INTRODUCTION
Jatharagni is the prime cause for ayu, varna, bala, swasthya, utsaha, upachaya, prabha, oja, teja and prana. Extinction of this agni leads to death; Its proper maintenance helps a person to live a long life, and its impairment gives rise to diseases. Among all the diseases particularly, Grahani, Arshas and Atisaara are the three diseases where impairment of Agni is given prime importance by Acharya Charaka. Grahani, which is one of these three diseases is being dealt in this article. In modern paralance, Irritable Bowel Syndrome and Inflammatory Bowel Disease are considered under the spectrum of Grahani. The corticosteroids widely used in the treatment of IBD are known to have side effects. Hence better management with Ayurvedic principles is the need of the hour. Grahani described in Ayurvedic classics is a structural as well as functional entity. Being the seat of Agni and also being known as pittadharakala, any derangement in Agni manifests in the form of disease Grahani. Grahani presents with the symptom of muhurbaddha and muhurdrava mala pravrtti. When Grahanyashrita Agni is vitiated, it will affect the absorption of the ahara rasa which in turn vitiates the proper formation of further dhatu, thus affecting the nourishment of the body in total. Ayurvedic approach is planned assessing the vyadhiavastha to correct the deranged Agni which helps in improving the absorption and nourishment. Takraprayoga is given importance in the management of Grahani by most of the Acharya. Takra being tridoshahara, deepana, grahi and laghu is helpful in treating Grahani. Srotoshuddata is attained by takraprayoga, which helps in proper absorption of ahara and thus proper formation of rasadidhatu. Hence Takra by virtue of its qualities acts as Agnideepaka and by causing srotoshuddata helps in proper nourishment of the rasadidhatu. Keywords:- Grahani, Agni, Takra, Tridoshahara, Srotoshuddata.
either manifesting as constipation dominant or diarrhoea dominant and IBD manifesting with Diarrhea, abdominal pain, blood mixed stools etc simulate the symptoms described in Grahanigad.

**GRAHANI-ANATOMICAL AND PHYSIOLOGICAL ASPECT:** The derivation of the word Grahanigoes as – ‘Annasyagrahanaadgrahani mata’, due to its function of annagrahana, it is known as Grahani.AcharyaSushruta refers to it as Pittadharakala, which does the pachana and shoshana of chaturvidhaanai.eashita, peeta, khadita and lidhaanana consumed.Anatomically it is situated in between the pakwashaya and amashaya and is considered to be the adhistana of Agni.Physiological it is concerned with the function of dharana of apakwaanana and visarjana of pakwa anna. Thus Grahani is concerned with the Grahana, dharana, pachana, vivechana and munchana of the ingested food.Samanavata performing the function of annagrahana, aiding the process ofpachana, performingvivechana and munchana, paachakam pitta attributed with paaka karma and kledakakapha are related to Grahani.

**GRAHANI DOSHA AND GRAHANI GADA:** Grahanidosha and Grahaniroga are the two different entities as clarified by AcharyaCharakais the context of Grahanichikitsa. Grahani is the ashraya for Agni. Hencegrahanishkritaagnidosha is considered the same as GrahandoSHA. Grahanigadais the diseases manifesting due to the functional disturbance of Grahan.Atisaara, Ajeernaetc are grahanishiritarogaroga and hence considered as grahanigada, but Chakrapani further clarifies that Grahanigada is particularly indicating towards the set of diseases manifesting due to the abnormal functioning of Grahanirupa nadi.

**NIDANA & SAMPRAPTI:** Ajeerna, atibhojana, vishamashana, guru, sheetabhojana, vegadharaarare thenidanaformagnimandya. In the present day, junk food, irregular diet pattern including ateeetakalabhojana, adhyashhana mentioned in classics and stressful life are the major causes for agnimandya. In a state of Mandagni, due to any of the causative factors, when an individual further indulges in ahitaahara, viharather will be further dooshana ofAgni.Due to the ashrayaashrayibhava, the Grahani will get impaired as well. This will further lead to either murchana of one or all the dosha, leading to the manifestation of Grahan.

**ROOPA:** The clinical manifestation of Grazhanivaries based on the doshainvolved.VatajaGrahanipresentswithKharangata, kantaayashosha, kshut, trishna, timira, karnaswana, abhikshnarujain-parshwa, uru, vankshana, greeva, visuchika,hritpida, karshya, durbalya, parikartika, gridhviiwardssarvavara, manasahasadanana, jeernejiratiaadhaanam, bhukteswasthyamupaiti. Thepatient will often be doubtful of suffering fromVatagulma,hridrogaandplilha. The type of malapravruttiis ichirat, dukham, dravam, shushkam, tanum, amam, withshabda, phenavatandpunahpuna hvarchahasrujana. PittajagrahanilakshaneerAjeerna, neelapitabha, pitabha, Dravamalapravritti, puti, amlaudgara, hrit kanta-daha, aruchi, trit. Kaphajagrahanipresents withhrullasa, chardi, arochaka, asyopadeha, kasa, shteevan, pinasa, hridayasytanata, udarastaimitya, guruta, madhuragadra, sadana, streevshaharsa, bhina, shleshmasamursuhta, guru mala pravritti, akrushasapyidourbalyamanda-lasyam. Grahan is mainly based on the avastha of

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**CHIKITSA:** The treatment principle of Grahan.
the vyadhi. In case of grahani presenting with Amalakshana, it is treated with Va-mana whereas grahani with Leena, pakhwasyaasthaama is treated with deep-ana and virechana. Shareeranugatasaama is treated with measures of langhana and pachana.\(^9\)Takra is being given utmost im-
opportunity by all the Acharya in the treat-
ment of Grahan.

**TAKRA PRAYOGA:** Acharya Charaka mentions the benefits of takra acting as tridoshaara in Grahan.\(^10\) In specific, takraprayoga is mentioned in the context of Vataja and Kaphajagrahani. Takrarishta is indicated in Vatajagrahani. Takrarishta:\(^11\)Takrarishta is prepared with Takraalong with the following ingredients through sandhanavidhi.

<table>
<thead>
<tr>
<th>Ingredients</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yavani</td>
<td>3 pala-144gms</td>
</tr>
<tr>
<td>Amalaka</td>
<td>3 pala-144gms</td>
</tr>
<tr>
<td>Pathya</td>
<td>3 pala-144gms</td>
</tr>
<tr>
<td>Maricha</td>
<td>3 pala-144gms</td>
</tr>
<tr>
<td>Souvarchalalavana</td>
<td>1 pala-48gms</td>
</tr>
<tr>
<td>Saindhavalavana</td>
<td>1 pala-48gms</td>
</tr>
<tr>
<td>Vidalavana</td>
<td>1 pala-48gms</td>
</tr>
<tr>
<td>Oudbhidalavana</td>
<td>1 pala-48gms</td>
</tr>
<tr>
<td>Saamudralavana</td>
<td>1 pala-48gms</td>
</tr>
</tbody>
</table>

There is also indication of takraf for pramaartha in vatajagrahani.\(^12\) In kaphajaGrahan, takra having amla rasa is indicated for agnideepanartha and takrarishta is indicated as well.\(^13\) Summarizing the treatment principle of Grahan, AcharyaCharaka mentions vivi-
dhatakraprayoga are to be used by Gra-

The mode of administration of takra explained in Arsha Chikitsa, which precedes the Gra-

According to rogi and rogabala, Takra can be administered for duration of a sapta or dasha or paksha or a masa. Based on the Agni, the following modification is to be done during the administration of Takra: \(^15\)

| Kaala   | AtyantaMrudvagni | KinchitPravrud-
dha Agni         | KramenaAgni Pravruddhi          |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Purvahna</td>
<td>Takra</td>
<td>Takra</td>
<td>Takra</td>
</tr>
</tbody>
</table>
| Saayam  | Takra            | Takravaleha-la-
jasaktu with takra  | Takrapeya/
takraodana/takrasamskrutayusha
dibhojana |

- The mode of administration is kramaut-
karsha and apakarsha. During the ut-
karsha- apakarsha, the quantity of takra reduced is to be replaced by the quantity of anna.

**MODE OF ACTION OF TAKRA:** The properties of takra are as follows:\(^10\)

- **Rasa:** Madhura, amla, kashaya,
- **Guna:** Laghu, ruksha, graahi, vikasi, saandra
- **Veerya:** Ushna
- **Vipaka:** Madhura
- **Doshagnata:** Tridoshahara, Hence the probable mode of action based on its properties and sanskara can be explained as:\(^-\)

In Vatajagrahani, takrahavingmadhura, amla rasa, shunti, saindhavayuk-
tand snehayuktai is beneficial. Along with thesesamakara, further thesa andragunaof takra helps in pacifying Vata dosha. In case of Pittaja grahani, takra possessing madhura, kashaya rasa, which issadyaka (avidah), sitayukta and with ardhaudhrisneha is the choice. Also themadhuravipaka of thetakra contributes to pitta shama. In Kaphaja grahani, takra having kashaya rasa, vyoshakshaarayukta and which isrukshais ideal. The ushnaveeryaandvikasigunaof takra helps in alleviating kaphadosha.

**DISCUSSION**

Mandagni is the prime cause for the manifestation of grahani. Takra which is deepana, pachana helps in rectifying the Mandagni. The vyadhiswabhava mainly indicates vitiation in the mala pravrutti. Here a grahadravya is better choice than a sthambakadravya. Graahi is deepaka, pachaka andushna in contrary to sthambaka which is ruksha, sheeta, kashaya, laghu and vatakara. Hence in the context of Grahani, takra which is a grahadravya is a better choice. Takra is also srotoshodaka, hence it helps in the proper absorption of aahara and further formation of rasadhatus. Acharya Charaka has explained use of takra in vataja and kaphajagrahini in specific, but based on the samskara it can be used in pittajagrahini as well. In pittajagrahini, the cause for Agnimandya is the dravarupavruddhi of pitta and not the vitiation of the ushnaguna of pitta. Hence, ushnaguna of takra does not cause further aggravation of the condition. Also the samakara such as madhura, kashaya rasa, sitayukta, sadyaskawill help in pitta shaman.

The modern concept of probiotics in the treatment of chronic diarrheas include oral administration of lactobacillus acidophilus used as symptomatic and supportive drug therapy. They promote growth of saccharolyticflora; the mechanism by which probiotics exert their favorable effects seems to include changes in intestinal pH, suppression of pathogens, and suppression of mutagenic and carcinogenic processes and protection of the intestinal barrier. Owing to the potential health benefits of Probiotics such as modulating the immune function and elimination of toxins, probiotics would have a stabilizing and beneficial effect on the quality of life. Probiotics widely used today could be understood as a modified version of Acharya Charaka’s concept of Takrarishta. Takra or buttermilk serves as a natural substitute for the probiotics. Corticosteroids used in the treatment of IBD decreases the ability of the body to cope up with physical stress and also suppress the immune system activity, causing increased risk of infection. Considering the hazardous effect of these medicines in a long run, better management options are available in Ayurveda and takraprayoga is one such

**CONCLUSION**

Grahani is a vyadhi caused due to mandagni. Grahani, correlated to IBS and IBD in modern paralance, is a condition which can be managed better with Ayurvedic principles. Unwholesome dietary pattern and stressful lifestyle are the major contributing factors to the development of Grahani. The main symptom of the disease is the change in the bowel habit along with the other symptoms specific to the dosha involved. A dravya possessing deepana, pachana is the requirement in the treatment. Takra which is tridoshagna, deepaka, pachaka, srotoshodhaka along with its graahiguna, ushnaveerya and madhuravipaka is the drug of choice in Grahani. It is used as oushadhi in the form of Takrarishta and also as a pathya in the form of different dietary preparations in a
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Grahanirogi. When used with the knowledge of samskara based on the specific dosha involved, it can be used as both preventive and curative in a patient of Grahani.

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Source of support: Nil
Conflict of interest: None declared