

Agnimandya, Aruchi/ Arochaka

Agnimandya Janya Aruchi/ Arochaka (hypo-digestion-induced anorexia / loss of true taste & desire for food)

1. Samprapti (etiopathogenesis) in brief

Stage	Key events	Classical references*
Hetu (causes)	Guru-snigdha āhāra, achintana-indriyārtha-atiyoga, divā-svapna, mandagni janya āma-pāka	Cakradatta 8, A.Hr. Sū. 13
Dosha-dushti	Kapha (primary) → coats Jatharāgni & tongue; Vāta (associated vibandha); Pitta (↓ pachaka, ↑ mala-mishrita rasa)	C.S. Chi. 15, Su. Sa. Sū. 46
Dushya	Rasa-dhātu, Rasavaha & Annavaha srotas	
Srotorodha	Kapha-āma sludge blocks macroscopic & microscopic channels → rasa-pravṛtti-nirodha = tastelessness & satiety	
Lakṣaṇa	Aruchi (loss of relish), klama, ālasya, heaviness, nābhi-gourava, belching of raw taste	

2. Samprapti-vighatana (breaking the pathogenesis)

Target	Strategy	Practical application
Āma-Kapha kapāṭana	<i>Langhana & Pācana</i> to clear obstructing sludge	Laghu āhāra (yavāgu, takra-mastu) for 1–2 d; Pañcakola kvātha 40 ml tds
Agnidīpana	<i>Uṣṇa-tikṣṇa deepaniya dravya</i>	Chitrakādi vati 250 mg tds before meals; Trikatu cūrṇa 2 g with warm water
Viśodhana (if Saṃsarga/Sannipāta or chronic)	Vamana in Kapha prādhānya, Virecana in Pitta prādhānya; Nirūha-vasti if Vāta-linked bloating/constipation	Classical order: Snehapāna → Svedana → Śodhana
Rasa-srotas saṃśodhana	Bitter-astringent, aromatic <i>Hṛdya</i> dravyas to restore taste buds and rasa circulation	Guduchi, Kirātatikta, Musta, Parpata in decoctions
Rasāyana (post-clearance)	Support sustained Agni and taste	Dadimāvalehya 10 g tds after food for 4 weeks

3. Chikitsā-sūtra (therapeutic formulae)

1. **Langhana → Deepana → Pācana → Śodhana (pragāḍha doṣa) → Rasāyana**
2. “*Tikta-kaṭu-uṣṇa-laghu dravyaiḥ agniṃ dīpayet; lavaṇa-sahitaṃ yat sarvārochaka-nāśanam.*”
3. Pathya (seen as ancillary but essential): warm water, thin buttermilk spiced with Hingu & Śuṅṭhī, light millet gruels; avoid heavy dairy, fried food, day-sleep.

4. Aushadha-yoga (classical prescriptions)

Purpose	Yoga (classical text)	Ingredients snapshot & dose	Anupāna / mode
Quick Deepana-Pācana	Chitrakādi Vati (Bha. Pr.)	Chitraka, Pippalī, Maricha, Ajamodā, Saindhava; 1 tab (250 mg) tds before food	Warm water
	Agnituṅḍī Vati (Yoga Ratnākara)	Chitraka, Vatsanābha-saṃśodhita, Ajamodā, Triphalā, Trikatu; 125 mg bd	“Śuṅṭhī-sadita” takra
	Hingvāshtaka Cūrṇa (B.R.)	Hingu + Trikatu + Ajaji + Saindhava; 2 g with ghee before meals	Ghee + hot water

Purpose	Yoga (classical text)	Ingredients snapshot & dose	Anupāna / mode
Ama-śoṣa & Kapha-Lekhana	Pañcakola Kvātha (C.S.)	Pippalī, Pippalīmūla, Chavya, Citraka, Nagara; 40–60 ml tds	
Taste revival (Hṛdya-dīpaniya)	Dadimādyā Ghṛta (Cak.)	Dadima, Sunthi, Maricha, Ajaji, Saindhava, Goghṛta; 5 ml hs	Warm milk
	Lavaṇabhāskar Cūrṇa (B.R.)	Saindhava, Kala-lavaṇa, Trikatu, Jeeraka, Dhanyak, Hingu; 3 g tds after food	Lime-warm water
If Vāta-Kapha flatulence dominant	Jīraka-Siddha Takra (A.Hr.)	Roast Jeeraka 5 g + 200 ml buttermilk; take tds	-
Chronic / post-fever anorexia	Shaddharana Cūrṇa (Y.R.)	Trikatu, Chitraka, Patha, Hingu, Saindhava; 1 g tds	Honey
Paediatric palatability	Ārdraka-Saindhava Lehya	Fresh ginger juice 10 ml + Saindhava 2 g + ghee 2 ml; lick before meals	-

5. Supportive Pathya-Apathya (diet & lifestyle)

Do	Avoid
Warm water sips, thin mung dal soup with lemon, roasted pomegranate seeds with rock-salt	Cold/carb-laden drinks, bakery items, processed sugar, curd at night, day-sleep
Light walk after meals, seated Vajrāsana 5 min for at least one meal	Holding natural urges, excessive screen time immediately after eating
Spice the diet mildly with Hingu, Jeeraka, Pippalī	Excess chilli or sour-fermented pickles in acute gastritis stage

6. Practical clinical pearls

- Observe the tongue.** Heavy white-sticky coat = Kapha-āma; thin yellow = Pitta; black-brown dry = Vāta-Pitta. Tailor Deepana vs Śodhana accordingly.
- Sequence matters.** Administer Tikta-Kaṭu herbs **after** even a mini-Langhana (liquid fast) for better tolerance.
- Doṣa-sāmya ≠ Gastric Acid.** Classical Deepana herbs stimulate coordinated gastric, pancreatic and hepatobiliary secretions; they are not mere acidifiers.
- In recurrent Agnimāndya associated with hypothyroidism or IBS, add **Ārōgyavardhini Vati** 250 mg bd for 8 weeks (monitor LFT).
- Contra-indications:** Avoid Vamana in severe dehydration, uncontrolled hypertension, children < 7 y; avoid strong Tikta-Kaṭu in active gastritis ulcers—use mild carminatives first.