

THERAPEUTIC UTILITY OF MANJISHTHA AND SARIVA DRAVYAS IN STROKE

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ABSTRACT

Stroke prevalence in India is high and rising, with millions affected, making it a leading cause of death and disability. It is now the second leading cause of death and third leading cause of disability in India, with numbers now increasing in younger patients as well.^[1] Stroke occurs due to an interruption of blood supply to the brain resulting in neuronal damage and neurological deficits.^[2] Being driven by factors like hypertension, diabetes, and lifestyle habits, the number of cases especially in metropolitan cities have been increasing at an alarming rate. Ayurveda being both preventive and curative science has a great potential in not only reducing the cases of stroke by managing risk factors but also reducing the complications of stroke like that of hemiplegia and hemiparesis by facilitating the healing process. The core pathogenesis of ischemic and haemorrhagic stroke can be targeted and reversed. Classical Ayurvedic herbs such as *Manjishtha* (*Rubia cordifolia*) and *Sariva* (*Hemidesmus indicus*) possess properties like *Raktashodhana raktaprasadan*, *samshaman* anti-inflammatory, and circulatory enhancement, which support the management and recovery of stroke. This article reviews the therapeutic potential of these drugs from Ayurvedic and modern perspectives.

KEYWORDS: Stroke, Manjishtha, Sariva.

INTRODUCTION

Stroke remains a critical global health issue, significantly impacting India with substantial contributions to mortality and disability. According to researchers, three Indians suffer a stroke every minute. Although the elderly age group are more commonly affected by brain stroke, it also can occur to anyone at any age, 15-20% of patients being under the age of 45. Regarding stroke subtypes, ischemic strokes are the most common, accounting for about 70-80% of all, while hemorrhagic strokes make up the remaining 20–30%. Stroke occurs when there's a change in the blood flow through vessels in the brain. Blood brings oxygen and nutrients to brain cells. If blood can't flow to a part of the brain, cells that do not receive enough oxygen suffer and eventually die. If brain cells are without oxygen for only a short time, they can sometimes repair themselves. However, once brain cells die, they can't be repaired completely, leading to complications like paralysis, dysphagia, and memory loss, Understanding the risk factors and recognizing the symptoms may help in preventing a brain stroke.

Simultaneously receiving early diagnosis and treatment increases the chances for complete recovery. Ayurveda, being an ancient science that gives detailed curative treatments for diseases according to *doshadushya sankalpana* has a pivoting role in preventing stroke and managing post stroke complications. Several herbs having potential in cell regeneration, revascularization, neuroprotection can be effective in attenuating the after-effects of stroke. Herbs like *Manjishtha* and *Sariva* by virtue of their *raktaprasadak*, *tridoshashaman* and other *gunas*, are particularly significant in healing and recovery from stroke

MATERIAL AND METHODS

The understanding of Ayurveda and Herbs from ancient literature *Charak Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Bhaishajya Ratnavali*. The study of Dravyaguna and its principles from various *Nighantus*, Ayurvedic Pharmacopoeia of India and Modern literature and contemporary books. Recent research regarding Stroke and Herbs, from available and published Articles,

Journals, Research papers, Internet. WHO, CMR, NIH, Centre of Disease Control and Prevention for recent database of diseases, PubMed. ResearchGate and Books of internal medicine.

OBSERVATION

❖ Stroke Types and overview

There are two major types of strokes

1. Ischemic stroke: This is the most common stroke and happens when a blood clot or the narrowing of a blood vessel reduces blood flow to the brain
2. Hemorrhagic stroke: This is the second major kind of stroke. It's marked by a burst blood vessel that causes blood to leak into or around the brain. The bleeding also increases pressure inside the skull that can compress brain tissue and cause damage.

Sometimes the symptoms of a stroke last for a short time (minutes to hours) and then go away. This is called a transient ischemic attack (TIA)^[3]

Stroke symptoms range from mild weakness, numbness, facial drooping, temporary aphasia, partial loss of vision to long term neurological disability like paralysis and death.

❖ Modern Treatment methods

Ischemic stroke treatments:

- Antithrombotics- antiplatelet and anticoagulant drugs, also called blood thinners.
- Thrombolytics- which treat the stroke by dissolving the blood clot that is blocking blood flow to the brain. The most commonly used drug for thrombolytic therapy is called tissue-plasminogen activator (t-PA)

Hemorrhagic stroke treatments:

- Treatment for hemorrhagic stroke involves finding the source of the bleeding and controlling it.
- Angioplasty, stenting, Carotid endarterectomy, Endovascular thrombectomy procedures are employed.^[4]

❖ Ayurveda and therapeutic aspects of stroke

In Ayurveda, stroke and its symptoms are correlated with *Pakshaghata*, a *Vata*-dominant disorder. In *Charaka Samhita*, it is described as a disease caused primarily by aggravated *Vata* affecting *Snayu*, *Sira* bringing *sosha* and *sankoch*(constriction) in them. As a result of which there is contracture, either of one leg or one hand causing immobility of that half of the body associated with pain and loss of speech, this is termed as *Pakshaghata*

हृत्कैकं मारुतः पक्षं दक्षिणं वाममेव वा ॥ ५३ ॥

कुर्याच्चेष्टानिवृत्तिं हि रुजं वाक्स्तम्भमेव च।

गृहीत्वाऽर्थं शरीरस्य सिराः स्नायूर्विशोष्य च ॥ ५४ ॥

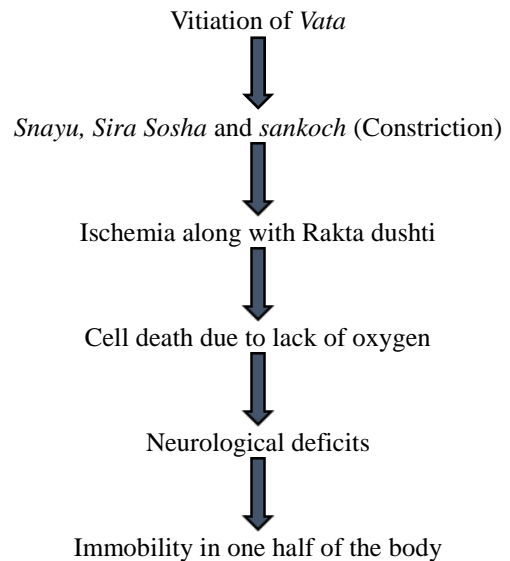
पादं संकोचयत्येकं हस्तं वा तोदशूलकृत् ।

एकाङ्गरोगं तं विदद्यात् सर्वाङ्ग सर्वदेहजम् ॥^[5]

This is much common to the pathology of ischemic stroke, where constriction and narrowing of blood

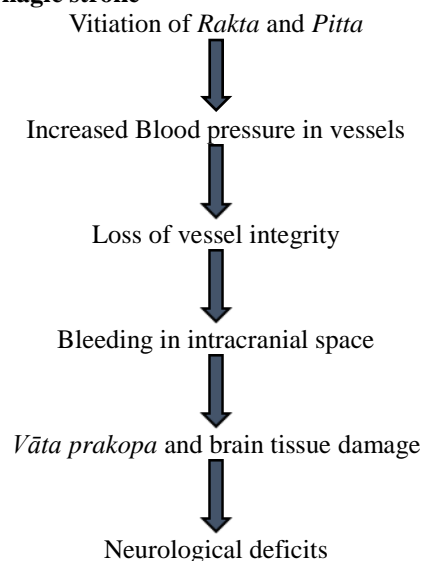
vessels is seen due to atherosclerosis, further leading to reduced blood flow to a particular area in brain, ischemic changes and subsequently hemiplegia and other symptoms.

Ischemic stroke



Hamorrhagic stroke, mainly occurring as a result of uncontrolled hypertension and weakend capillaries aligns with *Raktapitta vyadhi*. Being characterized by rupture of cerebral blood vessels and intracranial bleeding, it can be correlated in Ayurveda with *Raktapitta*, *Sirābhishyanda*, *Urdhvaga Raktapitta*. This pathogenesis primarily involves vitiation of *Rakta* and *Pitta*, loss of vessel integrity, intracranial bleeding and secondary *Vāta prakopa* leading to neurological deficits.

Hamorrhagic stroke



In Ischemic stroke, *dravyas* with lipid lowering quality, with *lekhaniya*, and *srotoshodhak* as well as *raktashodhak* gunas should be particularly used. In Hamorrhagic stroke, *dravyas* with *Rakta prasadak pitta*

Śamana, *Śothahara*, *Vranaropaka* gunas should be particularly used. particularly useful.

Thus in both types of stroke, *Rakta shodhak* and *Rakta prasadak* dravyas play a vital therapeutic role out of which *Manjishtha* and *Sariva* are focused on this study. These dravyas are also capable of initiating revascularisation in case of ischemic and haemorrhagic stroke, thereby improving blood flow to affected part. *Vataprakopa* being common in both types of stroke, *Vataghna* dravyas for internal administration as well as panchakarma procedures are effective. Along with that *Medhya* dravyas help strengthen the nervous system and boost neural regeneration.

Summarized Gunas and karmas in Stroke management

1. *Vatashaman*
2. *Raktaprasadan*
3. *Raktashodhan*
4. *Srotoshodhak*
5. *Pittashaman*
6. *Vranaropaka*
7. *Medhya*
8. *Lekhaniya*
9. *Śothahara*
10. *Vranaropaka*

Therapeutic Role of *Manjiṣṭhā* in Hemorrhagic and Ischemic Stroke

Manjiṣṭhā is one of the foremost *Raktaśodhaka* and *Raktaprasādaka* dravyas described in *Ayurvedic* classics and plays a crucial role in conditions involving *Rakta duṣṭi*, inflammation, and vascular pathology.

“मज्जिष्ठा मधुरा तिक्ता कषाया रक्तशोधनी।

वर्णा विषघ्नी कुष्ठघ्नी शोथहृद् ज्वरनाशिनी॥”

— *Bhavprakash Nighantu*^[6]

- *Rasa:* Tikta, Kaṣāya, Madhura
- *Guna:* Guru, Rūkṣa
- *Vīrya:* Uṣṇa
- *Vipāka:* Madhura
- *Doṣaghna:* Pitta-Kapha śāmaka
- *Karma:* Raktaśodhaka, Raktaprasādaka, Varnya, Śothahara, Vranaropaka Vishaghna

Other references

Caraka Saṃhitā – *Kuṣṭhaghna* & *Raktaprasādana* dravya

Suśruta Saṃhitā – Useful in *Rakta-pitta* and *Śotha*

Therapeutic Role of *Manjiṣṭhā* in Hemorrhagic and Ischemic Stroke

1. *Raktaśodhana* and *Rakta Prasādana*

Manjiṣṭhā purifies vitiated *Rakta*, removing *āma*, *kleda*, and excessive *uṣṇatā*, thereby helping stabilize bleeding tendencies. This is particularly important post-hemorrhage to prevent secondary vascular injury.

2. *Pitta Śamana* and *Raktapitta Nivāraṇa*

Despite having *Uṣṇa vīrya*, *Manjiṣṭhā* exhibits functional *Pitta-śamana* due to its *Tikta-Kaṣāya* rasa and *Madhura vipāka*, making it useful in alleviating *Raktapitta*-like bleeding disorders and hypertension

3. Anti-inflammatory (*Śothahara*) Action^[7]

Hemorrhagic stroke is followed by cerebral edema and inflammation. *Manjiṣṭhā* reduces *śotha* by pacifying *Rakta-Kapha* and clearing micro-channels (*srotoshodhana*), aiding in reduction of intracranial pressure. Contents like Anthraquinones, Flavonoids, Glycosides enable the anti-inflammatory activity in *manjiṣṭha*.

4. Vascular Protection (*Sirā Saṃrakṣaṇa*)

By improving *Rakta dhātu* quality, reducing vascular inflammation and controlling oxidative stress, *Manjiṣṭhā* helps restore vascular integrity, reducing chances of re-bleeding.

5. Neuroprotective and Recovery-Supporting Role^[8]

In the post-acute phase, *Manjiṣṭhā* supports tissue healing and prevents fibrosis and gliosis, thereby assisting neurological recovery when used alongside *Medhya rasāyanas*.

Sariva (*Hemidesmus indicus*)

Sariva, also known as *Anantamula*, is widely used in disorders of *Rakta* and *Pitta*. It is another potential *Raktaprasadak* dravya that has anti-inflammatory as well as neuroprotective action enabling it to reverse vascular as well as neurological tissue damage that occurs in haemorrhagic and ischemic stroke.

“ सारीवा मधुरा तिक्ता शीतला रक्तपित्तजित्।”

-*Bhavprakash Nighantu*^[9]

- *Rasa:* Tikta, Madhura
- *Guna:* Guru, Snigdha
- *Vīrya:* Sheeta
- *Vipāka:* Madhura
- *Doṣaghna:* Pitta-Kapha śāmaka
- *Karma:* Dahaprashaman, Raktaprasādaka, Varnya, Śothaghna, Medhya, Balya.

Therapeutic Role of *Sariva* in Hemorrhagic and Ischemic Stroke

1. *Vatashaman*

It's *snigdha guna* helps achieve *Vatashaman*, thus reducing *Sira*, *dhamani sankocha* due to *vata dushti*, which further helps to alleviate neurological symptoms caused due to *Vataprakopa*.^[9]

2. *Medhya* Action

Sariva being *Medhya*, and *vataghna*, helps in aiding neural regeneration and maintaining healthy brain. It also reduces anger, stress and irritation linked to high *Pitta*, and calm the mind. This makes it relevant in the stroke-rehabilitation phase and treat neuro-motor dysfunction.

3. *Raktaprasadan*

It improves Rakta quality and circulation, facilitating Angiogenesis and thus revascularization post stroke. It also decreases tendencies of intracranial bleeding as in Raktapitta Vyadhi.^[10]

4. Antioxidant Properties

Sariva contains bio-active phytoconstituents, including flavonoids and tannins, which offer antioxidant and neuroprotective properties, helping to combat oxidative stress and potentially protect brain tissue.^[10]

5. Inflammation Reduction

It is widely used to purify the blood, reduce burning sensations, and treat Pitta disorders, which may aid in reducing neuroinflammation.

6. Antithrombotic activity

Sariva extract increases release and activation of enzymes which results in metabolic degradation of lipids. The methanolic extract of roots of *H.indicus* inhibit platelet aggregation.^[11]

7. Antihyperlipidaemic activity

Several animal studies have shown decreased low density lipoproteins (LDL) and very low density lipoproteins (VLDL), Cholesterol and triglyceride levels after administration of Sariva.^[12]

Above properties of Sariva promote angiogenesis, which paired with Its lipidlowering and antiinflammatory property, makes it an important drug be used in Stroke.

DISCUSSION

Modern science plays an important role in the acute management of stroke as well as some preventive aspects. But Ayurveda provides an integrated treatment plan starting from prevention to chronic management of Stroke. *Dravyaguna vidhyan* displays a vast arena of herbs that can be selectively implicated according to their ayurvedic description and sheer correlation with different stages of a disease. Likewise, *Manjishtha* and *Sariva* when used methodologically according to stages of Stroke, will play an immense role in prevention and healing in Stroke. This therapy can be used solitarily or as an adjuvant therapy with allopathic medicines, *Panchakarma* and other therapies.

CONCLUSION

The observations from this study highlight that stroke is a multifactorial disorder strongly associated with modifiable risk factors such as hypertension, diabetes, dyslipidemia, stress, and unhealthy lifestyle practices. *Ayurveda*, through its preventive and therapeutic principles, offers a holistic approach to stroke management by addressing these root causes using *Dravyaguna Vidnyan*. The judicious use of herbs with antihypertensive, hypolipidemic, anti-inflammatory, and neuroprotective properties can help reduce stroke incidence and improve recovery outcomes.

Understanding stroke pathogenesis in terms of Doshadushya involvement enables targeted interventions for both ischemic and hemorrhagic strokes. Properties of *Manjishtha* and *Sariva*, like *raktaprasadan*, *vatahshaman* particularly aid in stroke recovery and preventing future recurrence. Thus, integrating Ayurvedic preventive strategies with appropriate therapeutic measures would play a significant role in reducing the burden of stroke and its long-term complications

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