A CRITICAL REVIEW ON CONCEPT OF GATA VATA W.S.R. TO SHUKRAGATA VATA

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ABSTRACT
In Ayurveda various Acharyas have given their opinion to understand the disease in a better way. Vata is explained as life and supporter of all life processes and sustains long life free from disorders. Shukra is the seventh and final Dhatus as a Saara (Essence) of all Dhatus and produced in a progressive evolutive metamorphosis which is responsible for all systemic body activities including metabolic functions and part of which comes out of the body at the time of sexual act. Main function of Shukra Dhatus is Garbhotpadana (Reproduction). Both these concepts i.e. Vata and Shukra attained superior considerations in Ayurvedic classics. Gata vata is a pathological condition of Vata where in the vitiated Vata gets lodged in Dhatus, Upadhatus, Ashayas and Avayavas etc. Among them Shukragata Vata is one such complex clinical condition described under the concept of Gata Vata which is characterized by Early Ejaculation, Delayed Ejaculation, Seminal abnormalities or affliction of Fetus. Present study is an attempt to understand the concept of Gata Vata and clinical presentations of Shukragata Vata along with their treatment principles.

Keywords: Vata, Shukra, Gata Vata, Shukragata Vata, Garbhotpadana

INTRODUCTION
Vata is a unique Dosha as it differs from other Doshas because of its ‘Ashukaritwa’ and its ability to carry all the life process in association with Pitta, Kapha, Saptadhatu and Trimala. For example: Pitta and Kapha are Pangu and Vata regulates their functions. The Vata (which is present in the living being) is self originated (Swayambhoo), subtle (Sookshma) and all pervasive (Sarvagata). It is not sensible (Auyakta) but its activities are potently manifests (Vyaktakarma). In the pathological state also it has two paths of its vitiation i.e. its vitiation may occur by the Dhatu Kshaya (depletion of Dhatu) or by Margavarana (the obstruction of its path by the others).

Concept of Gatatwa:
The sequential changes happening from the very first contact of etiological factors (Nidana) till the development of disease is termed as Samprapti. Khavaigunya (deformity of Srotas) and Dhatu Dourbalya (inferior qualities of Dhatu) decide the Sthanasamshraya of Doshas. The mode of Samprapti is the key factor which decides finally the manifestation of the disease.
Different phenomenons have been put forward to explain the pathogenesis of various diseases. Gatatwa is one such complex phenomenon mentioned in all classical texts. Acharya Vagbhata deals the Gatatwa of Dosha just after explaining the Samprapti of Roga. The vitiated Doshas cause vitiation of Rasa and other Dhatus together vitiates Malas which in turn vitiate Malayatana (channels of their elimination) which include two below (urethra & anus), seven in the head (eyes, nose, ears and mouth) and the channels of sweat; from the vitiated channels manifest their connected diseases. Only Vriddha Vagbhata explains the Gatatwa of Pitta and Kapha. But he does not mention the Gatatwa of Vata in the same context instead of which advice to refer the context of Vatavyadhi Nidana. This may be due to relatively significant importance of Gatatwa of Vata as far as manifestation of diseases is concerned.

Various terminologies or synonyms are used to denote Gatatwa in the classics. They include: -
1. Gate, Gatam
2. Prapte
3. Sthite/sthitam
4. Avasthite
5. Ashrite/Samashritam

Analyzing the above referred meanings and synonyms it can be concluded that the word Gata has two implications. One related with the Gati (movement) and the other related with Adhisthana (site). Hence Gatatwa of Vata implies an undesirable movement of Vata and its unnecessary occupation of certain sites.

**Sthanas (Sites) of Gatadosha:**
Different Adhisthanas are explained in the context of Gatatwa of Vata in different classics as follows:
1. Dhatugata Vata
2. Upadhatugata Vata
3. Ashayagata Vata
4. Avayavagata Vata

**Dhatugata Vata:**
The symptomatology and treatment of all Dhatugata Vata are explained in classics except that of Rasa Dhatu. Rasagata Vata Lakshanbas are mentioned only by Yogaratnakara. Here the functional status of Dhatu is analyzed to understand the Dhatugata Vata. The Prasadamsa (essence of food) provides nutrition to Rasadi Dhatu, Ojus, Indriyas, Sandhis etc. When the food articles are producing more Kittamsa in comparison to Prasadamsa the chance of Dosha Vriddhi and Kopa along with Dhatudaurbalya is likely to take place.

For example: Vatalahara will increase the formation of Kittamsa for production of more Vata and decrease the production of Dhatus like Rasa, Rakta, Mamsa, Meda etc. When Vata get vitiated it attains more Chala property and starts its abnormal movements (Gati). Dhatudaurbalya causes Riktata (vacuum) in Dhatu, makes more space (Avakasha) to enhance the movement of Vata again. Thus, the vitiated Vata abnormally move in specific Dhatu and get occupied there. Likewise Viharas are also possible to create the vitiation of Vayu and weakness of Dhatu.

Dhatus have two forms viz. Asthatidhatu (nutrient to the concurrent Dhatu) and Sthahidhatu (Formed and stable tissue elements). In Dhatugatavata, the Sthahidhatu are weakened and aggravated Vata gets lodged there in. Due to the same fact, line of treatment also should be to improve the quality of Dhatu and to pacify the Vata. According to the complexity of the pathogenesis, Dhatu Gatatwa may produce symptomatology suggesting a single disease, a group of disease or even diseases which are opposite in nature. However, the clinical presentation may be generally having the nature of Dhatu Dourabalya. It seems that ‘Rasa’ is also mobile as Vata, so Rasadhatugata Vata is not explained in classics; instead Twakgata Vata Lakshanbas were mentioned.

**Upadhatugata Vata:**
The Gatatwa of Vata has been mentioned in the Sira and Snayu as Upadhatus. These references explain
the dilatation and hollowness of Siras and diseases related to posture and movements.

**Ashayagata Vata:**
Vitiation of Vata in certain Ashayas is causing disorders. These Ashayas include Kostha, Amashaya, Pakwashaya and Kukshi. Even though Amashaya and Pakwashaya are included in the Kostha, their Gata Vata lakshanas are separately mentioned. This may be due to its higher incidence and importance. The symptomatology of certain Avayavagata Vata like that of Hridaya can also be understood from Kosthagata Vata Lakshanas.

**Avayavagata Vata:**
The symptomatology as well as treatment of Gudagata Vata and Sandhigata Vata was described in classics. But regarding Basti, Nabhi, Shira and Hridaya only treatments were described. Gatatwa phenomenon is also explained for Garbha, Indriya and Sarvanga. Sushruta in the treatment context describes Gatatwa of Vayu in Bahu, Skandha, Vaksha, Trika and Manya. Sarvanga Vata is the most serious condition as the vitiatiion of Vata is not limited to any area of the body, but affects the whole body.

**CONCEPT OF SHUKRAGATA VATA**
Shukragata Vata is a distinct pathological entity characterized by a group of clinical presentations either related with the impairment of ejaculation or with the impairment of seminal properties. Shukra is the seventh and final Dhatu as Saara (Essence) of all Dhatu and produced in a progressive evolutive metamorphosis which is responsible for all systemic body activities including metabolic functions and part of which comes out of the body at the time of sexual act. Main function of Shukra Dhatu is Garbhotpadana (Reproduction). Vitiatiion of Shukradhatu shows Shukradhatu dusti (pathology) in the form of Vridhhi & Kshaya. So it is an important entity in context of reproduction.

**Activities of Vata on Psychosexual parlance:**
Vata is described as the agent which restrains and impels mental activities. It is responsible for the functional format of mind. The control and stimulation are the bifold activities which are necessary for an optimal arousal, activity and achievement of target action. A vitiatiated Vata may cause the mental activities adversely in different dimensions. As far as the particular problem of Shukragata vata is concerned, vitiatiated Vata causes over stimulation leading to lack of control over physiological and psychological activities.

**Functional approximation of Shukra, Vata and Mana:**
- **Shukra, Mana and Vata** are located all over the body.
- **Shukra** is explained as Twakastha, Twak is in Samavayi Sambandha with Mana and thus to Vata also.
- **Shukra** is explained as Sookshma or Anubhava, Mana has Anutwa property and Vata is also Sookshma.
- **Shukra** is having the property of Saratwa, while Mana and Vayu are explained as Gatimani.
- **Vata** is explained as stimulator (Pranetah) and controller (Niyantah) of Mana.
- Different functions attributed to Shukra viz. Dhairya, Chyavana, Preeti, Harsha etc. can be explained on Neuropsychological axis of Mana.
- **Vata** is explained as the Yoni receptacle for Harsha and Utsaha which are functionally attributed to Shukra.
- All Indriyas (including Upastha) are under the control of Mana, and Mana itself is under the control of Vata.
- **Harsha Shakti** depends on Deha Shakti as well as Satwa Shakti.
- **Suprasanna Mana** is necessary for Harshana.

So, from above description the term Shukra represents characteristics in various known and unknown psycho-neurological activities. Among the psycho-
logical and sexual related functions of Shukra i.e. Harsha, Dhairya, Chyavana and Preeti are important to the context. Dhairya, Chyavana and Preeti are interrelated and normally characterized by an optimal anxiety. A derangement in this, probably caused by impairment in the activities of sub components of Vata ultimately leads to a poor Erection and Early Ejaculation as in the case of over activity of sympathetic nervous system.

The clinical presentations of Shukragata Vata are as follows.

1. Early Ejaculation:
   - Kshipram Munchati
   - Shukrasya Sheeghram Utsargam
   - Pravritti/Atisheeghra Pravritti
2. Delayed Ejaculation:
   - Badhnati/Chiram Dharayate
   - Sangam
   - Apravritti/Atimanda
3. Seminal Abnormalities:
   - Vikriti
   - Vaikrita/Grathita vivaranadi Yuktam
4. Affliction of Fetus/Premature birth/ Delayed birth:
   - Garbhasya Vikriti/ Vyangatvadi nanavikarayuktam Garbham/ Garbhamapi Kshipram Munchati Va Chiram Dharayati

The different clinical presentations of a same pathological process occur according to the affliction of the vitiated Vata on the various structural and functional attributes of Shukra.

The physiology of Ejaculation explained in Ayurveda viz., Sankalpa, Chesta, Nishpeedana and Shukrasravana may be compared with male sexual response cycle. Any alteration in these leads to Ejaculatory impairment. When the concept of normal ejaculation process is considered, the proper activity of Prana, Udana, Vyana and Apana vayu are very necessary for a good erection, penile rigidity, sufficient vaginal containment, penile thrust and an optimal timed Ejaculation. Because these types of Vata are having direct relationship in the psychoneurophysiology and haemodynamics of the sexual response cycle in male. Prana and Udana unitedly make the mental aspects of sexual response. They constitute the appetite phase of sexual response cycle.

- Activity of Prana associated with Udana stimulates Vyanavayu which is situated in the Hridaya. Astanga Sangrahakara explained that Vyanavayu present in the female partner directs the Shukra (semen) ejaculated by male to the interior of Yoni (Yonou cha sukla pradipādano).
- The further steps of ejaculation i.e. ante-grade ejaculation with forceful spurts and bladder neck closure is controlled by Apānavāta. Apānavāta is responsible for the Nishkramana of Shukra along with dharana (retention by bladder neck closure) is parasympathetically activated. A derangement in this probably caused by impairment in the activities of Prana, Udana, Vyana and Apana. This ultimately leads to a poor erection and early ejaculation. Pathogenesis of Vata is the key phenomenon occurring in the manifestation of Shukragata Vata.

Charakacharya while explaining the prakruta Vata functions mentioned that Vata controls and directs the mind (Niyanta praneta cha manasaha) (Ca.Su.12/8). A balance between control and stimulation are necessary for an optimal arousal, activity and achievement of target action. As far as the particular problem of early ejaculation is concerned vitiated Vata may causes the mental activities adversely in different dimensions and over stimulation leading to lack of control over physiological and psychological activities. Thus Kshipra Munchana of Shukragata vata can be correlated to Premature Ejaculation in which anxiety, stress, fear etc. are the main triggering factors. Premature Ejaculation is a
psychosomatic disturbance due to a psychologically overanxious personality (Schapiro-1943).

2. Delayed ejaculation:
   - Badhnati/Chiram Dharayate/ Sangam/ Apravriti/Atimanda
   In Delayed Ejaculation although the intra-vaginal ejaculation eventually occurs, it requires a long time and strenuous efforts at coital stimulation, and sexual arousal may be sluggish. Like Early Ejaculation, Delayed Ejaculation can also be caused by psychological and physical factors. It may be caused when the vitiated Vata loses its Druratwa or Chalatwa after the enlodgement which leads to lack of sufficient stimulation (Prerana) for Ejaculation.
   - When we see the etiological factors which are responsible for Vata vriddhi (Swanidana) causes an increase in the qualities like Rooksha, Laghu, Khara, Sookshma, Chala, Sheeta etc. The accumulation of Vata is at its own seat. The vitiated Vata cause Apravritti in the Shukravaha srotas, then clinical presentation will be of Delayed Ejaculation. Continuous diminution of Shukradhatu causes Riktaka (Emptiness) in Shukravaha srotas. Riktaka will also be present in Rasavaha srotas. The direction of Vata which adopted abnormal Gati will be towards Shukra taking the benefits of Riktata in the dhatu.
   - Shukradhatu viguna ahaara-viharas (etiological factors antagonistic to Shukra) causes reduction in the excellency of Shukradhatu. The reduction of Shukradhatu is characterized by diminution of properties like Guru, Snighdha, Bahala etc. of Shukra dhatu which leads to inability to ejaculate.
   - Nidanas causing Manoabhighata (Psychological stress) lead to derangement in the mental faculties. It may produce comparative increase in Raja and Tama gunas and reduction of Satwa guna on psychic sphere. In brief these factors cause further Vatavridhhi and Shukrakshaya.
   - Astanga Hridayakara explained in Sutrasthana that when the vitiated Vata causes the Kshaya of Shukradhatu by Shoshana swabhava and quantitatively less amount of Shukra is ejaculated after long effort21.

3. Seminal Abnormalities:
   - Vikriti/ Vaikrita/Grathita vivaranadi Yuktam
   Seminal parameters are impaired when the vitiated Vata afflict the functional characteristics of Shukra as Semen or Spermatozoa. When Vata affects these characteristics, Shukra Dushti22 is explained as Phenila, Tanu, Rooksha, Grathita, Vivarnadi Yukta, Vatika Shukra, Granthi shukra (Vatakaphaja), Ksheena (Vata-Paittika), Alpa Retas, Ksheena Retas and Vishushka Retas occurs. These are seminal abnormalities lacking in the qualities like Sperm count (Azoospermia or Oligozoospermia), Motility (Asthenozoospermia) and Morphology (Teratozoospermia). The physical properties of semen like Volume, Viscosity and Appearance etc. may also be impaired due to Vata vitiation.

4. Affliction of Fetus/Premature birth/ Delayed birth:
   Shukragata Vata may afflict the resulting Garbha (Fetus). Shukra affected by vitiated Vata may cause different disorders like premature birth, and Delayed birth of fetus. Acharya Charaka says that Beeja, Beeja bhaga & Beeja bhaga avayava are the fundamental entities which are responsible for reproduction.
   - Beeja: refers to Shukra (male gamete) or Shonita (female gamete) responsible for formation of Garbha.
   - Beeja bhaga: refers to part of Beeja responsible for production of particular Avayava of body (Chromosomes)
   - Beeja bhaga avayava: refers to part of Beeja bhaga responsible for production of a particular part of an organ (Gene which is the structural & functional unit of a chromosome)
   If both Shukra and Shonita are completely destroyed, there is no formation of Garbha. But if any
part of Shukra (Beeja bhaga, Beeja bhaga avayava) is roga grastha (abnormal) then there will be chances of Garbha formation but in Vikruta rupa.

Yasya yasya Angavaysya beeje beejabhaga upatapto bhavati |Tasya tasya Angavaysya Vikrutirupajayate23 || (Cha.Sha.3/17)

The theory states that whichever part/organ (Avayava) in Beeja or Beeja bhaga gets abnormal; the same abnormality is manifested in the growing fetus. i.e. Vikruta Garbha. If particular Avayava of beeja bhaga is abnormal, the respective Anga (Organ) developing from that Beeja bhaga also becomes abnormal in the fetus.

- When the part of Beeja which is responsible for production of Shukra in the fetus is excessively vitiated, then this gives birth to a sterile child i.e. Vandhya Praja.
- When the Beeja bhaga avayava which is responsible for production of Shukra is excessively vitiated, then it gives birth to a Puti Praja (whose child delivers before delivery).
- When the Beeja bhaga avayava which is responsible for production of Shukra and the Beeja bhaga which is responsible for production of organs that characterize a male are excessively vitiated, this gives birth to a child who is not a complete male but only having masculine characteristics. Such a type of child is known as Trinaputrika24.

Thus the presentations of Shukragata Vata include fetal abnormalities, premature birth and delayed birth is due to pathological manifestations of Beeja (Shukra dusti), Beeja bhaga (Head & Tail defects), Beeja bhaga avayava dusti (chromosomal defects). This explains concept of Genetics dealt by Acharya Charaka in Shareerasthana.

Shukragata Vata v/s Shukravrita Vata

The symptomatology of Shukragata Vata and Shukravrita Vata looks alike. Treatment suggested by Charaka and Vagbhata for Shukravrita Vata is to follow the line of treatment of Shukragata Vata (Poorvavat Retasavrite)25. On a close analysis of the symptomatology of both clinical conditions shows certain differences in between them.

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<th>Shukragata Vata</th>
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<tr>
<td>Kshipram Munchati/Shukrasya Sheeghram Utsargam</td>
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<td>Badhnati/Chiram dharayate</td>
<td>Avega</td>
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<td>Nishphalvatvam</td>
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<td>Garbha Vikriti</td>
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- In Shukravrita Vata the clinical symptomatology are different i.e. ‘Ativega’ may be manifested by Early Ejaculation, forceful or repeated ejaculation.
- ‘Avega’ clearly indicates Anejaculation. It is entirely different from Delayed Ejaculation (Chiram dharayate) as in the case of Shukragata Vata. Ejaculation may be due to retrograde Ejaculation also.
- The ‘Shukra’ in case of Shukravrita Vata is explained as ‘Nishphala’. It means that it will be never capable to impregnate26 (Ca.Ci.28/68). But in case of Shukragata Vata, the Shukra is capable of impregnation but may cause deformities or abnormalities in the fetus.

Management of Shukragata Vata:
- The line of treatment for Sukragata Vata should consists of Praharsha Anna, Vrishya (aphrodisiacs), Balya (tonics), Vatahara (drugs/procedures which pacifies Vata dosha), Medhya (psychotropic drugs) and Sukrakara properties. If Shukra is Vibadharmarga (obstructed) Virechana should be performed. After
**Virechana** the above line of treatment should be followed\(^{27}\). **Basti** is the best available treatment and an ideal choice for **Shukragata Vata**, as it controls **Vata** at its own site\(^{28}\).

- **Ayurveda** has given importance to **Shukra** as the supreme **Dhatu** because of its generative property. **Vajikarana** is branch of Ayurveda, which deals with various types of physical, psychological, sexual problems like impotence, libido, poor erection and early ejaculation in the males. The **Vajikarana** drugs are helpful in providing strength and vigor to the person along with improvement of reproductive potentiality\(^{29}\). **Shukradosha Chikitsa** can be adopted in **Shukragata Vata**\(^{30}\). The treatment explained in the ‘**Putrakameeya adhyaya**’ can be employed in the management of **Shukragata Vata**\(^{31}\) (A.S.Sha.1/39)

- While commenting on **Charaka samhita**, Chakrapani clarifies that **Praharsha** as **Manoharshana**. Exhilarating food articles improves the quality of sexual arousal and functioning. The drugs should possess **Balya** and **Shukrakara** properties as the excellent sexual functioning depends on the physical and mental strength (Cha.Chi.2/4/45)\(^{32}\). **Balya** drugs will help in the management. For **Shukradhatu Dourbalya**, **Shukrakara** drugs should be administered to enhance the Excellency of **Dhatu**. Above to these all the drugs should be basically **Vatahara** to bring back **Vata** to its normal site.

- **Acharya Sushruta** and Vridhha Vagbhata suggest **Shukradushti Chikitsa** for **Shukragata Vata**. Dalhana suggest **Vajeekarana** and **Mootra Dosha Chikitsa**. **Indu** specifies it as **Vataja Shukradushti Chikitsa**.

- The line of treatment in **Shukragata Vata** varies according to the clinical presentation. For example classical **Virechana** is a must in case of **Vibadhamarga** (Eg: Anejaculation, Retrograde ejaculation, Obstructive Azoospermia etc), **Uttarabasti**\(^{33}\) in cases of **Shukradosha** (Eg: Azoospermia, Sperm Maturation Arrest, Oligozoospermia, Asthenozoospermia, Teratozoospermia etc.) should be performed.

- In case of early Ejaculation (**Kshipram Munchati**) certain modifications can be made in the line of treatment. **Medhya** and **Shukra Stambhaka** drugs can be added considering the etiopathological features of the problem. **Sharanagadhara** suggest **Jatiphala** as **Shukra Stambhaka** drug. P.V. Sharma described **Akararakarabha** in the **Shukra Stambhaka Gana**. Ahiphena is also acting as **Shukra Stambhaka**. **Paraseeka Yavani** by virtue of its Kamavasadaka property will help in Early Ejaculation.

- **Vrishyavati** is suggested for **Shukragata Vata** in Chikitsa Pradeepika. Its contents include Shweta Karaviramoola, Mahishi Ksheera, Karpoora etc. Karaskara & Panchavalkala are also practically used for the purpose. They include application of Bhoomilata kalkasiddha Kusumbha Taila on soles, Ajaksheera and Ushtra Ksheera along with Goghrita should be applied on both legs during sexual act (Chakradatta Vajeekaranadhikara). They includes external application of different pharmaceautical modification of drugs like Lajjalu, Snuhi, Kusumba, Punarnava, Kakajanghas, Shamyaka, Kokilamooola, Saptaparna, Sharapunkha etc.

- In ‘**Bhaishajya Ratnavali**’, a chapter named ‘Veerya Sthambhana adhikara’ as this chapter contains various formulations which are useful to control ejaculation. Various single drugs (herbal), herbo-mineral formulations, various external applications (a paste containing various herbs) over feet and lower abdomen to withhold ejaculation, different amulets (wearing amulets prepared by various herbs) and various other practices are mentioned in Bhaishajya Ratnavali\(^{34}\).

- ‘**Yoga Ratnakara**’ has described various Ayurvedic formulations which are useful in loss of Erection and Early Ejaculation. A for-
A formulation called, ‘Vanari Gatika’ which contains Atmagupta (Mucuna prurience) as one of the main ingredients indicated in Early Ejaculation and also in loss of Erection. Various medicated oils like Chandanadi Tailam and Maha Sugandhi Tailam are mentioned for application all over the body in Early Ejaculation. Veerya Sthambhaka Vati- which contains Ahiphena (Papaver somniferum) as one of the main ingredient is also indicated in Shukragata Vata.35

CONCLUSION

‘Shukragata Vata’ is a pathological entity comes under the Gatatwa concept of Vata characterized by a group of clinical presentations, which include Ejaculatory impairments, Seminal impairments as well as Fetal abnormalities. Gatatwa is an essential feature of Vataja samprapti characterized by Dhatu daurbalya, Srtoto Riktata, Vataprokopa and increased Gati of Vata. Vata, Mana and Shukra are having functional approximation like optimal arousal, properly timed ejaculation and good satisfaction. So any impairment in these three levels leads to pathology.

Anxiety and Stress are the triggering factors for Kshipra munchana. So while treating a patient of Premature Ejaculation psychological counseling is must. Hence Vrushya drug having Balya, Medhya, Shukrastambhak & Vatahara properties is used along with Psychological counseling. Various external applications over lower abdomen or all over the body for reducing performance anxiety and use of Shukra Sthambhaka drugs/formulations to improve control over ejaculation are beneficial. This could impart confidence and self esteem in the subject and help him to think positively and to indulge in sexual act enthusiastically by reducing performance anxiety.

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