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ROLE OF *ASHWAGANDHA GHRITA* IN THE MANAGEMENT OF *KARSHYA ROGA*: AN *AYURVEDIC* CONCEPTUAL AND DRUG REVIEW

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ABSTRACT

Background: *Karshya Roga* is a nutritional disorder characterized by reduced body weight, diminished muscle mass, weakness, poor appetite and decreased physical capacity. According to *Ayurveda*, its development is mainly associated with inadequate dietary intake, impaired *Agni*, improper *Dhatu Poshana* and aggravation of *Vata Dosha*. *Ashwagandha Ghrita*, containing *Ashwagandha* (*Withania somnifera* Dunal) and *Go-Ghrita*, possesses *Brimhana*, *Balya*, *Rasayana*, *Mamsavardhaka* and *Vata-Shamaka* properties that may be beneficial in managing *Karshya*. **Materials and Methods:** Information was collected from classical *Ayurvedic* texts, the *Ayurvedic Pharmacopoeia of India*, standard pharmacognosy books and relevant scientific publications. The collected literature was critically reviewed and interpreted in relation to the pathogenesis and management of *Karshya Roga*. **Results & Discussion:** The *Ushna Virya* of *Ashwagandha* may support *Agni*, while its *Guru* and *Snigdha Guna* counteract the *Laghu* and *Ruksha* qualities associated with aggravated *Vata*. Its *Brimhana* and *Mamsavardhaka* actions, supported by the nourishing properties of *Ghrita*, may improve appetite, nutrient assimilation, muscle development, physical strength, sleep and resistance to stress. **Conclusion:** *Ashwagandha Ghrita* is a rational *Ayurvedic* formulation for the management of *Karshya Roga*. Its combined digestive, nourishing, strength-promoting and adaptogenic actions may help restore body weight, muscle mass and functional capacity. However, standardized clinical studies are required to establish its efficacy and safety.

Keywords: *Ashwagandha*; *Ghrita*; *Karshya*; *Brimhana*; *Balya*; *Rasayana*

Introduction

Karshya is included among the disorders caused by insufficient nutrition and disturbed tissue nourishment. It is manifested by emaciation, prominent bony structures, reduced muscle mass, weakness, intolerance to exertion and diminished physical capacity. *Acharya Charaka* describes excessively lean individuals under *Ashta-Nindita Purusha* and explains that excessive fasting, consumption of inadequate or dry food, grief, excessive physical work, suppression of hunger and predominance of *Vata Dosha* contribute to the condition.¹

The development of *Karshya* involves impairment of *Jatharagni* and *Dhatvagni*, inadequate formation of *Ahara Rasa* and improper nourishment of successive *Dhatus*. The resulting depletion of *Rasa* and *Mamsa Dhātu* produces loss of body mass and strength. Persistent nutritional deficiency also reduces *Bala*, *Ojas* and resistance to disease. Therefore, management should not be restricted to weight gain. It should restore appetite, digestion, assimilation, tissue metabolism, physical strength and mental well-being.²

Ashwagandha Ghrita combines the restorative properties of *Ashwagandha* with the nourishing and carrier qualities of *Ghrita*. *Ashwagandha* is traditionally indicated in emaciation, weakness, fatigue and disorders associated with aggravated *Vata*. *Ghrita* is *Snigdha*, *Mridu*, nourishing and supportive of *Agni*, *Ojas*, memory and strength. Their combination provides a rational formulation for correcting dryness, tissue depletion and deficient nourishment in *Karshya Roga*.³

Materials and Methods

This conceptual drug review was prepared by collecting information from the *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Bhavaprakasha Nighantu*, *Dhanvantari Nighantu*, the Ayurvedic Pharmacopoeia of India and standard pharmacognosy texts. Relevant scientific literature concerning the phytochemistry, pharmacology and therapeutic effects of *Withania somnifera* was also reviewed. The collected information was organized under pharmacognostical, phytochemical, *Ayurvedic*, pharmacological and therapeutic headings and interpreted in relation to the pathogenesis of *Karshya*.⁴

Drug Review

Ashwagandha Ghrita

Ashwagandha Ghrita is a medicated lipid preparation in which the active constituents of *Ashwagandha* are incorporated into *Go-Ghrita* through the classical process of *Sneha Paka*. The root is the principal medicinal part of *Ashwagandha*. It is regarded as an important *Balya*, *Brimhana* and *Rasayana Dravya*. During preparation, *Ashwagandha Kalka* and *Kwatha* or *Kshira* are processed with *Ghrita* until the required *Sneha Siddhi Lakshanas* are achieved. This process allows the incorporation of both water-soluble and lipid-soluble constituents into the formulation.⁵

Taxonomical Classification

Taxonomical rank	Classification
Kingdom	Plantae
Division	Angiosperms
Class	Dicotyledonae

Taxonomical rank	Classification
Order	Solanales
Family	Solanaceae
Genus	<i>Withania</i>
Species	<i>Withania somnifera</i> (L.) Dunal
Common drug	<i>Ashwagandha</i>
Part used	Dried root

Vernacular Names

Language	Name
Sanskrit	<i>Ashwagandha</i> , <i>Varahakarni</i>
Hindi	Asgandh, Ashgandh
English	Indian ginseng, winter cherry
Bengali	Ashwagandha
Gujarati	Asandha, Ghoda Asoda
Marathi	Askandha
Tamil	Amukkira, Amukkirakizhangu
Telugu	Penneru, Ashwagandhi
Kannada	Hiremaddina Gida
Malayalam	Amukkuram
Punjabi	Asgandh
Urdu	Asgand Nagori

Synonyms

Synonym	Significance
<i>Ashwagandha</i>	Root possessing a horse-like characteristic odour
<i>Varahakarni</i>	Leaves resembling the ear of a boar
<i>Balada</i>	Promotes strength
<i>Balya</i>	Improves physical capacity
<i>Vajigandha</i>	Associated with vitality and strength
<i>Turangi-Gandha</i>	Having an odour comparable to that of a horse
<i>Kushthagandhini</i>	Possessing a characteristic strong smell
<i>Pushtida</i>	Promotes nourishment
<i>Kamrupini</i>	Having multiple therapeutic applications

Geographical Distribution

Withania somnifera is distributed in the drier subtropical regions of India and is commonly found in Rajasthan, Gujarat, Madhya Pradesh, Punjab, Haryana, Uttar Pradesh and Maharashtra.

It also occurs in the Mediterranean region, parts of Africa, the Middle East, Pakistan and Sri Lanka. The plant grows well in dry, well-drained, sandy or light red soil. Commercial cultivation is widely practised because the dried roots are extensively used in traditional medicines and herbal preparations.⁶

Morphological Characters

Ashwagandha is an erect, branched, evergreen or perennial undershrub that generally grows about 30–150 cm in height. The stem and branches are covered with fine stellate hairs. Leaves are simple, ovate, entire, dull green and arranged alternately, while the upper leaves may appear opposite. Flowers are small, greenish-yellow and occur in axillary clusters. The fruit is a small, smooth, orange-red berry enclosed within an enlarged papery calyx. Seeds are numerous, yellow, reniform and compressed. Roots are stout, fleshy, cylindrical, tapering, buff to greyish-yellow externally and creamy white internally.

Macroscopic Study According to API

The dried roots occur as unbranched or occasionally branched, straight or slightly curved cylindrical pieces. They usually measure approximately 6–12 mm in diameter, although thicker pieces may also be present. The external surface is buff, greyish-yellow or light brown and shows longitudinal wrinkles, fine striations and occasional transverse cracks. Root scars and remnants of lateral roots may be visible. The fracture is short and uneven. The cut surface shows a thin outer region and a comparatively broad, whitish woody portion with radiating lines. The odour is characteristic and slightly horse-like, while the taste is bitter, acrid and slightly mucilaginous.⁷

Microscopic Study According to API

A transverse section of the mature root shows a cork composed of several rows of tangentially elongated, thin-walled cells containing brownish matter. The secondary cortex consists of parenchymatous cells, some of which contain starch grains. Stone cells may occur singly or in small groups. The phloem is comparatively narrow and contains sieve elements, phloem parenchyma and fibres. The cambium forms a continuous ring. The secondary xylem occupies the major portion of the root and consists of vessels, tracheids, fibres and xylem parenchyma. Medullary rays are generally uni- to multiseriate and extend radially through the xylem. Vessels show pitted, bordered-pitted or reticulate thickening. The powder is creamy white to light brown and shows cork cells, fragments of vessels, lignified fibres, parenchymatous cells and numerous simple and compound starch grains.⁸

Chemical Composition

Chemical group	Important constituents
Withanolides	Withanolide A, withanolide D, withaferin A
Steroidal lactones	Withanone, withanolides and related ergostane compounds
Alkaloids	Withanine, somniferine, anaferine, anahygrine, cuscohygrine
Glycowithanolides	Sitoindosides VII–X
Sterols	β -sitosterol, stigmasterol
Amino acids	Alanine, glycine, proline, tyrosine, valine

Chemical group	Important constituents
Carbohydrates	Starch and reducing sugars
Other compounds	Flavonoids, phenolic compounds, iron and fatty acids
Principal <i>Ghrita</i> constituents	Triglycerides, phospholipids, cholesterol and fat-soluble vitamins

The biological activities of *Ashwagandha* are mainly associated with withanolides, glycowithanolides and alkaloids. Withanolides are naturally occurring steroidal lactones that exhibit adaptogenic, antioxidant, anti-inflammatory, neuroprotective and immunomodulatory effects. The lipid matrix of *Ghrita* may support dissolution and intestinal absorption of selected lipophilic constituents, although the bioavailability of the finished classical formulation requires further clinical investigation.⁹

Ayurvedic Properties

Parameter	<i>Ashwagandha</i>	<i>Go-Ghrita</i>
<i>Rasa</i>	<i>Madhura, Tikta, Kashaya</i>	Predominantly <i>Madhura</i>
<i>Guna</i>	<i>Guru, Snigdha</i>	<i>Guru, Snigdha, Mridu</i>
<i>Virya</i>	<i>Ushna</i>	<i>Shita</i>
<i>Vipaka</i>	<i>Madhura</i>	<i>Madhura</i>
<i>Dosha Karma</i>	<i>Vata-Kapha-Shamaka</i>	Mainly <i>Vata-Pitta-Shamaka</i>
<i>Dhatu Karma</i>	<i>Mamsa-Vardhaka, Shukrala</i>	<i>Rasa, Mamsa, Majja and Shukra Poshaka</i>
Principal actions	<i>Balya, Brimhana, Rasayana, Vajikarana</i>	<i>Balya, Medhya, Ojovardhaka, Agnivardhaka</i>
Major indications	<i>Karshya, Daurbalya, Kshaya, Nidranasha</i>	<i>Vata Roga</i> , weakness, tissue depletion

Classical texts describe *Ashwagandha* as *Balya, Brimhana, Rasayana, Shukrala* and particularly beneficial in emaciation and disorders caused by *Vata*. Its *Guru* and *Snigdha Guna* oppose the *Laghu, Ruksha* and *Chala* qualities that dominate in *Karshya*. Its *Madhura Vipaka* supports tissue nourishment, while *Ushna Virya* assists digestion and reduces excessive *Vata*.¹⁰

Pharmacological Actions

Adaptogenic and Antistress Action

Ashwagandha is widely studied as an adaptogenic herb. Its root constituents may help regulate stress-related neuroendocrine responses and reduce the adverse effects of prolonged physical and psychological stress. This action is relevant because anxiety, disturbed sleep and chronic stress can reduce appetite and contribute to poor nutritional status. Improvement in stress tolerance may encourage regular food intake, restful sleep and better recovery.

Anabolic and Nutritional Action

Experimental and clinical findings indicate that *Ashwagandha* may support muscle strength, exercise capacity and recovery. Its traditional *Brimhana* and *Mamsavardhaka* actions correspond conceptually to improvement in lean tissue and physical endurance. *Ghrita* supplies concentrated calories and essential fatty acids, making the combination useful when increased nourishment is required.

Antioxidant Action

Glycowithanolides and phenolic constituents of *Ashwagandha* demonstrate free-radical-scavenging activity and support endogenous antioxidant enzymes. Reduction of oxidative stress may protect cellular structures, assist tissue recovery and help maintain normal metabolic functions. This is important in chronic undernutrition, where oxidative imbalance and recurrent illness may further impair growth and tissue repair.

Immunomodulatory Action

Ashwagandha has demonstrated modulation of immune-cell activity and inflammatory mediators in experimental studies. Rather than acting only as a nonspecific stimulant, it may support a balanced immune response. This property may be helpful for undernourished individuals who experience low resistance, recurrent infections or delayed recovery.¹¹

Anti-inflammatory Action

Withanolides, particularly withaferin A, influence inflammatory pathways and the production of inflammatory mediators. Control of persistent low-grade inflammation may promote improved appetite and more effective utilization of nutrients. Nevertheless, evidence from isolated constituents should not be directly treated as proof of equal activity in every classical formulation.

Neuroprotective and Anxiolytic Action

Ashwagandha exhibits anxiolytic, calming and neuroprotective effects in preclinical and selected clinical studies. These actions may support sleep, concentration and emotional stability. Improved sleep decreases unnecessary energy expenditure and allows better recovery, while reduced anxiety can positively influence appetite and eating behaviour.¹²

Digestive and Bioavailability-Supporting Action

The *Ushna Virya* of *Ashwagandha* may prevent the excessive heaviness that can accompany nourishing therapy. *Ghrita* in a suitable quantity supports lubrication, palatability and energy intake. The *Sneha Paka* procedure helps transfer selected hydrophilic and lipophilic constituents into a single dosage form. Thus, the formulation may combine digestion-supporting and tissue-building actions.

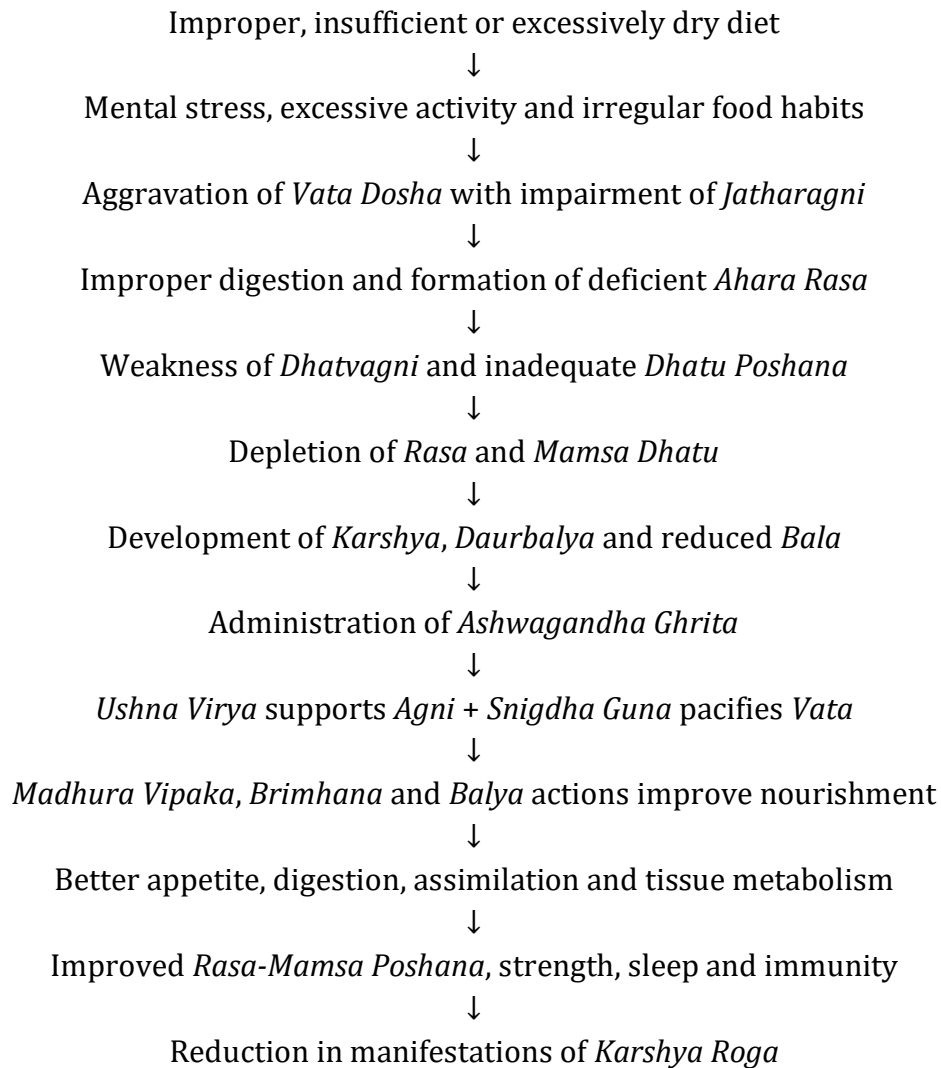
Drug and Dosage

Preparation	General dose	Vehicle and time	Therapeutic purpose
<i>Ashwagandha Churna</i>	3–6 g	With warm milk, once or twice daily	<i>Balya</i> and <i>Brimhana</i>
<i>Ashwagandha Ghrita</i>	5–10 g	With warm milk, generally before or	<i>Karshya</i> , weakness and <i>Vata</i> predominance

Preparation	General dose	Vehicle and time	Therapeutic purpose
		after food according to <i>Agni</i>	
Paediatric dose	According to age, weight and digestive capacity	With warm milk or suitable food	Nutritional and strength support
<i>Ashwagandha Kshirapaka</i>	40–80 ml	Warm, under supervision	Emaciation and fatigue

The dose should be individualized after assessing age, digestive capacity, nutritional status, bowel pattern, disease severity and associated medical conditions. It should be used cautiously in severe indigestion, acute diarrhoea, marked obesity or intolerance to milk products. Clinical use in children, pregnancy, autoimmune illness or with sedative and thyroid medicines should remain under qualified medical supervision.¹³

Probable Mode of Action in *Karshya Roga*



Discussion

The fundamental pathology of *Karshya* is inadequate tissue nourishment associated with *Vata* predominance and disturbed digestive-metabolic activity. Simply providing calorie-rich food may not produce the expected result when appetite, digestion or assimilation remains weak.

Ashwagandha Ghrita provides a balanced therapeutic approach. The *Ushna Virya* of *Ashwagandha* supports digestion, while its *Guru* and *Snigdha Guna* promote nourishment. These properties help correct both the digestive and tissue-depletion components of the disease.¹⁴

The combination also demonstrates the importance of the classical dosage form. *Ashwagandha* provides *Balya*, *Brimhana*, *Rasayana* and *Mamsavardhaka* actions, whereas *Ghrita* supplies energy, lubrication and a lipid vehicle for selected phytoconstituents. Its adaptogenic and anxiolytic effects may reduce stress-related loss of appetite and disturbed sleep. Antioxidant and immunomodulatory actions may support recovery and resistance to recurrent illness. Therefore, the formulation may improve functional outcomes such as appetite, stamina, sleep, activity and muscle strength along with body weight.¹⁵

Despite its strong pharmacological basis and long traditional use, evidence specific to standardized *Ashwagandha Ghrita* in *Karshya* remains limited. Differences in raw-drug quality, preparation method, dosage, dietary regimen and duration can influence clinical outcomes. Future randomized clinical studies should evaluate body weight, body mass index, mid-arm circumference, muscle strength, dietary intake, haemoglobin, serum proteins and quality of life. Such studies should also document adverse effects and formulation quality to establish reproducible evidence.¹⁶

Conclusion

Ashwagandha Ghrita is a rational *Ayurvedic* formulation for the management of *Karshya Roga* because it addresses impaired digestion, aggravated *Vata*, inadequate tissue nourishment, reduced strength and psychological stress. Its *Brimhana*, *Balya*, *Rasayana*, *Mamsavardhaka* and *Vata-Shamaka* properties are supported by reported adaptogenic, antioxidant, immunomodulatory, anti-inflammatory and strength-promoting activities. When prescribed according to age, *Agni*, nutritional status and clinical condition, it may improve appetite, tissue nourishment, muscle development, stamina, sleep and overall well-being. However, well-designed clinical trials on the standardized formulation are required to confirm its therapeutic effectiveness and safety.

Conflict of Interest- Nil.

Source of Support- None.

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