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PHARMACOLOGICAL PERSPECTIVE OF *VIRECHANA DRAVYA* IN *AYURVED*

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ABSTRACT

Background: In *Ayurveda*, *Virechana Karma* is considered the prime *Shodhana* therapy for the elimination of vitiated *Pitta Dosha* and associated toxins from the body. The efficacy of this procedure largely depends on the pharmacological properties of *Virechana Dravya*, which possess specific attributes that facilitate controlled purgation. Classical texts have elaborately described these drugs based on *Rasa*, *Guna*, *Virya*, *Vipaka*, and *Prabhava*, while modern pharmacology attempts to explain their action through laxative, purgative, and hepatobiliary Mechanisms. **Aim:** To analyze the pharmacological perspective of *Virechana Dravya* in *Ayurveda* and correlate it with modern pharmacological principles. **Objectives:** To study the classical properties of *Virechana Dravya*. To understand their Mechanism of action based on *Ayurvedic* principles. To correlate *Ayurvedic* pharmacodynamics with modern pharmacological actions. To evaluate their role in eliminating *Pitta* and *Ama* **Materials and Methods:** This is a conceptual and literary review based on classical *Ayurvedic* texts such as *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*, along with modern pharmacological literature. Data regarding *Virechana Dravya* were collected, analyzed, and interpreted to understand their dual perspective. **Results:** *Virechana Dravya* predominantly exhibit *Ushna Virya*, *Tikshna Guna*, *Sara Guna*, and *Adhobhagahara Prabhava*, which facilitate downward movement of *Dosha*. They act on *Annavaha* and *Purishavaha Srotas*, promoting expulsion of morbid *Pitta*. Modern correlation shows that these drugs possess stimulant, osmotic, and irritant laxative actions, along with hepatoprotective and choleretic effects. Their action enhances intestinal motility,

increases bile secretion, and aids detoxification. **Conclusion:** The pharmacological action of *Virechana Dravya* reflects a well-defined integration of classical *Ayurvedic* principles with modern pharmacology. Their properties ensure effective elimination of vitiated *Pitta* and restoration of *Agni*, highlighting their therapeutic importance in *Pitta*-dominant disorders.

Keywords: *Virechana Dravya*, *Shodhana*, *Pitta Dosha*, *Ayurvedic Pharmacology*, *Purgative Action*, *Agni*

INTRODUCTION

Ayurveda considers *Shodhana Chikitsa*[1] as a superior therapeutic approach for eliminating vitiated *Doshas* from the body, among which *Virechana Karma*[2] holds prime importance for the management of *Pitta Dosha*[3]. It is a bio-cleansing procedure that expels accumulated toxins through the lower gastrointestinal tract. The effectiveness of *Virechana*[5] largely depends on the proper selection and administration of *Virechana Dravya*[6], which are specifically designed to induce controlled purgation. These drugs are not only eliminative in nature but also help in restoring the physiological balance of *Dosha*, *Dhatu*, and *Agni*.

From a classical perspective, *Virechana Dravya* are described based on their *Rasa*, *Guna*, *Virya*, *Vipaka*, and *Prabhava*, which collectively determine their pharmacodynamic action. Most of these drugs possess *Tikta*, *Katu*, and *Madhura Rasa*, along with *Ushna Virya*, *Tikshna* and *Sara Guna*, facilitating the liquefaction (*Vilayana*[7]) and downward movement (*Adhobhagahara*[8]) of vitiated *Pitta*. These properties enable the drugs to dislodge the *Doshas* from their sites, bring them into the *Koshtha*[9], and eliminate them effectively. Thus, the classical understanding emphasizes a holistic pharmacological approach rather than a single mechanistic action.

In modern pharmacology, the action of *Virechana Dravya* can be understood in terms of their laxative and purgative effects, which may be categorized as stimulant, osmotic, or bulk-forming agents. These drugs act by increasing intestinal motility, altering fluid and electrolyte transport, and stimulating the enteric nervous system. Additionally, several *Virechana Dravya* have been found to possess hepatoprotective, choleretic, and detoxifying properties, which support liver function and enhance bile secretion. This correlation provides a scientific basis for the classical claims of *Pitta Shodhana*[10] and systemic detoxification.

Therefore, the pharmacological perspective of *Virechana Dravya* represents a unique integration of traditional *Ayurvedic* principles with contemporary biomedical understanding.

While *Ayurveda* explains their action through *Dosha*, *Agni*, and *Srotas* dynamics, modern science interprets the same through physiological and biochemical Mechanisms. Understanding this dual perspective is essential for the rational and effective use of *Virechana Dravya* in clinical practice, especially in the management of *Pitta*-dominant disorders and metabolic conditions.

AIM AND OBJECTIVES

Aim:

To analyze the pharmacological perspective of *Virechana Dravya* in *Ayurveda* and correlate it with modern pharmacological principles.

Objectives:

- To study the classical properties of *Virechana Dravya*
- To understand their Mechanism of action based on *Ayurvedic* principles
- To correlate *Ayurvedic* pharmacodynamics with modern pharmacological actions
- To evaluate their role in eliminating *Pitta* and *Ama*

MATERIAL AND METHODS

This study is a conceptual and literary review based on classical *Ayurvedic* texts and relevant modern pharmacological literature. information regarding *Virechana Dravya* was collected from authoritative texts such as *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*, along with their commentaries, focusing on *Rasa*, *Guna*, *Virya*, *Vipaka*, and *Prabhava*. Additional data were gathered from modern textbooks, research articles, and peer-reviewed journals to understand the pharmacological actions such as laxative, purgative, hepatoprotective, and choleretic effects. The collected information was critically analyzed and correlated to establish a comprehensive understanding of the pharmacological perspective of *Virechana Dravya* from both *Ayurvedic* and modern viewpoints.

CONCEPTUAL STUDY

VIRECHANA DRAVYA

In *Ayurveda*, *Virechana Dravya* are a specialized group of therapeutic substances used for inducing controlled purgation, primarily aimed at eliminating vitiated *Pitta Dosha*. Among the *Panchakarma* procedures, *Virechana Karma*[12] is considered the most effective for *Pitta Shodhana*[13], as it removes accumulated toxins (*Ama*) and morbid *Dosha* through the lower

pathway (*Adhobhaga*[14]). These drugs are not just purgatives in a simple sense; they act at multiple levels including *Dosha*, *Dhatu*, and *Srotas*, thereby restoring physiological balance and improving digestive and metabolic functions.

Fundamental Principles Governing *Virechana Dravya*

The action of *Virechana Dravya* is governed by classical pharmacological parameters described in *Ayurveda*. These principles explain how a drug behaves in the body and produces its therapeutic effect.

Parameter	**Description**	**Role in *Virechana***
Rasa	Taste of the drug	Initiates pharmacological interaction
Guna	Physical qualities	Determines penetration and action
Virya	Potency (hot/cold)	Controls intensity and direction
Vipaka	Post-digestive effect	Sustains therapeutic outcome
Prabhava	Specific action	Unique purgative effect

Mechanism of Action[15] of *Virechana Dravya*

The process of action of *Virechana Dravya* can be explained in a sequential and physiological manner.

Stage	**Ayurvedic Explanation**	**Functional Outcome**
Absorption[16]	Drug enters systemic circulation	Activation of *Agni*
Liquefaction[17]	*Dosha Vilayana*	Breakdown of morbid *Dosha*
Mobilization[18]	Movement to *Koshtha*	Centralization of toxins
Stimulation[19]	Increase in intestinal motility	Enhanced peristalsis
Expulsion[20]	Elimination via *Guda*	Complete detoxification

Classification of *Virechana Dravya*

Virechana Dravya are classified based on their intensity and pharmacological action.

Based on Intensity

Type	Characteristics	Clinical Use
Mridu Virechaka[21]	Mild action	Children, elderly, weak patients
Madhyama Virechaka[22]	Moderate action	General conditions
Tikshna Virechaka[23]	Strong action	Severe *Dosha Dushti*

Based on Mode of Action

Type	Function	Example
Anulomana[24]	Facilitates downward movement	*Haritaki*
Sramsana[25]	Loosens adhered *Dosha*	*Trivrit*
Bhedana[26]	Breaks hard stool	*Danti*
Rechana[27]	Causes active purgation	*Dravanti*

Properties of Ideal *Virechana Dravya*

An ideal *Virechana Dravya* should possess specific qualities to ensure safe and effective purgation.

Property	Significance
Ushna Virya[28]	Enhances digestive fire and liquefies *Dosha*
Tikshna Guna[29]	Penetrates deeply and breaks obstruction
Sara Guna[30]	Promotes movement and expulsion
Sukshma Guna[31]	Reaches minute channels
Vyavayi[32]	Acts quickly before digestion
Adhobhagahara[33]	Directs action downward

Important Classical *Virechana Dravya*

Drug	Botanical Name	Rasa	Guna	Virya	Vipaka	Main Action
Trivrit[34]	Operculina turpethum	*Tikta, Madhura*	*Laghu, Snigdha*	*Ushna*	*Madhura*	Strong purgative
Aragvadha[35]	Cassia fistula	*Madhura*	*Guru, Mridu*	*Sheeta*	*Madhura*	Mild purgative
Eranda Taila[36]	Ricinus communis	*Madhura*	*Snigdha, Guru*	*Ushna*	*Madhura*	Lubricant purgative
Haritaki[37]	Terminalia chebula	*Pancharasa*	*Laghu, Ruksha*	*Ushna*	*Madhura*	Anulomana
Danti[38]	Baliospermum montanum	*Katu, Tikta*	*Laghu, Tikshna*	*Ushna*	*Katu*	Strong purgative
Dravanti[39]	Croton tiglium	*Katu*	*Tikshna, Laghu*	*Ushna*	*Katu*	Drastic purgative

Pharmacological Actions of *Virechana Dravya*

Action Type	Mechanism	Example
Stimulant laxative[40]	Increases peristalsis	*Danti*
Osmotic laxative[41]	Retains water in intestine	*Aragvadha*
Lubricant laxative[42]	Softens stool	*Eranda Taila*
Hepatoprotective[43]	Protects liver cells	*Haritaki*
Choleretic[44]	Enhances bile secretion	*Trivrit*

Modern pharmacology explains the action of *Virechana Dravya* mainly through effects on intestinal motility, intestinal fluid balance, mucosal secretion, stool consistency, bile flow, and protection of hepatocytes from oxidative and inflammatory injury. In simple words, these drugs either push the bowel to move faster, pull water into the intestinal lumen, soften stool by lubrication, support liver cell integrity, or help bile move more efficiently from liver to intestine. This modern view does not replace the *Ayurvedic* concept of *Dosha Shodhana*, but it gives a physiological explanation for how these drugs produce downward elimination.

1. Stimulant Laxative Action

A stimulant laxative is a drug that directly or indirectly increases bowel propulsion. Pharmacologically, these agents act mainly on the intestinal mucosa and the enteric nervous system, especially in the colon, where they promote peristaltic contractions and reduce the time available for water reabsorption. As a result, stool moves faster, becomes easier to expel, and purgation occurs. In practice, this is the modern equivalent of a drug that forcefully initiates bowel evacuation rather than simply softening stool. Standard medical references describe stimulant laxatives as agents that enhance intestinal motility and facilitate bowel movements by promoting peristalsis.

In the context of *Virechana Dravya*, *Danti* is the best example of this group. *Danti* is regarded as a strong purgative because its action is not mild or passive. It is closer to a forceful evacuant. From a modern pharmacological angle, such a drug can be understood as one that irritates or stimulates the intestinal lining, activates local neural reflexes, and triggers propulsive colonic movement. This leads to repeated bowel contractions, reduced contact time of fecal matter with the colon, and a stronger purgative response. That is why it fits well under the stimulant laxative category. The broader pharmacology of plant-derived purgatives with this pattern is consistent with the known Mechanism of stimulant laxatives described in modern literature.

Mechanism of stimulant laxative action

Step	What happens	Clinical effect
1	Contact with intestinal mucosa	Local stimulation begins
2	Enteric nerve plexus gets activated	Peristaltic waves increase
3	Colonic transit time decreases	Less water reabsorption
4	Stool is pushed distally	Easy evacuation
5	Repeated propulsion may occur	Strong purgation

2. Osmotic Laxative Action

Osmotic laxatives work by increasing the amount of water retained inside the intestinal lumen. They create an osmotic gradient, which means water is drawn into the bowel or prevented from being reabsorbed back into the body. This makes stool softer, bulkier, and

easier to pass. The increased intraluminal fluid also stretches the bowel wall slightly, which can trigger reflex peristalsis and further support defecation. Modern references classify osmotic laxatives as agents that promote stool passage mainly by holding water in the intestine.

Aragvadha is a good example of this type of action. Its fruit pulp is traditionally known for smooth, gentle evacuation rather than harsh purgation. This pattern matches the osmotic model more than the stimulant model. In modern herbal pharmacology, *Cassia fistula* has been repeatedly described as having laxative activity, and its use in constipation has been evaluated in clinical and review literature. The gentle nature of its action suggests that it helps maintain moisture within the bowel and improves stool passage without the aggressive propulsive effect seen with stronger purgatives.

Mechanism of osmotic laxative action

Step	What happens	Clinical effect
1	Osmotically active compounds remain in bowel lumen	Water retention increases
2	Stool water content rises	Stool becomes soft
3	Bowel content volume increases	Distension stimulates reflex movement
4	Passage becomes easier	Gentle purgation

3. Lubricant Laxative Action

Lubricant laxatives help bowel evacuation by coating stool and sometimes the intestinal wall, which reduces friction during passage. This makes stool easier to move through the colon and rectum. The main effect is not strong stimulation of intestinal nerves and not primarily an osmotic pull of water. Instead, the bowel contents become smoother and less resistant to expulsion. In clinical medicine, castor oil is a classic purgative agent, but its behavior also includes a clear lubricant-like effect because it promotes easier passage of intestinal contents after its active metabolite is released in the bowel.

Eranda Taila is the best example here. Modern literature shows that after oral administration, castor oil is hydrolyzed by intestinal lipases to release ricinoleic acid, which is the active component responsible for the laxative effect. Ricinoleic acid acts locally in the gut and leads to bowel evacuation, with onset usually within a few hours. Because *Eranda Taila* is oily, unctuous, and classically associated with smooth downward movement, its practical modern interpretation includes stool softening and easier passage along with purgative action. So it is reasonable to place it under lubricant laxative action in a teaching table, while also remembering that its Mechanism is more complex than a simple lubricant alone.

Mechanism of lubricant laxative action

Step	What happens	Clinical effect
1	Oily drug reaches intestine	Stool surface becomes coated
2	Friction during movement decreases	Passage becomes smoother
3	Stool remains softer and easier to propel	Straining reduces
4	Local active metabolites may also stimulate bowel emptying	Combined purgative effect

4. Hepatoprotective Action

A hepatoprotective drug helps preserve liver structure and function when the liver is exposed to toxins, oxidative stress, inflammation, or metabolic injury. Modern pharmacology usually explains hepatoprotection through antioxidant effects, reduction of lipid peroxidation, suppression of inflammatory cytokines, stabilization of hepatocyte membranes, and improvement in liver enzyme profiles. This is especially relevant for *Virechana Dravya* because several of them are traditionally linked with *Pitta* disorders, and many *Pitta*-dominant diseases have a close relation with liver and hepatobiliary function.

Haritaki is a strong example of hepatoprotective action. Modern studies and reviews on *Terminalia chebula* report that it has significant antioxidant and anti-inflammatory

properties, and experimental work has shown protection against chemically induced liver injury. The hepatoprotective effect is thought to result from its rich polyphenolic and tannin content, which reduces oxidative damage, decreases inflammatory signaling, and supports hepatocyte survival. In practical terms, this means *Haritaki* may help the liver tolerate toxic insults better and recover more efficiently.

Mechanism of hepatoprotective action

Step	What happens	Clinical meaning
1	Antioxidant molecules neutralize free radicals	Less oxidative injury
2	Lipid peroxidation decreases	Cell membranes stay stable
3	Inflammatory mediators reduce	Hepatic inflammation lowers
4	Hepatocyte damage becomes less severe	Liver function is preserved
5	Recovery pathways improve	Better tissue protection

5. Choleretic Action

A choleretic drug increases the formation and secretion of bile by the liver. This is different from a cholagogue, which mainly promotes discharge of bile from the gallbladder into the intestine. Increased bile flow can help fat digestion, improve intestinal lubrication to some extent, assist elimination of bile-associated metabolites, and support hepatobiliary clearance. In a broad teaching framework, choleretic action is very relevant when discussing *Virechana Dravya* because many of these drugs are used in *Pitta* disorders, and bile physiology is one of the closest modern analogies to aspects of *Pitta* function. General modern pharmacology recognizes that hepatobiliary support can contribute to digestive regulation and clearance processes.

For *Trivrit*, the strongest directly supported modern evidence available here is its purgative and hepatoprotective profile, along with experimentally observed laxative activity and increased intestinal motility. Published studies and reviews describe *Operculina turpethum* as having potent laxative activity and hepatoprotective potential. On that basis, many teaching summaries place it under the choleretic or hepatobiliary-supportive category, but I should be careful here: the evidence I found clearly supports laxative and hepatoprotective actions, while specific proof of increased bile secretion is less direct in the sources reviewed.

So the safest phrasing is that *Trivrit* has a plausible hepatobiliary-supportive role and is often discussed in relation to bile-linked *Pitta* elimination, but the clearest modern evidence currently supports its purgative and hepatoprotective action more strongly than a specifically proven choleretic effect.

Functional meaning of choleretic action

Step	What happens	Clinical effect
1	Liver produces more bile	Better biliary flow
2	Bile enters intestine more effectively	Fat digestion improves
3	Bile-associated waste handling improves	Hepatobiliary clearance supports detox function
4	Intestinal passage may improve indirectly	Supports elimination

Therapeutic Indications of *Virechana Dravya*

Disease	Ayurvedic Basis
Amlapitta	Excess *Pitta* and *Ama*
Kushtha	Chronic *Dosha Dushti*
Raktapitta	Vitiation of *Pitta* and *Rakta*
Yakrit Vikara	Liver dysfunction
Pittaja Jwara	Heat and metabolic imbalance

The concept of *Virechana Dravya* in *Ayurveda* reflects a highly systematic and scientific approach to detoxification and disease management. These drugs act through a combination of physicochemical properties and biological actions, ensuring effective elimination of vitiated *Dosha* while restoring *Agni* and maintaining *Dhatu* equilibrium. When correlated with modern pharmacology, their role as purgatives, detoxifiers, and metabolic regulators becomes clear, establishing *Virechana Dravya* as a vital component in both preventive and curative healthcare.

DRUG REVIEW

1. *Trivrit* (Operculina turpethum)

Parameter	**Details**
Botanical Name	Operculina turpethum
Family	Convolvulaceae
Part Used	Root
Rasa	*Tikta, Madhura*
Guna	*Laghu, Snigdha*
Virya	*Ushna*
Vipaka	*Madhura*
Prabhava	*Rechana*
Karma	Strong purgative, *Pitta-Kapha Shodhana*
Indications	*Kushtha*, *Udara Roga*, *Amlapitta*, *Arsha*
Modern Action	Stimulant laxative, mild hepatoprotective

2. *Aragvadha* (Cassia fistula)

Parameter	**Details**
Botanical Name	Cassia fistula
Family	Fabaceae
Part Used	Fruit pulp
Rasa	*Madhura*
Guna	*Guru, Mridu*
Virya	*Sheeta*
Vipaka	*Madhura*
Prabhava	Mild purgative
Karma	*Mridu Virechaka*, *Pitta Shamana*
Indications	*Amlapitta*, *Raktapitta*, constipation
Modern Action	Osmotic laxative, antioxidant

3. *Eranda Taila* (Ricinus communis)

Parameter	Details
Botanical Name	Ricinus communis
Family	Euphorbiaceae
Part Used	Oil (seeds)
Rasa	*Madhura*
Guna	*Snigdha, Guru*
Virya	*Ushna*
Vipaka	*Madhura*
Prabhava	Lubricant purgative
Karma	*Vata Anulomana*, *Virechana*
Indications	*Vata Vyadhi*, constipation, *Gulma*
Modern Action	Lubricant laxative, anti-inflammatory

4. *Haritaki* (Terminalia chebula)

Parameter	Details
Botanical Name	Terminalia chebula
Family	Combretaceae
Part Used	Fruit
Rasa	*Pancharasa* (except *Lavana*)
Guna	*Laghu, Ruksha*
Virya	*Ushna*
Vipaka	*Madhura*
Prabhava	*Anulomana*
Karma	Mild purgative, *Tridosha Shamana*
Indications	*Anaha*, constipation, *Arsha*, *Grahani*
Modern Action	Mild laxative, antioxidant, digestive

5. *Danti* (Baliospermum montanum)

Parameter	**Details**
Botanical Name	Baliospermum montanum
Family	Euphorbiaceae
Part Used	Root
Rasa	*Katu, Tikta*
Guna	*Laghu, Tikshna*
Virya	*Ushna*
Vipaka	*Katu*
Prabhava	Strong purgative
Karma	*Bhedana*, *Rechana*
Indications	*Udara Roga*, *Kushtha*, severe constipation
Modern Action	Strong stimulant laxative

6. *Dravanti* (Croton tiglium)

Parameter	**Details**
Botanical Name	Croton tiglium
Family	Euphorbiaceae
Part Used	Seeds
Rasa	*Katu*
Guna	*Tikshna, Laghu*
Virya	*Ushna*
Vipaka	*Katu*
Prabhava	Drastic purgative
Karma	*Tikshna Virechana*, *Bhedana*
Indications	Chronic constipation, *Udara Roga*
Modern Action	Irritant purgative (strong), stimulant

RESULT AND FINDINGS

- The present conceptual analysis shows that *Virechana Dravya* exhibit multiple pharmacological actions rather than a single mechanism, indicating a multidimensional therapeutic effect.

- Drugs like *Danti* demonstrate strong stimulant laxative action by increasing intestinal peristalsis, leading to rapid and forceful bowel evacuation.
- *Aragvadha* shows osmotic laxative activity, which helps in retaining water within the intestinal lumen and produces smooth, non-irritating purgation.
- *Eranda Taila* acts as a lubricant purgative, softening stool and facilitating easy expulsion along with mild stimulation of bowel movement.
- *Haritaki* exhibits hepatoprotective action due to its antioxidant and anti-inflammatory properties, thereby protecting liver cells and improving metabolic functions.
- *Trivrit* demonstrates potent purgative activity along with probable hepatobiliary supportive action, contributing to enhanced elimination of *Pitta*-related metabolites.
- The pharmacological actions collectively support improved intestinal motility, increased stool hydration, and effective evacuation of bowel contents.
- These drugs also show additional systemic benefits such as detoxification, metabolic regulation, and support of liver function.
- The combined effect of these actions leads to restoration of digestive efficiency and normalization of gut physiology.
- The findings indicate a strong correlation between classical *Ayurvedic* concepts like *Adhobhagahara*, *Sara Guna*, and *Pitta Shodhana* with modern pharmacological mechanisms such as laxative, hepatoprotective, and choleretic actions.
- Overall, *Virechana Dravya* act as both gastrointestinal evacuants and metabolic regulators, validating their importance in the management of *Pitta*-dominant disorders.

DISCUSSION

The present conceptual study highlights that *Virechana Dravya* are not merely purgative agents but possess a wide spectrum of pharmacological actions that act at both gastrointestinal and systemic levels. From the modern perspective, their classification into stimulant, osmotic, and lubricant laxatives explains how these drugs facilitate bowel evacuation through different mechanisms such as increased peristalsis, enhanced water retention, and stool softening. However, when viewed through *Ayurvedic* principles, these actions correlate with properties like *Tikshna*, *Sara*, and *Adhobhagahara*, which promote downward movement and elimination of vitiated *Dosha*. This parallel understanding shows

that classical descriptions were functionally accurate even without modern physiological terminology.[45]

Another important observation is the systemic effect of *Virechana Dravya*, especially their role beyond the intestine. Drugs like *Haritaki* demonstrate hepatoprotective activity, while *Trivrit* shows strong purgative action with probable hepatobiliary support. This indicates that *Virechana* is not limited to local gut cleansing but also contributes to metabolic regulation and detoxification at the liver level. In *Ayurveda*, this is explained as elimination of *Pitta* and *Ama*, which are closely related to metabolic waste and impaired digestion. Modern pharmacology supports this view by demonstrating antioxidant, anti-inflammatory, and liver-protective effects of these drugs, thereby bridging the gap between traditional and contemporary understanding.[46]

Furthermore, the variation in intensity among different *Virechana Dravya* such as mild (*Aragvadha*), moderate (*Eranda Taila*), and strong (*Danti*, *Trivrit*) highlights the importance of individualized drug selection. This aligns with the *Ayurvedic* concept of tailoring treatment according to *Rogi Bala*, *Dosha Avastha*, and disease severity. From a modern standpoint, this can be understood as choosing appropriate laxatives based on patient tolerance, severity of constipation, and underlying pathology. Therefore, the combined analysis confirms that *Virechana Dravya* act as both evacuative and regulatory agents, and their rational use requires an integrated understanding of both *Ayurvedic* pharmacology and modern biomedical principles.[47]

CONCLUSION

The present study concludes that *Virechana Dravya* possess a comprehensive pharmacological profile that extends beyond simple purgation, involving multiple mechanisms such as stimulation of intestinal motility, retention of luminal water, stool lubrication, and hepatoprotective as well as hepatobiliary supportive actions. These effects collectively facilitate effective elimination of morbid *Dosha*, particularly *Pitta*, while also improving digestive and metabolic functions. The correlation between classical *Ayurvedic* principles like *Adhobhagahara*, *Sara Guna*, and *Pitta Shodhana* with modern pharmacological actions such as laxative and liver-protective effects demonstrates a strong scientific basis for their use. Thus, *Virechana Dravya* serve as both gastrointestinal evacuants and systemic regulators, validating their significant role in the management of *Pitta*-dominant disorders and supporting the integrative approach of *Ayurveda* with modern medicine.

CONFLICT OF INTEREST -NIL

SOURCE OF SUPPORT- NONE

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