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"AGNI SIDDHANTA: TYPES, FUNCTIONS AND ITS CENTRAL ROLE IN HEALTH AND DISEASE"

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ABSTRACT

Background: Agni, usually translated as digestive fire, is the central concept of Ayurvedic physiology and pathology. It is held responsible for digestion, metabolism, strength and immunity, and disorders of agni are regarded as the root of many diseases. **Objective:** To review the classical description of agni, its types, functions and disorders, and the concept of ama, and to discuss current research relating agni to metabolism, the gut microbiota and metabolic disease. **Methods:** Classical Ayurvedic texts were read in translation. PubMed was searched in November 2026 for papers on agni, ama, digestion and metabolism in Ayurveda. **Results:** The classical texts describe thirteen forms of agni: one jatharagni, five bhutagnis and seven dhatvagnis, and four states of jatharagni (sama, vishama, tikshna and manda). Impaired agni produces ama, which obstructs the srotas and causes disease. Recent work proposes links between agni and metabolic regulation, gut microbiota and metabolic heterogeneity in prameha and obesity. **Conclusion:** Agni is a functional concept covering digestion and metabolism at several levels. Its use in research requires clear operational definitions and measures of agni status, and caution against simple identification with a single enzyme system or organ.

KEYWORDS: Ayurveda, Agni, Jatharagni, Dhatvagni, Bhutagni, Ama, Metabolism, Gut microbiota

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INTRODUCTION

According to the Charaka Samhita, life span, complexion, strength, health, enthusiasm, bodily growth, lustre, immunity and vitality depend on agni, and when agni ceases to function the person dies (Ch. Chi. 15/3-4)[1]. This statement places agni at the centre of both the physiology and the therapeutics of the system. A recent review of Ayurvedic perspectives on metabolic heterogeneity similarly notes that Ayurveda evaluates agni, ama and srotas before selecting treatment[2]. As interest in metabolic disease increases, there is a need for a clear account of the classical concept and a critical review of research that relates it to modern biology.

MATERIALS AND METHODS

The Charaka Samhita (especially Chikitsasthana chapter 15), Sushruta Samhita and Ashtanga Hridaya were read in translation[1,3,4]. PubMed was searched in November 2026 using the terms agni, ama, digestion, metabolism, dhatvagni and Ayurveda. The indexed papers included clinical and conceptual studies on prameha and agni[5,6], the role of gut microbiota in Ayurvedic pharmacology[7], tissue nutrition[8], and metabolic heterogeneity[2,9].

OBSERVATION AND RESULTS

1. Types of agni

Thirteen agnis are described in the classical texts. Jatharagni is the digestive fire located in the stomach and duodenum (grahani). Five bhutagnis act on the five elemental components of food after the initial digestion, and seven dhatvagnis act on the nutrient fluid in each of the seven tissues (Ch. Chi. 15; A.H. Sha. 3)[1,4]. Jatharagni is considered the master of the other twelve, so that their function depends on it. In the doshic classification, pitta contains pachaka pitta, which is the physical seat of jatharagni, and the function of agni is assisted by samana vata and kledaka kapha (A.H. Su. 12)[4].

2. States of agni

Four states of jatharagni are described: sama (balanced), vishama (irregular, due to vata), tikshna (excessive, due to pitta) and manda (weak, due to kapha) (A.H. Su. 12/10-11; Ch. Chi. 15)[1,4]. In sama agni, food is digested properly in the appropriate time. In vishama agni, digestion is sometimes good and sometimes poor, with flatulence and irregular bowel habit. In tikshna agni, food is digested rapidly and hunger is quickly felt, with burning and thirst. In manda agni, digestion is slow, with heaviness and nausea. The condition can be assessed by the patient's appetite, the time taken for digestion, the character of the stool and the sense of lightness after meals, and it is therefore an assessment that can be recorded in structured form.

3. Ama and its consequences

When agni is weak, food is incompletely digested and produces ama, an unprocessed, sticky and foul-smelling material that is the root of many disorders. Ama blocks the srotas, vitiates the doshas and impairs the formation of the dhatus. When combined with doshas, it produces the state termed sama, and treatment aims first to digest the ama (pachana) and restore agni, before any other therapy is given (Ch. Chi. 15; A.H. Su. 13)[1,4]. The idea that the source of disease is incomplete transformation, and that treatment should restore the capacity to transform, is a distinctive feature of Ayurvedic reasoning.

4. Agni and tissue metabolism

Dhatvagni acts at the level of each tissue and determines the extent and quality of its formation. If dhatvagni is weak, the tissue is formed in insufficient quantity or poor quality, and the next tissue in sequence is affected. If it is excessive, the tissue is consumed. The scheme is the basis for the Ayurvedic account of both emaciation and obesity as disorders of agni at different levels[5,8]. In a clinical study in type 2 diabetes, patients with prameha were described as inherently carrying the risk of impaired agni and depleted ojas, and the response to the Rasayana drugs Silajatu and Mamajjaka was interpreted as an effect on agni and ojas as well as on glycaemia[6].

5. Agni and the gut microbiota

A review of the role of microbiota in drug metabolism noted that the Ayurvedic concepts of pharmacokinetics, including the effect after digestion (vipaka), coincide in part with the functions of the gut microbiota, and proposed that these may provide a biological correlate for such fundamentals[7]. Although that review concerns vipaka, the same argument can be applied to agni, because the microbial community participates in the digestion and transformation of food and in the production of metabolites with systemic effects. No study has yet validated a correspondence of agni states with defined microbiome profiles, and this remains a hypothesis.

6. Agni in metabolic disease

A review of prameha in Ayurveda describes it as a syndrome with Kapha predominance that includes obesity, prediabetes, diabetes and metabolic syndrome, with a disturbance of fat and carbohydrate metabolism[5]. A recent perspective argues that response to GLP-1 therapy varies considerably, and suggests that an Ayurvedic assessment of agni, ama, srotas and suitability for langhana might help to identify patients with different digestive, nutritional and metabolic phenotypes. The author states that these concepts should not be equated literally with biomarkers, but that they provide a testable hypothesis[2]. A broader narrative review concludes that Ayurveda is best positioned as an adjunctive framework for cardiometabolic risk reduction, diabetes and metabolic syndrome management, and emphasises that evidence is fragmented and of variable quality[9].

DISCUSSION

Agni is not a single organ or enzyme but a functional principle that operates at several levels, from the digestion of food in the gut to the transformation of nutrients in the tissues. For this reason, attempts to identify it with a particular entity, such as gastric acid or hepatic enzymes, are likely to miss part of the concept. A better approach is to treat agni as a construct to be operationalised through clinical features, such as appetite, digestion time, stool character, and through measurable markers, such as postprandial glucose, lipid and hormonal responses, gastric emptying and microbial metabolites.

Gaps remain. There is no agreed instrument for the assessment of agni with demonstrated reliability, and reports linking agni to biomarkers are few and small. Rasayana and diet studies often mention agni as an outcome but do not use standard measures. The priority for future work is to develop and validate such instruments, and then test whether agni status predicts response to interventions in metabolic disease.

CONCLUSION

The agni siddhanta places digestion and transformation at the centre of health. Its classical structure of thirteen agnis, four states and the concept of ama offers a coherent account of metabolism and its failure. Linking the concept to measurable physiology is a promising task for Ayurvedic research, provided the classical meaning is respected.

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