



Review Article

A CRITICAL REVIEW ON *TRINAPANCHAMoola* IN THE MANAGEMENT OF *RAKTAPITTA*

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ABSTRACT

*Raktapitta* is a significant bleeding disorder described in Ayurveda, resulting from the vitiation of *Pitta Dosha* and *Rakta Dhatu* due to their *Ashraya – Ashrayee* relationship. The condition manifests as spontaneous bleeding through various body orifices without any external injury and is managed through *Pittashamana*, *Raktaprasadana*, and *Stambhana* therapies. According to *Sushrut Samhita*, *Trinapanchamoola* has shown therapeutic effects in the management of *Mutra Dosha* and *Raktapitta* (bleeding disorder). It comprises of five potent ingredients: *Kusha* (*Desmostachya bipinnata*), *Kasha* (*Saccharum spontaneum*), *Nala* (*Arundo donax*), *Darbha* (*Imperata cylindrica*), and *Kandekshu* (*Saccharum officinarum*). Owing to its predominant *Madhura* and *Kashaya Rasa*, *Sheeta Veerya*, and *Madhura Vipaka* which reduces *Raktagata Pitta* and helps in *Raktaprasadana*. Analysis of the literature revealed that the pharmacodynamic properties of *Trinapanchamoola* directly oppose the pathological attributes of aggravated *Pitta*, namely *Ushna*, *Tikshna*, and *Drava Guna*. Its cooling, blood-purifying, tissue-protective, and nourishing actions contribute to the alleviation of bleeding manifestations, burning sensation, thirst, and other associated symptoms. The review concludes that *Trinapanchamoola* possesses significant therapeutic potential in the management of *Raktapitta*; however, further experimental and clinical studies are necessary to establish its efficacy and evidence-based application in contemporary Ayurvedic practice.

INTRODUCTION

In Ayurveda, so many diseases are explained in detail. Here, one of the most important diseases, a *Raktapitta*, is taken into consideration. It is known as *Mahagada*, *Mahavega* and *Agnivata shighrakari*.<sup>[1]</sup> *Acharya Charak* has described it in the chapter immediately after *Jwara*, as it arises due to *Santapa*, which is the *Pratyatma Lakshana* of *Jwara*. When *Jwara* is not treated properly, the disturbed *Agni*, which is nothing but the *Teja Mahabhoota*, is the factor responsible for *Raktapitta*.<sup>[2]</sup> However, *Acharya Sushruta* has described it after discussing *Pandu Roga*, as they share common causative factors.<sup>[3]</sup> Blood is an important element of the body; its loss can lead to many life-threatening diseases. The term *Raktapitta* itself is derived from two components- *Rakta* and *Pitta*,

indicating the involvement of both *Dosha* and *Dhatu* in the pathogenesis. *Raktapitta* is a condition where *Rakta* is vitiated by *Pitta* and flows through external apertures of the body.<sup>[4]</sup>

The etiological factors mainly include excessive consumption of *Ushna*, *Amla* and *Lavana Ahara*, exposure to heat, and activities that aggravate *Pitta Dosha*. These lead to *Pitta Prakopa*, followed by *Rakta Dushti* and eventually *Raktasrava*. Blood starts oozing from *Nasa* (nose), *Karna* (ear), *Akshi* (*Netra*), and *Asya* (mouth), called *Urdhwaga Raktapitta* (upper tract bleeding). When blood flows out through *Guda* (anus), *Yoni* (vagina), *Medhra* (urinary passage) it is said as *Adhoga Raktapitta* (lower tract bleeding) and bleeds through the *Romakupas* (orifices in the skin) called as *Tiryaka Raktapitta* (diffused bleeding).<sup>[5]</sup> Management of *Raktapitta* emphasizes the use of *Sheeta*, *Madhura* and *Kashaya Dravyas*, which help in pacifying *Pitta*, stabilizing *Rakta Dhatu*, and controlling haemorrhage.

In this context, *Trinapanchamoola* holds significant importance. The term *Trinapanchamoola* is explained as:

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- *Trina* – Grasses
- *Pancha* – Five
- *Moola* – Roots

Thus, *Trinapanchamoola* refers to a group of five grass roots used therapeutically. While *Acharya Charaka* places these drugs scattered under the *Mutravirechaniya*<sup>[6]</sup> and *Stanyajanan*<sup>[7]</sup> *Mahakashaya*, *Acharya Sushruta* was the first to systematically compile them as an independent, standalone compound group. It comprises of *Kusha* (*Desmostachya bipinnata*), *Kasha* (*Saccharum spontaneum*), *Nala* (*Arundo donax*), *Darbha* (*Imperata cylindrica*), and *Kandekshu* (*Saccharum officinarum*).<sup>[8]</sup> These drugs are collectively characterised by *Sheeta Veerya* and *Madhura Rasa* dominance, making them highly effective in *Pittaja* and *Raktaja* conditions. According to *Sushrut Samhita*, *Trinapanchamoola* has shown therapeutic effects in the management of *Mutra Dosha* and *Raktapitta* (bleeding disorder).<sup>[9]</sup>

*Trinapanchamoola* possesses *Raktapittahar* activity based on the *Guna karma* of *Dravyas*, so a review of *Trinapanchamoola* and its *Raktapittahar* action was studied.

## AIM

## RESULTS

To critically review the role of *Trinapanchamoola* in the management of *Raktapitta*.

## OBJECTIVES

1. To review classical references of *Trinapanchamoola*.
2. To evaluate the pharmacodynamic properties of *Trinapanchamoola*.
3. To understand the Ayurvedic concept of *Raktapitta*.
4. To analyse its probable mode of action in *Raktapitta*.

## MATERIALS AND METHODS

This study is based on a comprehensive review of:

- Classical Ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya* and *Bhavprakash Nighantu*.
- Published peer-reviewed research articles and review papers.
- Available pharmacological studies on constituent drugs.

Relevant data were collected, analysed, and interpreted to establish a scientific rationale.

**Table 1: Classical categorisation of *Trinapanchamoola* according to different authors**

| Name of Author       | Name of the <i>Gana</i> ( <i>Varga</i> )                  |
|----------------------|-----------------------------------------------------------|
| <i>Charaka</i>       | <i>Mutravirechaniya</i> , <i>Stanyajanana Mahakashaya</i> |
| <i>Sushruta</i>      | <i>Trinapanchamoola</i>                                   |
| <i>Bhavaprakasha</i> | <i>Guduchyadivarga</i> <sup>[10]</sup>                    |

**Table 2: *Dravyas* of *Trinapanchamoola* <sup>[11]</sup>**

| S.No. | <i>Dravya</i> Name | Botanical Name                            | Family              |
|-------|--------------------|-------------------------------------------|---------------------|
| 1.    | <i>Kusha</i>       | <i>Desmostachya bipinnata</i> (L.) Stapf. | Poaceae (Gramineae) |
| 2.    | <i>Kasha</i>       | <i>Saccharum spontaneum</i> L.            | Poaceae (Gramineae) |
| 3.    | <i>Nala</i>        | <i>Arundo donax</i> L.                    | Poaceae (Gramineae) |
| 4.    | <i>Darbha</i>      | <i>Imperata cylindrica</i> (L.) P.        | Poaceae (Gramineae) |
| 5.    | <i>Kandekshu</i>   | <i>Saccharum officinarum</i> L.           | Poaceae (Gramineae) |

**Table 3: Pharmacological properties of *Trinapanchamoola* <sup>[12]</sup>**

| S.No. | <i>Dravya</i> Name | <i>Rasa</i>                                    | <i>Guna</i>                   | <i>Veerya</i> | <i>Viapaka</i> | Ayurvedic <i>Karma</i>                         | Modern Pharmacological Actions                                 |
|-------|--------------------|------------------------------------------------|-------------------------------|---------------|----------------|------------------------------------------------|----------------------------------------------------------------|
| 1.    | <i>Kusha</i>       | <i>Madhura</i> , <i>Kashaya</i>                | <i>Laghu</i> , <i>Sheeta</i>  | <i>Sheeta</i> | <i>Madhura</i> | <i>Tridosahara</i> , <i>Raktaprasadana</i>     | Antioxidant, anti-inflammatory, cytoprotective <sup>[13]</sup> |
| 2.    | <i>Kasha</i>       | <i>Madhura</i> , <i>Tikta</i>                  | <i>Laghu</i> , <i>Snigdha</i> | <i>Sheeta</i> | <i>Madhura</i> | <i>Vata Pittahara</i> , <i>Dahahara</i>        | Diuretic, anti-inflammatory, antioxidant <sup>[14]</sup>       |
| 3.    | <i>Nala</i>        | <i>Madhura</i> , <i>Tikta</i> , <i>Kashaya</i> | <i>Laghu</i> , <i>Snigdha</i> | <i>Sheeta</i> | <i>Madhura</i> | <i>Kapha Pittahara</i> , <i>Raktastambhaka</i> | Anti-inflammatory, antimicrobial <sup>[15]</sup>               |
| 4.    | <i>Darbha</i>      | <i>Madhura</i> , <i>Kashaya</i>                | <i>Laghu</i> , <i>Snigdha</i> | <i>Sheeta</i> | <i>Madhura</i> | <i>Tridosahara</i> , <i>Raktastambhaka</i>     | Anti-inflammatory, immunomodulatory <sup>[16]</sup>            |

|    |           |         |               |        |         |                                    |                                                 |
|----|-----------|---------|---------------|--------|---------|------------------------------------|-------------------------------------------------|
| 5. | Kandekshu | Madhura | Snigdha, Guru | Sheeta | Madhura | Pittahara, Brimhana, Raktavardhaka | Antioxidant, nutritive, tissue restorative [17] |
|----|-----------|---------|---------------|--------|---------|------------------------------------|-------------------------------------------------|

All five drugs predominantly exhibit *Madhura Rasa*, *Sheeta Veerya*, and *Madhura Vipaka*, which contribute to *Pittashamana* and *Raktaprasadana* effects. *Kashaya Rasa*, enhancing *Raktastambhana* (haemostatic action).

### Concept of Raktapitta

The term *Raktapitta* originates from the pathological relationship between *Rakta Dhatu* and *Pitta Dosha*. In Ayurveda, this explanation is based on three aspects: *Samyoga*, *Dooshana* and *Samanya Gandha-Varna*. [18]

### Samyogaat (Association)

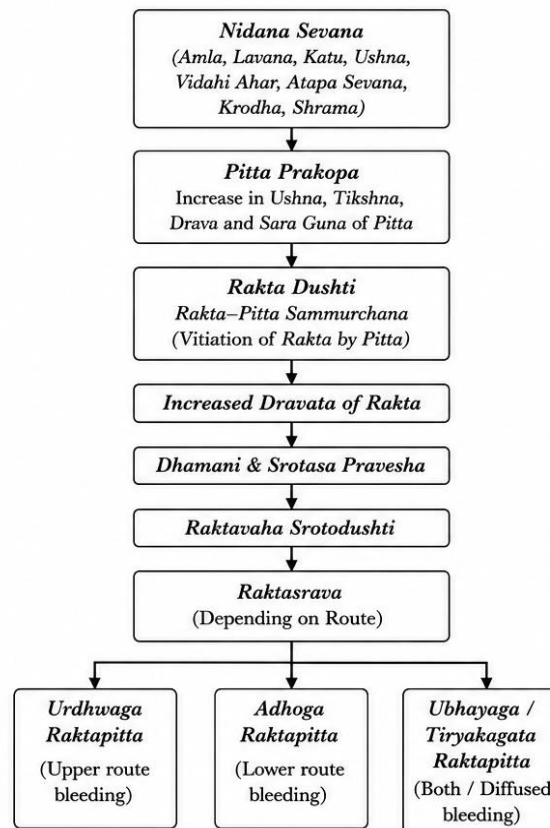
*Pitta* remains closely associated with *Rakta*; therefore, aggravated *Pitta* directly affects and contaminates *Rakta Dhatu*.

### Dooshannat (Vitiation)

Vitiated *Pitta* impairs *Rakta*, resulting in the simultaneous derangement of both and leading to the manifestation of *Raktapitta*.

### Saamaanyaad Gandha Varnayoho (Similarity in Colour and Odour)

The *Samprapti* of *Raktapitta* is illustrated in Fig. 1 [21]



**Fig 1: Samprapti of Raktapitta**

Flowchart illustrating the Ayurvedic pathogenesis of *Raktapitta* beginning with *Nidana Sevana*, followed by *Pitta Prakopa*, *Rakta Dushti*, *Raktavaha Srotodushti*,

*Pitta* and *Rakta* are similar in *Gandha* (odour) and *Varna* (colour). Due to the similarity, aggravated *Pitta* becomes inseparably mixed with *Rakta*, losing its distinct identity. Hence, the disease is termed *Raktapitta*.

*Pitta* gets vitiated, and the quantity of *Rakta* (blood) in the body increases beyond its normal level. The vitiated *Pitta*, along with the excessive and impure *Rakta*, enters the circulation and reaches the *Raktavaha Srotas* and its *Moolasthanas*, such as the *Yakrut* (liver) and *Pleeha* (spleen). Due to the *Abhishyandi* (obstructive) and *Guru* (heavy) qualities of *Rakta*, obstruction occurs in the bodily channels, leading to morbidity within the *Rakta Dhatu*. [19]

The aggravated *Pitta*, owing to these factors, further vitiates *Rakta*. Because of the similarity in their inherent properties and constitution, the pathological process intensifies. The *Ushna guna* of *Pitta* causes the fluid portion of all fermented *Dhatus* to ooze out, which further aggravates both *Rakta* and *Pitta*, exacerbating the disease process. [20]

and the manifestation of *Urdhwaga*, *Adhoga*, or *Tiryakagata Raktapitta*.

**Types of Raktapitta** <sup>[22]</sup>**Based on Gati (Route)**

1. *Urdhwaga Raktapitta*
2. *Adhoga Raktapitta*
3. *Ubhayaga / Tiryakagata Raktapitta*

**Based on Dosha predominance**

1. *Vataja Raktapitta*
2. *Pittaja Raktapitta*
3. *Kaphaja Raktapitta*
4. *Dwandwaja Raktapitta*
5. *Sannipataja Raktapitta*

**DISCUSSION**

*Raktapitta* is a grave bleeding disorder described in Ayurveda, characterized by the vitiation of *Pitta Dosha* and *Rakta Dhatu*. Due to the *Ashraya-Ashrayee* relationship between *Rakta* and *Pitta*, aggravation of one invariably affects the other, resulting in pathological bleeding through various body orifices. The disease is predominantly associated with *Ushna*, *Tikshna*, *Sara*, and *Drava* qualities of aggravated *Pitta*, which increase the fluidity of blood and disrupt the integrity of the vascular channels, leading to *Raktasrava*.

The management of *Raktapitta* primarily aims at *Pittashamana*, *Raktaprasadana*, and *Raktastambhana*. Classical Ayurvedic texts advocate the use of drugs possessing *Madhura*, *Kashaya*, and *Tikta Rasa* along with *Sheeta Veerya* for effectively controlling the disease process. *Trinapanchamoola*, a group of five grass roots described by *Acharya Sushruta*, fulfils these therapeutic requirements and has been specifically indicated in *Raktapitta* and *Mutra Dosha*.

The pharmacodynamic profile of *Trinapanchamoola* reveals a predominance of *Madhura Rasa*, *Sheeta Veerya*, and *Madhura Vipaka*. *Madhura Rasa* nourishes and stabilizes *Rakta Dhatu* while alleviating *Pitta Dosha*. *Sheeta Veerya* directly counteracts the excessive heat generated by aggravated *Pitta*, thereby reducing symptoms such as *Daha* (burning sensation), *Trishna* (excessive thirst), and *Rakta Srava* (bleeding). *Madhura Vipaka* further supports tissue nourishment and restoration of physiological balance.

*Kashaya Rasa* and *Laghu*, *Ruksha Guna* present in *Kusha*, *Nala*, and *Darbha* contributes significantly to *Raktastambhana* by promoting vasoconstrictive and astringent effects, thereby reducing excessive bleeding.

It helps reduce excessive fluidity of *Rakta*, strengthens vascular structures and assists in controlling bleeding. Since *Drava guna* of *Pitta* is a major factor responsible for haemorrhage, the *Sangrahi* effect of *Kashaya Rasa* becomes particularly significant in *Raktapitta*. Furthermore, the *Laghu* and *Snigdha Gunas* facilitate easy digestion while maintaining tissue integrity, preventing further aggravation of *Pitta*.

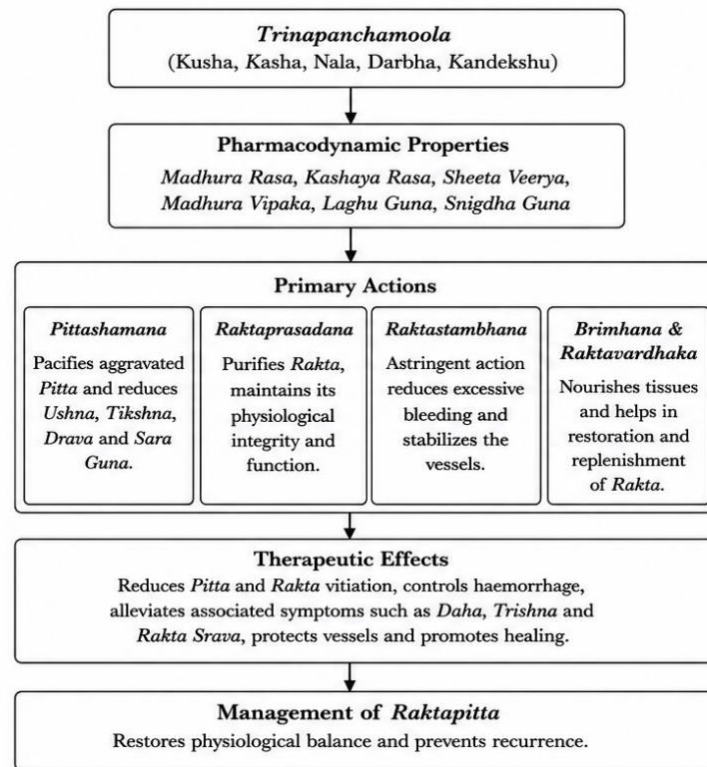
Each constituent drug contributes uniquely to the overall therapeutic effect. *Kusha* possesses *Raktaprasadana* and antioxidant activities, helping maintain blood purity and reducing oxidative stress. *Kasha* exhibits *Dahahara* and anti-inflammatory actions, which may help alleviate inflammatory changes associated with bleeding disorders. *Nala* and *Darbha* are traditionally recognized for their *Raktastambhaka* properties, making them valuable in controlling haemorrhagic manifestations. *Kandekshu*, owing to its *Brimhana* and *Raktavardhaka* actions, supports replenishment of blood and nourishment of depleted tissues following blood loss.

From a modern pharmacological perspective, the reported antioxidant, anti-inflammatory, cytoprotective, immunomodulatory, and tissue-restorative activities of the constituent drugs may provide scientific support for their classical indications. Anti-oxidant effects may help protect vascular endothelial cells from oxidative damage, while anti-inflammatory actions may reduce vascular permeability and tissue injury. Cytoprotective and restorative properties contribute to healing and recovery following episodes of bleeding.

Thus, the collective action of *Trinapanchamoola* can be understood as a synergistic combination of *Pittahara*, *Raktaprasadana*, *Raktastambhana*, and *Brimhana* effects. These properties directly oppose the pathological mechanisms involved in *Raktapitta* and justify its traditional use in the management of bleeding disorders.

However, despite strong classical support and promising pharmacological evidence, scientific validation through experimental studies and well-designed clinical trials remains limited. Further research is necessary to evaluate its efficacy, safety, dosage standardization, and mechanism of action in various types of bleeding disorders.

The probable mode of action of *Trinapanchamoola* in *Raktapitta* is presented in Fig. 2.



**Fig 2: Probable Mode of Action of Trinapanchamoola in Raktapitta**

Diagram showing the pharmacodynamic properties of *Trinapanchamoola* and their probable therapeutic actions, including *Pittashamana*, *Raktaprasadana*, *Raktastambhana*, antioxidant, anti-inflammatory, and vascular protective effects leading to the management of *Raktapitta*.

## CONCLUSION

*Trinapanchamoola*, owing to its *Madhura* and *Kashaya Rasa*, *Sheeta Veerya*, and *Madhura Vipaka*, possesses significant *Pittahara*, *Raktaprasadana*, and *Raktastambhana* properties. The pharmacodynamic attributes of its constituent drugs effectively counteract the pathogenesis of *Raktapitta* and provide a rational basis for its therapeutic use. Classical references and available pharmacological evidence indicate its potential role in managing bleeding disorders. Nevertheless, further experimental and clinical studies are required to establish evidence-based validation and wider clinical applicability of *Trinapanchamoola* in contemporary Ayurvedic practice.

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