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Review Article

Therapeutic Relevance of Panchakarma in Respiratory and Psychological Complications Following COVID-19: A Review

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A B S T R A C T

Introduction: The COVID-19 pandemic has caused significant global health challenges that extend beyond acute-phase infections. Many patients who have recovered continue to suffer from persistent breathing and mental health problems known as post-COVID syndrome or long COVID. The most common respiratory manifestations were chronic cough, breathlessness, chest discomfort, fatigue, and decreased lung function, while psychological complications included anxiety, depression, insomnia, stress, and cognition.

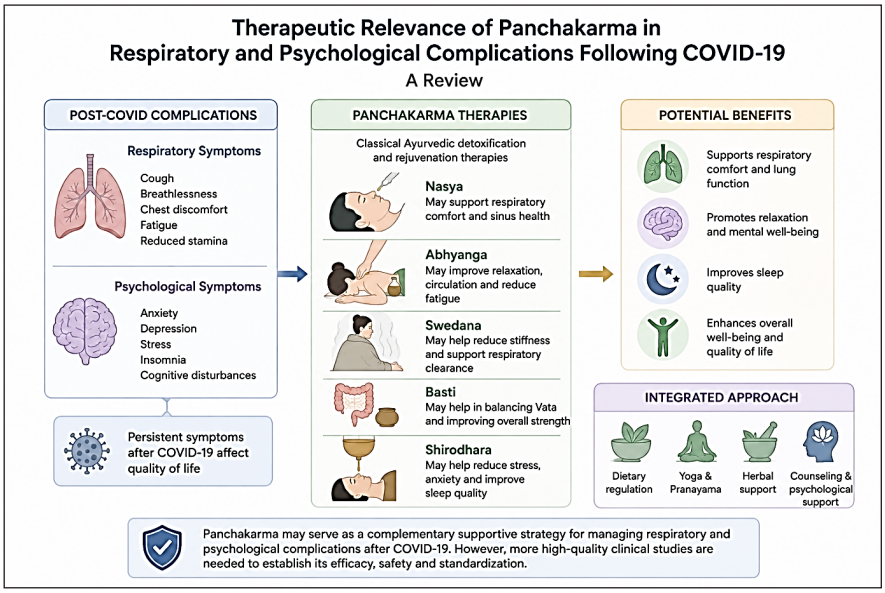
Objective: Ayurveda has gained prominence in recent years as a supportive system of medicine that helps in rehabilitation and wellness. Panchakarma, a traditional Ayurvedic detoxification and rejuvenation therapy, may help restore physiological and psychological equilibrium after sickness and illness.

Method: This review assesses the usefulness of Panchakarma in treating respiratory and mental complications of COVID-19. This study analyzes Ayurvedic principles of respiratory and mental health, correlating them with post-viral complications observed after COVID-19 infection. The Ayurvedic rehabilitation program uses standard procedures such as Nasya, Abhyanga, Swedana, Basti, Shirodhara, etc., which may help relax the mind, support breathing comfort, alleviate stress, help sleep better, and improve the quality of life. Nonetheless, existing scientific evidence is largely based on observational studies, ancient literature, and a few clinical reports. In this way, Panchakarma is a supportive adjunct and not a replacement for evidence-based medical treatment. More well-designed clinical studies are needed to establish standardized protocols for efficacy and safety in COVID-19 rehabilitation.

Keywords: Panchakarma, Long COVID, Post-COVID syndrome, Ayurveda, Respiratory rehabilitation, Psychological health

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Graphical Abstract



Highlights

Panchakarma may support respiratory and psychological recovery in post-COVID patients. Evidence remains limited and largely based on observational and traditional sources.

Therapies like Nasya, Abhyanga, and Shirodhara may improve relaxation and breathing comfort.

The review highlights the role of Ayurveda in complementary post-COVID rehabilitation.

Panchakarma should be considered supportive care alongside conventional treatment.

More clinical research is needed to validate efficacy and standardize treatment protocols.

Introduction

Due to the spread of COVID-19, healthcare systems, economies, and societies worldwide were affected. Despite significant advances in controlling acute infection, many recovered individuals continued to experience prolonged symptoms after the virus was no longer detectable.[1,2] Manifestations referred to as “long COVID” or “post-COVID syndrome” include respiratory, neurological, cardiovascular, and psychological complications that may persist for weeks and months after recovery.[3,4]

After COVID, respiratory problems occurred often in patients. Common symptoms include breathlessness, cough, chest tightness, fatigue, and reduced exercise tolerance. In some cases, lung tissue inflammation may lead to prolonged breathing discomfort and impaired quality of life. At the same time, the psychological burden of infection, isolation, uncertainty, and prolonged illness has led to increased anxiety, depression, stress, insomnia, and emotional changes.[5,6]

Post-COVID syndrome is complex and multisystemic, which has raised interest in the potential application of complementary and integrative health care for better rehabilitation. Ayurveda describes health as a state of balance between body, mind, metabolism, and immunity. Within this framework, Panchakarma is a traditional Ayurvedic therapeutic system intended to promote systemic balance and rejuvenation.[7,8]

The Ministry of AYUSH promoted dietary regulation, yoga, breathing practices, herbal support, and lifestyle management for optimal health and immunity during the COVID-19 pandemic and lockdown through an advisory. Panchakarma was mentioned in Ayurvedic rehabilitation settings as a potential supplementary option for recovery after an illness. Nevertheless, it is important to emphasize that Panchakarma is not a treatment for COVID-19 and should not replace other medications.[8,9,10]

This review critically evaluates the therapeutic relevance of Panchakarma for respiratory and psychological complications following COVID-19 in an evidence-based, balanced, and scientific manner.

Post-COVID Respiratory and Psychological Complications

COVID primarily causes respiratory illnesses; many individuals still experience lung problems months after recovering from the acute phase. The experience of chronic

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respiratory discomfort may be influenced by ongoing inflammation and airway irritation. A cough, dyspnea, heaviness of the chest, reduction in relevant stamina, and fatigue.[11,12]

Along with respiratory complications, psychological disturbances became more widespread during and after the pandemic. Fear of illness, becoming socially isolated, economic uncertainty, prolonged hospitalization, and post-viral weakness have caused increasing stress and emotional instability. Recovered individuals have often reported anxiety, depression, sleep disorders, concentration difficulties, and mood disturbances.[13,14]

Today, physicians recognize the close connection between the physical and the mental. Chronic stress and anxiety can impact sleep quality, immune function, and recovery patterns, ultimately affecting rehabilitation. As a result, post-COVID care should focus on multidisciplinary rehabilitation, including physical, psychological, nutritional, breathing, and stress management.[15,16]

According to Ayurveda, respiratory ailments result primarily from Vata and Kapha dosha imbalances, while according to Ayurveda, psychological disturbances may arise from imbalances affecting mental and neurological functions. Therapies of Panchakarma are mainly intended to restore systemic balance and promote physical and mental well-being.[17,18,19]

Concept of Panchakarma in Ayurveda

The purification procedures are Vamana (therapeutic emesis), Virechana (therapeutic purgation), Basti (medicated enema therapy), Nasya (nasal administration of medicines), and Raktamokshana (therapeutic bloodletting). The treatment involves preparatory and post-therapeutic procedures aimed at supportive cleansing and rejuvenation.[7,8,20]

Panchakarma procedures are performed on a patient according to his/her constitution, age, physical strength, and health status. Usually, weak or recovering patients are not subjected to vigorous detoxification therapies in post-viral rehabilitation. More commonly practiced are mild supportive therapies such as Abhyanga, Swedana, Nasya, Shirodhara, and gentle Basti procedures.[8,21,22]

Panchakarma treatments are believed to enhance circulatory function, alleviate respiratory discomfort, promote relaxation, encourage sleep, and enhance vitality according to traditional Ayurvedic texts. Contemporary interpretations further argue that this may help reduce stress and enhance quality of life when combined with dietary control, yoga, and breathing exercises. Nonetheless, large-scale clinical studies are required to validate these effects.[23,24]

Panchakarma in Respiratory Rehabilitation Following COVID-19

Respiratory weakness and airway discomfort are among the most common symptoms after COVID-19. Panchakarma therapies have been used in Ayurveda since times immemorial for respiratory disorders characterized by congestion, mucus accumulation, weakness, and breathlessness.[10,25,26] Nasya therapy is a treatment where medicated oils or herbal formulations are put through the nose. Ayurvedic practitioners commonly use Nasya for diseases affecting the head and respiratory passages. According to some rehab programs, Nasya may help maintain nasal moisture and comfort, improve breathing comfort, and maintain nasal hygiene. Breathing in steaming vapors and Swedana have been traditionally used to relax stiff muscles, improve circulation, and ease breathing.[27,28,29]

Abhyanga, or therapeutic oil massage, is another commonly given supportive therapy. It can relieve muscle tightness, enhance relaxation, promote circulation, and alleviate tiredness from long-term illness. Swedana is a sudation therapy that induces perspiration using controlled heat or steam.[30,31,32] Ayurveda considers Basti therapy important for Vata disturbance. In rehabilitation settings, mild medicated enemas are administered to improve overall strength, reduce dryness, and support recovery after chronic illness. Nonetheless, they are under-researched in their role in post-COVID respiratory rehabilitation.[10,26,33]

Despite numerous Ayurvedic practitioners and integrative health centers reporting positive experiences with Panchakarma-based rehabilitation programs, the scientific evidence remains inadequate. Most existing reports are case studies, narrative reviews, and observational studies rather than large randomized clinical trials. Thus, Panchakarma should be considered an adjunctive supportive application rather than the definitive treatment of post-COVID respiratory disease. Figure 1 demonstrates the combination of Panchakarma therapies that helps to manage the respiratory and psychological complications of post-COVID rehabilitation.

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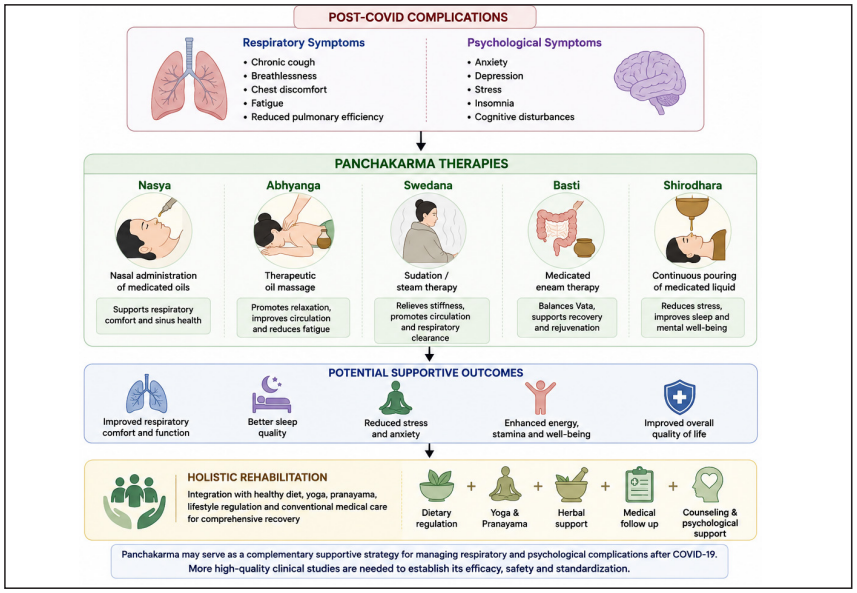


Figure 1.Integrative Role of Panchakarma in Post-COVID Rehabilitation

Panchakarma and Psychological Recovery After COVID-19

The psychological impact of COVID-19 has been significant worldwide. Individuals recovering from infection often face feelings of instability, tension, disrupted sleep, tiredness, and anxiety. According to Ayurveda, mental and physical health are closely interconnected, and several therapeutic approaches are described for promoting mental well-being.[34,35]

Shirodhara is a traditional Ayurvedic treatment that involves the continuous pouring of warm medicated liquid over the forehead. Historically, it was used for easing stress and sleep issues. Certain observational studies and clinical case reports suggest that Shirodhara may help promote relaxation and sleep, although the evidence is not robust.[36,37,38]

Abhyanga and Swedana are believed to provide psychological comfort due to their relaxing effects and muscle-relaxing properties. Meditation, yoga, breathing exercises, and dietary regulation are often added to Panchakarma therapies and may collectively improve emotional well-being and coping abilities.[18,39]

Psychological rehabilitation in the post-COVID-19 era largely includes counseling, mental health support, lifestyle regulation, physical activity, and a social support system. Panchakarma may have a supportive role in such integrative rehabilitation programs but should not stand in place of proper psychiatric or psychological treatments that are clinically indicated.[18,19] Table 1 summarizes the major complications that arise after catching a COVID infection, along with their Panchakarma therapies, potential supportive benefits, and evidence to date.

Table 1.Overview of Panchakarma in Post-COVID Respiratory and Psychological Rehabilitation

Aspect	Post-COVID Condition / Concern	Common Manifestations	Ayurvedic Interpretation	Panchakarma / Supportive Therapy	Possible Supportive Benefits	Current Evidence Status
Respiratory Health	Persistent respiratory complications	Chronic cough, breathlessness, chest discomfort, reduced pulmonary efficiency	Imbalance of Vata and Kapha doshas affecting respiratory pathways	Nasya, Swedana, steam therapy	May support respiratory comfort, airway lubrication, relaxation, and breathing ease	Limited observational and traditional evidence

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Fatigue and Weakness	Post-viral fatigue syndrome	Low stamina, body weakness, muscular discomfort, reduced physical activity	Depletion of body strength and systemic imbalance	Abhyanga, gentle Basti	May support circulation, relaxation, and recovery from weakness	Requires large-scale clinical validation
Psychological Stress	Anxiety and emotional instability	Stress, fear, anxiety, mood disturbances	Disturbance in mental equilibrium and nervous system functioning	Shirodhara, Abhyanga, meditation	May promote mental calmness and stress reduction	Mostly based on traditional use and small studies
Sleep Disturbances	Insomnia and poor sleep quality	Difficulty sleeping, disturbed sleep cycle, fatigue	Imbalance affecting mental relaxation and restorative functions	Shirodhara, relaxation therapies	May improve relaxation and sleep quality	Scientific evidence remains limited
Cognitive Disturbances	Post-COVID mental fatigue	Reduced concentration, emotional exhaustion, cognitive discomfort	Disturbance in mind–body balance	Yoga, breathing exercises, Panchakarma support	May support overall psychological well-being	Insufficient controlled studies
Rehabilitation Approach	Need for holistic recovery	Combined physical and mental health burden	Restoration of systemic balance and rejuvenation	Integrated Panchakarma approach with yoga and dietary regulation	May improve quality of life and rehabilitation outcomes	Preliminary supportive evidence
Nasya Therapy	Respiratory and sinus support	Nasal dryness, congestion, breathing discomfort	Cleansing and balancing of upper respiratory pathways	Administration of medicated oils through nasal route	May support nasal lubrication and breathing comfort	Mostly observational evidence
Abhyanga Therapy	Muscular and mental relaxation	Body pain, stiffness, stress, fatigue	Oil-based therapy for systemic balance and relaxation	Therapeutic oil massage	May improve circulation, relaxation, and comfort	Moderate traditional support; limited clinical trials
Swedana Therapy	Relaxation and circulation support	Muscular stiffness, discomfort	Sudation therapy for promoting sweating and relaxation	Controlled steam or heat therapy	May support circulation and relaxation	Limited scientific standardiza-tion
Basti Therapy	Recovery and rejuvenation support	Weakness, dryness, fatigue	Vata-balancing therapy	Mild medicated enema therapy	May support systemic recovery and vitality	Evidence insufficient for definitive conclusions

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Shirodhara Therapy	Psychological rehabilitation	Stress, anxiety, insomnia	Therapy for mental calmness and relaxation	Continuous pouring of medicated liquid over the forehead	May improve relaxation and sleep quality	Mostly small observational studies
Integrative Healthcare	Multidisciplinary rehabilita tion	Long-term post-COVID symptoms	Holistic balance of body and mind	Panchakarma with yoga, nutrition, counseling, and conventional care	Complemen-tary support for rehabilita-tion	Needs standardized clinical protocols
Scientific Limitations	Lack of strong evidence	Small sample sizes and non-standardized methods	Need for evidence-based validation	Requirement of clinical trials and objective assessment	Better understanding of efficacy and safety	High-quality randomized studies needed
Clinical Recommenda tion	Safe therapeutic positioning	Need for responsible healthcare guidance	Complementary rather than replace ment therapy	Integrative supportive care under supervision	May assist rehabilitation alongside medical treatment	Should not replace evidence-based medicine

Scientific Evidence and Current Limitations

The COVID-19 pandemic greatly amplified people's interest in Ayurveda and integrative healthcare. Numerous reviews, observational research, and expert views deliberated on the potential support that Ayurvedic therapies could offer immunity, rehabilitation, stress management, and quality of life [40,41,42]. Nonetheless, there are significant limitations of the existing evidence base for Panchakarma and post-COVID rehabilitation. Many studies have small sample sizes, do not use standardized protocols, and are mostly observational. Moreover, the differences in Panchakarma procedures used by institutions and practitioners make comparison difficult.

Many studies suffer from the limitation of not measuring objective outcomes. Future studies should have standardized respiratory assessments, psychological evaluation scales, sleep quality measurements, and long-term follow-up. High-quality randomized controlled trials are needed to assess the efficacy, safety, and reproducibility of Panchakarma interventions for post-COVID rehabilitation.

One should not make exaggerated or untenable claims about established therapies; use discretion. As of now, it is a must to consider Panchakarma as an evidence-informed complementary wellness system that may support rehabilitation and symptom management alongside conventional healthcare.

Conclusion

Panchakarma, an essential healing element of Ayurveda, has been proposed as a potentially useful adjunctive therapy. Classic therapies like Nasya, Abhyanga, Swedana, Basti, and Shirodhara may support respiratory comfort, reduce stress, improve sleep, promote relaxation, and enhance quality of life during post-COVID recovery. The available literature postulates that, when combined with sound nutritional management, breath regulation, yoga, psychological aid and standard medicine, Panchakarma may help in holistic rehabilitation. Scientific evidence, however, is limited at present and inadequate to prove Panchakarma as an effective remedy for post-COVID respiratory or psychological complications. Thus, Panchakarma should be seen as a supportive, complementary approach rather than a substitute for evidence-based medical treatment. Future studies require expert collaboration between clinical and interdisciplinary research methods to validate previously claimed characteristics, protocols, and the use of Panchakarma in the integrative management of post-COVID-19.

Key Takeaways

- Post-COVID syndrome commonly causes persistent respiratory and psychological complications such as breathlessness, fatigue, anxiety, stress, and insomnia.
- Panchakarma therapies, including Nasya, Abhyanga, Swedana, Basti, and Shirodhara, may support holistic

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recovery and improve quality of life.

- Ayurvedic rehabilitation emphasizes balancing physical, mental, and respiratory health through integrative approaches.
- Panchakarma may help with relaxation, stress reduction, improved sleep, and breathing comfort during post-COVID rehabilitation.
- Current scientific evidence is limited and mainly based on observational studies, traditional literature, and small clinical reports.
- Panchakarma should be considered a complementary supportive therapy alongside conventional evidence-based medical treatment.
- More standardized clinical trials and long-term studies are required to validate efficacy, safety, and treatment protocols.

Future Scope

Interest in Ayurveda and Panchakarma for post-COVID rehabilitation continues to increase due to the way COVID-19 has generated interest in integrative healthcare. Traditional therapies like Nasya, Abhyanga, Swedana, Basti, and Shirodhara may promote respiratory ease, relieve stress, relax, improve sleep, and enhance overall well-being. Nevertheless, the currently available scientific evidence is limited and largely based on observational studies and classical literature. Future studies must focus on standardized protocols for panchakarma, randomized controlled trials, more objective clinical outcome measures, and long-term follow-up studies. Integrative health strategies that include Ayurvedic and yoga practices, nutrition, counseling, and conventional medical treatment may be viable rehabilitation strategies for post-COVID syndrome. Panchakarma should be treated as a supportive complementary treatment that is given under professional supervision, not an alternative to a medical treatment with evidence. Future multicenter randomized controlled trials with standardized Panchakarma protocols and validated outcome measures are essential to establish efficacy, safety, and reproducibility.

Declaration of Generative AI and AI-assisted technologies in the writing process

The authors declare that AI tools in Scientific writing have been made for grammar check and paraphrasing of text. The authors further declare that AI has not been used for data or writing generation.

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