

## ANALYSIS OF JATHARAGNI IN SLESHMALA INDIVIDUALS WSR TO JEERNA AHARA LAKSHANA

Kamath Nagaraj<sup>1</sup> Kulkarni Pratibha<sup>2</sup> Chiplunkar Shivprasad<sup>3</sup>  
 P.G.Scholar, <sup>2</sup>Reader, <sup>3</sup>Associate. Professor & Head, Department of Shareera Kriya, Sri Dharmasthala Manjunatheshwara College of Ayurveda & Hospital, Hassan, Karnataka, India

### ABSTRACT

*Ayurvedic* classics describe 13 types of *Agni* according to their locations and functions of transformation at different levels of digestion and metabolism. The importance of *Jatharagni* is for the maintenance of health as well as manifestation of diseases. Status of *Jatharagni* varies in different *Prakruti*. The status of *Agni* can be known by examining the *Jarana Shakti* (Digestive capacity) of an individual. The six factors told in *Jeerna Ahara Lakshana* (Signs and symptoms of proper digestion) like *Udgarasudhi* (clear belching), *Utsaha* (enthusiasm), *Vegotsargayatochita* (proper/regular evacuation of bowels), *Laghuta* (feeling of lightness), *Kshut-Pipasa* (proper hunger and thirst) will help in assessing the *Jarana Shakti* and in turn the status of *Jatharagni*. The research was under taken to analyze the *Jatharagni* in *Sleshmala* individuals. *Prakruti* of the students was assessed using Standard format and those individuals having *Sleshma* predominance were selected. A self prepared scale was prepared to assess the *Jeerna Ahara Lakshana*. None of the *Sleshmala* individuals had *Avara Jarana Shakti/Agni* due to the influence of *Vaya* (*Youvana Avastha*). Maximum individuals had *Avara Yatochita Vegotsarga* highlighting the effects of irregular food habits and *Pradhanata* of *Sthira* and *Manda Guna* in *Sleshma Pradhana Prakruti*.

**Keywords:** *Sleshmala, Jatharagni, Jeerna Ahara Lakshana, Jarana shakti*

### INTRODUCTION

*Agni* is placed among the twelve *Prana* of the body, which reflects its importance for maintaining life. It is known fact that at each and every second multiple process of transformation takes place in human body, these may be Bio-physical, bio-chemical or any other type of transformation process. The media or agency responsible for all these process is *Jatharagni* in human body. The status of *Jatharagni* is responsible for the healthy as well as diseased state.<sup>1</sup> It is also an important factor to be observed in an diseased and also while prescribing treatment.<sup>2</sup>

Status of *Jatharagni* varies in different *Prakruti*.<sup>3</sup> It also depends on the diet, environment, physical and mental status of an individual. *Prakruti* is an important concept of *Ayurveda* that explains individuality and has role in prevention, diagnosis and treatment of diseases. It expresses unique trait of an individual that is defined by specific and permanent composition of *Dosha* at conception.<sup>4</sup> It is the enumeration of body features internal as well as external. There are different bodily constitutions depending on the *Dosha* (bodily humors) that is predominant and we can classify them as *Vatala, Pittala,*

*Sleshmala*, *Dvandhaja* and *Samadoshaja Prakruti*.<sup>5</sup>

*Agni* is assessed by *Jarana shakti*. *Jarana shakti* refers to the capacity to digest the food. *Lakshanas* like *Udgarasudhi* (clear belching), *Utsaha* (enthusiasm), *Vegotsargayatochita* (proper/regular evacuation of bowels), *Laghuta* (feeling of lightness), *Kshut-Pipasa* (proper hunger and thirst) are considered as the *Jeerna Ahara Lakshana* which will aid in assessing the *Jarana Shakti* of an individual.<sup>6</sup> *Jarana Shakti* and *Prakruti* are the two important factors mentioned in *Dasha-vidha Pariksha*.<sup>7</sup> *Vatala* individual will be having *Vishamagni* (irregular digestive power), *Pittala* individual will be having *Tikshagni* (Intense digestive fire), and *Sleshmala* individual will be having *Mandagni* (Low digestive fire).<sup>8</sup> It is very important to examine the *Jeerna Ahara Lakshana* in both healthy and diseased individuals. In healthy, those individuals having *Sleshmala* body constitution will be having mild digestive fire, so to assess the *Jarana Shakti* with aid of *Jeerna Ahara Lakshana* of *Sleshmala* individuals the study was undertaken.

## AIMS AND OBJECTIVES

To assess *Jarana Shakti* of *Sleshmala* individuals with the aid of *Jeerna Ahara Lakshana*

## MATERIALS AND METHODS

Source of the data: 150 healthy students of SDM College of *Ayurveda*, Hassan Method of collection of data: Healthy students from SDM College of *Ayurveda* and Hospital, Hassan were selected and there *Prakruti* was assessed by Dr. Kishor Patwardhan's stan-

dard *prakruti* assessment format. Those individuals having *Sleshmapradhanyata* were selected and there *Jaranashakti* was assessed. Inclusion criteria: Healthy volunteers of age group of 18 to 25 years, irrespective of sex, caste, religion and having *Sleshma-Prakruti*. Exclusion criteria: Individuals suffering from chronic diseases, systemic disorders, congenital anomalies and *vata*, *Pitta Pradhana Prakruti*. Assessment criteria: Scoring of *Lakshana* of *Jeerna Ahara lakshan* was done by self prepared scale.

## Designing scale to assess *Jarana Shakti*

Purpose – Since *Agni* is an important factor responsible for the healthy and diseased state, it should be examined in every individual. *Sleshmala* individuals will be having *Mandagni* and hence there is an importance to assess *Agni* in them. Generation of scale - The scale consisted of queries for assessing subjective parameters based on the characteristic features of *Jeerna Ahara Lakshana* given by *Astanga Samgraha*. The appropriate English meaning of *Lakshana* were referred and it was framed in the sentence form with 3 options to each eg: The *Lakshana Udgarasudhi* says clear belching, it was framed as; After how many hours of food intake you find clear belching in yourself (absence of past eaten foods flavor/taste)? Scale: Subjective symptoms were examined by using a questionnaire framed in close ended likert format with 3 options for each question i.e. Not at all/ after 6hours, after 4hours but within 5hours, within 3-4 hours. Subjective symptoms were graded accordingly as Grade 1 to 3. Table 1 shows the subjective parameters.

**Table 1: Jeerna Ahara Lakshana**

<b>Jeerna Ahara Lakshana</b>
<i>Udgara Sudhi</i> (clear belching)
<i>Utsaha</i> (enthusiasm)
<i>Vegotsargayatochita</i> (proper evacuation of bowels)
<i>Laghuta</i> (feeling of lightness)
<i>Kshut</i> (proper hunger)
<i>Pipasa</i> (proper thirst)

**OBSERVATION**

**Demographic Data:** In this study maximum numbers (67%) of individuals were female and males were (33%) and individuals of age group 21-25 were 6% and age group 18-20 were 94%.

**Incidence of Lakshana:** Among 150 individuals 8 had sleep disturbance, 22 had underwent various kind of physical stress and 63 individuals had mental stress. *Avara Udgara Shuddhi* was found in 88 individuals, 27 had *Madhyama Udgara Shuddhi*, 35 had *Pravara Udgara Shuddhi*. *Avara Utsaha* was found in 8 individuals, 41 had *Madhyama Utsaha*, 101 had *Pravara*

*Utsaha*. *Avara Vegotsarga* was found in 127 individuals, 23 had *Madhyama Vegotsarga*, none had *Pravara Vegotsarga*. *Avara Laghuta* was found in 13 individuals, 46 had *Madhyama Laghuta*, 91 had *Pravara Laghuta*. *Avara Ksut* was found in 32 individuals, 65 had *Madhyama Ksut*, 53 had *Pravara Ksut*. *Avara Pipasa* was found in 30 individuals, 41 had *Madhyama Pipasa*, 79 had *Pravara Pipasa*. *Avara Jarana Shakti* was found in none of the individuals, 86 had *Madhyama Jarana Shakti*, 64 had *Pravara Jarana Shakti*. Details are shown in table 2 & 3.

**Table 2: Incidence of individual Jeerna ahara Lakshana**

<i>Lakshana</i>	<i>Avara</i>	<i>Madhyama</i>	<i>Pravara</i>
<i>Udgara Sudhi</i>	88	27	35
<i>Utsaha</i>	8	41	101
<i>Vegotsarga Yatochita</i>	127	23	0
<i>Laghuta</i>	13	46	91
<i>Ksut</i>	32	65	53
<i>Pipasa</i>	30	41	79

**Jeerna Ahara Lakshana Score:**

86 individuals scored a score of *Jeerna Ahara Lakshana* score between 7-12, 64 individuals scored between 13-18 and none of the individuals scored between 0-6.

**Table 3: Incidence of status of Jarana Shakti and score**

<i>Jarana Shakti</i>	<i>Avara</i> (0-6)	<i>Madhyama</i> (7-12)	<i>Pravara</i> (13-18)
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150	0	86	64
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## DISCUSSION

The current study was conducted to check *Jarana Shakti* with the aid of *Jeerna Ahara Lakshana*. In the study it revealed that maximum numbers (67%) of individuals were female and males were (33%) this may be because of more female students in the study area. The study also revealed that 150 individuals 8 had sleep disturbance, 22 had underwent various kind of physical stress and 63 individuals had mental stress, this might be because of the personal problems, academic burden and interest in outdoor sports etc activities. Study also revealed that maximum number of individuals (88) had *Avara Udgara Shudhi Lakshana* this might be because of the *Manda Agni* of *Sleshma-Pradhana Prakriti* individuals leading to delayed digestion. Maximum individuals (101) had *Pravara Utsaha* which might be because of the age group i.e *Youvana Avastha* which will be usually filled with energy and enthusiasm. Yoga which students used to do regularly since it is the part of curriculum, even it might have stimulated in increasing *Utsaha* among the students. *Pravra Laghuta* was found in 91 of the individuals which might be because of the age factor and proper physical work, involvement in sports and other activities, exercise. Maximum number of individuals had *Avara Yatochita Vegotsarga*(127), this may be because of *Manda* and *Sthira Guna* of *Sleshma* in *SleshmaPrakriti* individuals and also because of irregular food habits that they follow and consuming junk food which may decrease the fibrous content of the

stools and lead to *Anuchita Vegotsarga*(irregular bowel habits, constipation). Maximum of the individuals had *Pravara Pipasa* (79), might be due to continuous study process and recitation of verses of the *Samhita* which cause dryness of the throat and oral cavity hence resulting in *Pravara Pipasa* even though the environment is cold. *Madhyama Ksut* was observed in maximum of the individuals (65), this might be because of the age factor and the cold environment which results in the *Sandukshana* of *Manda Agni* of *SleshmaPrakriti* individuals and hence the *Ksut*. Maximum number of individuals (86) had *MadhyamaJarana Shakti*(Agni) since all were of *Sleshma-Pradhana Prakriti* were of *Youvana Avastha* resulting in *madhyama avastha* of *Jatharagni*

## CONCLUSION

*Agni* is important for maintenance of health. *Agni* varies in different *Prakriti* and also status of *Agni* depends on age, environment, diet, physical and mental condition of an individual. *Agni Parikshana* is done by examining the *Jarana Shakti* of an individual. *Jeerna Ahara Lakshana* is an important aid to examine the *Jarana Shakti*. Study was conducted in 150 *Sleshmala* individuals considering the each factor mentioned in *Jeerna Ahara Lakshana*. Maximum individuals had *Avara Yatochita Vegotsarga* which shows *Manda* and *Sthira Guna* of *Sleshma* in *SleshmaPrakriti* individuals. *Utsaha*, *Pipasa* was in *Pravara* state due to presence of *Sthira Upachita Dhatu* and *Pradipta Jatharagni* in *Sleshma Prakriti* individuals, in

*Youvana Avastha* and cold environment. Since the individuals were of *Youvana Avastha*, *SleshmaPradhana Prakruti* and they were healthy none of them had *Avara Jarna Shakti/ Jatharagni*. Hence in healthy maximum *Sleshmala* individuals Agni was found to be *Madhyama* followed by *Pravara* and none of them had *Avara* state of *Jatharagni*.

## REFERENCES

1. Acharya YT. Caraka Samhita with Ayurveda Dipika commentary of Cakrapanidatta. Reprint ed. Varanasi: Chaukamba Sanskrit Samsthan; 2007.p.513
2. Acharya JT. Susrutha Samhita with Nibandhasangraha commentary of Dalhana. Reprint Varanasi (India): Chaukambha Sanskrit Sansthan; 2009.
3. Acharya JT. Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta. Reprint ed. Varanasi: Chaukambha Orientalia; 2007. p. 255
4. Acharya JT. Charaka Samhita with Ayurveda Dipika commentary of Chakrapani Datta. Reprint ed. Varanasi: Chaukambha Orientalia; 2007. p. 52
5. Paradara HSS. Ashtanga Hrudaya with Sarvangasundara commentary of Arunadatta and Ayurvedarasayana commentary of Hemadri. 9th ed. Varanasi (India): Chaukambha Orientalia; 2005. p. 8
6. Sharma. S, Ashtanga Sangraha with Sasilekha commentary of Indu. 2nd ed. Varanasi: Chaukambha Sanskrit Series, 2008. p. 244
7. Acharya YT. Caraka Samhita with Ayurveda Dipika commentary of Cakrapanidatta. Reprint ed. Varanasi: Chaukamba Sanskrit Samsthan; 2007.p.277
8. Acharya JT. Charaka Samhita with Ayurveda Dipika commentary of Chakrapani. Reprint ed. Varanasi (India): Chaukambha Orientalia; 2007. p. 255

## CORRESPONDING AUTHOR

Dr Kamath Nagaraj

P.G.Scholar, Department of Shareera Kriya, Sri Dharmasthala Manjunatheshwara College of Ayurveda & Hospital, Hassan, Karnataka, India

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