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Assessment of *Koshtha* - A Review

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ABSTRACT

Introduction: *Koshtha* is the most important entity when it comes in context of *Shodhana*. Determination of *Koshtha* is helpful in several ways like deciding the dosages of medicines, deciding the course of *Panchakarma*, selection of drug in *Panchakarma*, predicting the prognostic value of certain disease, assessing complications etc. Also, there are several factors which influence the *Koshtha* leading to the relative changes in certain *Panchakarma* procedures and hence, further influencing its assessment. Looking towards above areas, the way to assess the nature of *Koshtha* is still deficient in several ways. This article enlightens the several areas which are still neglected while assessing *Koshtha*. **Aim:** To assess the *Koshtha* in all the aspects. **Objectives:** To assess the *Koshtha* according to the factors which influence it. **Results & Observations:** *Koshtha* is the expression of bowel habits. *Koshtha* is useful in assessing deciding the dosages of medicines, deciding the course of *Panchakarma*, selection of drug in *Panchakarma*, predicting the prognostic value of certain disease, assessing complications etc. *Koshtha* depends of the parasympathetic defecation reflex, myenteric plexus, submucosal reflex and intrinsic reflex. The consumption of certain type of food, particular habits in diets with particular tastes, consumption of certain amount of water. So, for all the *Panchakarma* procedures where the actual process is going to take place in GIT, one must know the nature of *Koshtha* with its proper assessment.

Key words: *Koshtha*, *Shodhana*, *Panchakarma*, *Koshtha*.

INTRODUCTION

The *Koshtha* from Ayurveda perspective should be looked from both the points of views, i.e. anatomical as well as physiological. Anatomically or structurally, the meaning of *Koshtha* is *Antarjatharam*^[1] any one viscera of the body or the abdomen.^[2] It has been already explained as group of 15 organs (*Koshthangaani*)^[3] and 8 (*Koshthaanga*).^[4] *Koshtha* is also said to be the *Abhyantararogamarga*.^[5] *Koshtha* can also be said to be the group of organs related to

the thoracic, abdominal and pelvic cavities. The physiological or functional aspects of *Koshtha* help in understanding the nature of bowels. Functionally, it behaves in three different ways, on the basis of which it is classified into three categories viz. *Mrudukoshtha* (Soft bowel), *Madhyama Koshtha* (Moderate bowel) and *Krurakoshtha* (Hard bowel).^[6] Besides this the concept of *Koshtha* also helps in predicting the prognostic value of certain disease, deciding the dosages of medicines & the course of *Panchakarma*, in selection of drugs in certain *Panchakarma* procedures and in assessing complications appearing in various *Panchakarma* procedures etc.

AIM

To assess the *Koshtha* in all the aspects.

OBJECTIVES

To assess the *Koshtha* according to the factors which influence it.

MATERIALS AND METHOD

Bruhatrayee and the books of modern physiology were studied.

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ASSESSMENT OF KOSHTHA

Importance of assessment of Koshtha

The application of the concept of *Koshtha* work as follows in the field of *Panchakarma*.

- **As predicting or prognostic value** - It is said that *Udavarta* can occur in patients of *Vata* dominant *Koshtha*, though one may not be having *Arsha* as primary disorder. So, the patients of *Krurakoshtha* are prone to have *Udavarta* with or without occurrence of *Arsha*.^[7]
- **For deciding the dosages** - While deciding the dosage of any medicine, physician should think of *Koshtha*, age, strength of the patient and disease.^[8]
- **For deciding the course of Panchakarma** - The patients who are having *Rukshakoshtha*, provoked *Vata*, *Krurakoshtha*, doing excessive exercise, stimulated *Agni*, if given *Virechana* medicine, it gets digested without producing its effects. In these patients, before going for *Virechana*, one can administer *Basti*, *Snigdha Virechana*, *Tikshnafalavarti*.^[9,10]
- **For selection of drug for Panchakarma**
 - a. In *Sukumara*, *Shishu*, *Vruddha*, *Mridukoshtha* people, *Trivrutta* will be the drug of choice for *Virechana* ^[11].
 - b. *Shyama*- *Trivrutta* though create *Murchchha*, *Sammoha*, *Hrit-Kanthakashan-Kshanana* with their *Tikshna* and hot potencies, are used in the people with *Krurakoshtha*- *Bahudosh* & those who can tolerate the stress ^[12].
 - c. If the patient who is hungry & weak, having *Mridukoshtha*, *Alpakapha* & *Ajeerna*, is given *Vamana* with *Atitikshna*- *Shitadravya* in a lower dose, will move into downward direction and *Virechana* will be the output ^[13].
- **Effect of Virechana drugs on Koshtha** - *Sudha* (*Snuhi*) quickly breaks the complex bonds amongst *Doshas* which are very strong and firm. It softens and weakens the *Koshtha* immediately. So, it should not be used in the patients having

Mridukoshtha, less strength, chronic disorders, and older age & in children.^[14]

- **For assessing Vyapat or complications**

- a. In the patients having *Guru Koshtha* and who have not undergone *Abhyanga* & *Swedana*, if given *Basti* which is *Sheeta* & thick in consistency, having *Alpasneha-Lavana* and lesser dose will create *Vibandha*.^[15]
- b. In patients having *Doshas* in abundant quantity, *Ruksha* and *Krurakoshtha*, if *Basti* of lower potency (thin consistency & *Mridu*) is administered, it will be encircled by *Doshas* present in *Malashaya*. *Vata* will be prorogated due to obstruction of the *Srotas*. It will leave the tract and will be deflected (*Vimargagamana*) creating *Adhmana*.^[16]
- c. If patients with *Alpadosha* & *Mridukoshtha* are given *Basti* with very *Ushana-Tikshna-Amla* & *Ghana* properties repeatedly, it is said to be *Atiyoga* of *Basti*.^[17]

Factors affecting the nature of Koshtha

Koshtha is the expression of one's bowel habit. So, assessment of *Koshtha* can be carried out only on the basis of nature of stool. There are various factors which affect the nature of stool apart from *Koshtha*. Therefore, following factors are to be studied for the assessment;

1. Type of food

The person with *Mridukoshtha* easily gets portaged with the food substances like sugarcane candy, sugarcane juice, *Mastu* (Whey), milk, cream from the curd, *Payasa* (Milk preparation), gruel made up of *Tila*, rice and *Masha*, ghee, juice of *Kashmarya*, *Haritaki*, *Bibhitaki*, *Amalaki*, *Draksha*, *Pilu*, hot water, fresh wine. Whereas the person with *Krurakoshtha* does not get purgated easily even with high potency *Virechaka* drugs.^[18] The nature of *Koshtha* will be *Mridu* with the predominance of *Pitta* when even milk causes purgation; it will be *Krura* with the predominance of *Vata* when even with drugs like *Shyama* etc. purgation occurs with difficulty.^[19] Thus,

people with *Mrudukoshtha* due to their *Tikshna* property might have quick response of parasympathetic fibers on the descending colon, sigmoid colon and anus leading to quick defecation process.

People with *Krurakoshtha* may not consist of the properties like *Drava* and *Sara* as it is *Vatapradhana*. Rather, it has *Ruksha* property in dominance which might be responsible for slow and strainful process of defecation. In such people the intrinsic defecation reflex as well as parasympathetic defecation reflex might be getting slow response from the sacral segments which leads to slow peristaltic movements with slow defecation process.^[20]

Also, the afferent signals entering the spinal cord initiate other effects, such as taking a deep breath, closure of epiglottis, the contraction of abdominal muscles, to force the fecal contents of the colon downward and at the same time cause the pelvic floor to extent downward and pull outward in the anal ring to evacuate the feces.^[21] People with *Krurakoshtha* might be practicing this process more usually.

2. *Koshtha* and relation of water

a. Absorption of water

The mucosa of large intestine has high capability for active absorption of sodium, and the electrical potential created by the absorption of the sodium causes chloride absorption as well. The tight junctions between the epithelial cells of large intestinal epithelium are much tighter than those of the small intestine. This prevents significant amount of back diffusion of ions through these junctions. Thus, this allows the large intestinal mucosa to absorb sodium ion far more completely than that of small intestine. The absorption of sodium ions and chloride ions creates an osmotic gradient across the large intestinal mucosa which in turn causes absorption of water. The large intestine can absorb a maximum of about 5 to 7 liters of fluid and electrolytes each day.^[22]

When the total quantity entering the large intestine through ileocecal valve or by way of large intestinal secretion exceeds this amount, the excess appears in the feces as diarrhea.^[23]

In the people with *Mridukoshtha* might be this amount always exceeds but not till the level of causing diarrhea, which may in turn leads to semi solid feces or loose stools or there might be the situation that the material collected in the large intestine has low osmotic gradient which leads to less secretion of water in the lumen.

Whereas in the people with *Krurakoshtha* the absorption of water may be more. In such type of *Koshtha* the absorption of water might not exceed the normal quantity of 5-7 liters which might be the reason for hard stools.

b. Intake of water

When there is less intake of water it eventually leads to hard stools.^[24] This suggests that when water intake is low the absorption of water from large intestinal mucosa does not exceed its limit or may not even complete its limit of 5-7 liters of absorption of water. Therefore, low water intake might be responsible in turning the nature of *Koshtha* in *Krura* type.

3. *Saatmya*

Saatmya is said to be the habit or habituation.^[25] When one *Dravya* is used regularly it becomes *Satmya* to the body.^[26] Those who are accustomed to ununctuous things, drugs and diets having only one particular taste are mostly possess of less strength, less power to face difficulties, smaller life span, and lacks the quality or quantity of accessories like drugs for the treatment of diseases.^[27]

Hence it can be said that if one is having regular intake of food products of one particular *Rasa* or the food having certain properties may affect one's body.

The *Rasas* like *Katu*, *Tikta* and *Kashaya* are said to be *Vatavardhaka*. *Katu Rasa* is said to have *Laghu* and *Ruksha* properties. The habitual intake of *Katurasa* leads to *Vayuagnibaahulya* i.e., provocation of *Vata* and *Agni*.^[28] *Tikta Rasa* is said to have *Ruksha*, *Laghu* and *Sheeta* properties which leads to provocation of *Vata*. Habitual intake of *Tikta Rasa* leads to increase in *Khara*, *Vishada* and *Ruksha* properties. It also leads to

Srotokharkharatva i.e., roughness in the body channels.^[29]

Kashaya Rasa also possesses *Ruksha*, *Sheeta* and *Laghu* properties. Its habitual intake leads to *Vaata Mutra Purisha Retansigrunhaati* i.e., obstruction in the passage of *Vata*, urine, stool and semen and various diseases caused by vitiated *Vata Dosha*.^[30]

All these factors ultimately influence the *Koshtha* might be responsible for turning the nature of *Koshtha* to the *Krura* one.

Same can be said for *Amla*, *Lavana* and *Katu Rasa*. The habitual intake of these *Rasas* is said to provoke *Pitta Dosha*.^[31] Hence increase in *Pitta Dosha* also increases its *Sara* and *Drava* property which is responsible for easy defecation and also for the nature for *Koshtha* being *Mridu*.

4. Bowel habits

Long term practice of *Purishavegadharana* (obstructing the urge of defecation) leads to *Varcho - Apravartana* i.e. obstruction in passage of stool.^[32] Also, repetitive practice of *Apanavaayu Vegadharana* leads to *Sangovinamutravatanam* i.e. obstruction in passage of stool, urine and gases^[33] this may ultimately provoke *Vata* leading to increase in *Ruksha* property of *Vata* leading to more absorption of water from intestinal colon and ultimately turning the nature of *Koshtha* into the *Krura* one.

Parameters to be assessed

SN	Parameters	<i>Mrudu koshtha</i>	<i>Madhyam koshtha</i>	<i>Krura koshtha</i>
1.	Effects of purgatives	Purgation occurs on consuming milk, jaggery, jaggery juice, grapes, curd etc.	No occurrence of purgation on consuming milk, jaggery, jaggery juice, grapes, curd etc.	No occurrence of purgation even on consumption of strong purgatives.
2.	Bowel habits	Regular bowel habits.	Regular bowel habits.	Irregular bowel habits.

		Strong urge of defecation	Straining may or may not be required.	More straining required.
		Satisfactory defecation.	Satisfactory defecation.	Unsatisfactory defecation.
3.	Fecal composition	Loose stools.	Formed stools.	Hard stools.
4.	Time taken for defecation	2-5 min	Upto 5 min	More than 10 min
5.	Frequency encounters of diarrhea & constipation	more probable	not sure	Constipation may be frequently present
6.	Recurrent history of getting distension in abdomen	No recurrence	No recurrence	Frequently recurrent
7.	Time taken for <i>jirna ahara lakshana</i> ^[34]	Might be appearing faster	optimum timing	Might be appearing late
8.	Water intake	Might be having more water intake.	Might be having normal water intake.	Might be having less water intake.
9.	<i>Satmya</i> to types of consumption of <i>rasas</i>	Might be consuming more amounts of <i>Amla</i> , <i>Lavana</i> , <i>Katu Rasa</i> .	Might be consuming same quantity of all the <i>Rasas</i> .	Might be consuming more amounts of <i>Katu</i> , <i>Tikta</i> , <i>Kashayarasa</i> .

DISCUSSION

Expression of *Koshtha*

The decision of the nature of *Koshtha* in Ayurveda is primarily taken on the basis of the reaction of bowels towards certain purgatives. Every person has different nature of the response. These responses depend mostly on the enteric nervous plexus. The responses

of reflex originating from them might be different in different people. On the basis of these reflex, Ayurveda divides the nature of bowels into three categories viz. *Mrudu*, *Madhya* and *Krurakoshtha*.

The physiological understanding of these three *Koshthas* might be as follows;

1. *Mrudu Koshtha*

The parasympathetic defecation reflex when acts with intrinsic reflex (Intrinsic defecation reflex mediated by the local enteric nervous system) greatly intensify the peristaltic waves as well as relaxing the internal anal sphincter and thus convert the intrinsic defecation reflex from weak movement into a powerful process of defecation that sometimes is effective in emptying the large bowel all at once.^[35]

- This type of *Koshtha* may have the faster expression of the factors of GIT. It may have faster enteric response as compared to other two types of bowel. The myenteric plexus response might be getting more quickly in such people.
- When talking about secretions occurring in GIT, such patients may have quicker secretory as well as hormonal response which is responsible for quick digestion and further easy and quick defecation as compared to those of others.
- This action might be taking place due to the *Tikshna* and *Ushna* properties of *Pitta* which are dominantly present in such people. People with *Mridukoshtha* have semi solid stools due to *Drava* property of *Pitta*.
- Rather these people have loose stools which might also suggest that they consume more water or the absorption of water from the intestinal mucosa might be lesser as faster peristaltic movements leads to less absorption of water.
- As the myenteric plexus might be sensitive in these people, these people might be more vulnerable for frequent diarrhea.
- People with *Mridukoshtha* have quick defecation. They get their bowel emptied faster may be due to presence of *Drava* and *Sara* properties as compared to those of others.

2. *Krurakoshtha*

- May have slower expression of factors of GIT. Their enteric response is slower as compared with those of laxated bowels.
- The myenteric plexus response is slower and also submucosal plexuses might be performing more inhibitory effect and might be acting slowly on the intestinal muscles. This might also be the cause of slower or delayed responses for the bowel emptying and may leading to the frequent constipation.
- This might be happening due to *Manda* property of *Kapha*, which also plays an important role in making the *Koshtha* of *Krura* nature.
- These may have less secretory response or slower secretory response which leads to slow digestion and slow formation of feces with slow defecation.
- This action might be taking place due to the *Ruksha* property of *Vata* dominantly present in *Krurakoshtha*. The *Vata* dominance also suggests the *Vishamata* of the *Krurakoshtha* which further suggest that above action of the GIT might get vary.
- As they have hard stools, this suggests that the water absorption occurring in the intestine might be more as compare to the others.
- This may also suggest that people with this type of bowel might be consuming less water as compared to the others.

3. *Madhyakoshtha*

- Person has formed but smooth stools due to *Snigdha* property of *Kapha*. Such people might be having Slow GI response than that of *Mrudukoshtha* but faster response than that of the *Krurakoshtha*.

CONCLUSION

Koshtha is the expression of bowel habits. *Koshtha* is useful in assessing deciding the dosages of medicines, deciding the course of *Panchakarma*, selection of drug in *Panchakarma*, predicting the prognostic value of

certain disease, assessing complications etc. *Koshtha* depends of the parasympathetic defecation reflex, myenteric plexus, submucosal reflex and intrinsic reflex. The consumption of certain type of food, particular habits in diets with particular tastes, consumption of certain amount of water. So, for all the *Panchakarma* procedures where the actual process is going to take place in GIT, one must know the nature of *Koshtha* with its proper assessment.

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