

Aanaha/ Aatopa/ Aadhmana

Āṇaha / Āṭopa / Ādhmāna

(The spectrum of Ayurvedic abdominal distension disorders)

Key classical sources - • Caraka Saṃhitā: Chikitsā 13, Siddhi 7 • Suśruta Saṃhitā: Nidāna 7, Cikitsā 5 • Aṣṭāṅga Hṛdaya: Nidāna 12, Chikitsā 8 • Mādhava Nidāna: 33

1. Nomenclature & Conceptual Overview

Term	Literal meaning	Classical description	Probable modern correlate*
Āṇaha	“Constricted / obstructed”	Retention of flatus & stool with distension of the abdomen	Dynamic ileus, spastic-obstructive constipation
Āṭopa	“Borborygmus / rumbling sound”	Gaseous distension with gurgling and shifting pain, flatus may pass with difficulty	Flatulent dyspepsia, irritable bowel-type gas
Ādhmāna	“Up-blown balloon”	Generalised abdominal bloating due to vāta trapped in intestinal loops without hard obstruction	Functional bloating, tympanites

*Correlation is only for academic orientation; the management is strictly Ayurvedic.

2. Classification (Bṛhatrayī synthesis)

1. Doṣa predominance

- a. Vātaja
- b. Pittānubandha
- c. Kaphānubandha
- d. Sannipātaja

2. Site

- a. Pākva-āśaya (colon) - Baddhānaha / Vibandha
- b. Grahaṇī / Uḍara - Ādhmāna
- c. Aṃśa-pārśva (flanks) - Pratyādhmāna

3. Nature of obstruction

- a. Māla-avarodha (faecal impaction)
- b. Āma-saṅga (endotoxins & mucus)
- c. Kapha-śleṣma granthi (mucous plugs)
- d. Ārtava-avarodha (in females)

3. Nidāna-Pañcaka

3.1 Nidāna (Etiological factors)

1. Āhāraja

- Guru, snigdha, śīta, abhīṣyandi āhāra - new cereals, cheese, curd at night
- Viruddhāhāra - fish + milk, fruit + milk etc.



- Paryuṣita-annabhakṣaṇa (stale, refrigerated food)
- Ati-mātra bhojana (over-eating), adhyāśana (repeated meals)
- 2. **Vihāraja**
 - Vega-dharana (suppression of flatus, faeces, urine)
 - Divā-svapna & Alasya
 - Ajīrṇe bhojana (eating over previous undigested food)
 - Vyāyāma-sūnya, prolonged sitting / travel
- 3. **Mānasa**
 - Krodha, bhaya, chintā - vātaprakopa & colonic spasm
- 4. **Others**
 - Krimi, grahaṇī roga, post-operative intestinal handling

3.2 Pūrvārūpa (Prodromal features)

1. Light dragging sensation in lower abdomen
2. Frequent but ineffective urge to pass flatus or stool
3. Mild colicky pain that subsides on warmth
4. Feeling of heaviness after even small meals

3.3 Rūpa (Cardinal signs & symptoms)

Vātaja

Severe flatulence, colicky pain, dryness, Burning, thirst, yellowish belch, soft constipation, pain ↓ after passing flatus but foul stools

Pittānubandha

Kaphānubandha

Heaviness, lethargy, nausea, sweetish belch, sticky stools

Common to all - Generalised abdominal distension, borborygmi, flatus retention.

3.4 Upaśaya-Anupaśaya

- **Upaśaya:** Hot fomentation, hingvādi carminative powders, mild anulomana, yoga mudrā (pavānamuktāsana)
- **Anupaśaya:** Cold water, heavy meals, day sleep, mental stress

3.5 Saṃprāpti (Pathogenesis - concise flow)

1. Nidāna → Agnimāndya ↑ → Āma formation
2. Āma + Kapha ↔ sticky mucous → Srotorodha in grahaṇī / pakvāśaya
3. Apāna-vāyu gets **āvarita (obstructed)** → Udāna & Samāna also deranged
4. Trapped vāta distends intestines = Āṭopa / Ādhmāna → further dries malas → Baddhānaha

4. Saṃprāpti-Vighatana (Therapeutic break-up)

- **Mukta srota:** Remove obstruction (Kapha-āma → Deepana, Pācana, Mṛdu-Svedana)
- **Vāta-anulomana:** Facilitate downward movement (Sneha, Basti)
- **Agni dīpana:** Restore digestive fire
- **Āma-pācana:** Ensure complete digestion
- **Māla-mārga śuddhi:** Soft evacuation (Mṛdu-Virecana if Kapha/Pitta anubandha)

5. Doṣaja Cikitsā-Sūtrāṇi

- Vātaja** – Snehana ↑ + Svedana → Niruha-Basti (Daśamūla-Saindhava) alternated with Anuvāsana (Eranda-taila) → Hingu-Trikatu-Saindhava cūrṇa 2 g b.i.d. with warm water.
- Pittānubandha** – Mṛdu Saṅnīpātaka Virecana (Trivṛt-lehya 10 g) → Basti with Madhutailika kalpa + tikta ghṛta snehapāna; cold carminative herbs avoided.
- Kaphānubandha** – Śodhana begins with Vamana (if śleṣma bahula) → Dīpana (Pañcakola 3 g) → Basti with pañcakola-kvātha + honey + oil of Añkola; Hingu-vāṭi 125 mg q4h.
- Sannipātaja** – Sequential – Āma-pācana → Virecana → Karma-basti 16 schedule (Yoga-basti).

“Vātaḥ saṃvardhito baddhaḥ pakvāśayamupeti cet □ Śūlaṃ kṛtvā karotyāhaṃ pūrṇaṃ kumbhamivoḍaram □” – Suśruta Nidāna 7/12

“Saindhava-hīṅgu-citrakādibhiḥ śīghraṃ vātaṃ vinirdīśet” – Caraka Chikitsā 13/107

6. Comprehensive Cikitsā-Yojanā

6.1 Śodhana (Biopurification)

Step	Procedure	Classical reference	Indicative schedule
Poorva karma	Snehapāna with Sukumāra Ghṛta 30–60 ml	CS Chik 13/62	3–5 days
Svedana	Nāḍi-/Bāṣpa-sveda focussing on abdomen & back	AH Chik 8	Daily
Virecana*	Trivṛt-Avalehya / Avipatti cūrṇa 8–10 g	SS Chik 5	Day-1
Basti	Yoga-Basti (6 Nirūha + 10 Anuvāsana)	CS Siddhi 1	From day-3

*Skipped if patient is extremely vātika & constipated; instead local oil enema + castor oil purgation (15 ml warm).

6.2 Śamana (Internal medications)

Formulation	Key drugs & rationale	Dose & Anupāna
Hingu-vāṣṭaka cūrṇa	Hingu, Saindhava, Trikatu, Ajmoda – Vāta-kaphahara, Deepana	2 g with ghṛta & hot water, t.i.d
Pañcakola cūrṇa	Pippali, Pippalīmūla, Śuṅṭhi, Cavya, Citraka – Srotosodhana	3 g before meals with takra
Lasūnādi Vaṭi	Garlic, Hing, Citraka – colic reliever	250 mg × 3
Abhayādi Modaka	Harītakī + Trivṛt + Guda – anulomana & mild purgation	1–2 tablets at bedtime
Eranda-taila	Ricinoleic oil – vāta-anulomana & bowel softener	10–15 ml in warm milk at night
Daśamūla-Kaṣāya	Anti-spasmodic, vāta-kapha śamana	50 ml b.i.d before meals
Ajamaodādi Cūrṇa	Carom seed based carminative	2 g after meals with lukewarm water

6.3 Bāhya Cikitsā

- Hingu-Taila abhyanga clockwise on abdomen
- Upanāha sveda with mustard cake + saindhava for 30 min
- Nabhigata lepa: Harītakī cūrṇa + saindhava + warm water paste

7. Pathya-Apathya

7.1 Pathya (Wholesome diet & regimen)

- Laghu-śākā: Lauki (bottle-gourd), Turai (ridge-gourd), Toriya, Pumpkin
- Shimbī-dāla: Green gram, red lentil – well-cooked with cumin & hing
- Cereals: Old rice, barley, shāli-śashtika; wheat phulka with ajwain



4. Lubricants: Cow ghee (1-2 tsp per meal), sesame oil in cooking
5. Condiments: Ginger, cumin, ajwain, black pepper, rock-salt
6. Drink: Ushṇa jala sipped frequently; takra (spiced buttermilk) midday
7. Post-meal walk 100 steps; Yogāsana – Pavanamuktāsana, Vajrāsana, Trikoṇāsana
8. Early dinner (before sunset); no lying down for 45 min after meals.

7.2 Apathya (To be strictly avoided)

- Heavy pulses (black gram, rajmah, chick-pea at night)
- Fermented bakery, cheese, raw salads in large quantity
- Carbonated drinks, iced water, packed fruit juices
- Cold curd at night, milk with salty foods, leafy cabbage, cauliflower, mushroom
- Suppression of natural urges; prolonged sitting; day sleep immediately after lunch
- Excessive worry, screen time during meals.

8. Follow-up & Prognosis

- Simple functional ādhmāna – curable with proper regimen in 7-15 days.
- Chronic baddhānaha with structural lesions (tumour, gross obstruction) – kṛcchra-sādhya / Asādhya; needs appropriate referral.
- Compliance to pathya and periodic basti once in 3-4 months prevents relapse.

9. Quick Reference Algorithm (Clinical Desk-Top)

1. Rule out surgical obstruction → If present, emergency care first.
2. If bowel sounds present + flatus absent → Start Deepana-Pācana (Hingvāṣṭaka + Takra) + local Svedana.
3. If hard stool loaded → Castor oil 30 ml / Abhayādi modaka at bed-time.
4. Day-2 onward → Daśamūla Nirūha + Eranda-taila Anuvāsana (if vātika).
5. Monitor: Pain ↓, flatus passes → Continue Śamana drugs x 1-2 weeks.
6. Repeat Bastikarma once weekly for 3 sittings if chronic.