

## IMPORTANCE OF ASHTASTHANA PARIKSHA IN DIAGNOSIS OF DISEASE

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### ABSTRACT

According to *Ayurveda*, health is defined as the balanced state of *Dosha*, *Agni*, *Dhatu*, and *Mala*, along with the proper functioning of *Atma*, *Indriya*, and *Mana* as described in *Sushruta Samhita*. Diagnosis plays a key role in restoring this balance and planning proper treatment as per condition of the patient. *Ayurveda* describes several methods of *Rogi Pariksha* such as *Trividha Pariksha*, *Shadvidha Pariksha*, *Ashtavidha Pariksha*, and *Dashavidha Pariksha*. Among these, *Ashtavidha Pariksha* explained in *Yogaratanakara* is considered one of the most contemporary methods of clinical examination. It evaluates eight parameters—*Nadi*, *Mutra*, *Mala*, *Jihwa*, *Shabda*, *Sparsha*, *Drik*, and *Akruti*—which help in understanding the present condition of the patient. These observations provide valuable information regarding disease status and support accurate diagnosis and treatment planning. Many aspects of this examination also correlate with modern diagnostic methods such as pulse examination, urine examination, stool examination and other parameters of general examination. Therefore, *Ashtasthana Pariksha* holds significant importance as a primary method for disease diagnosis.

**KEYWORDS:** *Pariksha*, *Ashtasthana Pariksha*, *Nadi*, *Mala*, *Mutra*, *Jihwa*.

### INTRODUCTION

Clinical examination of patient is one of the most crucial steps for accurate diagnosis of disease. Its importance is mentioned by our *Acharya* stating that the physician must examine the patient thoroughly before deciding the treatment. As per *Acharya Charak*, *Aatura Pariksha* is important for assessing *Ayush Pramana* and *Bala Dosha Pramana* of patient. The classical texts describe various methods of examination among which *Ashtasthana Pariksha* (eight-fold examination) is an important diagnostic tool for assessment of *Dosha Pramana* in *Aatura*. It was explained mainly by *Acharya Yogratnakara* for assessing the condition of the patient and identifying the disease. It includes examination of following parameters:-

1. *Nadi Pariksha*(pulse examination)
2. *Mutra Pariksha* (urine examination)
3. *Mala Pariksha* (stool examination)
4. *Jihwa Pariksha* (tongue examination)
5. *Shabda Pariksha* (voice)
6. *Sparsha Pariksha* (touch)
7. *Drik Pariksha* (eyes examination)
8. *Akruti Pariksha* (body build)

## MATERIALS AND METHOD

The material for this review article has been collected from various Ayurvedic classical texts and literary text books. The conclusion is drawn on the basis of acquired knowledge.

### 1. NADI PARIKSHA

*Nadi Pariksha* is a useful tool to assess the status of *Dosha* in diseased as well as in healthy individuals. It is said that *Nadi* illustrates progression of all types of diseases, just as the strings of *Veena* can produced different *Ragas*.

According to *Acharya Sharangdhar*, *Nadi* is best felt at the wrist that signifies the life of the patient through which the physician is able to examine the condition of health of the patient. During examination, three fingers are placed in position over the *Nadi* which indicates condition of *Tridosha* and their *Gati* (i.e. *Manda*, *Madhyama* and *Tikshna*). The index finger denotes *Vata*, the middle finger *Pitta* and the ring finger *Kapha*. *Nadi Pariksha* offers knowledge about involvement of *Dosha* - *Vata*, *Pitta* and *Kapha*, *Dwandaja*, *Tridoshaja*.

### Relation between *Nadi* and *Dosha*

<i>Dosha</i>	<i>Nadi</i>
<i>Vataja Nadi</i>	<i>Sarpa</i> and <i>Jalauka</i>
<i>Pittaja Nadi</i>	<i>Manduka</i> , <i>Kaka</i>
<i>Kaphaja Nadi</i>	<i>Hansa</i> , <i>Paravat</i>
<i>Vata-pittaja Nadi</i>	<i>Sarpa</i> , <i>Manduka</i>
<i>Vata -kaphaja Nadi</i>	<i>Sarpa</i> , <i>Hansa</i>
<i>Pitta -kaphaja Nadi</i>	<i>Manduka</i> and <i>Mayura</i>
<i>Sannipataja Nadi</i>	<i>Lava</i> and <i>Titira</i>

### Relation between *Nadi Gati* and various pathological conditions

Pathological condition	<i>Nadi Gati</i>
<i>Jwara</i>	<i>Ushna</i> (warm), <i>Vegavati</i> (quick)
<i>Kama</i> and <i>Krodha</i>	<i>Vegavati</i> (quick)
<i>Chinta</i> and <i>Bhaya</i>	<i>Kshina</i> (weak)
<i>Mandagni</i> and <i>Kshina Dhatu</i>	<i>Manda</i> (feeble and slow)
<i>Rakta Dosha</i>	<i>Ushna</i> (warm), <i>Gurvi</i> (heavy)
<i>Ama</i>	<i>Gambeera</i>
<i>Deeptagni</i>	<i>Laghu</i> (light), <i>Vegavati</i> (quick)
<i>Kshuda</i>	<i>Chapala</i> (unstable)
<i>Tripta</i>	<i>Sthira</i> (steady)

**Nadi Gati and Prognosis**

<b>Nadi Gati</b>	<b>Prognosis</b>
<i>Sthira and Vidyuta</i> like	Dies on 2 <sup>nd</sup> day
<i>Shigra and Sheetal</i>	May die on 2 <sup>nd</sup> day
<i>Tivra, Sheetal</i> with Sweda	Dies within 7 days
<i>Tivra Nadi</i> with <i>Daha</i> = coldness in body and dyspnoea	Dies in 15days
<i>Atyant Sukshma, Vegavati</i> and <i>Sheetal</i>	<i>Aayu Samapta</i> (about to die)
<i>Tiryaga, Ushna, Sarpavat</i> (snake like) and <i>Vegavatti</i>	<i>Nishchit Mrityu</i>

Assessment of pulse is done based on following parameter:-

**1. RATE-** pulse rate refers to number of pulsations per minute.

Normal range: 60-100 beats per minute

Bradycardia (>100bpm) includes condition like hypothyroidism, heart block, depression.

Tachycardia (<60bpm) may include fever, anxiety, exercise, hyperthyroidism.

**2. RHYTHM-** refers to the regularity of pulse beats

It may be of following types:-

- a. Regular rhythm
- b. Regularly irregular rhythm
- c. Irregularly irregular rhythm

The normal pulse waves succeed one another at regular intervals. The commonest irregularities detectable in pulse are found in case of ectopic beats, atrial fibrillation etc.

**3. VOLUME** – refers to the fullness of pulse wave felt under the fingers, denoting how well the arteries seem filled.

- a. Normal volume- pulse easily palpable
- b. Low volume pulse- shock, severe blood loss
- c. High volume pulse-fever, anxiety

**4. FORCE-** refers to the strength of pulsation felt against finger. It might give a rough idea about blood pressure.

- a. Weak force- shock, heart failure
- b. Normal force
- c. Bounding force- pregnancy, thyrotoxicosis

**5. CHARACTER-** describes the overall quality and waveform of the pulse

- a. Slow rising pulse(anacrotic pulse) - seen in aortic stenosis
- b. Pulsus alternans- seen in LVF
- c. Pulsus paradoxus- pericardial effusion
- d. Bisferiens pulse-aortic regurgitation + hypertrophic obstructive cardiomyopathy
- e. Dicrotic pulse- fever, low cardiac output state
- f. Bounding pulse – fever, anemia, hyperdynamic state
- g. Collapsing/ Waterhammer pulse – aortic regurgitation
- h. Irregularly irregular pulse- atrial fibrillation

## 2. MUTRA PARIKSHA

*Mutra Pariksha* is a key component of *Ashtashtana Pariksha* in *Ayurveda*, enabling non-invasive assessment of *Tridosha* status, disease progression and prognosis. Urine, as a waste product reflects the equilibrium of *Tridoshas*, *Dhatus* and *Agni*. Changes observed in normal traits of urine like *Varna*(color), *Gandha*(odour) and consistency arises from *Dosha-Dushya Sammucchana*

Appearance of urine involving related *Doshas*

<i>Dosha</i>	Urine color/appearance
<i>Vata</i>	<i>Pandu</i>
<i>Pitta</i>	<i>Phenayukta</i>
<i>Kapha</i>	<i>Rakta</i>
<i>Dwandaja</i>	<i>As per Dosha</i>
<i>Sannipataja</i>	<i>Krishna</i>

### *Tail Bindu Pariksha*

*Tail Bindu Pariksha*, a key technique from *Yogratnakara*, is applied by observing oil droplets behavior on urine to gauge doshic vitiation and prognosis. Here, one–two drops of *Tila Taila* is instilled into the vessel, where patient's urine is collected. Type of *Dosha* involved is assessed based on appearance of *Taila Bindu*.

<i>Dosha</i> involved	<i>Tail Bindu</i> appearance
<i>Vata</i>	Snake
<i>Pitta</i>	Umbrella
<i>Kapha</i>	Pearl

According to direction of spread of drop, one can assess the prognosis of disease.

Urine	Prognosis
If instilled oil spreads quickly over the surface of urine	<i>Saadhya</i>
If oil doesn't spread	<i>Kashtha-saadhya</i>
If oil sinks and touches the bottom of vessels	<i>Asaadhya</i>

Direction of urine drop spread	Prognosis
Towards east	Patient will get relief
Towards south	Will suffer from <i>Jwara</i> and gradually recover
Towards north	Will be cured
Towards west	Will attain <i>Sukha</i> and <i>Aarogya</i>
Towards <i>Esanya</i>	Will die within a month
<i>Agneya</i> or <i>Nairuti</i> direction or gets split	Bound to die
<i>Vayavya</i> direction	Will die anyway

## PHYSICAL EXAMINATION OF URINE

### 1. Volume

Polyuria(>2000ml/24hr)	Diabetes Mellitus, Diabetes Insipidus, CRF
Oligouria(<400ml/24hr)	Febrile state, CCF, dehydration, Acute Glomerulonephritis
Anuria(<100ml/24 hr)	Acute Glomerulonephritis, Complete Urinary Tract obstruction
600ml-2000ml/24 hr	normal

### 2. Color / appearance

Greenish yellow	Bile pigment
Red	Haemoglobin, myoglobin, certain drugs
Black	Melanin and homogentisic acid
Cloudy appearance/sedimentation	Epithelial cells, WBC, bacteria, fat
White foaming appearance	Proteinuria

### 3. Odor

Fruity or sweet	Ketoacidosis, starvation
Mousy or musty	Phenyl ketonuria
Fishy	UTI with proteus
Ammonical	UTI with E. coli, old standing urine
Sweaty feet	Isovaleric acidemia
Rancid	Tyrosinemia
Maple syrup or burnt sugar	Maple syrup urine disease

### 4. Specific gravity

Normal specific gravity is 1.003-1.030

Hypersthenuria	Hyposthenuria
Diabetes mellitus	Diabetes Insipidus
Nephritic syndrome, SIADH	CRF
Fever, Dehydration	Compulsive water drinking

### 3. MALA PARIKSHA

*Mala (Purisha)* is one of the major metabolic waste product of the body produced as *Kitta Bhaga* of *Ahara*. *Mala Pariksha* is an important diagnostic method, especially to rule out disease related to *Annavaha* and *Purishavaha Srotodushti*. In Ayurvedic texts, examination of stool is limited mainly up to the examination of physical characteristics such as color, quantity, odor, froth, and consistency.

Dosha	Characteristics of stool
Vata	Hard, dry, broken, froathy, smoky colour
Pitta	Yellowish in colour
Kapha	Whitish in colour
Vata-Kapha	Brownish in colour
Pitta-Vata	Binded or broken type, yellowish or yellowish blackish
Kapha-Pitta	Yellowish, whitish, sticky/slimy
Tridosha	Blackish, broken, compact and whitish

Disease	Mala Swaroopa
Jalodara	Whitish, bulky with foul smell
Kshaya	Shyama Varna
Amayukta Vyadhi	Yellowish associated with <i>Kati Shool</i>
Asadhya Vyadhi	Excessively foul smell, <i>Chadrikayukta Abha</i>

Besides these, a specialized technique of stool examination, i.e., *Jala Nimajjana Purisha Pariksha* has been described to detect the presence of *Ama* thereby inferring the status of *Agni* in the body. This is the only objective method which was used by *Acharya* to detect presence of *Ama* in stool. In this method, by observing the behavior of stool i.e. whether it sinks or floats in water is noted down. If stool sinks, it usually indicates the presence of *Ama* whereas if it floats, then this indicates that *Ama* is not involved.

Stool examination, also known as fecal examination, is a diagnostic test used to evaluate digestive health and identify various diseases. It includes physical, microscopic, and chemical assessment of stool. The physical examination observes color, consistency, odor, and the presence of mucus, blood or worms. Microscopic examination helps detect parasites such as ova and cysts, as well as red and white blood cells and undigested food particles. Chemical examination includes tests for pH, occult blood and fat content. Overall, stool examination is useful in diagnosing infections, gastrointestinal disorders, and conditions related to mal-absorption.

#### 4. JIHWA PARIKSHA

The tongue is considered a mirror of the gastrointestinal tract and various systemic conditions, as it reflects the state of *Dosha*, *Dhatu*s and specially the presence of *Ama*(toxins or undigested metabolic products).The normal papillae of the tongue give rise to furred appearance best seen in the posterior part. *Jihwa Pariksha* involves careful observation of the tongue to various features of tongue like color coating, texture, moisture and shape.

Disease	Tongue Features
<i>Vataja</i>	Cold, rough and cracked(brown or black)
<i>Pittaja</i>	Reddish and black
<i>Kaphaj</i>	Whitish and sticky
<i>Sannipataja</i>	Blackish, <i>Kantaka</i> (thorny) and dry
<i>Dwandaja</i>	Mixed signs and symptoms

Tongue feature	Disease associated
Pale, depapillated tongue	Anemia
Yellow	Jaundice, possible liver disorder
Blue	Cyanosis related to heart or lung diseases
Coated tongue	Poor oral hygiene, dehydration, fever/acute illness

#### 5. SHABDA PARIKSHA

*Shabda Pariksha*, as mentioned by *Yogratnakar* is assessment of the quality, tone, clarity and strength of speech or voice of the patient to understand internal state of *Dosha* inside the body. Following parameters can also be considered to examine under *Shabda Pariksha*:-

- Voice quality – clear/ hoarse/ weak/ broken
- Speech pattern – fast/ slow/ interrupted/slurred
- Respiratory sound - bronchovesicular sound/audible wheezes/ stridor/Rhonchi/pleural rub etc
- Heart sound - Normal S1-S2/murmurs
- Bowel sound - Normal/hyperactive/hypoactive/absent

Dosha	Swara
<i>Vata</i>	Dry, hoarse and broken
<i>Pitta</i>	<i>Sphuta</i> (clear), sharp
<i>Kapha</i>	<i>Guru</i> (heavy)

#### 6. SPARSHA PARIKSHA

*Sparsha Pariksha* is a key component of *Ashtasthana Pariksha*, involves tactile sensations to examine internal state of body tissues and organs. It helps in identifying variations in qualities like *Ushna* (heat), *Sheeta* (cold), *Snigdha*(unctuousness) and *Ruksha*(dryness), which are directly related to Doshic involvement.

Dosha	Sparsh(touch)
<i>Vata</i>	Cold and dry
<i>Pitta</i>	Hot and moist
<i>Kapha</i>	Cold and wet

In modern medicine, *Sparsha Pariksha* can be correlated to palpation and percussion. Various signs which can be assessed through *Sparsha Pariksha* includes:-

Palpation	Percussion
Lymph node enlargement, lump(hard/soft)	Shifting dullness
Localised swelling, Oedema(pitting/non pitting)	Fluid thrill
Tenderness, crepitus	Horse shoe dullness
Friction fremitus, tactile fremitus	Hyper-resonance(emphysema/pneumothorax)

## 7. DRIK PARIKSHA

*Drik Pariksha* is a simple yet powerful diagnostic tool in *Ayurveda* that provides valuable insights into both ocular and systemic health. By observing the color, luster, movement, and vision of the eyes, a physician can assess doshic imbalance and detect early signs of disease, making it an essential part of clinical examination.

*Vata* domination results sunken, dry and reddish-brownish colored eyes. Aggravation of *Pitta*, turn eyes red or yellow and the patient suffers from photophobia and burning sensations. Whereas *Kapha* makes them wet & watery with heaviness in the eyelids.

Doshaja Prakriti	Drik
<i>Vata</i>	<i>Dhumra</i> (smoky), <i>Aruna</i> (pink), <i>Ruksha</i> (dry), <i>Chanchala</i> (unsteady), <i>Antrapravishta</i> (sunken)
<i>Pitta</i>	<i>Haridra</i> (yellow), <i>Rakta</i> (red), <i>Malina</i> (dirty), <i>Deep-dweshha</i> (dislikes light), <i>Dahayukta</i> (burning)
<i>Kapha</i>	<i>Shweta</i> (whitish), <i>Snigdha</i> (greasy), <i>Kanduyukta</i> (itchy), <i>Pluta</i> (watery)
<i>Dwadaja</i>	Mixed <i>Lakshan</i> of involved <i>Dosha</i>
<i>Sannipataja</i>	<i>Rakta</i> (red), <i>Roudra</i> (horrifying),sunken and lustreless

Condition of eyes	Associated disease
Pale conjunctiva	Anemia
Yellow sclera	Jaundice
Sunken eyes	Dehydration
Redness of eyes	Conjunctivitis
Bulged eyes	Hyperthyroidism

## 8. AKRUTI PARIKSHA

*Akruti Pariksha* is an important component of *Ashtavidha Pariksha*. It refers to the inspection of the overall physical build, body structure and appearance of a patient to assess their health status and underlying *Dosha* predominance.

This mainly includes assessment of Body Mass Index(BMI), anthropometry, posture and gait.

Dosha	Akruti(Roopa)
<i>Vata</i>	<i>Vibhu</i> (thin/lean), <i>Ashukari</i> (quick in action), prone to many diseases, split hair and dry skin with <i>Dhusara Varna</i> (dusky complexion), dislikes cold, <i>Pralapa</i> (talkative), unstable <i>Dhriti</i> (courage), <i>Smriti</i> (memory), <i>Buddhi</i> (intellect), <i>Cheshta</i> (activities), etc
<i>Pitta</i>	Hungry and thirsty, fair in color, brave, <i>Swabhimani</i> (self-respecting), less hair
<i>Kapha</i>	<i>Saumya</i> (calm appearance), <i>Snigdha</i> (unctuous), well-built body and joints, tolerant to hunger, thirst, hardship, and heat.

Parameter	Observation	Associated condition
Body build	Lean/obese	Nutritional/metabolic status
Muscle bulk	Normal/muscle wasting/flaccid	Malnutrition/chronic illness
Deformity	Absent/present	Congenital/acquired disorders
Posture	Erect/stooped	Spine/neuromuscular disorders
Gait	Normal/ataxic/hemiplegic	Neurological/orthopedic condition

## DISCUSSION

The *Ashtasthana Pariksha*, as codified in the *Yogaratanakara* represents a sophisticated, eight-fold clinical gateway that allows a physician to look beyond surface symptoms to understand the root biological imbalances of a patient. It is not merely a checklist but a holistic diagnostic system that evaluates the *Tridosha* (*Vata*, *Pitta*, *Kapha*), the state of *Agni* (digestive fire), and the presence of *Ama* (metabolic toxins).

First part includes Functional and Metabolic Assessment, the physician evaluates *Nadi* (pulse), *Mutra* (urine), and *Mala* (stool) to gauge the body's internal rhythms and waste products. *Nadi Pariksha* compares the pulse to the strings of a *Veena*, using three fingers to detect *Vata* (*Sarpa*), *Pitta* (*Manduka*), and *Kapha* (*Hansa*) movements, which directly correlates to modern assessments of pulse rate, rhythm, and volume, such as identifying Tachycardia or Bradycardia. *Mutra Pariksha* involves observing color and consistency and utilizes the specialized *Taila Bindu Pariksha* (oil drop test) to determine disease prognosis, paralleling modern physical urine analysis for volume, odor, and specific gravity. *Mala Pariksha* acts as an objective method to rule out digestive disorders through the *Jala Nimajjana* test, where sinking stool indicates the presence of *Ama* (toxins), aligning with modern fecal examinations for parasites, pH and occult blood.

The second part includes Sensory and Physical Examination which utilizes the physician's senses to examine the remaining five parameters: *Jihwa* (tongue), *Shabda* (voice), *Sparsha* (touch), *Drik* (eyes), and *Akruti* (build). *Jihwa Pariksha* views the tongue as a mirror of the gastrointestinal tract, where a cracked tongue indicates *Vata* and a coated tongue relates to modern clinical findings like poor oral hygiene or dehydration. *Shabda Pariksha* assesses voice quality, such as the hoarseness of *Vata*, and correlates with the auscultation of respiratory, heart and bowel sounds. *Sparsha Pariksha* identifies qualities like *Ushna* (heat) or *Sheeta* (cold) *Guna* and is equivalent to examination like palpation and percussion used to detect edema, organ enlargement or fluid accumulation. *Drik Pariksha* examines ocular color and movement, linking red or yellow eyes to *Pitta* and modern indicators like Jaundice or Anemia. Finally, *Akruti Pariksha* inspects the overall physical build and gait, correlating with modern Body Mass Index (BMI) and neurological assessments to identify nutritional or orthopedic conditions.

## CONCLUSION

The *Ashtasthana Pariksha* is a vital diagnostic tool that provides a holistic understanding of a patient's health, by synthesizing traditional Doshic assessment with modern clinical parameters. By integrating these eight examinations, an Ayurvedic physician can perform a comprehensive *Aatura Pariksha* (patient examination) that accurately evaluates the involvement of *Doshas*, the status of *Agni*, and the overall prognosis of the disease. This multi-dimensional approach ensures that treatment plans are precisely tailored to restore balance, demonstrating that these ancient diagnostic methods are highly relevant and compatible with contemporary medical practices for successful disease management.

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