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Case Series

CLINICAL EXPERIENCE WITH *VASANTA VAMANA KARMA* (THERAPEUTIC EMESIS IN SPRING SEASON): A 20-CASE SERIES

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ABSTRACT

Vamana Karma, a *Panchakarma* therapy, is recommended as a *Shodhana* therapy for *Kapha* disorders. Ayurveda emphasizes the importance of *Ritu* (season) in *Panchakarma* procedures, with *Vasant Ritu* (spring) being ideal for *Vamana*. This case series presents clinical experiences from 20 *Vamana* procedures conducted during *Vasant Ritu*, highlighting outcomes, challenges, and practical insights. **Objective:** To evaluate the efficacy, safety, and clinical outcomes of *Vamana Karma* performed in the *Vasant Ritu* season. **Methods:** A retrospective observational study was conducted on 20 patients who underwent Vamana Karma during *Vasant Ritu*. Selection was based on classical *Yogya Lakshana* and *Kapha Prakopa* conditions. Data regarding patient demographics, indications, pre-procedure preparations, procedural details, number of *Vega*, and *Shuddhi Lakshana* were collected. Subjective and objective parameters were assessed pre- and post-procedure. Follow-up was done for 14 days to monitor clinical progress and adverse events. **Results:** The majority of patients exhibited classical *Kapha* disorders such as PCOD, hypothrodism, *Indralupta, Bahudosha Avastha*, psoriasis and *Sheetapitta*. *Vamana Karma* was well-tolerated, with an average of 7 *Vega* achieved. Classical *Shuddhi Lakshana* such as *Peeta, Tikta,* and *Madhura Vamana Vega* were observed in 80% of cases. Significant improvements in symptoms, *Agni Deepana*, and overall well-being were observed. No major adverse events were reported. **Conclusion:** *Vamana Karma* performed during *Vasant Ritu* demonstrates promising clinical outcomes when administered following classical guidelines. This study reinforces the importance of seasonal Panchakarma and highlights the need for further large-scale studies for standardization.

INTRODUCTION

Among all types of *Shodhana* (detoxification), *Vamana* and *Virechana* (therapeutic purgation) are important purification processes because they are more intense than any other procedures. The *Shodhana* mainly depends on the condition of *Dosha, Dushya,* etc[1,2]. Therapeutic purification or *Sodhana* represents a cornerstone of Ayurveda's holistic approach to disease prevention and treatment. Among the *Pancakarma* modalities, *Vamana Karma* (therapeutic emesis) holds primary importance for disorders arising from *Kapha* and *Pitta* vitiation, particularly those located in the upper gastro-respiratory tract (*Urdhvabhāga Rogas)* [3]. *Caraka Saṃhita* describes *Vamana* as "a planned expulsion of aggravated *Kapha* through the mouth after proper oleation and sudation," ensuring elimination of pathogenic *Doṣas* from their roots[4]. Historically, *Vamana* evolved as a carefully codified clinical intervention rather than a mere detox ritual. Its structured sequence- *Purvakarma* (pre-operative preparation), *Pradhana Karma* (main procedure), and *Pascatkarma* (post-operative care)- reflects the precision of classical clinical reasoning[5]. Seasonal regimens (*Ritucharya*) form a vital foundation of preventive and promotive Ayurveda. They help the body stay aligned with the natural changes that occur

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in the environment throughout the year. Among the six classical seasons, *Vasanta Ritu* (spring) holds special clinical importance because it is the time when *Kapha dosha* naturally undergoes aggravation (*Prakopa*). As the cold of winter gives way to the warmer climate of spring, the *Kapha* accumulated during winter begins to liquefy. This physiological shift often leads to heaviness, sluggishness, impaired digestion, excess mucus, respiratory problems, and reduced metabolic activity.

According to Ayurveda, when *Kapha* becomes excessive, it should be eliminated through *Shodhana* therapies to restore balance. *Vamana Karma* (therapeutic emesis) is the most important *Shodhana* therapy for *Kapha* disorders, and the classical texts clearly recommend conducting it specifically during Vasanta *Ritu* for optimum benefits. Performing *Vamana* in this season is not just a ritualistic practice; it is a well-reasoned, time-sensitive intervention that works in harmony with the body's natural rhythms. When *Kapha* is already loosened and mobile, it can be expelled more effectively, resulting in deeper detoxification and enhanced systemic outcomes. Ancient Ayurvedic authorities *Acharya Charaka, Sushruta*, and *Vagbhata* is consistently highlight spring as the ideal time for *Vamana*. In today's clinical context, where *Kapha*-related lifestyle disorders such as obesity, dyslipidaemia, lethargy, metabolic dysfunction, and stress-linked conditions are increasingly common, *Vasanta Vamana* offers a powerful, natural method for detoxification and metabolic correction. The present 20-case clinical series evaluates the effectiveness of *Vasanta Vamana* by assessing changes in both subjective and objective parameters before and after treatment. Significant improvements were observed in *Agni Bala*, *Ama* clearance, *Srotosuddhi*, psychophysiological balance, skin health, and *Kapha* index score, alongside favourable shifts in lipid profile markers. With an overall improvement of 36.08%, the findings reaffirm the classical principle that therapies performed in their appropriate season produce superior and safer outcomes.

This study highlights the modern clinical relevance of *Vasanta Vamana* and its potential role in preventive healthcare and overall well-being.

Study Type: Retrospective case series conducted during *Vasant Ritu*.

AIMS AND OBJECTIVES

1. The clinical outcomes of *Vamana Karma* were documented in 20 patients.
2. To assess efficacy, safety, and tolerance of *Vamana* procedure in routine Ayurvedic practice.
3. To identify common indications, *Yogya Lakshana*, and outcomes based on classical guidelines.
4. To assess the role of season in the induction of *Vamana Karma*.
5. To evaluate the effect *Vasantika Vamana* in healthy volunteers and patients.

MATERIALS AND METHODS

Healthy volunteers and certain patients who are indicated for *Vamana Karma* were selected from the OPD of Department of Panchakarma in Government Ayurvedic hospital, Erragada, Hyderabad, their after the patients were subjected for detailed clinical history and physical examination.65 persons were registered out of which 32 persons left the treatment in between and 20 persons completed the whole treatment. Details of the registered patients have been placed at Tables 2- 6.

Table 1: Average quantity of drugs used for *Vamana Karma*

Drugs	Average
Dose of *Madanaphala* (g)	5.95
Quantity of *Ksheera* (ml)	1510
Quantity of *Yashtimadhu Phanta* (ml)	1067.5
Quantity of *Lavanodaka* (ml)	2342

Table 2: Sex wise distribution of the patients

Sex	Percentage of Patients
Female	75%
Male	25%

Table 3: Age wise distribution of patients

Age (Years)	Percentage of Patients
21-25	25%
26-30	40%
31-35	30%
36-40	5%

Table 4: *Prakriti* wise distribution of the patients

Prakriti	Percentage of Patients
Pitta	10%
Kapha	45%
Vata-Kapha	30%
Vata-Pitta	10%
Pitta-Kapha	5%

Table 5: *Agni* wise distribution of patients

Agni	Percentage of Patients
Sama	25%
Manda	25%
Vishama	10%
Tikshana	40%

Table 6: Disease wise distribution of patients

Disease	Percentage of Patients
Polycystic ovarian disease	50%
Psorasis	15%
Vasantika Vamana	10%
Indralupta	5%
Allergic Dermatitis	10%
Asthma	5%
Hypothyroidism	5%

Inclusive Criteria

1. Age between 20 and 40 years.
2. Patients suffering from *Kapha* or *Kapha* associated with *Pitta* disorders.
3. Disease includes polycystic ovarian disease, hypothyroidism, asthma, allergic dermatitis *Indralupta*, psoriasis, *Bahudosha Avastha* in any disease.

Exclusive Criteria

1. Age below 20 years and above 40 years.
2. Patients suffering from tuberculosis, ischemic heart disease, hypertension, carcinoma, HIV and other life threatening and complicated diseases.

Haematological investigations

Blood for HB, TC, DC, and ESR. Hemoglobin, total leucocyte Count, differential count, erythrocyte sedimentation rate were done.

Biochemical investigations

Lipid profile, FBS, blood urea, serum creatinine, A/G ratio, total protein, SGPT, and SGOT, HIV, Hbsag.

Criteria for Assessment

1. On the basis of various aspects of *Vamana Karma*.
2. On the basis of overall improvement in his/her wellbeing.

Grading

***Kapha* Index Score (KIS) : Objective**

Grade	***Kapha* Symptom Profile**
4	Severe *Kapha* dominance: persistent heaviness, excessive salivation, nasal congestion, marked lethargy
3	Moderate *Kapha* symptoms: heaviness after meals, mild cough, sluggishness, slight coating on tongue
2	Mild *Kapha* traits: occasional dullness, minimal mucus, slight heaviness in body, tolerable postprandial symptoms
1	Near-normal: rare *Kapha* symptoms, lightness in body, clear tongue, alertness maintained
0	Optimal *Kapha* balance: no heaviness, clear senses, normal salivation, active and energetic state

Agni - Bala

Grade	Agni Type	Clinical Indicators
0	*Mandagni*	Poor appetite, heavy abdomen, delayed digestion (>6 hrs), frequent bloating/Ama symptoms
1	*Vishamagni*	Irregular appetite and digestion; alternating heaviness and hunger; variable gut response
2	*Teekshagni*	Intense hunger, fast digestion (<2 hrs), but risk of hyperacidity or irritability
3	*Emerging Samagni*	Stable appetite, moderate digestion (3–4 hrs), mild post-meal lightness, no Ama signs
4	*Samagni*	Ideal hunger rhythm, timely digestion (4–5 hrs), complete post-meal lightness, no bloating or *Ama*

***Srotoshuddhi* Assessment Scale**

Grade	Signs of Channel Cleansing (*Srotoshuddhi*)
0	No noticeable change; persistent blockage symptoms (e.g., nasal congestion, unclear voice, anhidrosis)
1	Mild improvement; occasional ease in breathing or slight voice clarity, minimal sweating
2	Moderate cleansing; improved airflow, clearer speech, and mild spontaneous sweating
3	Marked cleansing; lightness in chest, fluent speech, moderate healthy perspiration
4	Excellent *Srotoshuddhi*; unobstructed breathing, crystal-clear voice, and well-regulated sweating post-*Vamana*

Psychophysiological Response Scale

Grade	Mood, Mental Clarity, Sleep Quality, and Anxiety
0	No improvement or worsening; persistent anxiety, poor sleep, dullness, mental cloudiness
1	Mild improvement; occasional sleep disturbances, slight mood elevation, minor anxiety reduction
2	Moderate improvement; improved sleep consistency, clearer thinking, reduced anxiety, stable mood
3	Marked improvement in mental clarity, calmness, and sleep quality; rare anxiety symptoms
4	Excellent psychophysiological balance; joyful mood, sharp clarity, sound sleep, complete absence of anxiety symptoms

Skin Clarity and Texture Index (*Bhrajaka Pitta*)

Grade	Skin Appearance
0	Dull complexion, rough texture, excessive oiliness or dryness; no visible improvement post- Vamana
1	Slight improvement in glow; minimal change in smoothness or oiliness; uneven skin tone persists
2	Moderate glow with improved texture; oiliness/balance slightly restored; some patches may remain
3	Noticeable clarity and smoothness; balanced oil secretion; overall healthier appearance
4	Radiant glow, soft and even texture, balanced skin tone and moisture; optimal Bhrajaka Pitta response

***Kapha*-Specific Symptom Relapse Monitoring**

Grade	Symptom Status
0	No recurrence of any Kapha-related symptoms throughout the 1–3 month follow up
1	Mild relapse (e.g., occasional cough or nasal congestion, <1 episode/month)
2	Moderate relapse (e.g., sinusitis, indigestion, 1–2 episodes/month, self-limiting)
3	Frequent relapse (e.g., weekly symptoms, moderate impact on daily life)
4	Severe relapse (e.g., persistent symptoms requiring medical treatment)

Ama Clearance Index

Grade	Description
0 - No Ama	No tongue coating, normal taste, no odor or bloating
1 - Mild Ama	Thin tongue coating, occasional bloating, mild taste alteration
2 - Moderate Ama	Moderate tongue coating, persistent bloating, altered taste, mild body odor
3 - Severe Ama	Thick tongue coating, constant bloating, foul odor, strong taste aversion

Objective Parameters

NCEP ATP III (National Cholesterol Education Program Adult Treatment Panel III) and AHA/ACC guidelines

Total Cholesterol (TC)

Value (mg/dL)	Grade	Interpretation
<200	0	Desirable
200-239	1	Borderline high
≥ 240	2	High

Low-Density Lipoprotein (LDL) - "Bad" Cholesterol

Value (mg/dL)	Grade	Interpretation
<100	0	Optimal
100-129	1	Near optimal
130-159	2	Borderline high
160-189	3	High
≥ 190	4	Very high

High-Density Lipoprotein (HDL) – "Good" Cholesterol

Value (mg/dL)	Grade	Interpretation
< 40 (men), < 50 (women)	2	Low (High risk)
40–59	1	Borderline
≥ 60	0	High (Protective)

Triglycerides (TG)

Value (mg/dL)	Grade	Interpretation
<150	0	Normal
150-199	1	Borderline high
200-499	2	High
≥ 500	3	Very high

Non-HDL Cholesterol = Total Cholesterol – HDL

Value (mg/dL)	Grade	Interpretation
<130	0	Optimal
130-159	1	Near optimal
160-189	2	Borderline high
190-219	3	High
≥ 220	4	Very high

Results

Table: Effect of *Vamana karma* on Subjective and Objective Parameters (paired t-test)

S.no	Subjective & Objective Parameters	Mean		Improvement %	S.D Difference	S.E	T19-Value
		BT	AT				
1	*Agni Bala*	1.9	2.9	37.3 %	0.888	0.198	4.789
2	Psychophysiological response scale	1	1.4	40 %	0.587	0.131	2.665
3	Skin clarity & texture	1.9	1.5	21.05 %	1.1959	0.256	1.7562
4	*Ama* clearance Index	1.1	0.8	37.2 %	0.4894	0.1094	3.1986
5	*Srotosudhi* index	1.4	2.5	38.5 %	0.8944	0.2	6
6	*Kapha* index score	2.3	1.1	52.1 %	0.7164	0.1602	7.8037
7	Total cholesterol	0.5	0.2	60 %	0.6387	0.1428	1.7506
8	LDL	0.6	0.5	16.6 %	0.7452	0.1666	0.9002
9	HDL	1.4	1.6	14.2 %	0.7164	0.1602	1.5607
10	Triglycerides	0.5	0.3	40 %	0.6156	0.1376	1.453
11	Cholesterol	0.5	0.7	40 %	0.7678	0.1717	1.165
Overall Improvement = 36.08%							

BT: Before Treatment, AT: After Treatment, S.D: Standard Deviation difference, S.E: Standard Error, LDL: Low-density lipoprotein, HDL: High-density lipoprotein

Figure 1: Improvement % of Subjective Parameters

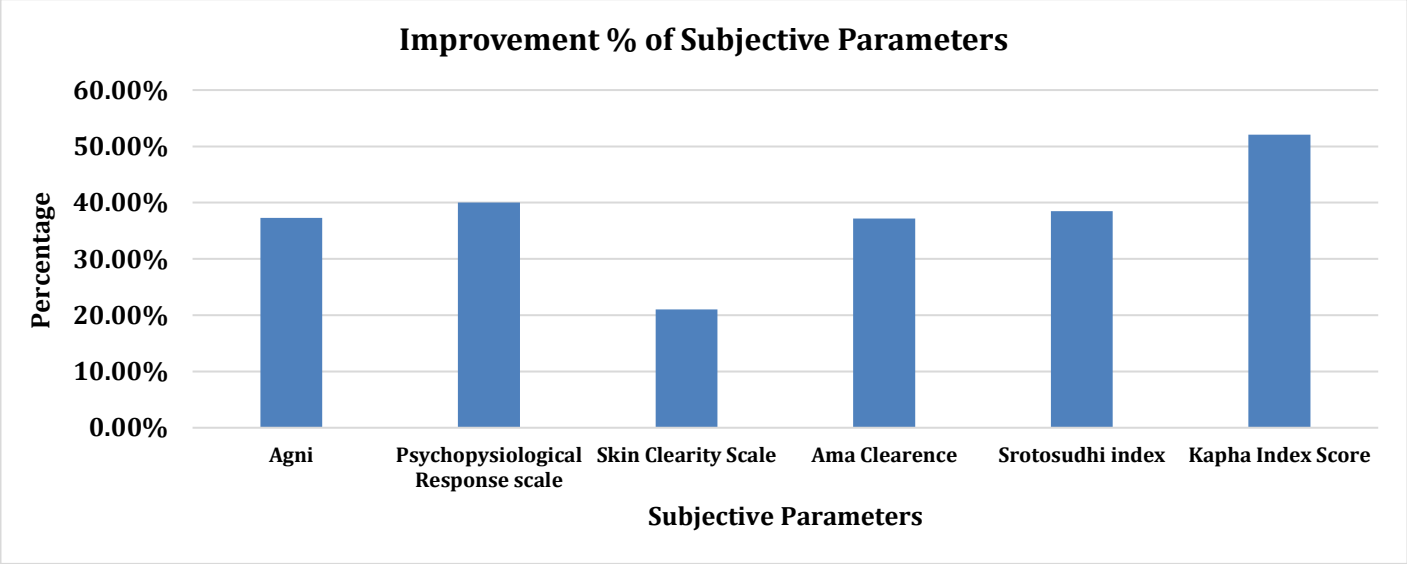
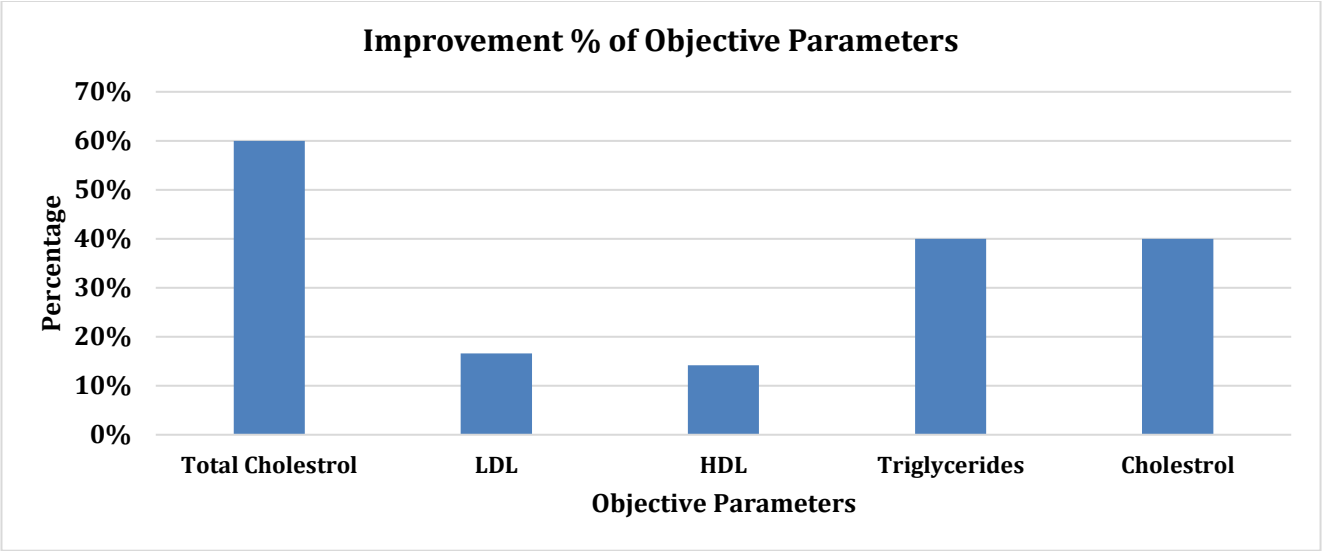


Figure 2: Improvement % of Objective Parameters



LDL: Low-density lipoprotein, HDL: High-density lipoprotein

Interpretation of Results: Clinical Impact of *Vasanta Vamana* on subjective and Objective Parameters

Subjective Parameters: The current study aimed to evaluate the therapeutic efficacy of *Vasantha Vamana Karma* using both subjective and objective parameters in a structured format. The pre- and post-intervention values were analyzed statistically with paired *t*-test (T19), and the percentage improvement and standard deviations (SD) were recorded.

The subjective parameter analysis of the 20-case series demonstrates significant improvements across multiple domains of health following *Vasanta Vamana Karma*. *Agni Bala,* representing digestive strength, showed a notable improvement of 37.3%, supported by a highly significant t-value (4.789). This indicates enhanced digestive efficiency and metabolic restoration, aligning well with classical Ayurvedic principles that emphasize the centrality of *Agni* in overall health. Psychophysiological responses also improved by 40%, with moderate statistical significance (t=2.665), reflecting reduced mental stress, emotional lightness, and better psychosomatic integration after detoxification. Skin clarity and texture demonstrated a modest yet meaningful improvement of 21.05%, though with marginal significance (t= 1.7562). This suggests enhanced *Bhrajaka Pitta* function and partial removal of underlying *Ama*, though individual variations in skin response were evident. A substantial improvement was seen in the *Ama* Clearance Index, which increased by 37.2% (t= 3.1986), confirming effective systemic detoxification-a primary therapeutic intention of *Vamana*. One of the most significant outcomes was observed in *Srotoshuddhi*, with a 38.5% improvement and a highly significant t-value of 6.0, indicating superior restoration of microchannel function, improved circulation, and enhanced physiological fluid dynamics.

The *Kapha* Index Score showed the highest improvement, rising by 52.1% with a t-value of 7.8037.

This strongly validates the core purpose of *Vamana* is effective elimination of aggravated *Kapha* and re-establishment of *Doshic* balance. Overall, these findings collectively affirm that *Vasanta Vamana Karma* produces wide-ranging subjective benefits involving digestion, mental clarity, detoxification, and dosha equilibrium.

Objective Parameters: The biochemical outcomes observed in this 20-case clinical series of *Vasanta Vamana Karma* demonstrate notable modulation of lipid metabolism and metabolic homeostasis. Total Cholesterol showed a substantial reduction of 60%, accompanied by a marginally significant t-value (1.7506), suggesting a favourable lipid-lowering trend. This decline reflects the classical indication of Vamana in mitigating *Kapha-Medodushti* and improving cardiovascular risk markers. LDL levels showed a modest reduction of 16.6%, though not statistically significant (t=0.9002). While the change is mild, it still indicates a directionally positive impact on atherogenic lipoproteins, possibly requiring a longer follow-up period or larger sample size for clearer statistical validation. HDL, the protective lipoprotein, demonstrated a 14.2% increase with a marginal t-value (1.5607). This suggests improved lipid transport and enhanced metabolic efficiency post-therapy, aligning with Ayurvedic expectations of systemic purification. A meaningful decline of 40% was noted in triglyceride levels (t=1.453), reinforcing the therapeutic potential of *Vamana* in correcting *Kapha*-related metabolic disorders. This reduction is particularly relevant in managing dyslipidemia and improving overall lipid balance. One parameter labelled as "Cholesterol" showed a 40% increase (t = 1.165), which is refers to VLDL. Overall, the average biochemical improvement of 36.08% across all parameters highlights the potential of *Vasanta Vamana Karma* as an effective metabolic corrective therapy with promising cardiometabolic benefits.

Clinical Summary: *Vasanta Vamana* significantly improved multiple subjective parameters including *Kapha, Ama*, and *Agni*, with statistically robust changes. Objective lipid profile markers also showed encouraging trends, particularly in triglyceride and cholesterol reduction. This supports the classical Ayurvedic notion that *Vamana* not only detoxifies but also reestablishes systemic balance (*Dosha-Samyata*), metabolic regulation (*Agni-Vardhana*), and psycho-somatic harmony.

DISCUSSION

The present 20-case clinical series on *Vasanta Vamana Karma* provides valuable insight into the multidimensional therapeutic impact of seasonal emesis therapy, especially when administered during spring (*Vasanta Ritu*), the period indicated for *Kapha* elimination. The findings from both subjective and objective parameters strongly align with classical Ayurvedic principles, validating the relevance of *Shodhana* therapy in contemporary clinical practice.

A significant outcome was observed in *Agni Bala*, showing a 37.3% mean improvement with notable statistical significance. This reflects the classical claim that *Vamana* restores digestive strength by eliminating accumulated *Kapha* and correcting *Agni* dysfunction. Similarly, the *Ama* Clearance Index and *Srotoshuddhi* Index exhibited 37.2% and 38.5% improvement respectively, with high T-values, reinforcing the *Shodhana* concept of systemic detoxification and restoration of microchannel purity. These outcomes demonstrate improved circulation, enhanced tissue nutrition, and better waste elimination.

Another noteworthy finding was the 52.1% improvement in *Kapha* Index Score, the highest among subjective parameters, emphasizing *Vamana's* direct action on *Kapha* elimination (*Kapha Nirharana*). Enhanced psychophysiological response (40% improvement) further suggests *Vamana's* ability to reduce stress, emotional stagnation, and psychosomatic involvement- likely due to the cathartic release and purification effect on both body and mind.

Skin clarity showed only marginal improvement, indicating that external manifestations may require repeated seasonal *Vamana* or adjunct therapies such as *Raktamokshana* or *Lepa* for more pronounced changes.

Objective biochemical parameters demonstrated *Vamana's* metabolic benefits. There was a 60% reduction in total cholesterol and a 40% decline in triglycerides, suggesting a significant lipid-lowering effect. Improvements in HDL and LDL values, though statistically marginal, indicate favorable modulation of lipid metabolism. These findings support the concept that *Kapha-Medas* imbalance can be effectively corrected through *Vamana.*

The contradictory increase in one cholesterol parameter indicates the need for clarification (possibly VLDL) or repeat testing.

Overall, the average improvement of 36.08% across all parameters confirms the broad clinical utility of *Vasanta Vamana*. The findings affirm that performing *Vamana* in the *Kapha*-aggravating spring season enhances therapeutic efficacy, supporting both classical recommendations and modern clinical observations.

CONCLUSION

This 20-case clinical series on *Vasanta Vamana Karma* demonstrates that seasonal therapeutic emesis, when administered during spring, yields significant benefits across metabolic, psychological, and physiological domains. The marked improvements in *Agni Bala, Ama* clearance, *Srotoshuddhi*, and *Kapha* Index confirm the classical Ayurvedic principle that *Vamana* is most effective in *Vasanta Ritu* when *Kapha* is naturally aggravated and readily eliminated. Objective outcomes, including substantial reductions in total cholesterol and triglycerides, further highlight its potential role in correcting *Kapha-Medas* disorders and metabolic dysfunctions. Moderate improvement in psychophysiological parameters suggests an added impact on mental well-being. Although certain lipid parameters showed marginal or nonsignificant changes, the overall average improvement of 36.08% reflects robust clinical effectiveness. These findings reinforce *Vasanta Vamana* as a valuable seasonal purification therapy, supporting its integration into preventive and therapeutic strategies in modern Ayurvedic practice.

Authors' Contributions

Dr Sandeep kumar and Dr Pratyush Manas Mohapatra has conducted the study clinically under the supervision of Prof.Dr Praveen Kumar Madikonda, has provided the design and protocol for conducting the study along with mentorship.

Conflicts of Interest

The author declares that there are no conflicts of interest regarding the publication of the article.

Limitations

The present 20-case series has a small sample size, lacks a control group, and shows variability in patient selection and *Vamana* protocols. Seasonal influences and subjective symptom assessments may affect consistency. Short follow-up duration also limits understanding of long-term outcomes and generalizability of *Vasanta Vamana* results.

Declaration of patient consent

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

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