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Ayurvedic Perspective of *Kesha Sharir* according to *Acharya Sushruta*

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ABSTRACT

Ayurveda is a science of life. There are two main principles of *Ayurveda* these are to maintain the health of the healthy and second to cure the diseases of the sick. Disturbance in the equilibrium state (*Samyavasthata*) of *Doshas* leads to pathological changes in body structures and functions through their influence on *Dhatus*. Hair is known as *Kesha* the concept of the Ayurveda is not only achieving an attractive external feature appearance but also good health. Beauty is always associated with hair despite age. In *Ayurvedic* text Different names of *Kesha* according to the region. For examples *Kesha, Pakshma,Bhru,Roma,Kaksharoma,Guha,Smashru* etc. This article aims to review and analyze the concept of ***Kesha Sharira*** as described in *Sushruta Samhitas*.

Key Words *Kesha, Sharir, Sushruta Samhita, Prakruti, Marma*

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INTRODUCTION

Classical *Ayurvedic* texts provide various terminologies for *Kesha*, highlighting its importance and widespread recognition. According to the *Amarakosha*, several synonyms are used to denote hair, such as *Chikura, Kuntala, Bala, Kacha, Kesha,* and *Shiroruha*, among others[1].

Further clarification of the term *Kesha* is found in *Sanskrit* Dictionary. The Monier-Williams *Sanskrit* Dictionary explains that the word *Kesha* is predominantly used to denote hair of the scalp[2].In addition to this primary meaning, the dictionary also attributes other meanings to the term, including mane, a type of perfume, the name of a mineral, and even a geographical locality.This multiplicity of meanings reflects the linguistic richness of Sanskrit and the contextual usage of the term *Kesha* across different disciplines.

OBJECTIVES

1. To study *Kesha Shareera* as described in *Sushruta Samhita*.

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2. To understand the anatomical, physiological, nourishment and clinical aspects of *Kesha* in *Sushruta Samhita*.

METHODOLOGY

Study design: Literary review of *Kesha* in *Sushruta Samhita*.

Source of Information: Information of *Kesha* is collected and compiled from *Sushruta Samhita*.

LITERARY REVIEW

Anatomical, Developmental, and Physiological Aspects of *Kesha*

In *Ayurvedic* science, the concepts of *Rachana Sharira* (anatomy) and *Kriya Sharira* (physiology) are comprehensively explained, with *Sushruta Samhita* providing a more detailed and systematic description when compared to other classical *Samhitas*[3]. *Acharya Sushruta* has emphasized structural organization, developmental factors, and functional integrity of the human body through the principles of *Dhatus*, *Malas*, and *Bhavas*, which together govern growth, nourishment, and degeneration of bodily tissues[4].

According to *Sushruta Samhita*, the human body is sustained by seven *Dhatus*, namely *Rasa*, *Rakta*, *Mamsa*, *Meda*, *Asthi*, *Majja*, and *Shukra*[5].Each *Dhatu* produces a specific *Mala* during its metabolic process. *Loma* (body hair) and *Nakha* (nails) are described as the *Malas* of *Asthi Dhatu*[6], signifying a close anatomical and physiological association between bones, hair, nails, and teeth. This relationship explains why disturbances in *Asthi Dhatu* metabolism manifest clinically as hair fall, nail brittleness, and dental abnormalities[7].

Acharya Sushruta has also propounded the concept of *Shadbhavaja Purusha*, which includes six fundamental developmental factors responsible for the formation of the human body—*Pitruja, Matruja, Rasaja, Atmaja, Satvaja, and Satmyaja Bhavas*. Each *Bhavas* contributes specific anatomical structures and functional attributes. Among these, *Pitruja Bhava* plays a vital role in the development of stable and hard tissues. Classical texts describe ten derivatives of *Pitruja Bhava*, including *Kesha, Samshru, Loma, Asthi, Nakha, Danta, Sira, Snayu, Dhamani*, and *Reta*, highlighting the paternal influence in the formation of hair and skeletal components[8].

From the perspective of *Panchamahabhuta*, the *Varna* **(**color**)** of *Kesha* is attributed to the predominance of *Teja, Prithvi*, and *Vayu Mahabhutas*,[9] which together impart strength, pigmentation, and growth potential to hair. *Acharya Sushruta* further states that certain structures such as *Drishti* **(***vision***)** and *Romakupa* **(**hair follicles**)** do not increase in number after birth, whereas *Kesha* and *Nakha* continue to grow throughout life, even during old age and degenerative stages of the body[10].

The physiological significance of *Kesha* is further evident in pathological conditions like *Asthi Kshaya*, wherein depletion of *Asthi Dhatu* leads to features such as bone fragility, hair fall,

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premature greying, and weakness of nails and teeth. Thus, *Kesha* serves as an important clinical indicator of *Asthi Dhatu* status and overall tissue health.

***Kesha Poshan* (Nourishment of *Kesha*)**

In *Ayurveda*, the nourishment (*Poshana*) of *Kesha* is explained through the intricate network of *Dhamanis*, which are responsible for the transportation and distribution of nutrients throughout the body.*Acharya Sushruta* has clearly stated that the terminal ends of the *Dhamanis* are connected to the *Romakupa* (hair follicles), and through these channels, the roots of the hair are nourished[11].

In *Dhamani Sharira*, *Acharya Sushruta* describes twenty-four *Dhamanis* arising from the heart, which function as major channels of circulation.Among these, four are *Tiryakgami Dhamanis*, which spread horizontally throughout the body.These *Tiryakgata Dhamanis* are particularly significant in the context of *Kesha* nourishment, as they are responsible for carrying all four essential elements necessary for tissue sustenance. These elements divide repeatedly into hundreds and thousands of minute branches, becoming innumerable in number, ensuring uniform and adequate distribution of nutrients[12].

Acharya Sushruta further explains that these extensively branched *Tiryakgami Dhamanis* are widely dispersed throughout the body**,** and their openings are specifically related to *Romakupa*. Through these openings, nourishment reaches the hair follicles, facilitating the growth and maintenance of *Kesha*[13].

Kesha* and *Marma

There are 107 in number of *Marma* in our body[14]. *Marma* are described as vital points of the body where *Prana* (life force) resides[15].*Acharya Sushruta* defines *Marma* as the conglomeration of five important structural components—*Mamsa (*muscle*), Sira (*vessels*), Snayu (*ligaments*), Asthi (*bones*), and Sandhi (*joints*)*. Due to the presence of *Prana* at these sites, any injury to *Marma* results in serious consequences, ranging from pain and functional impairment to deformity or even death, depending upon the structures involved and the extent of injury[16].

Several important *Marma* associated with the head and face are described as hair or the hairline. *Apanga Marma* is located at the outer canthus of the eye, below the lateral limit of the eyebrows[17].*Avarta Marma* is situated above the eyebrows, while *Sthapani Marma* is located between the eyebrows[18].

Shankha Marma is located above the lateral ends of the eyebrows, between the ear and forehead, in the temporal region.*Utshepa Marma* is described above the *Shankha Marma* and at the level of hair, indicating a direct association with *Kesha* as an anatomical guide.One of the most significant *Marma* related to *Kesha* is *Adhipati Marma*, which is located at the superior part of the intracranial region and corresponds to the centre of the hair root spiral *(Kesha Vartma)* on the scalp[19].

Clinical Significance of *Kesha Sharira*

In *Sushruta Samhita*, there is no separate or exclusive *Roga Adhyaya* dedicated solely to

diseases of *Kesha*. There are fortyfour *Ksudra Rogas* according to *Acharya Sushruta*. However, *Acharya Sushruta* has described various disorders related to hair under the chapter of *Kshudra Rogas* in *Nidanasthana*,which includes conditions considered minor in size but clinically significant due to their chronicity, cosmetic impact, and psychological influence on the individual.

Acharya Sushruta has specifically mentioned *Khalitya* (hair fall or alopecia)**,** *Palitya* (premature greying of hair), *Arushika* (scalp eruptions with crust formation), and *Darunaka* (dandruff or dry scaling of the scalp) among the *Kshudra Rogas*[20].

Khalitya is mainly associated with aggravated *Vata* and *Pitta Doshas*, leading to loosening and fall of hair. *Palitya* is predominantly caused by *Pitta* vitiation, resulting in loss of natural pigmentation of hair. *Darunaka* is commonly linked with *Vata* and *Kapha* imbalance, characterized by dryness, itching, and scaling of the scalp, while *Arushika* presents when wounds with numerous openings and wetting excessively appear on head by aggravation of *Kapha,Rakta* and *Krumi*[20].

DISCUSSION

The present study elucidates the anatomical, developmental, and physiological principles of *Kesha* as described in *Sushruta Samhita* and highlights their interrelationship with *Dhatu* metabolism, *Dhamani*-based nourishment, and *Marma* concepts. The findings demonstrate that *Kesha* is not an isolated appendage but an integrated structural and functional component of the body. Its close association with *Asthi Dhatu*, *Pitruja Bhava*, and *Romakupa–Dhamani* networks reflects a generalized *Ayurvedic* principle that external features of the body serve as indicators of internal tissue health.

A consistent relationship emerges between *Asthi Dhatu* status and *Kesha* condition, as *Loma* and *Nakha* are described as *Malas* of *Asthi Dhatu*. This principle explains the observed manifestation of hair abnormalities in *Asthi Kshaya*, supporting the generalization that *Kesha* health mirrors deeper *Dhatu* balance. Similarly, the identification of *Kesha* as a derivative of *Pitruja Bhava* indicates a hereditary influence on hair characteristics, suggesting a constitutional basis for variations in hair growth and texture.

However, certain aspects remain unsettled or indirectly explained in classical texts. While the continuous growth of *Kesha* is well described, the exact mechanisms governing hair cycle regulation are not explicitly detailed. Additionally, although *Asthi Dhatu* is emphasized in relation to *Kesha*, variations in hair disorders caused predominantly by *Pitta* or *Kapha Dosha* indicate that *Kesha* pathology cannot be attributed to a single *Dhatu* alone. These observations suggest a multifactorial involvement of *Doshas* and *Dhatus*, highlighting areas that require further textual and experimental exploration. The interpretations of this study are largely in agreement with previous

Ayurvedic literature. Modern scientific literature further supports these concepts by recognizing the roles of genetics, nutrition, and microcirculation in hair health, thereby indirectly validating *Ayurvedic* descriptions such as *Pitruja Bhava* and *Dhamani*-based nourishment. Theoretically, this work reinforces the *Ayurvedic* model of holistic tissue interdependence, where *Kesha* functions as a visible marker of systemic health rather than a superficial structure. Practically, these insights emphasize the importance of systemic therapeutic approaches, including *Dhatu Poshana, Dosha* balancing, and *Srotoshodhana*, in the management of hair disorders. Such an approach has significant implications for integrative trichology and preventive healthcare, encouraging early diagnosis through observation of *Kesha*-related changes.

CONCLUSION

Kesha is one among the important structures of the body where a physician can understand *Prakruti* of a person through which he can decide various treatment plans. Physicians can use *Kesha* as a diagnostic, prognostic and treatment tool in his clinical practice. Nowadays hair care has become a most expensive and socio-economical practice, and through the knowledge of *Kesha Shareera* a physician can achieve benefits by utilizing this knowledge and find success in his clinical approach. Thus, *Kesha* serves not only a cosmetic or physiological role but also functions as an important anatomical landmark in the localization of *Marma*. The close association between *Kesha* and *Marma* underscores the necessity of protecting the scalp and head region, as injury to these areas may result in severe neurological or systemic consequences. This integrated understanding reflects the depth of *Ayurvedic* anatomical knowledge as elucidated by *Acharya* Sushruta.

The clinical importance of these conditions lies not only in their local manifestations but also in their role as indicators of systemic imbalance, particularly of *Asthi Dhatu* and nutritional status. Furthermore, disorders of *Kesha* significantly affect the psychological well-being and self-esteem of patients, emphasizing the need for early diagnosis and appropriate management.

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