

Applied Clinical Relevance of External Ayurvedic Therapies: A Conceptual Review

Dr. Smita Madhavrao Sawant¹ and Dr. Amol Ravasaheb Jadhav²

PG Scholar, Department of Rasashastra And Bhaishajya Kalpana¹

Associate Professor, Department of Rasashastra And Bhaishajya Kalpana²

Late Kedari Redekar Ayurvedic Mahavidyalaya, P.G. Training and Research Centre, Gadhinglaj, Kolhapur.

Abstract: *Ayurvedic literature describes several external procedures that are used for both treatment and maintenance of health. Among them, Lepa, Upanaha, Udvartana, and Abhyanga are frequently employed in clinical practice with specific indications and methods of application. The present work is a classical textual review undertaken to examine the practical and therapeutic relevance of these four procedures. References were collected from major Ayurvedic compendia and analyzed with respect to their definitions, classifications, procedural steps, indications, contraindications, and clinical utility. The review shows that Lepa is mainly applied in localized inflammatory and skin conditions, Upanaha in painful and stiff musculoskeletal disorders, Udvartana in obesity and Kapha-dominant states, and Abhyanga in neuromuscular and degenerative conditions. Each therapy follows defined guidelines regarding preparation and application. These findings support their continued relevance as structured, non-invasive interventions within contemporary integrative healthcare settings..*

Keywords: Lepa, Upanaha, Udvartana, Abhyanga, Bahya Chikitsa, External Therapy

I. INTRODUCTION

Traditional medical systems worldwide have long recognised the value of external therapeutic procedures in maintaining health and managing disease. Among these, Ayurveda presents a highly developed framework in which local applications are designed not merely for symptomatic relief but for restoring functional balance within the body. In recent years, growing interest in non-invasive and integrative treatment approaches has renewed attention toward such external interventions, particularly those that combine herbal pharmacology with physical techniques.^[1]

Within Ayurvedic clinical practice, procedure-based therapies occupy an important role alongside internal medications. These external applications act through the skin and underlying tissues, influencing circulation, neuromuscular activity, and metabolic processes. Modern interpretations suggest that their effects may involve improved peripheral blood flow, enhanced lymphatic movement, localised anti-inflammatory action, and regulated autonomic responses.^[2] Because of these multidimensional effects, external therapies are increasingly explored as supportive measures in musculoskeletal disorders, dermatological conditions, metabolic disturbances, and stress-related complaints.

Among the various modalities described in Ayurveda, Lepa, Upanaha, Udvartana, and Abhyanga are widely practised and clinically adaptable.

Lepa refers to the application of freshly prepared herbal paste over a specific body part.^[3] It is commonly employed in conditions involving inflammation, swelling, discolouration, or skin abnormalities. The therapeutic benefit is derived from prolonged contact between the medicated paste and the skin, allowing localised action while supporting natural healing processes.^[4]

Upanaha involves the application of a warm medicated preparation that is secured over the affected region for a defined duration.^[5] The combined influence of heat and herbal substances helps reduce stiffness, ease pain, and improve mobility. It is particularly relevant in chronic musculoskeletal conditions where sustained warmth and drug contact enhance tissue relaxation.^[6]



Udvardana is performed using dry herbal powders applied with firm, upward strokes. This technique stimulates superficial circulation, supports exfoliation, and assists in reducing heaviness associated with metabolic imbalance. It is frequently indicated in conditions such as obesity and disorders marked by sluggish tissue function.^[7]

Abhyanga, the systematic application of warm oil through massage, is practised both as a daily health measure and as a therapeutic intervention. It contributes to the lubrication of tissues, improves flexibility, and provides mental relaxation. Clinical observations associate it with stress reduction, better sleep, and improved overall well-being.^[8]

Thus, these four external therapies represent a practical and integrative dimension of Ayurvedic healthcare. Moving from general principles of external treatment to specific procedural applications, their relevance lies in their capacity to address localised pathology while contributing to systemic balance. The present review aims to examine their applied therapeutic significance and their potential role within contemporary clinical practice.

II. MATERIALS AND METHODS

This study was conducted as a classical textual review based on authoritative Ayurvedic treatises and commentaries describing Lepa, Upanaha, Udvardana, and Abhyanga. Relevant references were systematically collected, analysed, and compiled to evaluate their concepts, classifications, procedural details, and therapeutic applications.

III. RESULTS

The examination of classical Ayurvedic literature indicates that Lepa, Upanaha, Udvardana, and Abhyanga are described through detailed procedural norms, defined indications, and precautionary measures, reflecting their organised therapeutic application.

Lepa Kalpana

The reviewed sources portray Lepa as a freshly prepared topical formulation made into a smooth paste and applied directly to the affected area. The texts stress the importance of proper consistency to ensure uniform spreading and effective contact with the skin. Lepa is indicated in conditions characterised by pain, swelling, discolouration, wounds, and cosmetic concerns.

Several modes of classification are described based on consistency, temperature, pharmacological action, and intended therapeutic outcome. Some types are cooling in nature and suited for inflammatory states, while others possess warming or resolving properties for conditions involving stiffness or accumulation. Variations are also noted for wound cleansing, healing promotion, control of bleeding, and restoration of normal skin tone. Recommendations regarding thickness differ according to purpose, suggesting an individualised approach.^[9]

The proportion of unctuous substances is adjusted according to the nature of the disorder, with greater amounts used in dryness-dominant conditions. Direction of application, appropriate timing, and avoidance of reapplication over residual paste are clearly emphasised. The use of freshly prepared material is consistently advised, reflecting attention to efficacy and safety.

Upanaha Swedana

Upanaha is presented as a retained poultice therapy that combines medicinal substances with warmth and bandaging. Variations include preparations that are heated before use and those relying on inherently warming ingredients. Methods differ in the manner of securing the medicated mass, either directly applied, wrapped, or firmly tied.

The standard approach involves preparing the medicated paste, applying it in moderate thickness, covering it with a suitable material, and retaining it for an extended period, often around twelve hours. This prolonged contact is intended to relieve stiffness, reduce pain, and support the resolution of localised swelling. The texts caution against excessive heat and recommend discarding the material after single use.^[10]



Udvaartana

Udvaartana is described as a therapeutic rubbing procedure using either dry powders or unctuous preparations. The dry form is mainly indicated in conditions associated with heaviness and excess adiposity, whereas the unctuous form is suited for individuals requiring nourishment.

The massage is performed systematically using upward strokes, often against the direction of hair growth. Different body regions are treated with linear or circular movements, and the total duration is standardised. Related procedures using coarse materials are mentioned for exfoliation and cosmetic purposes. Rest and cleansing after the session form part of the therapeutic sequence.

Abhyanga

Abhyanga is outlined as a methodical oil massage performed over the body, either as a routine health practice or as supportive therapy in disease conditions. Clear instructions are given regarding sequence, direction of strokes, body positioning, and duration. Variations are based on the type of oil used, the intensity of pressure, and the area of application.

Indications include disorders affecting movement, stiffness, and general debility, while contraindications cover acute illness, severe systemic disorders, open wounds, and vascular complications.^[11] The described physiological responses include improved circulation, enhanced tissue flexibility, muscular relaxation, and facilitation of metabolic waste removal. Commentarial literature also suggests a gradual diffusion of oil through successive tissue layers over time.

IV. DISCUSSION

Applied Therapeutic Aspects

The classical descriptions of Lepa, Upanaha, Udvaartana, and Abhyanga gain clearer meaning when examined through their practical use in patient care. Each procedure serves a distinct clinical purpose and is selected based on disease stage, tissue involvement, and individual presentation.

Lepa in Clinical Application

In routine practice, Lepa is used mainly for localized conditions. In acute inflammatory swellings presenting with redness, heat, and tenderness, thin and cooling pastes are applied to reduce discomfort and control progression. In contrast, chronic, firm swellings or non-suppurative masses are managed with thicker preparations possessing warming or resolving properties.

In wound care, certain formulations are chosen to cleanse unhealthy tissue, while others support granulation and surface repair. Dermatological use includes management of acne, hyperpigmentation, and localized discoloration, where repeated supervised application is advised. The therapeutic effect depends on appropriate thickness, correct timing, and removal after drying. Thus, Lepa functions as a condition-specific topical intervention rather than a general external application.

Upanaha in Musculoskeletal Disorders

Upanaha is particularly relevant in disorders characterized by stiffness, restricted movement, and chronic pain. In conditions such as osteoarthritis, low backache, cervical spondylosis, and muscular tightness, the retained warm poultice provides sustained heat along with medicinal contact. This dual action helps soften tissues and ease rigidity.

Because the preparation is retained for several hours, it is suitable for chronic presentations where short-duration therapies may not provide adequate relief. In clinical settings, Upanaha may be used as conservative management in early joint disorders, as supportive therapy during rehabilitation, or as a preparatory step before mobilization procedures. Care is taken to regulate temperature and ensure fresh preparation to avoid irritation.



Udvardana in Metabolic and Dermatological Conditions

Udvardana is commonly applied in individuals presenting with excess body weight, heaviness, or sluggish tissue tone. The dry friction technique is used to stimulate the skin and superficial structures. In structured weight management programs, it is combined with dietary and lifestyle regulation.

The procedure is also used for improving skin texture in conditions marked by oiliness, itching, or roughness. Its exfoliative nature supports removal of superficial debris and enhances local stimulation. When nourishment is required, a modified unctuous form is selected. Hence, Udvardana is applied selectively based on body composition and therapeutic objective.

Abhyanga in Preventive and Supportive Care

Abhyanga has broad application in both health maintenance and disease management. In individuals experiencing dryness, stiffness, or early degenerative changes, regular oil massage supports flexibility and comfort. It is frequently employed in neuromuscular conditions and in patients with chronic joint disorders.

In rehabilitation settings, Abhyanga helps prepare muscles and joints before exercise. In stress-related complaints, its rhythmic application promotes relaxation and improved sleep. Oil selection, pressure, and duration are adjusted according to strength, age, and condition of the individual. Clear contraindications guide its safe application in acute or severe systemic illness.

Overall Clinical Significance

These four therapies represent distinct procedural strategies: targeted paste application, sustained warm poultice therapy, friction-based stimulation, and structured oil massage. Each has defined indications and limitations. Their use is not interchangeable but determined by pathology, chronicity, and patient factors. When applied judiciously, they provide non-invasive and adaptable options within broader therapeutic planning.

V. CONCLUSION

Lepa, Upanaha, Udvardana, and Abhyanga represent structured and condition-specific external therapies with clearly defined indications and procedural guidelines. Their applied use in inflammatory, musculoskeletal, metabolic, and neuromuscular disorders highlights their clinical relevance as safe, adaptable, and supportive interventions in integrative healthcare practice.

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