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## UNDERSTANDING IRRITABLE BOWEL SYNDROME (IBS) AND ITS AYURVEDIC PERSPECTIVE: A COMPREHENSIVE REVIEW

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### ABSTRACT

Irritable bowel syndrome (IBS) is a prevalent gastrointestinal illness characterised by recurrent abdominal pain and irregular bowel patterns. Although it is widespread and significantly affects one's quality of life, only a minority of those affected actively seek medical assistance. In Ayurveda, Irritable Bowel Syndrome (IBS) is associated with Grahani Rog, a condition believed to result from an imbalance of Agni, leading to the formation of Aam and the development of four different forms of Grahani Rog. Classical Ayurvedic writings include a variety of formulations and therapeutic methods for treating Grahani Rog.

This paper analyses the contemporary and Ayurvedic viewpoints on Grahani Rog, emphasising the resemblances and disparities in the causes and treatment approaches. While studying IBS, modern medicine focuses primarily on luminal variables, biopsychosocial effects, and serotonergic dysfunction. In contrast, Ayurveda places importance on Agni and doshas imbalances. Contemporary medical management uses antispasmodics and antidepressants to provide relief from symptoms, but Ayurveda adopts a comprehensive approach comprising Shodhana, Snehana, Swedana, and Laghana to restore equilibrium.

The review looks at different Ayurvedic formulations, such as Takrarishta, Devadarvyadi Churn, Tryushnadi Ghrita, Nagkesar Churn, Bilva Yoga, Chitrakadi Vati, and Panchamrit

Parpati. It focuses on their features and how they might help with managing Grahani Rog. In addition, the article discusses dietary suggestions that focus on following a Sattvika diet and avoiding overeating and Rajasika-Tamasika meals.

**Keywords: Irritable Bowel Syndrome (IBS), Grahani rog, Ayurveda, Charaka Samhita, Sushruta Samhita**

## 1. INTRODUCTION

In the absence of a structural gut problem, irritable bowel syndrome (IBS) is distinguished by recurring stomach discomfort coupled with inappropriate feces. About 10-15% at some point, however only 10% of those affected seek medical attention due to symptoms. However, IBS is the most typical reason for gastrointestinal referral, which explains why people miss work frequently and have a lower quality of life. Young women are impacted two to three times as often as males. Coexisting illnesses are quite frequent, including fibromyalgia, chronic fatigue syndrome, non-ulcer dyspepsia, and dysmenorrhea. Patients with IBS benefit from psychotherapy [1].

According to the *Ayurvedic* text, Agni has been considered the root cause of *Grahani Rog*. If *Agni* attains its causative factors, it gets contaminated and produces *Aam*, and this *Aam dosh* produces four types of *Grahani Rog*. The primary symptom of *Grahani Rog* is *muhur-badham*, *muhur-dravam*, or passing feces interspersed with either diarrhea or constipation. These symptoms are comparable to those of IBS [2].

There are several formulations to lessen the symptoms of IBS, but modern medicine has not yet found a comprehensive treatment. If we discuss the therapy of *Grahani Rog*, *Ayurveda* describes a wide variety of medications. The majority of *Deepan-Pachan* medications are utilized in *Grahani Rog*.

## 2. MATERIALS AND METHODS

Classical texts and commentaries on *Ayurveda* (such as *Brihat trayi-Charaka Samhita*, *Sushruta Samhita*, *Vagbhata and Laghutrayi-Sharangadhara*, *Madhava Nidana*, *Bhavaprakasha*), as well as other texts, internet sources, databases, and periodicals, were analyzed for this study. Literary data collected were compared and analyzed on the classical background to find similarities and expected clinical approach by modern science.

## 3. Modern view of *Grahani Rog*

Irritable Bowel Syndrome (IBS) can be considered a *Grahani Rog* in *Ayurveda*. Although the exact origin of IBS is unknown, luminal variables like food and gut bacteria are believed to have a significant influence, in addition to biopsychosocial factors. Most IBS patients

exhibit behavioral and psychosocial factors such as anxiety, depression, somatization, and neurosis. Panic attacks are also found similarly. These behavioural and psychosocial factors influence gastrointestinal motility. These factors contribute to the development of IBS, but they do not directly cause it. When considering physiological aspects, IBS may be a serotonergic disorder. We refer to IBS diarrhoea-predominant (D-IBS) if it releases large amounts of 5-HT, and constipation-predominant (C-IBS) if it releases small amounts. As a result, 5-HT<sub>3</sub> receptor antagonists are useful in treating D-IBS, but 5-HT<sub>4</sub> agonists help C-IBS patients' bowel function. According to some research, IBS may be a low-grade gut inflammation or immunological activation, undetectable by testing, with increased numbers of mucosal mast cells that sensitize enteric neurons by producing histamine and tryptase. When the immune system activates, the CNS may process viral pain signals differently. Women and people with D-IBS are more likely to experience this, and a previous episode of gastroenteritis due to Salmonella or Campylobacter species may trigger it [3].

#### 4. Ayurvedic view of Grahani Rog

Food becomes vidagdha when the weak digestive fire cannot fully digest it, and it is known as *Grahani Rog* when the vidagdha pakwa or apakwa mal excretes from the anal root [4]. In *Grahani Rog*, the stool comes out

very thin like water. The feces of this type come out only because of the disturbed digestive fire. Such patients often have symptoms such as excessive thirst, no desire to eat, and tastelessness, *Tamak swas*, *Acharya Charak*, while describing the *Grahani Rog* in detail, has given mainly four types of *Grahani Rog* [5].

##### 4.1. Vataj Grahani-

All forms of *vayu* exhibit symptoms that point to an imbalance not just in the *Annavahasrota* but also in other bodily regions, including -Dryness of the palate, loudness in the ears, tinnitus, coughing, and dyspnea are symptoms of *Prana* and *UdanVayu*. Constipation is referred to as *ApanaVayu*, and symptoms include frequent bowel movements, gas, wind when passing a bowel motion, frothy loose stools, and painful bowel movements brought on by intestinal cramps, dry feces, and rectum discomfort. *Samana Vayu* - It fanned *Jathara Agni*, either kindling the fire and producing varied appetites or blowing it away. Due to increased small intestine peristalsis, increased *Samana Vayu* activity results in loose bowel movements. In *Vyan Vayu*, Cardiovascular discomfort is brought on by *vata*, which affects the *mamsa dhatus* and results in pain in the sides of the belly, thighs, groin, and neck. The person has an endless appetite and never feels full after eating [6].

##### 4.2 Pittaj Grahani-

The aggravation of *Pachaka Pitta* causes hyperacidity, which results in heartburn and sour belching, and it also affects the quality of the stool so that it is liquid in consistency, all of which are symptoms of *Pitta disease*. Additionally, the body odor of the patient is foul. Additionally prevalent in this kind of *Grahani* are anorexia and dehydration [7].

#### 4.3 *Kaphaj Grahani-*

*Kledaka Kapha* in the stomach increases, dampening *Jathara Agni* and causing *Mandagni*. Excessive *Kledaka Kapha* results in nausea, vomiting, abdominal heaviness, and retention of undigested food in the stomach, producing fermentation and foul-smelling burping, and appetite loss. *Bodhaka Kapha* is further aggravated by *Avalambaka Kapha*, resulting in increased salivation, oral mucous, and taste loss due to saturation. The broken, potentially large number of stools that are passed in the colon when there is too much *Kledaka Kapha*. One may have excessive *Kapha* in the body, which makes them feel drained and frail yet prevents them from physically revealing evidence of tissue deterioration [8].

#### 4.5 *Sannipataj Grahani-*

This kind of *Grahani* results from the aggravation of the *tridoshas* in conjunction with two or all three. In this instance, the illness will show signs of all three of the *Grahani* [9].

Other important forms of *Grahani* are also found in classical texts known as

*Samgrahani* and *Ghatyantra Grahani* which is described by the *Acharya Madhavkar*.

#### 4.6 *Samgrahani-*

Due to the vitiation of all *tridoshas* and the appearance of all of their combined traits, it is a chronic illness. Although it is *kashtasadhya* (difficult to treat), some people may get relief with continued therapy [10].

#### 4.7 *Ghatyantra Grahani-*

This kind of *Grahani Rog* causes more bowel motions abdominal rumbling, and a lot of undigested food particles in the stool. It is an incurable *asadhya vyadhi* [11].

### 5. Management of *Grahani*

Antispasmodic, anti-diarrheal, and other formulations have all been discussed in contemporary medicine for the treatment of irritable bowel syndrome. Although successful in lessening the intensity of the condition, antidepressants and newer drugs like tegaserod and alosetron, etc. do not, due to their side effects, provide a lasting cure [12].

The treatment of *Grahani Rog* is covered in a variety of formulations and therapeutic approaches in classical *Ayurvedic* texts. The concept of therapy is *Shodhana* by *Vamana* and *Virechana* following *Snehana*, *Swedana*, and afterward *Laghana*, *Deepana*, and *Pachana* karma with the use of different *Aganivardhaka Dravya*, according to classical *Ayurvedic* text [13].

Some important *Ayurvedic* medicines are being analyzed in this review article, in which clinical trials have also been done on some medicines and positive results have been seen on *Grahani Rog*.

### 5.1 PANCHAMRIT PARPATI

It is a metallic medication used in the *Ayurvedic* medical system. *Parpati* is a process for preparing formulations in which molten metal (*Shudh Gandhak*, *Shudh Parad*, *Loh Bhasm*, *Abhrak Bhasm*, *Tamra Bhasm*) is poured over plant leaves (mainly Banana tree) to create metallic flakes. *Deepana* (activation of *Agni*), *Pachana* (digestive), *Grahi* (carminative), and *Laghu* (reduce *Ama*) are among *Panchamrita Parpati's Ayurvedic* qualities. *Ushna Guna* and *Deepan's* characteristics boost hunger, whereas *Grahi's* property enhances nutrient absorption. Due to the above properties, *Panchamrit Parpati* is an important medicine for *Grahani Rog*.

A special method is mentioned in *Bhaishajyaratnavali* to use this medicine. According to this, this medicine should be consumed with honey and ghee up to eight *rattis* (1 *rattis*=125mg) increasing by two *rattis* [14].

### 5.2 DEVADARVYADI CHURN

*Aam Mal* (mucous in stool) and *Udarshool* (colic discomfort) can be relieved by combining equal amounts of the powders of *Devadaru* (*Cedrus deodara*), *Vacha* (*Acorus Calamus*), *Motha* (*Cyperus rotundus*),

*Shunthi* (*Zingiber officinale*), *Atis* (*Aconitum heterophyllum*), and *Haritaki* (*Terminalia chebula*) with warm water and rock salt [15].

The most commonly found modified forms of *Devadarvyadi-Churn* into *Vati* are *Katu Rasa*, *Laghu Guna*, *Ushna Veerya*, *Katu Vipaka*, and *Vatakapha Doshaghata*. *Devadarvyadi-Vati* aids in *Amapachana* and *Agnideepan* because of these qualities positive effect of this drug is seen on some important symptoms of *Grahani Rog* like- *Anaddhodarata*, *Arochak*, *Balakshay*, *Alashya*, *Klum*, *Trishna*, and *Antrakunjan*. [16]

### 5.3 TRYUSHANADI GHRITA

*Shunthi*, *Pippali*, *Maricha*, *Amla*, *Harad*, and *Bibhitak kalk* of these six ingredients should be created for 1 *Pal*, old jaggery for 1 *Pal*, and it should be heated in *Goghrit* for 8 *Pal*. Patients with *Mandagini* should be given the appropriate amount based on their physical condition and strength [17].

*Katu*, *Kashaya Rasa*, *Laghu*, *Ruksha*, *Tikshna*, and *Snigdha Guna* are among the qualities in *Tryushnadi Ghrita* that serve as *Amapachaka* and *Agni Deepaka*, *Kashaya Rasa*, and *Snigdha* and *Guru Guna* aids in lowering colonic motility, which aids in *Muhurbaddha* and *Drava Mala Pravritti* [18].

### 5.4 NAGKESAR CHURN

*Nagkesar* has properties like *Kashaya*, *Tikta Rasa*, *Katu Vipaka*, and *Laghu Guna* which

act as *Agni Deepan* and also *Aam Pachan*. *Kashaya Rasa* helps in reducing colonic motility and thereby, helps in *Grahani Rog* (IBS) [19].

### 5.5 BILVA YOGA

Unripe *Bilva* fruit functions as *Agni Deepan* and *Amapachaka* because of its *Tikta Rasa*, *Katu Vipaka*, *Ushan Virya*, and *Laghu Guna*. *Kashaya Rasa* aids in treating *Grahani Rog* (IBS) by lowering intestinal motility. Pectin, tannic acid, and mucilage are chemical components that are effective at bulking up the stool. Marmalysin coats the mucous membrane, avoids mucosal irritation, and enhances appetite and digestion [20-21].

### 5.6 CHITRAKADI VATI

This specific yoga mostly uses substances (*Chitraka*, *Pippali moola*, *Yava kshara*, *Sarji kshara*, *Saurvachala lavana*, *Saindhava lavana*, *Vida lavana*, *Samudra lavana*, *Audbhida lavana*, *Shunthi*, *Maricha*, *Pippali*, *Hingu*, *Ajamoda*, *Chavya*, *Matulunga rasa*, *Dadima rasa*) with the *Deepana-Pachana*, *Rochana*, *Vata-anulomana*, *Shoolahara*, *Usna virya*, *Katu-Lavana*, *Tikta-Madhura*, *Amla rasa*, *Laghu-tikshna*, *Snigdha guna*, and *Katu vipaka* properties. This yoga demonstrates several degrees of activities like *Dosh*, *Dushya*, *Srotus*, *Agni*, *Aam*, and *Grahani roop* [22-23].

### 5.7 TAKRARISHTA

Takrarishta is a multi-herbal, sour, fermented concoction from cow milk. This

medication contains 5–10% naturally occurring, self-generated alcohol. The product's self-generated alcohol and water serve as a conduit for our body to absorb the active herbal ingredients that are soluble in both water and alcohol. This liquid Ayurvedic medication can treat irritable bowel syndrome, piles, intestinal parasites, weak digestion, loose stools, and other digestive issues. The antibacterial, absorbing (*grahi*), digestive, and carminative qualities of Takrarishta are additional benefits. Pathological cases where antibiotics are unnecessary can benefit from the use of this medication [24].

## 6. DIETETIC REGIMEN

The patient with *Grahani* should turn to oleation, sudation, purification, and lightening treatments as well as gastric stimulant foods including different kinds of *Churnas*, salts, alkalis, honey, *Arishta*, *Sura*, and *Asava* as well as digestive stimulant *Ghee*. The *Sattvika* diet, which is nutrient-dense and simple to digest, has traditionally been advised. It is best to refrain from overeating and the *Rajasika-Tamasika* diet. *Sashti Shali*, *Jirna Shali*, *Masoora*, *Tuvari*, *Mudga Yusha*, *Lajamanda*, *Vilepi*, *Changeri*, *Rambha Pushpa*, *Kamalakanda Rambha*, *Jambu*, *Kapittha*, *Dadima*, *Aja* or *Gavya Dugdha*, *Takra*, *Ghrita*, *Tila Taila* are all *pathya* in *Grahani Rog* [25-27].

## 7. RESULTS

The study provided a detailed review of the concept of "*Grahani Rog*" (IBS) and its potential correlation with irritable bowel syndrome (IBS) in modern medicine. The study discusses the characteristics of *Grahani Rog*, its various types based on *dosha* imbalances, and the *Ayurvedic* and modern approaches to its management. Additionally, the study mentions specific *Ayurvedic* formulations and dietary recommendations that could be beneficial in managing the condition. It is a comprehensive analysis of the topic, exploring both traditional *Ayurvedic* perspectives and modern medical viewpoints on the matter.

## 8. DISCUSSION

The study provides an interesting comparison between Irritable Bowel Syndrome (IBS) in modern medicine and *Grahani Rog* in *Ayurveda*. It highlights the similarities in symptoms and treatment approaches between the two systems of medicine. According to *Ayurveda*, *Grahani Rog* is related to the impaired digestive fire (Agni) leading to the formation of Aam, which is similar to the concept of dysbiosis and altered gut microbiota observed in IBS. One of the significant observations made in the review is the prevalence of psychological factors in IBS patients, such as anxiety, depression, and somatization. *Ayurveda* also recognizes the significance of psychosocial factors in *Grahani Rog*,

thereby reinforcing the concept of interconnectedness between the mind and body in both medical systems.

*Grahani Rog* can be controlled in an *Ayurvedic* way by using different herbal medicines and treatments, such as Panchamrit Parpati, Devadaryadi Churna, Tryushnadi Ghrita, Nagkesar Churna, Bilva Yoga, Chitrakadi Vati, and Takrarishta. These formulations are believed to balance the *Doshas*, improve digestive fire, and alleviate symptoms of IBS, such as irregular bowel movements, bloating, and discomfort. The study also explores the different types of *Grahani Rog* described in classical *Ayurvedic* texts, such as Vataj, Pittaj, Kaphaj, and Sannipataj *Grahani*. Understanding these subtypes can aid in tailoring the treatment approach based on the predominant *Dosha* imbalance in individual patients.

## 9. CONCLUSION

In conclusion, the review highlights the similarities and overlaps between IBS in modern medicine and *Grahani Rog* in *Ayurveda*. Both systems of medicine acknowledge the importance of digestive function and the impact of psychological factors on gastrointestinal health. The *Ayurvedic* approach to managing *Grahani Rog* involves a combination of herbal formulations, dietary recommendations, and lifestyle modifications to address the root cause of the condition and alleviate

symptoms. However, it is essential to recognize that *Ayurveda* and modern medicine have different conceptual frameworks and approaches to disease management. While some *Ayurvedic* treatments show promise in managing IBS symptoms, it is crucial to approach such interventions with caution and under the guidance of qualified *Ayurvedic* practitioners. Further research, including well-designed clinical trials, is necessary to validate the efficacy and safety of *Ayurvedic* treatments for IBS. Integrative approaches that combine elements from both systems of medicine could potentially provide more comprehensive and effective solutions for individuals suffering from IBS and related gastrointestinal disorders. Overall, exploring the concepts and treatments of Grahani Rog in *Ayurveda* can offer valuable insights and complementary perspectives to enhance the management of irritable bowel syndrome in modern medicine.

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