

## DISTINCTION BETWEEN ĀRUCHI (LOSS OF APPETITE) AND ĀSHRADDHĀ (LACK OF INCLINATION TOWARDS FOOD)

Prof. Manohar Ram\*

Professor &amp; HOD, Samhita &amp; Siddhant Dept. Government Ayurvedic College and Hospital, Varanasi.



\*Corresponding Author: Prof. Manohar Ram

Professor &amp; HOD, Samhita &amp; Siddhant Dept. Government Ayurvedic College and Hospital, Varanasi.

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## ABSTRACT

In *Ayurveda*, proper digestion depends not only on *Agni* (digestive fire) but also on the natural desire and inclination towards food. Disturbances in these processes manifest as *Āruchi* (loss of appetite) and *Āshraddhā* (lack of inclination towards food). Though often considered similar, the two are conceptually distinct. *Āruchi* arises mainly from *Agnimāndya*, *āma* formation, and *dosha* vitiation, leading to tastelessness, lack of hunger, and aversion to food—making it primarily a somatic disorder. *Āshraddhā*, on the other hand, reflects a "*Āsyavirata* (Loss of Appetite) in Different *Rogas*" state, where food is available and digestion may be normal, but the individual shows disinterest or aversion due to psychological or emotional factors such as grief, stress, or chronic illness. Clinically, recognizing this distinction is important for proper management: *Āruchi* is managed by *Deepana–Pachana* (digestive fire correction), while *Āshraddhā* requires *manasika chikitsa* (psychological support) along with dietary regulation. Thus, distinguishing between the two enriches Ayurvedic understanding of appetite disorders and ensures holistic treatment.

**KEYWORDS:** *Aruchi*, *Ashraddha*, *Agnimandya*, *Ama*, Appetite Disorders, Anorexia, Psychosomatic Factors, *Deepana–Pachana*, *Manasika Chikitsa*.

## INTRODUCTION

In *Ayurveda*, digestion is not just a physical process of food breakdown but also a harmonious coordination of *Agni* (digestive fire), *Indriyas* (senses), and *Manas* (mind). For proper nourishment, the body must possess both a natural appetite (*ruchi*) and an inclination (*śraddhā*) towards food. When either of these is disturbed, two important conditions arise—*Āruchi* and *Āshraddhā*. Though both conditions result in reduced food intake, they differ significantly in origin, presentation, and management.

## Concept of Āruchi

**Definition:** *Āruchi* literally means “absence of *ruchi* (taste/interest) towards food.” It is generally considered as loss of appetite or tastelessness.

**Causes:** Weak digestive fire (*Agnimāndya*), *āma* formation, and *doṣa* vitiation (mainly *Kapha* and *Vata*).

**Symptoms:** Lack of hunger, tastelessness, heaviness, nausea, bad taste in mouth, and aversion towards food.

**Nature:** Primarily a somatic disorder of the digestive system caused by *Agni* dysfunction.

## Concept of Āshraddhā

## Concept of Āshraddhā

**Definition:** *Āshraddhā* refers to the absence of *śraddhā* (faith, interest, or inclination) towards food. Unlike *Āruchi*, it does not always involve impaired digestion, but rather a mental disinterest in food.

**Causes:** Psychological factors such as grief, stress, fear, depression, or chronic illness.

**Symptoms:** Food does not appeal to the person, lack of willingness to eat, or eating without interest despite normal digestive capacity.

**Nature:** Predominantly a psychosomatic state influenced by emotional and mental health.

**Key Distinctions Between *Āruchi* and *Āshraddhā***

Aspect	<i>Āruchi</i> (Loss of Appetite)	<i>Āshraddhā</i> (Lack of Inclination)
Meaning	Absence of taste/appetite	Absence of interest or inclination towards food
Primary Cause	Agnimāndya, āma, doṣa vitiation	Psychological and emotional factors
Nature	Somatic (digestive disorder)	Psychosomatic (mind-related)
Symptoms	Tastelessness, nausea, heaviness, no hunger	Disinterest, lack of enthusiasm, avoidance of food
Ayurvedic Category	Considered a disease (roga)	Considered a symptom/state (lakṣaṇa)
Modern Correlates	Anorexia due to indigestion, dyspepsia	Food aversion due to depression, stress, or mental

**Clinical Significance**

Understanding the distinction between *Āruchi* and *Āshraddhā* is essential for effective treatment.

*Āruchi* management focuses on stimulating *Agni* and digesting āma with Dīpana–Pācana therapies and prescribing light, easily digestible food.

*Āshraddhā* management emphasizes psychological support, counseling, pleasant eating environment, along with mild *Agni*-supportive measures.

Failure to differentiate between these two conditions may lead to improper treatment and persistence of appetite-related disorders.

**Paryaya(synonyms)**

Various type of other word like *Aruchi*, *Asyavairasya*, *Ashradha* and *bhaktadwesh* has also been used as synonyms.

**Bhaktadwesh**- A mean no sooner the person hear the name of the food or remember it or looks at the food or touches the food there is aversion for the food.

**Anannabhilasha**- due to anger, fear etc the person does not feel like eating his food.

**Bhede (Type)**

1. *Vataja*
2. *Pittaja*
3. *Kaphaja*
4. *Tridoshaja*
5. Psychological (ch.chi.8/58)

**Hetu(Causes)**

1. Psycho-physiological condition
2. Psychological cause are fear, anger and greed
3. All type of diet which is too heavy, oily, and sweet
4. Indigestion and loss of digestive fire
5. Secondary to worm infestation, anemia, jaundice, *kaphaja* disorders etc.

**Vishesha Lakshana*****Vataja Aruchi***

Mouth become dry with astringent taste and sometimes there is pain in the chest. There could be coating on the teeth and becomes sour.

***Pittaja Aruchi***

Mouth becomes bitter with burning sensation of heat and foul smelling.

***Kaphaja Aruchi***

Mouth becomes sweet. There are symptoms like heaviness, sensation of cold all over the body and constipation.

***Tridoshaja Aruchi***

In this type, mixed symptoms of all above types are seen.

***Manasaja Aruchi***

This is caused by psychological reasons and in this type the predominant symptoms along with improper taste is lack of appetite also. (Ch. chi. 8/61 & Ch.chi.26/201)

**Normal mechanism of hunger as per ayurveda**

To put it in simpler term, fire and air are required for the process of burning. Similarly, pitta (in the form of digestive fire / digestive strength) and air (normal wind in stomach plus process of peristalsis, digestive strength-digestive fire) should co-ordinate well to maintain good digestion strength. Good digestion strength means, good hunger, means interest in food. Person finds good taste in his food. (Taste perception is aided by kapha dosha).

Impaired vata and pitta at the level of stomach leads to depleted digestion strength, in turn lead to tastelessness in tongue and hatred towards food.

**Samanya chikitsa**

- 1.The line of treatment should be, mouthwashes, delicious food and drinks, keeping the patient happy and consolation. (Ch.Chi26/211-213)
2. Both external and internal purification of the channels involved in the pathogenesis is important in the treatment. Similarly maintaining proper oral hygiene is also advised. (Ch. Chi26/208)
- 3.Yoga Ratnakara and Nighantu Ratnakara have suggested to use basti, vaman and virechana depending on the predominance of dosha with kavala, dhupapan, gandusha and use of sour, salty and pungent food and herbs. Herbs of choice are matulung, nimb, ginger, maricha, cumin, asafetida and rock salt.
- 4.According to Bhavprakash Adrak Lavan works as a Deepan dravya.

**Vishesha chikitsa*****Vataja Aruchi*****Basti Treatment**

vamana giving by decoction of vacha (if patient strong)

**Pittaja Aruchi**

Vaman by Rock salt, honey and Ghrit

Kaval- Give mixture of amalaki, ela, padmaka, ushira, pippali, chandana, kamala with honey.

**Kaphaja Aruchi**

Vaman by decoction of Nimba and Ajamoda.

Kaval- Lodhra, chavya, Haritaki and Trikatu

Similarly considering the constitution of the patient, ne should use various types of panaka-drinks containing sour and sweet fruits; avaleha-jam or jelly of fruits; takra- buttermilk; shadava- mixture of salts and herbs, and various powders or churna.

**Treatment of Ashraddha**

Summary Table: Tailored Treatment for Ashraddha

Cause	Treatment Focus	Key Medicines
<i>Agnimandya</i>	<i>Deepana</i>	<i>Trikatu, Chitrakadi Vati</i>
<i>Āma</i>	<i>Pachana, Langhana</i>	<i>Panchakola Churna, Takra</i>
<i>Manasika</i>	<i>Medhya Rasayana</i>	<i>Brahmi, Shankhapushpi, Ashwagandha</i>
<i>Vata</i>	<i>Vata-pacifying</i>	<i>Hingvashtak, warm ghee</i>
<i>Pitta</i>	Cooling, calming	<i>Avipattikar, Amalaki</i>
<i>Kapha</i>	Stimulation, dryness	<i>Trikatu, barley, honey</i>
Lifestyle	Routine + Awareness	Mindful eating, regularity

**CONCLUSION**

Although both *Āruchi* and *Āshraddhā* present as reduced food intake, their roots lie in different domains—*Āruchi* is primarily digestive (Agni-related), while *Āshraddhā* is largely mental and psychosomatic. A clear understanding of this distinction ensures accurate diagnosis, holistic management, and restoration of proper appetite and health.

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