

Emergency Management of Gastrointestinal Conditions in Ayurveda: A Review

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ABSTRACT

This review critically examines the emergency management of gastrointestinal (GI) conditions in Ayurveda, correlating classical textual references with contemporary biomedical understanding. Acute conditions such as *Visuchika* (Acute gastroenteritis), *Atisara* (Acute diarrhea), *Chhardi* (Acute vomiting), *Udarashoola* (Acute abdominal Pain), and *Raktapitta* (Gastrointestinal bleeding) are described in classical Ayurvedic texts with structured and stage-wise management protocols. Emergency principles including *Langhana* (therapeutic fasting), *Pachana* (improving digestion), *Dosha*-specific therapy, fluid restoration, and gradual dietary rehabilitation are discussed in detail. The pharmacological actions and recent research updates of few herbs used in gastrointestinal (GI) infections, such as *Kutaja* (*Holarrhena antidysenterica*), *Bilva* (*Aegle Marmelos*), *Musta* (*Cyperus rotundus*) and *Vasa* (*Adhatoda Vasica*) are analyzed. Integrative perspectives are emphasized to enhance patient safety and therapeutic outcomes.

Key Words *Ayurveda*; Gastrointestinal emergencies; *Visuchika*; *Atisara*; *Agni*; *Ama*; Integrative medicine

Received 05th March 2026 Accepted 12th April 2026 Published 10th May 2026

INTRODUCTION

Gastrointestinal emergencies represent acute disturbances of digestion and metabolism that may rapidly progress to dehydration, systemic toxicity, or shock. Modern medicine recognizes acute gastroenteritis, intestinal obstruction, acute abdomen, and gastrointestinal bleeding as medical emergencies requiring prompt intervention. In Ayurveda, such acute presentations are primarily attributed to

Agnimandya (impaired digestive fire) and the formation of *Ama* (toxic metabolic byproducts). Classical compendia describe these conditions under distinct clinical entities and emphasize early therapeutic intervention to prevent fatal outcomes.

MATERIALS AND METHODS

This article is based on classical textual review and narrative analysis. Primary references were

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drawn from *Charaka Samhita*, and *Ashtanga Hridaya*. Contemporary biomedical literature on emergency gastrointestinal management was reviewed to establish conceptual and clinical correlations. The methodology involved comparative analysis of pathogenesis, clinical presentation, and treatment principles.

AYURVEDIC PATHOPHYSIOLOGY OF GASTROINTESTINAL EMERGENCIES

The central concept underlying acute GI disorders in *Ayurveda* is impairment of *Agni*. When digestion is weakened, undigested food transforms into *Ama*, leading to systemic toxicity. *Vata* aggravation promotes rapid movement and expulsion (vomiting and diarrhea), while *Pitta* contributes to inflammation and bleeding. Emergency management is therefore guided by *Dosha* predominance, stage of *Ama*, strength of the patient (*Bala*), and severity of dehydration.

MAJOR GASTROINTESTINAL EMERGENCIES

1. *Visuchika* (Acute Gastroenteritis)

Visuchika is characterized by sudden onset of vomiting, diarrhea, abdominal cramps, dehydration, and collapse-like features^{1,2}. Emergency management includes immediate *Langhana* (therapeutic fasting), *Pachana* (improving digestion) with dry ginger and *Pippali*, administration of warm saline water, medicated gruels (*Peya*), and gradual reintroduction of diet through *Samsarjana Krama* (Ayurvedic dietary protocol followed after purification (*Shodhana*)). Medicines like

Sanjeevani vati, *Vyoshadivati*, *Visuchividwansa rasa*, *AgniKumararasa* and *Bilwadigutika*^{1,3}.

2. *Atisara* (Acute Diarrhea)

Atisara is classified into *Vataja*, *Pittaja*, *Kaphaja*, and *Sannipataja* types⁴. Management involves *Langhana* (therapeutic fasting), *Deepana-Pachana* therapy (increasing the digestive fire)⁵, *Kutaja* (*Holarrhena antidysenterica*) preparations, *Ananda bhairavarasa*, *hingavadi churna*, *hemagarbhapottali*, *Bilva* fruit pulp, *Takra* (medicated buttermilk), and rice gruel prepared from *brhatpanchamula* (5 medicinal drugs root), *changeri* (*Oxalis corniculata*) or *lajamanda* (gruel prepared out of puffed rice) for fluid replenishment⁵. Severe dehydration requires careful monitoring and integrative care.

3. *Chhardi* (Acute Vomiting)

Chhardi management depends on *Dosha* predominance. In *Ama* stage, therapeutic emesis may be indicated. *Pitta*-dominant cases require cooling therapies and *Yashtimadhu* (*Glycyrrhiza Glabra*) preparations. *Laja Manda* (gruel prepared out of Puffed rice) is commonly used for rehydration and gastric soothing. *Goghrita* (Cow's ghee)(10g) and *saindhavalavana* (500mg) well mixed, should be given orally for 5-6 times or every two hourly, *Draksha* (*Vitis vinifera* Linn) *swarasa* 20ml thrice a day, *Triphala* (*amalaka*, *haitaki*, *vibhitaki*) with *Vidanga* (*Embelia ribes* Burm. f.) and honey and *bilwatwak* (*Aegle marmelos* (L.), *Guduchi* (*Tinospora cordifolia* (Wild.) *Kashaya* with honey⁶. One should take cooled decoction of

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tender leaves of *Jambu* (*Eugenia jambolana* Lam) and *Amra* (*Mangifera indica* L.) mixed with honey^{7,11}.

4. Udarashoola (Acute Abdominal Pain)

Udarashoola includes acute abdominal pain syndromes. *Snehana* (Oleation), and *Swedana* (*Sudation*), if abdominal distension persists, *Dashamula Kwatha* with *Eranda Taila* (oil prepared from *Ricinus communis* Linn.) should be administered at bedtime, while castor oil may be used in constipation-related cases, *Shankha bhasma*, *saindhava* and *Hingu* (*Ferula asafoetida* L) with *Vyosha* (*marica*, *pippali*, *shunti*) this

yoga is given with hot water, *sutashekara rasa*, *shankhavati* and *Phalavarti* administration⁸. Suspected obstruction requires urgent referral.

5. Raktapitta (Gastrointestinal Bleeding)

Management includes *Pitta* pacification, *Amalaki* (*Embllica officinalis*), *Yashtimadhu* (*Glycyrrhiza glabra* Linn.), *Ghrita* preparations, and cold infusions⁹. *Sattu* made from *laja*, *ghrita* and honey. *Vasa patra* (*Adhathoda vasica* Nees) duly mixed with honey, *Chandra kala rasa*, *pravalapisti* or *muktapisti* and *Bolabadda rasa*¹⁰. Massive bleeding requires emergency stabilization and hospital care.

Table 1 Pharmacological actions of few herbs

Herb	Botanical Name	Pharmacological Actions	Clinical Relevance in GI Emergencies
<i>Bilva</i> ¹¹	<i>Aegle marmelos</i>	Antimicrobial, digestive stimulant, anti-secretory	Reduces stool frequency and improves digestion
<i>Kutaja</i> ¹¹	<i>Holarrhena antidysenterica</i>	Antidiarrheal, antimicrobial, anti-inflammatory	Effective in infective diarrhea and dysentery
<i>Musta</i> ¹¹	<i>Cyperus rotundus</i>	Carminative, antispasmodic, anti-inflammatory	Useful in diarrhea, abdominal pain, and vomiting
<i>Vasa</i> ¹¹	<i>Adhatodavasica</i>	Expectorant, bronchodilator) and anti-inflammatory agent, antimicrobial, antispasmodic, and anti-bleeding properties,	Useful in bleeding disorders

DISCUSSION

Ayurvedic emergency management is structured, stage-specific, and individualized. The concept of *Agni* parallels metabolic regulation, while *Ama* reflects systemic inflammatory states. Herbal agents like *Kutaja* and *Bilva* have demonstrated antimicrobial and anti-diarrheal properties in pharmacological studies. *Vasa* have anti-bleeding property which is used in bleeding disorders. Integrative approaches combining *Ayurvedic* principles with modern emergency care improve safety and patient outcomes.

CONCLUSION

Ayurveda provides comprehensive guidelines for emergency management of gastrointestinal conditions. With appropriate clinical judgment and integration with modern emergency protocols, these principles offer valuable contributions to acute care. Further clinical research is needed to validate and standardize classical interventions.

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