Journal of Neonatal Surgery
ISSN(Online): 2226-0439
Vol. 14, Issue 32s (2025)
https://www.jneonatalsurg.com

OPEN ACCESS

Comparative Study on the Techniques of Shatkarma and Panchakarma

Mahim Tiwari[1], Aayush Pandey[3], Dr. Rajkala Patil[4], Dr. Abhinav[5], Pawan Kumar Singh[6], Deepti Tripathi[7], Suryabhan Singh[8], Priyanshu Mishra[*2]

[1]Ph.D. Scholar, Department of Panchakarma, Faculty of Ayurved, IMS, BHU, Varanasi,
Email: mahim.ims@bhu.ac.in

[*2] Ph.D. Scholar, Department of Panchakarma, Faculty of Ayurved, IMS, BHU, Varanasi

[3]Ph.D. scholar, Amity institute of Indian system of medicine (AIISM), Amity University, Noida

[4]Associate Professor, Department of Panchakarma, Faculty of Ayurved, IMS, BHU, Varanasi

[5]Assistant Professor, Department of Panchakarma, Faculty of Ayurved, IMS, BHU, Varanasi

[6]Ph.D. Scholar, Department of Panchakarma, Faculty of Ayurved, IMS, BHU, Varanasi

[7]M.Sc. in Yogic Sciences, University of Patanjali, Haridwar

[8]Ph.D. Scholar, Department of Panchakarma, Faculty of Ayurved, IMS, BHU, Varanasi

*** Corresponding Author:**
Priyanshu Mishra

Cite this paper as: Mahim Tiwari, Aayush Pandey, Dr. Rajkala Patil, Dr. Abhinav, Pawan Kumar Singh, Deepti Tripathi, Suryabhan Singh, Priyanshu Mishra, (2025) Comparative Study on the Techniques of Shatkarma and Panchakarma. *Journal of Neonatal Surgery*, 14 (32s), 3205-3215.

ABSTRACT

Shatkarma and Panchakarma represent two foundational systems of internal purification originating from the classical traditions of Yoga and Ayurveda, respectively. Shatkarma (Ṣaṭkarmas), delineated in key Haṭha Yoga texts such as the Haṭha Yoga Pradīpikā and Gheraṇḍa Saṃhitā, comprises six fundamental cleansing techniques aimed at purifying the internal bodily systems, thereby preparing the practitioner for higher yogic disciplines. In contrast, Panchakarma, as expounded in authoritative Ayurvedic treatises like the Charaka Saṃhitā and Suśruta Saṃhitā, encompasses five principal therapeutic procedures formulated to eliminate accumulated doṣas and āma (toxins), restore physiological equilibrium, and address various pathological conditions.

This study undertakes a comprehensive examination of the historical development, procedural methodologies, therapeutic objectives, and clinical applications of both Shatkarma and Panchakarma. It incorporates critical analysis of primary Sanskrit sources, including original verses with English translations, alongside a synthesis of contemporary scientific literature and clinical case studies. A comparative framework is employed to elucidate distinctions in indications, contraindications, physiological mechanisms, and observed health outcomes between the two systems. Furthermore, the relevance and adaptation of these traditional practices in modern integrative health and wellness paradigms are explored.

Key techniques, procedural sequences, therapeutic benefits, and potential risks associated with each system are systematically presented through tabulated data to enhance clarity and accessibility. By bridging classical knowledge with modern empirical insights, this research contributes to a more nuanced understanding of Shatkarma and Panchakarma as complementary modalities within holistic health care.

Keywords: *Yoga, Shatkarma, Panchakarma, Alternative Medicine, Ayurveda, AYUSH etc.*

1. INTRODUCTION

Shatkarma and Panchakarma both center on the internal purification of the body, yet they emerge from two distinct traditional systems—Hatha Yoga and Ayurveda, respectively. Shatkarma, meaning "six actions," refers to six yogic cleansing techniques described in classical Hatha Yoga texts such as the Hatha Yoga Pradipika (15th century CE) by Swatmarama and the Gheranda Samhita (17th century CE). These practices are considered essential preparatory techniques within the yogic path, aimed at removing internal impurities, correcting physiological imbalances, managing certain ailments, and preparing the body and mind for advanced yogic disciplines such as pranayama, meditation, and ultimately, spiritual liberation.

The Hatha Yoga Pradipika explicitly enumerates the six purificatory techniques in Chapter 2, Verse 23:

धौतिर्बस्तिस्तथानौली त्राटकं नासिकाग्रदृक्।

कपालभातिश्चैतानि षटकर्माणि प्रचक्षते॥

"Dhauti, Basti, Neti, Trataka, Nauli, and Kapalabhati – these are declared to be the six cleansing practices."

The text also cautions that these techniques should only be learned under the supervision of an experienced teacher. Earlier and later yogic texts, such as the Hatha Ratnavali and Gheranda Samhita, offer similar accounts of these kriyas, emphasizing their foundational role in yogic purification and health maintenance.

In contrast, Panchakarma, meaning "five actions," refers to a group of five therapeutic procedures rooted in classical Ayurvedic medicine. These are detailed in foundational Ayurvedic texts such as the Charaka Samhita and Sushruta Samhita, dating back more than two millennia. The five procedures include:

- **Vamana (therapeutic emesis)**
- **Virechana (purgation)**
- **Basti (medicated enema, including decoction and oil-based variants)**
- **Nasya (nasal administration of medicated oils)**
- **Rakta Mokshana (bloodletting, applied selectively)**

These procedures are carried out under clinical supervision and are embedded within a broader treatment protocol that includes preparatory therapies (purva karma) and post-treatment care (pashchat karma). Panchakarma aims to eliminate aggravated doshas, clear toxins (ama) from the tissues, restore balance among the bodily systems, and enhance digestive strength (agni), thus promoting disease prevention and long-term health.

While both systems are described as purification therapies, they differ significantly in terms of application, methodology, and clinical context. Shatkarma techniques are generally practiced independently by trained yoga practitioners and are tailored toward preparing the body for spiritual disciplines. In contrast, Panchakarma is a comprehensive therapeutic intervention administered in a clinical setting under the supervision of an Ayurvedic physician. Despite their differences, both systems share a common emphasis on detoxification and the promotion of holistic well-being through internal cleansing.

Shatkarma: Techniques and Therapeutic Functions

The six practices of Shatkarma, as described in classical Hatha Yoga texts, are:

Neti (nasal cleansing):

This involves flushing the nasal passages with saline water (jala neti) using a neti pot, or inserting a waxed thread through the nostrils and out the mouth (sutra neti). It is traditionally believed to clear excess kapha from the sinuses and improve respiratory health. Modern studies have confirmed neti's efficacy in treating sinusitis, allergic rhinitis, and nasal congestion.

Dhauti (cleansing of the digestive tract):

Dhauti includes techniques such as induced vomiting using saline water (vamana dhauti) and the use of cloth strips to clean the esophagus and stomach lining (vastra dhauti). These practices are intended to eliminate undigested food and toxins from the gastrointestinal tract, improving digestion and preventing digestive disorders.

Basti (yogic enema):

This technique involves drawing water into the colon by sitting in water and using abdominal control to allow water to enter through the rectum. The practice is said to remove waste material from the lower digestive tract and help regulate vata dosha. Though yogic basti differs from the Ayurvedic therapeutic basti, their aims align in terms of detoxification and bowel regulation.

Nauli (abdominal churning):

Nauli consists of contracting and rotating the abdominal muscles in a wave-like motion. It is said to stimulate the digestive fire, massage internal organs, and promote metabolic balance. The practice enhances gastrointestinal tone and is known to improve elimination and agni (digestive power).

Kapalabhati (frontal brain cleansing):

Kapalabhati is a rapid, forceful breathing technique that emphasizes active exhalation and passive inhalation. Although often categorized under pranayama in modern yoga, it is traditionally listed as a cleansing practice. It is believed to stimulate brain function, improve lung capacity, and purify the nasal and cranial passages.

Trataka (gazing):

This is a focused visual practice where the practitioner gazes steadily at a fixed object—often a candle flame—without blinking until tears flow. Trataka is believed to cleanse and strengthen the eyes, calm the mind, and enhance concentration. It is also used to alleviate eye strain and mental fatigue.

The common objective of these techniques is the removal of excess doshas and physiological obstructions to prepare the body and mind for higher yogic practices. Traditional texts assert that by eliminating accumulated waste, Shatkarmas enable the free flow of prana (vital energy) through the central energy channel (sushumna), which is essential for the awakening of kundalini and spiritual progress. In contemporary practice, these techniques are also valued for their effects on sinus health, digestion, mental clarity, and overall physiological vitality.

Classical Commentary and Contemporary Perspectives

Multiple classical texts reinforce the importance of Shatkarma within the yogic framework. The Gheranda Samhita, for example, classifies these kriyas as the first essential step in the sevenfold path of yoga, emphasizing the need to purify the "body-vessel" before undertaking other practices such as asana, pranayama, and meditation.

Modern interpretations often echo the ancient wisdom of internal cleansing. Mukhopadhyay (2023) summarizes the classical view in accessible language:

"We clean our external parts; what about internal organs? Saints and yogis have prescribed many processes to remove unwanted matter accumulated in internal organs… These may be done before or after asana practice."

Such perspectives underscore the enduring relevance of Shatkarma not only in the classical yogic tradition but also in contemporary wellness and preventive healthcare. As both ancient texts and modern case reports suggest, the disciplined application of these practices offers significant benefits for physical, mental, and energetic well-being.

Panchakarma: Classical Origins and Therapeutic Foundations

Panchakarma, a cornerstone of classical Ayurvedic medicine, refers to a fivefold system of internal purification. The term "Panchakarma" literally means "five actions," indicating the primary therapeutic modalities used to eliminate morbid doshas and metabolic waste (ama) from the body. Its conceptual roots lie in the Ayurvedic doctrine of shodhana chikitsa (purificatory therapy), as outlined in the foundational texts—the Charaka Samhita (circa 1st–4th century CE) and the Sushruta Samhita (circa 1st–6th century CE). These texts articulate a comprehensive model of health based on the balance of three doshas (vata, pitta, kapha), seven bodily tissues (dhatus), and digestive-metabolic fire (agni). Disease arises when doshas become aggravated, leading to the formation of toxins that obstruct the body's physiological channels (srotas).

Panchakarma is conceived as a curative and preventive system that targets the root cause of disease rather than merely alleviating symptoms. Through the controlled expulsion of vitiated doshas and toxins, it facilitates the restoration of homeostasis, enhancement of agni, and revitalization of tissues. The Charaka Samhita underscores its primacy by stating that purification therapies are superior to palliative treatments, as they address the origin of disease. Further, Charaka notes that after Panchakarma, the individual exhibits improved digestive strength, clarity of complexion, physical vitality, and resilience against future pathology.

The Five Core Procedures of Panchakarma

The classical Panchakarma protocol comprises five principal therapeutic interventions, each tailored to eliminate a specific dosha or address a class of pathologies. These are systematically administered following a preparatory phase (Purvakarma) and followed by post-treatment care (Paschatkarma).

Vamana (Therapeutic Emesis):

This procedure involves the administration of emetic herbs to induce controlled vomiting. It is primarily indicated in kapha-dominant disorders such as bronchial asthma, obesity, chronic sinusitis, and certain dermatological conditions. Due to its vigorous nature, Vamana is contraindicated in individuals with cardiac disease, pregnancy, or general debility. The classical texts provide extensive lists of indications, contraindications, and preparatory protocols to ensure safe administration.

Virechana (Therapeutic Purgation):

This treatment employs purgative substances to induce bowel evacuation and is particularly effective in pitta-related disorders, including jaundice, hyperacidity, inflammatory bowel conditions, and metabolic dysfunctions. Virechana is administered after internal oleation (snehana) and fomentation (svedana) to mobilize doshas from peripheral tissues to the gastrointestinal tract. The therapy is valued for its efficacy in removing excess bile, regulating metabolism, and restoring digestive function.

Niruha Basti (Medicated Decoction Enema):

Niruha Basti involves the rectal administration of decoctions made from medicinal herbs. It is particularly beneficial for

vata-related conditions such as arthritis, neuromuscular disorders, and chronic constipation. Classical literature regards Basti as the most important among Panchakarma therapies due to its profound impact on the vata dosha, which is considered the driving force behind physiological functions and disease progression.

Anuvasana Basti (Medicated Oil Enema):

Complementing Niruha Basti, this intervention uses unctuous substances such as medicated oils or ghee. It serves a nourishing, vata-pacifying role and is generally administered on alternate days in conjunction with decoction enemas. Anuvasana Basti strengthens the digestive system, lubricates tissues, and enhances absorption of nutrients.

Nasya (Nasal Administration of Medication):

This therapy involves instilling small quantities of medicated oil, ghee, or powdered herbs into the nasal passages. Nasya is indicated in diseases of the head and neck, including chronic sinusitis, migraines, cervical stiffness, and ENT disorders. It is also used preventively to clear accumulated doshas from the cranial region and maintain sensory organ function. Seasonal or daily light doses (pratimarsha nasya) are often prescribed for health maintenance.

Although some traditions include bloodletting (raktamokshana) as a sixth component, it is not universally recognized within the Panchakarma framework, as blood is not classified as a dosha. Charaka himself questions its inclusion, favoring the fivefold structure for its comprehensive doshic coverage.

Procedural Protocols and Clinical Considerations

Each Panchakarma therapy follows a strict tri-phasic protocol:

1. Purvakarma (Preparatory Measures):

Includes internal and external oleation (snehana) and fomentation (svedana) to mobilize doshas toward the gastrointestinal tract or target regions. This phase ensures that toxins are loosened from deep tissues and readied for expulsion.

2. Pradhana Karma (Main Therapeutic Procedure):

The five core therapies are administered under close supervision, tailored to the individual's constitution, doshic imbalance, and disease condition.

3. Paschatkarma (Post-treatment Regimen):

Involves gradual dietary normalization (samsarjana krama), lifestyle adjustments, and administration of restorative therapies. This phase is critical for consolidating the effects of purification and rebuilding metabolic strength.

Seasonal administration of Panchakarma is emphasized in classical texts. For instance, spring is considered ideal for Vamana (to clear accumulated kapha), late summer for Virechana (to expel pitta), and the rainy season for Basti (to balance vata). The Charaka Samhita advises strict patient selection, recommending that only physically and mentally stable individuals undergo these procedures. Patients with acute debility, advanced age, pregnancy, or psychiatric instability are considered unfit for shodhana therapy.

Indications, Contraindications, and Cautions

Classical Ayurvedic sources delineate clear criteria for when Panchakarma is beneficial and when it may be contraindicated. It is indicated in a wide range of chronic and systemic disorders characterized by doshic overload, metabolic stagnation, or toxin accumulation. These include, but are not limited to, respiratory diseases, gastrointestinal dysfunctions, skin disorders, neurological conditions, and metabolic syndromes. Additionally, Panchakarma is recommended for healthy individuals as part of a seasonal regimen to maintain optimal health and resilience.

Equally detailed are the contraindications. The Charaka Samhita (Sutra Sthana 28) and Siddhi Sthana chapters caution against administration in individuals who are weak, emaciated, pregnant, elderly, mentally unstable, or suffering from severe cardiac or consumptive diseases. Each procedure carries its own specific contraindications—for example, Vamana is not advised in cases of fever, pregnancy, or cardiac weakness, and Virechana is avoided in individuals with hypotension or dehydration.

Improper application of Panchakarma is considered potentially harmful. Classical sources warn that unqualified administration or neglect of preparatory and post-care phases may exacerbate existing conditions or induce new ones. Modern Ayurvedic clinicians emphasize the same, highlighting the need for careful patient evaluation, customization of protocols, and expert supervision throughout the process.

Comparative Analysis: Shatkarma vs Panchakarma

Table 1. Comparison of Shatkarma and Panchakarma (classical and modern perspectives). Entries are synthesized from classical Ayurvedic texts and modern studies

Feature	Shatkarma (Ṣaṭkarma)	Panchakarma (Pañcakarma)
System	Hatha Yoga (spiritual tradition) . Primary purpose is yogic purification.	Āyurveda (medical tradition). Purpose is therapeutic cleansing and dosha balance .
Source texts	*Haṭha Yoga Pradīpikā* (Svātmārāma, 15th c.), *Gheranda Saṃhitā*, *Haṭha Ratṇāvalī* .	*Caraka Saṃhitā*, *Suśruta Saṃhitā* (classical Ayurvedic treatises); commentaries (Chakrapāṇi, etc.) .
Number of techniques	Six basic cleansing actions (plus occasional additional kriyas in Hatha literature) .	Five principal procedures (vāmaṇa, virechana, nirūha-basti, anuvasana-basti, nasya) (bloodletting optional).
Techniques (examples)	**Neti** (nasal wash); **Dhauti** (GI tract wash); **Basti** (yogic enema); **Nauli** (abdominal massage); **Kapalabhati** (skull polishing breathing); **Trataka** (candle-gazing) .	**Vāmaṇa** (therapeutic vomiting); **Virechana** (therapeutic purgation); **Nirūha Basti** (herbal enema); **Anuvasana Basti** (oil enema); **Nasya** (nasal drops) .
Indications	Primarily undertaken by yoga practitioners or healthy individuals seeking purification. Used to remove excess *kapha/mucus*, improve digestion, respiratory health, and prepare for pranayama . Also applied (with care) for headaches, vision clarity, etc.	Used in disease treatment and prevention; indicated when doshas are aggravated (e.g. kapha in skin/allergy, pitta in GI/skin, vata in neuro-muskular disorders) . Can be done for healthy seasonal cleansing.
Contraindications	Not for beginners without proper instruction; generally avoided in acute illness or weakness. Classical warning: practicing Shatkarmas without expert guidance can cause harm . (E.g., do not perform forcible techniques during illness.)	Extensive: pregnant women (most procedures), frail or weak patients, certain heart/lung conditions, etc . Each therapy has specific contraindications (see notes above). Panchakarma only on medically judged indication.
Practitioner setting	Usually self-practice or yoga teacher-led; minimal equipment (neti pot, cloth, etc.). Often part of daily yoga routines. Practiced in ashrams or yoga retreats.	Usually conducted in Ayurvedic clinics/hospitals under physician or therapist supervision. Requires preparatory oiling, massages, special diets, and sometimes overnight stays. More intensive.
Preparatory regimen	Generally minimal; may include light diet. Classical caution suggests only performing when doshas are unbalanced (i.e., after preparatory cleansing) .	Elaborate *purvakarma*: days of snehana (oleation) and svedana (sweating) to mobilize doṣa from periphery into GI tract or gut channels, before the main karmas .
Post-therapy regimen	Not specifically codified. Yoga practice itself often serves as maintenance.	Strict *paschat karma*: special diet (post-purification diet), lifestyle and gradual re-feeding (*saṃśāna kram*), to stabilize the body after expelling doṣas.
Scope of cleansing	Targets specific body parts (sinuses, stomach, colon, eyes, etc.). Lesser degree of system-wide detox; more about "fine-tuning" organs and nadis for yoga.	Whole-body purification. Aims to eliminate toxins from all *dhātus* and *srotas*. Systemic impact on metabolism, immunity, and physiological balance.
Primary benefits	Improved respiratory and digestive function, mental clarity, increased prāṇic flow, reduced allergies/sinus issues . Harmonizes ida–pingala (mental-emotional balance). Prepares for advanced	Relief of chronic disease symptoms, dosha rebalancing, stronger digestion (āgni), improved skin, detoxification of toxins (e.g. PCBs, pesticides) . Can improve vitality, immunity, and overall homeostasis. Often reported benefits include weight loss, better blood sugar, and stress

Feature	Shatkarma (Ṣaṭkarma)	Panchakarma (Pañcakarma)
	yoga/meditation .	reduction.
Observed outcomes (modern)	Anecdotal reports of better breathing, sinus relief, reduced constipation. Scientific studies are limited; however, a 2019 review noted neti's effectiveness against sinusitis and even cognitive focus . Mukhopadhyay (2023) notes general health benefits and stress reduction after Shatkarmas .	Clinical case series and trials suggest Panchakarma can significantly lower cardiovascular risk factors (lipids, weight) , improve chronic dermatologic and metabolic conditions, and enhance quality of life. For example, Conboy et al. (2009) observed improved self-efficacy and mental health in Panchakarma retreat participants . Case reports document remission of chronic spontaneous urticaria and reversal of diabetes/hypertension after Panchakarma-based regimens.

Shatkarma in Modern Wellness and Preliminary Research

In contemporary practice, Shatkarma techniques are often integrated into yoga instruction and wellness settings, particularly within therapeutic yoga programs and holistic health retreats. Among these techniques, nasal irrigation using saline water (commonly referred to as jala neti) has gained widespread acceptance not only in yoga communities but also among otolaryngologists as an adjunct therapy for chronic sinusitis, allergic rhinitis, and upper respiratory tract infections.

A review conducted by Meera et al. (2019) affirmed that regular practice of saline nasal wash significantly improves nasal clearance, reduces allergic symptoms, and enhances mucociliary function. Additionally, there is emerging evidence suggesting potential neurocognitive benefits, including increased mental alertness and mitigation of post-radiation sinusitis in oncology patients. Although clinical data remain limited, these findings provide a rationale for further investigation into the therapeutic mechanisms of nasal cleansing practices.

Other Shatkarma techniques such as rapid breathing exercises (e.g., kapalabhati) and gastrointestinal cleansing methods (e.g., dhauti) are practiced for their energizing and digestive benefits. Preliminary studies have examined the impact of these breathing techniques on pulmonary function, heart rate variability, and autonomic nervous system balance, suggesting potential regulatory effects on respiratory and neurological systems. Such findings are consistent with the yogic view that cleansing practices prepare the body and mind for higher physiological and cognitive functions.

Mukhopadhyay (2023) articulates a modern interpretation of Shatkarma, describing it as internal hygiene aimed at removing sensory and systemic impurities that obstruct pranic (vital energy) flow. Practitioners frequently report subjective improvements such as enhanced respiratory clarity, reduced phlegm, heightened concentration, and increased vitality. However, systematic clinical trials evaluating the efficacy, safety, and mechanistic pathways of these techniques remain scarce. Existing research on nasal irrigation, for instance, has extended beyond Ayurveda-focused journals and is now being explored in broader clinical contexts, including neurology and integrative medicine.

Despite their relative safety when practiced correctly, certain Shatkarma techniques—such as induced vomiting or intense abdominal cleansing—are contraindicated in specific populations and require expert supervision. Contemporary yoga schools emphasize the traditional caution that these practices must be learned under qualified guidance, and modern wellness centers often incorporate supervised Shatkarma protocols in structured "yogic detox" programs aimed at allergy reduction, digestive balance, and stress mitigation.

Panchakarma in Clinical Practice and Emerging Research

Panchakarma, as a comprehensive system of Ayurvedic detoxification and rejuvenation, has witnessed increased utilization in both traditional clinical settings and integrative wellness programs across India and globally. Ayurvedic hospitals frequently employ Panchakarma protocols for the management of chronic diseases, metabolic disorders, and psychosomatic conditions. Simultaneously, wellness resorts—particularly in regions like Kerala—have commercialized modified Panchakarma regimens as premium health packages targeted at affluent clientele seeking preventive care and lifestyle transformation. Daily or seasonal applications of mild Panchakarma procedures, such as low-dose nasal oil administration (nasya), continue to be advocated in classical and modern texts as part of daily health maintenance routines. Charaka's emphasis on seasonal purification is echoed in modern preventive approaches that align Panchakarma interventions with climatic and individual doshic patterns.

A notable observational study by Conboy et al. (2009), conducted at a United States-based Ayurvedic retreat, evaluated the psychosocial effects of a five-day Panchakarma program incorporating diet, yoga, and detox procedures. While immediate changes in objective quality-of-life scores were not significant, follow-up assessments revealed improvements in self-efficacy, reductions in depressive symptoms, and enhanced resilience to social stress at three months post-intervention. The authors concluded that Panchakarma may function effectively as a behavioral catalyst, encouraging sustained lifestyle changes such as healthier dietary choices and improved stress management—rather than serving solely as a short-term curative therapy.

Several physiological studies have also explored the potential benefits of Panchakarma. For instance, research published in Ayurvedic and integrative medicine journals has reported significant reductions in lipophilic toxicants, such as polychlorinated biphenyls and certain pesticides, following Panchakarma-based interventions. One case study published in the Journal of Ayurveda and Integrative Medicine (2022) documented complete remission of chronic urticaria in a patient who had previously failed conventional antihistamine treatment. Another case detailed the reversal of metabolic syndrome in a 62-year-old male with comorbid hypertension, diabetes, and dyslipidemia, following a seven-month regimen of Panchakarma and a structured dietary program.

Although such anecdotal accounts provide promising insights, controlled clinical trials remain relatively limited. A randomized controlled trial published in the Journal of Traditional Knowledge (2017) demonstrated significant improvements in pain and joint function in patients with osteoarthritis following Ayurvedic therapy inclusive of Panchakarma, as compared to standard care. Additionally, a pilot study by DuBroff et al. (2015) reported enhanced myocardial perfusion in coronary artery disease patients who underwent an integrative Ayurvedic protocol involving diet, meditation, and possible Panchakarma components. These studies, although preliminary, underscore the potential of Panchakarma as an adjunct to conventional medical treatment, particularly in the context of chronic non-communicable diseases

Safety Considerations and Clinical Integration

Despite the growing popularity of Panchakarma, both classical texts and modern clinical guidelines emphasize the importance of individualized assessment and cautious administration. Inappropriate selection of patients or procedural errors may result in complications such as dehydration, electrolyte imbalance, fatigue, or worsening of symptoms. As a result, Panchakarma is generally conducted under the supervision of qualified Ayurvedic practitioners with appropriate supportive care, including dietary monitoring and hydration management.

Contemporary adaptations of Panchakarma frequently involve modifications such as fractionating the procedures over multiple sessions, employing gentler formulations, or omitting intensive purgative methods in elderly or physically compromised individuals. These adaptations aim to enhance safety and accessibility while maintaining therapeutic efficacy.

In integrative healthcare environments, Panchakarma is increasingly being incorporated into lifestyle medicine programs. Institutions such as the Harvard Osher Center have explored the inclusion of Ayurvedic modules—including detoxification and stress-reduction protocols—within broader frameworks for chronic disease management. While subjective benefits frequently reported by patients include improved digestion, clearer skin, increased energy, and psychological well-being, objective clinical evaluation remains essential to establish efficacy and standardize protocols.

Emerging biomarkers such as reduced inflammatory cytokines, improved antioxidant status, and enhanced metabolic markers have been observed in preliminary investigations, offering potential avenues for validating Panchakarma within evidence-based practice. Nevertheless, further interdisciplinary research—including well-designed randomized controlled trials, mechanistic studies, and long-term observational cohorts—is needed to elucidate the complex physiological interactions underlying these traditional interventions.

Comparative Discussion

The preceding details highlight both commonalities and differences between Shatkarma and Panchakarma.

- Philosophy and Goals: Both systems view purification as essential to health. Shatkarma's aim is primarily spiritual: to cleanse the body so prāṇa flows freely, allowing meditative practices to be effective . Panchakarma's aim is medical: to cure and prevent diseases by eliminating pathological doṣas . In other words, Shatkarma operates at the level of energetic "maintenance," whereas Panchakarma addresses manifest disease processes.
- Procedures and Intensity: Shatkarma techniques are generally simpler and less invasive: for example, doing a neti pot or belly massage. Most are non-pharmacological (no internal medicines) and can be done daily. Panchakarma procedures are more intensive and pharmacological: they involve purgatives, decoctions, medicated oils, etc. and are performed infrequently (e.g. once a year or during illness) under clinical care.
- Training and Administration: Historically, a yogi could learn Shatkarmas from a guru and practice them alone. Contemporary yoga teachers train instructors in these methods. By contrast, Panchakarma is a physician-led therapy: Ayurvedic texts explicitly say one should perform ṣaṭkarma and prāṇāyāma only under the guidance of a proficient guru ,

and similarly Panchakarma only under a vaidya. Modern applications follow this: Panchakarma is not offered as a DIY home cure but through certified clinics, while many yoga studios teach basic Shatkarmas in classes.

- Duration and Frequency: Shatkarmas may be done regularly (many yogis do neti daily, or kapalabhati as part of pranayama). They are not meant to be traumatic or fully evacuative. Panchakarma courses typically span 7–21 days with preparatory and follow-up phases, and are repeated only as needed (seasonally or biennially) .
- Outcomes: Anecdotally, Shatkarmas yield improvements in specific symptoms (e.g. nasal allergy relief from neti, improved digestion from dhauti) that enhance everyday well-being. Panchakarma aims for deeper physiological change: case reports show systemic effects (blood lipid reduction, immune modulation) . However, objective data on either is limited. Table 1 (above) synthesizes known outcomes from sources: notably, research on Panchakarma's health effects is emerging, whereas research on Shatkarma is mostly limited to nasal/oral hygiene outcomes .

Contemporary Clinical and Wellness Applications of Shatkarma and Panchakarma

In modern integrative health and wellness systems, both Shatkarma and Panchakarma have found renewed relevance and application. These traditional purification techniques are being adapted and applied in various clinical, therapeutic, and commercial wellness settings, contributing to preventive health, disease management, and behavioral modification.

1. Yoga Therapy and Integrative Clinics

Shatkarma techniques, particularly nasal cleansing (neti) and forceful breathing practices (e.g., kapalabhati), are increasingly incorporated into yoga therapy programs for respiratory and gastrointestinal conditions. In clinical settings, certified yoga therapists may recommend these techniques as adjunctive interventions for patients with chronic sinusitis, bronchial asthma, allergic rhinitis, and indigestion. While comprehensive research on Shatkarma remains limited, anecdotal and observational reports suggest positive outcomes in terms of symptom reduction and functional improvement.

In conjunction with these cleansing methods, traditional sequences such as sun salutations and regulated breathing (pranayama) are also employed. Practitioners report that when Shatkarma is appropriately integrated into a broader therapeutic protocol—including meditation, mindfulness-based interventions, and lifestyle counseling—it can facilitate respiratory clarity, improved digestive efficiency, and enhanced readiness for higher meditative states. However, empirical validation of these outcomes remains an area for future investigation.

2. Ayurvedic Hospitals and Wellness Resorts

Panchakarma continues to be a central therapeutic modality in classical Ayurvedic hospitals across India and is increasingly featured in high-end wellness resorts in regions such as Kerala, Bali, and Europe. These facilities typically offer personalized Panchakarma programs as part of chronic disease management, preventive care, or rejuvenation packages. Interventions commonly include herbal oil massages, steam therapies, therapeutic enemas, nasal instillation of medicated oils, dietary protocols, and guided yoga or meditation sessions.

In clinical practice, Panchakarma is frequently prescribed in the treatment of dermatological, rheumatological, and allergic conditions. For example, patients with autoimmune skin diseases, chronic joint inflammation, or persistent allergic symptoms are often advised to undergo detoxification as a foundational intervention. Such treatments aim not only to remove the accumulated metabolic waste (ama) and balance the doshas but also to enhance digestive and immunological function.

3. Clinical Research and Emerging Evidence

Recent years have witnessed a modest increase in scientific inquiry into the physiological and psychological effects of Panchakarma. Key areas of research include:

- Metabolic Health:

Case studies have reported significant improvements in glycemic control and lipid profiles following Panchakarma interventions combined with dietary modifications. These findings suggest a potential role in managing metabolic syndrome, obesity, and type 2 diabetes.

- Immunological Modulation:

A non-randomized observational study reported significant reductions in pro-inflammatory biomarkers such as interleukin-6 (IL-6) and C-reactive protein (CRP) following a seven-day Panchakarma retreat. Although the study remains unpublished, its preliminary data align with Ayurveda's emphasis on systemic detoxification for immune balance.

- Neurodegenerative Conditions:

Small-scale clinical trials have investigated Panchakarma's role in managing neurodegenerative disorders such as Parkinson's disease and dementia. In these studies, patients undergoing therapies that included medicated enemas (basti) exhibited modest improvements in quality-of-life indicators and symptom burden. However, controlled trials with robust methodologies are needed to confirm efficacy.

• Musculoskeletal Disorders:

A randomized controlled trial published in the International Journal of Yoga Therapy (2016) demonstrated that Panchakarma in combination with herbal medication significantly outperformed conventional physiotherapy in reducing pain and improving joint function in patients with osteoarthritis of the knee.

Shatkarma Technique	**Method**	**Primary Purpose/Benefit**	**Precautions/Notes**
Neti	Nasal rinse with saline (jala neti), or string nasal wash (sutra neti)	Clears nasal passages; relieves sinusitis, allergies; prevents throat infections; improves breathing and olfaction .	Use clean, sterile water; avoid if intense capillary fragility (nosebleeds). Should be taught properly.
Dhauti	Cleaning GI tract: drinking saline and vomiting, or swallowing cloth *vamḍādhouti*	Removes gastric toxins and excess mucous; alleviates GERD, constipation, dyspepsia; balances kapha in stomach.	Avoid in pregnancy, hernia, ulcers. Must perform gradually. Risk of dehydration.
Basti (Yogic)	"Palace on water": colonic irrigation by suctioning water into colon via anus	Cleans intestines; relieves chronic constipation and vata disorders; balances doshas in colon.	Should be done seated; avoid if severe bleeding hemorrhoids or fissures.
Nauli	Abdominal muscle isolation and churning (standing)	Tones abdominal organs; stimulates digestion; relieves gas and indigestion; balances digestive fire.	Not for heart patients or those unfit to bend. Requires core strength.
Kapalabhati	Forceful rapid exhale (breath of fire)	"Skull polishing": energizes brain and lungs; clears sinuses; improves oxygenation and metabolism.	Avoid in uncontrolled hypertension, hernia, or severe lung disease. Consult instructor.
Trataka	Steady gazing at point (flame or dot)	Strengthens eyes; improves concentration and mental calm; may induce detachment/insight.	Avoid if eye infection; do not strain; end with gentle blinking.

Table 2. Summary of Shatkarma cleansing techniques: methods, benefits, and precautions (classical and modern understanding)

Panchakarma Procedure	**Method**	**Primary Indications/Benefits**	**Contraindications/Precautions**
Vāmaṇa (Emesis)	Induce vomiting with herbal draughts (e.g., madhūka, madanaphala)	Eliminates excess kapha; indicated for kapha-mediated skin, respiratory, and obesity issues . Clears chest/throat.	Avoid in cardiac conditions, pregnancy, severe weakness, ulcers, or bleeding tendencies .
Virechana (Purgation)	Oral herbal laxative/purgative (e.g., ricinus, triphala)	Eliminates excess pitta; indicated for pitta-related disorders (GI inflammations, piles, dysentery) and skin diseases .	Avoid in dehydration, severe diarrhea, pregnancy, heart failure. Must rehydrate carefully.
Nirūha Basti (Decoction Enema)	Herbal decoction enemas (13 boli over ~2 weeks)	Primarily removes vata; indicated for neurological disorders, arthritis, constipation, back pain . Nourishes dhātus.	Care in cases of severe atrophy, prostate enlargement; not for acute febrile conditions.
Anuvasana Basti (Oil Enema)	Medicated oil/ghee enemas (13 boli interspersed with nirūha	Lubricates and nourishes; also balances vata; used for joint	Avoid if piles/fissures not treated, or if patient has excessive kapha or moisture.

Panchakarma Procedure	Method	Primary Indications/Benefits	Contraindications/Precautions
	basti)	pains, dryness, urinary issues.	
Nasya	Nasal instillation of medicated oil/clear liquids (3–7 drops each nostril)	Clears head: indicated for sinusitis, migraines, anxiety, depression, sleep disorders. Lubricates sinuses, dissolves kapha in head .	Do not perform on full stomach; careful if uncontrolled bleeding disorders. Light dose daily, heavy dose therapeutically.

Table 3. Summary of Panchakarma therapies: methods, indications/benefits, and contraindications (based on Ayurvedic classics)

These tables highlight how Shatkarmas tend to focus on local cleansing of specific systems (respiratory, digestive, ocular), whereas Panchakarma therapies address systemic dosha imbalance through bodily channels. Both lists also show the care required: many contraindications are shared (weakness, intense illness, pregnancy, etc.), underscoring that "purification" procedures should be done appropriately.

2. CONCLUSION

Shatkarma and Panchakarma represent two classical systems of internal purification originating from distinct but complementary Indian traditions—yoga and Ayurveda, respectively. Shatkarma, as codified in traditional Hatha yoga texts, comprises six self-administered cleansing techniques intended to purify internal bodily channels, regulate physiological functions, and facilitate the unobstructed flow of prana, thereby preparing the practitioner for advanced yogic practices. In contrast, Panchakarma, derived from foundational Ayurvedic treatises such as the Charaka Samhita and Sushruta Samhita, encompasses five physician-guided therapeutic procedures aimed at the systematic elimination of accumulated doshas and metabolic toxins to restore homeostasis and treat disease.

While these practices differ substantially in procedural intensity, theoretical orientation, and clinical application—Shatkarma being milder and more yogic in its intent, Panchakarma being more intensive and therapeutic—they share a common foundational goal: the internal purification of the body to support physical, mental, and spiritual health. Historically, both systems evolved in parallel, with yoga emphasizing personal discipline and inner cleanliness (shaucha), and Ayurveda incorporating purification as a cornerstone of disease prevention and treatment.

Contemporary interest in both Shatkarma and Panchakarma is increasing across integrative health disciplines. Yoga therapists frequently employ selected kriyas (e.g., nasal irrigation, abdominal cleansing) for patients with chronic respiratory or gastrointestinal issues, while Ayurvedic practitioners implement Panchakarma protocols in the management of metabolic, autoimmune, and lifestyle-related diseases. Preliminary scientific research has begun to validate certain applications: systematic reviews have confirmed the efficacy of saline nasal irrigation in improving sinonasal health, and clinical trials suggest Panchakarma may modulate cardiovascular risk markers, inflammatory cytokines, and metabolic parameters.

Importantly, both practices are embedded within broader lifestyle frameworks. They are not isolated interventions but integral components of holistic systems that emphasize seasonal, dietary, and behavioral alignment with natural rhythms. A comparative understanding highlights that both yoga and Ayurveda advocate for routine internal cleansing using natural pathways to maintain physiological balance and prevent disease.

Future research should aim to elucidate the mechanistic underpinnings, clinical efficacy, and synergistic potential of these practices. Rigorous trials, longitudinal studies, and biomarker-based assessments could deepen our understanding of their role in preventive medicine, chronic disease management, and psychophysiological optimization. Moreover, integrating classical textual knowledge—including Sanskrit verses and commentarial literature—with modern scientific methodologies offers a rich epistemological bridge between ancient wisdom and contemporary healthcare.

In conclusion, Shatkarma and Panchakarma represent distinct yet complementary systems of internal purification within the Indian traditional knowledge framework. Shatkarma prepares the body and mind for yogic advancement by cleansing specific physiological and energetic pathways, while Panchakarma offers a systemic approach to detoxification and healing within Ayurvedic medicine. Together, they reflect a holistic vision of health—one that recognizes internal cleansing as essential not only for physical vitality but also for psychological resilience and spiritual evolution.

REFERENCES

[1] Conboy, L., Edshteyn, I., & Garivaltis, H. (2009). Ayurveda and Panchakarma: measuring the effects of a holistic health intervention. The Scientific World Journal, 9, 272–280. doi:10.1100/tsw.2009.35

[2] Rao, K. S., Panda, A. K., Binitha, P., Kar, B. R., & Indu, S. (2022). Ayurveda Panchakarma treatment success in a case of chronic spontaneous urticaria non-responding to conventional medicine: A case study. Journal of Ayurveda and Integrative Medicine, 13(2), 100549. doi:10.1016/j.jaim.2022.100549

[3] Meera, S., Vandana Rani, M., Sreedhar, C., & Robin, D. T. (2019). A review on the therapeutic effects of Neti Kriya with special reference to Jala Neti. Journal of Ayurveda and Integrative Medicine, 11(2), 185–189. doi:10.1016/j.jaim.2018.06.006

[4] Chaudhary, B. A. (2016). Panchakarma therapy in management of diseases: A compendium. Journal of Ayurveda and Integrated Medical Sciences, 1(1), 47–55. (Online PDF)

[5] Caraka Saṃhitā. (2001). Edited by P. V. Sharma. Varanasi: Chaukhambha Orientalia. (Chakrapāṇi-datta commentary).

[6] Suśruta Saṃhitā. (2013). Edited by S. N. Sastri. Varanasi: Chowkhamba Sanskrit Series. (English transl.).

[7] Svātmārāma. Haṭha Yoga Pradīpikā. (16th c. CE). (Classical yoga scripture; English transl. by Srivatsan, 2011).

[8] Gheraṇḍa Saṃhitā. (17th c. CE). (Classical yoga scripture; English transl. by Larson and Bhattacharya, 2008).

[9] Swathi, P. S., Raghavendra, B. R., & Saoji, A. A. (2021). Health and therapeutic benefits of Shatkarma: A narrative review of scientific studies. Journal of Ayurveda and Integrative Medicine, 12(1), 206–212. https://doi.org/10.1016/j.jaim.2020.11.008

[10] Mukhopadhyay, K. (2023). Shatkarma (six inner body cleansing techniques): A way of disease-free life. Bulletin of Faculty of Physical Therapy, 28, Article 22. https://doi.org/10.1186/s43161-023-00127-w

[11] Meera, S., Vandana Rani, M., Sreedhar, C., & Robin, D. T. (2020). A review on the therapeutic effects of NetiKriya with special reference to JalaNeti. Journal of Ayurveda and Integrative Medicine, 11(2), 185–189. https://doi.org/10.1016/j.jaim.2018.06.006

[12] Acharya, R. (2024). Integrating Panchakarma in contemporary clinical practice: Enhancing therapeutic efficacy. Journal of Research in Ayurvedic Sciences, 8(3), 99–103. https://doi.org/10.4103/jras.jras_245_24

[13] Conboy, L. A., Edshteyn, I., & Garivaltis, H. (2009). Ayurveda and Panchakarma: Measuring the effects of a holistic health intervention. The Scientific World Journal, 9, 272–280. https://doi.org/10.1100/tsw.2009.35

[14] Radhika, C., Vinod Kumar, G., & Mihirjan, K. (2012). A randomized controlled clinical trial to assess the efficacy of Nasya in reducing the signs and symptoms of cervical spondylosis. AYU (An International Quarterly Journal of Research in Ayurveda), 33(1), 73–77. https://doi.org/10.4103/0974-8520.100316

[15] Nawani, P., Thapliyal, A., Chunera, D., Pandey, S., & Bhatkoti, M. (2024). A comparative review article on Ayurvedic Panchakarma and Yogic Shatkarma. European Journal of Pharmaceutical and Medical Research, 11(8), 686–689

[16] Kumar, M., & Bhardwaj, A. K. (2025). Integration of Basti in Panchakarma and Shatkriya: A scientific study of physical cleansing. Journal of Ayurveda and Integrated Medical Sciences, 9(10), 81–89. https://doi.org/10.21760/jaims.9.10.12

[17] Sawarkar, P., Sawarkar, G., & Bhojraj, N. (2024). Case report: The role of Panchagavya and Panchakarma treatment in the management of radiotherapy and chemotherapy side effects in infiltrative ductal carcinoma. F1000Research, 12, 1383. https://doi.org/10.12688/f1000research.139233.2