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"*Agnibala* as the determinant of *koṣṭha*: a conceptual review in ayurvedic physiology"

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ABSTRACT

Introduction: In classical Ayurvedic physiology, the concept of *Koṣṭha* (the functional nature of the gastrointestinal tract) is intimately linked with *Agnibala* (digestive/metabolic strength). While *Koṣṭha* classification has long guided treatment regimens, the determinant role of *Agnibala* in defining *Koṣṭha* remains under-explored in integrative context. **Methods:** We conducted a narrative review by searching classical Ayurvedic texts (e.g., the Charaka Saṃhitā, Suśruta Saṃhitā, Aṣṭāṅga Hṛdaya) and modern biomedical databases (PubMed, Scopus, Web of Science, AYUSH Research Portal) up to 2025. Inclusion criteria comprised publications addressing *Agni, Agnibala, Koṣṭha,* and digestive physiology in Ayurveda and allied integrative research; exclusion criteria omitted non-English articles without abstracts, purely phytochemical studies without digestive physiology context, and animal-only studies lacking translational relevance. **Results:** Thematic synthesis revealed: (i) classical textual descriptions of *Koṣṭha* types *(Sama, Pramādita, Mridu, Kashṭa)* and their functional implications; (ii) *Agnibala* as the underlying quantitative capability of digestive fire, influencing tissue assimilation, excretion, and metabolic homeostasis; (iii) the functional interplay between *Agni, Koṣṭha* and *Bala* (strength/vitality) in Ayurvedic pathophysiology; (iv) modern correlates such as gut-motility, microbiome-metabolism axis, digestive enzyme activity and metabolic health markers; and (v) research gaps, notably the lack of standardized *Agnibala* assessment tools and human interventional studies linking *Koṣṭha* classification to measurable metabolic or gastrointestinal outcomes. **Discussion:** The Ayurvedic framework positions *Agnibala* as the foundational determinant that modulates *Koṣṭha*, thus influencing digestive, absorptive and excretory capacities and overall health resilience. Modern evidence supports many mechanistic inferences yet lacks direct Ayurveda-based protocols applying *Agnibala-Koṣṭha* paradigms. Future research should adopt constitution-based dietary and lifestyle interventions derived from *Koṣṭha-Agnibala* typology, incorporate objective biomarkers of digestive/metabolic function, and validate *Agnibala* classification tools in clinical populations. **Conclusion:** Recognising *Agnibala* as a key determinant of *Koṣṭha* offers a refined physiological model bridging Ayurvedic and modern perspectives on gastrointestinal and metabolic health.

Operationalizing this model may enhance personalised digestive-metabolic care grounded in Ayurvedic wisdom.

Keywords: *Agnibala;* Ayurveda; Digestive fire; *Koṣṭha;* Metabolism

NTRODUCTION

The Ayurvedic system of medicine places great emphasis on the digestive system and metabolism as central determinants of health[1]. Among the many concepts of digestive physiology, the term *Koṣṭha* describes the nature and functional status of the gastrointestinal tract — including its motility, capacity for assimilation and excretion, and receptivity to therapy[2-3]. The characterisation of *Koṣṭha* (for example, *Sama, Pramādita, Mridu, Kashṭa)* is used in classical texts to guide therapeutic choices, particularly in the context of Panchakarma, dietetics and disease management[4-5].

Parallel to this, the concept of *Agni* (digestive/metabolic fire) is foundational in Ayurveda: it governs digestion, absorption, transformation of nutrients, tissue formation and elimination of waste[6-7]. Within this framework, *Agnibala* refers to the strength or capacity of this digestive fire[8] — the ability of an individual to digest, metabolise and derive nourishment effectively from food. A robust *Agnibala* is considered essential for maintaining tissue health *(Dhātupōṣaṇa),* vitality *(Bala)* and resistance to disease *(Vyādhi kṣhamatva)* [9-10].

Despite the importance of both *Koṣṭha* and *Agnibala* in Ayurvedic physiology, there has been limited integrative review exploring how *Agnibala* acts as the determinant of *Koṣṭha*[11]. Specifically, how variations in digestive strength give rise to different *Koṣṭha* types, affect digestive/absorptive/excretory function, and influence therapeutic decisions remains under-elaborated[12-13]. The aim of this review is to analyse the classical and modern literature to elucidate the relationship between *Agnibala* and *Koṣṭha*[14]. The objectives are: to survey classical Ayurvedic descriptions of *Koṣṭha* and *Agnibala*; to map modern research findings on digestive/metabolic strength, gut behaviour and metabolism to these concepts; and to identify gaps and propose directions for future research on *Koṣṭha-Agnibala* paradigm[15].

MATERIALS AND METHODS

This review employed a narrative, integrative methodology combining classical Ayurvedic textual sources and modern scientific literature[16].

Literature Search Strategy: The primary search for classical Ayurveda sources included key texts such as the Charaka Saṃhitā (Sūtrasthāna, Nidāna, Śarīra), Suśruta Saṃhitā and Aṣṭāṅga Hṛdaya, along with their major commentaries (e.g., Chakrapāṇidatta, Dalhaṇa) [17-18]. Search terms in Sanskrit and English included: *"Koṣṭha", "Koṣṭha-bheda", "Agnibala", "Agni Bala", "Āgni", "Koṣṭha prakriti", "Koṣṭha and Agnibala"* [19-20].

For modern biomedical literature, electronic databases were searched: PubMed (MEDLINE), Scopus, Web of Science, AYUSH Research Portal, and Google Scholar up to December 2025[21-22]. Keywords utilized included: "digestive fire Ayurveda*", "Agnibala* assessment tool", "*Koṣṭha* gut behaviour Ayurveda", "digestive strength and metabolism Ayurveda", "gastrointestinal function Ayurvedic *Koṣṭha*" [23-24]. Reference lists of selected papers were also screened for additional relevant works (snow-balling)[25].

Inclusion Criteria: (1) Publications in English (or with English abstract) that explicitly address *Koṣṭha, Agnibala, Agni* and digestive physiology in Ayurvedic context; (2) Experimental, observational or review studies (Ayurvedic or integrative) linking digestive/metabolic strength or gut behaviour with health outcomes; (3) Conceptual or

theoretical analyses of *Koṣṭha/Agnibala;* (4) Classical textual citations and exegeses presenting *Koṣṭha* or *Agnibala* definitions, classifications and therapeutic relevance[26-27].

Exclusion Criteria: (1) Articles in languages other than English without accessible abstract; (2) Studies purely focused on phytochemistry or pharmacology without substantive relevance to digestive/metabolic strength or gut physiology; (3) Animal-only mechanistic studies lacking translational relevance to human digestive/metabolic health; (4) Duplicate publications, case-reports without broader conceptual relevance[28-29].

Data Extraction and Synthesis: Two reviewers independently screened titles and abstracts to identify relevant full-text articles. Data were extracted under thematic headings: (a) definitions/classifications of *Koṣṭha*; (b) description/classification of *Agnibala*; (c) interplay of *Agnibala* and *Koṣṭha* in Ayurveda; (d) modern correlates of digestive strength/metabolism; (e) therapeutic implications. Discrepancies were resolved by discussion. Thematic synthesis was then performed to integrate classical and modern perspectives, and structured into the "Observations and Results" section[30].

OBSERVATION AND RESULTS

Definition and classification of *Koṣṭha*

In classical Ayurvedic texts, the term *Koṣṭha* refers to the functional disposition of the gastrointestinal tract. According to Charaka and Suśruta, Koṣṭha is derived from *"kuśya dhātu"* (the alimentary tract) and signifies the hollow channels responsible for ingress, digestion/transformation, and egress of food and waste. *Koṣṭha* classification typically includes categories such as *Sama* (easy or moderate evacuations), *Pramādita* (sluggish), *Mridu* (soft), and *Kashṭa* (hard) *Koṣṭha*. For example, a *Sama Koṣṭha* is one where the bowels open easily once or twice a day without difficulty, whereas a *Kashṭa Koṣṭha* is characterized by hardened stools and difficult expulsion. *Koṣṭha* typology is clinically significant in Ayurveda because it influences the choice of therapies (Panchakarma, dietetics), drug absorption, and disease management.

Further, *Koṣṭha* is viewed as the gateway to digestive assimilation, tissue nourishment (*Dhātupōṣaṇa*) and the elimination of waste. A balanced *Koṣṭha* ensures smooth transit of nutrients and waste, maintains Agni, supports *Bala* (strength) and prevents *ama* (undigested metabolic residue). The classical texts emphasise that the nature of *Koṣṭha* is influenced by factors such as *Prakṛti* (constitution), *Āhāra* (diet), *Vihāra* (lifestyle), *Agni* (digestive fire) and the state of *Dhātus* and *Srotas* (channels).

Definition and classification of *Agnibala*

The concept of *Agni* in Ayurveda encompasses digestive and metabolic fire — primarily the *Jatharāgni* (gastric fire) and downstream *Dhatvāgni* (tissue fires) and *Bhūtāgni* (elemental fires) that drive assimilation and transformation. *Agnibala* refers to the strength or capacity of this digestive/metabolic fire — how effectively the individual digests food, assimilates nutrients, and metabolises them. The measurement of *Agnibala* has been addressed in modern Ayurveda research: a validated self-report tool identified four functional states of Agni (and hence *Agnibala*): *Sama* (balanced, regular), *Vishama* (irregular), *Tīkṣṇa* (intense/overactive), and *Manda* (weak/sluggish). Moreover, *Agnibala* is regarded as one of the indicators of *Bala* (strength/vitality) and general health resilience.

A strong *Agnibala* is said to lead to proper digestion, assimilation and tissue nourishment, elimination of waste without hindrance, and optimal vitality. Conversely, weak *Agnibala* leads

to digestion defects, formation of *ama*, compromised tissue formation, decreased *Bala* and increased susceptibility to disease.

Inter-relationship of *Agnibala* and *Koṣṭha* in Ayurvedic physiology

In integrative Ayurveda, *Koṣṭha* and *Agnibala* are closely inter-linked: *Koṣṭha* is influenced by the efficiency of *Agni* (i.e., the *Agnibala*) and in turn the functional nature of *Koṣṭha* reflects the underlying strength of *Agnibala*. Classical commentaries note that a person with *Sama Koṣṭha* typically has *Sama Agnibala* — the digestive fire is balanced, motility and evacuation are normal, and assimilation is efficient. On the other hand, a person with *Kashṭa Koṣṭha* or *Pramādita Koṣṭha* likely has weakened or irregular *Agnibala*, leading to impaired digestion, *Ama* formation, sluggish elimination and compromised tissue nutrition. For instance, the review "AYURVEDIC CONCEPT OF *KOSHTHA* AND ITS …" notes that *Koṣṭha, Agni, Bala* are evaluated together in Panchakarma therapy.

Therapeutically, Ayurvedic texts advise that before undertaking certain therapies (like *Vamana* or *Virechana*), the practitioner assesses *Koṣṭha* and *Agnibala* to determine suitability and predict outcomes. A patient with weak *Agnibala* and irregular *Koṣṭha* may respond poorly or experience complications. This demonstrates how *Agnibala* determines not just *Koṣṭha* classification but shapes clinical decision-making.

Modern research correlates: digestive/metabolic capacity and gut behaviour

Modern integrative research provides parallels to these Ayurvedic constructs. Studies on gastrointestinal motility, gut health, digestive enzyme activity, nutrient assimilation, and gut-microbiome-metabolism axis can be mapped to *Koṣṭha* and *Agnibala* paradigms. For example, in a recent article, Ragad et al. describe *Koṣṭha* in terms of gut behaviour and reactivity, correlating Ayurvedic categories *(Sama, Kashṭa)* with motility and elimination patterns. Another research tool validated the functional states of *Agnibala* in human subjects and demonstrated associations with digestive/metabolic complaints.

Concepts akin to *Agnibala* appear in modern nutrition and gastroenterology: digestive capacity (enzyme secretion, gut motility), nutrient absorption, metabolic rate, and elimination efficiency. The gut-microbiome axis influences metabolic health, immune resilience and vitality — resonating with the Ayurvedic notion of tissue nourishment and vitality derived from effective *Agni/Koṣṭha.* Works such as "Unlocking Secrets of *Agni* and *Koṣṭha"* articulate this linkage.

Therapeutic and practical implications

From the synthesis, several practical implications emerge. Assessing *Agnibala* (via questionnaires or clinical markers) may allow stratification of individuals into *Koṣṭha* types and customisation of diet, lifestyle and therapies accordingly. For instance, a person with *Manda Agnibala* and *Kashṭa Koṣṭha* may benefit from digestive stimulants, gentle purgation, warm easily digestible foods and motility-supporting therapies. On the other hand, a strong *Agnibala* with *Sama Koṣṭha* may adhere to general regimen and dietary moderation. The interplay emphasises that diet *(Āhāra),* lifestyle *(Vihāra),* and therapies *(Rasāyana,* Panchakarma) should be tailored to *Agnibala/Koṣṭha* status.

Furthermore, research design may integrate Ayurveda-based *Agnibala/Koṣṭha* classification with modern biomarkers (gut transit time, enzyme levels, microbiome diversity, and metabolic rate) to validate and refine these Ayurvedic typologies.

Synthesis of findings

In summary, the review finds:

- *Koṣṭha* classification in Ayurveda is determined by and reflective of digestive/metabolic strength *(Agnibala).*
- *Agnibala* provides the underlying energetic capacity that governs digestive/absorptive/excretory processes, thereby shaping *Koṣṭha.*
- Modern research offers mechanistic correlates—gut motility, digestion-absorption, microbiome-metabolism—that align with these Ayurvedic ideas.
- Therapeutically, assessing *Agnibala* and *Koṣṭha* together offers a personalised framework for diet, lifestyle and therapy.
- Gaps remain in standardised tools for *Agnibala* assessment, longitudinal human studies linking *Koṣṭha/Agnibala* typologies to measurable outcomes, and mechanistic research bridging Ayurvedic and biomedical markers.

DISCUSSION

The convergence between Ayurvedic physiology and modern digestive/metabolic science becomes clearer when examining the relationship between *Koṣṭha* and *Agnibala*[31]. Ayurveda posits that digestive fire *(Agni)* is not simply a metaphor but a functional reality — its strength *(Agnibala)* determines how efficiently food is processed, nutrients are assimilated, tissues nourished, waste eliminated, and vitality maintained[32]. *Koṣṭha*, in this framework, is the expression of how the gut-tract behaves under the influence of *Agnibala*: the nature of evacuations, motility, assimilation, ease or difficulty[33]. The modern equivalents—digestive enzyme activity, gut motility, nutrient absorption rates, gut microbiome health and metabolic efficiency—map quite well onto this paradigm[34]. For example, individuals with sluggish digestive/metabolic function (analogous to low *Agnibala)* tend to present with constipation *(Kashṭa Koṣṭha*-like), impaired nutrient assimilation and metabolic dysregulation[34].

However, several important caveats and gaps emerge. First, while Ayurveda offers a rich qualitative typology *(Sama, Mridu, Kashṭa)* for *Koṣṭha*, modern science lacks standardised categories aligning with these, and human interventional studies are scarce[35-36]. Second, though tools for assessing *Agnibala* (e.g., self-report questionnaires) exist, validation using objective biomarkers remains limited[37]. Without quantifiable measures of "digestive strength" in biomedical terms, the integration of *Agnibala/Koṣṭha* typology into clinical research remains challenging[38]. Third, most modern research addresses diet or gut-microbiome interactions in a population-based manner, rather than constitution- or typology-based (as Ayurveda would advocate) [39]. The individualized nature of *Koṣṭha/Agnibala* is yet to be fully operationalized in contemporary research frameworks[40].

On future prospects, bridging this gap requires a multipronged approach: development and validation of objective *Agnibala* assessment tools (including digestive enzyme assays, gut-motility tests, microbiome profiling) mapped to *Koṣṭha* classification; [41] robust clinical trials stratifying participants by *Koṣṭha/Agnibala* type to test tailored diet, lifestyle and Ayurvedic interventions; [42-43] mechanistic studies exploring how modulation of *Agnibala* (via diet, herbs, lifestyle) influences gut physiology, microbiome composition, nutrient assimilation and metabolic parameters[44-46]. Moreover, integrating Ayurvedic regimen *(Āhāra, Vihāra, Dinacharya/Ritucharya*) modulated by *Agnibala/Koṣṭha* status may offer novel preventive and therapeutic strategies for digestive-metabolic disorders[47]. Finally, interdisciplinary collaboration between Ayurveda scholars, gastroenterologists, nutrition scientists and

microbiome researchers will be essential to translate these ancient insights into evidence-based frameworks[48].

In conclusion, the *Koṣṭha-Agnibala* model offers a compelling integrative paradigm for digestive/metabolic health[49]. While many of its underlying ideas are echoed in modern science, the explicit incorporation, validation and clinical deployment of the typology remain in an emergent phase. Harnessing this model may help personalise digestive/metabolic care and broaden the translational relevance of Ayurvedic physiology [50].

CONCLUSION

This review underscores that *Agnibala* — the digestive/metabolic strength — is foundational to the Ayurvedic concept of *Koṣṭha.* When *Agnibala* is robust, *Koṣṭha* is functional *(Sama)* and digestive/assimilation/excretion processes proceed smoothly; when *Agnibala* is compromised, *Koṣṭha* becomes dysfunctional *(Kashṭa, Pramādita),* leading to impaired digestion, tissue nourishment, elimination, and vitality. The classical Ayurvedic model thus provides a physiological framework that links digestive fire and gut behaviour to health, vitality and disease-resistance.

In modern terms, this equates to digestive enzyme function, gut motility, nutrient absorption, microbiome dynamics and metabolic efficiency. The thematic synthesis shows strong conceptual alignment, though empirical research is still limited. Practically, assessing *Agnibala* and *Koṣṭha* status may allow personalised dietetics, lifestyle modifications and therapeutic interventions geared to individual digestive/metabolic capacity. For clinicians and researchers, the review highlights the need to operationalize *Agnibala/Koṣṭha* typologies via validated tools, integrate them in clinical trials and explore mechanistic underpinnings in digestive-metabolic physiology.

By bridging the Ayurvedic constructs of *Koṣṭha* and *Agnibala* with modern digestive/metabolic science, this review opens avenues for integrative research and practice aimed at enhancing digestive-metabolic health. As nutrition, gut health and metabolism gain increasing prominence in global health, incorporating Ayurvedic paradigms may offer novel personalised strategies. Future work will determine how effectively these ancient insights can be translated into modern clinical interventions.

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