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CLINICAL IMPORTANCE OF PITTADHARA KALA IN PRESENT SCENARIO

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ABSTRACT

Ayurveda presents a distinctive approach to health and wellness, grounded in timeless principles that continue to hold significance today. One such foundational concept is *Kala*, elaborated by Acharya Sushruta in the *Sharir Sthana*. Among the various types, *Pittadhara Kala* holds particular importance. Situated between the *Amashaya* (stomach) and *Pakvashaya* (intestine), it is closely linked with the *Grahani*—a structure integral to the initial stages of digestion. Anatomically, this can be compared to the mucosal lining of the small intestine, which plays a critical role in digestion by producing enzymes referred to in Ayurveda as *Pachakagni* or *Jatharagni.* Pittadhara Kala functions primarily to safeguard the Grahani and facilitate the effective secretion of *Pachaka Pitta*. When *Agni* (digestive fire) becomes weak—termed *Mandagni*—it is considered the underlying cause of numerous diseases, highlighting the central role of digestion in overall health. Factors such as poor eating habits, sedentary lifestyle, and mental stress are known to impair *Pittadhara Kala*, resulting in *Agni Vaishamya* (disturbed digestive fire) and *Avipaka* (indigestion). Impaired functioning of the *Grahani* leads to disruption of *Agni,* ultimately causing various gastrointestinal disorders. To restore digestive balance and address *Jatharagni Dushti*, a combination of dietary regulation and appropriate medicinal interventions targeted at revitalizing the *Pittadhara Kala* is essential.

Keywords: ***Pittadhara kala, Mandagni, Ajeerna, Agnidipana***

INTRODUCTION

Acharya Sushruta, the pioneer of *Rachana Sharir,* introduced the concept of *Kala Sharir* in the 4th chapter of *Shaareerasthana,* which stands out as a distinctive principle in Ayurveda. Kala refers to a membrane or boundary that separates the *Dhatu* from its *Ashaya. Dhatu*, in this context, is responsible for the structural integrity of the body, not only referring to the seven primary *Dhatus* but also including the *Tridosha* and the *Trimala,* as they also play a role in supporting the *shareera. Ashaya*, on the other hand, refers to the space or region where *Dhatu* resides and is supported.

The *Kala* in the body is organized in layers similar to the rings of a tree. There are seven distinct *Kala,* each associated with different bodily functions, M*aamsadhara Kala, Raktadhara Kala, Medodhara Kala, Sleshmadhara Kala, Pureeshadhara Kala, Pittadhara Kala, and Sukladhara Kala.* Each *Kala p*lays an essential role in maintaining the normal structure and functions of the body.

Kleda, present between the *Dhatus* and *Ashaya,* undergoes metabolism under the influence of *Dehoshma*, leading to the formation of *Kala* **[1]**. *Kala*, often overlooked in traditional medicine, serve not only as structural supports but also as membranes with specific functional roles. Among these, *Pittadhara Kala* holds particular significance. Pittadhara Kala is located between the Aamaashaya (stomach) and *Pakwashaya* (large intestine) or within the region of *Pachyamaanasaya* (small intestine) **[2]**. It is responsible for the digestion of four types of food. This digestive process occurs due to the *Teja* of *Pitta*, which is essentially *Agni. Pitta*, or *Agni,* is essential for proper digestion, absorption, and the formation of waste products.

According to the *Ashtanga Hridaya*, *Pittadhara Kala* is situated in the region of *Garahani* **[3]**. Upon closer inspection, *Pittadhara Kala* can be correlated to the epithelial lining of the small intestine. In this context, bile, pancreatic juices, and gastrointestinal secretions function as the *Pitta* and *Agni,* playing a crucial role in the effective digestion and absorption of food and water.

A clinical study evaluated the structural changes in patients affected with *pittaj grahani* roga through endoscopy showed many abnormalities in the intestinal mucosa. In most of the *Pittaj Grahani* patients Grade I mucosal changes were observed. There was Duodenal Scalloping, Flattening of mucosal folds, Duodenitis with duodenal ulcer, Ulcer at ileo-caecal junction along with Multipale fissure with mosaic like appearance with Mucosal nodularity. These findings suggestes that structural changes in *Grahani*

are directly related with the *Pittaj Grahani vyadhi* **[4]**.

Another one study suggests that before the development of diseases of the intestine there will be an increase in the gut permeability. Hence intestinal barrier dysfunction plays an important role in development of intestinal digestive activity. Hence it will be beneficial to schedule the treatment for enhancing the gut barrier function through probiotics and anti-inflammatory agents **[5]**.

MATERIALS AND METHODS

The study is aimed to analyse the concept of Kala Shareera, specially Pittadhara Kala and to identify the relation between the agni and pittadharakala and the role of Pittadhara Kala in diaeases associated with jataragni.

Source of Data - Literature regarding Kala were collected from Bruhatrayees, Laghutrayeesand other classical books and journals. Anatomical structures related to Pittadhara kala their structure and functions were collected from Modern Textbooks of Anatomy. The collected data were analyzed scientifically.

RESULTS & DISCUSSION

Agni, the digestive fire in Ayurveda, cannot function independently of *Pitta,* as it resides within it. The various physiological roles attributed to *Pitta* are governed by the *Pittadhara Kala*. When this structural component is compromised, it results in weakened Agni, leading to *Agnimandya* (low digestive fire), *Ajeerna* (indigestion), and various other related disorders. *Mandagni*, or diminished digestive fire, is considered a foundational cause of numerous diseases in Ayurveda, highlighting the vital role of digestion in maintaining health and well-being.

Modern science also acknowledges that the intestinal glands, along with pancreatic juices and bile, play a key role in the breakdown of food within the small intestine. Hence, a healthy intestinal mucosa is essential for the effective secretion of digestive enzymes and for optimal digestion. Conditions such as *Agnimandya* triggered by overeating can often be treated through *Langhana* (fasting) and other therapies aimed at stimulating enzyme secretion.

However, lifestyle factors such as excessive alcohol consumption, caffeine, smoking, tobacco use, and certain medications can damage the intestinal mucosa, leading to digestive inefficiency. In today's fast-paced world, poor dietary choices and sedentary lifestyles have become common, negatively impacting intestinal health in many individuals. Disorders such as Crohn's disease, irritable bowel syndrome (IBS), and ulcers are known to damage the intestinal lining and disrupt the function of digestive secretions.

When digestive dysfunction arises due to structural or disease-related impairment of the intestinal mucosa, targeted therapies are

necessary to restore mucosal integrity. Psychological stress can also exacerbate gastrointestinal issues by altering secretory functions and increasing intestinal permeability, a condition often referred to as "leaky gut." This compromised barrier function is believed to be a central mechanism in the development of inflammatory bowel diseases (IBD).

Probiotics have shown potential in supporting mucosal barrier function by promoting mucin production, reducing bacterial overgrowth, enhancing mucosal immunity, and providing antioxidant benefits. Infections such as *Helicobacter pylori* can also damage the mucosal lining, particularly in the duodenum, by increasing acid production and weakening the protective barrier through the secretion of urease, leading to duodenal ulcers.

The intestinal mucosa acts as a vital interface between the external environment and the internal physiology of the body. Disruption of this barrier is increasingly being recognized as a primary or secondary factor in a variety of both intestinal and systemic inflammatory conditions. Understanding the mechanisms underlying intestinal barrier dysfunction could pave the way for innovative therapeutic strategies.

Preservation and restoration of this barrier is emerging as a promising area of clinical and research interest in the pursuit of improved treatments and preventive healthcare.

CONCLUSION

This study of *Kala Shareera* with reference to *Pittadhara Kala* from both ancient and modern scientific perspectives has provided a well-established understanding of the concept of *Kala*. To understand the *Vikruti* (pathological state) of a *Kala*, one must first comprehend its *Prakruti* (normal state). Therefore, in the field of medical science, a thorough examination of *Kala Shareera* from both *Ayurvedic* and modern viewpoints including its anatomical and physiological aspects is essential for accurate diagnosis and better clinical outcomes.

Ajeerna (indigestion) is among the most common health issues people face today. *Agni* plays a vital role in digestion, and a normally functioning *Pittadhara Kala* supports proper digestion. However, when this *Kala* becomes vitiated, it can lead to *Ajeerna* due to *Agnimandya*, which can be managed through *Agnidipana*.

Hence, the *Pittadhara Kala* holds significant importance in clinical practice and its understanding is essential for effective treatment and management of digestive disorders and overall well-being.

REFERENCES

[1] Sushruta Samhita by Prof. Dr. Vasant Patil, Dr. Rajeshwari N. M. Chaukhamba Publication 2018. Shareera Sthana 4/18, Page No. 160

[2] Ashtanga Samgraha of Vagbhata Translated by Prof. K.R. Srikantha

Murthi Chaukhambha Orientalia Varanasi 2001. Shareera Sthana 5/36. Page No. 64

[3] Charaka Samhita by Prof. Y. G. Joshi Part II, Pune Sahitya Vitarana Pune. Chikitsa Sthana. 15/56-57. Page No. 459.

[4] Gaikar YV. *Endoscopic assessment of GI tract wrt grahani sharir in clinically diagnosed patients of pittaj grahani roga* (Doctoral dissertation, Tilak Maharashtra Vidyapeeth.

[5] Camilleri Á, Madsen K, Spiller R, Van Meerveld BG, Verne GN. Intestinal barrier function in health and gastrointestinal disease. Neurogastroenterology & Motility. 2012 Jun;24(6):503-12.