CORRELATION STUDY OF SAMANA AVRITTA APAN & IRRITABLE BOWEL SYNDROME

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INTRODUCTION

Avarana is one of the mechanism mentioned in the science of Ayurveda to explain the pathogenesis of diseases peculiarly due to vitiation of vata. To understand and analyze Avarana meticulous knowledge of basic concepts of Ayurveda is essential. Different clinical conditions present like Avarana depending upon stage of disease. In Saman Avritta apan Avarak is Saman Vayu, it get vitiated and increases number of metabolites and obstructs the gati of Apana. So samprapti of this paraspar Avarana produces irritable bowel syndrome. So if diagnosis and treatment is done in context of Avarana then chronicity of disease is reduced.

Keywords: Avarana, Samana Avritta Apan, IBS

ABSTRACT

Avarana is one of the mechanism mentioned in the science of Ayurveda to explain the pathogenesis of diseases peculiarly due to vitiation of vata. To understand and analyze Avarana meticulous knowledge of basic concepts of Ayurveda is essential. Different clinical conditions present like Avarana depending upon stage of disease. In Saman Avritta apan Avarak is Saman Vayu, it get vitiated and increases number of metabolites and obstructs the gati of Apana. So samprapti of this paraspar Avarana produces irritable bowel syndrome. So if diagnosis and treatment is done in context of Avarana then chronicity of disease is reduced.

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INTRODUCTION

Avarana is the most complicated basic fundamental concepts of Ayurveda Vata vyadhi can manifest either due to Dhatu Kshay or Avarana. Avarana literally means obstruction or to cover. Of the three doshas, vata has the property of Chal which has the key role in the mechanism of pathogenesis and makes vata dosha the prime one. Knowledge of Avarana helps in understanding the Pathophysiology i.e. Samprapti of many complicated diseases. As Samprapti Vighatan itself is the management of disease. So diagnosis play important role. IBS symptoms mimics the symptoms of Saman Avritta Apan. So there is Vikrutti Visham Samvay which helps in understanding Saman Avritta Apan.

The movement of vata gets affected in many ways Avarana is one among them. The course of Vata gets enclosed either by the other two doshas, any of the seven dhatu or the three malas result in the Avarana. For understanding the concept of Avarana it is mandatory to understood Avarak and Avrutta. When Dosh or Dhatu obstructs a particular Dosha then it will give rise to increased signs and symptoms related to the function of particular Doshas or Dhatus which has obstructed. The entity which get obstructed, will shows less signs and symptoms related to its normal functions. Thus there are 3 types of Avarana - Doshavrita Vata caused by failure of control of flowing fluids, Dhatwavritta Vata caused by failure of control in metabolic transformation and Parsparavritta Vata caused by failure of nervous control. ¹SAMAN & APAN VAYU —

Saman Vayu is subtype of Vata dosha located in the neighbourhood of Jathagni (Antaragni) Its sanchar sthan is Aampak-vashay and Vanhisangat. It helps in agni sandhukshan. It plays role in anna dharan, pachan, vivechan and taking kitta downwards. It governs absorption of nutrients...
Thakre Yeshashree Jagannath et al: Correlation Study Of Samana Avritta Apan & Irritable Bowel Syndrome

written into the body, assuming that they were broken down properly. It also directly affects agni. When vata dosha accumulates and aggravated in small intestine it vitiates Saman vayu. So vridhha Saman Vayu produce gastrointestinal disturbance. Apan vayu which is located in the shroni ,basti Medhre . It is responsible for elimination of urine, stool, toxins etc. This type of Vata has Anuloman gati ie. It governs with downward direction when its gati is hampered, it results in disturbance of Apan Vayu and eventually deteriorates evacuation of bowel contents.

**PARSPAR AVARAN**

Various fractions of vata move in different directions in the body so that function of one gets obstructed by the other .this results in Parspar Avarana of vata. Prana, udana moves upwards Apana moves downwards Samana in lareral directions and vyan moves all over the body. A slight variation in the path of one may affect the others pathway resulting in functional impairment as well as disease. In this type of Avarana Saman vayu which is Avritta obstructs gati of Avarak Apan Vayu. Vridhha saman does not help in dharan of apakwa ahar .As apakwa ahar moves forward parshwashool begins .Due to vitiated saman number of intermediate metabolites increases and it obstructs gati of Apan Vayu .Thus Paraspar Avaran of Saman Vayu and Apan Vayu produces Irritable bowel Syndrome. 

Lakshanas – Grahani rog ,Amashaygat vedana ,Parshwashool ,Hrudshool. 

**PATHOPHYSIOLOGY OF IBS**

Irritable bowel syndrome (IBS) known as an irritable colon, is an idiopathic gastrointestinal disorder. IBS is a chronic condition characterized by abdominal pain altered bowel habits (Diarrhoea & Constipation) in the absence of detectable structural abnormalities.

The pathogenesis of IBS is poorly understood, although roles for gut motor and sensory activity, central neural dysfunction, psychological disturbances, stress and luminal factors have been proposed. There is altered GI motility and visceral hyperalgesia. Colonic myoelectrical and motor activity under unstimulated conditions are generally normal but abnormalities are more prominent under stimulated condition in IBS. IBS Patients may exhibit increased rectosigmoid motor activity for upto 3 hr after eating .There is inflation of rectal ballons leads to marked distention evoked contractile activity which may be prolonged. IBS patients frequently exhibit exaggerated responses to to visceral stimulation. Post prandial pain has been temporarily related to entry of food bolus into cecum. Exagerrated symptoms can be induced by visceral distention. The role of Central Nervous System factors in the pathogenesis of IBS is strongly suggested by the clinical association of emotional disorders and stress with symptom exacerbation.

**CORRELATION OF PATHOPHYSIOLOGY OF SAMAN AVRITTA APAN & IBS**

In Saman Avritta Apan, Apan Vayu get occulted by Saman Vayu. There is Parspar Avaran of Saman and Apan Vayu. According to the Ayurvedic literature most important causes of IBS is Vata vitiation. Saman Vayu which is located Agnisamipastha. Due to Siddhant of Avarak and Avritta Vata in Saman Avritta Apan there is of Sthan Vikrut of Saman Vayu.

In IBS Pathophysiology it is mentioned that there is altered GI motility and Visceral hyperalgesia. This can be correlated with Vikrut Apan Vayu. Vikrut Saman Vayu hampers the gati of Apan
vayu which results in disturb peristaltic movements of the intestine.

In IBS there is increased rectosigmoid motor activity which ultimately leads to inflation of rectal balloon in both IBS-D (Diarrhoea Prominent) and IBS-C (Constipation Prominent). This can be considered as Saman Vayu Vikruti. Saman Vayu gets prakopit and increases its Ruksha gun. So Sara Kitta Vibhagan does not take place properly and kitta bhag get upshoshit along with Sar bhag .Thus kitta Munchan Prakriya of Saman Vayu does not takes place which results in symptoms like abdominal distension. In IBS there is increased post prandial pain .This can be considered ,as Saman Vayu has role in Agni Sandhukshan .Since Saman Vayu get prakopit it does not help in Dharan of Apakwa Ahar hence Parshwashool. Apan Vayu has Anuloman Gati .As Saman Vayu hamperds gati of Apan Vayu causes sensation of incomplete defecation correlated to visceral distention in IBS.

The role of CNS in IBS can be correlated as – Vata dosha has property of Chal . All the 5 types of Vata interplay within themselves and mentioned homeostasis .When they hampered their own karma Upatt of Vat Vyadh takes place. Both parasympathetic and sympathetic stimulation originating in the brain can affect gastrointestinal activity mainly by increasing or by decreasing specific actions. Thus due to Poshya-Poshan Bhav there is Apan Vayu Vikuti .Thus Apan Vayu due to increasing chal guna leads to abnormally increased motility of the small and large intestine.Due to Gati Gandhan karma of Apan Vata it ultimately deteriorates other Vayu and results in sensory nervous stimuli which results in abnormal myoelectrical activities in colon and small intestines.

**CLINICAL FEATURES OF SAMAN AVRITTA APAN & IBS**

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<tr>
<th>SAMANA AVRITTA APAN</th>
<th>IRRITABLE BOWL SYNDROME</th>
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<tbody>
<tr>
<td>1)GrahaniRog</td>
<td>Altered bowel habits (Constipation&amp;Diarrhoea)</td>
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<tr>
<td>2)Parshwashool</td>
<td>Abdominal Pain</td>
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<td>3)Aamashaygat Vedana</td>
<td>Heart burn</td>
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<td>4)Hrudshool</td>
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**CONCLUSION**

Thus it has been observed that clinical manifestations and pathophysiological changes of Saman Avrita Apan can be correlated with IBS. Thus it helps in designing further management protocol.

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