ABSTRACT
Healthy food habits and proper digestion are crucial for our health. Digestive abnormalities are the most commonly occurring problem which may lead to serious health issues and even fatal for the life if not taken care properly. Almost all the important texts of Ayurveda have discussed about the Ajeerna with all its detail. It is told as Ghor Vyadhi, Ghor means which is difficult to cure and may cause untimely death also. The present article is an effort to discuss in detail about the Ayurveda perspective of Ajeerna and its serious nature. Proper diagnosis and treatment of Ajeerna may protect its further complication. Lifestyle modification, wholesome dietary pattern and use of drugs are important in management of Ajeerna. The article throws light on etiopathogenesis of Ajeerna, its types, symptomatology, complications and principles of management.

**Key words:** Agni, Ama, Aparipakva, Indigestion

INTRODUCTION:
Food and drinks when taken judiciously are contributing to our health else they will become cause for serious health issues and Ajeerna is one among them. Ajeerna is generally translated as indigestion which involves several aspects starting from intake of food and its digestion, assimilation and excretion. Any disturbances in this normal process may lead to Ajeerna. It may independently become a problem or may create platform for manifestation of several diseases which may be fatal for the life. In Charak Samhita Ajeerna is explained under the Grahani Dosha Chikitsa Adhyaya after explaining the Agni and normal digestion process. Here the specific term Grahani Dosha is used and not the Grahani Roga, Dosha is having the capabilities to create innumerable kinds of diseases and explaining Ajeerna in this context is very relevant as this creates the basis for several health issues. In Charak Samhita and Ashtanga Hridaya the word Ghor is used while describing the Ajeerna. This indicates the serious nature of disease, difficulties in its management and also the possibilities of damage at deeper level. Because of this it becomes very important to understand this disease and know its management. The article is providing detail of Ajeerna, its etiopathogenesis, types, symptomatology, complications and management strategies.

Etiopathogenesis of Ajeerna:
The word Ajeerna primarily indicates the improperly digested or undigested food. In the process of normal digestion mainly Pachaka Pitta, Samana Vayu, Kledaka Kpaha takes the lead role. The function of Pitta viz. Darshan (seeing what to be consumed) Pakti (digesting the ingested food and formation of Saar and Kitta), Ushma (heat which is required for transformation and assimilation). When these factors are disturbed mainly Pakti and Ushma then it will cause improper
digestion which will further lead to Aparipakva (undigested) along with Saar and Kitta portion of ingested food.

The basic causes of Ajeerna described in Ayurvedic Samhitas i.e. Sushruta Samhita, Charaka & Astang Hrudyam are Atyambupaan (excessive intake of water), Vishamashan (untimely intake of excess or less food), Sandharan (Supression of natural urges), Swapna Viparyaya (change in sleeping pattern) along with these the condition of mood i.e. jealousy, fear, anger and sorrow are the leading causes of Ajeerna. Ayurveda has also deeply elaborated the type of food which may leads to Ajeerna i.e. Dwista (contaminated food), Vishtambhi (take more time to digest), Dagdha (overcooked), Aam (undercooked), Guru (heavy to digest), Ruksha (dry food), Hima (frozen food), Asuchi (Contaminated and stale food) in nature. The etiopathogenesis of Ajeena is shown in flow Chart-No. 1.

**Flow Chart: 1- Showing the etiopathogenesis of Ajeerna**

General Clinical features of Ajeerna-

The diagnosis of Ajeerna is based on its clinical features Viz. Vibandha (partial or complete cessation of bowel habit), Atipravritti (enhancement in bowel habit), Glani (lack of zeal), Marut Mudhta (complete pause in GI motility), Alashya (lack of enthusiasm), Apakati (unable to digest the ingested food and formation of...
Saar and Kitta), Nishthiv (excessive spitting).

Types of Ajeerna and its specific symptomatology: Shown in table No.1

Table No.1: Shows the types and specific symptoms of Ajeerna

<table>
<thead>
<tr>
<th>Sl.No.</th>
<th>Types</th>
<th>Dosha</th>
<th>Symptoms</th>
</tr>
</thead>
</table>
| 1     | Ama Ajeerna   | Kapha | - Food stains sweetness  
- Guruta (Heaviness of body)  
- Utkleda (Vomiting sensation)  
- Ganda Akshikuta shopha (Oedema over orbital and cheek region)  
- Udgrascha yatha bhuktam (Eructation of the ingested food)  
- Avidagdha (Indigestion) |
| 2     | Vidagdha Ajeerna | Pitta | - Ingested food becomes sour and slightly digested  
- Bhrama (Giddiness)  
- Trit (Thirst)  
- Murchha (Fainting)  
- Sadhumaamla udgara (Sour eructation and feeling like of smoke coming out from mouth)  
- Shukta tikta amla udgara (sour-bitter eructations)  
- Sweda (Sweating)  
- Daha (Burning sensation)  
- Vividha Pittaja Ruja (Various other pain of Pittaj origin) |
| 3     | Vishtabdha Ajeerna | Vata | - Bhrisha Toda (severe pain abdomen)  
- Shula (Sharp/colic pain)  
- Vishtabdhamanddha (hardness of bowel)  
- Viruddha Vata (opposite movement of Vata dosha)  
- Adhmana (Abdominal distension)  
- Vividha Vata vedana (Various pain of vata origin)  
- Mala vata apravriiti (obstruction in the evacuation of feces and vata)  
- Moha (Delusion)  
- Stambha Anga Pidana (Stiffness and pain all over the body parts)  
- Jrimbha (Yawning)  
- Shiroruja (Headache) |
| 4     | Rasasheshha Ajeerna | -     | - Udgara shuddavapi bhaktaakansha na jayate (Clear eructation but no desire for food intake.  
- Hridguruta (heaviness in heart region)  
- Anna vidvesha (dislike towards food) |
Ajeerna is a disease of serious concern.

- Hridayaashuddha (discomfort in chest region)
- Arochaka (anorexia)

<table>
<thead>
<tr>
<th>5. Dinapaki Ajeerna</th>
<th>Nirdosha</th>
<th>• Food get digested within a day</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Prakrita Ajeerna</td>
<td>Prakrita</td>
<td>• Natural indigestion during the process of digestion which will complete with time each day.</td>
</tr>
</tbody>
</table>

**Upadrava (complications) of Ajeerna:** Shown in table no. 2

**Table No.2: Shows the complications of Ajeerna**

<table>
<thead>
<tr>
<th>Upadrava (Complications)</th>
<th>(Su.Su.46/504) (Y.R. Ajeerna Roga/41)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Murchha</td>
<td>Fainting</td>
</tr>
<tr>
<td>Pralapa</td>
<td>Delirium</td>
</tr>
<tr>
<td>Vamathu</td>
<td>Vomiting</td>
</tr>
<tr>
<td>Praseka</td>
<td>Excessive salivation</td>
</tr>
<tr>
<td>Sadana</td>
<td>Malaise</td>
</tr>
<tr>
<td>Bhrama</td>
<td>Giddiness</td>
</tr>
<tr>
<td>Marana</td>
<td>Even the Death may occur</td>
</tr>
</tbody>
</table>

**Principles of Management of Ajeerna:**

- Nidana Parivarjana (avoidance of etiological factors) is the first principle of management in case of Ajeerna. Healthy lifestyle pattern and wholesome dietary habits are keys in the prevention and management of Ajeerna. In case of Ama Ajeerna which is Kapha dominant Acc. to Sushrutacharya - Langhana (lightening therapy) should be done. The patient whose body is light, should be treated with lightening measures till restored to Normalcy in terms of disorder and strength. Vamana is indicated in Ama Ajeerna by Yoga Ratnakara. Hot saline water which is prepared by using rock salt along with Vacha is used for Vamana. Water processed with Dhanyaka + Shunti can also be used for vomiting. This is told as Ama Ajeerna Prashmana (pacifying the Ama Ajeerna) Shulaghna (subsides the colic) and Bastishodhaka (cleans bladder). In case of Vidagdha Ajeerna which is Pitta dominant as per Sushrutacharya, Vamana is performed using hot saline water and the patient He should abstain from food till normalcy restored. Yoga Ratnakar has indicated Langhana in case of Vidagdha Ajeerna. Vishtabdha Ajeerna Which is Vata dominant can be managed by Swedana karma (sudation therapy). Drinking warm saline water is advised in this condition. Rasashesha Ajeerna which is not of very serious nature can be easily managed by just sleeping or taking good rest and avoiding eating unless the condition is resolved. Dinapaki Ajeerna and Prakrita Ajeerna does not require any treatment as this is naturally occurring during the process of digestion.

**DISCUSSION:**

Ajeerna is one of the problems which is mainly due to our unhealthy lifestyle and unwholesome dietary pattern. It is often neglected or improperly managed condition unless it is severely disturbing the normal routine of the individual. In such condition correction of lifestyle becomes very important. According to WHO, 60% of related factors to individual health and quality of life are correlated to lifestyle. Not only physical but
psychological factors such as sorrow, grief, anger etc. are also responsible for improper digestion of food even if the food is of wholesome to the person. So, it advised to avoid taking food in such mental situations or better to keep control on these factors. In general, the Ajeerna is Amashaya udbhava (originated from stomach) disease and for that Langhana is important for its management but if the Kapha is in utklishta (excessively aggravated) state Vamana can be done. This may be the reason of advising Langhana and Vamana by Acharya Sushruta and Yoga Ratnakara respectively. Similarly, when aggravated Pitta reaches to place of Kapaha, Vanama is suitable measure for its management. Vidalgha Ajeerna which is Pitta dominant condition, Vanana may be indicated as per the situation. Vishtabdha Ajeerna which is Vata dominant situation where the digestion is delayed, to control the Vata, Swedana is helpful. Drinking of warm water will also be helpful if there is increase of Sheeta (cold) and Ruksha Guna (dry qualities) of Vata. The Ajeerna when not managed properly and if the individual is continuously exposed to etiological factors then it may cause severe complications such as fainting, giddiness even death also. This may be the reason Acharyas have told this as Ghor Vyadhi.

CONCLUSION: A large number of people are suffering with problems related to digestion and it is one of the commonly received complaints in the medical field. When neglected it may affect the work capacity and productivity of the individual. Ajeerna is also the initial stage of many severe problems. Specific management of Ajeerna based on its Doshik predominance and involved etiological factors can be extremely helpful to control this problem from its root. Both physical and psychological issues need to be handled in the management of Ajeerna along with correction of lifestyle and dietary habits.

REFERENCES:

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Source of support: Nil Conflict of interest: None Declared

Cite this Article as : [Dubey Vivek Kumar et al : Ajeerna (Indigestion)- A Disease of Serious Concern] www.ijaar.in : IJAAR VOLUME IV ISSUE XI JAN– FEB 2021 Page No: 1408-1412