

Review Article

Volume 15 Issue 05

May 2026

CONCEPTUAL STUDY OF *GRAHANI ROGA* W.S.R. TO *IRRITABLE BOWEL SYNDROME*: AN AYURVEDIC PERSPECTIVE

Dr. Ajeet Kumar Maurya¹, Dr. Anand Pratap Singh², Dr. Nitin Goel³

¹PG Scholar, Department of Kayachikitsa, Kunwar Shekhar Vijendra Ayurvedic Medical College And Research Center Gangoh Saharanpur Uttar Pradesh 247341

²Guide, Professor & HOD, Department of Kayachikitsa, Kunwar Shekhar Vijendra Ayurvedic Medical College And Research Center Gangoh Saharanpur Uttar Pradesh 247341

³Co Guide- Assistant Professor, Department of Kayachikitsa, Kunwar Shekhar Vijendra Ayurvedic Medical College And Research Center Gangoh Saharanpur Uttar Pradesh 247341

Corresponding Author - Dr. Ajeet Kumar Maurya, PG Scholar, Department of Kayachikitsa, Kunwar Shekhar Vijendra Ayurvedic Medical College And Research Center Gangoh Saharanpur Uttar Pradesh 247341

Email id - ajitmaurya4121@gmail.com

ABSTRACT

Background: *Grahani Roga* is one of the important gastrointestinal disorders described in Ayurveda, primarily caused by impairment of *Agni*. The word *Grahani* denotes the organ responsible for digestion and retention of food until proper digestion occurs. Disturbance in *Jatharagni* leads to improper digestion, formation of *Ama*, and manifestation of symptoms such as irregular bowel habits, abdominal pain, bloating, mucus in stool, and altered appetite. In modern medicine, Irritable Bowel Syndrome (IBS) is a functional gastrointestinal disorder characterized by chronic abdominal discomfort associated with altered bowel habits without any identifiable structural pathology. The clinical presentation of IBS shows close resemblance with *Grahani Roga* described in Ayurvedic classics. **Aim:** To conceptually study *Grahani Roga* with special reference to Irritable Bowel Syndrome from an Ayurvedic perspective. **Objectives:** To study the concept of *Grahani Roga* in classical Ayurvedic texts. To analyze the role of *Agni* and *Ama* in the pathogenesis of *Grahani Roga*. To correlate the

33

clinical features of *Grahani Roga* with Irritable Bowel Syndrome. To evaluate Ayurvedic principles for the management of IBS. **Materials and Methods:** This study is based on a detailed literary review of classical Ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, and contemporary Ayurvedic literature. Modern medical literature, journals, and research articles related to Irritable Bowel Syndrome were also reviewed for conceptual correlation and comparative analysis. **Results:** The review revealed that impaired *Jatharagni* plays a central role in the development of *Grahani Roga*. Vitiating of *Dosha*, especially *Vata* and *Pitta*, along with formation of *Ama*, leads to altered digestive and absorptive functions. The signs and symptoms of IBS such as abdominal pain, irregular bowel movements, constipation, diarrhea, bloating, and incomplete evacuation closely resemble manifestations of *Grahani Roga*. Ayurvedic management focusing on *Deepana*, *Pachana*, *Agni Dipti*, *Ama Pachana*, dietary regulation, and lifestyle modification provides a holistic approach in managing the condition. **Conclusion:** *Grahani Roga* can be clinically correlated with Irritable Bowel Syndrome based on similarities in etiology, symptomatology, and pathogenesis. Ayurveda emphasizes correction of *Agni* and elimination of *Ama* as the primary therapeutic principles. A proper understanding of Ayurvedic concepts may provide an effective and holistic approach for the management of IBS and improvement of quality of life.

Keywords: *Grahani Roga*, Irritable Bowel Syndrome, *Agni*, *Ama*, *Deepana-Pachana*, Ayurveda

INTRODUCTION

Ayurveda considers *Agni* as the fundamental factor responsible for maintenance of health, digestion, metabolism, strength, complexion, and longevity. Proper functioning of *Agni* ensures normal digestion and nourishment of body tissues, whereas impairment of *Agni* leads to formation of *Ama*, which becomes the root cause of many diseases.¹ Among various gastrointestinal disorders described in Ayurveda, *Grahani Roga* is considered one of the most important diseases associated with dysfunction of *Agni*. The term *Grahani* refers to the organ situated above the *Nabhi*, responsible for holding undigested food and releasing it after proper digestion. When *Jatharagni* becomes weak due to improper dietary habits, stress, incompatible food intake, irregular lifestyle, or chronic illness, the functioning of *Grahani* gets disturbed, resulting in symptoms like irregular bowel habits, abdominal pain, indigestion, bloating, fatigue, and mucus mixed stool.²

In the present era, rapid urbanization, sedentary lifestyle, mental stress, irregular meal timings, junk food consumption, and disturbed sleep patterns have significantly increased gastrointestinal disorders worldwide. Irritable Bowel Syndrome (IBS) is one of the most common functional gastrointestinal disorders affecting a large population. It is characterized by chronic abdominal discomfort associated with altered bowel habits such as diarrhea, constipation, or alternating bowel patterns without any structural abnormality.³ IBS adversely affects quality of life and often leads to psychological distress, reduced work productivity, and social discomfort. Modern management mainly focuses on symptomatic relief through dietary modifications, antispasmodics, laxatives, and psychological support, but recurrence and chronicity remain major concerns.⁴

The clinical manifestations and etiopathogenesis of IBS show close resemblance with *Grahani Roga* described in Ayurvedic classics. Ayurveda explains that vitiation of *Dosha*, especially *Vata Dosha*, along with impaired *Agni* and formation of *Ama*, plays a central role in the development of *Grahani Roga*. Classical Ayurvedic management emphasizes restoration of *Agni* through *Deepana*, *Pachana*, *Langhana*, proper dietary regulation, and lifestyle modification.⁵ Therefore, understanding *Grahani Roga* through Ayurvedic principles may provide a holistic and effective approach for the prevention and management of Irritable Bowel Syndrome.

AIM AND OBJECTIVES

Aim:

To conceptually study *Grahani Roga* with special reference to Irritable Bowel Syndrome from an Ayurvedic perspective.

Objectives:

- To study the concept of *Grahani Roga* in classical Ayurvedic texts.
- To analyze the role of *Agni* and *Ama* in the pathogenesis of *Grahani Roga*.
- To correlate the clinical features of *Grahani Roga* with Irritable Bowel Syndrome.
- To evaluate Ayurvedic principles for the management of IBS.

MATERIALS AND METHODS

The present study is a conceptual and literary review based on detailed exploration of classical Ayurvedic texts and contemporary medical literature. Relevant references

regarding *Grahani Roga*, *Agni*, *Ama*, *Dosha*, *Samprapti*, and their management were collected from classical Ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, and other authoritative commentaries. Modern medical textbooks, published research articles, review papers, and online scientific databases related to Irritable Bowel Syndrome were also reviewed to establish conceptual correlation with *Grahani Roga*. The collected information was systematically analyzed and interpreted to understand the etiopathogenesis, clinical features, and Ayurvedic perspective of Irritable Bowel Syndrome.

CONCEPT STUDY

GRAHANI ROGA

According to Ayurveda, *Grahani* is an important organ of the digestive system situated above the *Nabhi* and considered the seat of *Jatharagni*. The word *Grahani* is derived from the root "Graha," which means to hold or retain. Its main function is to retain ingested food until complete digestion occurs and then release it into the lower gastrointestinal tract. Proper functioning of *Grahani* entirely depends upon the normal state of *Agni*. When *Agni* remains balanced, digestion, absorption, and nourishment of body tissues occur properly, whereas impairment of *Agni* leads to various gastrointestinal disorders including *Grahani Roga*.⁶

ROLE OF AGNI IN GRAHANI ROGA

Agni is considered the central factor responsible for digestion, metabolism, and maintenance of health. Ayurveda states that balanced *Agni* supports proper transformation of food into nutrients, while weakened or irregular *Agni* causes incomplete digestion. This impaired digestion results in production of *Ama*, which acts as a toxic metabolic byproduct. In *Grahani Roga*, *Mandagni* plays a major role by disturbing the digestive and absorptive functions of the gastrointestinal tract. Due to weak digestive power, patients experience irregular digestion, abdominal discomfort, heaviness, bloating, and altered bowel habits.⁷

ETIOLOGICAL FACTORS OF GRAHANI ROGA

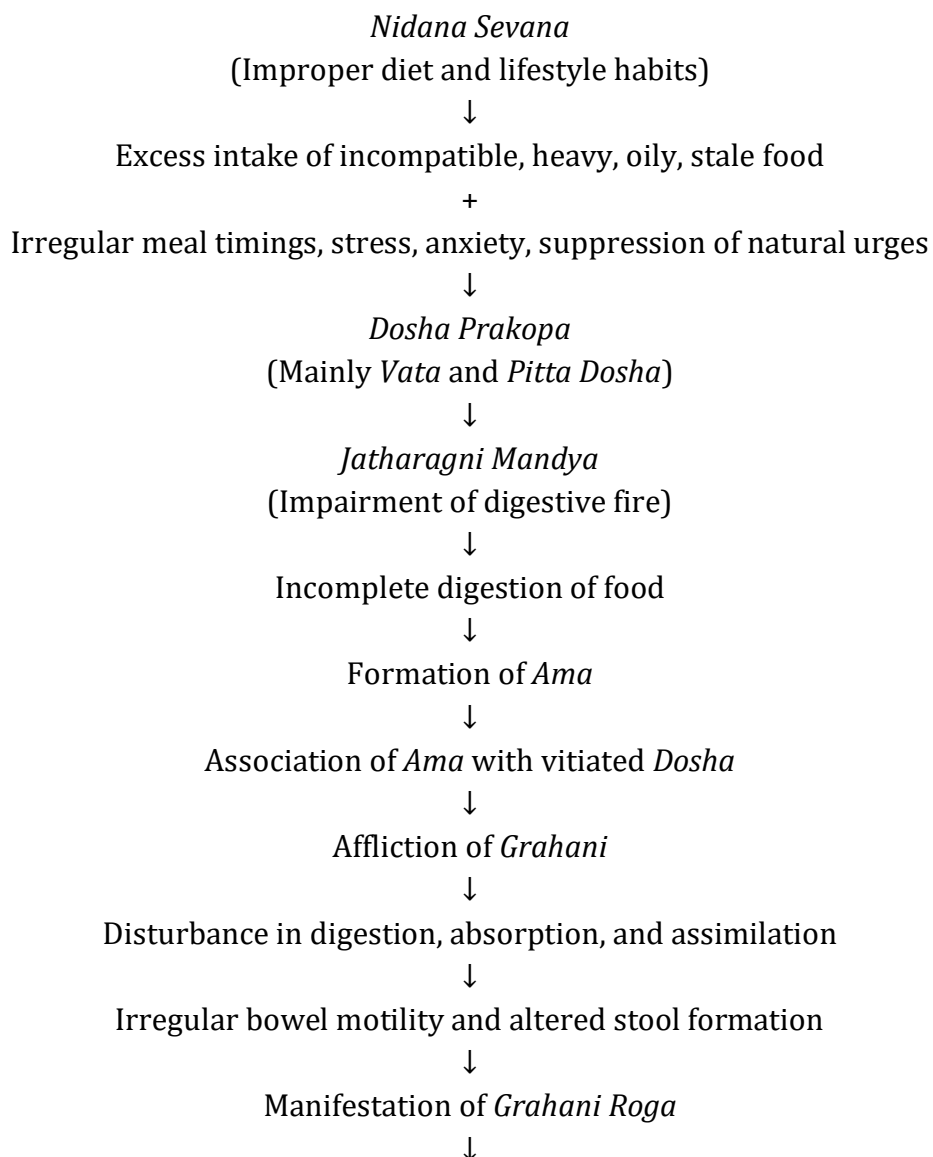
Ayurveda describes several causative factors responsible for development of *Grahani Roga*. Excessive intake of heavy, oily, incompatible, stale, or contaminated food weakens *Agni* and initiates disease formation. Irregular meal timings, overeating, suppression of natural urges, stress, anxiety, excessive fasting, and unhealthy lifestyle habits also contribute significantly. These factors vitiate mainly *Vata* and *Pitta Dosha*, disturb digestive activity, and lead to

formation of *Ama*. Psychological disturbances are also considered important in aggravating digestive dysfunction.⁸

SAMPRAPTI OF GRAHANI ROGA

The pathogenesis of *Grahani Roga* begins with impairment of *Jatharagni* due to continuous exposure to causative factors. Weak *Agni* results in improper digestion of food, producing *Ama*. This *Ama* mixes with vitiated *Dosha* and affects the normal functioning of *Grahani*. Disturbed intestinal motility and defective absorption occur, leading to irregular bowel habits and gastrointestinal symptoms. Predominance of different *Dosha* gives rise to various types of *Grahani Roga* such as *Vataja*, *Pittaja*, *Kaphaja*, and *Sannipataja Grahani*.¹⁰

FLOW CHART OF SAMPRAPTI OF GRAHANI ROGA



Clinical Features

- Abdominal pain
 - Bloating
- Altered bowel habits
- Diarrhea/Constipation
 - Mucus in stool
 - Indigestion
- Fatigue and weakness

CLINICAL FEATURES OF GRAHANI ROGA

Patients suffering from *Grahani Roga* commonly present with symptoms such as alternating constipation and diarrhea, abdominal pain, bloating, indigestion, mucus mixed stool, foul smelling stool, anorexia, fatigue, thirst, and weakness. Some patients may experience incomplete evacuation and irregular appetite. In *Vataja Grahani*, abdominal pain and irregular bowel movements predominate, whereas *Pittaja Grahani* is associated with burning sensation, loose stools, and increased thirst. *Kaphaja Grahani* commonly presents with heaviness, lethargy, nausea, and sticky stool.¹²

CORRELATION WITH IRRITABLE BOWEL SYNDROME

The symptomatology and etiopathogenesis of Irritable Bowel Syndrome closely resemble *Grahani Roga* described in Ayurveda. IBS is characterized by chronic abdominal pain, bloating, altered bowel habits, diarrhea, constipation, or mixed bowel patterns without structural abnormalities.¹³ Similar features are extensively described in Ayurvedic classics under *Grahani Roga*. Modern medicine also recognizes the role of stress, diet, and altered gut motility in IBS, which correlates with Ayurvedic concepts of *Agni Dushti*, *Ama*, and *Dosha Vaishamy*.

AYURVEDIC PRINCIPLES OF MANAGEMENT

Management of *Grahani Roga* mainly focuses on restoration of *Agni* and elimination of *Ama*. Therapeutic measures include *Deepana*, *Pachana*, *Langhana*, and *Grahi Chikitsa*. Dietary regulation and lifestyle modification play a crucial role in treatment. Easily digestible food, proper meal timings, stress management, and avoidance of causative factors are advised. Ayurvedic formulations possessing *Deepana-Pachana* properties help improve digestive strength and normalize bowel function.¹⁴ Thus, Ayurveda provides a holistic and

individualized approach for management of *Grahani Roga* and conditions resembling Irritable Bowel Syndrome.

IRRITABLE BOWEL SYNDROME

Irritable Bowel Syndrome (IBS) is a common functional gastrointestinal disorder characterized by chronic abdominal pain or discomfort associated with altered bowel habits in the absence of any structural or biochemical abnormality. It is considered one of the most frequently diagnosed gastrointestinal conditions worldwide and significantly affects the quality of life of patients.¹⁵ IBS commonly presents with symptoms such as abdominal pain, bloating, diarrhea, constipation, excessive gas formation, and a feeling of incomplete bowel evacuation. The disorder usually follows a chronic relapsing course and is often aggravated by stress, dietary factors, and emotional disturbances.

ETIOLOGY

The exact cause of IBS is still not completely understood, but several factors are believed to contribute to its development. Disturbances in gut motility, altered gut-brain interaction, intestinal hypersensitivity, psychological stress, dietary intolerance, post-infectious changes, and imbalance of intestinal microbiota are considered important etiological factors. Anxiety, depression, irregular eating habits, lack of sleep, sedentary lifestyle, and excessive intake of spicy or processed foods may also precipitate symptoms in susceptible individuals.¹⁶

PATHOPHYSIOLOGY

IBS is considered a multifactorial disorder involving abnormal communication between the brain and gastrointestinal tract. Altered intestinal motility may lead to either increased bowel movements causing diarrhea or delayed transit leading to constipation. Visceral hypersensitivity increases pain perception even with normal bowel activity. Stress and emotional disturbances affect autonomic nervous system function and intestinal motility, worsening symptoms. Disturbance of gut microbiota and low-grade intestinal inflammation may also contribute to symptom generation in some patients.¹⁷

CLINICAL FEATURES

The clinical presentation of IBS varies among individuals. Common symptoms include recurrent abdominal pain, abdominal bloating, excessive flatulence, altered bowel habits, diarrhea, constipation, or alternating episodes of both. Patients often complain of mucus in

39

stool, urgency for defecation, and incomplete bowel evacuation. Symptoms are usually aggravated after meals or during periods of stress and may improve after defecation.¹⁸ Fatigue, anxiety, sleep disturbances, and reduced quality of life are also frequently associated with IBS.

TYPES OF IBS

- Based on bowel habits, IBS is commonly classified into different subtypes:
- IBS with constipation (IBS-C)
- IBS with diarrhea (IBS-D)
- Mixed IBS (IBS-M) with alternating constipation and diarrhea
- Unclassified IBS (IBS-U)

DIAGNOSIS

Diagnosis of IBS is mainly clinical and based on symptom patterns. The Rome IV criteria are commonly used for diagnosis, which include recurrent abdominal pain associated with defecation or changes in stool frequency and consistency. Laboratory investigations and imaging studies are usually performed to exclude other gastrointestinal disorders such as inflammatory bowel disease, infections, celiac disease, and colorectal malignancy.

MANAGEMENT

Management of IBS mainly focuses on symptomatic relief and improvement of quality of life. Dietary modifications such as avoidance of trigger foods, increased fiber intake, adequate hydration, and regular meal timings are important. Stress management, exercise, and psychological therapies also play a beneficial role. Modern treatment includes use of antispasmodics, laxatives, antidiarrheal drugs, probiotics, and antidepressants depending upon symptom predominance.¹⁹ However, recurrence and incomplete relief are common challenges in conventional management.

RESULTS AND FINDINGS

- The conceptual review revealed that impairment of *Jatharagni* is the primary pathological factor responsible for the development of *Grahani Roga*.
- Formation of *Ama* due to incomplete digestion plays a major role in disturbing gastrointestinal functions and bowel habits.

- *Vata Dosha* predominance was found to be mainly associated with irregular bowel movements, abdominal pain, bloating, and constipation, while *Pitta Dosha* involvement was associated with loose stools and burning sensation.
- Clinical manifestations of Irritable Bowel Syndrome such as abdominal discomfort, altered bowel habits, diarrhea, constipation, mucus in stool, flatulence, and incomplete evacuation showed close similarity with symptoms of *Grahani Roga*.
- Psychological factors such as stress, anxiety, and emotional disturbances were identified as important aggravating factors in both IBS and *Grahani Roga*.
- Improper dietary habits including irregular meals, junk food intake, overeating, incompatible food consumption, and sedentary lifestyle were found to contribute significantly to digestive dysfunction.
- The review established a strong conceptual correlation between IBS and *Grahani Roga* on the basis of etiology, symptomatology, and pathogenesis.
- Ayurvedic principles such as *Deepana*, *Pachana*, *Langhana*, and correction of *Agni* were found to be essential therapeutic approaches in the management of *Grahani Roga*.
- Dietary regulation and lifestyle modification were observed to play a major role in improving digestive health and reducing recurrence of symptoms.
- Ayurveda provides a holistic and individualized approach for management of gastrointestinal disorders by targeting the root cause rather than only symptomatic relief.

DISCUSSION

Grahani Roga is one of the important gastrointestinal disorders described in Ayurveda, mainly caused by impairment of *Agni*. Ayurveda considers *Agni* as the central factor responsible for digestion, metabolism, and maintenance of health. In the present conceptual study, it was observed that weakening of *Jatharagni* leads to incomplete digestion of food and formation of *Ama*, which initiates the disease process. Continuous intake of incompatible food, irregular dietary habits, excessive consumption of oily and heavy food, mental stress, and disturbed lifestyle contribute significantly to *Agni Dushti*. These pathological factors ultimately affect the normal functioning of *Grahani*, resulting in disturbed digestion, absorption, and altered bowel habits.²⁰

The symptomatology of Irritable Bowel Syndrome shows remarkable similarity with *Grahani Roga* described in Ayurvedic classics. Clinical features such as abdominal pain, bloating,

constipation, diarrhea, mucus in stool, indigestion, and incomplete evacuation correlate closely with manifestations of *Grahani Roga*. Modern medicine explains IBS as a functional gastrointestinal disorder associated with altered gut motility, visceral hypersensitivity, gut-brain axis dysfunction, and psychological disturbances.²¹ Similarly, Ayurveda describes the involvement of mainly *Vata Dosha*, along with *Pitta Dosha* and *Ama*, in producing irregular bowel activity and gastrointestinal discomfort. Stress and emotional disturbances, considered important triggering factors in IBS, are also mentioned in Ayurveda as causative factors affecting *Agni* and *Dosha* balance.

Ayurveda emphasizes a holistic and root-cause-based approach in the management of *Grahani Roga*. Therapeutic principles such as *Deepana*, *Pachana*, *Langhana*, and regulation of diet and lifestyle help restore normal digestive function and improve intestinal health. Unlike symptomatic management commonly adopted in modern medicine, Ayurveda focuses on correction of *Agni* and elimination of *Ama*, which may help in reducing recurrence and chronicity of symptoms. Proper dietary practices, stress management, and use of herbal formulations possessing *Deepana-Pachana* properties play an important role in maintaining digestive balance.²² Therefore, Ayurvedic understanding of *Grahani Roga* provides a comprehensive and effective perspective for management of conditions resembling Irritable Bowel Syndrome.

CONCLUSION

From the present conceptual study, it can be concluded that Irritable Bowel Syndrome closely resembles *Grahani Roga* described in Ayurveda in terms of etiology, symptomatology, and pathogenesis. Impairment of *Jatharagni*, formation of *Ama*, and vitiation of mainly *Vata Dosha* play a significant role in the development of the disease. Modern factors such as stress, irregular dietary habits, sedentary lifestyle, and unhealthy food practices contribute greatly to digestive disturbances and aggravation of symptoms. Ayurveda provides a holistic approach for management through correction of *Agni*, elimination of *Ama*, dietary regulation, lifestyle modification, and use of *Deepana-Pachana* therapies. Thus, Ayurvedic principles may offer an effective and comprehensive approach in the prevention and management of Irritable Bowel Syndrome.

CONFLICT OF INTEREST –NIL

SOURCE OF SUPPORT –NONE

REFERENCES

1. Agnivesha. Charaka Samhita, *Grahani Chikitsa Adhyaya*, Chikitsa Sthana, Chapter 15, Verse 3-5. Edited by Yadavji Trikamji Acharya. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2020. p. 512-514.
2. Agnivesha. Charaka Samhita, *Grahani Nidana*, Nidana Sthana, Chapter 8, Verse 24-30. Edited by Yadavji Trikamji Acharya. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2020. p. 225-228.
3. Longo DL, Fauci AS, Kasper DL, Hauser SL, Jameson JL, Loscalzo J. Harrison's Principles of Internal Medicine. 21st ed. New York: McGraw Hill Education; 2022. p. 2451-2455.
4. Kumar P, Clark M. Kumar and Clark's Clinical Medicine. 10th ed. London: Elsevier; 2020. p. 846-850.
5. Vagbhata. Ashtanga Hridaya, *Grahani Chikitsa*, Chikitsa Sthana, Chapter 10, Verse 1-8. Edited by Harishastri Paradkar. Reprint ed. Varanasi: Chaukhambha Orientalia; 2021. p. 673-676.
6. Sushruta. Sushruta Samhita, *Atisara Pratishedha*, Uttara Tantra, Chapter 40, Verse 167-170. Edited by Yadavji Trikamji Acharya. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2021. p. 709-711.
7. Agnivesha. Charaka Samhita, *Agni Visheshha Vijnaniya Adhyaya*, Chikitsa Sthana, Chapter 15, Verse 39-44. Edited by Yadavji Trikamji Acharya. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2020. p. 517-519.
8. Tripathi B. Ashtanga Hridayam of Vagbhata with Nirmala Hindi Commentary. Chikitsa Sthana, Chapter 10. Reprint ed. Delhi: Chaukhambha Sanskrit Pratishtan; 2019. p. 498-503.
9. Sharma RK, Dash B. Charaka Samhita of Agnivesha. Vol. IV. Chikitsa Sthana. Reprint ed. Varanasi: Chowkhamba Sanskrit Series Office; 2018. p. 123-129.
10. Agnivesha. Charaka Samhita, *Grahani Dosh Chikitsa*, Chikitsa Sthana, Chapter 15, Verse 50-60. Edited by Yadavji Trikamji Acharya. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2020. p. 520-523.

11. Shastri SN. Madhava Nidana with Madhukosha Commentary. *Grahani Nidana*, Chapter 4. Reprint ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2019. p. 198-205.
12. Sushruta. Sushruta Samhita, *Grahani Dosha Vijnaniya*, Uttara Tantra, Chapter 40, Verse 171-178. Edited by Yadavji Trikamji Acharya. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2021. p. 712-715.
13. Drossman DA. Functional gastrointestinal disorders: history, pathophysiology, clinical features and Rome IV. *Gastroenterology*. 2016;150(6):1262-1279.
14. Sharma PV. Dravyaguna Vijnana. Vol. II. Reprint ed. Varanasi: Chaukhambha Bharati Academy; 2020. p. 345-352.
15. Davidson S, Ralston SH, Penman ID, Strachan MWJ, Hobson RP. Davidson's Principles and Practice of Medicine. 24th ed. Edinburgh: Elsevier; 2022. p. 785-789.
16. Talley NJ, Ford AC. Functional Dyspepsia and Irritable Bowel Syndrome. *N Engl J Med*. 2015;373(19):1853-1863.
17. Guyton AC, Hall JE. Textbook of Medical Physiology. 14th ed. Philadelphia: Elsevier; 2021. p. 781-786.
18. Tortora GJ, Derrickson B. Principles of Anatomy and Physiology. 16th ed. New York: Wiley; 2021. p. 945-948.
19. Feldman M, Friedman LS, Brandt LJ. Sleisenger and Fordtran's Gastrointestinal and Liver Disease. 11th ed. Philadelphia: Elsevier; 2021. p. 221-228.
20. Sharma H, Chandola HM. Ayurvedic concept of digestion and metabolism. *AYU*. 2011;32(2):157-162.
21. Makharia GK. Understanding and management of irritable bowel syndrome. *Indian J Med Res*. 2011;134(5):584-595.
22. Tripathi KD. Essentials of Medical Pharmacology. 9th ed. New Delhi: Jaypee Brothers Medical Publishers; 2021. p. 672-676.