



Unveiling the Therapeutic Potential and Mechanisms of Rasnadi Guggulu: An In-Depth Review

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ABSTRACT

Background: *Guggulu*, an oleogum resin from the bark of *Commiphora mukul* Hook. ex- Stocks of the Burseraceae family, is a key ingredient in many crucial Ayurvedic formulations, often identified by the suffix 'guggulu'. Because of its remarkable healing properties, it has been utilized for centuries in India to address various health conditions. *Rasnadi Guggulu* is one of the niragni guggulu preparations used for its therapeutic benefits in treating ailments such as *vata roga*, *karna roga*, *shiroroga* and *bhagandara*. **Aim:** This comprehensive review aims to elucidate its therapeutic potential and underlying mechanisms. **Methods:** A systematic literature review was conducted, examining clinical studies, pharmacological research, and traditional Ayurvedic texts related to this formulation. Databases such as PubMed, Scopus, and Google Scholar were searched for relevant articles published. **Results:** *Rasnadi Guggulu* exhibits significant anti-inflammatory, analgesic, and antioxidant properties. Clinical studies highlight its efficacy in managing conditions like arthritis, respiratory disorders, and metabolic syndromes as well along with their classical indications. The active constituents, including guggulsterones and other phytochemicals, play a crucial role in its therapeutic effects. Mechanistic studies reveal that *Rasnadi Guggulu* modulates various biochemical pathways, including the inhibition of pro-inflammatory cytokines and the activation of antioxidant enzymes. **Conclusion:** *Rasnadi Guggulu* holds substantial therapeutic potential due to its multifaceted pharmacological properties.

Keywords : Rasnadi Guggulu, Ayurveda, anti-inflammatory, analgesic, antioxidant, therapeutic mechanisms, traditional medicine.

INTRODUCTION

Ayurveda, one of the significant contributions of ancient Indian sages to humanity, stands as one of the oldest scientific traditional medical systems in India, revered by scholars proficient in the Vedas. The knowledge of guggulu dates back to the Atharvaveda period (circa 2000 B.C.) and is derived from the exudate of plants belonging to the genus "Commiphora," also known as Indian bedellium. The Sanskrit term "guggulu" translates to "one that protects against disease." Guggulu is renowned for its analgesic and anti-inflammatory properties and has been utilized for centuries in India to treat a variety of health conditions. Ayurveda includes numerous formulations with guggulu as a key ingredient, employed by vaidyas (Ayurvedic practitioners) since ancient times to address diverse disorders.¹

The contemporary global trend towards the use of plant-derived natural remedies has underscored the necessity for accurate and up-to-date information regarding the properties, uses, efficacy, safety, and quality of medicinal plant products.² Rasnadi guggulu is one such formulation mentioned in Ayurvedic texts, categorized under niragni guggulu preparations. Various formulations exist under the name Rasnadi guggulu, primarily indicated for conditions such as *vataja vikaras* (disorders caused by vitiated vata), *karna roga* (ear diseases), *shiro roga* (head diseases), *nadivrana* (sinus wounds), *bhagandara* (fistula), and *gridhrasi* (sciatica). Rasnadi guggulu contains a synergistic blend of *aamapachaka* (digestive) and *carminative* drugs that, in conjunction with guggulu, help eliminate the vitiated vata involved in these conditions.

Due to the lack of a comprehensive review on Rasnadi Guggulu found on one platform during an extensive literature search, a detailed review study was deemed necessary. This review aims to compile extensive details on Rasnadi Guggulu and its various ingredients used in the Ayurvedic system of medicine.

Aim

A comprehensive overview of pharmaceutical aspects, quality control parameters, and clinical mode of action of Rasnadi Guggulu.



Objectives

To gather and analyse all available references from classical texts, focusing on the ingredients, preparation methods, therapeutic uses, and conceptual mode of action of Rasnadi Guggulu.

Materials and methods

This review draws information from various ayurvedic texts, modern literature, various scientific journals, and relevant websites to critically examine, compile and interpret the data relevant to this formulation.

Rasnadi guggulu

There are 2 main references mentioned in ayurvedic texts for different rogadhikara. Table 1 depicts the same.

Table 1: Different references of Rasnadi guggulu in classical texts.

S. No	References	Contents	Proportion	Indications
1.	Vrinda Madhava, Rasa ratnakara, Ananda kanda ³	Rasna	5 pala	Gridhrasi
		Guggulu	5 karsha	
2.	Yogaratanakara, Gada nigraha, Yoga ratnakara, Brihat Nighantu ratnakara, Brihat yoga tarangini ⁴	Rasna	1 part	Vata Roga,
		Guduchi	1 part	Karna Roga,
		Eranda	1 part	Shiroroga,
		Devadaru	1 part	Nadivrana and
		Shunthi	1 part	Bhagandara.
		Guggulu	5 parts	

The reference mentioned for gridhrasi has also been mentioned in Chakradatta and Bhaisajya ratnavali under the name of “Rasna guggulu vati”.

Method of preparation:

A. Guggulu shodhana⁵

Equipment's required: Clean vessels, Dola yantra, Cloth, Thread, Gas stove, Khalwa yantra

Ingredients: Triphala Kwatha, Ashodhita guggulu, Water Procedure:

- Raw ashodhita guggulu is taken and pounded in a clean khalwa yantra to make into small pieces.
- Adulterants such as glass, sand, stone particles are removed carefully.
- Guggulu is taken and bundled in a clean two folded cloth and made into a pottali.
- Dola yantra is taken and triphala kwatha is added to it.
- Pottali is made to hang in the dola yantra and swedana done in mandagni until all the guggulu melts and seeps down into the kwatha.
- The residue in the bundle is discarded.
- The fluid thus obtained is filtered and again boiled to evaporate the liquid until a solid mass is obtained.
- Thus, obtained mass is said to be shodhita guggulu.



B. Rasnadi guggulu

Equipment's required: Clean khalwa yantra, vessel

Ingredients: Rasna, Eranda, Guduci, Devadaru, Shunthi, Guggulu Procedure:

- All the ingredients are converted into fine powder and added along with shodhita guggulu to a clean khalwa yantra.
- Continuous pounding is done until the homogeneous mixture is formed, guggulu becomes soft and attains a consistency to form into a pill.
- The mixture thus obtained is converted into pills of required dosage.
- Later, the pills are shade dried and stored in air tight container for further therapeutic purposes.

Classical review of drugs Rasa panchaka of drugs

Sr. No	Drug	Scientific name	Rasa	Guna	Veerya	Vipaka	Karma
1.	Rasna (leaf) ⁶	Pluchea lanceolata Oliver & Hiem.	Tikta	Guru	Ushna	Katu	Amapachana, Kaphavatahara, Vedanasthapana ⁷
2.	Guduchi (stem) ⁸	Tinospora cordifolia (Willd.)	Tikta, Kashaya	Laghu	Ushna	Madhura	Balya, Deepana, Sangrahi, Rasayana, Tridoshashamak, Raktashodhaka, Jwaraghna
3.	Eranda (leaf) ⁹	Ricinus communis Linn.	Madhur a, Katu, Kashaya	Snigdha, Teekshna, Sukshma	Ushna	Madhura	Kaphavatashama ka, Vrishya, Krimighna, Pittaprakopa, Raktaprakopa
4.	Devadaru (heartwood) ¹⁰	Cedrus deodara (Roxb.) Loud.	Tikta	Laghu, snigdha	Ushna	Katu	Kaphahara, vatahara, Dushtavrana shodhaka, Vedanasthapana ¹¹
5.	Shunthi (rhizome) ¹²	Zingiber officinale Roxb.	Katu	Laghu, snigdha	Ushna	Madhura	Anuloma, Deepana, Hridya, Pachana, Vatakaphapaha, Asmadoshahara
6.	Guggulu (exudate) ¹³	Commiphora wightii (Arn.) Bhand.	Katu, tikta, kashaya	Laghu, Sara	Ushna	Katu	Balya, Rasayana, Varnya, deepana, kaphavataghna, Vatabalasajit, Bhagnasandhana krit, Medohara, kushtaghna ¹⁴

**Pharmacological action**

Sr. No.	Drug	Phytochemical	Pharmacological action
1.	Rasna ¹⁵	Quercetin, quercitrin, acetate, psi-taraxasterol, isorhamnetin, neolupenol, neolupeol, sorghumol, sorghumol acetate, boehmerol acetate, moretenol, moretenol acetate	Anti-inflammatory, Anti-arthritic, Anti-malarial, Anti-asthmatic
2.	Eranda ¹⁶	Ricinine, Quercitin 3-O-B-rutinoside (rutin), Ricinoleic acid	Anti-inflammatory, Analgesic, Anti-diabetic
3.	Guduchi ¹⁷	Alkaloids, steroids, terpenoids, polysaccharides, glucosides	Anti-allergic, Anti-oxidant, Anti-neoplastic, Diuretic, Anti-angiogenic, immunomodulatory, Hepatoprotective, Anti-hyperglycemic etc
4.	Devadaru ¹⁸	(-)-matairesinol, (-)-ortrachelogenin, and a dibenzylbutyrolactolignan (4,4',9-trihydroxy-3,3'-dimethoxy-9,9'-epoxylignan, cedodarin (6-methyltaxifolin), dihydromyricetin, cedrin (6-methyldihydromyricetin) & cedrinoside	Anti-oxidant, anti-spasmodic, anti-inflammatory, anti-arthritic, immunomodulatory, anti-allergic, anti-secretory and anti-ulcerative activities.
5.	Shunthi ¹⁹	Oleoresin, sesquiterpene, Gingerdiols, Gingerdiacetates, Gingerdiones, 6-gingersulfonic acid, Gingerenones and a number of Diarylheptanoids, Diterpenes, Glyceroglycolipids A, B & C.	Free radical scavenging, anti-oxidant, Anti-arthritic, anti-inflammatory, analgesic, anti-microbial, anti-bacterial, anti-platelet effect
6.	Guggulu ²⁰	Guggulusterone, Naringenin, Cembranoids, Myrrhanol, α -pinene, Eugenol, Ellagic acid, L-arabinose, Ferulic acid esters	Anti-inflammatory, anti-arthritic, hepatoprotective, chemoprotective, antimicrobial, immunomodulatory, antioxidant, hypolipidemic

Disease introduction

Rasnadi Guggulu is a classical Ayurvedic formulation widely indicated in Vataja and Vata- Kaphaja disorders, particularly *Gridhrasi*, *Karna roga*, *Shiroroga*, *Nadivrana*, and *Bhagandara*. These conditions, though clinically diverse, share a common underlying pathology involving Vata vitiation, Ama formation, and Srotorodha (microchannel obstruction), ultimately leading to pain, inflammation, and impaired tissue function.

Gridhrasi (Sciatica)

Gridhrasi is described under *Nanatmaja Vata Vyadhi* in Ayurvedic texts and is characterized by radiating pain originating from the *Kati* (lumbar region) and extending to *Sphik* (buttock), *Uru* (thigh), *Janu* (knee), *Jangha* (calf), and *Pada* (foot). The term "Gridhrasi" reflects the altered gait resembling that of a vulture (*Gridhra*) due to severe pain and restricted mobility.²¹

Clinically, Gridhrasi presents with:

- *Ruk* (radiating pain)
- *Toda* (pricking sensation)
- *Stambha* (stiffness)
- *Spandana* (twitching)
- *Sakthikshepa nigraha* (restricted movement of lower limb)

Based on Dosha predominance, it is classified into:

- Vataja Gridhrasi



- Vata-Kaphaja Gridhrasi, where symptoms like *Gaurava* (heaviness) and *Tandra* (lethargy) are prominent.²²

In modern medicine, Gridhrasi closely correlates with sciatica, typically caused by compression or irritation of the sciatic nerve due to intervertebral disc prolapse, spinal degeneration, or muscular spasm.²³

Bhagandara (Fistula-in-ano)

Bhagandara is a chronic and debilitating condition described in Ayurveda under *Ashtamahagada*. It is characterized by the formation of an abnormal tract around the anal region with recurrent discharge.²⁴

The condition originates from *Pidaka* (abscess) in the *Guda pradasha*, which, upon suppuration and rupture, forms a sinus tract communicating internally or externally.

Clinical features include:

- Persistent discharge (pus or serous fluid)
- Pain and swelling
- Burning sensation
- Recurrent infection and non-healing wounds

From a modern perspective, Bhagandara correlates with fistula-in-ano, involving chronic infection of anal glands leading to tract formation.²⁵

Nadivrana (Sinus Wound)

Nadivrana is defined as a type of chronic wound characterized by a deep-seated tract or sinus, often associated with continuous discharge.²⁶ It is considered a complication of improperly managed wounds or abscesses.

Clinical features include:

- Narrow, elongated wound tract
- Continuous or intermittent discharge
- Delayed healing
- Associated pain and inflammation

Nadivrana can be correlated with chronic sinus tracts in modern medicine, often resulting from persistent infection, foreign bodies, or inadequate wound healing.

Etiological Factors (Nidana)

The etiological factors of these diseases primarily involve Vata aggravation, along with factors contributing to Ama formation and Srotorodha.

1. Aharaja Nidana (Dietary Factors)²¹

- Excessive intake of *Ruksha* (dry), *Sheeta* (cold), *Laghu* (light) foods
- Irregular dietary habits (*Vishamashana*)
- Consumption of *Viruddha Ahara* (incompatible food)



- Diet leading to *Agnimandya* and Ama formation
2. Viharaja Nidana (Lifestyle Factors)²²
 - Prolonged sitting and improper posture
 - Excessive physical exertion or strain
 - Sudden jerky movements
 - Sleeping on uneven surfaces
 - Suppression of natural urges (*Vega dharana*)
 3. Abhighataja Nidana (Trauma)²⁴
 - Injury to lumbar or anal region
 - Improper lifting of heavy objects
 - Surgical or local trauma leading to abscess formation
 4. Manasika Nidana (Psychological Factors)
 - Mental stress contributing to Vata aggravation

Samprapti (Pathogenesis)

The pathogenesis of Gridhrasi, Bhagandara, and Nadivrana involves a multi-step process integrating Dosha, Agni, Ama, and Srotas.

1. Agnimandya and Ama Formation

Improper dietary and lifestyle practices lead to Agnimandya, resulting in the formation of Ama, which is characterized by its *Guru*, *Picchila*, and *Srotorodhaka* properties.²¹

2. Dosha Prakopa

- Vata Dosha is primarily aggravated
- In certain conditions, Kapha and Pitta may associate, leading to complex presentations
- Formation of Saama Dosha occurs when Ama combines with Dosha

3. Srotorodha

Ama and vitiated Doshas obstruct Mamsa, Asthi, Majja, and Purishavaha Srotas, depending on disease manifestation:

- In Gridhrasi → lumbar and neural pathways
- In Bhagandara/Nadivrana → anal region and soft tissues

4. Vimargagamana and Sthanasamshraya

Aggravated Vata, due to obstruction, deviates from its normal course and localizes in susceptible sites:



- *Kati and lower limbs* in Gridhrasi
- *Guda pradesha* in Bhagandara
- *Wound tracts* in Nadivrana

5. Vyakti (Clinical Manifestation)

The localized Dosha-Dushya interaction results in disease-specific manifestations:

- Gridhrasi → radiating pain, stiffness, restricted movement
- Bhagandara → tract formation, discharge, chronic inflammation
- Nadivrana → sinus formation, delayed healing, persistent discharge

Results and discussion

Rasnadi Guggulu is a classical Ayurvedic polyherbal formulation whose therapeutic relevance is supported by both traditional textual evidence and contemporary pharmacological insights. A critical review of classical compendia, including *Vrinda Madhava*, *Rasa Ratnakara*, *Yoga Ratnakara*, *Gada Nigraha*, and *Brihat Yoga Tarangini*, indicates that despite variations in composition, the formulation consistently addresses disorders predominantly associated with Vata and Vata-Kapha imbalance.

Two principal variants are described: a simplified Rasna-Guggulu combination indicated in Gridhrasi, and a more comprehensive polyherbal formulation utilized in a broader range of conditions such as Vata roga, Karna roga, Shiroroga, Nadivrana, and Bhagandara. These seemingly diverse indications converge on a common pathological framework characterized by pain, inflammation, obstruction of physiological channels (Srotorodha), and progressive tissue degeneration, primarily driven by Vata aggravation often associated with Ama.

The pharmaceutical processing of Rasnadi Guggulu further contributes to its therapeutic efficacy. The Shodhana (purification) of Guggulu using Triphala Kwatha plays a crucial role in eliminating impurities while potentially enhancing its pharmacological properties and safety profile. The subsequent preparation of Vati through trituration with finely powdered herbal constituents ensures homogeneity and optimal delivery of active principles. Notably, the Niragni method of preparation preserves heat-sensitive phytoconstituents, maintaining the stability and integrity of bioactive compounds. Additionally, the Yogavahi property of Guggulu facilitates enhanced bioavailability and targeted delivery of co-administered drugs, reflecting a sophisticated pharmaceutico-therapeutic principle.

From an Ayurvedic standpoint, the formulation exerts its effects through a multi-level intervention aligned with the principle of Samprapti Vighatana. The presence of Deepana- Pachana drugs such as Shunthi and Guduchi suggests an initial action at the level of Agni, promoting the digestion and elimination of Ama and thereby alleviating Srotorodha. This is complemented by Vatahara drugs including Rasna, Eranda, Devadaru, and Guggulu, which restore the normal physiological function of Vata, leading to relief from pain, stiffness, and restricted movement. Furthermore, the formulation demonstrates Shothahara (anti-inflammatory) and Vedanasthapana (analgesic) properties, contributing to symptomatic relief while addressing the underlying pathology. The Rasayana attributes of constituents such as Guduchi and Guggulu further support tissue repair and regeneration, particularly in chronic conditions like Bhagandara and Nadivrana.

Modern pharmacological evidence provides a complementary perspective on the therapeutic actions of Rasnadi Guggulu. The formulation exhibits significant anti-inflammatory activity, likely mediated through the inhibition of pro-inflammatory cytokines such as tumor necrosis factor-alpha (TNF- α), interleukins (IL-1 β), and cyclooxygenase pathways.^{27,28} Its antioxidant properties contribute to the neutralization of reactive oxygen species, thereby reducing oxidative stress and preventing cellular damage. The immunomodulatory effects of key constituents, particularly Guduchi²⁹ and Guggulu, enhance host defense mechanisms and may explain the formulation's efficacy in chronic infections and delayed wound healing. Additionally, the observed analgesic and potential neuroprotective effects provide a plausible mechanistic basis for its effectiveness in neuropathic conditions such as sciatica.³⁰

An important aspect of Rasnadi Guggulu is its systemic mode of action. By modulating Agni and reducing Ama, the formulation extends its therapeutic effects beyond localized pathology to influence broader metabolic and inflammatory processes. This systems-



based approach is particularly relevant in the management of chronic, multifactorial disorders, where single-target therapies often fail to provide sustained benefits. The polyherbal nature of the formulation enables synergistic interactions among its constituents, allowing simultaneous modulation of multiple biological pathways, a concept increasingly recognized in contemporary pharmacology.

Guggulu, as a central component of the formulation, plays a dual role by contributing direct pharmacological effects through its bioactive compounds, such as guggulsterones and terpenoids, and by enhancing the overall efficacy of the formulation via its Yogavahi property. Furthermore, the traditional Shodhana process may influence the physicochemical characteristics of Guggulu, potentially improving its therapeutic profile, although this aspect requires further scientific validation.

Overall, Rasnadi Guggulu can be conceptualized as a systems-level therapeutic formulation that simultaneously addresses Dosha imbalance, metabolic dysfunction, inflammatory processes, immune modulation, and tissue repair. Its applicability across conditions such as Gridhrasi, Bhagandara, and Nadivrana underscores its role as a comprehensive pathological modulator rather than a disease-specific intervention.

From a clinical perspective, the formulation demonstrates considerable potential in the management of musculoskeletal disorders, chronic inflammatory conditions, and non-healing wounds. However, despite its extensive traditional use and emerging pharmacological evidence, there remains a need for well-designed clinical trials, standardization of formulation and dosage, and molecular-level investigations to further elucidate its mechanisms of action and establish its role in evidence-based integrative medicine.

Conclusion

Rasnadi Guggulu is a classical Ayurvedic formulation with significant therapeutic potential in Vata-dominant disorders, acting through anti-inflammatory, analgesic, antioxidant, and immunomodulatory mechanisms. Its holistic, multi-targeted action and alignment with both Ayurvedic principles and modern pharmacology highlight its relevance in managing chronic inflammatory and degenerative conditions. Further clinical validation is warranted to establish its role in evidence-based practice.

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