



**A LITERARY REVIEW ON THE MEDICINAL AND TOXICOLOGICAL USE OF
VATSANABHAAS A FOLKLORE POISON W.S.R. VARIOUS RASA GRANTHAS**

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ABSTRACT

Vatsanabha (*Aconitum ferox* Wall. and other *Aconitum* species), renowned in folklore as a potent neuro-cardiac poison, occupies a paradoxical and revered position in the Ayurvedic pharmacopoeia, particularly within the Alchemy-centric Rasa Shastra tradition. This literary review aims to critically synthesize the classical knowledge regarding Vatsanabha as documented in principal Rasa Granthas (treatises on alchemy and iatrochemistry). The methodology involves a systematic analysis of its Ayurvedic properties (Rasa, Guna, Virya, Vipaka, Prabhava) as described in various Nighantus (lexicons), its indispensable Shodhana (purification/detoxification) processes, and its therapeutic formulations. The review reveals that through meticulously detailed Shodhana procedures, a substance of extreme toxicity is transformed into a therapeutically invaluable medicine. It is extensively used in a multitude of formulations for conditions ranging from Jwara (fever), Vatavyadhi (neuromuscular disorders), and Krimi (parasitic infections) to acting as a potent Rasayana (rejuvenator) and Vajikarana (aphrodisiac). The findings underscore the sophistication of Ayurvedic pharmaceuticals in mitigating inherent toxicity to unlock profound therapeutic potential, emphasizing the indispensable role of classical texts in guiding its safe and effective application.

KEYWORDS: Vatsanabha, Aconite, Rasa Shastra, Shodhana, Detoxification, Rasa Granthas, Ayurvedic Alchemy, Poison to Medicine, Rasa Preparations.

INTRODUCTION

In the vast repository of Ayurvedic Materia medica, few substances embody the principle of "Poison in Medicine, Medicine in Poison" (*Visham Ausadham, Ausadham Visham*) as strikingly as Vatsanabha. Primarily identified as *Aconitum ferox* (Monkshood or Indian Aconite), it contains highly toxic diterpenoid alkaloids like aconitine, which directly impact the cardiovascular and nervous systems. In its raw state, it is a lethal poison, well-documented in folklore and history. However, Ayurveda, through its specialized branch of *Rasa Shastra*, has systematically harnessed its therapeutic potential. The *Rasa Granthas* (classical texts of iatrochemistry) provide a rigorous pharmaco-technical framework for its conversion from a *Visha* (poison) to a *Mahaushadha* (great medicine). This review delves into these classical sources to present a consolidated view of Vatsanabha's

described properties, the critical detoxification (*Shodhana*) methods, and its integration into complex medicinal formulations, thereby highlighting the evidence-based alchemy that forms the cornerstone of its safe medicinal use.

Traditional Classification (Based on Tuber Colour)

Ayurvedic texts classify raw Vatsanabha into three varieties, with a clear preference stated for therapeutic use.

Variety (Based on Colour)	Traditional Assessment
Pale / White	Superior (<i>Shreshtha</i>) - Considered the best for medicinal purposes post-purification.
Gray	Intermediate.
Black	Inferior.

Botanical Overview of the *Aconitum* Genus

- **Family:** Ranunculaceae
- **Global Diversity:** Nearly 300 species, primarily found in temperate and alpine regions of the northern hemisphere.
- **Indian Context:**
 - Approximately 26 species and 2 varieties are found in India.
 - Distribution is restricted to the **Himalayan region**, with notable differences between eastern and western zones.

- **Commercial Reality:** The "Vatsanabha" in the Indian market is often a **heterogeneous mixture of multiple species**, leading to significant variation in alkaloid content and toxicity between samples. This poses a major challenge for standardization.

Key Medicinal & Toxic Species Found in India

The following table lists species commonly involved in the drug trade or traditional use in the Indian subcontinent. Their properties range from highly toxic to non-toxic.

Botanical Name	Common Habitat / Notes	Key Alkaloids & Properties	Toxicity & Traditional Use
<i>Aconitum heterophyllum</i> Wall.	Lower Himalayas.	Atisine (non-toxic alkaloid).	NON-TOXIC. Known as Atis/Ativisha , used as a distinct medicine for fever, diarrhea, and as a digestant. Not used as "Vatsanabha."
<i>Aconitum palmatum</i> Staph.	High altitudes (10,000-14,000 ft).	Pseudoaconitine.	HIGHLY TOXIC. More toxic than aconitine. Causes tingling on tongue.
<i>Aconitum ferox</i> Wall.	-	Aconitine, Pseudoaconitine.	HIGHLY TOXIC. The primary species identified as Vatsanabha . Traditionally used as an arrow/spear poison. Used externally as a paste for rheumatism.
<i>Aconitum chasmanthum</i> Staph.	High altitudes (7,000-12,000 ft). Blackish-brown tuber.	Indaconitine (reportedly ~10x more potent than aconitine).	EXTREMELY TOXIC.
<i>Aconitum spicatum</i> Staph.	-	Aconitene, Pseudoaconitene.	Toxic.
<i>Aconitum laciniatum</i> Staph.	Tibet and Sikkim.	Not specified in text.	Toxic variety.
<i>Aconitum bisma</i> Staph.	Common in Nepal, Sikkim, Eastern Himalayas.	Bikhaconitine (similar to pseudoaconitine).	HIGHLY TOXIC. A major commercial source.
<i>Aconitum napellus</i> Jacq.	Kumayu & Garhwal regions (Lower Himalaya).	Sweet-tasting varieties exist.	NON-TOXIC (certain varieties).

Ayurvedic Properties of Vatsanabha as per Different

Nighantus: The *Nighantus* offer foundational knowledge on the inherent qualities of drugs. The properties of Vatsanabha, as per major lexicons, are summarized below.

Nighantu	Rasa	Guna	Virya	Vipaka	Prabhava/Doshakarma
Dhanvantari Nighantu	Katu, Tikta	Ruksha, Teekshna	Ushna	Katu	Kapha-Vata Shamaka, Medhya (Nootropic)
Raj Nighantu	Katu	Laghu, Ruksha, Sara	Ushna	Katu	Vata-Kapha Hara, Jwaraghna (Antipyretic)
Bhavaprakasha Nighantu	Katu, Tikta	Teekshna, Vyavayi	Ushna	Katu	Vishaghna (Antitoxic), Dipana (Appetizer)
Shaligram Nighantu	Katu	Teekshna	Ati-Ushna (Very Hot)	Katu	Hridya (Cardiac), Vajikarana (Aphrodisiac)

[Note: The consistent mention of Katu Rasa, Ushna Virya, and Katu Vipaka underscores its potent heating, penetrating, and kapha-vata alleviating properties, which are central to its therapeutic action post-purification.]

Ayurvedic Pharmacology of Aconite (Vatsanabha)

Property/ Guna	Differential Property	Action/ Karma	Pharmacological Use / Indication	Adverse Reactions/ If Unprocessed/Overdose
Rasa (Taste)				
	Katu (Pungent)	Reduces Kapha	Prokinesis (promotes movement), Digestive stimulant	Neuro-cardiac toxicity, Burning sensation
	Tikta (Bitter)	Reduces Kapha	Antipyresis (fever reduction), Detoxifying	
	Kashaya (Astringent)	Reduces Kapha	Reduces mucous production, Absorbent	
Guna (Quality)				
	Ruksha (Dry)	Reduces Kapha	Reduces mucous production, Drying effect	Excessive dryness, Debility
	Tikshana (Sharp/Penetrating)	Reduces Kapha	Mucolytic, Penetrates deep tissues	Tissue irritation, Ulceration
	Laghu (Light)	Reduces Kapha	Reduces edema, Easy to digest	
	Vyavayi (Pervasive)	<i>Effect spreads rapidly</i>	Quick systemic action, Reaches all channels	Rapid onset of toxic systemic effects
	Vikasi (Disintegrating)	<i>Causes looseness</i>	Breaks down stiffness/blockages	May cause weakness, loose joints
Virya (Potency)				
	Ushna (Hot)	Increases Pitta, Reduces Kapha & Vata	Improved appetite & digestion, Prokinesis, Analgesic (pain relief)	

Classical Acknowledgment of Toxicity

Ancient texts explicitly warn about the inherent dangers of crude or improperly used Vatsanabha.

- **Toxic Manifestations Noted:** Burning sensation (*Daha*), syncope (*Murchha*), bradycardia, and fatal cardiac arrest.
- **Primary Safeguard:** Internal use is permitted **only after** specific detoxification (*Shodhana*) and in controlled doses.

Various Shodhana Procedures of Vatsanabha

Shodhana is the cornerstone for the safe use of Vatsanabha. It involves physical and chemical processing to reduce toxicity and enhance therapeutic efficacy. Different texts prescribe varied media (*Shodhana Dravyas*) and durations.

Processing Text/Context	Primary Shodhana Dravya (Media)	Procedure (Brief)	Key Indicative Endpoint (Nishpatti)
General Principle	Cow's Urine (<i>Gomutra</i>), Godugdha (Cow's Milk)	Prolonged boiling (<i>Svedana</i>) or soaking (<i>Bhavana</i>) for specified days (3-7 days common).	Reduction in pungent smell, change in color, brittleness.
As per Rasa Texts	- Gomutra: Most common. - Godugdha: For specific formulations. - Kanji (sour gruel). - Triphala Kwath.	Boiling in liquid for 3 to 6 <i>Yama</i> (approx. 9-18 hours). Often repeated cycles. Washing after each cycle.	The tuber becomes softer, loses its acidity, and slices become translucent.
Specific Mention (e.g., Rasa Tarangini)	Two-Step Process: 1st in Gomutra, 2nd in Goghrita (Cow Ghee).	Boil in Gomutra until soft. Then fry the pieces in Cow Ghee.	Attains a specific luster and is considered <i>Nirvisha</i> (non-toxic).

Formulations Containing Vatsanabha in Key Rasa Granthas

The purified Vatsanabha is a key ingredient in numerous polyherbomineral formulations. Below is a table

summarizing notable formulations from major *Rasa Granthas*.

Rasa Grantha	Formulation Name	Primary Therapeutic Indications
Rasa Ratna Samucchaya	Vatsanabha Bhasma (Purified calcinate)	<i>Jwara</i> (Fever), <i>Kasa</i> (Cough), <i>Shwasa</i> (Asthma), <i>Krimi</i> (Parasites).
	Sootashekhar Rasa	<i>Amlapitta</i> (Acidity), <i>Ardhavabhedaka</i> (Migraine), <i>Jwara</i> .
Rasendra Sara Sangraha	Ananda Bhairava Rasa	<i>Sarva Jwara</i> (All types of fever), <i>Vata-Rakta</i> (Gout), <i>Gulma</i> (Abdominal lump).
	Shwasakuthara Rasa	<i>Tamaka Shwasa</i> (Bronchial Asthma), chronic respiratory disorders.
Rasa Manjari	VishamaJwarantaka Rasa	<i>Vishama Jwara</i> (Intermittent/Chronic fevers like malaria).
	Kapha Ketu Rasa	<i>Kaphaja</i> disorders, <i>Agnimandya</i> (Digestive impairment), <i>Aruchi</i> (Anorexia).
Rasendra Chintamani	Mrityunjaya Rasa	Severe <i>Jwara</i> , <i>Unmada</i> (Psychosis), acts as a <i>Rasayana</i> and <i>Vishaghna</i> .
	Vata Vidhwamsana Rasa	<i>Vatavyadhi</i> (Neurological disorders like paralysis, sciatica).
Rasa Kamadhenu / Rasamritam	Siddha Makaradhwaja	<i>Maharasaayana</i> (Superior rejuvenator), <i>Hridya</i> (Cardiotonic), <i>Vajikarana</i> .
Rasa Tarangini	Jwaranasha Rasa / Jwarahara Lauha	Persistent fevers, <i>Pandu</i> (Anemia), <i>Pliha Roga</i> (Splenic disorders).
	Vatala Rasa	<i>Amavata</i> (Rheumatoid Arthritis), <i>Vata</i> predominant painful conditions.
Rasa Tantra Sara & Siddha Prayoga Sangraha	Vasantakusumakara Rasa	<i>Prameha</i> (Diabetes), <i>Shukrakshaya</i> (Oligospermia), <i>Dhatuposhana</i> (Nutritive).
	Sanjivani Vati	<i>Sannipata-Jwara</i> (Febrile crises), <i>Vishuchika</i> (Gastroenteritis), <i>Atisara</i> (Diarrhea).

Name of the Compound	Reference Book	Indication / Purpose
Agnikumara Rasa	Bhaisajya Ratnavali	Indigestion
Agnisandipana Rasa	Bhaisajya Ratnavali	Indigestion
Agnitundi Bati	Bhaisajya Ratnavali	Indigestion
Ajirna Kantaka Rasa	Bhava Prakasha	Indigestion
Amara Sundari Bati	Yoga Chintamani	Vata disease
Amrit Kala Nidhi Rasa	Yoga Ratnakara	Indigestion, Fever
Ananda Bhairava Rasa	Rasa Raj Sunder	Fever, cough, diarrhea
Ashvini Kumara Rasa	Anupana Tarangini	Chronic diarrhea
Aswakanchuki Rasa	Sidha Yoga Samgriha	Respiratory tract infections, fever
Betal Rasa	Rasa Sara Samgriha	Malarial fever, Septicemia
Durjala Jeta Rasa	Yoga Ratnakara	Disease caused by contaminated water (e.g., infective diarrhea, fever)
Gada Murari Rasa	Rasa Tarangini	Inflammatory fever
Grihani Gaja Kesari	Yoga Ratnakara	Infective diarrhea
Grihani Kapata Rasa	Yoga Ratnakara	Chronic diarrhea
Hinguleshvara Rasa	Bhaisajya Ratnavali	Joint pain, Viral fever
Jaya Bati	Rasa Sara Samgriha	Pain in abdomen
Jvarankusha Rasa	Bhaisajya Ratnavali	Pain and fever
Kalari Rasa	Yoga Chintamani	Malarial fever
Kanaka Sunder Rasa	Yoga Chintamani	Septicemia, Viral fever
Kapha Ketu Rasa	Rasa Tarangini	Common cold, Cough, fever
Kasturibhairava Rasa	Sidha Yoga Samgriha	Enteric fever
Laxmi Narayana Rasa	Rasa Yoga Samgriha	Chronic fever
Mrita Sanjivani Rasa	Bhaisajya Ratnavali	Rheumatic pain, Malarial fever
Mritunjaya Rasa	Rasa Tarangini	Chronic fever
Narayana Jwarankusha Rasa	Yoga Ratnakara	Fever

Pancha Vaktra Rasa	Rasa Yoga Sagar	Septicaemia, Fever
Panchamrita Rasa	Rasa Ratna Sammurchaya	Initial and chronic stage of tuberculosis
Pratap Lankeshwara Rasa	Yoga Ratnakara	Puerperal fever
Ramabana Rasa	Bhaisajya Ratnavali	Diarrhea, pain in abdomen
Sanjeevani Bati	Sharangdhara Samhita	Common cold with fever, indigestion
Sannipata Bhirava Rasa	Bhaisajya Ratnavali	Septicemia
Shiva Tandava Rasa	Rasa Tarangini	Septicaemia
Shleshmakalana Rasa	Rasendra Sara Samgriha	Common cold
Shula Kuthara Rasa	Vrihad Nighantu Ratnakara	Indigestion
ShvasaKuthara Rasa	Bhaisajya Ratnavali	Asthmatic bronchitis
Tribhuvan Kirti Rasa	Yoga Ratnakara	Influenza, viral fever
Tripur Bhairava Rasa	Bhava Prakasha	Fever
Vata Gajankusha Rasa	Rasendra Sara Samgriha	Sciatica, obesity, Vata disease
Vatabh Kesari Rasa	Siddha Bhairava	Pneumonia
VisuchiVidhvansan Rasa	Bhaisajya Ratnavali	Acute gastroenteritis

The Classical Multi-Layer Safety Framework

Ayurveda prescribes a holistic system encompassing purification, supportive regimen, and patient selection to mitigate risk.

A. Pharmaceutical Detoxification (*Shodhana*)

- **Purpose:** To hydrolyze toxic diterpenoid alkaloids (e.g., Aconitine) into less toxic analogs.
- **Common Media:** Cow's urine (*Gomutra*), Cow's milk (*Godugdha*), *Triphala* decoction.

- **Process:** Prolonged boiling (*Svedana*) for specified durations (e.g., 3-7 days).

B. Contextual Regimen (*Pathya-Apathya*) During Therapy

The dietary and behavioral context is considered crucial to prevent *Pitta* aggravation, which is believed to potentiate toxicity.

Table: Supportive and Restrictive Regimen for Aconite Therapy.

Component	Specifics to AVOID (<i>Apathya</i>)	Specifics to FOLLOW (<i>Pathya</i>)	Rationale (Dosha-Based)
Diet	Katu (pungent), Amla (sour), Lavana (salty) tastes; Oily foods	Cow's milk, Rice, Wheat, Sweet-tasting foods; Cold water	Avoids aggravating <i>Pitta</i> ; Pacifying diet counteracts the drug's intense heating (<i>Ushna</i>) potency.
Behavior	Afternoon nap; Exposure to sun & heat	Moderate activity; Cool environment	Prevents <i>Kapha</i> increase & further <i>Pitta</i> aggravation from external heat.

C. Stringent Patient Contraindications (*Nishiddha*)

Classical texts prohibit use in specific physiological and environmental conditions, demonstrating a sophisticated risk-assessment model.

Table: Classical Contraindications for Vatsanabha Use.

Contraindication	Presumed Rationale
Pitta Prakriti (Pitta-dominant constitution) / Pitta Vikriti (active Pitta imbalance)	The drug's hot (<i>Ushma</i>) potency would synergistically and dangerously exacerbate <i>Pitta</i> .
Debilitated States: Physical exhaustion, dehydration, chronic disease	Diminished digestive/metabolic capacity (<i>Agni</i>) and vitality (<i>Ojas</i>) increase susceptibility to toxicity.
Extremes of Age: Infants & the Elderly	Unpredictable pharmacokinetics and delicate physiology.
Pregnancy	Risk of foetal harm (<i>Garbha</i>).
Seasons: Summer (<i>Grishma</i>) & Rainy (<i>Varsha</i>)	Natural aggravation of <i>Pitta</i> and <i>Vata</i> , respectively, creating a hostile host environment.
Topical Use on Marma (Vital Points)	Risk of severe local and systemic reactions due to rapid absorption.

Contemporary Adverse Drug Reaction (ADR) Landscape: A Critical Gap Analysis

Modern reports highlight a systemic failure to implement classical safeguards.

A. Global ADR Profile (Literature: 1985-2006)

- **Primary Sources:** Most poisonings linked to **Traditional Chinese Medicine (TCM)** preparations, **unprocessed herb consumption**, accidental, or suicidal intake.

- **Clinical Presentation:** Numbness/tingling (perioral spreading to limbs), nausea, vomiting, hypotension, life-threatening ventricular arrhythmias.
- **The Ayurvedic Paradox:** Minimal ADRs formally attributed to *properly manufactured* Ayurvedic drugs. This raises critical questions:
 1. Is it due to the efficacy of classical *Shodhana*?
 2. Or is it a result of **severe under-reporting**, lack of recognition by conventional toxicologists, and absence of a formal Ayurvedic pharmacovigilance system?

Table: Modes of Aconite-Related Adverse Reactions.

Mode of Exposure	Associated Risk Level	Common Scenario
Unprocessed/Crude Herb	Very High	Accidental intake, suicidal attempt, homemade capsules.
Improperly Processed TCM/Herbal Prep	High	Inadequate detoxification, incorrect species, overdose.
Concurrent Use of Multiple Aconite Formulas	High	Patient unknowingly taking >1 medicine for same ailment (e.g., cold/fever).
Processed Ayurvedic Medicine (Theoretically)	Low-Moderate (If protocols followed)	Risk escalates with manufacturing defects or ignoring contraindications.

B. Critical Case Study Analysis: The Lucknow Incident

- **Patient:** 30-year-old male with acute bradycardia (HR 42), vomiting, prostration.
- **Trigger:** Consumption of **two** Ayurvedic drugs for common cold: *Tribhuvanakirti Rasa* and *Mahalakshmi Vilas Rasa* (both contain Vatsanabha).
- **Root Cause Analysis (Classical Perspective):**

1. **Overdosing:** Concomitant use doubled the Aconite dose.

2. **Possible Improper Shodhana:** Unknown manufacturing quality.

3. **Violated Contraindication:** Patient was of *Pitta* constitution—an absolute contraindication.

- **Implication:** This case is not an anomaly but a predictable outcome of violating multiple classical safety rules.

4. Critical Discussion: Bridging the Ancient-Contemporary Chasm

The disparity between classical ideal and modern ADR patterns stems from systemic failures.

Classical Safety Pillar	Modern Compromise / Gap	Consequence
Standardized <i>Shodhana</i>	Variable/abbreviated processes; adulterated raw herbs; lack of alkaloid marker testing.	Unpredictable, potentially toxic final product.
Strict <i>Pathya-Apathya</i>	Largely ignored in practice and patient counseling.	Loss of protective context, increased risk of <i>Pitta</i> provocation.
Rigorous Patient Selection	<i>Prakriti</i> assessment marginalized; OTC availability.	Administration to contraindicated individuals (e.g., <i>Pitta</i> types, debilitated).
Supervised Administration	Widespread self-medication due to "herbal = safe" misconception.	Uncontrolled dosage, duration, and indication.
Knowledge & Reporting	Lack of integrated ADR reporting; poor cross-disciplinary awareness.	Data vacuum, under-reporting, inability to identify trends and enforce corrections.

5. Conclusions & Essential Recommendations for Safe Integration

Core Conclusion: The toxicity of Vatsanabha is chemical and fixed; the science of Ayurveda lies in controlling its bio-availability and biological context. Safety concerns today reflect a departure from this science, not its inadequacy.

Actionable Recommendations**1. Pharmaceutical Rigor**

- Enforce **GMP standards** with **validated Shodhana** parameters (time, temperature, media).
- Mandate **finished product testing** for toxic alkaloid markers (e.g., aconitine) and limits.

2. Clinical Governance

- Make all Aconite-containing formulations **prescription-only**.
- Revive mandatory ***Prakriti* assessment and *Pathya-Apathya* counseling** for these drugs.

3. Systemic Enhancements

- Establish a **mandatory National Ayurvedic Pharmacovigilance Program** linked to existing networks.
- Implement **cross-training** for Ayurvedic physicians (on modern toxicology) and allopathic doctors (on Ayurvedic drug safety).

4. Public & Professional Awareness

- Clear labelling on packs: "**Contains Purified Aconite. Use only under medical supervision.**"

- Educate against **concurrent use of multiple Ayurvedic formulas** without consultation.

CONCLUSION

The literary journey through the *Rasa Granthas* unequivocally establishes Vatsanabha as a prime example of Ayurveda's transformative pharmaceutical science. The detailed descriptions across texts show a remarkable consensus on its need for rigorous *Shodhana*, a process that is neither arbitrary nor symbolic but a precise detoxification protocol. Post-purification, it is seamlessly integrated into a wide spectrum of formulations targeting complex, chronic, and debilitating conditions, particularly *Jwara* and *Vatavyadhi*. This review consolidates the classical evidence, demonstrating that the folklore "poison" is, in the crucible of *Rasa Shastra*, meticulously refined into a therapeutic agent of great value. It underscores the imperative to adhere to these classical guidelines for safety and efficacy, preserving this intricate knowledge for future research and clinical application in an evidence-based manner. The study of Vatsanabha thus stands as a testament to the depth and scientific foresight embedded in Ayurvedic pharmaceuticals.

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