

A CRITICAL REVIEW OF PANCHAKARMA AND YOGA-BASED TREATMENT  
MODALITIES IN GRAHANI ROGA W.S.R. TO IRRITABLE BOWEL SYNDROMEMoumita Nath Mandal<sup>\*1</sup>, Dr. Debojyoti Sain<sup>2</sup>, Dr. Biswajit Mandal<sup>3</sup><sup>1</sup>Assistant Professor, Ayurveda Principle of Yoga, Yogasri Yoga and Naturopathy Medical College & Hospital, Kolkata, West Bengal, India.<sup>2</sup>Ayurveda Panchakarma Consultant, Kolkata, West Bengal, India.<sup>3</sup>Registrar, Paschim Banga Ayurved Parishad, Kolkata, West Bengal, India.**\*Corresponding Author: Moumita Nath Mandal**

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Article Received on 21/07/2025

Article Revised on 11/08/2025

Article Accepted on 31/08/2025

## ABSTRACT

**Background:** *Grahani Roga* is a chronic gastrointestinal disorder described in Ayurveda, characterized by impaired function of *Grahani* (small intestine and duodenum). It shares clinical similarities with Irritable Bowel Syndrome (IBS), a prevalent functional bowel disorder in modern medicine.<sup>[1]</sup> Conventional treatments for IBS provide symptomatic relief but often fail to address recurrence and psychosomatic aspects.<sup>[2]</sup> Panchakarma and Yoga offer a holistic approach targeting *Agni* (digestive fire), *Dosha* balance, and mind-body harmony. **Objective:** To critically review treatment modalities of *Grahani Roga* with special emphasis on Panchakarma and Yoga, correlating with IBS management. **Methods:** Review of Ayurvedic classical texts (*Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*), contemporary commentaries, and modern scientific publications on IBS, Panchakarma, and Yoga interventions. **Results:** Panchakarma therapies such as *Virechana*, *Basti*, and *Shirodhara* demonstrated beneficial effects in symptom reduction, gut motility regulation, and stress alleviation.<sup>[3-5]</sup> Yoga practices including *Asanas*, *Pranayama*, and *Meditation* significantly improved IBS symptom severity and quality of life.<sup>[6-8]</sup> **Conclusion:** Integrative use of Panchakarma and Yoga offers a comprehensive management strategy for *Grahani Roga*/IBS, addressing both gastrointestinal pathology and associated psychosomatic factors. Further randomized controlled clinical trials are warranted.

**KEYWORDS:** *Grahani Roga*, Irritable Bowel Syndrome, Panchakarma, Yoga, Ayurveda.

## INTRODUCTION

*Grahani Roga* is extensively discussed in Ayurveda under *Maha Agni Vyadhi*, arising from deranged *Agni* leading to improper digestion and assimilation.<sup>[9]</sup> Symptoms include *Atisara* (diarrhea), *Vibandha* (constipation), *Udarashoola* (abdominal pain), and *Arochaka* (anorexia).<sup>[10]</sup> Modern medicine correlates this with IBS, defined by Rome IV criteria as recurrent abdominal pain with altered bowel habits.<sup>[11]</sup> IBS has a prevalence of 10–20% worldwide, more common in women.<sup>[12]</sup>

While modern pharmacological treatments (antispasmodics, laxatives, antidepressants) provide partial relief, they lack curative potential.<sup>[13]</sup> Ayurveda emphasizes *Nidana Parivarjana* (removal of causative factors), *Deepana-Pachana* (digestive stimulants), Panchakarma, and supportive *Rasayana* therapy, which can be complemented by Yoga practices for stress and gut-brain axis modulation.<sup>[14,15]</sup>

## Grahani Roga in Ayurvedic Perspective

Classical texts describe *Grahani* as the seat of *Agni* responsible for digestion and metabolism.<sup>[16]</sup> Deranged *Agni* results in *Ama* formation, impairing intestinal function.<sup>[17]</sup> Charaka categorized *Grahani* under *Ashtamahagada* (difficult to cure diseases).<sup>[18]</sup> Treatment aims at *Agni Deepana*, *Ama Pachana*, *Grahani Sthapana*, and *Dosha Shamana*.<sup>[19]</sup>

- **Deepana-Pachana:** *Pippali*, *Shunthi*, *Chitraka* are prescribed to stimulate digestion.<sup>[20]</sup>
- **Dietetics:** Easily digestible, light (*Laghu*) diet, use of buttermilk (*Takra Kalpana*) is emphasized.<sup>[21]</sup>
- **Rasayana:** *Guduchi*, *Amalaki*, and *Haritaki* promote gut immunity.<sup>[22]</sup>

## IBS in Modern Perspective

IBS is a functional bowel disorder involving visceral hypersensitivity, dysmotility, microbiome imbalance, and psychosocial stress.<sup>[23]</sup> Subtypes include IBS-D (diarrhea), IBS-C (constipation), IBS-M (mixed), and IBS-U (unclassified).<sup>[24]</sup> Management focuses on diet

modification, pharmacological agents, psychological interventions, and probiotics.<sup>[25]</sup> Stress plays a critical role via the hypothalamic–pituitary–adrenal (HPA) axis, making mind–body interventions vital.<sup>[26]</sup>

### Role of Panchakarma in Grahani/IBS

- **Virechana** (*Purgation therapy*): Effective in *Pitta–Kapha* predominant IBS with *Ama*, cleansing *Pitta* from the *Grahani*.<sup>[27]</sup>
- **Basti** (*Medicated enema*): Considered *Ardha Chikitsa* for *Vata* disorders; beneficial in IBS-C and IBS-M by regulating *Apana Vata* and colon motility.<sup>[28]</sup>
- **Shirodhara**: Calms stress and anxiety, reducing gut hypersensitivity.<sup>[29]</sup>
- **Takra Dhara**: Buttermilk stream therapy improves gut function and metabolism.<sup>[30]</sup>
- **Rasayana Chikitsa**: *Guduchi*, *Shatavari*, *Yashtimadhu* enhance gut immunity and restore intestinal mucosa.<sup>[31]</sup>

### Role of Yoga in Grahani/IBS

Yoga emphasizes body–mind equilibrium, reducing stress and regulating gut–brain axis.<sup>[32]</sup>

- **Asanas**: *Pavanamuktasana*, *Trikonasana*, *Bhujangasana* strengthen abdominal muscles, regulate bowel function.<sup>[33]</sup>
- **Pranayama**: *Anuloma-Viloma*, *Kapalabhati*, *Bhramari* reduce autonomic hyperactivity, enhance parasympathetic tone.<sup>[34]</sup>
- **Meditation & Mindfulness**: Proven to lower IBS symptom severity and anxiety scores.<sup>[35]</sup>
- Clinical trials show Yoga is as effective as low-FODMAP diet in IBS management.<sup>[36]</sup>

### DISCUSSION

The integrative approach of Panchakarma and Yoga addresses both somatic and psychosomatic aspects of *Grahani/IBS*. Panchakarma detoxifies and restores intestinal function, while Yoga reduces stress, modulates the HPA axis, and improves quality of life.<sup>[37,38]</sup> Modern studies confirm that Ayurvedic herbal formulations and mind–body practices have significant clinical efficacy.<sup>[39]</sup> However, lack of large-scale randomized trials limits universal acceptance.<sup>[40]</sup>

### CONCLUSION

*Grahani Roga* resembles IBS in its chronicity and multifactorial etiology. Panchakarma therapies combined with Yoga provide a holistic treatment strategy targeting *Agni*, *Dosha*, intestinal function, and mind–body balance. Integrative clinical research is needed to establish evidence-based Ayurvedic protocols for global acceptance.

### REFERENCES

- Longstreth GF, Thompson WG, Chey WD, Houghton LA, Mearin F, Spiller RC. Functional bowel disorders. *Gastroenterology*, 2006; 130(5): 1480–1491.
- Chey WD, Kurlander J, Eswaran S. Irritable bowel syndrome: A clinical review. *JAMA*, 2015; 313(9): 949–958.
- Sharma PV. *Charaka Samhita*. Chikitsa Sthana, Grahani Chikitsa Adhyaya, Verse 151–165. Chaukhamba Orientalia, Varanasi, 2012; 456.
- Sushruta. *Sushruta Samhita*. Uttara Tantra, Grahani Roga Chikitsa. Chaukhamba Sanskrit Pratishthan, 2014; 322.
- Vagbhata. *Ashtanga Hridaya*. Chikitsa Sthana, Grahani Chikitsa Adhyaya. Chaukhamba Krishnadas Academy, 2015; 288.
- Sengupta P. Health impacts of yoga and pranayama: A state-of-the-art review. *Int J Prev Med*, 2012; 3(7): 444–458.
- Kuttner L, Chambers CT, Hardial J, Israel DM, Jacobson K, Evans K. A randomized trial of yoga for adolescents with irritable bowel syndrome. *Pain Res Manag*, 2006; 11(4): 217–223.
- Zernicke KA, Campbell TS, Blustein PK, Fung TS, Johnson JA, Bacon SL, Carlson LE. Mindfulness-based stress reduction for the treatment of irritable bowel syndrome symptoms. *J Altern Complement Med*, 2013; 19(9): 801–810.
- Tripathi B. *Charaka Samhita*. Sutra Sthana, Agnivesha, Verse 28–32. Chaukhamba Surbharati Prakashan, 2013; 112.
- Murthy KRS. *Ashtanga Sangraha*. Chikitsa Sthana. Chaukhamba Orientalia, 2010; 365.
- Drossman DA, Hasler WL. Rome IV—Functional GI disorders. *Gastroenterology*, 2016; 150(6): 1257–1261.
- Canavan C, West J, Card T. The epidemiology of irritable bowel syndrome. *Clin Epidemiol*, 2014; 6: 71–80.
- Ford AC, Moayyedi P, Lacy BE, Lembo AJ, Saito YA, Schiller LR, Soffer EE, Spiegel BM, Quigley EM. American College of Gastroenterology Monograph on IBS. *Am J Gastroenterol*, 2014; 109(1): S2–26.
- Sharma H, Chandola HM, Singh G, Basisht G. Utilization of Ayurveda in health care: An approach for prevention, health promotion, and treatment of disease. *Part 2—Ayurveda in primary health care. J Altern Complement Med*, 2007; 13(10): 1135–1150.
- Patwardhan B, Mutalik G, Tillu G. *Integrative Approaches for Health: Biomedical Research, Ayurveda and Yoga*. Academic Press, 2015.
- Sharma PV. *Charaka Samhita*. Vimana Sthana, Grahani Dosha. Chaukhamba Orientalia, 2012; 214.
- Dwivedi R, Dwivedi A. Concept of *Ama* in Ayurveda. *AYU*, 2012; 33(3): 417–421.
- Murthy KRS. *Sushruta Samhita*. Nidana Sthana, Ashta Mahagada Adhyaya. Chaukhamba Orientalia, 2010; 290.
- Tripathi B. *Ashtanga Hridaya*. Sutra Sthana. Chaukhamba Sanskrit Series Office, 2012; 177.
- Panda AK, Kar S, Behera P, et al. Clinical efficacy of *Pippali* in gastrointestinal disorders. *AYU*, 2015; 36(1): 30–34.

21. Acharya YT. *Charaka Samhita* with Ayurveda Dipika Commentary. Chaukhamba, 2011; 122.
22. Baliga MS. Review of scientific validation of Rasayana drugs. *Pharmacogn Rev.*, 2010; 4(8): 159–168.
23. Mayer EA. Gut feelings: The emerging biology of gut–brain communication. *Nat Rev Neurosci*, 2011; 12(8): 453–466.
24. Lacy BE, Mearin F, Chang L, et al. Bowel disorders. *Gastroenterology*, 2016; 150(6): 1393–1407.
25. Ford AC, Quigley EM, Lacy BE, et al. Efficacy of prebiotics, probiotics, and synbiotics in IBS. *Am J Gastroenterol*, 2014; 109(10): 1547–1561.
26. Kennedy PJ, Clarke G, Quigley EM, Groeger JA, Dinan TG, Cryan JF. Gut microbiome and stress. *Nat Rev Gastroenterol Hepatol*, 2014; 11(4): 213–223.
27. Shukla V, Tripathi RD. Clinical evaluation of *Virechana Karma* in Grahani Roga. *AYU.*, 2011; 32(3): 375–381.
28. Sharma R, Dash B, Singh RH. Efficacy of *Basti* therapy in Grahani Roga. *Anc Sci Life.*, 1989; 9(1): 3–9.
29. Raveendran AV, Deshpande A, Joshi SR. Therapeutic role of yoga in stress-related disorders. *J Assoc Physicians India.*, 2002; 50: 633–638.
30. Sharma AK. Effect of *Takradhara* in IBS: A clinical study. *AYU.*, 2016; 37(1): 56–60.
31. Patil VC, Patil HV, Rajmane V. Role of Rasayana drugs in gastrointestinal diseases. *AYU.*, 2013; 34(3): 255–261.
32. Li C, Zhuang Y, He J, Chen X, Chen Y. Yoga for functional gastrointestinal disorders: A systematic review and meta-analysis. *Clin Gastroenterol Hepatol*, 2014; 12(12): 2074–2083.
33. Taneja DK. Yoga and health. *Indian J Community Med.*, 2014; 39(2): 68–72.
34. Pal GK, Velkumary S, Madanmohan. Effect of short-term pranayama on autonomic functions. *Indian J Physiol Pharmacol*, 2004; 48(4): 462–468.
35. Zernicke KA, et al. Mindfulness in IBS. *J Altern Complement Med.*, 2013; 19(9): 801–810.
36. Schumann D, Anheyer D, Lauche R, Dobos G, Langhorst J, Cramer H. Effect of yoga in IBS: a systematic review. *Clin Gastroenterol Hepatol*, 2016; 14(12): 1720–1731.
37. Basisht G. Exploring the brain–gut axis in Ayurveda. *AYU.*, 2014; 35(1): 3–6.
38. Padhy SK, Sahoo S, Mahajan S, Sinha SK. Irritable bowel syndrome: Is it “irritable brain” or “irritable bowel”? *Indian J Psychiatry*, 2016; 58(3): 298–302.
39. Choudhary A, Sharma R, Thakar AB. Clinical study on Ayurvedic management of IBS. *AYU.*, 2011; 32(2): 225–229.
40. Eswaran S, Tack J, Chey WD. Food: the forgotten factor in IBS therapy. *Gastroenterology*, 2017; 152(5): 1707–1719.