from the buccal mucosa and reaches systemic circulation and thus leads to rapid onset of action. Grasantar bheshaj sevan regimen is also indicated in disorders of Prana Vayu .Vamana and Dhumpana may be employed during this period, particularly in conditions like Hṛidroga. Both kalas mentioned by Sharangadhara under Saayam Bhojane. Due to udan vayu vikruti,swarabhanga occurs, medicine given in this kala.

Nishi kala/Swapna kala

This is particularly indicated in disorders of the Urdhwajatrugata Vikara. After the digestion of the evening meal, medicines are prescribed. Diseases associated with Mana-buddhi-mastishka should be given medicine at swapna kala. If increased vikrut gunas of tej-vayu mahabhoot cause manovaichityadi lakshana,then Pruthvi-Aap mahabhoot Pradhan medicines should be preferred at swapnakal.

DISCUSSION

The concept of Aushadha Sevana Kala represents a fundamental principle in Ayurvedic therapeutics, emphasizing that the timing of drug administration significantly influences treatment outcomes. Different timings of administration are associated with specific therapeutic actions. Abhakta Kala facilitates optimal absorption due to the absence of food, whereas Pragbhakta Kala is beneficial in disorders of Apana Vata. Madhyabhakta Kala plays a role in gastrointestinal conditions by acting on Samana Vata, while Adhobhakta Kala ensures systemic distribution of the drug, particularly in Vyana and Udana Vata disorders. The concept of Muhurmuhu Kala reflects the need for repeated drug administration in acute conditions. These observations suggest that Ayurveda incorporates principles of drug–food interaction, targeted drug delivery, and physiological timing.

CONCLUSION

Aushadha Sevana Kala is a critical determinant of therapeutic success in Ayurveda. Propertiming of drug administration enhances drug absorption, efficacy, and safety, while inappropriate timing may compromise treatment outcomes. The classical concept correlates with biological rhythms and Dosha variations, highlighting a time-dependent approach to therapy.This principle aligns with the modern concept of chronotherapy, emphasizing the influence of timing on drug action. Therefore, the rational application of Aushadha Sevana Kala is essential for effective disease management and offers a valuable framework for integrating Ayurvedic wisdom with contemporary medical practices.

REFERENCES

1. *Sushruta, Sushruta samhita, uttar tantra, swasthopkrama adhyaya, 64/65. Acharya JT, editor. Reprint 1st edition. Chaukhmbha surbharati prakashana, Varanasi, 2003; 813.*
2. *Sharma.R.K, Dash. B (editor), Charaka Samhita, Vimana sthana, chapter 1, verse no.6, Varanasi: Chowkamba Sanskrit Series; Reprint 2008*
3. *Nistha Nema, Praveen Kumar Mishra. A Conceptual Review of Aushadha Sevana Kala in Ayurveda Siddhanta*
4. *Chakrapanidatta. In: Commentator, Charak Samhita, Chikitsa Sthana, Yonivyapat Chikitsa Adhyaya, 30/298. 8th edition. Pandey GS, editor. Varanasi: Chaukambha Sanskrit Samstana; 2004*
5. *Sharangdhar Acharya, Sharangdhar Samhita, Pratham Khand, Dwitiya Adhyaya Pt. Parasurama Sastri, Chaukhamba Orientalia, Varanasi, 7th Edition, 2008; Shlok no,2-12: 18.*
6. *Anantram Sharma, Sushruta samhita-Hindi commentary, Uttartantra, Swasthopakrama Adhyay., Chaukhambha Surbharti prakashan; Varanasi, 1st Edition 2013; Uttartantra, 64-65: 813*
7. *Sharangdhar Acharya, Sharangdhar Samhita, Pratham Khand, Dwitiya Adhyaya by Dr Bhramanand Tripathi, Chaukhamba shurbharti Prakashan, Varanasi, 7th Edition, 2008; Shlok no, 3-4 page no 23.*
8. *Sharma H, Shrinivas S. A critical review on Aushadh Sevan Kala and its importance. J Ayurveda Integr Med Sci. 2022;7(6):179–187.*
9. *Meti M, Chetan M. Critical review on Abhakta Kala for Rasayana Prayoga. World J Pharm Pharm Sci. 2022;11(6):179–187.*
10. *10.Vriddha jivaka. Kashyapa Samhita with Vidhyodhinicommentary:Srisatyapala Bhishagacharya(Ed).Bhaishajopakramaneeya adhyaya. ChaukambhaSanskrit Samsthan: Varanasi, 2006.*
11. *Mali S. Panchbhautik Atmasamvad. Part 1. 2nd ed. : Spiriton Publications; 2018. p. 203.*