

KOSHITA: A CRITICAL REVIEW OF ITS CLINICAL SIGNIFICANCEVd. Pooja Gadle^{1*} and Vd. Vijay Potkule²¹*MD Scholar, Dept. of Kriya Sharir, Shree Saptashruni Ayurved College and Hospital, Hirawadi, Nashik, Maharashtra India.²Associate Professor, Dept. of Kriya Sharir, Shree Saptashruni Ayurved College and Hospital, Hirawadi, Nashik, Maharashtra India.***Corresponding Author: Vd. Pooja Gadle**

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ABSTRACT

In Ayurveda, *Koshtha* is a distinctive concept that refers to the cavity or space within the body, particularly relating to the digestive system. The term "*Koshtha*" denotes the nature of the alimentary tract, encompassing the motility of the intestines and the movement of food and fecal matter through the digestive canal, ultimately facilitating the elimination of waste. Based on the predominance of the *Doshas* or individual *Prakruti* (constitution), *Koshtha* is generally classified into three types: *Krura* (hard), *Mridu* (soft), and *Madhya* (moderate), reflecting the dominance of *Vata*, *Pitta*, and *Kapha Doshas*, respectively. *Koshtha* is integral to the concept of *Abhyantara Rogamarga* (internal disease pathways). *Koshtha Pariksha* (examination of the digestive system) provides valuable insights into the consistency, moisture, and overall quality of bowel habits. This assessment is crucial for accurate diagnosis and effective treatment of various ailments. Furthermore, *Koshtha Pariksha* aids in selecting appropriate *Aushadhi* (medicinal formulations) and determining their optimal dosages. It also plays a significant role in advising patients on *Pathya-Apathya* (wholesome and unwholesome practices) and *Aahara-Vihara* (dietary and lifestyle choices), thus promoting holistic health.

KEYWORDS: *Tridosha, Koshtha, Koshtha Pariksha, Virechana Dravya.***INTRODUCTION**

Ayurvedic principles are built upon foundational concepts that are both structurally and functionally specific, providing a framework for understanding various physiological and pathological processes. Among these concepts, *Koshtha* stands out as a unique entity in Ayurveda. The term *Koshtha* pertains to the nature of the digestive tract and the hollow structures within the body. It represents the digestive system's integrity, particularly the motility of the intestines and the movement of food and fecal matter through the alimentary canal. While *Koshtha* and its branches, or *Shakha*, can be considered in tandem for a comprehensive understanding of systemic pathogenesis, *Koshtha* primarily denotes a hollow cavity that plays a vital role in digestion. Understanding and assessing an individual's *Koshtha* is essential for accurate diagnosis and effective treatment of various diseases.

MATERIALS AND METHODS

For the current conceptual study, relevant literary materials were gathered from authoritative Ayurvedic texts, including

1. Charaka Samhita
2. Sushruta Samhita

3. Ashtanga Hridaya

These texts provide insights into the nature of *Koshtha* and its clinical significance.

Conceptual Study of *Koshtha Nirukti*

(Etymology of *Koshtha*):^[1] The term *Koshtha* is derived from the roots "*Kush*" and "*Than*,"^[2] denoting "*Aavarana*" or covering. It signifies a cavity formed by *Avarana* (walls) composed of *Dhatus* (tissues), indicating a vacant space where various substances can be contained.

***Koshtha Paribhasha* (Definition):** *Koshtha* is defined as the nature of the alimentary tract, encompassing bowel movements and the characteristics of fecal elimination. It is often referred to as *Mahastrotasa* (the great channel), which extends from the mouth to the anus, constituting the complete digestive system. It is also recognized as *Abhyantara Roga Marga* (internal pathway of diseases).^[3] This compendium suggests three routes through which diseases can invade the body: the outer route (*Bahya Roga Marga*), middle route (*Madhyam Roga Marga*), and inner route (*Abhyantar Roga Marga*). Therefore, the thoraco-abdominal cavity is also

considered a part of *Koshtha*, and the organs within this cavity are termed *Koshthagas*. According to Acharya Charak, the fifteen *Koshthagas* include *Nabhi* (umbilicus), *Hrudaya* (heart), *Kloma* (pancreas), *Yakruta* (liver), *Pleeha* (spleen), *Vrukka* (kidneys), *Basti* (bladder), *Purishadhana* (cecum), *Aamashaya* (stomach), *Pakvashaya* (small and large intestines), *Uttarguda* (rectum), and *Adharguda* (anus).^[4] Sushrutacharya elaborates that *Koshtha* contains vital organs including *Hrudaya* (heart), *Rudhira* (blood), *Phupusa* (lungs), *Aamashaya* (stomach), *Pakvashaya* (intestines), *Unduka* (appendix), and *Mutrashaya* (bladder).^[5] He further states that the entire abdominal region (*Sarvam Udar*) should be classified as *Koshtha*.^[6]

Paryaya (Synonyms): *Koshtha* is synonymous with terms such as *Mahastrotasa*, *Sharirmadhya*, *Aamashaya*, and *Pakwashaya*.^[7]

Koshtha Prakara (Types): *Koshtha* is classified into three types based on the predominance of the doshas.^[8]

1. *Krura Koshtha*: In this type, *Vata Dosha* is predominant, resulting in hard feces and difficulties in elimination. The qualities of *Ruksha* (dry) and *Khara* (rough) associated with *Vata* dominate, leading to reduced secretive and absorptive capabilities.

2. *Mrudu Koshtha (Soft Bowel)*: Here, *Pitta Dosha* predominates, causing watery or semi-solid feces, often expelled more than once or twice daily. *Mrudu Koshtha* is characterized by *Sara* (laxative), *Drava* (fluid), *Snigdha* (unctuous), and *Laghu* (light) qualities, resulting in a smooth, lubricated passage, although absorption may be compromised.

3. *Madhyam Koshtha (Moderate Bowel)*: In this type, *Kapha Dosha* is dominant, leading to soft, solid feces that pass smoothly. *Madhyam Koshtha* exhibits qualities of *Snigdha*, *Guru* (heavy), and *Sthira* (stable), providing optimal secretion and absorption due to a balanced interaction of the three *Doshas*.

Koshtha Pariksha (Assessment of Koshtha)

Koshtha reflects an individual's bowel habits and is influenced by their *Prakriti* (constitution). For instance, a

person experiencing constipation may be classified as having *Krura Koshtha*, but this assessment could be misleading if the condition is acquired rather than constitutional. Therefore, distinguishing between innate tendencies and acquired habits is crucial.

Assessment of *Koshtha* can be conducted through several parameters

1. *Aahara (Diet)*: Evaluate the frequency and quality of food intake, considering the *Aahara Guna* (properties) and *Matra* (quantity) consumed, as well as the time taken to finish each meal.

2. *Jalapana (Water Intake)*: Assess the frequency and quantity of water consumed throughout the day.

3. *Sneha Dravya*: Observe the time duration for achieving '*Samyaka Snigdha Lakshanas*' after internal oleation (*Sneha*).

4. *Vyanjana Dravya*: Evaluate the quantity and frequency of additional items (pickles, papads, chutneys) consumed during meals.

5. *Malapravrutti (Bowel Habits)*: Examine bowel habits for frequency, consistency, straining, duration of defecation, satisfaction, and past experiences with diarrhea or constipation, as well as responses to purgatives and laxatives.

6. *Effect of Aahara or Aushadhi*: Monitor the impact of dietary and medicinal substances on bowel movements, especially concerning *Virechana* (purgation).

7. *Jirna Anna Lakshana*: Analyze symptoms experienced after meals to further discern the type of *Koshtha* an individual possesses.

By thoroughly evaluating these parameters, practitioners can gain a comprehensive understanding of an individual's *Koshtha*, facilitating accurate diagnoses and effective treatments tailored to their unique constitution. This approach underscores the significance of *Koshtha* in both preventive and therapeutic aspects of Ayurvedic medicine.

Table 1: Assessment of *Koshtha*.

SN	Examination Points	<i>Krura koshtha</i>	<i>Mrudu Koshtha</i>	<i>Madhyama koshtha</i>
1	<i>Aahara</i> of 24 hours	<i>Swarupa</i> - <i>vishama</i> (irregular frequency and quantity) <i>Guna</i> - <i>ushna</i> , <i>tikshna</i> , <i>snigdha</i> , <i>guru</i> <i>Rasa</i> - <i>madhura</i> , <i>amla</i> , <i>lavana</i>	<i>Swarupa</i> -more frequency and quanti-ty <i>Guna</i> - <i>laghu</i> , <i>sheeta</i> <i>Rasa</i> - <i>madhura</i> , <i>tikta</i> , <i>kashaya</i>	<i>Swarupa</i> -less <i>Guna</i> - <i>ushna</i> , <i>ruksha</i> <i>Rasa</i> - <i>katu</i> <i>tikta</i> , <i>kashaya</i>
2	<i>Jalapana</i>	<i>Vishama</i> (more or less)	More water intake	Less water intake
3	<i>Sneha dravya</i> (duration for <i>snehapana</i>)	No change in the bowels by test dose (30ml) of <i>Sneha</i> fats. Duration for <i>snehapana</i> - 7 days	After the 30 ml test dose of <i>Ghrta</i> (ghee) passes stools slightly loose and requery may be more. Duration for <i>snehapana</i> - 3 days	After the intake of test dose of <i>Ghrta</i> (ghee), passes semi formed or formed stools once or twice. Duration for <i>snehapana</i> - 5 days.

4	Vyanjana Dravya (frequency & quantity)	in more quantity and at more times (<i>amla, lavana, katu vyanjane</i>)	Taking very less or not (<i>Madhura vyanjane</i>)	Taking in medium quantity, at less time.
5	Malapravrutti	Doesn't pass stool regularly, Hard and dry stools, requires straining, Requires long time for defecation, Unsatisfactory bowel clearance, seldom encounters diarrhea and more frequently constipation.	Passes Stools daily once or twice regularly, Semi formed or formed stool, Easy defecation, less time required for defecation, Satisfaction after defecation, Previous encounters show often watery stools due to hot drinks, tea, milk.	Passes stools daily once, formed stools, requires minimum stress, Little long time (in comparison to <i>mrudu</i>), Satisfaction after defecation, doesn't often encounter diarrhoea or constipation.
6	Effect of Virechan Dravyas on bowel	Requires drastic purgatives of <i>snigdha, ushna & lavana</i> like <i>Shama, Kushta, Triphala</i> . ^[9]	Minor laxatives easily induces diar- rhea <i>Kshir</i> (milk), <i>Aaragwadha, ekshu, takra, mastu, gudha, krushara, nava- madya, ushnodak, draksha</i> ^[10] requires <i>kashaya & tikta</i> laxatives	Requires medium purgatives of <i>katu rasa</i> and medium dose of Purgatives and laxatives. Doesn't purge by milk or minor laxatives.
7	Jirna anna lakshana	Irregular appetite (may be early or long time)	<i>Amlodgara urodaha</i> , early appetite, excessive thirst	Heaviness, long time appetite

Clinical Significance of Koshtha Parikshana

Examination of *Koshtha* is crucial for the following reasons

1. Roga-Nidanartha (Diagnosis of Disease)

- Determining *Dosha* Predominance and *Prakriti*: Understanding the individual's *Prakriti* aids in identifying the dominant *Doshas*. Typically, individuals with *Vata Prakruti* exhibit *Krura Koshtha*, those with *Pitta Prakruti* show *Mrudu Koshtha*, and individuals with *Kapha Prakruti* display *Madhyam Koshtha*. This classification facilitates accurate *Rog-Nidan* (diagnosis of disease).

- By ascertaining an individual's *Prakriti*, the diagnostic process becomes significantly streamlined.

2. Roga-Chikitsartha (Treatment of Disease)

- Guiding Treatment Protocols: *Koshtha Pariksha* assists physicians in determining the appropriate line of treatment, whether it involves *Shamana* (palliative therapy) or *Shodhana* (purification therapies).

- Preparation for *Shodhana Karma*: Prior to *Shodhana Karma*, the process of *Snehapana* (internal oleation) is essential. The selection of *Snehadravya* (unctuous substances) and the appropriate dose (*Snehamatra*) are informed by *Koshtha Pariksha*.

- Advising on *Pathya - Apathya*: This assessment provides critical guidance regarding dietary and lifestyle recommendations (do's and don'ts).

- Tailoring *Aahara - Vihara*: Appropriate dietary and lifestyle adjustments can be recommended based on *Koshtha* findings.

- In *Shamana Chikitsa*, understanding the *Koshtha* is vital for selecting suitable *Aushadhi Dravyas* (medicinal substances) and their respective doses. For instance, individuals with *Mrudu Koshtha* require gentle *Aushadhi* in minimal doses, whereas those with *Krura Koshtha* may need potent *Aushadhi* in larger doses.

DISCUSSION

In Ayurveda, the transfer of nutrients and the exchange of bodily fluids are intricately linked to the *Koshtha-Shakha* interaction, with *Vata* playing a pivotal role. *Acharya Charaka* elaborates on the concepts of *Ulbana Anila*.^[11] and *Udeerna Pitta Alpa Kapha Maaruta*.^[12] as key contributors to *Krura Koshtha* and *Mrudu Koshtha*, respectively. Understanding whether these *Udeerna Doshas* are associated with an individual's *Prakriti* is essential for effective diagnosis and treatment. The effects of ingested materials also significantly influence *Koshtha*. For example, substances such as jaggery, churned curds, and rice mixed with sesame can promote the formation of A *Mrudu Koshtha*, facilitating smooth bowel movements. Conversely, if an individual has a *Krura Koshtha*, the same laxative effects may be insufficient due to the predominance of *Vata Dosha*, which can lead to difficulty in bowel evacuation. When *Pitta* is dominant, the expulsion of excretory products tends to be smoother. However, if both *Kapha* and *Vata* are not predominant, the results may align similarly with those of *Pitta*.

The assessment of *Koshtha* extends beyond the *Annavaha Strotasa* (digestive tract) to include *Pranavaha, Ras-Raktavaha*, and *Mutravaha Strotasa*, where dryness, moisture, or liquidity can be evaluated. In individuals with *Mrudu Koshtha*, there tends to be excessive secretions within the *Strotasas*, as seen in

increased nasal secretions or salivation in children. Conversely, individuals with *Krura Koshtha* typically exhibit reduced secretions and dryness, such as a dry nasal cavity or mouth. In *Madhyam Koshtha*, one may observe moderate levels of secretion.

CONCLUSION

Koshtha represents a unique and fundamental concept within *Ayurveda*, with varying interpretations among different *Acharyas* regarding its definition and significance. This review posits that *Koshtha* is essentially the vacant space formed by *Aavarana*, encompassing the entire alimentary tract from the mouth to the anus. The examination of *Koshtha* (*Koshtha Pareekshana*) plays a vital role in both *Rog Nidan* (diagnosis) and *Chikitsa* (treatment). Therefore, for effective management of any disease and for providing dietary and lifestyle recommendations (*Pathya-Apathya*), *Koshtha Pareekshana* is indispensable. By understanding an individual's *Koshtha*, practitioners can accurately prescribe suitable *Aushadhi* and appropriate *Aahara-Vihara* for optimal therapeutic outcomes.

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