

 International Journal of AYUSH	IJAYUSH International Journal of AYUSH AYURVEDA • YOGA • UNANI • SIDDHA • HOMEOPATHY https://internationaljournal.org.in/journal/index.php/ijayush/	ISSN: 2349-7025 OPEN ACCESS PEER REVIEWED MONTHLY
Review Article	Volume 15 Issue 09	September 2026

DOI: <https://doi.org/10.5281/zenodo.22897631>

GUT–BRAIN AXIS: AN AYURVEDIC PERSPECTIVE ON THE INTERRELATIONSHIP OF AGNI, GRAHANI, VATA AND MANAS

*Dr. Priyanka Gupta¹, Dr. Jitendra Sharma², Dr. Mandeep Varshney³,
Dr. Saurabh Kumar⁴

¹Research Scholar, Department of Rachana Sharir, Shri Dhanvantri Medical College and Research Centre, Mathura (U.P) India

²M.D. (Ayu.) Rachana Sharir, Department of Rachana Sharir, Shri Dhanvantri Medical College and Research Centre, Mathura (U.P) India

³M.S Salya Tantra Associate Professor, Department of Salya Tantra, Assistant Professor Gangasheel Ayurvedic Medical College and Hospital Bareilly, (U.P) India

⁴M.S. (Ayu.) Salya tantra, Professor, Department of Salya Tantra, Shri Dhanvantri Medical College and Research centre, Mathura (U.P) India

***Corresponding Author: Dr. Priyanka Gupta**

Mail Id: dr.priyanka12feb@gmail.com

Abstract

Background: The concept of a bidirectional communication network between the gastrointestinal tract and the central nervous system the 'Gut–Brain Axis' has emerged as a pivotal paradigm in contemporary biomedical research. Remarkably, classical Ayurvedic texts articulate an analogous framework centuries before modern neurogastroenterology, primarily through the concepts of Agni (digestive and metabolic fire), Grahani (the seat of digestive function, correlating with the small intestine and enteric nervous system), Vata Dosha (the governing force of nervous transmission), and Manas (mind-body intelligence).

Objective: This review aims to critically examine and correlate the Ayurvedic understanding of the gut–mind interrelationship with contemporary findings in neurogastroenterology, microbiome science, and psychoneuroimmunology.

Methods: A comprehensive review of Ayurvedic classical texts including Charaka Samhita, Sushruta Samhita, and Ashtanga Hridayam was conducted alongside current peer-reviewed literature in neurogastroenterology and microbiome research.

Results & Conclusion: Striking conceptual parallels exist between Grahani and the enteric nervous system, between Agni and digestive enzyme-microbiome dynamics, and between Sadhaka Pitta–Prana Vata interactions and the vagal neuroendocrine pathways. These correlations validate Ayurveda's holistic model and open integrative therapeutic avenues for conditions such as Grahani Dosha (irritable bowel syndrome), Unmada (psychiatric disorders), and psychosomatic illness.

Keywords: Gut–Brain Axis, Agni, Grahani, Vata Dosha, Manas, Ayurveda, Enteric Nervous System, Microbiome, Psychoneuroimmunology, Neurogastroenterology

1. Introduction

The relationship between the gut and the brain represents one of the most compelling frontiers in contemporary biomedical science. The concept of the Gut–Brain Axis (GBA) describes a complex, bidirectional communication network linking the enteric nervous system (ENS) of the gastrointestinal tract with the central nervous system (CNS), mediated through neural, hormonal, immunological, and microbial channels. Disruption of this axis is now implicated in a spectrum of disorders ranging from irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD) to depression, anxiety, autism spectrum disorders, and neurodegenerative conditions.

Strikingly, the Ayurvedic medical tradition one of the world's oldest codified systems of medicine had, millennia ago, formulated a sophisticated and conceptually parallel framework. The classical texts of Charaka Samhita (ca. 600 BCE), Sushruta Samhita, and Ashtanga Hridayam describe an intimate, dynamic interrelationship among Agni (the principle of metabolic and digestive transformation), Grahani (the functional seat of digestion, anatomically corresponding to the small intestine), Vata Dosha (the governing biological force of all neural and movement-based activity), and Manas (the mind, encompassing cognitive, emotional, and psycho-spiritual dimensions of being).

This paper undertakes a systematic conceptual review to examine these Ayurvedic constructs in light of modern neurogastroenterological findings. By establishing robust conceptual bridges, this work

aims to demonstrate that Ayurveda not only anticipated the gut–brain axis but offers a uniquely holistic and clinically actionable model for understanding gut–mind health.

2. Ayurvedic Conceptual Framework: An Overview

2.1 Agni The Principle of Metabolic Fire

Agni, derived from the Sanskrit root 'ag' (to move) and etymologically linked to the sacred fire, is one of the most foundational and far-reaching concepts in Ayurvedic

physiology. Charaka Samhita (Chikitsa Sthana 15/3–4) states: 'Agni eva kayah' Agni itself is the body. This places digestive and metabolic function at the very center of life and health.

Ayurveda enumerates thirteen varieties of Agni, the most important being Jatharagni the primary digestive fire residing in the Grahani (duodenum and small intestine). Jatharagni is responsible not only for the digestion of food (Ahara Paka) but also for the nourishment of all seven Dhatus (body tissues) and, critically, for the production of Ojas the quintessence of vitality, immunity, and mental clarity. When Jatharagni is balanced (Sama Agni), the organism thrives. Its impairment (Mandagni, Vishmagni, Tikshnagni) invariably leads to systemic pathology, including emotional and cognitive disturbances.

Modern science echoes this understanding through the recognition that intestinal epithelial cells, digestive enzymes, and the gut microbiome collectively govern not only nutrient absorption but also the production of neurotransmitter precursors (tryptophan → serotonin; tyrosine → dopamine), short-chain fatty acids (SCFAs), and neuroactive metabolites that directly influence brain function.

2.2 Grahani The Seat of Digestion and Its Anatomical-Functional Correlates

The term Grahani is derived from 'graha' to grasp or hold. Charaka Samhita (Chikitsa Sthana 15/56) describes Grahani as the organ that 'holds the food until it is properly digested and releases it downward only when digestion is complete.' It is anatomically located between the stomach (Amashaya) and the large intestine (Pakwashaya), corresponding most closely to the duodenum and small intestine.

What makes Grahani particularly significant in the context of the gut–brain axis is its explicit association with Agni. Charaka states: 'Agninadhishtitham grahani' Grahani is the seat (Adhishtithana) of Agni. Thus, any impairment in Grahani function directly diminishes Agni, and vice versa. This bidirectionality is neurologically significant.

In contemporary medicine, the small intestine is home to the largest concentration of enteric neurons (~500 million neurons in humans), constituting the Enteric Nervous System rightly called the 'second brain.' The ENS governs intestinal motility, secretion, and absorption autonomously, while

maintaining extensive bidirectional communication with the CNS via the vagus nerve, sympathetic splanchnic nerves, and the hypothalamic–pituitary–adrenal (HPA) axis. The Grahani concept maps remarkably well onto this neurogastroenterological construct.

2.3 Vata Dosha — The Neuro-Regulatory Force

Among the three Doshas (Vata, Pitta, Kapha), Vata holds primacy as the governing force of all biological movement neural impulses, peristalsis, sensory perception, cognition, and respiration. It is composed of Akasha (space) and Vayu (air) Mahabhutas

and is characterized by qualities of lightness, dryness, mobility, subtlety, and roughness.

Five subtypes of Vata are described: Prana, Udana, Samana, Apana, and Vyana Vata. Of these, Prana Vata (located in the brain, heart, and sense organs) and Samana Vata (located in the gastrointestinal tract, governing digestive movements) are most directly relevant to the gut–brain axis. Prana Vata controls sensory processing, consciousness, and mental function. Samana Vata regulates the digestive movements peristalsis, segmentation, and enzymatic secretion — by supporting Agni.

The physiological activity of Samana Vata in the gut closely parallels the enteric neural regulation of gastrointestinal motility and secretion. The efferent parasympathetic signals of the vagus nerve stimulating intestinal peristalsis, and afferent signals carrying information about luminal content, microbiome metabolites, and gut hormones back to the brainstem all fall within the Ayurvedic domain of Samana–Prana Vata interaction.

2.4 Manas — The Psycho-Cognitive Dimension

Manas (mind) in Ayurveda is not merely a psychological construct but a material, subtle entity (Sukshma Dravya) that mediates between the Atman (self/consciousness) and the physical body. It is characterized by two fundamental qualities: Ekatva (singularity it can attend to only one sense at a time) and Anutva (atomicity it is infinitesimally small and swift). Charaka Samhita (Sharira Sthana 1/19) places Manas as the Adhipati (ruler) of all sense organs.

Crucially, Ayurveda recognizes that Manas operates through Doshas specifically Tamas (inertia), Rajas (activity), and Sattva (clarity). Mental health depends on the equilibrium of these Manasika Gunas. Emotional stress, grief (Shoka), anxiety (Chinta), and fear (Bhaya) are explicitly described as causative factors for Grahani disorders and Agni impairment directly prefiguring modern psychosomatic medicine.

The Ayurvedic construct of Sadhaka Pitta (a subtype of Pitta located in the heart that processes emotions and facilitates intelligence) and its interaction with Prana Vata and Tarpaka Kapha (nourishing the brain) offers a remarkably nuanced model of neurochemical balance one that maps conceptually onto serotonin dopamine–norepinephrine dynamics.

3. The Gut–Brain Axis: Modern Neurogastroenterological Understanding

3.1 Anatomical and Physiological Pathways

The Gut–Brain Axis operates through several overlapping and interdependent pathways:

- **Neural Pathway:** The vagus nerve (cranial nerve X) constitutes the principal anatomical highway of gut–brain communication. Approximately 80–90% of vagal fibers are afferent, transmitting sensory information from the gut

(enteroendocrine cells, mechanoreceptors, chemoreceptors) to the nucleus tractus solitarius in the brainstem and thence to higher cortical and limbic structures.

- **Endocrine Pathway:** Enteroendocrine cells lining the gut epithelium constitute the largest endocrine organ in the body, secreting over 20 hormones including serotonin (5-HT), cholecystokinin (CCK), glucagon-like peptide-1 (GLP-1), peptide YY (PYY), and ghrelin. These hormones modulate appetite, mood, cognition, and stress responses.
- **Immune Pathway:** The gut houses 70–80% of the body's immune cells. Gut microbiota-immune interactions regulate cytokine production (including IL-6, TNF- α , IL-10), which influences neuroinflammation and blood–brain barrier permeability.
- **Microbiota–Gut–Brain Pathway:** The gut microbiome comprising approximately 3.8×10^{13} bacteria, archaea, fungi, and viruses produces neurotransmitters (GABA, serotonin precursors, dopamine precursors), SCFAs (butyrate, propionate, acetate), and enteric gases that directly influence ENS and CNS function.

3.2 The Enteric Nervous System as the 'Second Brain'

The ENS is an autonomous neural network embedded in the gut wall, comprising the myenteric (Auerbach's) plexus and submucosal (Meissner's) plexus. It contains approximately 500 million neurons of 20 neurochemically distinct subtypes more neurons than the entire spinal cord. The ENS is capable of mediating reflex circuits independently of the CNS, though it maintains extensive bidirectional communication via the vagus nerve and sympathetic innervation.

Critically, approximately 95% of the body's total serotonin is produced in the gut by enterochromaffin cells, where it regulates intestinal motility, secretion, and sensitization of afferent neural pathways. Gut-derived serotonin also enters systemic circulation, influencing platelet aggregation, bone density, and via vagal afferents mood, sleep, and cognition.

3.3 Microbiome–Brain Communication

The gut microbiota communicates with the brain through multiple mechanisms: direct neural signaling via the ENS and vagus nerve; production of short-chain fatty acids (particularly butyrate, a key epigenetic regulator and blood–brain barrier trophic factor); modulation of the HPA axis and cortisol secretion; production of GABA, serotonin, and norepinephrine precursors; and regulation of tryptophan metabolism through the kynurenine pathway, which governs neuroinflammation.

Germ-free animal studies have demonstrated that absence of gut microbiota results in exaggerated HPA stress responses, reduced BDNF expression, and anxiety-like behavior all reversible upon microbial colonization with specific strains, underscoring

the causal role of microbiota in brain function and mental health.

4. Conceptual Parallels: Bridging Ayurveda and Modern Science

4.1 Agni ↔ Digestive Enzyme–Microbiome Dynamics

The concept of Agni as the transformative metabolic force operating in the gut finds its most direct modern correlate in the combined activity of digestive enzymes, gastric acid secretion, bile salts, and gut microbiome-mediated fermentation and biotransformation. Jatharagni's role in converting Ahara (food) into Ahara Rasa (nutrient essence) parallels the biochemical process of macronutrient digestion and absorption, while Dhatvagni (tissue-level Agni) corresponds to intracellular metabolic processes.

The Ayurvedic description of Ama undigested, toxic metabolic residue produced when Agni is impaired is strikingly consistent with the concept of 'leaky gut' (intestinal hyperpermeability), dysbiosis-derived lipopolysaccharides (LPS), and uremic toxins that trigger systemic inflammation and neuroinflammation. The clinical correlation between Ama accumulation and both GI disorders and mental health disturbances in Ayurvedic texts reflects a profound intuitive grasp of gut-derived endotoxemia and its neuropsychiatric consequences.

4.2 Grahani ↔ Enteric Nervous System

The Ayurvedic Grahani with its dual identity as a physical organ (small intestine) and a functional entity (the seat of Agni and the regulator of digestive transit) maps most precisely onto the enteric nervous system of the small intestine. Just as the ENS regulates peristaltic reflexes, mucosal secretion, and nutrient sensing, Grahani in Ayurveda controls the rate of food transit (Grahana), digestive transformation, and the upward or downward movement of food.

The Ayurvedic condition of Grahani Dosha characterized by alternating constipation and diarrhea, bloating, malabsorption, fatigue, and emotional disturbances is clinically and pathophysiologically consistent with irritable bowel syndrome (IBS), a condition now firmly established as a disorder of gut–brain interaction (DGBI). The central role of visceral hypersensitivity, ENS dysfunction, and microbiome dysbiosis in IBS directly parallels the Ayurvedic mechanism of vitiated Samana Vata impairing Grahani and Agni.

4.3 Vata ↔ Neural Signaling and Autonomic Function

Vata Dosha's defining qualities movement (Chala), lightness (Laghu), subtlety (Sukshma), dryness (Ruksha), and pervasiveness correspond functionally to the properties of neural transmission: rapid, subtle, electrochemical impulse conduction across the nervous system. The relationship between Prana Vata and Samana Vata operationalizes the gut–brain axis at a functional level in Ayurvedic physiology.

Prana Vata, governing the brain, heart, and sensory organs, corresponds to the

central autonomic network (hypothalamus, amygdala, anterior cingulate cortex, insula) that processes visceral afferent signals and modulates gut function via efferent vagal and sympathetic pathways. Samana Vata, governing the peristaltic and secretory activity of the GI tract, corresponds to the efferent ENS and parasympathetic innervation of the gut. Their intimate co-regulation reflects the bidirectional nature of the gut–brain axis.

The well-established clinical observation that psychological stress (Manasika Hetu) causes Vata vitiation leading to GI symptoms bloating, irregular bowel habits, abdominal pain is directly validated by modern understanding of stress-induced activation of the HPA axis and sympathetic nervous system, which alter gut motility, increase intestinal permeability, and disrupt microbiome composition.

4.4 Manas ↔ Psychoneuroimmunological Integration

Manas in Ayurveda represents the integrative center of psycho-cognitive and emotional experience, and its intimate bidirectional influence on Agni and Grahani function is explicitly documented. Charaka Samhita states that 'Chinta, Shoka, Bhaya, Krodha' (anxiety, grief, fear, anger) are among the primary causes of Grahani Dosha a direct articulation of the gut–brain axis at the clinical level.

This is mirrored in the modern understanding of the stress-gut axis: chronic psychological stress activates corticotropin-releasing factor (CRF), elevates cortisol and adrenocorticotrophic hormone (ACTH), increases mast cell degranulation in the gut mucosa (releasing histamine, serotonin, proteases), alters ENS excitability, and shifts microbiome composition toward dysbiotic states associated with increased intestinal permeability and neuroinflammation.

The Ayurvedic therapeutic emphasis on Sattva Vridhi (cultivation of mental clarity and equanimity) as a means of restoring Agni and Grahani function anticipates the modern therapeutic applications of mindfulness-based stress reduction (MBSR), cognitive–behavioral therapy (CBT), and biofeedback in IBS and functional GI disorders. Randomized controlled trials have demonstrated significant improvement in both GI symptoms and mental health metrics with these interventions.

5. Clinical Implications and Therapeutic Perspectives

5.1 Grahani Dosha and Irritable Bowel Syndrome

The Ayurvedic management of Grahani Dosha employs a multi-modal approach that directly addresses all components of the gut–brain axis. Deepana-Pachana (appetizer-digestive) herbs such as Chitrakadi Vati, Trikatu (Shunti, Maricha, Pippali), and Hingvasthaka Churna restore Agni and improve microbiome function. Samshamana (palliative) therapies using formulations like Kutajarishta (Holarrhena antidysenterica) and Bilwadi Churna address intestinal hypersecretion and dysbiosis. Medhya Rasayana (neuroprotective adaptogens) including Brahmi (Bacopa monnieri) and Shankhapushpi

enhance gut–brain axis resilience.

Panchakarma therapies particularly Basti (medicated enema) are uniquely positioned as GBA therapeutics: Basti directly delivers medicinal substances to the colon, modulating the microbiome, reducing LPS-mediated endotoxemia, and via enteroendocrine and neural pathways, exerting antidepressant and anxiolytic effects. This mechanism aligns with emerging fecal microbiota transplant (FMT) research demonstrating bidirectional mental health effects.

5.2 Psychosomatic Disorders and Manasika Chikitsa

Ayurvedic management of psychosomatic disorders explicitly addresses the Manas–Agni–Grahani triad. Sattvavajaya Chikitsa (psychotherapy, cognitive restructuring) is prescribed alongside Achara Rasayana (ethical and lifestyle-based neuroplasticity practices) and Medhya Rasayana. Ashwagandha (*Withania somnifera*) an adaptogen with extensive modern validation demonstrates effects on cortisol, BDNF, gut barrier integrity, and microbiome composition, acting precisely at the gut–brain interface.

The Dinacharya (daily routine) and Ritucharya (seasonal regimen) prescriptions of Ayurveda governing sleep timing, meal timing, exercise, and psychological practices anticipate modern chronobiological understanding of gut microbiome circadian rhythms and their critical influence on the gut–brain axis, metabolic health, and mental well-being.

6. Discussion

The parallels drawn in this review are not merely metaphorical or analogical they represent deep structural concordances between Ayurvedic and modern biomedical models of gut–brain health. The Ayurvedic framework is distinguished by its holistic integration: rather than studying the gut and brain as separate organ systems connected by a discrete axis, Ayurveda conceptualizes the organism as a unified field in which Agni (metabolic intelligence), Grahani (the seat of transformation), Vata (the force of neural–somatic communication), and Manas (the cognitive–emotional integrator) function as inseparable co-regulators of health.

This holism offers a significant conceptual advantage. Modern gut–brain research, while impressive in its mechanistic granularity, often lacks an overarching integrative framework for clinical translation. Ayurveda provides exactly such a framework one that is individualized (based on Prakriti, or constitutional type), dynamic (responsive to seasonal, dietary, and psychological changes), and multi-dimensional (encompassing physical, psychological, spiritual, and ecological dimensions of health).

Limitations of this review include its primarily conceptual nature and the relative paucity of rigorously designed clinical trials testing Ayurvedic interventions specifically through a gut–brain axis mechanism. Future research should focus on randomized

controlled trials of Ayurvedic interventions with concurrent assessment of microbiome composition, ENS biomarkers, HPA axis function, and validated psychological outcome measures. Translational studies examining the effects of classical Ayurvedic formulations on gut microbiome, intestinal permeability, ENS neurotransmitter profiles, and neuroinflammatory markers represent a particularly promising research frontier.

7. Conclusion

The Gut–Brain Axis, far from being an exclusively modern discovery, finds its conceptual antecedent in the Ayurvedic understanding of the dynamic interrelationship of Agni, Grahani, Vata, and Manas. This review demonstrates that Ayurveda articulated a sophisticated, clinically operationalizable model of gut–brain health that encompasses the neural, endocrine, immune, and microbiome dimensions of the GBA millennia before these were characterized by modern science.

The integration of Ayurvedic insights with contemporary neurogastroenterology offers a synergistic opportunity: modern science provides the mechanistic precision to validate and refine Ayurvedic concepts, while Ayurveda provides the integrative framework, personalized therapeutics, and preventive wisdom that modern medicine is still developing. This bidirectional enrichment is precisely the spirit in which evidence-based integrative medicine must advance.

Conditions such as IBS (Grahani Dosha), functional dyspepsia (Agni Vikara), anxiety and depression with gut comorbidities, and psychosomatic illness represent ideal targets for integrative clinical research at this intersection. The ancient Ayurvedic aphorism 'Sarvaroganam Mandagni Mulam' (the root of all disease is impaired Agni) reads, in the light of modern gut–brain axis science, not as metaphor but as a remarkably prescient clinical hypothesis awaiting full empirical validation.

References

1. Agnivesa. Charaka Samhita (with Ayurveda Deepika commentary by Chakrapanidatta). Chikitsa Sthana 15. Varanasi: Chaukhamba Sanskrit Pratishthan; 2011.
2. Sushruta. Sushruta Samhita (with Nibandha Sangraha commentary by Dalhanacharya). Uttara Tantra. Varanasi: Chaukhamba Orientalia; 2012.
3. Vagbhata. Ashtanga Hridayam (with Sarvangasundara commentary by Arunadatta). Nidana Sthana 8. Varanasi: Krishnadas Academy; 2000.
4. Cryan JF, O'Riordan KJ, Cowan CSM, et al. The microbiota-gut-brain axis. *Physiol Rev*. 2019;99(4):1877-2013.
5. Mayer EA, Tillisch K, Gupta A. Gut/brain axis and the microbiota. *J Clin Invest*. 2015;125(3):926-938.
6. Furness JB. The Enteric Nervous System. Oxford: Blackwell Publishing; 2006.

7. Carabotti M, Scirocco A, Maselli MA, Severi C. The gut-brain axis: interactions between enteric microbiota, central and enteric nervous systems. *Ann Gastroenterol*. 2015;28(2):203-209.
8. Dinan TG, Cryan JF. Gut instincts: microbiota as a key regulator of brain development, ageing and neurodegeneration. *J Physiol*. 2017;595(2):489-503.
9. Sharma PV. Dravyaguna Vijnana. Vol. 2. Varanasi: Chaukhamba Bharati Academy; 2005.
10. Lad V. Textbook of Ayurveda: Fundamental Principles. Vol. 1. Albuquerque: The Ayurvedic Press; 2002.
11. Bhatta Narayana. Madanapala Nighantu. 14th century. Varanasi: Chaukhamba Amarabharati Prakashan; 1982.
12. Clapp M, Aurora N, Herrera L, Bhatia M, Wilen E, Wakefield S. Gut microbiota's effect on mental health: the gut-brain connection. *Clin Pract*. 2017;7(4):987.
13. Fond G, Loundou A, Hamdani N, et al. Anxiety and depression comorbidities in irritable bowel syndrome (IBS): a systematic review and meta-analysis. *Eur Arch Psychiatry Clin Neurosci*. 2014;264(8):651-660.
14. Singh RH. The holistic principles of Ayurvedic medicine. New Delhi: Chaukhamba Sanskrit Pratishthan; 1998.
15. Tillisch K, Labus J, Kilpatrick L, et al. Consumption of fermented milk product with probiotic modulates brain activity. *Gastroenterology*. 2013;144(7):1394-1401.
16. Foster JA, McVey Neufeld KA. Gut-brain axis: how the microbiome influences anxiety and depression. *Trends Neurosci*. 2013;36(5):305-312.
17. Srikantha Murthy KR, translator. Charaka Samhita. 4 vols. Varanasi: Chaukhamba Orientalia; 2007.
18. Panda AK, Swain KC. Traditional uses and medicinal potential of *Cordyceps sinensis* of Sikkim. *J Ayurveda Integr Med*. 2011;2(1):9-13.
19. Drossman DA. Functional gastrointestinal disorders: history, pathophysiology, clinical features, and Rome IV. *Gastroenterology*. 2016;150(6):1262-1279.
20. Rege NN, Thatte UM, Dahanukar SA. Adaptogenic properties of six rasayana herbs used in Ayurvedic medicine. *Phytother Res*. 1999;13(4):275-291.

Declaration of Interests

The authors declare no conflict of interest. This research received no external funding.

Ethical Approval

This is a review article. No human or animal subjects were involved. Ethical approval was not required.

How to cite this article:

Dr. Priyanka Gupta, GUT–Brain Axis: An ayurvedic perspective on the interrelationship of agni, grahani, vata and manas. *International Journal of AYUSH*. 2026;15(09):39-48.