



Case Study

CLINICAL EVALUATION OF PANCHAKOLA SIDDHA YAVAGU AND SIMHANADA GUGGULU IN THE MANAGEMENT OF AMAVATA

Shantamma^{1*}, Sudeendra G. Nawale², Venkatakrishna K.V.³

*1PG Scholar, ²Professor, ³Professor and Head, Department of Swasthavritta, Government Ayurvedic Medical College, Mysore, Karnataka, India.

Article info

Article History:

Received: 06-08-2025

Accepted: 11-09-2025

Published: 30-09-2025

KEYWORDS:

Amavata,
Panchakola Siddha
Yavagu,
Simhanada
Guggulu,
Inflammatory
Biomarkers,
Ayurveda.

ABSTRACT

Amavata, a chronic inflammatory condition, arises from vitiation of *Vata* associated with *Ama* (metabolic toxins). The vitiated *Vata* circulates *Ama* through channels (*Dhamanis*) and localizes in *Shleshma Sthana* (joints, stomach, etc.), producing stiffness, swelling, and pain. In Ayurveda, management emphasizes *Deepana*, *Pachana*, *Virechana*, *Snehapana* and *Basti*. *Pathya* plays a crucial role in the management of *Amavata*. In contemporary science it is correlated with Rheumatoid Arthritis (RA). As the disease progresses the symptoms verses and it may lead deformity. **Objective:** To evaluate the therapeutic effect of *Panchakola Siddha Yavagu* and *Simhanada Guggulu* in an *Amavata* patient. **Methodology:** A 34-year-old female presented with multiple joint pain (dominantly knees), morning stiffness, swelling, anorexia, and difficulty in ambulation. Laboratory reports revealed raised inflammatory markers. She was administered *Panchakola Siddha Yavagu* (250ml daily on empty stomach) and *Simhanada Guggulu* (500mg twice daily) for 14 days with dietary guidelines. Follow-up was done on the 15th and 30th day. **Results:** Remarkable improvements were observed, including reduced joint pain, stiffness, and swelling. ESR decreased from 80 to 40, CRP from 9 to 8, and RA factor from 23 to 20. Appetite and mobility improved notably, and by the 30th day the patient was asymptomatic. **Discussion:** *Panchakola* supports *Deepana* and *Pachana*, aiding *Ama Pachana*. *Simhanada Guggulu* combines *Shodhana* and *Shamana* effects, exhibiting strong anti-inflammatory and analgesic actions. The combined therapy reduced inflammatory markers and enhanced quality of life. **Conclusion:** The cost-effective and simple regimen of *Panchakola Siddha Yavagu* with *Simhanada Guggulu* proves highly effective in managing *Amavata*.

INTRODUCTION

Amavata is a chronic inflammatory disease condition described in Ayurveda texts, primarily resulting from the vitiation or aggravation of *Vata dosha* and accumulation of *Ama* (metabolic toxins). The vitiated *Vayu* circulates the *Ama* (Indigested metabolic product) all over the body through *Dhamanies* (channels) and takes shelter in the *Shleshma Sthana* (*Amashaya*, *Sandhi*, etc.), producing symptoms such as *Stabdha*, *Shotha* and *Shoola* in small and big joints^[1].

Key contributors to the development of this disease are the impaired functioning of *Agni* (digestive fire), as well as improper diet and lifestyle. It is clinically characterized by *Sandhishoola* (joint pain), *Sandhi Shotha* (joint swelling), *Sandhi Stabdha* (morning stiffness), *Agnimandya* (loss of appetite) and *Angamarda* (body pain). The modern correlate of *Amavata* is Rheumatoid Arthritis (RA). The prevalence rate of rheumatoid arthritis in India is around 0.75% and gradual increase in the rate is seen due to life style changes^[2]. RA is known for its progressive, symmetrical joint involvement and systemic inflammation leading to joint deformities if left untreated. The management of *Amavata* requires addressing both *Ama* and *Vata*. *Panchakola* formulations are known for their *Deepana* and *Pachana* properties, aiding in *Ama pachana*.

Access this article online

Quick Response Code



<https://doi.org/10.47070/ayushdhara.v12i4.2171>

Published by Mahadev Publications (Regd.)
publication licensed under a Creative Commons
Attribution-NonCommercial-ShareAlike 4.0
International (CC BY-NC-SA 4.0)

Simhanada Guggulu, a classical formulation, is extensively used for its *Shodhana* and *Shamana* properties in *Amavata*. This case report highlights the efficacy of *Panchakola Siddha Yavagu* and *Simhanada Guggulu* in the clinical management of *Amavata*.

MATERIALS AND METHODS

A female patient diagnosed with *Amavata* has been taken for the study and administered with *Shamanaushadi* and *Yavagu*.

Case Report

Patient Information

- Age: 34 years
- Gender: Female
- Religion: Hindu
- Education: SSLC
- Occupation: House wife
- Socioeconomic status: BPL
- Marital status: Married

Table 1: Chief complaints of patient

Chief complaints		Duration
1	Pain and swelling of bilateral knee joint	4 months
2	Pain and swelling of bilateral elbow joint	
3	Pain and stiffness of phalangeal joint	
4	Pain, swelling and stiffness of bilateral wrist joint	
5	Morning stiffness	
Associated complaints		
1	Occasional fever	4 months
2	Generalised body pain	
3	Difficulty in walking	
4	Reduced appetite	

History of present illness

The patient was apparently normal 4 months ago. Then gradually she started to complain of bilateral joint pain associated with morning stiffness, swelling over joints, for all these complaints she consulted nearby doctor took painkillers but didn't get any relief, after some days she also started to complain of difficulty in walking and anorexia then she decided to take ayurvedic treatment for that she approached our hospital.

Table 2: History

Personal history	Appetite	Poor
	Bowel	Hard stool
	Micturition	Regular
	Sleep	Disturbed
	Habits	Nil
Past history	Took allopathic medicines (analgesics) for pain details about medicines not found.	
	She is not a known case of DM/HTN/thyroid/ other systemic disorders.	
Family history	Nothing specific	
Menstrual history	Regular -3-5 days	
	Duration-28-30 days	
Obstetric history	G ₂ P ₂ L ₂ A ₀	
	Tubectomy 1 year ago.	

Examination**Table 3: Ashtasthana Pareeksha**

1.	<i>Nadi</i>	82/min
2.	<i>Mala</i>	Hard stool
3.	<i>Mutra</i>	Regular
4.	<i>Jihva</i>	<i>Liptata</i>
5.	<i>Shabda</i>	<i>Prakruta</i>
6.	<i>Sparsha</i>	<i>Dukkha sparsha in Sandhi pradesha</i>
7.	<i>Drik</i>	<i>Prakruta</i>
8.	<i>Akriti</i>	<i>Madyama</i>

Table 4: Dashavidha Pareeksha

1.	<i>Prakruti</i>	<i>Vata-kapha</i>
2.	<i>Vikriti</i>	<i>Dosha- Vatapradhana tridosha Dushya- Rasa, Meda, Asti, Majja Mala- Purisha</i>
3.	<i>Satva</i>	<i>Madyama</i>
4.	<i>Sara</i>	<i>Madyama</i>
5.	<i>Samhanana</i>	<i>Madyama</i>
6.	<i>Pramana</i>	<i>Madyama</i>
7.	<i>Satmya</i>	<i>Sarva rasa</i>
8.	<i>Aharashakti</i>	<i>Madyama</i>
9.	<i>Vyayama Shakti</i>	<i>Avara</i>
10.	<i>Vaya</i>	<i>Madyama</i>

Investigations

- Routine hematological and biochemical tests were performed pre- and post-intervention.
- ESR-80 mm/hr
- CRP-9 mg/l
- RA-23 IU/mL

Intervention

- A daily dosage packets containing 50gm of *Rakthashali*, 5gm of *Panchakola churna* was given to subject.
- One packet (50gm of *Rakthashali* and 5gm of *Panchakola churna*) has to be cooked with 500ml of water in low flame until it attains *Yavagu* (thick gruel) consistency and consumed when it is hot and *Simhanada Guggulu* 500mg should be taken after food, both in the morning and at night, following the consumption of *Yavagu*.
- The duration of the intervention is for 14 days.
- Follow up: 15th day and 30th day.

Table 5: Ingredients of Panchakola sidda yavagu^[3]

Drugs	Scientific Name	Quantity
<i>Pippali</i>	<i>Piper longum</i> Linn	1 gm
<i>Pippalimoola</i>	<i>Piper longum</i> Linn	1 gm
<i>Chavya</i>	<i>Piper retrofractum</i> Vahal	1 gm
<i>Chitraka</i>	<i>Plumbago zylanica</i> Linn	1 gm
<i>Nagara</i>	<i>Zinger officinale</i> Roscoe	1 gm
<i>Rakthashali</i>	<i>Oryza punctate</i>	50 gm
Water		500ml

Table 6: Ingredients of *Simhanada Guggulu*^[4]

Drugs	Scientific Name	Quantity
<i>Harithaki</i>	<i>Terminalia chebula</i> Retz.	1 part
<i>Vibhitaki</i>	<i>Terminalia bellirica</i> Roxb	1 part
<i>Amalaki</i>	<i>Emblica officinalis</i> Gaertn	1 part
<i>Suddha Guggulu</i>	<i>Commiphora mukul</i> Engl.	1 part
<i>Suddha Gandhaka</i>	Purified Sulphur	1 part
<i>Eranda taila</i>	<i>Ricinus communis</i> Linn	4 parts

RESULTS AND OBSERVATIONS

The patient got relief in *joint pain* and swelling within 14 days, on next follow up symptoms of morning stiffness, anorexia reduced completely and she felt better in walking. The patient reported significant symptomatic relief and resumed normal daily activities without discomfort. Laboratory values confirmed a decline in inflammatory markers, indicating reduced systemic inflammation.

Table 7: Symptomatic relief before and after treatment

Symptoms	0 th Day	15 th Day	30 th Day
Joint pain	+++	++	-
Morning stiffness	+++	++	-
Swelling	++	+	-
Difficult in walk	++	-	-
Reduced appetite	++	-	-

Table 8-Shows the laboratory values before and after treatment

Investigations	0 th Day	15 th Day
ESR	80	40
CRP	9	8
RA	23	20

DISCUSSION

1. Discussion on *Pathya-Apathya* in *Amavata*

Kashyapa Samhita mentioned that *Ahara* as *Mahabheshaja*^[5]. Only the *Hitkara-Ahara* can keep a person healthy. He describes the therapeutic potential of *Ahara* (food) and its preventative health benefits.

Table 9: Advised *Pathya- Apathya* to the patient^[6]

<i>Pathya</i>	<i>Apathya</i>
<i>Ardraka</i> (Ginger)	<i>Dadhi</i> (Curd)
<i>Rakthashali</i> (Red Rice)	<i>Matsya</i> (Fish)
<i>Karavellaka</i> (Bitter guard)	<i>Guda</i> (Jaggery)
<i>Kulattha</i> (Horse gram)	<i>Ksheera</i> (milk)
<i>Yava</i> (Barley)	<i>Mashapisti</i> (Urad dal powder)
<i>Rasona</i> (Garlic)	<i>Ratrijagarana</i> (Night wakeup)
<i>Shigru</i> (Drum stick)	<i>Diwaswapna</i> (Day sleep)
<i>Ushna jala</i> (Hot water)	<i>Sheeta jala</i> (Cold water)

The dietary regimen implemented along with the therapeutic interventions played a crucial supportive role. Patients were advised to follow *Pathya* (wholesome) diet practices- avoiding heavy, oily, cold, or incompatible foods, and emphasizing *Laghu* (light), warm, and easily digestible meals. This dietary discipline effectively prevented further *Ama* accumulation and maintained the functional integrity of *Agni*, thus reinforcing the actions of *Panchakola*.

Discussion on Panchakola Sidda Yavagu**Definition and Importance^[7]**

A food substance prepared with *Tandula* (rice) or adding some other Ayurvedic medicinal ingredients or drugs are called as *Yavagu*.

Yavagu is the one of the *Pathya kalpana* comes under *Kritanna varga*. According to Ayurveda the whole *Dravyas* are classified into two categories *Aushadhi* and *Ahariya Dravyas*. *Yavagu* contains both medicine and food, also known as medicated *Yavagu* (Semi solid soup).

Guna and Karma of Yavagu

- *Grahi*
- *Balya*
- *Tarpani*
- *Vatanashini*

- *Laghu* (light) and *Ushna* (hot potency)

It also adopts the pharmacological properties of the drug decoction which is used in the preparation of *Yavagu* for specific diseases as described in *Samhitas*.

Method of preparation of Yavagu

Yavagu can be prepared with one-part rice and six parts water. Then it is boiled on mild fire till the rice is cooked and little amount of water is left in the final recipe. The additive can be added according to taste before serving.

Kashyapa Samhita mentioned like *Yavagu* is prepared by taking rice (1 part) and decoction (20 parts); Boil it till the rice is cooked; like this we can also take 15 parts and 10 parts of decoction to prepare *Yavagu*^[8].

Table 10: Detail description about Panchakola^[3]

Ingredients	Rasapanchaka	Effect on Dosha
<i>Pippali</i>	<i>Rasa- Katu</i> <i>Guna- Laghu, Teekshna</i> <i>Vipaka –Madhura</i> <i>Veerya – Ushna</i> <i>Karma- Deepana, Vrushya, Rasayana</i>	<i>Vatakaphahara</i>
<i>Pippali mula</i>	<i>Rasa- Katu</i> <i>Guna- Laghu, Rooksha</i> <i>Vipaka –Katu</i> <i>Veerya- Ushna</i> <i>Karma- Deepana, Vrushya, Rasayana</i>	<i>Kaphavatahara</i>
<i>Chavya</i>	<i>Rasa- Katu</i> <i>Guna- Laghu, Rooksha</i> <i>Vipaka- Katu</i> <i>Veerya- Ushna</i> <i>Karma- Deepana, Pachana</i>	<i>Kaphavatahara, Pittakara</i>
<i>Chitraka</i>	<i>Rasa- Katu</i> <i>Guna- Ushna</i> <i>Vipaka-Katu</i> <i>Veerya- Ushna</i> <i>Karma-Deepana, Pachana, Grahi</i>	<i>Kaphavatahara</i>
<i>Nagara</i>	<i>Rasa- Katu</i> <i>Guna-Sheeta (Ardhraka), Laghu</i> <i>Vipaka- Katu</i> <i>Veerya – Ushna</i> <i>Karma- Deepana, Bhedana</i>	<i>Kaphavatahara</i>

Panchakolasiddha Yavagu is a *Pathya Kalpana* (medicated gruel) mentioned in *Charaka Samhita*^[8]. The medicated gruel prepared with the five pungent herbs- *Pippali* (*Piper longum*), *Pippalimoola* (root of *Piper longum*), *Chavya* (*Piper retrofractum*), *Chitraka* (*Plumbago zeylanica*), and *Nagara* (*Zingiber officinale*)- serves as an excellent *Deepana-Pachana* formulation. It stimulates *Jatharagni* (digestive fire), facilitates the breakdown and absorption of nutrients and actively digests and eliminates *Ama*, thereby correcting the underlying pathology of

Amavata. Its gruel form (*Yavagu*) ensures easy digestibility and acts as a nourishing yet light food, preventing further *Ama* formation while supporting gut healing.

Discussion on *Simhanada Guggulu*

Table 11: Detail description about *Simhanada Guggulu*^[4]

Dravya	Rasapanchaka	Doshagnata	Karma	Rogagnata
<i>Amalaki</i>	<i>Rasa</i> -Amlapradhana <i>Pancharasa</i> <i>Guna</i> - Laghu <i>Virya</i> - Sheeta <i>Vipaka</i> - Madhura	<i>Tridosha</i> <i>Shamana</i> mainly Pitta	<i>Rasayana</i> , <i>Cakshusya</i> , <i>Vrusya</i> , <i>Medhya</i> , <i>Anulomana</i> , <i>Hrudya</i>	<i>Prameha</i> , <i>Raktapitta</i> , <i>Netraroga</i> , <i>Kustha</i> , <i>Arsas</i> , <i>Somaroga</i> , <i>Pradara</i> , <i>Mutrakṛcchra</i> , <i>Shula</i>
<i>Haritaki</i>	<i>Rasa</i> - Lavanavarjita <i>pancha rasa</i> <i>Guna</i> - Laghu, <i>Ruksha</i> <i>Virya</i> - Ushna <i>Vipaka</i> -Madhura	<i>Tridosha</i> <i>shamaka</i> mainly Kapha	<i>Anulomana</i> , <i>Rasayana</i> , <i>Prajasthapana</i> , <i>Caksusya</i> , <i>Hrdya</i> , <i>Lekhana</i>	<i>Shotha</i> , <i>Prameha</i> , <i>Kuṣṭha</i> , <i>Vrana</i> , <i>Chardi</i> , <i>Vatarakta</i> , <i>Mutra Kṛcchra</i> , <i>Netra roga</i> , <i>Krmi</i> , <i>Hrdroga</i> , <i>Ashmari</i> , <i>Klaibya</i> , <i>Kasa-Shwasa</i> etc
<i>Vibhitaki</i>	<i>Rasa</i> - Kashaya <i>Guna</i> - Rooksha, <i>Laghu</i> <i>Virya</i> - Ushna <i>Vipaka</i> - Madhuar	<i>Tridosha</i> <i>shamaka</i> mainly Vata	<i>Keshya</i> , <i>Cakhsusya</i> , <i>Bhedana</i> , <i>Madakari</i> (<i>Phala Majja</i>)	<i>Jvara</i> , <i>Kasa</i> , <i>Svasa</i> , <i>Atisara</i> , <i>Asmari</i> , <i>Chardi</i> , <i>Trushna</i>
<i>Suddha Gandhaka</i>		<i>Vatakapha</i> <i>Shamaka</i>	<i>Rasayana</i> , <i>Deepana</i>	<i>Kaṇḍu</i> , <i>Kushta</i> , <i>Visarpahara</i> , <i>Adhmana</i> , <i>Kṛmirogahara</i> , <i>Garaviṣahara</i> , <i>Twagarogahara</i> , <i>Kasashwasahara</i>
<i>Guggulu</i>	<i>Rasa</i> - Tikta, <i>Katu</i> <i>Guna</i> - Lagu, <i>Ruksha</i> , <i>Vishada</i> , <i>Sukshma</i> , <i>Sara</i> , <i>Snigda</i> , <i>Picchila</i> <i>Virya</i> - Ushna <i>Vipaka</i> - Katu	Balances Vata and Kapha dosha	<i>Rasayana</i> , <i>Vrusya</i> (new), <i>Lekhana</i> (old)	<i>Sthoulya/Medoroga</i> , <i>Amavata</i> , <i>Vata vyadhi</i> , <i>Prameha</i> , <i>Apachi</i> , <i>Gandamala</i> , <i>Shotha</i> , <i>Pitaka</i> , <i>Ashmari</i> , <i>Arshas</i> , <i>Kustha</i>
<i>Eranda</i>	<i>Rasa</i> - Madhura, <i>Katu</i> , <i>Kasaya</i> <i>Guna</i> - Snigda, <i>Tikshna</i> , <i>sukshma</i> <i>Virya</i> - Ushna <i>Vipaka</i> - Madhuar	<i>Kapha</i> - <i>vatahara</i>	<i>Rechana</i> , <i>Vrushya</i>	<i>Vatavyadhi</i> , <i>Pleeha roga</i> , <i>Udavarta</i> , <i>Antravrudhi</i> , <i>Katishula</i> , <i>Shirashula</i> , <i>Prameha</i> , <i>Vatarakta</i>

Simhanada Guggulu, a classical polyherbal-mineral formulation, plays a multi-dimensional role. Its ingredients like *Guggulu* (*Commiphora mukul*) and *Haritaki* (*Terminalia chebula*) provide *Vata shamana* (pacification of *Vata*), *Shothahara* (anti-inflammatory) and *Ama pachaka* actions. Additionally, the presence of *Triphala* and *Gandhaka* offers mild *Shodhana* (detoxification) effects, particularly helpful in clearing *Mala sanchaya* (accumulated metabolic waste). By combining *Shodhana* and *Shamana* actions, *Simhanada Guggulu* not only alleviates symptoms like joint pain, swelling, and stiffness, but also addresses systemic inflammation and toxin build-up.

Discussion on the combined effect of *Panchakola Siddha Yavagu* and *Simhanada Guggulu*

The combination therapy of *Panchakola Siddha Yavagu* and *Simhanada Guggulu* has shown significant efficacy in the management of *Amavata*, this method reflects the holistic and integrative strategy used in Ayurvedic medicine. Where internal cleansing, *Dosha* balancing and digestive support work synergistically to address both the root cause and symptoms of the disease.

Panchakola acts as a potent *Ama pachaka* (digestive stimulant) and *Agni vardhaka* (metabolic enhancer), while *Simhanada Guggulu* exerts *Vatahara*,

Shothahara, and *Ama pachaka* effects, along with mild detoxifying action. The dietary regimen further aided in enhancing the efficacy of the treatment by preventing *Ama* formation and supporting digestion.

Clinical improvements: such as reduced joint pain, decreased morning stiffness, improved appetite and enhanced joint mobility- were closely aligned with laboratory findings, highlighting the holistic efficacy of the treatment. Unlike conventional pharmacotherapy, which primarily focuses on symptomatic relief or immune suppression, this Ayurvedic regimen addressed the root cause (*Nidana*) by correcting *Agni*, eliminating *Ama*, balancing *Vata*, and promoting systemic detoxification.

Discussion on Inflammatory Biomarkers^[9]

Early diagnosis and intervention are essential for controlling disease activity, increasing remission rates, and preventing lasting damage. Although RA is diagnosed clinically, biomarkers play a critical role in supporting diagnosis and monitoring. The 2010 ACR/EULAR Classification Criteria^[10], designed to standardize RA identification for research, incorporate clinical features and biomarkers, offering 84% sensitivity and 60% specificity. In practice, rheumatologists often rely on these criteria to substantiate diagnoses. There are four routinely used biomarkers included in the criteria- Rheumatoid factor (RF), anti-citrullinated protein antibodies (ACPA), Erythrocyte Sedimentation Rate (ESR), and C-reactive protein (CRP).

The reduction in inflammatory biomarkers such as ESR and CRP validates the anti-inflammatory potential of the intervention. Clinical improvements correlated with laboratory findings, supporting the holistic approach of Ayurveda in managing systemic inflammatory disorders like *Amavata*.

The observed decline in these markers during treatment reflects a measurable anti-inflammatory effect, validating the pharmacological potential of *Ayurvedic* formulations in modulating the immune and inflammatory responses.

CONCLUSION

Panchakola Siddha Yavagu supports metabolic correction and promotes digestion, thereby aiding in the elimination of *Ama*, while *Simhanada Guggulu* addresses the inflammation and pain, helping to restore mobility and reduce discomfort. When these two formulations are administered together, they work synergistically to target the root causes of *Amavata*.

Thus, this integrative therapeutic approach has shown promising results in the effective management of *Amavata*, especially in its early and active stages. Moreover, the accessibility and cost-effectiveness of

these formulations make them suitable for long-term use in community-based and outpatient settings.

Acknowledgement

The author sincerely extends her gratefulness to the patient and Department of Swasthavritta and Yoga Government Ayurveda Medical College and Hospital Mysuru for supporting the study.

Declaration of patient consent

Authors certify that they have obtained patient consent form, where the patient has given his consent for reporting the case along with the images and other clinical information in the journal. The patient understands that his name and initials will not be published and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

Limitations of the study

Laboratory parameters were limited to basic inflammatory markers, and advanced imaging or immunological assessments were not included. Further clinical trials with larger sample sizes and standardized outcome measures are necessary to validate these preliminary observations.

REFERENCES

1. Dr. GD Singhal and Colleague Ayurvedic clinical diagnosis based on Madhava nidana Chuakamba Sanskrit pratishtan Delhi. Madhava nidana 25th chapter, Amavatanidana verse 7-10, page no.456.
2. Malaviya AN, Kapoor SK, Singh RR, Kumar A, Pande I. Prevalence of rheumatoid arthritis in the adult Indian population. *Rheumatology Int.* 1993; 13(4): 131-4. doi: 10.1007/BF00301258. PMID: 8310203[PubMed]
3. P V Sharma Charaka Samhita English translation, volume 1 Chaukamba Orientalia Varanasi, reprint edition 2017. Cha.su 2nd chapter, verse 18. Page no.16.
4. Govinda Dasaji Bhisagratna commented upon by Vaidya Shri Ambika Datta Shastri, English translation by Dr. Kanjiv Lochan, Bhaishajya Ratnavali fourth bhaga, reprint 2009. 29th chapter Amavata chikitsa verse 190-195.
5. PV Tiwari, Vruddhajeewakiya tantra, Kasyapa samhita, Chaukambh Orientalia, Varanasi 4th chapter verse 72. Page no.479.
6. Yogaratnakara with Vidyotini [Hindi Commentary] by Vaidya Lakshmiapati Shastri, edited by Bhisagratna Bramhashankari sastri, Chaukamba Orientalia, Varanasi, reprint edition 2018. Amavatanidana verse1-2, Page number 573.
7. Vruddha jeevaka, Kashaya samhita, with Sanskrit introduction by Pandit hemaraj sharma,

- chauhamba Sanskrit sansthan, Varanasi, khilasthana 4
- 10.7759/cureus.15063. PMID: 34141507; PMCID: PMC8205440
8. PV Tiwari, Vruddhajeewakiya tantra, Kasyapa samhita, Chaukambh Orientalia, Varanasi 4th chapter verse 72. Page no. 479.
10. H Ralston Stuart, D Penman Ian, et. Al Davidson's Principles and Practice of Internal Medicine, 23rd edition 2018, chapter 24, Page no. 1021.
9. Shapiro SC. Biomarkers in Rheumatoid Arthritis. Cureus. 2021 May 16; 13(5): e15063. doi:

Cite this article as:

Shantamma, Sudeendra G. Nawale, Venkatakrishna K.V. Clinical Evaluation of Panchakola Siddha Yavagu and Simhanada Guggulu in the Management of Amavata. AYUSHDHARA, 2025;12(4):239-246.

<https://doi.org/10.47070/ayushdhara.v12i4.2171>

Source of support: Nil, Conflict of interest: None Declared

***Address for correspondence**

Dr. Shantamma

PG Scholar,

Department of Swasthavritta,

Government Ayurvedic Medical

College, Mysore, Karnataka

Email: shantasirwar123@gmail.com

Disclaimer: AYUSHDHARA is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. AYUSHDHARA cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of AYUSHDHARA editor or editorial board members.

