

A Critical Review on Role of Ajirna in Pathogenesis of Pralapa

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Abstract: *Ajirna* (indigestion) is a commonly occurring gastrointestinal disorder described in classical Ayurvedic texts, which, if left unmanaged, can give rise to various systemic complications. One such complication is *Pralapa*—characterized by incoherent, irrelevant, or excessive speech—classified as an *Upadrava* in *Yogaratanakara*. This review explores the Ayurvedic pathogenesis (*samprapti*) of *Pralapa*, focusing on the vitiation of *Udana Vata*, obstruction of *Vyana Vata* by aggravated *Samana Vata* (*Samanavrita Vyana*), and the impaired circulation of *Rasa Dhatu*. The accumulation of *Ama* due to *Agnimandya* plays a central role in initiating this cascade, ultimately affecting *manovaha srotas* and higher cognitive functions. The study highlights the gut-brain axis described in Ayurveda centuries ago and correlates Ayurvedic concepts with modern understanding of delirium. A thorough review of classical texts was performed to interpret the interconnected roles of *Agni*, *Ama*, *Vata dosha*, and *srotas* in the manifestation of *Pralapa*.

Keywords: *Ajirna*, *Pralapa*, *Udana Vata*, *Samanavrita Vyana*, *Ama*, Delirium

I. INTRODUCTION

The Ayurvedic concept of *Ajirna* (indigestion) extends far beyond a mere disturbance of gastrointestinal function. It is viewed as a pathological state with the potential to cause systemic and neurological complications if left untreated. One such significant manifestation is *Pralapa*—a form of delirium characterised by incoherent or irrelevant speech—described as an *upadrava* (complication) of *Ajirna* in the classical text *Yogaratanakara*.^[1] Understanding the pathogenesis of *Pralapa* through the lens of Ayurvedic physiology reveals a complex interplay between multiple subtypes of *Vata Dosha*, particularly *Udana*, *Samana*, and *Vyana Vata*, and their critical roles in digestive, circulatory, and cognitive functions.

Udana Vata, located in the *urdhva bhaga* (upper part of the body), is responsible for vital functions such as *vak pravritti* (speech articulation), *smriti* (memory), *bala* (strength), *urja* (vitality), *varna* (complexion), and *prayatna* (effort).^[2] Vitiation of *Udana* due to *ama* and *ajirna* (disturbed digestion) leads to derangement of these functions, giving rise to features resembling *bhrama*, *murcha*, and *pralapa*.^[3]

Simultaneously, *Samana Vata*, seated near *Jatharagni*, plays a pivotal role in *anna grahana*, *pachana*, and *vivecana* (ingestion, digestion, and assimilation).^[4] When *Samana* becomes *prakupita* (vitiating), it may obstruct the normal functioning of *Vyana Vata*, leading to the *Samanavrita Vyana* condition.^[5] *Vyana Vata* is responsible for the continuous and synchronous propulsion of *Rasa Dhatu* throughout the body via *dhamanis*.^[6] If circulation is hampered, especially to the *mastishka* (brain), it results in *ojokshaya*, *bala kshaya*, and *pralapa*.

Thus, *Ajirna* initiates a cascade of *dosha vitiation*, primarily of *Vata*, affecting both *agni* and *rasa sanchara*.^[7] The *avaranam* (encapsulation) of *Vyana* by *Samana*, along with derangement of *Udana*, becomes the *samprapti* (pathogenesis) of *Pralapa*. This review attempts to unfold the intricate Ayurvedic understanding of how indigestion may serve as the root cause for neuropsychiatric manifestations like *Pralapa*, emphasising the roles of *Udana*, *Samana*, and *Vyana Vata* in this disease process.



II. MATERIAL AND METHODS

This review is based on a textual analysis of classical Ayurvedic texts such as *Yogaratanakara*, *Charaka Samhita*, and *Sushruta Samhita*. References related to *Ajirna*, *Pralapa*, and *Vata* subtypes were studied to understand their interrelation. Conceptual parallels with modern delirium were also briefly explored.

III. RESULT AND DISCUSSION

A detailed exploration of Ayurvedic granthas such as *Yogaratanakara* confirms that *Pralapa*—characterised by incoherent, irrelevant, or excessive speech—is mentioned as an *Upadrava* (complication) of *Ajirna* (indigestion). This association is not incidental but arises from a profound understanding of *dosha*, *agni*, *dhatu*, and *manas* interactions. The pathogenesis (*Samprapti*) of *Pralapa* involves complex vitiation (*dushti*) and miscoordination among various *Vata* subtypes, especially *Udana Vata*, *Samana Vata*, and *Vyana Vata*.

1. Udana Vata Dushti – Disruption of Vak Pravritti and Smriti

In *Swastha Avastha* (normal state), *Udana Vata*, situated primarily in the *Uras* (thorax),^[8] governs essential *manasika* and *sharirika kriyas*, including *Vak pravritti* (expression of speech), *Prayatna* (effortful actions), *Urja* (vital enthusiasm), *Bala* (strength), *Varna* (complexion and aura), and *Smriti* (memory). These functions collectively uphold the higher faculties of communication, cognition, and vigour.

When *Ajirna* occurs due to *Agnimandya* (weak digestive fire), *Ama* accumulates, which vitiates *Udana Vata*. The vitiated *Udana* loses its regulatory control over *Vak* and *Smriti*, resulting in *Vak Vikriti* (abnormalities in speech), *Buddhi Vibhrama* (confusion), and ultimately *Pralapa*. This reflects the direct role of *Udana Vata dushti* in the pathogenesis of delirium-like states.

2. Samanavrita Vyana – Ama-Induced Functional Obstruction

A unique and noteworthy state observed in *Ajirna* is *Samanavrita Vyana*, wherein aggravated *Samana Vata*—located in the *Pachana sthana* (site of digestion)—overpowers the activity of *Vyana Vata*, which is responsible for the *vikshepa* (distribution) of *Rasa dhatu* through the *Dhamanis*.

Although digestion may appear intensified or deranged in this condition, *Rasa* fails to be circulated efficiently. The resultant *Rasa-vaha srotorodha* (blockage of circulatory channels) leads to diminished nourishment to vital organs, particularly the brain, resulting in symptoms such as:

Pralapa – meaningless or excessive speech,

Murcha – sudden loss of consciousness,

Tandra – excessive drowsiness,

Angasada – limb weakness or lethargy,

Agni Kshaya, *Bala Kshaya*, *Ojo Kshaya* – decline in digestive strength, immunity, and vitality.

This multi-symptomatic presentation indicates that *Pralapa* is not merely a symptom but a spectrum disorder representing systemic dysfunction precipitated by *Ajirna* and its effects on *Vata dosha*.

3. Rasa Dhatu Sanchara – Disturbance in Nourishment Dynamics

As delineated in *Sushruta Samhita*, the *Rasa dhatu*—formed from *Ahara rasa* post-digestion—is expelled from the *Hridaya* and propelled throughout the body via *Dhamanis*, under the active propulsion of *Vyana Vata*.^[9] The re-entry of *Rasa* into the *Hridaya* is governed by *Samana Vata*, ensuring a rhythmic circulatory loop.

However, in *Ajirna*, due to *Ama sanchaya*, this synchrony is disrupted. The disturbed *Samana Vata* no longer complements *Vyana* in regulating this circulation. *Vikshepachitta* karma of *Vyana Vata*—i.e., the precise, simultaneous, and ceaseless propulsion of *Rasa*—gets impaired.^[10] This leads to culminating in symptoms of delirium, prominently *Pralapa*.

4. From Ajirna to Pralapa – The Sequential Samprapti

The journey from *Ajirna* to *Pralapa* can be understood through a sequential *samprapti*:

Agnimandya leads to incomplete digestion and *Ama utpatti*.



Ama vitiates *Samana Vata* in the *koshtha* (gastrointestinal tract).
Samana Vata, now in a state of *vridhhi*, obstructs *Vyana Vata* (Samanavrita Vyana).
Impaired *Rasa dhatu sanchara* results in poor *dhatu Pushti* in the cerebral region.
Udana Vata, weakened by systemic *Ama* and deranged *Agni*, loses control over *Vak*, *Smriti*, and *Prayatna*.
This manifests externally as *Pralapa*—an expression of disturbed *Vata* in its *Udana* and *Vyana* subtypes.
This clearly illustrates how a digestive-origin pathology results in a neuro-cognitive manifestation, affirming the gut-brain connection envisioned in Ayurvedic physiology.

5. Interdependence of Prana, Vyana, Samana, and Manovaha Vata

Further, the *Sharirika* and *Manasika kriyas* depend on the harmonious functioning of *Prana Vata*, *Vyana Vata*, *Samana Vata*, and *Apana Vata*. *Manovaha srotas* (channels of consciousness and cognition) are nourished by this integrated *Vata chakra*. When *Ajirna* disturbs *Samana*, and *Samana* obstructs *Vyana*, this chain reaction disrupts *Prana* and ultimately deranges *Manas*. Hence, in *Ajirna janya Pralapa*, we witness symptoms of both *Sharira* and *Manas vyapad* (bodily and psychological afflictions), including confusion, irrelevant speech, excessive drowsiness, fainting, and loss of memory.

IV. CONCLUSION

This Ayurvedic analysis reveals that *Ajirna*, if neglected or recurrent, initiates a vicious cycle of doshic vitiation, *srotas* obstruction, and *agni* deterioration, ultimately leading to *Pralapa*, a grave *upadrava* reflecting systemic collapse.

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