

THE ROLE OF *TRISUTRA SIDDHANTA* IN INTERPRETING *GRAHANI VYADHI*: A  
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**ABSTRACT**

*Grahani* is a major functional disorder of the gastrointestinal system described in *Ayurveda*, primarily rooted in the derangement of *Agni*, and the vitiation of *Doshas*. The classical *Trisutra Siddhanta*—*Hetu* (cause), *Linga* (symptoms), and *Aushadha* (treatment)—described by *Acharya Charaka* acts as a universal framework for understanding disease pathology and clinical management. Applying this theoretical foundation to *Grahani* allows a systematic comprehension of its etiopathogenesis, symptomatology, and therapeutic approach. This study aims to analyse *Grahani* through the lens of *Trisutra Siddhanta*, highlighting the clinical relevance of this ancient methodology in modern Ayurvedic practice.

**KEYWORDS:** *Trisutra Siddhant*, *Grahani*, *Hetu*, *Linga*, *Aushadh*.**INTRODUCTION**

*Grahani* is one of the most important disorders described in *Ayurveda*, deeply associated with the impairment of *Agni*—the digestive and metabolic fire responsible for digestion, assimilation, and nourishment. When *Agni* becomes weak, it leads to the formation of *Ama* (toxins), *Dosha* imbalance, and malfunctioning of the gastrointestinal system.

*Grahani* is both an anatomical organ and a functional disorder.

- As an organ, it is located between *Aamashaya* and *Pakwashaya* (small intestine region), responsible for holding food until digestion is completed.
- As a disease, it arises from *Agnimandya* (low digestive fire) leading to malabsorption, indigestion, irregular bowel habits, and systemic weakness.

The foundational diagnostic and therapeutic principle of *Ayurveda*—*Trisutra Siddhanta*—comprises three pillars.<sup>[1]</sup>

1. *Hetu* (Causative factors)
2. *Linga* (Signs & symptoms)
3. *Aushadha* (Therapeutic measures)

This research article aims to analyse *Grahani* using the *Trisutra* framework to present a structured understanding relevant for clinical applications.

**AIM AND OBJECTIVE**

To explain the importance of *Trisutra Siddhanta* in the Pathogenesis and Management of *Grahani*.

**MATERIALS AND METHODS**

This study is a conceptual and analytical review based on classical Ayurvedic texts supported by contemporary Ayurvedic commentaries and peer-reviewed secondary literature. The *Trisutra Siddhanta* was applied methodologically to interpret the etiopathogenesis, symptomatology, and treatment of *Grahani*.

**RESULTS**

*Grahani Dosha* is a common problem specially affects people living with unhygienic conditions and suffered with nutritional deficiency.

## A. Hetu (Causative Factors)

Hetu refers to all factors that initiate or aggravate *Grahaṇi*. Among all causes, the primary root cause is *Agnimandya*.

1. Dietary Factors (*Aharaja Hetu*)<sup>[2]</sup>

*Abhojanat* (Undereating)

*Ajeernabhojanat*,

*Atibhojanaat* (Overeating)

*Vishamashanat*,

*Asatmya*, *Guru*, *Ruksha*, etc.

*Adhyashana* (Eating before digesting the previous meal)

*Viruddhahara* (Incompatible foods)

2. Lifestyle Factors (*Viharaja Hetu*)<sup>[2]</sup>

*Vegadharana* (Suppression of natural urges)

*Divaswap* (Sleeping during daytime)

*Ratrijagran* (Staying awake at night)

*Vyadhikarshnat* (Diseased condition which weakened *Agni*)

*Desh*, *kal*, *Ritu vaishmya*

*Virek*, *Vaman*, *Sneh vibhram*

Sedentary lifestyle

Lack of exercise

3. Psychological Factors (*Manasik Hetu*)<sup>[3][4]</sup>

*Shoka*

*Bhaya* (Anxiety)

*Krodh* (Anger)

*Chinta* (Excessive worrying)

Mental Stress

*Samprapti* of *Grahaṇi*<sup>[5]</sup>

*Hetu* → *Agnimandya* → *Ama* formation → *Dosha* aggravation → *Grahaṇi* dysfunction → *Grahaṇi* Disease

## 2. Secondary Symptoms

VATAJA GRAHANI <sup>[10]</sup>	PITTAJA GRAHANI <sup>[11]</sup>	KAPHAJA GRAHANI <sup>[12]</sup>
<i>Jirne jiryati cha aadhmaanam</i> <i>Bhukte swasthyam</i>		<i>Annam pachyate dukham</i> <i>Bhinna amyukta mala</i>
<i>Chirat srijet varcha</i>	<i>Ajina</i>	<i>Shleshma bhuyishta mala</i>
<i>Sadukha mala pravrutti</i>	<i>Nil pitabha mala</i>	<i>Chardi</i>
<i>Chirat drava, shushka mala pravrutti</i>	<i>Puti, Amlodara</i>	<i>Arochaka</i>
<i>Aama yukta Saphena Sashabda mala pravrutti</i>	<i>Hrida kantha daha</i>	<i>Asyopadeha</i>
<i>Punah punah srijet varcha</i>	<i>Aruchi</i>	<i>Sarva sharira guruta</i>
<i>Annam pachyate dukha</i>	<i>Trishna</i>	<i>Madhura udgara</i>
<i>Shukta paka</i>	<i>Shoola</i>	<i>Udara sthaimitya</i>
<i>Grudhhi sarv rasanam</i>		<i>Sadana</i>
<i>Manas Sadan</i>		<i>Peenasa</i>
		<i>Akrushyapi dourbalya</i> <i>Alasya</i>

SAMPRAPTI GHATAKA<sup>[7]</sup>

*Dosha*: *vata pradhana tridosha* [*kledaka kapha, pachaka pitta, samana vata, apana vata, prana vat*]

*Dushya*: *Anna Rasa, Rasa Dhatu*

*Agni*: *Jatharagni*

*Ama*: *Jatharagni maandhya janya ama.*

*Srotas*: *Annavaaha, Rasavaha, Purishavaha.*

*Adhithana*: *Grahaṇi.*

*Udbhava sthana*: *Amashaya.*

*Vyakta sthana*: *Guda & sarva shareera.*

*Vyadhiswabhava*: *Chirakari.*

*Roga marga*: *Abhyantara*

*PURVARUPA* : *Trushna, Aalasya, Balkshay, Annavidah, Chirpak, Kaygaurav*<sup>[6]</sup>

B. *Linga* (Symptoms)

*Linga* refers to the clinical manifestations of *Grahaṇi*, which reflect *Agni* impairment and *Dosha* imbalance.

1. Primary Symptoms<sup>[8]</sup>

*Ajirna* (Indigestion)

Persistent or recurrent inability to digest food.

*Muhur baddha–muhur drava mala*

Alternating constipation and diarrhea, this is the hallmark feature of *Grahaṇi*.

*Annavidah*

*Trushna, Arochaka, Vairasya, Praseka*

*Shunpadkar* (swelling on hands and legs)

*Asthiparvruk*

*Jwara*

*Loh aam gandhi udgar*

### C. Aushadha (Management Principles)

In the *Trisutra Siddhanta*, *Aushadha* includes herbal medicines, dietary rules, lifestyle practices, and *Panchakarma* therapies.

*Grahaṇi* treatment focuses on<sup>[13]</sup>

1. Eliminating *Ama*
2. Correcting *Agni*
3. Balancing *Doshas*
4. Restoring *Grahaṇi*'s holding capacity.

*Grahaṇi Dosh* may be treated by following concept of *Langhana* and using *Deepana* and *Pachana* medicines which help to potentiate *Agni* and eliminate *ama*.<sup>[14]</sup>

Purgation therapy with stimulant drugs also helps to remove *Ama*

Buttermilk (*Takra*) also suggested by ancient *Acharya* for treatment of *Grahaṇi*.<sup>[18]</sup>

Classical *Deepan pachan* Formulations<sup>[13]</sup>

- *Hingvaṣṭaka Churna*
- *Marichadi Churna*<sup>[17]</sup>
- *Sunthi Churna*<sup>[15]</sup>
- *Chitrakadi Vati*<sup>[15]</sup>

Sr.No.	Treatment	Beneficial effect
1.	<i>Niruhabasti</i> , <i>Virechana</i> and <i>Anuvasanbasti</i> <sup>[14]</sup>	Remove symptoms of <i>Vataja grahaṇi</i>
2.	<i>Chandanadyaghritam</i> <sup>[19]</sup> , <i>Tiktaghrita</i>	Pacifies <i>Pittaja grahaṇi</i>
3.	<i>Pippalyadi choorna</i> <sup>[17]</sup>	Treat <i>Kaphaja grahaṇi</i>
4.	<i>Nagaradi kwatha</i> <sup>[19]</sup>	Pacifies vitiated <i>Vata</i> thus help in <i>Vataja grahaṇi</i>
5.	<i>Madhukasava</i> <sup>[20]</sup> , <i>Duralabhasava</i> <sup>[21]</sup> ,	Relieve <i>Kaphaja grahaṇi</i>
6.	<i>Panchmuladya Ghruta</i> <sup>[22]</sup>	Help to manage <i>Vataja grahaṇi</i>
7.	<i>Haridradya Kshara</i> , <i>Bhunimbadi Kshara</i> , <i>Duralabhadyakshara</i> <sup>[23]</sup>	Treat <i>Kaphaja grahaṇi</i>
8.	<i>Abhayadikashaya</i> <sup>[16]</sup>	Suggested for <i>Vataja grahaṇi</i>

### ❖ Lifestyle modification in *Grahaṇi*

Modification in lifestyle and balanced diet regime along with consideration of *Pathya Apathya* help to cure *Grahaṇi*.

#### *Vihara* (Lifestyle Management)

- Eat at regular timings
- Avoid sleeping during daytime
- Gentle exercise, yoga
- *Vajrasana* after meals
- Reduce stress through meditation and *pranayama*
- Avoid overeating or fasting

### ❖ Diet modification<sup>[24]</sup>

Modification in diet pattern towards the healthy eating habits boosts *Agni*

#### Recommended Foods

- *Peya* (thin gruel)
- *Vilepi*
- *Yavagu*
- Moong dal khichadi
- Freshly prepared warm meals
- Buttermilk (*Takra*) – considered best for *Grahaṇi*<sup>[18]</sup>

#### Avoidable Foods

- Curd
- Heavy fried foods
- Stale food
- Excessive spicy foods
- Raw salads
- Cold drinks
- Alcohol and smoking

## DISCUSSION

*Grahaṇi* is not merely a digestive disorder; it is a complex metabolic and functional disease rooted in *Agni* dysfunction.

The application of *Trisutra Siddhanta* helps.

### 1. Identify the cause (*Hetu*)

*Hetu* analysis in *Grahaṇi Vyadhi* highlights the pivotal role of *Agni dushti* caused by dietary, behavioural, and psychological factors. Excessive intake of incompatible (*viruddha ahara*), heavy (*guru*), unctuous (*snigdha*), cold (*shita*), or irregular food habits leads to derangement of *Jatharagni*. Mental stress, suppression of natural urges, and improper *Panchakarma* procedures further aggravate *Agni* impairment. Through the *Trisutra* lens, *Hetu* does not merely identify external causative factors but emphasizes their cumulative effect on *Agni*, which becomes the central pathogenic mechanism in *Grahaṇi Vyadhi*. This concept aligns with the Ayurvedic principle that disease originates from functional imbalance rather than structural pathology alone.

### 2. Understand the manifestation (*Linga*)

The *Linga* (symptomatology) of *Grahaṇi Vyadhi* directly reflects the status of *Agni*. Classical symptoms such as *muhurdrava-muhur baddha mala pravṛtti*, *ajirṇa*, *aruchi*, *ṭṛushna*, *gaurava*, and *udara shula* demonstrate incomplete digestion and improper absorption. *Trisutra Siddhanta* allows these clinical features to be interpreted not as isolated symptoms but as sequential outcomes of *Agnimandya* or *Vishamagni*. The variability of symptoms further indicates the dominance of specific *Doshas*,

reinforcing the individualized diagnostic approach of *Ayurveda*.

### 3. Plan stage-wise treatment (*Aushadha*)

*Aushadha*, the third component of *Trisutra*, provides the therapeutic direction based on *Hetu* and *Linga* analysis. In *Grahani Vyadhi*, treatment is not symptom-oriented but *Agni*-centric. The primary objective is *Agni deepana* and *pachana*, followed by *Dosha*-specific interventions. Use of formulations such as *Deepana-Pachana dravyas*, *Takra prayoga*, and *Grahi dravyas* is logically derived from *Trisutra* principles. Furthermore, *Panchakarma* procedures are judiciously selected only after assessing *Agni bala*, highlighting the individualized and rational therapeutic approach rooted in *Trisutra Siddhanta*.

This aligns with modern concepts like.

- Malabsorption syndrome
- Irritable Bowel Syndrome (IBS)
- Dysbiosis
- Functional gastrointestinal disorders

The *Trisutra* approach ensures personalized, *Dosha*-specific, and stage-specific treatment.

Thus, the Ayurvedic view of *Grahani* is clinically relevant even today.

### CONCLUSION

The whole *Ayurveda* is described in relation to *Trisutra Siddhanta*. This is the prime principle of *Ayurveda* which is described for *Swastha* and *Atura*. *Grahani* is a major *Agni-centered* disorder best understood through the *Trisutra Siddhanta*. *Hetu* reveals the root causes, *Linga* demonstrates the characteristic symptoms, and *Aushadha* offers a holistic treatment approach that includes herbal medicines, *Panchakarma*, diet, and lifestyle modifications.

Strengthening *Agni*, eliminating *Ama*, balancing *Doshas*, and restoring the functional capacity of *Grahani* remain key therapeutic principles. The *Trisutra* approach provides a timeless, systematic, and clinically dependable framework for understanding and treating *Grahani*.

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