



AN AYURVEDIC PERSPECTIVE ON THE ROLE OF STRESS IN THE PATHOGENESIS OF GRAHANI – A REVIEW

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ABSTRACT Grahani is one of the well-recognized gastrointestinal disorders in Ayurveda, primarily arising from derangement of Agni (digestive fire) and dysfunction of the Grahani organ (duodenum/small intestine). It typically presents with chronic diarrhea, indigestion, malabsorption, weakness, and fatigue. In modern parlance, Grahani closely resembles functional gastrointestinal disorders such as irritable bowel syndrome (IBS) and certain malabsorption states. A strong link has been established between psychological stress and the onset or aggravation of these conditions. Ayurveda too identifies Manasika Nidanas (psychological causative factors) like Chinta (worry), Shoka (grief), Bhaya (fear), and Krodha (anger) as triggers that disturb Agni and Doshas, initiating the Samprapti (pathogenesis) of Grahani. This review synthesizes classical Ayurvedic concepts with modern evidence, highlighting the role of stress in Grahani and proposing integrative management strategies.

KEYWORDS : Grahani, Stress, Agnimandya, Samprapti, Irritable Bowel Syndrome, Gut–brain axis, Ayurveda.

INTRODUCTION

Gastrointestinal problems are among the leading causes of morbidity globally. Functional disorders, particularly IBS, affect around 10–15% of the population and stress is recognized as a major precipitating as well as perpetuating factor.¹ In Ayurveda, Grahani emerges due to Agnimandya (weak digestive power), leading to incomplete digestion and malabsorption. The Grahani—described as the seat of Agni—fails to hold food until it is properly digested, causing symptoms such as Atisara (diarrhea), Avipaka (indigestion), Anaha (bloating), Alasya (fatigue), and Dourgandhya (foul stools).⁽²⁻⁴⁾

Apart from dietary and lifestyle causes, Ayurvedic texts emphasize the role of psychological disturbances. Acharya Charaka notes that Chinta, Shoka, Bhaya, and Krodha weaken Agni.⁵ Modern studies corroborate this, showing that chronic stress alters gut motility, microbiota, permeability, and visceral sensitivity through the gut–brain axis.⁶

This article explores Grahani from Ayurvedic and modern perspectives, focusing on stress as a major etiological factor and discussing integrative treatment approaches.

Grahani in Ayurveda

Definition

The term “Grahani” originates from the root grah (“to hold”), indicating its function of retaining ingested food until digestion is complete. Normal Agni ensures normal function, whereas weak Agni results in Grahani dysfunction.⁷

Nidana (Causative factors)

- **Dietary (Ahara Hetu):** Viruddha Ahara (incompatible food), Adhyashana (overeating), Vishamashana (irregular meals).
- **Lifestyle (Vihara Hetu):** Divaswapna (day sleep), Ratrijagarana (night vigil), unwholesome lifestyle practices.
- **Psychological (Manasika Hetu):** Chinta (worry), Shoka (grief), Bhaya (fear), Krodha (anger).

Lakshana (Clinical features)

- Dourgandhya (offensive smell of stool)
- Drava Mala Pravritti (loose motions)
- Avipaka (indigestion)
- Alasya (tiredness)
- Udara Shoola (abdominal pain)⁸

Samanya Samprapti (General pathogenesis)

Causative factors → Agnimandya → Ama formation → Grahani dysfunction → Manifestations of Grahani.⁹

Stress as a Nidana in Ayurveda⁽¹⁰⁻¹¹⁾

Ayurveda clearly underlines the influence of mental states on digestion:

- **Chinta (worry):** Disturbs Vata, suppressing digestive fire.
- **Shoka (grief):** Depletes mental energy, lowering appetite and digestion.
- **Bhaya (fear):** Aggravates Vata, causing irregular peristalsis and urgency.
- **Krodha (anger):** Heightens Pitta, producing acidity, burning, and loose stools.

Thus, stress disrupts Agni, Doshas, and Grahani organ function, creating a fertile ground for Grahani.

Samprapti Of Grahani With Stress Involvement

1. **Nidana:** Unwholesome diet, faulty lifestyle, and stress (Chinta, Shoka, Bhaya, Krodha).
2. **Dosha involvement:** Vata–Pitta predominance.
3. **Agni Dushti:** Irregular and weakened digestive fire.
4. **Ama production:** Incompletely digested food residues.
5. **Grahani dysfunction:** Loss of retaining and assimilating capacity.
6. **Vyakti Sthana:** Duodenum and small intestine.
7. **Clinical picture:** Diarrhea, bloating, indigestion, weakness, weight loss.

Stress maintains a vicious cycle of Agnimandya and Grahani symptoms.

Modern Insights on Stress and Gut Health Gut–Brain Axis

The gut–brain axis is a bidirectional network linking the CNS and GIT. Stress activates the HPA axis, releasing cortisol and catecholamines, altering gut motility and secretion.¹²

Impact of Stress on Gut⁽¹³⁻¹⁵⁾

- **Motility:** Diarrhea or constipation depending on subtype.
- **Visceral hypersensitivity:** Heightened pain perception.
- **Barrier dysfunction:** Increased intestinal permeability (“leaky gut”).
- **Microbiota changes:** Dysbiosis related to IBS.
- **Immune activation:** Chronic low-grade inflammation.

Stress And IBS

Patients with IBS frequently note symptom aggravation during stress. Higher prevalence of anxiety, depression, and somatization is reported compared to healthy controls.¹⁶

Correlation Between Grahani and IBS

- Agnimandya ↔ Altered gut motility
- Ama ↔ Dysbiosis and microbial toxins
- Chinta, Shoka, Bhaya ↔ Psychological comorbidities in IBS

- Satvavajaya Chikitsa ↔ Psychotherapy and stress-relief techniques

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Thus, IBS can be considered the closest modern equivalent of Grahani where stress plays a pivotal role.

Clinical Implications Ayurvedic Approach

- **Deepana–Pachana:** Classical formulations such as Trikatu Churna, Hingvashtaka Churna, and Chitrakadi Vati enhance digestive fire, reduce Ama, and restore normal Grahani function.
- **Grahi Dravyas:** Drugs like Kutaja (*Holarrhena antidysenterica*), Bilva (*Aegle marmelos*), and Musta (*Cyperus rotundus*) improve absorption and helps in chronic diarrhea.
- **Shodhana:** In long-standing cases, Mridu Virechana and Yoga Basti not only eliminate accumulated Doshas and Ama but also reset gut physiology.
- **Satvavajaya Chikitsa:** Meditation, yoga, and counseling strengthen the mind, breaking the stress–gut pathology cycle.

Panchakarma For Stress Relief

- Shirodhara, Abhyanga, Shiroabhyanga, and Nasya with Medhya herbs.

Modern Management⁽¹⁷⁻¹⁸⁾

- **Cognitive Behavioral Therapy (CBT):** Helps patients recognize maladaptive thought patterns (worry, fear) that worsen symptoms and trains them in stress-coping mechanisms.
- **Mindfulness-based Stress Reduction (MBSR):** Reduces autonomic overactivation, improves gut motility regulation, and decreases visceral hypersensitivity.
- **Pharmacological Support:** In refractory cases, low-dose antidepressants (SSRIs, TCAs) can modulate the gut–brain axis and provide symptomatic relief.
- **Lifestyle Counseling:** Structured dietary guidance, sleep hygiene, and relaxation practices reinforce therapeutic outcomes.

Integrated Model

Combining Ayurvedic Agni-balancing measures with modern psychotherapeutic techniques provides more comprehensive results in Grahani/IBS management.

CONCLUSION:

Stress is not merely an aggravating factor but a central player in the development of Grahani. Ayurveda, through the concepts of Chinta, Shoka, Bhaya, and Krodha, had already described the mind–gut relationship centuries ago. Modern science, with the gut–brain axis model, validates these insights. Therefore, management of Grahani must include both gastrointestinal and psychological domains. An integrated therapeutic plan—comprising Deepana–Pachana, Grahi Dravyas, Satvavajaya Chikitsa, Yoga, and modern stress-management methods—offers holistic and long-lasting relief.

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