

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32

Agnimandya: A Comprehensive Review.

ABSTRACT

Agnimandya (impairment of digestive fire) is a fundamental pathological condition in *Ayurveda*, primarily responsible for the initiation of many diseases through improper digestion and formation of *Ama*. Among the various forms of *Agni*, *Jatharagni* plays a central role in governing digestion, metabolism, and overall physiological functions. Its normal functioning ensures health, vitality, immunity, and longevity, whereas its impairment leads to a wide range of disorders. This review article aims to explore the concept of *Agnimandya* with respect to its types, causes (Nidana), clinical features (Lakshana), and pathogenesis (*Samprapti*), along with its correlation to modern medical concepts such as functional dyspepsia, hypochlorhydria, motility disorders, dysbiosis, and metabolic dysfunction. The study also emphasizes the role of dietary habits, lifestyle factors, psychological influences, and improper routines in the manifestation of *Agnimandya*. Management strategies include *NidanaParivarjana* (avoidance of causative factors), *Shodhana* therapies, *Deepana-Pachana* measures, and appropriate *Ahara* and *Vihara*. Special focus is given to the role of substances enhancing digestion, along with dietary regulations and lifestyle practices. The review highlights that *Agnimandya* is a multifactorial condition requiring a holistic approach for prevention and management. Restoration of *Agni* through balanced diet, disciplined lifestyle, and therapeutic interventions is essential for maintaining health and preventing disease progression.

Keywords: *Agnimandya, Jatharagni, Ama, Digestion, Metabolism, Deepana, Pachana, Ayurveda, Gut microbiota, Dyspepsia, Gut Motility, Dysbiosis, Lifestyle Disorders, Pathyahara, Rutushodhana, Vihara, Nidana Parivarjana*

OBJECTIVES

1. To review *Agnimandya* from classical texts.

- 33 2. To review *Agnimandya* through the lens of modern medicine from
34 modern literature and published articles.
35 3. To critically analyse both concepts.

36 MATERIALS AND METHODS

37 This is a comprehensive review based on classical Ayurvedic texts and
38 contemporary scientific literature. Ayurvedic concepts related to *Agnimandya*,
39 *Agni*, *Ama*, and digestive physiology were collected from authoritative texts
40 such as *CharakaSamhita*, *SushrutaSamhita*, *Ashtanga Hridaya*, *Madhava*
41 *Nidana*, *Bhavaprakasha*. Relevant information regarding types, causes
42 (*Nidana*), symptoms (*Lakshana*), and pathogenesis (*Samprapti*) of *Agnimandya*
43 was compiled and analysed. For modern analysis, recent research on gut
44 microbiota, dyspepsia, gut motility disorders, and metabolic dysfunction were
45 reviewed published articles from peer-reviewed journals like PubMed, Google
46 scholar. The collected data were critically analysed to establish a conceptual
47 bridge between Ayurvedic principles and modern scientific understanding.

49 INTRODUCTION

50 *Agni* is the principal component of body for every physiology. The metabolism,
51 catabolism, transformation, digestion, destruction of toxins all are brought
52 about by *Agni*.

53 *Jatharagni* is the main principal substance responsible for disease.
54 *Jatharagni* during its normalcy is responsible for longevity, complexion,
55 strength, Health, enthusiasm to perform even otherwise impossible tasks, well-
56 built body, lustre, Immunity, Energy, other *Agni*, and even vital functions of
57 other organs. If *Jatharagni* does not function, a person cannot survive. When it
58 functions properly, it supports a disease-free life and longevity; however, when
59 it is impaired, it leads to illness.^[1]

60 In today's fast-paced world, lifestyle patterns have drastically changed,
61 adversely affecting the normal functioning of *Agni*. According to *Ayurveda*,
62 *Pathya* (wholesome) diet and lifestyle, suitable to the body and mind, should
63 be followed, while *Apathya* habits should be avoided despite being habitual.^[2]

64 In modern lifestyles, irregular meals, distracted eating, stress, lack of physical
65 activity, disturbed sleep cycles, and frequent intake of processed or junk food
66 are common. Even *Pathyaahara*, when consumed in a disturbed mental state,
67 impairs digestion and contributes to *Agnimandya*, leading to symptoms like
68 bloating and heaviness. Conversely, regular consumption of *Apathyaahara*

69 such as processed, refined, reheated, and fried items disturbs *Agni*, resulting in
70 indigestion, acidity, and metabolic imbalance.

71 Consistent practices of *apathya* and unhealthy lifestyle disrupt the natural
72 rhythm of digestion, weaken metabolic processes, and promote the
73 accumulation of *Ama*, thereby initiating various pathological conditions.^[3]

74 Maintaining normal *Agni* is therefore essential for preserving health and
75 preventing disease. Proper digestion not only ensures adequate nutrition but
76 also supports immunity, energy levels, and mental clarity. Ayurvedic principles
77 emphasize the importance of balanced diet (*Ahara*), appropriate lifestyle
78 (*Vihara*), and seasonal regimens (*Ritucharya*) to sustain optimal *Agni*.
79 Achieving and maintaining a balanced state of *Agni* helps in the proper
80 formation of tissues, efficient elimination of waste products, and overall
81 harmony of the body and mind.

82

83 **REVIEW OF LITERATURE**

84 Although *Agnimandya* (Digestive insufficiency) is described as an independent
85 disease in *Madhava Nidana*, in *Charaka*, it is mainly mentioned under the
86 context of *Grahani*.

87 Not only in *Grahani*, but in almost all diseases, *Agnimandya* is considered a
88 fundamental causative factor. Hence, there arises a dilemma as to whether
89 *Agnimandya* should be regarded as an independent disease or not. It should
90 also be noted that the general symptoms of *Agnimandya* are not described
91 separately in a clear manner anywhere.

92 The symptoms of *Agnimandya* and *Ajirna* (indigestion) are generally similar;
93 however, there is a significant difference between the two. *Ajirna* is acute in
94 nature, whereas *Agnimandya* is chronic. The causative factors of *Agnimandya*
95 act over a prolonged period, leading to a gradual development of the disease,
96 which becomes deep-rooted over time. Therefore, *Ajirna* can be relieved with
97 minimal treatment, while *Agnimandya* requires long-term management.

98 According to *Charaka*, *Agnimandya* is considered a precursor stage of *Grahani*.
99 When there is structural or functional impairment of the *Grahani* organ, it is
100 termed *Grahani* disease; however, the earlier stage, where only functional
101 disturbance is present, can be termed *Agnimandya*.^[4]

102 In *Agnimandya*, disturbance of *Agni* (digestive fire) is of prime importance. All
103 the symptoms seen in this condition arise due to this impairment of *Agni*. To
104 understand these manifestations properly, it is necessary to have a basic
105 understanding of the normal functions of *Agni*.

106 The *Grahani* (the organ representing duodenum and small intestine) is the site
107 of *Agni*.^[5] Among all the *Agni*, *Jatharagni* is the most important. It controls or
108 nourishes all the other *Agni*. When *Jatharagni* is strong, all the other *Agni*
109 function well; when it's weak, other *Agni* also weaken. Therefore, it should be
110 protected by consuming properly prepared, wholesome food and drinks.^[6]

111 There is a view that there is no separate *Agni* in the body apart from
112 *Pitta*.^[7] Since *Pitta* has qualities of *Agni* (heat, digestion, transformation) it
113 performs functions like digestion & metabolism. Hence *Pitta* itself is considered
114 as *Agni*. When *Pitta* decreases it is treated with hot potency substance; when
115 *Pitta* increases, it is managed with cooling potency substance. *Pitta* is associated
116 with an intense *Jatharagni*. Since the qualities of *Kapha* are opposite to those
117 of *Pitta* and *Agni*, it diminishes *Agni*. Similarly, as *Pitta* is of *Agni* origin, it
118 further increases and sharpens *Agni*. *Vata*, being *Yogavahi* (catalytic), makes
119 *Agni* irregular. *Vata* is neither hot nor cold in nature; if it associates with cold-
120 dominant *Kapha*, it reduces *Agni*, and if it associates with *Pitta*, it intensifies
121 *Agni*. Thus, due to its *Yogavahi* nature, *Vata* can make *Agni* either type
122 depending on the condition. Balanced state of *Vata*, *Pitta*, and *Kapha* leads to
123 *Samagni*.^[8]

124 The substance that digests food entering through the mouth in the intestines
125 using various acidic secretions converting it into nutrient essence (*Rasa*) and
126 waste (*mala*) is called *Dhatvagni*. *Agni* is not the gross digestive juices, but a
127 subtle, invisible force that provides them power to digest.^[9]

128 There are thirteen types of *Agni* mentioned by Acharya Charaka.

129 Five *Bhutagni*, seven *Dhatvagni* and one *Jatharagni*. Five types of
130 *Bhutagni* are *Parthivagni*, *Apyagni*, *Tejagni*, *Vayavagni* and *Akashagni*. Food
131 consists of five elements. After the stomach's initial digestion, five specific
132 elemental *Agni* break down these components. Each *Bhutagni* processes its
133 matching element within the food. For
134 example, *Parthivagni* processes *parthiva*/earth nutrients. These refined nutrients
135 then specifically nourish the corresponding elements in body. *Dhatvagni*
136 are *Rasa*, *Rakta*, *Mansa*, *Meda*, *Asthi*, *Majja*, *Shukra*.

137 The seven body tissues (*Dhatus*) are metabolized by their respective
138 *Dhatvagni*, producing *Prasada* - the useful essence that nourishes the next
139 *dhatu* and *Kitta* - the waste or by-product, thus ensuring both nutrition and
140 elimination in the body.^[10]

141 Due to the predominance of *Kapha*, *Pitta* and *Vata* or due to their equilibrium,
142 the digestive fire assumes these respective forms:^[11,12,13]

143 **Samagni (Balanced Agni)**-When all three *Doshas* are in Balanced
144 state. *Balanced Agni* digests food properly when taken at the right time. Food is
145 properly digested, nutrients are well absorbed, and waste is removed
146 smoothly.

147 **Vishamagni (Irregular Agni)**-A state of *Agni* due to excess of *Vata*. *Vishamagni*
148 causes irregular digestion i.e. sometimes proper, sometimes improper.
149 It produces *Shoola* (colicky pain), *Udavarta*, *Atisara* (diarrhea), Abdominal
150 heaviness, Intestinal heaviness, Intestinal gurgling, *pravahana*.

151 **Tikshnagni (Sharp Agni)** - A state of *Agni* due to *Pitta* dominance or excess of
152 *Pitta*. It digests even an excessive quantity of food.

153 **Mandagni (Weak Agni)** - A state of *Agni* due to excess of *Kapha*. *Mandagni*
154 digests even small quantity of food slowly. It produces heaviness in abdomen
155 and head, *Kasa* (cough), *Shwasa* (breathlessness), *Lalatrava* (excess salivation),
156 *Vamana* (Vomiting), fatigue.

157 *Agnivikriti* (*Agni* dysfunction) plays a crucial role in *Agnimandya*. This
158 dysfunction may manifest as *Mandagni*, *Tikshnagni*, or *Vishamagni*, all of
159 which can be considered under the broader concept of *Agnimandya*.^[4]

160 The root cause of *Ajirna* (indigestion) is *Agnimandya*. Due to *Agnimandya*,
161 proper digestion of food does not occur, and the state of improperly digested
162 food is termed *Ajirna*.^[14] Most intestinal disorders originate from
163 *Ajirna*. Generally, *Ajirna* can be understood as indigestion. It is not an
164 independent disease, yet it is described because it is a major cause of many
165 diseases. *Charaka* and *Vagbhata* do not provide an independent description of
166 *Ajirna*; however, *Charaka* explains *Agnimandya* in the *GrahaniChikitsa* chapter.

167 Improper digestion of food is termed *Ajirna* (indigestion), and it leads to the
168 origin of many diseases. Any disturbance in bowel movements associated with
169 food intake is considered *Ajirna*. Imbalance or lack of digestive juices, along
170 with disturbed gut movement, leads to indigestion.

171 In *Madhava Nidana*, *Ajirna* is described as a specific disease with its types and
172 symptoms.^[15]

173 **Vidagdhajirna** -caused by predominance of *Kapha*.

174 **Vidagdhajirna** -due to excess acidic *Pitta* secretion; food remains partially
175 digested.

176 **Vishtabdhajirna** - due to aggravated *Vata*, leading to improper and delayed
177 digestion because of reduced or irregular secretions.

178 **Rasasheshajirna** - due to incomplete transformation of food into *Rasa*
179 (nutritive essence)

180

181 There is not mentioned *Agnimandya* as a specific disease in classical texts. But
 182 *Agnimandya* (Digestive insufficiency) gives rise to *Ajirna* as a clinical outcome.

183

184 ***Samanya Hetu* (general causes) of *Ajirna*:**

Aspect	<i>Vagbhata</i> [16]	<i>Sushruta</i> ^[17]	<i>Charaka</i> ^[18,19]	<i>Bhavaprakash</i> <i>a</i> ^[20]
Dietary causes	<i>Atimatraah ara</i> (overeating)	<i>Atyambupaana</i> (Exc ess water intake)	<i>Abhojana</i> (Fasting)	<i>Atyambupaana</i> (Excess water intake)
	<i>Apriyaahara</i> (Unpleasant)	<i>Vishamashana</i> (Imp roper quantity of diet)	<i>Atibhojana</i> (Overe ating)	<i>Vishamashana</i> (Improper quantity of diet)
	<i>Ruksha</i> (dry)		<i>Ajeernabhojana</i> (Eating even when food is indigested)	
	<i>Vishtambhi</i> (food causing constipatio n)		<i>Vishamaahara</i> (Irregular diet)	
	<i>Dagdha</i> (burnt food)		<i>Guru</i> (heavy)	
	<i>Guru</i> (Heavy)		<i>Sheeta</i> (cold)	
	<i>Heema</i> (Very cold)		<i>Dooshita</i> (Impure food)	
	<i>Ashuchi</i> (stale or impure)			
	<i>Vidahi</i> (food causing irritation)			
	<i>Atyambupa ana</i> (Excessively watery			

	food)			
Lifestyle factors	-	<i>Vegavidharana</i> (Suppression of natural urges)	<i>Vegavidharana</i> (Suppression of natural urges)	Even when food is taken in proper time and quantity, it is not digested well due to suppression of natural urges and improper sleep timings.
	-	<i>Anidra, Atinidra</i> (Irregular sleep habits)	<i>Vamana, Virechana, Snehana</i> (Improperly done <i>Panchakarma</i>)	<i>Trushna</i> (Excessive thirst)
	-		Improper <i>Dosha, Kala, Rutu</i> (Eating at wrong time or pattern, not suitable for season, time, body etc.)	
Psychological factors	<i>Shoka</i> (Grief) <i>Krodha</i> (Anger) <i>Kshudha</i> (Hunger) <i>Chinta</i> (Stress)	<i>Irshya</i> (Jealousy) <i>Bhaya</i> (fear) <i>Lobha</i> (greed) <i>Matsarya</i> (envy) <i>Roga</i> (illness) <i>Deenata</i> (debility)	<i>Chinta</i> (Stress) <i>Shoka</i> (Grief) <i>Bhaya</i> (fear) <i>Krodha</i> (Anger) <i>Dukkha</i> (pain)	Eating when suffering from <i>Bhaya</i> (fear) <i>Krodha</i> (Anger) <i>Lobha</i> (greed) <i>Matsarya</i> (envy) <i>Roga</i> (illness) <i>Deenata</i> (debility)
Effect on digestion	Food not digested properly	Even proper food may not digest	<i>Jatharagni</i> vitiated, cannot digest even light food	Stronger <i>hetumake</i> food more difficult to

				digest
--	--	--	--	--------

185

186

187

188

189

190 **SamanyaLakshanas of Ajirna:** General symptoms

Symptom	<i>Vagbhat</i> a ^[21]	<i>Bhavprakas</i> ha ^[22]	<i>Charak</i> a ^[23]	<i>Madha</i> v <i>Nidana</i> [24]
<i>Vibandha/Vishtambha</i> (Retention /obstruction of faeces in the abdomen)	✓	✓	✓	✓
<i>Maruta moodhata</i> (flatulence)	✓	✓		✓
<i>Mala atipravrutti</i> (increased frequency of stool)	✓	✓		✓
<i>Mutra-Purishavarodha</i> (Obstruction of urine & faeces)			✓	
<i>Sadan</i> (weakness, lethargy of body)			✓	
<i>Gaurava</i> (heaviness of body)	✓	✓		✓
<i>Shirahshoola</i> (Headache)			✓	
<i>Glani</i> (fatigue)	✓	✓		✓
<i>Moorchha</i> (Fainting)			✓	
<i>Bhrama</i> (Giddiness)	✓	✓	✓	✓
<i>Prishtha-katiGraha</i> (Stiffness in back & lumbar region)			✓	
<i>Jrumbha</i> (Yawning)			✓	
<i>Angamarda</i> (Generalized body ache)			✓	
<i>Trishna</i> (Excessive thirst)			✓	
<i>Jwar</i> (Fever)			✓	
<i>Vaman</i> (vomiting)			✓	
<i>Pravahana</i> (Straining during defecation)			✓	

<i>Arochaka</i> (Loss of appetite)			✓	
<i>Avipaka /Avibhaga</i> (Indigestion)			✓	

191

192 The concept of *Agni* in *Ayurveda* represents the integrated processes of
 193 digestion, transformation, and metabolic regulation within the body. ^[25]
 194 Contemporary understanding of gut microbiota, gastrointestinal motility, and
 195 metabolic homeostasis provides a meaningful framework to interpret these
 196 functions.

197 The gut microbiota contributes significantly to digestion, nutrient metabolism,
 198 immune modulation, and maintenance of intestinal integrity. A balanced
 199 microbial environment (eubiosis) supports normal physiological functioning ^[25],
 200 which reflects the state of *Samagni*. ^[11,12,13] In contrast, microbial imbalance
 201 leads to the generation of harmful metabolites, epithelial dysfunction, and
 202 inflammatory responses. ^[25] These features closely resemble the concept of
 203 *Ama*, described as a toxic by-product of impaired digestion in *Agnimandya*.

204 Gastrointestinal motility is essential for the proper movement and processing
 205 of ingested food. Coordinated peristalsis prevents bacterial overgrowth and
 206 ensures efficient digestion. When motility is impaired, stasis of luminal
 207 contents occurs, promoting bacterial proliferation and resulting in symptoms
 208 such as bloating, distension, and malabsorption. ^[25] This clinical picture aligns
 209 with the features of *Mandagni*, where delayed digestion (*Avipaka*) and
 210 abdominal distension (*Adhmana*) are prominent. ^[11,12,13]

211 Furthermore, the role of gut microbiota in regulating metabolic pathways,
 212 including energy extraction, insulin sensitivity, and inflammatory signalling,
 213 highlights its importance in maintaining systemic balance. Disruptions in these
 214 processes lead to metabolic disorders such as obesity and diabetes, reflecting a
 215 breakdown in metabolic regulation. This is comparable to the Ayurvedic view
 216 that impaired *Agni* leads to defective tissue nourishment and systemic disease
 217 manifestation. ^[25]

218 According to *CharakaSamhita*, the pathogenesis (*Samprapti*) of *Agnimandya*
 219 begins with the indulgence in various causative factors (*Hetusevana*), including
 220 dietary, lifestyle, environmental, and psychological influences. These factors
 221 lead to the vitiation of *Jatharagni* (*Agnidushti*), resulting in impaired digestive
 222 and metabolic functions. Consequently, even light and easily digestible food
 223 fails to undergo proper digestion and transformation. This impaired metabolic

224 process leads to the formation of *Ama*, an undigested, toxic metabolic by-
225 product with harmful properties. The accumulation of *Ama* disrupts normal
226 physiological functions and acts as a key factor in the initiation and progression
227 of various diseases (*Vyadhi*)^[26]. The clinical features described in classical
228 Ayurvedic texts demonstrate notable similarity with the symptom profile of
229 dyspepsia in modern medicine.

230 The manifestations of *Agnimandya* such as *Arochaka*^[21-24] (loss of appetite)
231 resemble anorexia or reduced appetite observed in dyspepsia.^[27] *Avipaka*
232 (indigestion) is comparable to impaired digestion and postprandial
233 discomfort.^[27] *Adhmana*^[21-24] (abdominal distension) parallels bloating and
234 fullness, while *Udgara* (belching) corresponds to belching and gas formation.^[27]
235 The sensation of heaviness in the abdomen (*Gaurava*) is similar to postprandial
236 fullness. Symptoms like *Chhardi* or *Utklesha*^[21-24] (nausea and tendency to
237 vomit) are comparable to nausea with or without vomiting in dyspepsia.^[27]
238 Additionally, *Daha*^[21-24] (burning sensation), especially in *Pittaja* conditions,
239 reflects epigastric burning or acidity. *Glani*^[21-24] (fatigue and lethargy) can be
240 understood alongside general malaise and reduced well-being reported in
241 dyspeptic patients.^[27]

242 Thus, the combined insights from microbiota research, gastrointestinal
243 motility, and metabolic studies collectively mirror the functional scope
244 attributed to *Agni*. Their disturbance provides a scientific basis to interpret
245 *Agnimandya* as a state of impaired digestion, altered transformation, and
246 systemic imbalance.

247

248 **Management**^[28]

249 *Agnimandya* is due to dominance of three *Doshas*. Treatment should be
250 designed according to that.

251 Maintenance of *Samagni* (balanced digestive fire) is essential for good health.
252 The management of *Vishamagni*, *Tikshnagni*, and *Mandagni* should be done
253 according to the predominance of *Doshas*.

254 • ***Samagni* (Balanced *Agni*):**

255 To maintain *Samagni*, proper regulation of diet and lifestyle is necessary. Food
256 should be taken in appropriate quantity, should be wholesome, and easy to
257 digest. Maintaining mental balance is equally important.

258 • ***Vishamagni* (Irregular *Agni* - *Vata* predominant):**

259 Since *Vata* is dominant, *Vata*-pacifying treatment should be adopted.

260 Unctuous, sour, and salty substances are beneficial.
261 *Langhana* (fasting therapy) should be given, but not in the form of complete
262 fasting; instead, light and easily digestible food should be provided, as
263 complete fasting is not suitable for *Vata*.

264 • ***Tikshnagni (Sharp Agni-Pitta predominant):***

265 Due to increased *Pitta*, the digestive fire becomes intense; hence, *Pitta*-
266 pacifying treatment is required.

267 Diet should include heavy, cooling, and unctuous substances.

268 Items like buttermilk, milk, and *manda*, *payasa* are beneficial.

269 • ***Mandagni (Diminished Agni-Kapha predominant):***

270 Due to *Kapha*, digestive fire becomes weak; therefore, initial fasting
271 (*Langhana*) is advised.

272 If there is *Utklesha* (*Kapha* aggravation, *Vamana* (emesis) should be
273 administered.

274 Medicines with *Deepana-Pachana* properties, along with pungent, bitter, and
275 alkaline substances, should be used.

276 As *Agni* improves, diet should be gradually increased.

277

278 **Prevention**

279 To maintain *Agni* and *Doshas* in balanced state, the daily regimen, seasonal
280 regimen, rules of *ahara* and *vihara* given below should be followed as
281 preventive measures.

282 ■ ***Dinacharya (Daily regimen)*** ^[29]. *Dinacharya* in *Ayurveda* refers to the daily
283 regimen designed to maintain physical, mental, and digestive balance. It
284 includes practices like waking early, oral hygiene, exercise, proper meals,
285 and adequate sleep, all performed in a disciplined routine.

286 ■ ***Rutucharya and Rutushodhana (Seasonal regimen and purification)*** ^[30].
287 Adapting diet and lifestyle according to seasonal changes helps prevent
288 diseases and supports overall health by aligning the body with
289 environmental variations. *Rutushodhana* refers to performing purification
290 therapies (*Shodhana*) at specific seasons to eliminate accumulated *Doshas*
291 and maintain the balance of the body. According to *Acharya Charaka*,
292 *Doshas* naturally accumulate and get aggravated due to seasonal variations.
293 Therefore, seasonal detoxification procedures such as *Vamana*, *Virechana*,
294 and *Basti* are advised to prevent disease and maintain optimal health and
295 digestion (*Agni*).

296 ■ ***Apathyaahara (Food to be avoided)*** ^[31].

- 297 • Eating compatible (wholesome) and incompatible (unwholesome)
 298 foods together is known as *Samashana*.
- 299 • Irregular eating habits, such as consuming food in too little or
 300 excessive quantity, or not following a fixed meal time, are termed
 301 *Vishamashana*.
- 302 • Eating again before the previously consumed food is fully digested is
 303 called *Adhyashana*.
- 304 • Consuming food in these improper ways, *Samashana*, *Vishamashana*,
 305 and *Adhyashana*, leads to the development of severe and serious
 306 diseases.
- 307 • Foods like pizza, burger, baked snacks, food made of refined flour like
 308 noodles, pasta etc. sugar containing sauces, cold drinks, refrigerated
 309 food, reheated food, processed and ready to cook food or fried
 310 snacks. Packaged and canned food items.
- 311
- 312 ■ **Pathyahara(Food to be consumed)** ^[32,33]

313

Item	Description / Properties
<i>Ghruta</i>	Oleation (<i>Snehana</i>) is considered the best therapy for kindling a weak digestive fire (<i>Mandagni</i>). However, when the digestive fire is excessively stimulated or aggravated, oleation alone is not sufficient to pacify it; instead, proper diet (<i>Ahara</i>) plays a major role in bringing it back to normal.
<i>JeernaShalishashtik</i> (Old Rice)	Rice that is thoroughly washed, cooked and then drained of its starchy water (<i>manda</i>), when eaten hot, becomes easily digestible.
<i>Mudga</i> (Green gram)	It is light to digest, absorbent (useful in IBS), balances <i>Kapha</i> and <i>Pitta</i> , cooling in effect. It can be used in various recipes like soup, <i>daal-rice</i> , <i>khichadi</i> , <i>cheela</i> etc.
<i>Kulattha</i>	It is <i>ushna</i> (hot) in potency. It balances <i>Kapha</i> and <i>Vata</i> , useful in <i>Vatanulomana</i> . It can be used in the form of <i>Yusha</i> (soup) or curry.
<i>Manda</i>	It is made of rice, the thin fluid resembling water drained out immediately after boiling. It is <i>Agnideepak</i> (Enhances appetite and improves digestion). It causes <i>Vatanulomana</i> (easy movement of faeces or flatus). It relieves thirst, exhaustion, helps in digestion and stimulates digestive fire.

<i>Lajamanda</i>	Made of Puffed rice. Relieves thirst, diarrhoea, burning sensation, fatigue, improves appetite and digestion. It used in <i>Mandagni</i> , <i>Vishamagni</i> , children, elderly people. Puffed rice can be consumed like popcorns when one has to protect their <i>Agni</i> .
<i>Peya</i>	Slightly thicker to <i>manda</i> , but still only liquid is <i>Peya</i> . It relieves thirst, hunger, exhaustion, debility, stimulates <i>Agni</i> and helps in digestion. It causes easy elimination of <i>mala</i> .
<i>Vilepi</i>	Thick rice gruel. Less liquid more solid. Light to digest and satisfying.
<i>Yusha</i> (Soup)	Easily digestible.
<i>Kaalshaka</i>	Improves appetite, supports digestion if properly cooked.
<i>Changeri</i>	Indian sorrel, Amrul. Hot potent. Enhances <i>Jatharagni</i> and improves appetite. Balances <i>Kapha</i> and <i>Vata</i> .
<i>Karavellaka</i>	It stimulates <i>Agni</i> , mitigates <i>Kapha</i> , thus helps in digestion.
<i>Tumba</i> (alabu)	It stimulates appetite, enhances taste and is heart-friendly.
<i>Kurdu</i>	Enhances appetite and digestion.
<i>Rasona</i> (Garlic)	It stimulates appetite, enhances taste and is heart-friendly.
<i>Surana</i> (Yam)	It is light to digest, mitigates <i>Kapha</i> , stimulates appetite, enhances taste.
<i>Draksha</i> (Grapes)	It helps in elimination of urine and faeces.
<i>Dadima</i> (Pomegranate)	It is sweet, light to digest, stimulates appetite, enhances taste.
<i>Panaka</i>	Relieves fatigue, hunger, thirst and exhaustion.
<i>Rajakshava</i> (bottle gourd vegetable)	Beneficial in diseases like IBS and piles.
<i>Vastuka</i>	Enhances appetite, digestion, helps in diseases like IBS, piles, balances <i>Kapha</i> and <i>Vata</i> .
<i>Patola</i>	Appetizer/ improves taste. <i>Krumighna</i> .
<i>Kushmanda</i> (Ash gourd)	Ripened <i>Kushmanda</i> is sweet and sour in taste. Slightly alkaline and light. It helps in elimination of urine and faeces and alleviates all three vitiated <i>Doshas</i> . Enhances <i>Agni</i> .
<i>Mrudvika</i> (Raisins)	Relieves excessive thirst, burning sensation, bleeding disorders, bloating, bitter taste, dryness of mouth, improves nourishment, coolant.

<i>Ardra</i> (Ginger)	Enhances taste, improves appetite.
<i>JambiriNimbu</i> (Lemon)	Appetiser, enhances <i>Agni</i> , pleasant-smelling or aromatic. Improves mouth odour. Enhances palatability of food.
<i>Ajamoda</i> (Ajwain/Carrom seeds)	Hot in potency. Relieves bloating, improves digestion.
<i>Dhanyaka</i> (Coriander)	Enhances taste and aroma.
<i>Jeeraka</i> (Cumin seeds)	Balances <i>Kapha</i> and <i>Vata</i> .
<i>Heeng</i> (Asafoetida)	Balances <i>Vata</i> and <i>Kapha</i> , relieves constipation, enhances taste and appetite, makes food easily digestible.
<i>Shunthi</i> (dry ginger)	Enhances taste, improves digestion.

314

315 ■ **Vihara-**

- 316 • **Vyayama (Exercise)**-Regular exercise like walking, jogging, playing any
317 sport, dancing, swimming help to possess well-kindled digestive fire.
- 318 • **Yogic practices**- Regular Yogic practices help improve flexibility,
319 digestion, concentration, and reduces stress, thereby promoting overall
320 health and balance in life.

321

- 322 ■ **Timely food consumption** ^[34] - One should take food at the proper time,
323 when natural hunger arises, and when the previously consumed food has
324 been digested. One should eat only after the symptoms of proper hunger
325 like *Udgarshuddhi* (clear belching), *Utsaha* (enthusiasm),
326 *YathochitaMalotsarga* (appropriate disposal of excretory products),
327 *Laghuta* (lightness in body), *Kshudha-trishnapravritti*(Hunger and thirst)
328 appear. It has clearly emphasized the importance of the appropriate timing
329 of meals.As per *Kshemakutuhala*, after eating once, you should wait for
330 about two *yamas* or six hours to pass and then eat when the third *prahara*
331 begins, not in between. on the other hand, once two *yamas* have passed,
332 you should not stay hungry, you should eat. If you eat before two *yamas*
333 are completed It can cause *Agnivikara* (digestive disorders). If you do not
334 eat even after two *yamas*, it can lead to loss of strength ^[35].

335

- 336 ■ **Eka kala bhojana (Eating once a day)** ^[36]- For a person who has weak
337 digestive fire, this practice of one-time eating helps to stimulate and

338 strengthen their *Jatharagni*. Even this food should be given in small
339 quantity to those who have weak digestion or those suffering from any
340 disease^[37].

341

342 ■ **AharavidhiVidhana**^[38]- Acharya *Charaka* has told the rules those should be
343 followed while eating food.

- 344 ● Food should be taken after the previous meal is digested
- 345 ● In a proper, unctuous quantity
- 346 ● Neither too hot and nor too cold
- 347 ● It should be freshly cooked
- 348 ● One should eat in a suitable place with agreeable surroundings
- 349 ● Neither too fast nor too slow
- 350 ● Without talking or laughing
- 351 ● With full concentration and self-awareness.

352 A person should eat after thinking whether the food is good or harmful
353 for them. This depends on *Prakriti*, season, digestive power, disease,
354 food qualities, and quantity.

355 ■ **Avoidance of Viruddhahara**^[39]-*Viruddhahara* refers to incompatible food
356 combinations that disturb digestion and metabolism, leading to the
357 formation of toxins (*Ama*) and imbalance in the body. For example, milk
358 with citrus fruits (e.g., milk + orange), milk with fish, fruit with heavy meals
359 (e.g., fruit + fast food), honey heated or mixed in very hot drinks, milk and
360 sour fruits like in smoothies etc.

361

362 ■ **Mita Jalapana**^[40]-Excessive water intake can cause indigestion, while
363 insufficient intake may also lead to similar problems. Therefore, water
364 should be consumed according to thirst and in amounts sufficient to satisfy
365 it. The daily water requirement can't be the same for every individual, as it
366 varies based on factors like body constitution, activity level, climate, and
367 health status.

368

369 DISCUSSION

370 *Agnimandya* represents a central pathological state in *Ayurveda* where
371 impaired *Agni* disrupts digestion, metabolism, and tissue nourishment.

372 Classical descriptions emphasize that it is not merely a localized
373 gastrointestinal disturbance but a systemic dysfunction initiating disease
374 through the formation of *Ama*.

375 The reviewed literature shows that *Agnimandya* arises from multidimensional
376 factors - dietary indiscretions, irregular lifestyle, and psychological stress which
377 collectively impair *Jatharagni*. While traditional texts describe this in terms of
378 Dosha imbalance, modern parallels such as dyspepsia, gut dysbiosis, and
379 altered gastrointestinal motility provide a functional interpretation. However,
380 these correlations remain conceptual rather than equivalent; *Agni*
381 encompasses a broader regulatory role than any single modern physiological
382 parameter.

383 A critical observation is that lifestyle (*Vihara*) plays an equally important role as
384 diet (*Ahara*). *Ayurveda* clearly indicates that even wholesome food fails to
385 digest in the presence of disturbed routines, mental stress, or improper eating
386 behaviour. Practices such as irregular meal timing, suppression of natural
387 urges, inadequate sleep, and sedentary habits directly impair *Agni*. Over time,
388 persistent *Agnimandya* leads to chronic *Ama* accumulation, which may
389 manifest as metabolic disorders, inflammatory conditions, or functional
390 gastrointestinal diseases.

391 Preventive strategies in *Ayurveda* therefore extend beyond pharmacological or
392 dietary measures. Regular exercise (*Vyayama*), adherence to daily
393 (*Dinacharya*) and seasonal (*Ritucharya*) regimens, mindful eating practices
394 (*Ahara Vidhi*), and psychological balance are essential to maintain *Agni*. These
395 measures help regulate digestive rhythms, improve metabolic efficiency, and
396 prevent chronic disease progression.

397 **CONCLUSION**

398 *Agnimandya* is a fundamental disorder of digestion and metabolism that acts
399 as a precursor to many systemic diseases. It is a multifactorial condition
400 influenced by diet, lifestyle, and mental health. While modern concepts such as
401 dyspepsia and gut microbiota disturbances offer partial parallels, the Ayurvedic
402 concept of *Agni* provides a more integrative framework.

403 Early recognition and correction of *Agnimandya* are crucial to prevent chronic
404 disease development. Along with appropriate therapeutic interventions,
405 Lifestyle modification forms the foundation of prevention. Maintaining regular
406 meal timings, practicing mindful eating, ensuring adequate sleep, engaging in

407 physical activity, and following seasonal regimens are essential to preserve
408 *Agni*.

409 Thus, a holistic approach combining *Nidana Parivarjana*, appropriate *Ahara*,
410 and disciplined *Vihara* is key to restoring digestive balance, preventing *Ama*
411 formation, and avoiding long-term complications.

412 **Summary**

413 *Agnimandya*, the impairment of *Jatharagni* (digestive fire), is regarded in
414 Ayurveda as a fundamental pathological condition responsible for the initiation
415 of numerous diseases. Disturbance of *Agni* leads to improper digestion,
416 formation of *Ama*, and subsequent impairment of metabolic and physiological
417 functions. Classical *Ayurvedic* texts describe dietary indiscretions, unhealthy
418 lifestyle practices, and psychological stress as major causative factors. The
419 clinical manifestations of *Agnimandya* closely resemble modern
420 gastrointestinal disorders such as functional dyspepsia, altered gut motility,
421 dysbiosis, and metabolic dysfunction. Contemporary understanding of gut
422 microbiota and digestive physiology provides a scientific perspective for
423 interpreting the broader functions attributed to *Agni*. Management
424 emphasizes *Nidana Parivarjana*, *Deepana-Pachana* therapies, appropriate
425 *Ahara* and *Vihara*, and maintenance of balanced *Agni* through daily and
426 seasonal regimens. Thus, *Agnimandya* should be viewed as a multifactorial
427 disorder requiring a holistic approach, with restoration and preservation of
428 *Agni* being essential for maintaining health and preventing disease.

429

430

431

432

433 **REFERENCES**

- 434 1. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
435 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa*Sthana 15/3–4.
- 436 2. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
437 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. Sutrasthana 25/45.
- 438 3. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
439 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa*Sthana 15/42-44.
- 440 4. Joshi YG. *KayaChikitsa*. Pune: Sahitya Vitaran; 2009. *Agnimandya* chapter; p. 420.

- 441 5. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
442 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa*Sthana 15/56.
- 443 6. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
444 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa*Sthana 15/39-40.
- 445 7. Shastri AD, editor. *SushrutaSamhita*. Vol. 1. *Ayurvedatatvasandipika* Hindi
446 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2020. Sutra Sthana
447 21/10.
- 448 8. Upadhyaya Y, editor. Madhava Nidana with Madhukosha Sanskrit commentary and
449 Vidyotini Hindi commentary. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
450 *AgnimandyadhiNidanam*, p. 220.
- 451 9. Upadhyaya Y, editor. Madhava Nidana with Madhukosha Sanskrit commentary and
452 Vidyotini Hindi commentary. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
453 *AgnimandyadhiNidanam*, p. 220.
- 454 10. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
455 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa*Sthana 15/13-16.
- 456 11. Upadhyaya Y, editor. Madhava Nidana with Madhukosha Sanskrit commentary and
457 Vidyotini Hindi commentary. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
458 *AgnimandyadhiNidanam*, p. 219.
- 459 12. Shastri AD, editor. *SushrutaSamhita*. Vol. 1. *Ayurvedatatvasandipika* Hindi
460 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2020. Sutra Sthana
461 35/29.
- 462 13. Misra BS, editor. *Bhavaprakasha* of Shri Bhavamisra. Vol. 2. Vidyotini Hindi
463 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2015. Adhyaya 6thp. 67.
- 464 14. Upadhyaya Y, editor. Madhava Nidana with Madhukosha Sanskrit commentary and
465 Vidyotini Hindi commentary. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
466 *AgnimandyadhiNidanam*, p. 224.
- 467 15. Upadhyaya Y, editor. Madhava Nidana with Madhukosha Sanskrit commentary and
468 Vidyotini Hindi commentary. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
469 *AgnimandyadhiNidanam*, p. 225.
- 470 16. Paradkara, editor. *Astanghrdaya* of *Vagbhata*, *Sarvangasundara* of Arundatta and
471 *Ayurvedarasayana* of Hemadri Commentaries. Varanasi: Chaukhamba Sanskrit,
472 Reprint 2011. Sutra sthana 8/31-33.
- 473 17. Shastri AD, editor. *SushrutaSamhita*. Vol. 1. *Ayurvedatatvasandipika* Hindi
474 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2020. Sutra Sthana
475 46/507-508.
- 476 18. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
477 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa*Sthana 15/42-44.
- 478 19. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
479 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Vimana* Sthana2/9.
- 480 20. Misra BS, editor. *Bhavaprakasha of Shri Bhavamisra*. Vol. 2. Vidyotini Hindi
481 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2015.
482 *JatharagniVikaradhikara* 6/11:68.

- 483 21. Paradkara, editor. *Astanghrdaya of Vagbhata*, Sarvangasundara of Arundatta and
484 *Ayurvedarasayana of Hemadri Commentaries*. Varanasi: Chaukhamba Sanskrit,
485 Reprint 2011. Sutra sthana 8/30.
- 486 22. Misra BS, editor. *Bhavaprakasha of Shri Bhavamisra*. Vol. 2. Vidyotini Hindi
487 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2015.
488 *JatharagniVikaradhikara* 6/15:69.
- 489 23. Kushwaha HC. *Charak Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
490 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa* Sthana 15/45-49.
- 491 24. Upadhyaya Y, editor. *Madhava Nidana with Madhukosha Sanskrit commentary and*
492 *Vidyotini Hindi commentary*. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
493 *AgnimandyadhiNidanam*, shloka 27:225.
- 494 25. Singh R, Zogg H, Wei L, et al. Gut Microbial Dysbiosis in the Pathogenesis of
495 Gastrointestinal Dysmotility and Metabolic Disorders. *J Neurogastroenterol Motil.*
496 2021;27(1):19-34. doi:10.5056/jnm20149
497 <https://pmc.ncbi.nlm.nih.gov/articles/PMC7786094/>
498
- 499 26. Kushwaha HC. *Charak Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2.
500 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa* Sthana 15/42-44.
- 501 27. Harer KN, Hasler WL. Functional Dyspepsia: A Review of the Symptoms, Evaluation,
502 and Treatment Options. *Gastroenterol Hepatol (N Y)*. 2020;16(2):66-74.
503 <https://pmc.ncbi.nlm.nih.gov/articles/PMC8132673/>
504
- 505 28. Shastri BL, editor. *Yogaratanakara with Vidyotini Hindi commentary by Lakshmipati Shastri*.
506 Varanasi: Chaukhamba Prakashan; 2012. *AgnimandyaNidanam*; p. 310.
- 507 29. Misra BS, editor. *Bhavaprakasha of Shri Bhavamisra. Poorvakhanda*. Vidyotini Hindi
508 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2015.
509 *Dinacharyadiprakarana* 12-13.
- 510 30. Kushwaha HC. *Charak Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
511 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. Sutra Sthana 6/9-48.
- 512 31. Kushwaha HC. *Charak Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 2. Reprint
513 ed. Varanasi: Chaukhamba Orientalia; 2009. *Chikitsa* Sthana 15/242-243
- 514 32. Kushwaha HC. *Charak Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
515 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. Sutra Sthana 27.
- 516 33. Paradkara, editor. *Astanghrdaya of Vagbhata*, Sarvangasundara of Arundatta and
517 *Ayurvedarasayana of Hemadri Commentaries*. Varanasi: Chaukhamba Sanskrit,
518 Reprint 2011. Sutra sthana 6.
- 519 34. Upadhyaya Y, editor. *Madhava Nidana with Madhukosha Sanskrit commentary and*
520 *Vidyotini Hindi commentary*. 7th ed. Varanasi: Chaukhamba Orientalia; 2002.
521 *AgnimandyadhiNidanam*, Sutra 24, p. 237.
- 522 35. Kshemasharma, Kshemakutuhala, edited with Marathi translation by Vd. Y.G. Joshi,
523 2nd ed. Pune Sahitya Vitaran, 20/4.

- 524 36. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
525 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. Sutra Sthana 25/40.
- 526 37. Shastri AD, editor. *SushrutaSamhita*. Vol. 1. *Ayurvedatatvasandipika* Hindi
527 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2020. Uttara Sthana
528 64/62-63.
- 529 38. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
530 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. Vimana Sthana 1/24.
- 531 39. Kushwaha HC. Charak *Samhita*. Ayurved-Dipika's Ayusi Hindi commentary. Vol. 1.
532 Reprint ed. Varanasi: Chaukhamba Orientalia; 2009. Sutra Sthana 26/86-87.
- 533 40. Shastri AD, editor. *SushrutaSamhita*. Vol. 1. *Ayurvedatatvasandipika* Hindi
534 commentary. Reprint ed. Varanasi: Chaukhamba Orientalia; 2020. Sutra Sthana
535 46/500.

536

537

538

539

540

541

542

543

544

545

546

547

548

549

550

551

552

553

554

555

556

557

558

UNDER PEER REVIEW IN IJAR