

CASE REPORT

Management of COVID-19 through Ayurveda Perspective – A Case Report

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Shwasa-kaasa Chintamani Rasa

ABSTRACT

COVID-19 has become a global Pandemic since 2020 and multiple treatments such as antivirals, steroids, immunomodulators, with vaccines have been developed and marketed, but the treatment modality has not been fully confirmatory toward all the systemic and symptomatic relief in patients. Furthermore, there are limitations for all the designed and developed treatment protocols and post-treatment complications as respiratory distress, low immunity, allergic reactions, cardiac arrest, etc. To avoid such complications and improve the quality of life in COVID-19 patients *Ayurvedic* treatment principles can be taken into consideration. This is an effort to share experience in a case of COVID-19 management through *Ayurveda*. A pre-diagnosed COVID-19 case with complaints of chronic dry cough, anorexia, and anosmia who has undergone steroidal and antiviral treatment, but there is no improvement, so the patient approached *Ayurveda*. In *Ayurveda*, COVID-19 can be correlated with *Pranavaha Srotas Vikara* as it mainly affects the respiratory system. On the basis of history and examination, the *samprapti* of the disease was found to be caused by *Garavisha (agantuka nidana)*, leading to *Ama, srotorodha (pranavaha and rasavaha)*, in turn resulting in *vata-kapha vriddhi*, so treatment was planned accordingly. Case was managed with oral medicines such as *Indukanta Kasaya, Shwasa-Kasa chintamanirasa, Shwasamrita* syrup, *Abhrakabhasma + Shitopaladichoorna + Yastimadhuchurna* with *Madhu, Agastya rasayanam* for *Muhurmuhi*. After 5 days dry cough reduced, appetite improved and subjective recovery was observed. Same continued for 15 days and all the symptoms were completely reduced, smell and taste recovered after 1 month.

1. INTRODUCTION

A new SARS-COV-2 began at the end of 2019, causing a Global Pandemic. However, pandemics such as COVID-19 are not new to *Ayurveda*, and the classical textbooks have given a broad description of such pandemics in the name of “*Janapadodhwamsa*” which is mainly related to *Pranavaha Srotas*.

2. CASE PRESENTATION

2.1. Patient Information

The patient, aged 62 years, is a homemaker from the State of Karnataka, India; she is well built, with a height of 160 cm and weighing 71.3 kg.

2.2. Present Medical History

Patient on the first day of falling ill took the modern system of medications and has undergone steroidal and antiviral treatment.

After taking antivirals and steroids, no improvement was seen in the condition of the patient. Hence, she later approached *Ayurveda* with presenting symptoms of chronic dry cough, anorexia, anosmia, breathlessness, body ache, abdominal pain and mild fever.

2.3. Past Medical History

The patient was only taking antiviral and steroidal medications when approaching *Ayurveda*.

2.4. Ayurvedic Interpretation of the Patient's Condition

2.4.1. Diagnosis

Pre-diagnosed case of COVID-19. Test of the patient are mentioned in table 1.

2.4.2. Pathophysiology (Samprapti)

This disease can be correlated with that of *Pranavaha Srotas Vikaras*, major symptoms of COVID-19 observed in this Srotas such as cough, breathlessness, severe respiratory distress, and other symptoms related to it. The seat of affliction of this disease is primarily *Uras*

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(chest region). Based on the above, Coronavirus (CoV) disease can be correlated to Shwasa of Vata-Kapha predominance mainly because of Garavisha, which leads to Rasavaha and Paravaha Srotas dusti, aggravates the doshas leading to the manifestation of COVID-19 in the patient.

2.4.3. Etiology

Etiology of this illness is recently been attributed to a novel virus belonging to the CoV family named SARS-CoV-2. In *Ayurveda*, it can be correlated with a *Vata-kapha* predominant *vyadhi* with all the characteristics of *Pranavaha Srotas vikara*. This disease can also be considered under *Janapadadhwamsa*^[1] as it is a highly contagious disease.

2.5. Therapeutic Intervention

Here, it is pertinent to point out that the medicines used in the management of COVID-19 are all classical preparations mentioned in table 2. The modes of action of each of them, as per the texts, are the following:

- **Indukanta Kasaya:** Explained in *Sahasrayoga* composed of herbs such as *Dashamoola*, *Putikaranja*, *Pippali*, *Chavya*, *Chitraka*. These herbs are mainly balance *Vata Dosha* before reducing *Kapha Dosha* and act as a cholagogue. Herbs in this formulation act *Deepana*, *Pachana*, *Ruchikara*. The main ingredient, *Guduchi* and *Dasamoola*, being *tikta rasa pradhana* helps in *ama pachana*, improves *Agni*. Furthermore, there are molecular docking studies available for *Tinospora cordifolia* proving its role in the management of the COVID-19 virus.^[8]
- **Shwasa-Kasa Chintamani Rasa:** Explained in *Bhaisajya Ratnavali* contains drugs like *Parada*, *Gandhaka*, *Abhraka*, *Swarna*, *mukta* with *bhavana dravyas* such as *Yastimadhu*, *Kantakari*, and *Aja dugdha*. As its name suggests that it is used in the upper respiratory system. This formulation removes the *srotodusti*. Stimulates the action of immune system molecules in the body.
- **Abhraka Bhasma:** Described in *Rasaratna samucchayam*. It helps in getting rid of cough and cold, chest congestion, breathlessness, and excessive cough due to its *Kapha* balancing property. It is also *Deepana*, *Pachana* in nature, so it helps in improving the digestion of the patient.
- **Yastimadhu Choorna:** It has properties such as *Kapha-Vatahara*, *Jeevaniya*, *Rasayanam*. Components of *Yastimadhu* act as antioxidant. Furthermore, expectorant properties in it help in clearing the *Srotorodha*.
- **Shitopaladi Choorna:** Reference is from *Charaka Chikitsa Sthana*, *Rajayakshma* chapter, which is again a respiratory system disease. In *Sarangadhara*, it is indicated for *Mandagni Arochaka*, and act as *Vata-Kapha hara*. It helps to improve immunity.
- **Agastya Rasayanam:** Most of the diseases mentioned in *phalashruti* for *Agastya Rasayanam* are of *vata-kapha pradhana* type and the ingredients in *Agastya Rasayana* have *Vata-kapha samana* and *Tridosahara* properties. *Gunakarma* and *Doshakarma* of the drug; it can be used as the main line of treatment in disease as well as *Naimittika Rasayana* to boost up the immunity and cure the diseases in faster and better way. *Agastya Rasayanam* has *Katu* and *Kasaya rasa*, which combat *Kapha*, clears the obstruction in the *Srotas*, and does *Sodhana*, whereas *Kashaya rasa* does alleviation of the *Kapha* and *Pitta* disorders along with the *Sodhana* effect. It helps in reversing the pathophysiology of *Pranavaha Srotas vyadhi* like COVID-19. It

can also be given as the adjuvant therapy, as *Naimittika rasayana*, which helps in preventing the disease from becoming more chronic and thus prevents any damage to the involved tissues as well as recurrence of the disease.

- **Shwasamrita Syrup:** Its main ingredients are *Vasa*, *Triphala*, *Pippali*, *Talisapatra*, *Maricha*, *Nagara*, which help in improving appetite and increasing airflow to lungs. It works as an expectorant to help reduce cough. It strengthens the respiratory system and reduces breathlessness.

2.5.1. Advises given during the course of the medication

The patient was advised to quarantine, to check oxygen saturation daily, and to report if the same fell below 95%. As she reported reduced appetite in the initial phase light diet was advised. Steam inhalation was advised twice or thrice a day for alleviating symptoms such as nasal congestion, heaviness of head. The patient was also advised to take home-cooked food and to avoid spicy junk foods from outside.

2.6. Results/Outcome

Daily follow-up of the patient's condition was taken over the phone, and the condition of the patient kept to improve with the medicines. After 5 days of taking medications, the cough reduced and appetite improved. Furthermore, subjective recovery was seen. Sense of smell and taste recovered after 1 month. During the treatment, his condition remained stable, and no adverse events were reported by the patient. Nasal swab for COVID-19 antigen test was taken on 15th day of *Ayurvedic* medications and tested negative the details Test and results of the patient are mentioned in table 1.

3. DISCUSSION

All the medicines chosen have been clinically proven to be effective in treating *Vata-Kaphaj Vyadhi* associated with cough, anorexia, anosmia, and weakness of the body. As mentioned in the reference to the formulations, it helps to pacify vitiated *vata* and improve *Agni*, helps in *ama pachana*, and induces appetite. Hence, the medicines were selected here with a notion to alleviate symptoms of vitiated *vata* like *srotorodha*. and to improve the appetite and strength of the patient. *Agastya Rasayanam*, along with *Shwasamritam Syrup*, was selected for post-COVID-19 management to improve the immunity and respiratory health of the patient. The combination is found to be effective in improving the strength of the respiratory system, especially in chronic cases of Cough.

4. CONCLUSION

COVID-19 causing millions of deaths and other casualties, creating havoc in the world. This article is a simple representation of how *Ayurveda* can help in the management of COVID-19 cases. Through this, traditional knowledge can be integrated into the healthcare system to combat the epidemic. *Ayurveda* can certainly play a significant role in preventing and managing the epidemic if integrated into the mainstream health system. As there are several references in *Ayurvedic* literature regarding the signs and symptoms associated with COVID-19. Hence, we can bring this to lime light so many can be benefited with this without leading to complications and death.

5. ACKNOWLEDGMENTS

Nil.

67. FUNDING

Nil.

7. ETHICAL APPROVALS

This study does not require ethical clearance as it is a review article.

8. CONFLICTS OF INTEREST

Nil.

9. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

10. PUBLISHERS NOTE

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REFERENCES

1. Sharma PV, editor, Translator. Charaka samhitha, Vimana sthana, 3/1, Vimana sthana, 3/20, Vimana sthana, 3/12-18. vol. 1. Varanasi: Choukamba Orientalia; 2014.

2. Nisteswar K, Translator. Sahasrayoga. Ghrityogaprakarana, AFI- Part I. Varanasi: Choukhamba Sanskrit Series Office; 2006. p. 8.
3. Sen GD. Bhaisajya ratnavali (with Vidyotini hindi commentary by Shastri A). Hikka Shvasa Chikitsa 16/5760. Varanasi: Chaukhambha Sanskrit Sansthan; 2005.
4. Duttatreya KA. Rasaratna smucchayam. Vol. 1., Ch. 2/11-16. Vidyotini. India: Meherchand Laxmandas Publications; 2017.
5. Lucas SK. Textbook of dravyaguna vijyana study of dravya materia medica. Study of drugs in detail. Vol. 2., Ch. 1. Varanasi: Chaukhambha Visvabharati Publications. p. 102-4.
6. Srikanta M. Sarangadhara samhita. Madhyama Khanda6/134-135. 1st ed. Varanasi: Choukamba Orientalia; 2017.
7. Tripathi B. Astanga hridaya, Vagabhatt. Chikitsa Sthana Kasachikitsa Adhyaya-03. Vol. 2. Ver. 127-32. Commentary- Nirmala. Hindi Vyakshya. Delhi: Choukhambha Sanskrit Praristhan; 2007.
8. Chowdhury P. *In silico* investigation of phytoconstituents from Indian medicinal herb '*Tinospora cordifolia* (giloy)' against SARS-CoV-2 (COVID-19) by molecular dynamics approach. J Biomol Struct Dyn. 2020;39:6792-809. doi: 10.1080/07391102.2020.1803968

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Test Reports of the Patient



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MRN: VIMEN-190867 IP No: 4262

Patient Name: Mrs. MALAKSHI BASAVANNIPPA HOLEYACH

Age / Gender: 45 Years / Female

Referred By: DR. SATYAK DANA

Department: COVID-19

Sample Collected Date & Time: 22/06/2021 07:34 PM

Reporting Date & Time: 22/06/2021 10:12 PM

SEROLOGY

Parameter	Result	Unit	Normal Range	Method
CRP TITER	<1.5	mg/l	0 - 5	Point Card Test
WV TRUST	NON-REACTIVE		NON-REACTIVE	Point Card Test
HIVAg	NEGATIVE			Point Card Test
HCV	NEGATIVE			Point Card Test

End of Report

Report Approved

Pathologist: Dr. Vanisha R. Deshpande MD
Microbiologist:
Lab Technologist:

BIOCHEMISTRY

Parameter	Result	Unit	Normal Range	Method
LFT				
SERUM BILIRUBIN TOTAL	0.52	mg/dl	0 - 2.0	EVELYN-MALLOY
SERUM BILIRUBIN DIRECT	0.24	mg/dl	0 - 0.4	EVELYN-MALLOY
SERUM BILIRUBIN INDIRECT	0.28	mg/dl	0.0 - 0.9	
TOTAL PROTEIN	4.9	mg/dl	6.4 - 8.3	BURDET
ALBUMIN	2.6	mg/dl	3.2 - 4.8	BCG
GLOBULIN	2.30	mg/dl	1.6 - 3.0	
A/G RATIO	1.13:1.0		2:1.0	
ALKALINE PHOSPHATASE	79.0	IUL	63 - 144	PNP AMP UV KINETIC
SGPT	54.3	IUL	0 - 31	UV KINETIC
SGPT	106.2	IUL	0 - 34	UV KINETIC
RANDOM BLOOD SUGAR	110.8	mg/dl	60 - 200	GOD-POD

RENAL FUNCTION TEST

Parameter	Result	Unit	Normal Range	Method
UREA	16.4	mg/dl	15 - 45	UREASE - GLDH
SERUM CREATININE	0.59	mg/dl	0.6 - 1.4	ENZYMATIC
SERUM SODIUM	136.1	mmol/L	135 - 155	ISE
SERUM POTASSIUM	4.47	mmol/L	3.5 - 5.5	ISE
SERUM CHLORIDE	100.1	mmol/L	96 - 110	ISE

End of Report

Report Approved

Pathologist: Dr. Vanisha R. Deshpande MD
Microbiologist:
Lab Technologist:



GANGA CLINICAL LABORATORY
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Cell : 9980933967, 9686208875

Patient Name: MALAKSHI
Referred By: Dr. A. S. SHETTY MBBS
Received On: 21/06/2021

Lab No: 6003
Age: 45
Sex: F

SEROLOGY

Parameter	Observed Value	Biological Reference Interval
CRP	POSITIVE 22.8 mg/L	(NORMAL 0 - 6 mg/L)
D-DIMER	3.6 mg/L	(NORMAL < 0.8 mg/L)

BIO-CHEMISTRY

Parameter	Observed Value	Biological Reference Interval
SERUM FERRITIN	233.8 ng/ml	13 - 651 ng/ml
LDH	227.8 U/L	100 - 450 U/L

End of Report

Technologist:



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A. P. M. C. Road, Sangameshwar Nagar Circle, Belgaum.
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BIO-CHEMISTRY

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SERUM FERRITIN	233.8 ng/ml	13 - 651 ng/ml
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End of Report

Technologist:



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Reporting Date & Time: 22/06/2021 10:12 PM

HAEMATOLOGY

Parameter	Result	Unit	Normal Range	Method
HAEMOGLOBIN	11.7	g/dl	11.5 - 15.5	
HGB	3.01	%	3.80 - 5.05	
PCV	36.1	%	34 - 45	
MCH	27.4	pg	27 - 32	
MCHC	29.9	g/dl	32 - 36	
RDW	12.3	%	11.5 - 14.5	
DIFFERENTIAL WBC COUNT				
Neutrophils	79	%	40 - 70	
Lymphocytes	18	%	20 - 40	
Eosinophils	0	%	1 - 5	
Monocytes	0	%	2 - 10	
Basophils	0	%	0 - 1	
Platelet Count	1.5	10 ⁹ /L	1.5 - 4.5	
Platelet Count	220000	10 ⁹ /L	150000 - 450000	

D-DIMER

Parameter	Result	Unit	Normal Range	Method
D-DIMER	1191.5	ng/ml	< 100	ELF-A

End of Report

Report Approved

Pathologist: Dr. Vanisha R. Deshpande MD
Microbiologist:
Lab Technologist:

Table 1: Test and results of the patient

Date	Tests and Results
June 13, 2021	Serology-CRP-Positive (72.1 mg/L); D-Dimer-0.41 mg/L Biochemistry-Serum Ferritin (450.2 ng/mL); LDH-620.8 U/L
June 17, 2021	Serology-CRP-Positive (70.3 mg/L); D-Dimer-0.41 mg/L Biochemistry-Serum Ferritin (520.2 ng/mL); LDH-549.8 U/L
June 21, 2021	Serology-CRP-Positive (77.3 mg/L); D-Dimer-3.4 mg/L Biochemistry-Serum Ferritin (450.2 ng/mL); LDH-620.8 U/L
June 22, 2021	Serology-CRP-Positive (72.3 mg/L); D-Dimer-0.41 mg/L Biochemistry-Serum Ferritin (450.2 ng/mL); LDH-620.8 U/L HRCT-(Low-dose Non Contrast CT chest)-Lungs-Scattered patchy ground glass opacities with mosaic attenuation and crazy paving pattern seen in both lungs. Airways-Normal Cardiac-Mildly enlarged CT chest demonstrates-CO-RADS category 5-Typical for COVID-19 infection CT Involvement Score (visual)-40% CT severity index-13/25 (moderate)

CT: Computed tomography, CRP: C-reactive protein, LDH: Lactate dehydrogenase,
HRCT: High-resolution computed tomography

Table 2: Patient management chart

S. No.	Medicines	Dose	Duration	Results
1	<i>Indukanta Kasaya</i> ^[2]	15 mL 3 times a day with equal amount of water	15 Days	After 5 days of taking medications
2	<i>Shwasa-Kasa Chintamani Rasa</i> ^[3]	1 Tablet 2 times a day with Honey		Cough reduced and appetite improved.
3	<i>Abhraka Bhasma</i> ^[4] + <i>Yastimadhu Choorna</i> ^[5] + <i>Shitopaladi Choorna</i> ^[6] with <i>Madhu</i>	<i>Muhurmuhu</i> for <i>Lehana</i>		Also Subjective recovery was seen.
4	<i>Agastya Rasayanam</i> ^[7]	<i>Muhurmuhu</i> for <i>Lehana</i>		Sense of smell and taste recovered after 1 month.
5	Shwasamritam Syrup	2 mL 3 times a day		