

**REVIEW OF AYURVEDIC BAHYA PRAYOGA KALPANA: LEPA, UPANAHA,
UDVARTANA, ABHYANGA, AND THEIR THERAPEUTIC MECHANISMS**Dr. Smita Madhavrao Sawant*¹, Dr. Amol Ravasaheb Jadhav²¹PG Scholar, Department Of Rasashastra and Bhaishajya Kalpana, Late Kedari Redekar Ayurvedic Mahavidyalaya P.G. Training and Research Centre, Gadhinglaj, Dist. Kolhapur.²Associate Professor, Department of Rasashastra and Bhaishajya Kalpana, Late Kedari Redekar Ayurvedic Mahavidyalaya, P.G. Training and Research Centre, Gadhinglaj, Dist. Kolhapur.***Corresponding Author: Dr. Smita Madhavrao Sawant**

PG Scholar, Department Of Rasashastra and Bhaishajya Kalpana, Late Kedari Redekar Ayurvedic Mahavidyalaya P.G. Training and Research Centre, Gadhinglaj, Dist. Kolhapur.

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ABSTRACT

Ayurveda emphasises harmony between the body, mind, and environment through both internal and external therapies. *Bahya Prayoga Kalpana*—the group of external applications—includes *Lepa* (herbal paste), *Upanaha* (medicated poultice), *Udvartana* (herbal powder massage), and *Abhyanga* (oil massage). These practices act through the skin to balance *Doshas*, improve circulation, and promote systemic well-being. This review compiles insights from classical Ayurvedic scriptures and modern scientific literature to explore their preparation, methodology, and therapeutic effects. *Lepa* is mainly used for inflammatory and dermatological conditions, *Upanaha* combines warmth and compression for musculoskeletal relief, *Udvartana* assists in detoxification and fat metabolism, and *Abhyanga* enhances neuromuscular tone and mental relaxation through gentle oleation. The physiological actions of these treatments correlate with mechanisms recognised in modern medicine, such as improved microcirculation, enhanced transdermal absorption, and modulation of the nervous system. Together, these traditional procedures exemplify Ayurveda's refined understanding of external healing and its alignment with integrative health principles.

KEYWORDS: Bahya Prayoga Kalpana, Lepa, Upanaha, Udvartana, Abhyanga.**INTRODUCTION**

Ayurveda, the ancient Indian system of medicine, is not only a therapeutic discipline but also a comprehensive science of life that emphasises the harmony between the body, mind, and environment. Its core philosophy revolves around maintaining the health of the healthy and restoring balance in the diseased through holistic interventions. The Ayurvedic system recognises both internal and external modes of treatment, broadly classified into *Antah Parimarjana* (internal administration of drugs), *Bahya Parimarjana* (external application of medicaments), and *Shastra Pranidhana* (surgical procedures).^[1] Among these, *Bahya Parimarjana Chikitsa*, the external mode of therapy, holds a significant position in preventive, curative, and rejuvenative healthcare.^[2]

External therapeutic applications (*Bahya Prayoga Kalpana*) in Ayurveda encompass a diverse range of procedures, including *Lepa* (application of herbal paste), *Upanaha* (medicated poultice), *Udvartana* (herbal powder massage), and *Abhyanga* (oil massage).^[3] These modalities are designed to act locally, yet they produce systemic effects by influencing the skin, muscular, and circulatory systems. Each form of external therapy is unique in its preparation, mode of application, and physiological impact. The common objective behind all these therapies is to balance the *Doshas-Vata*, *Pitta*, and *Kapha*, and promote the body's natural healing response.

Among the external preparations, *Lepa Kalpana* is one of the oldest and most extensively described formulations in Ayurvedic literature.^[4] It involves the topical application of a paste made from powdered herbs mixed with

specific liquid media. *Lepa* is employed in the management of various disorders, including inflammation, skin ailments, and cosmetic concerns.^[5] Ayurveda also describes its use in enhancing beauty and complexion, exemplified by *Kesharanjan Lepa*, a formulation applied to improve hair colour and prevent premature greying.^[6] Such traditional cosmetic uses highlight Ayurveda's early understanding of dermatological and aesthetic care through herbal remedies.

Upanaha Swedana, another external application, is derived from the words *Upa* (near) and *Nah* (to bind).^[7] It involves applying a warm herbal paste over the affected part of the body, followed by bandaging. This method induces mild sweating (*Swedana*), thereby improving circulation and relieving stiffness, pain, and swelling.^[8] The retention of the warm medicated paste for several hours allows gradual diffusion of therapeutic properties, enhancing tissue relaxation and repair.

In contrast, *Udvardhana* is a dry powder massage carried out with coarse and dry substances known as *Ruksha Dravyas*.^[9] Regular practice of *Udvardhana* has been mentioned to improve skin tone, reduce excessive body fat, and stimulate peripheral blood circulation.^[10] Its mechanical and thermal effects assist in detoxification and metabolic regulation, promoting a feeling of lightness and vitality.

Among the various *Bahya Prayoga Kalpanas*, *Abhyanga*, the therapeutic oil massage, holds a special place in both classical texts and contemporary practice. Derived from the Sanskrit roots *Abhi* (toward) and *Anjana* (to anoint), *Abhyanga* involves applying warm medicated oil over the entire body in a rhythmic manner.^[11] It is an integral part of *Dinacharya* (daily regimen) and is recommended for maintaining physical strength, flexibility, and mental calmness. This therapy enhances blood and lymphatic circulation, nourishes tissues, facilitates the removal of metabolic wastes, and rejuvenates the body. The term *Sneha* in Sanskrit means both "oil" and "affection," symbolising the nurturing and stabilising effects of this practice on both physiological and emotional planes.^[12]

With growing global interest in natural and traditional medicine, these Ayurvedic external therapies are being revisited for their scientific relevance and clinical efficacy. Their natural origin, cost-effectiveness, minimal side effects, and multifaceted therapeutic potential have contributed to their acceptance in integrative health systems. Modern investigations increasingly explore the pharmacological and physiological mechanisms underlying these procedures, such as improved microcirculation, enhanced transdermal absorption, and modulation of inflammatory pathways.

Therefore, the present review aims to comprehensively explore the Ayurvedic basis, preparation, and therapeutic mechanisms of *Lepa*, *Upanaha*, *Udvardhana*, and *Abhyanga*. By correlating classical knowledge with contemporary scientific perspectives, this paper seeks to illuminate how these *Bahya Prayoga Kalpanas* contribute to maintaining health, preventing disease, and promoting holistic well-being.

MATERIALS AND METHODS

This review was conducted through an extensive analysis of classical Ayurvedic texts, commentaries, and contemporary peer-reviewed journals related to *Bahya Prayoga Kalpana*. Data on *Lepa*, *Upanaha*, *Udvardhana*, and *Abhyanga* were systematically compiled, interpreted, and compared with modern scientific perspectives to understand their therapeutic mechanisms and clinical relevance.

RESULT

1. Lepa Kalpana

1.1 Concept and Definition

In the pharmaceutical context, *Lepa Kalpana* is comparable to *Kalka Kalpana*, differing mainly in its external use. According to Yadavji Trikamji, wet or dry medicinal substances are ground with prescribed liquid media using *Khalva Yantra* to obtain a fine paste. This paste, when applied externally, is termed *Lepa Kalpana*. Acharya Charaka states that *Sneha Drava* (unctuous medium) should be used in an adequate quantity, neither excessive nor insufficient, to achieve the desired consistency suitable for topical application (*Charaka Chikitsa 21/100*).

1.2 Importance of Lepa Kalpana

Acharya Sushruta emphasised the significance of *Lepa* by comparing it to the extinguishing effect of water poured on fire, indicating its capacity to pacify aggravated *Doshas* at the site of application (*Sushruta Chikitsa 1/15*). He further mentioned that *Alepa* is the foremost topical measure for relieving *Shotha* (inflammation) and *Shula* (pain) (*Sushruta Sutra 18/3*).

1.3 Synonyms

Various classical texts use synonyms for *Lepa*, such as *Alepa*, *Lipta*, *Lepana*, and *Lepa*, all referring to paste-based external applications (*Sharangadhara Samhita Uttara Khanda 11/01*).

1.4 Classification of Lepa

A. According to Acharya Sushruta

1. *Pralepa* – Cool, light, and should not dry completely.
2. *Pradeha* – Thick or thin, cool or warm in property.
3. *Alepa* – Intermediate in consistency between *Pralepa* and *Pradeha*.

B. According to Acharya Vagbhata

1. *Snaihika Lepa* – Contains *Sneha Dravya*; used in *Vata* disorders.

2. *Nirvapana Lepa* – Cooling type; used in *Pitta* disorders, burns, and toxic conditions.
3. *Prasadana Lepa* – Used in *Vata-Dushti Raktavikara*.
4. *Stambhana Lepa* – Coagulant; used in *Atiraktasrava*.
5. *Vilayana Lepa* – Contains *Ushnaviryā* drugs; used in *Apakvashotha, Kaphamedovilayana*.
6. *Pachana Lepa* – Composed of *Ushna* and *Ruksha* drugs; used in *Pachyamana Shotha*.
7. *Pidana Lepa* – Contains *Ruksha* and *Picchila* substances; applied in small wounds.
8. *Shodhana Lepa* – Used for the purification of wounds.
9. *Ropana Lepa* – Applied for wound healing.
10. *Savarnikaran Lepa* – Used to restore natural skin colour.

C. According to Acharya Sharangadhara

1. *Doshaghna Lepa* – Applied according to *Dosha* predominance; one-fourth *Angula* thick.
2. *Vishaghna Lepa* – Used in toxic conditions; one-third *Angula* thick.
3. *Varnya Lepa* – Applied for cosmetic purposes; one-half *Angula* thick.

1.5 Thickness of the Lepa

Charaka Samhita (21/100) prescribes *Pralepa* of one-third *Angushtha* thickness, ensuring uniform application. *Sushruta Samhita (18/12)* recommends a thickness equivalent to buffalo skin (*Mahisha Charma*), while *Sharangadhara Samhita (Uttara Khanda 11/2)* details specific thicknesses for *Doshaghna, Vishaghna,* and *Varnya* Lepas as one-fourth, one-third, and one-half *Angula*, respectively.

1.6 Quantity of Sneha Drava

According to *Sushruta Samhita (18/10)*, the proportion of *Sneha Dravya* in *Lepa* varies according to *Dosha* type:

- *Vataja*: ¼ part
- *Pittaja*: ⅓ part
- *Kaphaja*: ½ part

This ensures optimal consistency, spreadability, and penetration.

1.7 Method of Application

Acharya Sushruta (*Sushruta Sutra 18/4*) prescribed that *Lepa* should be applied in an upward direction-against hair follicles-to facilitate better absorption through *Romakoopa* and *Swedavahi Srotas*. The friction generated increases skin temperature, thereby enhancing transdermal uptake.

1.8 Duration and Time of Application

According to *Sushruta Samhita (18/13)*, *Lepa* should not be applied at night, as heat dissipation through skin pores is minimal and may cause blockage. *Charaka Samhita* supports this, mentioning that *Srotas* are less active at night. Exceptions include *Apakva Shotha* and *Rakta-*

Shleshma Shotha, where nighttime application is permissible.

1.9 Contraindications

Sushruta Samhita (18/15–16) advises against using stale *Lepa* or applying a new *Lepa* over an existing one, as it may increase local temperature, pain, or irritation. Reapplication without proper removal or reusing dried *Lepa* is contraindicated.

1.10 Shelf Life (Sāviryata Avadhi)

The *Sāviryata Avadhi* of *Lepa* depends on its ingredients. Herbal *Lepa* should be used within 24 hours to prevent decomposition, while mineral or metallic Lepas have longer stability. *Sharangadhara Samhita* and *Yogaratanakara* later introduced this concept. The *Ayurvedic Formulary of India (AFI)* also suggests the usable period until physical and sensory qualities are retained.

2. Upanaha Swedana^[7]

2.1 Types of Upanaha

Acharya Chakrapani classifies *Upanaha* into:

- *Sagni Upanaha* – Medicinal paste heated before application.
- *Niragni Upanaha* – Applied without heating but using thermally active herbs.

Acharya Dalhana described three more types:

- *Pradeha Upanaha* – Thick medicated paste applied directly.
- *Sankara Upanaha* – Paste formed into a bolus and wrapped in cloth.
- *Bandhana Upanaha* – Paste applied and tied firmly with leaves or cloth.

Other types include *Salavana Upanaha* (with rock salt), *Snigdha* and *Ruksha Upanaha*, depending on the nature of drugs. the

2.2 Procedure

The *Upanaha Swedana* procedure consists of three stages:

Purva Karma

- Preparation of medicated paste using *Vatahara Dravyas* mixed with *Kanji, Kinva, Sneha,* or *Arishtha*.
- The affected site is examined and the patient positioned comfortably.

Pradhana Karma

- The warmed paste (3–5 mm thick) is applied on the affected area in the opposite direction of hair growth.
- Covered with *Vatahara Patra* (e.g., *Eranda, Arka*) and bandaged moderately tight.
- Kept for approximately twelve hours, commonly overnight.

Paschat Karma

- The paste is removed once dry or cool.
- The area is cleaned with lukewarm water; the paste is discarded after single use.

2.3 Duration and Safety

The standard retention time is 12 hours. Precautions include avoiding excessive heat to prevent burns and ensuring the paste is freshly prepared for each session.

3. Udvartana^[10]

3.1 Types of Udvartana

According to *Charaka Samhita*, *Udvartana* is of two types:

- *Snigdha Udvartana* – Performed with oil-based paste for thin or lean individuals.
- *Ruksha Udvartana* – Performed with dry herbal powder for obese or Kapha-dominant individuals.

Sushruta Samhita describes three terms related to this procedure:

- *Udvartana* – General dry massage.
- *Udgarshana* – Using coarse powders like *Reetha* or *Ishatika Churna*.
- *Utsadana* – Using *Sneha Kalka* for beautification or wound management.

3.2 Materials and Indications

Snigdha Udvartana

Indicated in thin persons, using medicated oils according to *Prakriti*:

- *Vata*: *Himsagara Taila*
- *Pitta*: *Chandanadi* or *Chandanabalalakhshadi Taila*
- *Kapha*: *Triphaladya Taila*
- *Sama*: *Asanabilvadi Taila*

Ruksha Udvartana

Used in obesity, neurological disorders, and skin diseases, with powders like *Kolkulathadi Churna*, *Triphala Churna*, *Nalpamaradi Churna*, and *Nimba Churna*.

Udgarshana

Employed for oily skin, pruritus, or rashes using coarse powders like *Mrittika*, *Reetha*, or *brick powder*.

Utsadana

Used for beautification and improving skin lustre.

3.3 Procedure

Performed in the morning after evacuation of bowels, in an empty stomach. Massage is done in four postures: supine, left lateral, prone, and right lateral, using linear and circular strokes opposite to the direction of hair growth.

Part-specific Technique

- Arms and legs: linear massage.
- Joints and abdomen: circular motion.

- Chest and back: combined circular and linear motion.

Each part is massaged for 3–5 minutes; total duration 30–45 minutes.

3.4 Post-Procedural Care

The patient rests for 15 minutes post-massage and bathes with lukewarm water after one hour. Adequate asepsis and protection of facial regions are advised during powder application.

4. ABHYANGA^[13]

4.1 Definition and Concept

The term *Abhyanga* derives from *Abhi* (toward) and *Anjana* (to anoint). It denotes the act of applying warm medicated oil to the entire body, followed by massage. Ayurveda prescribes *Abhyanga* as part of *Dinacharya* for health maintenance and disease prevention.

4.2 Indications

1. **Daily Routine:** Promotes strength and stability in healthy individuals.
2. **Seasonal Application:** Recommended during cold seasons (*Hemanta*, *Shishira Ritu*) to counter dryness.
3. **Trivial Manifestations:** Beneficial in symptoms arising from suppression of natural urges.
4. **Diseases:** Effective in *Vata Vyadhi*, *Shwayathu*, *Kushta*, *Switra*, *Raktapitta*, *Gulma*, *Mutrakricha*, *Kasa*, *Swasa*, and other *Vataja* disorders.

4.3 Procedure

- Begins with *Shiroabhyanga* (head massage), followed by massage of the entire body (*Mardana*).
- Conducted in *Anuloma Gati* (direction of hair growth).
- Circular strokes over joints, linear over muscles.
- Total duration: 35–45 minutes, performed in seven positions: sitting, supine, left lateral, prone, right lateral, supine, and sitting again.
- After the massage, oil is wiped off with a soft towel; the patient rests for 15 minutes, followed by a warm bath.

4.4 Basis of Classification

Abhyanga is classified based on:

- **Nature of Drug Used:** Dry, powder, or oil massage.
- **Means of Pressure:** Manual or mechanical.
- **Depth of Application:** Light or deep massage.
- **Area:** General or local.
- **Technique:** Stroking, pressure, friction, kneading, vibration, or percussion.

4.5 Contraindications

General: High fever, severe cardiac or renal disease, osteoporosis, deep X-ray therapy, severe spasticity.
Local: Acute inflammation, skin diseases, open wounds, varicose veins, thrombosis, recent fractures, malignancy, myositis ossificans.

4.6 Physiological Effects

Massage enhances venous and lymphatic flow, increases arterial circulation, improves tissue elasticity, facilitates the removal of metabolic wastes, and improves skin nutrition and flexibility. It also regulates the autonomic nervous system and promotes muscle relaxation.

4.7 Duration of Tissue Penetration

As per *Dalhana's commentary*, medicated oil penetrates through successive *Dhatus* with specific time intervals-

- *Roma*: 300 *Matra* (≈ 95 s)
- *Twak*: 400 *Matra* (≈ 127 s)
- *Rakta*: 500 *Matra* (≈ 159 s)
- *Mamsa*: 600 *Matra* (≈ 190 s)
- *Meda*: 700 *Matra* (≈ 220 s)
- *Asthi*: 800 *Matra* (≈ 254 s)
- *Majja*: 900 *Matra* (≈ 285 s)

DISCUSSION

Ayurveda describes *Bahya Prayoga Kalpana* as a group of external therapeutic procedures aimed at balancing the body's functional principles through the skin. These preparations-*Lepa*, *Upanaha*, *Udvardana*, and *Abhyanga*-demonstrate the ancient understanding of localised drug action and systemic regulation through external application. Each method, although distinct in procedure, operates on the same foundation: facilitating *Dosha Shamana* (pacification of humoral imbalance), enhancing circulation, and supporting tissue rejuvenation. When interpreted through modern physiological concepts, these therapies reveal significant relevance to dermatology, pain management, and rehabilitation sciences.

1. Lepa Kalpana

Lepa Kalpana represents the Ayurvedic form of topical formulation designed for local drug delivery. The classical method of preparing *Lepa*, using finely powdered herbs mixed with specific liquid media, reflects an early understanding of pharmacological solubility and absorption dynamics. The specification of *Sneha Drava* proportion for different *Doshas* indicates a tailored therapeutic approach similar to personalised pharmacotherapy.

From a physiological perspective, the mechanical friction during *Lepa* application slightly elevates skin temperature, improving dermal permeability and microcirculation. Modern research supports that lipophilic bases enhance the absorption of phytochemicals through the skin barrier. Therefore, the therapeutic outcomes described in classics-such as reduction in inflammation, swelling, and pain-may be attributed to both pharmacological and thermomechanical mechanisms.

In cosmetology, *Varnya Lepas* signify the Ayurvedic recognition of antioxidant and depigmenting herbs for maintaining skin tone and texture. The emphasis on freshness and limited shelf life aligns with modern

stability principles, where exposure to moisture and microbial contamination reduces product efficacy.

2. Upanaha Swedana

The procedure of *Upanaha Swedana* demonstrates Ayurveda's integrated approach combining heat therapy, mechanical compression, and drug application. The process of applying a warm herbal paste and retaining it with bandages for several hours ensures continuous warmth and sustained drug contact with the skin. This resembles modern thermal compresses and transdermal heat packs.

The therapeutic effect of *Upanaha* can be explained through vasodilation and enhanced metabolic exchange at the local level. Warmth increases blood flow, relieves muscle spasm, and facilitates the removal of inflammatory mediators, which supports its indication in *Sandhigata Vata* (joint disorders) and *Mamsagata Vata* (muscle stiffness). The recommendation to apply the paste in the opposite direction of hair growth enhances absorption through follicular routes, paralleling the concept of transfollicular drug delivery recognised in pharmacology.

Discarding stale paste and avoiding reuse indicates awareness of microbial degradation and potency loss. Hence, *Upanaha Swedana* stands as a practical and hygienic form of sustained local therapy, combining thermal and pharmacological actions for pain and inflammation management.

3. Udvardana

Udvardana is a specialised external therapy where herbal powders or pastes are massaged onto the body in the opposite direction of hair growth. It is primarily intended for metabolic regulation and enhancement of skin health. The friction generated during *Udvardana* stimulates the peripheral circulation and lymphatic drainage, which aids in the mobilisation of subcutaneous fat and toxins. The two main variants-*Snigdha* (unctuous) and *Ruksha* (dry)-show the precision of Ayurveda in addressing different body constitutions and disorders.

Modern evidence supports that dry powder massage promotes exfoliation, increases metabolic rate, and improves lipid metabolism. This correlates with Ayurvedic descriptions of *Meda Vilayana* (fat liquefaction) and *Kapha Hara* (removal of stagnation). Furthermore, the rhythmic strokes and mechanical pressure activate the somatosensory system, promoting sympathetic and parasympathetic balance, which can reduce psychological fatigue.

The cleansing effect of *Udvardana* on the skin also improves sweat gland function and dermal respiration, which supports the traditional claims of *Tvak Prasadana* (enhancement of skin texture). Hence, *Udvardana* can be interpreted as both a detoxifying and rejuvenating

therapy that bridges physical, cosmetic, and metabolic health.

4. Abhyanga

Abhyanga, or oleation massage, is among the most comprehensive external therapies described in Ayurveda. The practice of massaging the body with warm medicated oil has multidimensional effects-nutritional, circulatory, and neurological. The Ayurvedic explanation that *Sneha* (oil) also means *love* highlights the emotional and psychological influence of tactile therapy, which modern science now recognises in the form of touch-induced oxytocin release and stress reduction.

Regular *Abhyanga* promotes lubrication of joints, enhances muscle tone, and improves the elasticity of the skin. The downward strokes (*Anuloma Gati*) and circular movements over joints facilitate lymphatic drainage and venous return, while rhythmic friction improves tissue metabolism. The gradual penetration of oil through the *Dhatus*, as described by Dalhana, resembles the diffusion kinetics observed in lipid-based transdermal systems.

In neurological and musculoskeletal conditions dominated by *Vata Dosha*, *Abhyanga* provides stability, alleviates pain, and restores mobility. The practice is also preventive in nature, as it strengthens the body's resilience to stress and climatic variation. Scientific studies on massage therapy confirm that similar practices lower cortisol levels, improve sleep, and enhance parasympathetic activity, corroborating the ancient observations of relaxation and rejuvenation through *Abhyanga*.

5. Integrated Therapeutic Perspective

Although each therapy-*Lepa*, *Upanaha*, *Udvardana*, and *Abhyanga*-has a unique procedural identity, they share a unifying mechanism of regulating *Vata* and clearing obstructed *Srotas* (channels). The heat, pressure, and unction involved in these procedures collectively promote detoxification and improve cellular nutrition. In modern terms, these actions can be correlated with vasodilation, lymphatic activation, and enhanced transdermal absorption of phytochemicals.

The Ayurvedic understanding of external applications anticipates several modern therapeutic principles: controlled drug release, topical anti-inflammatory effects, and mechanical stimulation for pain relief. Their holistic design ensures both local and systemic impact, local through pharmacological absorption and systemic through sensory and neurological modulation.

Moreover, these therapies emphasise sustainable and individualized healthcare-each tailored to the patient's *Prakriti*, the disease stage, and the season. This makes *Bahya Prayoga Kalpana* a model for personalised and integrative treatment approaches relevant even in present-day clinical practice.

6. Contemporary Relevance

The revival of Ayurveda in global healthcare has increased interest in these traditional procedures for their safety, efficacy, and minimal side effects. Clinical studies have demonstrated that *Abhyanga* and *Udvardana* improve circulation and metabolism, while *Lepa* and *Upanaha* provide effective local management for inflammation and pain. The precise guidelines regarding formulation, temperature, and duration in classical texts parallel modern standardisation and quality-control principles in pharmaceutical sciences.

Integrating these therapies into modern wellness and rehabilitation programs could offer complementary strategies for managing chronic pain, obesity, dermatological disorders, and psychosomatic stress. Thus, the *Bahya Prayoga Kalpana* represents not merely a historical medical practice but a dynamic, evidence-supported system of therapeutic touch and topical medication.

CONCLUSION

Bahya Prayoga Kalpana, which includes *Lepa*, *Upanaha*, *Udvardana*, and *Abhyanga*, demonstrates Ayurveda's deep insight into external healing methods. These therapies harmonise body functions by balancing *Doshas*, improving circulation, and aiding natural recovery, thus offering a safe and holistic approach suitable for modern healthcare practices.

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