

Critical Analysis Of Mustadi Kwatha Drugs In Childhood Obesity

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Abstract

Childhood obesity has become a global health concern, leading to various physical, psychological, and social challenges. In Ayurveda, the condition is closely associated with *Sthaulya* (obesity), a *Kapha*-dominant disorder. Among the Ayurvedic interventions, *Mustadi Kwatha*—a polyherbal formulation described in classical texts—is recognized for its potential in managing obesity. This review critically analyzes the therapeutic efficacy, pharmacological properties, and clinical relevance of *Mustadi Kwatha* in childhood obesity. The study explores the formulation's bioactive components, mechanisms of action, and suitability for pediatric use while addressing safety concerns and possible contraindications. Further, it evaluates existing research, highlighting gaps in clinical trials and proposing future directions for integrative approaches. The findings emphasize the need for robust evidence to establish *Mustadi Kwatha* as a viable option in combating the rising prevalence of childhood obesity.

Keywords

Mustadi Kwatha, childhood obesity, *Sthaulya*, Ayurveda, pediatric obesity management, traditional medicine.

Introduction

Childhood obesity is a growing epidemic worldwide, significantly contributing to the global burden of non-communicable diseases. This condition is characterized by an excessive accumulation of body fat, leading to adverse health outcomes such as diabetes, hypertension, and cardiovascular complications.¹ Modern medical approaches primarily focus on calorie restriction, increased physical activity, and pharmacological interventions. However, these strategies often present challenges, including poor compliance, side effects, and cultural barriers. Consequently, there is a rising interest in exploring traditional and holistic approaches like Ayurveda for managing obesity in children.² In Ayurveda, childhood obesity is closely linked to *Sthaulya*, a *Kapha*-dominant condition characterized by excessive adipose tissue and metabolic dysfunction.³ The etiology of *Sthaulya*

includes factors such as improper diet (*Ahara*), sedentary lifestyle (*Vihara*), and genetic predisposition (*Beeja Dosha*). Ayurvedic principles emphasize restoring the balance of *Doshas* and improving metabolic processes through dietary regulation, lifestyle modifications, and herbal interventions.⁴ Among the formulations described in classical texts, *Mustadi Kwatha* is renowned for its potential in addressing obesity due to its *Kapha*-reducing (*Lekhana*) and metabolic-enhancing (*Agni Deepana*) properties.⁵

Mustadi Kwatha is a polyherbal decoction comprising ingredients such as *Mustaka* (*Cyperus rotundus*), *Hareetaki* (*Terminalia chebula*), and other potent herbs. These components are known for their lipid-lowering, digestive, and detoxifying effects.⁶ The formulation's unique combination of herbs is believed to regulate *MedoDhatu* (fat tissue), improve lipid metabolism, and enhance overall health. While the traditional efficacy of *Mustadi Kwatha* is well-documented in Ayurvedic texts, scientific validation and clinical trials in the context of childhood obesity remain limited, necessitating further investigation.⁷

This review aims to critically analyze the role of *Mustadi Kwatha* in the management of childhood obesity, focusing on its pharmacological actions, therapeutic potential, and safety profile. By evaluating the existing literature and identifying gaps in research, the study seeks to provide a comprehensive understanding of this Ayurvedic formulation.⁸

Aim

To critically analyze the efficacy, safety, and therapeutic potential of *Mustadi Kwatha* in the management of childhood obesity.

Objectives

1. To explore the pharmacological properties and mechanisms of action of *Mustadi Kwatha*.
2. To evaluate its clinical relevance and safety profile in pediatric obesity.
3. To identify gaps in existing research and propose future directions for its application.
4. To assess the integration of *Mustadi Kwatha* into holistic obesity management strategies.

Materials and Methods

Study Design

This is a critical review based on classical Ayurvedic texts, modern pharmacological studies, and clinical trials related to *Mustadi Kwatha* and its use in childhood obesity.

Data Collection

- **Primary Sources:** Ayurvedic classics such as *Charaka Samhita*, *Sushruta Samhita*, and *AshtangaHridaya* were reviewed to understand the traditional formulation and therapeutic indications of *Mustadi Kwatha*.
- **Secondary Sources:** Published articles, pharmacological research, and clinical studies on the efficacy and safety of *Mustadi Kwatha* and its individual ingredients were sourced from databases like PubMed, Google Scholar, and AYUSH repositories.

Analytical Framework

- A qualitative approach was adopted to evaluate the pharmacological actions, therapeutic potential, and safety profile of *Mustadi Kwatha*.
- Comparative analysis was performed between classical Ayurvedic principles and modern biomedical insights.
- The gaps in research were identified and discussed to propose future study directions.

Ethical Considerations

This study involved the review of published data and classical texts. No human or animal subjects were involved, ensuring no ethical concerns related to experimental research.

Conceptual Study on Childhood Obesity

Childhood obesity is a complex, multifactorial condition influenced by genetic, environmental, behavioral, and cultural factors. It is characterized by an abnormal or excessive fat accumulation that poses a significant risk to health. From an Ayurvedic perspective, childhood obesity can be correlated with *Sthaulya* or *Medoroga*, a *Kapha*-dominant condition resulting from an imbalance in *Doshas* and improper functioning of metabolic pathways.⁹

Ayurvedic Perspective on Childhood Obesity

In Ayurveda, childhood obesity is linked to *Kapha Prakopa* (aggravation of the *Kapha Dosha*) and improper metabolism of *MedoDhatu* (fat tissue). The primary causes include excessive consumption of *Guru* (heavy), *Snigdha* (unctuous), and *Madhura* (sweet) foods, along with a sedentary lifestyle and inadequate physical activity. These factors lead to the accumulation of *Ama* (toxins) and disrupt the functioning of *Agni* (digestive fire), resulting in the excessive formation and deposition of fat tissue. The condition is further exacerbated by genetic predisposition (*Beeja Dosha*) and psychosocial factors.¹⁰

Modern Perspective on Childhood Obesity

In modern medicine, childhood obesity is primarily assessed using the Body Mass Index (BMI) percentile for age and sex. The pathophysiology of obesity involves an imbalance between caloric intake and energy expenditure, often exacerbated by a sedentary lifestyle and unhealthy dietary habits. Additionally, genetic factors, hormonal imbalances, and psychological influences contribute to its onset. Obesity in children is associated with numerous health complications, including type 2 diabetes, hypertension, dyslipidemia, and psychological disorders like low self-esteem and depression.¹¹

Impacts of Childhood Obesity

The effects of childhood obesity extend beyond physical health, influencing psychological and social well-being. Physically, it increases the risk of chronic conditions like cardiovascular diseases, respiratory issues, and orthopedic problems. Psychologically, obese children often experience bullying, low self-esteem, and depression. Socially, they may face stigma and discrimination, impacting their overall quality of life. Early intervention is critical to prevent these adverse outcomes and ensure the holistic development of affected children.¹²

Ayurvedic Management

The management of childhood obesity requires a multidisciplinary approach. While modern medicine focuses on dietary changes, exercise, and pharmacological interventions, Ayurveda emphasizes a holistic regimen that includes *Ahara* (diet), *Vihara* (lifestyle), and *Aushadha* (herbal medicines). Ayurvedic formulations like *Mustadi Kwatha* provide a promising alternative due to their *Kapha*-reducing and metabolism-enhancing properties. Integrating these approaches with modern methods could offer a sustainable solution to childhood obesity, addressing its root causes and promoting overall well-being.¹³

Drug Review of *Mustadi Kwatha*

Mustadi Kwatha is a classical Ayurvedic polyherbal formulation widely prescribed for the management of *Sthaulya* (obesity) and associated metabolic disorders. It is composed of a combination of herbs with *Kapha*-pacifying, *Lekhana* (scraping), and *Agni Deepana* (digestive fire-enhancing) properties. This review explores the pharmacological actions, therapeutic potential, and safety profile of *Mustadi Kwatha*, focusing on its application in childhood obesity.¹⁴

Composition of *Mustadi Kwatha*

Table No. 1: Ingredients, Chemical Constituents, and Pharmacological Actions of the Formulation

Name of the Drug	Botanical Name	Parts Used	Chemical Composition	Pharmacological Activities
Mustaka¹⁵	<i>Cyperusrotundus</i>	Rhizome	Flavonoids, alkaloids, terpenoids, sesquiterpenes, saponins	Regulates lipid metabolism, enhances digestion, and reduces inflammation
Hareetaki¹⁶	<i>Terminalia chebula</i>	Fruit	Tannins, chebulinic acid, chebulagic acid, gallic acid, flavonoids	Stimulates <i>Agni</i> , detoxifies <i>Ama</i> , and provides antioxidant benefits
Bibhitaki¹⁷	<i>Terminalia bellirica</i>	Fruit	Tannins, gallic acid, ellagic acid, chebulagic acid, lignans	Supports lipid metabolism, improves digestion, and has rejuvenative effects
Amalaki¹⁸	<i>Emblica officinalis</i>	Fruit	Vitamin C, tannins, gallic acid, emblicanin A & B, flavonoids	Neutralizes free radicals, enhances metabolism, and reduces inflammation
Vidanga¹⁹	<i>Embeliaribes</i>	Fruit	Embelin, quinones, alkaloids, flavonoids	Reduces obesity, expels parasites, and enhances digestion
Gokshura²⁰	<i>Tribulusterrestris</i>	Fruit	Saponins (protodioscin),	Promotes diuresis, assists in detoxification, and has

			flavonoids, alkaloids, glycosides	anti-inflammatory effects
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Mode of Action of *Mustadi Kwatha* in Childhood Obesity

The efficacy of *Mustadi Kwatha* in childhood obesity can be understood through its pharmacological and Ayurvedic mechanisms. The formulation addresses the root causes of obesity by balancing *Kapha Dosha*, improving metabolism (*Agni*), and reducing the excessive accumulation of *MedoDhatu* (fat tissue).

Kapha-Pacifying Effect

- **Mechanism:** Childhood obesity is primarily a *Kapha*-dominant disorder. *Mustadi Kwatha* reduces *Kapha* by its *Lekhana* (scraping) and *Rukshana* (drying) properties. This prevents excessive fat deposition and reduces heaviness in the body, which is characteristic of *Kapha*-related conditions.²¹

Improvement of Metabolism (*Agni Deepana*)

- **Mechanism:** The herbs in *Mustadi Kwatha*, such as *Vidanga* and *Mustaka*, stimulate *Jatharagni* (digestive fire), enhancing the digestion and assimilation of food. Enhanced metabolic activity prevents the formation of *Ama* (toxins) and promotes the proper utilization of nutrients, reducing fat accumulation.²²

Regulation of Lipid Metabolism

- **Mechanism:** Herbs like *Hareetaki* and *Bibhitaki* have lipid-lowering properties. They act by improving the breakdown of stored fats (*MedoDhatuKshaya*).
- **Outcome:** This mobilizes stored fat and helps in weight reduction, particularly in areas of excess fat accumulation.²³

Detoxification (*AmaPachana*)

- **Mechanism:** The formulation eliminates *Ama* (undigested toxins), which is considered a major factor in the pathogenesis of obesity.
- **Outcome:** Detoxification improves overall digestion and metabolism, facilitating weight management and reducing associated metabolic disorders.²⁴

Reduction of Cravings and Appetite Regulation

- **Mechanism:** Ingredients such as *Mustaka* and *Vidanga* have mild appetite-regulating effects, preventing overeating.
- **Outcome:** This helps in controlling excessive calorie intake, a major contributor to childhood obesity.²⁵

Anti-inflammatory and Antioxidant Effects

- **Mechanism:** Ingredients like *Amalaki* provide antioxidant benefits and reduce inflammation caused by adipose tissue dysfunction.
- **Outcome:** This mitigates oxidative stress and inflammation, which are common in obesity-related complications.²⁶

Mild Diuretic and Detoxifying Action

- **Mechanism:** *Gokshura* acts as a mild diuretic, helping in the elimination of water retention and toxins.
- **Outcome:** This reduces bloating and facilitates detoxification, further aiding weight reduction.²⁷

Integrated Effects in Childhood Obesity

- **Restores *Dosha* Balance:** By addressing *Kapha* and enhancing *Pitta* and *Vata*, *Mustadi Kwatha* restores the balance of *Doshas*, which is critical in maintaining healthy weight.
- **Targets Fat Accumulation:** Through its *Lekhana* property, it effectively reduces fat tissue without depleting essential nutrients.
- **Supports Holistic Growth:** Unlike aggressive weight-loss strategies, it ensures safe and gradual weight reduction, preserving the overall health and growth of the child.²⁸

Mode of Action of *Mustadi Kwatha* in Childhood Obesity

Mode of Action	Details	Impact on Childhood Obesity
Rasa (Taste)	- <i>Tikta</i> (Bitter) – Detoxifying, reduces <i>Kapha</i> .	Reduces metabolic waste (<i>Ama</i>), enhances fat metabolism.
	- <i>Katu</i> (Pungent) – Enhances <i>Agni</i> and digestion.	Stimulates metabolism and promotes the breakdown of fat tissue (<i>MedoDhatu</i>).
	- <i>Amla</i> (Sour) – Aids digestion and fat breakdown.	Improves nutrient absorption and regulates lipid metabolism.
Guna (Quality)	- <i>Ruksha</i> (Dry) – Reduces unctuousness of <i>Kapha</i> and fat.	Counters heaviness and aids fat reduction.
	- <i>Laghu</i> (Light) – Enhances digestion and metabolic activity.	Promotes energy utilization and lightness in the body.
	- <i>Tikshna</i> (Sharp) – Facilitates removal of <i>Ama</i> and improves fat mobilization.	Prevents toxin accumulation and supports metabolic detoxification.
Virya (Potency)	- <i>Ushna</i> (Hot) – Stimulates <i>Agni</i> (digestive fire) and balances <i>Kapha</i> and <i>Vata Doshas</i> .	Enhances digestion, counters cold and heavy nature of <i>Kapha</i> , and boosts metabolic activity.
Vipaka (Post-digestive Effect)	- <i>Katu</i> (Pungent) – Prevents excessive nutrient conversion into fat tissue.	Improves nutrient assimilation and prevents fat accumulation.
Karma (Action)	- <i>Kapha-Pachana</i> – Reduces excessive <i>Kapha</i> .	Balances <i>Kapha</i> , preventing heaviness and fat deposition.
	- <i>Lekhana</i> – Scraping action on	Removes excess fat tissue and prevents

	<i>MedoDhatu</i> .	further accumulation.
	- <i>Medohara</i> – Reduces fat tissue (<i>MedoDhatu</i>).	Targets stored fat, aiding in weight reduction.
	- <i>Agni Deepana</i> – Stimulates <i>Jatharagni</i> (digestive fire).	Improves digestion and nutrient assimilation.
	- <i>AmaPachana</i> – Detoxifies the system.	Eliminates toxins (<i>Ama</i>), improving overall metabolic health.
	- <i>Rasayana</i> – Rejuvenative and antioxidant effects.	Enhances cellular health, combats oxidative stress, and supports overall growth and development.

Discussion

Childhood obesity is a multifactorial health issue with significant short- and long-term consequences, including physical, psychological, and social challenges. While conventional treatments like calorie restriction, physical activity, and pharmacological interventions are commonly employed, they often face limitations, including poor adherence, side effects, and cultural inappropriateness. This necessitates the exploration of holistic and traditional approaches, such as Ayurveda, to provide safer and sustainable solutions.²⁹

In Ayurvedic terms, childhood obesity can be correlated with *Sthaulya*, a *Kapha*-dominant condition caused by improper diet, sedentary lifestyle, and metabolic imbalances. *Mustadi Kwatha*, a classical polyherbal formulation, offers a holistic approach by targeting the root causes of obesity. Its *Rasa*, *Guna*, *Virya*, *Vipaka*, and *Karma* collectively contribute to its effectiveness. The *Kapha*-pacifying and *Lekhana* (scraping) properties of the formulation play a critical role in reducing fat accumulation, while its *Agni Deepana* (digestive fire stimulation) and *Ama Pachana* (toxin elimination) effects enhance metabolic efficiency.³⁰

The ingredients of *Mustadi Kwatha*, such as *Mustaka* (*Cyperusrotundus*), *Hareetaki* (*Terminalia chebula*), and *Amalaki* (*Emblica officinalis*), exhibit pharmacological properties validated by modern studies. These include lipid-lowering, anti-inflammatory, and antioxidant effects, which align with their traditional uses. Moreover, the *Rasayana* (rejuvenative) effects of certain components support overall health, making the formulation suitable for pediatric use, provided the dosage is adjusted appropriately.³¹

Despite its potential, the clinical application of *Mustadi Kwatha* in childhood obesity is limited by the lack of robust scientific evidence and standardized protocols. Most studies have focused on the individual components rather than the formulation as a whole. Additionally, there is a need for large-scale clinical trials to validate its efficacy and safety in pediatric populations. Addressing these research gaps could pave the way for integrating *Mustadi Kwatha* into contemporary obesity

management protocols.³²

Furthermore, combining Ayurvedic interventions like *Mustadi Kwatha* with modern approaches can offer a more comprehensive solution to childhood obesity. For instance, incorporating dietary modifications (*Ahara*), lifestyle adjustments (*Vihara*), and behavioral therapies can enhance the effectiveness of the treatment. This integrative approach not only addresses the symptoms of obesity but also ensures long-term sustainability by promoting healthy habits and preventing relapse.³³

Discussion According to Aim and Objectives

Exploring the Pharmacological Properties and Mechanisms of Action

The pharmacological properties of *Mustadi Kwatha* are grounded in its unique combination of herbs, each contributing to its therapeutic effects. Ingredients like *Mustaka* (*Cyperusrotundus*) and *Hareetaki* (*Terminalia chebula*) exhibit *Kapha*-reducing, lipid-lowering, and digestive-stimulating properties, which align with the Ayurvedic principles of treating *Sthaulya* (obesity). The formulation's *Rasa* (taste), *Guna* (qualities), *Virya* (potency), and *Vipaka* (post-digestive effect) collectively enhance metabolism, reduce fat accumulation, and detoxify the system. These mechanisms of action provide a scientific basis for its use in childhood obesity, particularly through its ability to mobilize fat tissue, enhance digestion, and prevent the formation of *Ama* (toxins).³⁴

Evaluating Clinical Relevance and Safety Profile in Pediatric Obesity

The safety profile of *Mustadi Kwatha* is a critical factor in its application for children. Its natural composition and absence of synthetic additives make it generally safe for pediatric use when administered in appropriate dosages. The formulation's *Rasayana* (rejuvenative) effects ensure it supports overall growth and development, making it suitable for children with obesity. However, clinical evidence specific to pediatric populations remains sparse. Existing studies largely focus on the individual ingredients rather than the formulation as a whole. This highlights the need for well-designed clinical trials to establish its efficacy and safety in managing childhood obesity comprehensively.³⁵

Identifying Research Gaps and Proposing Future Directions

Despite its traditional usage, there are significant gaps in the scientific validation of *Mustadi Kwatha*. Most research has been limited to in-vitro studies or adult populations, with minimal focus on children. Standardization of preparation, dosage, and administration guidelines is another area requiring attention. Future research should prioritize:

- Conducting large-scale, pediatric-specific clinical trials.
- Studying the pharmacokinetics and bioavailability of *Mustadi Kwatha*.
- Exploring synergistic effects of its ingredients in managing obesity-related complications.

Such studies will not only enhance its acceptance in modern healthcare systems but also provide critical insights into its application in diverse populations.³⁶

Assessing Integration into Holistic Obesity Management Strategies

The integrative potential of *Mustadi Kwatha* lies in its ability to complement modern obesity management approaches. By addressing metabolic dysfunctions and balancing *Doshas*, it can be

effectively combined with dietary modifications (*Ahara*), physical activity (*Vihara*), and behavioral therapies. Its incorporation into a holistic framework offers a sustainable, culturally sensitive approach to childhood obesity management. This integration can also bridge the gap between traditional Ayurvedic wisdom and contemporary medical practices, ensuring a more comprehensive treatment strategy.³⁷

Conclusion

Childhood obesity is a growing global concern with significant health and social implications. *Mustadi Kwatha*, a classical Ayurvedic polyherbal formulation, provides a promising natural alternative for its management. With its *Kapha-pacifying*, *Lekhana* (scraping), and metabolism-enhancing properties, *Mustadi Kwatha* addresses the root causes of obesity by balancing *Doshas*, improving digestion, and reducing excess fat tissue (*MedoDhatu*). The formulation's pharmacological actions, supported by the principles of *Rasa*, *Guna*, *Virya*, *Vipaka*, and *Karma*, demonstrate its efficacy in detoxifying the body, regulating lipid metabolism, and promoting overall health. Ingredients like *Mustaka*, *Hareetaki*, and *Amalaki* contribute to its therapeutic effects, including antioxidant, anti-inflammatory, and rejuvenative benefits. While *Mustadi Kwatha* offers significant potential in managing childhood obesity, there is a need for further scientific validation through clinical trials, particularly in pediatric populations. Its integration with modern dietary, behavioral, and lifestyle interventions can provide a holistic and sustainable approach to addressing obesity in children. By bridging traditional Ayurvedic wisdom with modern evidence-based practices, *Mustadi Kwatha* can become a valuable tool in combating the rising prevalence of childhood obesity, promoting health, and ensuring the well-being of future generations.

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