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Viruddha Ahara: Ayurvedic Incompatible Foods As A Dietary Trigger For Irritable Bowel Syndrome (Ibs) – Mechanisms And Clinical Insights

Dr. Saloni Gujar¹, Dr. Savita Balkar², Dr. Rajashri Ware³

¹ Third Year PG, Department of Rognidan Evum Vikruti Vidyan, D.Y.Patil School of Ayurveda, Navi Mumbai.

² Associate Professor, Department of Rognidan Evum Vikruti Vidyan, D.Y.Patil School of Ayurveda, Navi Mumbai.

³ HOD, Department of Rognidan Evum Vikruti Vidyan, D.Y.Patil School of Ayurveda Navi Mumbai.

Corresponding Author: Dr. Saloni Gujar

ORCID ID:

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Abstract

The concept of *Viruddha Ahara* (incompatible diet), described in Charaka Samhita, refers to food combinations that disrupt physiological balance and contribute to disease. This study explores its relevance as a dietary trigger in Irritable Bowel Syndrome (IBS) by correlating classical Ayurvedic principles with modern pathophysiological mechanisms. Ten commonly consumed incompatible food combinations were identified and classified according to classical types of *Viruddha Ahara*. Each was analysed for its effects on digestive enzyme activity, gut microbiota, and metabolic byproduct formation. The findings demonstrate that such combinations lead to digestive incompatibility, resulting in delayed gastric emptying, fermentation, and dysbiosis of the gut microbiota. Biochemical alterations, including the formation of advanced glycation end-products (AGEs) and hydroxymethylfurfural (HMF), contribute to increased intestinal permeability, low-grade inflammation, and altered motility. These mechanisms closely parallel the clinical features of IBS, including abdominal pain, bloating, and irregular bowel habits, and show strong similarity with the Ayurvedic condition Grahani. The study suggests that *Viruddha Ahara* may act as a chronic dietary stressor affecting the gut–brain axis and intestinal homeostasis. Integrating these traditional dietary principles with contemporary understanding of food intolerance and microbiome interactions may offer a holistic approach to the prevention and management of IBS.

Keywords- *Viruddha Ahara*, *Grahani*. IBS, dietary incompatibility, gut microbiome.

Introduction :

Irritable Bowel Syndrome (IBS) is a chronic functional disorder of the gut characterised by abdominal pain, altered bowel habits (diarrhea, constipation, or both), bloating and gas. It is a functional disorder involving dysregulation of the gut-brain axis, leading to altered motility and heightened pain sensitivity. Microbiota imbalance, increased gut permeability, and immune activation contribute. Food triggers (e.g., FODMAPs) worsen symptoms through fermentation, gas production, and distension in a hypersensitive gut. The prevalence of Irritable Bowel Syndrome (IBS) varies globally, with studies indicating a global prevalence of 13.21% with Rome III criteria and 17.14% with Rome IV criteria. Women are more likely to have IBS, with a prevalence of 15.69% in Rome III and 20.17% in Rome IV. The prevalence has increased over recent years, suggesting growing awareness and understanding of the condition.^[1]

Grahani is an anatomical and physiological entity described in classical Ayurvedic literature. It is referred to as the site of *Agni* (digestive fire). It occupies a strategic location between the *Amashaya* (stomach) and the *Pakwashaya* (intestines). Dysfunction of *Grahani* is termed *Grahani Roga*. It's a clinical syndrome characterised by erratic bowel habits, digestive impairment, and altered stool consistency — closely resembling modern disorders such as Irritable Bowel Syndrome (IBS), malabsorption syndrome, and functional diarrhea.^[2]

Viruddha ahar can be defined as any food, food combination, processing method, quantity, time, or dietary habit that disturbs *Agni* (digestion), vitiates

doshas, and leads to the formation of *Ama* (toxic metabolites). It's not just about 'Wrong combinations' but includes incompatibility in terms of *Desha*, *Kala*, *Matra*, *Agni Samyoga* (Place, Time/Season, Quantity, Digestive Capacity, Combination).^[3]

The classical concept of *viruddha ahar* was formulated 5000 years ago in our classical texts, but today's food landscape is entirely different. The consumption of processed and ultra-packaged food, late-night binge eating, complex food mixing culture, such as milkshakes, fruit desserts, etc., was never described in the texts, but their effects on the body can be understood by reconnecting ancient concepts and scientific explanations, such as gut dysbiosis, biochemical effects, digestive enzyme imbalance, etc., which ultimately cause IBS (Irritable Bowel Syndrome).

Aims and Objective :

This article explores its role in IBS through both Ayurvedic and modern scientific perspectives on the harmful effects of consuming food in the wrong combinations.

The study aims to highlight that:

- Classical Ayurvedic dietary principles anticipate modern concepts of **food intolerance and gut-microbiome interaction**
- Identifying and avoiding *Viruddha Ahara* may serve as a **preventive and therapeutic dietary strategy** in IBS management.

Methods :

- 1) Classical Ayurvedic texts such as Charaka Samhita, Other relevant Ayurvedic compendia (Sushruta Samhita, Ashtanga

Hridaya), and modern databases of Peer-reviewed journal articles. Online medical and scientific databases were referred to

- 2) Textual review of Ayurvedic descriptions of *Viruddha Ahara* and *Grahani* Literature search using predefined keywords. Inclusion of studies focusing on dietary factors in IBS. Thematic categorisation of findings, Comparative interpretation between Ayurvedic and modern concepts

Literature Review:

Irritable bowel syndrome (IBS):

Irritable bowel syndrome (IBS) ^[4] is a complex and highly prevalent disorder of gut-brain interaction (DGBI), characterised by recurrent abdominal pain and altered bowel habits, including constipation, diarrhoea, or a combination of both. Despite its chronic impact on quality of life and healthcare costs, IBS remains underdiagnosed. The pathophysiology of IBS is multifactorial, involving disturbances in the gut-brain axis, visceral hypersensitivity, gastrointestinal dysmotility, alterations in gut microbiota, food intolerances, and psychosocial factors.

Viruddha Ahara :

According to Charaka Samhita (Su. 26/102-107), food is considered *Viruddha* (incompatible) when it aggravates the doshas and fails to eliminate them from the body properly. ^[5]

Thus leading to accumulation and disease formation.—exemplified by combinations like **milk + fruit**, **heavy + heavy foods**, **cold + oily**, **fruit with meals**, **honey + ghee**, **milk + fish**, and **hot + cold**—vitiates **Agni**, fostering **Ama** formation and dosha stagnation.

He states that certain diets and their combinations, which have opposite properties and cause agni dushti and ama formation, are called *Viruddha Anna*, or incompatible diet. The wrong combination of food, improper processing, incorrect dose, and/or consumption at the wrong time of day and in the wrong season can lead to *Viruddha Ahara*.

Ayurveda literature has described various types of *Viruddha Ahara*, ^[6] which can be summarised as follows:

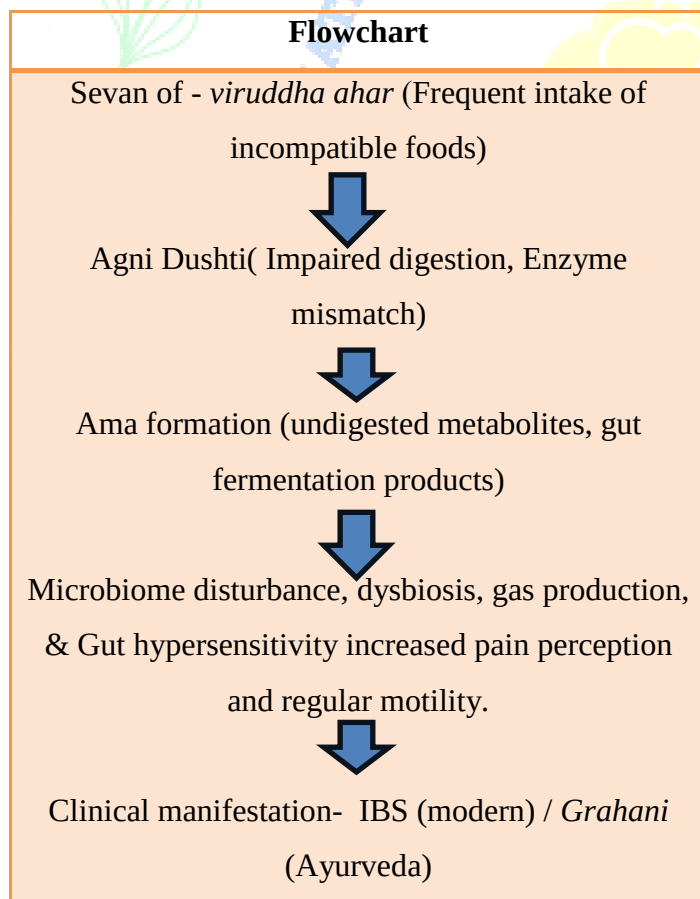
1. *Desha Viruddha* (place)
2. *Kala Viruddha*
3. *Agni Viruddha*
4. *Matra Viruddha* (quantity)
5. *Viruddha Satmya* (wholesome)
6. *Viruddha Dosha*
7. *Viruddha Sanskar* (mode of preparation)
8. *Viruddha Veerya* (potency)
9. *Viruddha Koshtha*
10. *Viruddha Avastha* (state of health)
11. *Viruddha Kram* (sequence)
12. *Viruddha Parihar*
13. *Viruddha Upachar* (treatment)
14. *Viruddha Paak* (cooking)
15. *Viruddha Samyoga* (combination)
16. *Viruddha Hridaya*
17. *Viruddha Sampad* (richness of quality)
18. *Viruddha Vidhi* (rules for eating)

According to Charaka (Sutra Sthana 26/102–103), consumption of such types of wrong combinations can lead to even death ^[7]. If *viruddha ahar* of the above-mentioned types is consumed, then the diseases occurring due to *Viruddha Aahara* can occur, which are mentioned below. Impotency, *Visarpa* (erysipelas), blindness, ascitis, bullus,

insanity, fistula in ano, coma or fainting, intoxication, abdominal distention, stiffness in neck, varieties of anemia, indigestion, various skin diseases, diseases of intestines, swelling, gastritis, fever, rhinitis, and infertility.

Viruddha Ahara (Samprapti)- Consumption of *Viruddha Ahara* leads to *Agnimandya* (reduced digestive fire) and Ama formation, resulting in obstruction of *srotas* (body channels) and imbalance of Doshas.^[8]

How does *viruddha ahar* lead to IBS (grahani-like condition) is explained in the following flowchart –



The concept of *viruddha ahar* causes the *samprapti of grahani* disease, which can be correlated to the modern disorder of IBS –

Agni Dushti	Impaired digestion/enzyme inefficiency
Ama	Fermentation byproducts, toxins
Dosha imbalance	Motility + secretion imbalance
Grahani	IBS

Thus, consumption of *Viruddha Ahara* can disrupt physiological balance and impair digestion, contributing to disorders like Irritable Bowel Syndrome (IBS) and *Grahani*. Avoiding such incompatible diets may help prevent disease.

Consuming incompatible foods disturbs the body's haemostasis and disrupts digestive enzymes, as illustrated by examples from our day-to-day food intake. In a modern perspective, a field that studies the consumption of unhealthy food intake, also known as topography, has emerged. It states that proteins must not be combined with starches or carbohydrates and must be consumed separately, since starches require an alkaline medium and saliva contains ptyalin. This enzyme breaks starch down into maltose. The process continues in the small intestine, where more amylase further breaks down the maltose into simple glucose, fructose, and galactose. These are absorbed into the bloodstream and taken to the liver, which dispenses the energy to whatever cells in the body need it. If there is no immediate requirement, glucose will be converted to glycogen and stored in the liver or to fat and stored in adipose tissue.

The simultaneous consumption of certain food groups may interfere with normal digestive processes. For instance, when protein-rich foods are

eaten with starches, the digestion and absorption of one nutrient may delay the digestion and absorption of the other. Likewise, combining sugary foods with acidic fruits can inhibit the activity of digestive enzymes such as ptyalin (salivary amylase) and pepsin, resulting in reduced saliva secretion and slower digestion. Inadequate salivary amylase activity prevents proper starch digestion in the oral cavity, leaving starch undigested in the stomach until it reaches the small intestine, where pancreatic amylase completes the digestion.

^[9] Similarly, dietary fats can suppress the secretion of digestive juices, including pepsin and hydrochloric acid, thereby impairing protein digestion. Therefore, excessive intake of fats alongside protein-rich meals should be avoided. The adverse effects of incompatible food combinations are not confined to the gastrointestinal system; over time, they may negatively affect other physiological systems. Although these reactions may initially appear mild, persistent consumption of unsuitable food combinations can contribute to long-term health complications and potentially increase the risk of serious disorders. We have considered 10 commonly eaten food combinations and studied their physiological effects on the gut, along with their ayurvedic perspectives.

Viruddha Ahar And Its Types With Scientific Explanation ^[10]

Sr No.	Viruddha Ahara	Type Of Viruddha Ahar	Scientific Explanation
1	MILK+FISH	<i>Mithya Yoga Viruddha</i> (combination - incompatible)	- Impaired digestion/enzyme mismatch - Gut fermentation & metabolic byproducts - Histamine response / mild inflammation
2	MILK+SOUR FRUITS	<i>Rasa Viruddha</i> (taste-incompatible)	Acidic fruits cause casein coagulation, slowing gastric emptying
3	Honey + Hot Water (above 40C / 104F)	<i>Sanskara Viruddha</i> (Preparation Incompatibility)	Heating honey can cause it to break down into the toxic compound hydroxymethylfurfural (HMF), as reported in biochemical research.
4	Milk + Salt	<i>Samyoga Viruddha</i> (Combination Incompatibility)	Salt may destabilise casein micelles, altering digestibility
5	Ghee + Honey in Equal Parts	<i>Matra Viruddha</i> (quantity-incompatible) <i>Viruddha Ahara</i>	Ghee (fats) delays gastric emptying, while honey (sugars) ferments rapidly; equal ratios overload enzymes, promote bacterial overgrowth, and may form harmful byproducts like advanced glycation end-products (AGEs)

Sr No.	Viruddha Ahara	Type Of Viruddha Ahar	Scientific Explanation
6	Milk + Radish	<i>Virya Viruddha</i> (potency-incompatible <i>Viruddha Ahara</i>)	Isothiocyanates in radish may interfere with lactose digestion
7	Cold Water + Oily/Fried Food	<i>Parihar Viruddha</i> (Avoidance Incompatibility)	Cold liquids slow lipase activity, delaying fat digestion
8	meat (protein) + starchy foods like bread	<i>Parihar Viruddha</i> (Avoidance Incompatibility)	Delays digestion and can lead to fermentation, causing gas and indigestion ^[11]
9	Reheating Processed Foods	<i>Paka Viruddha</i> or <i>Samskara Viruddha</i>	Repeated heating of oils or processed foods can generate toxic compounds like acrylamides and advanced glycation end products (AGEs), as identified in modern toxicological studies.
10	Raw and Cooked Foods Together	<i>Samskara Viruddha</i> (processing-incompatible) or <i>Agni Viruddha</i> (digestive fire-incompatible)	Raw foods demand more digestive enzymes (cellulase) and longer transit time due to tough cell walls, while cooked foods break down faster via heat-activated enzymes, causing mismatched digestion, fermentation, bloating, gas, dysbiosis, uneven short-chain fatty acids, microbiome stress, and altered gastric emptying, worsening IBS ⁽¹⁴⁾

Table 1 presents *Viruddha Ahara* examples classified by type, along with their biochemical rationale.

These parallels suggest that *Viruddha Ahara* can be correlated with diet-induced digestive dysfunction, linking *Grahani* with IBS in both traditional and modern perspectives. Add ref

Observations:

The ancient concept of viruddha ahar has been classified into 17 types by Charaka. Modern processed foods and incorrect food combinations have been classified into the above-mentioned types and analysed based on the biochemical reactions, digestive enzyme imbalances, and gut dysbiosis they cause, which ultimately lead to GI disturbances and, in turn, diseases such as IBS.

We took 10 classic examples of viruddha ahar from modern-day. We categorised them into their respective types of viruddhata based on the classical tests and the types of grahani they manifest. This is then explained, in modern scientific terms, how they cause biochemical reactions, gut imbalance, etc., which are responsible for the symptoms seen in IBS.

Viruddha Ahara	Ayurvedic manifestation of grahani	IBS manifestation
MILK+FISH	<i>Vataja grahani</i>	bloating/pain, mucus stools
MILK+SOUR FRUITS	<i>Kapha- vataja grahani</i>	heaviness, cramps
Honey + Hot Water (above 40C / 104F)	<i>Pittaja grahani</i>	Burning sensation, urgency to defecate
Milk + Salt	<i>Vata-Pitta mixed grahani</i>	osmotic diarrhea, bloating
Ghee + Honey in Equal Parts	<i>Vataja grahani</i>	visceral pain and distension
Milk + Radish	<i>Kapha-Vataja</i>	Gas, stickiness, colic (IBS).
Cold Water + Oily/Fried Food	<i>Vataja Grahani</i>	spasm, gripping pain
meat (protein) + starchy foods like bread	<i>Vata-kaphaj grahani</i>	distension, irregular motility → mixed IBS (diarrhea/constipation)
Reheating Processed Foods	<i>Pittaja (Grahani).</i>	burning, food sensitivity
Raw and Cooked Foods Together	<i>Vataja Grahani</i>	bloating, hypersensitivity

Results:

The analysis demonstrated that: All identified *Viruddha Ahara* combinations resulted in **digestive incompatibility**, leading to:

- Altered gastric emptying
- Increased intestinal fermentation
- Gas production and bloating
- Microbial imbalance (dysbiosis)
- These physiological disturbances closely resembled **clinical features of Irritable Bowel Syndrome**, including:

- Abdominal pain and distension
- Altered bowel habits (IBS-D, IBS-C, mixed type)
- Visceral hypersensitivity
- Parallel correlation with **Grahani** showed:
 - *Vataja Grahani* → bloating, irregular motility
 - *Pittaja Grahani* → burning, urgency
 - *Kaphaja* involvement → heaviness, mucus

Discussion:

The findings of this study highlight a significant convergence between **Ayurvedic dietary incompatibility (*Viruddha Ahara*)** and modern concepts of **IBS pathophysiology**.

From a mechanistic perspective:

- *Agni Dushti* can be correlated with digestive enzyme dysfunction and impaired metabolic processing
 - *Ama* formation parallels gut dysbiosis, endotoxemia, and increased intestinal permeability
 - Dosha vitiation, particularly Vata, aligns with altered gut motility and visceral hypersensitivity
- The studied food combinations demonstrate mechanisms consistent with IBS models:
- Fermentation and FODMAP-like effects → gas production and luminal distension
 - Microbiota imbalance → reduced beneficial flora and increased pathogenic metabolites
 - Immune activation → mast cell activation, histamine release, low-grade inflammation
 - Gut-brain axis involvement → exaggerated pain perception and motility dysregulation

Notably:

- Many Viruddha Ahara combinations resemble modern dietary triggers identified in low-FODMAP research, suggesting that Ayurvedic dietary rules may have empirical physiological relevance.

This supports the hypothesis that:

Viruddha Ahara acts as a chronic dietary stressor, disrupting gut homeostasis and predisposing individuals to functional gastrointestinal disorders such as IBS.

Conclusion:

This study elucidates the pathophysiological parallels between Ayurvedic *Viruddha Ahara* (incompatible foods) and the mechanisms of Irritable Bowel Syndrome (IBS), integrating classical principles with modern evidence.

Incompatible food combinations lead to Agni impairment, resulting in Ama formation, which manifests as:

- Gut microbiota dysbiosis
- Altered motility
- Visceral hypersensitivity
- Low-grade intestinal inflammation

These mechanisms directly correspond to IBS pathophysiology. Future studies, particularly clinical trials and microbiome-based research, are required to validate these findings and further integrate Ayurvedic dietary frameworks into evidence-based gastrointestinal care.

References :

1. Global Prevalence of Irritable Bowel Syndrome: An Updated Systematic Review and Meta-Analysis Authors Jhosmer Ballena-Caicedo, Lupita, Ana Maria Valladolid-Sandoval, Fiorella E. Zuzunaga-Montoya, Victor Juan Vera-Ponce DOI: <https://doi.org/10.14740/gr2095>
2. Sandeep RL, “Grahani (ग्रहणी): An Ayurvedic perspective with contemporary correlation — A comprehensive review” International Journal of Ayurvedic Medicine and Mental Health. 2026;3(2):16-25. Sabnis, M. Viruddha Ahara: A critical view. AYU 2012; 33:332-6
3. Dubey M., Deole Y.S.. Viruddha Ahara. In: Basisht G., eds. Charak Samhita New Edition. 1st ed. Jamnagar, Ind: CSRTSDC; 2020. https://www.carakasamhitaonline.com/index.php?title=Viruddha_Ahara. Accessed June 26, 2026.
4. The Science Of Viruddha Ahara: Types, Effects, Treatment, and Prevention In Ayurveda Dr Kavita Mittalakod, Department of Agadatantra, Shri Veer Pulikeshi Rural Ayurvedic Medical College & Hospital, Badami, Karnataka, India Corresponding Author: Dr Kavita Mittalakod

5. Agnivesha, Charaka, Dridhabala, Charaka Samhita, Sutra Sthana, 26/81, Vaidya Jadavaji Trikamaji Acharya editor, Reprint. Krishnadas Academy, Varanasi; 2000: p. 149
6. Ibid, Charaka Samhita, Sutra Sthana, 26/84, p. 150. Charaka. Charaka Samhita, Chikitsasthana 15/50-60, Chaukhamba Sanskrit Sansthan, Varanasi, 2017 edn., pp. 512-515.[ijirt](#)
7. bid Charaka Samhita, Sutra Sthana, 26/103, p. 151. Chaukhamba Sanskrit Sansthan, Varanasi, 2017 edn., pp. 245-250.[carakasamhitaonline](#)
8. Shelton HM. The hygienic system: Orthotrophy, Chap. 26. Dr Shelton's Health School; 1935.
9. Shin A, Xu H. Healthcare Costs of Irritable Bowel Syndrome and Irritable Bowel Syndrome Subtypes in the United States. Am J Gastroenterol. 2024 Aug 01;119(8):1571-1579. [PubMed]
10. Sushruta. Sushruta Samhita, Sutrasthana 20/13-20, Chaukhamba Sanskrit Sansthan, Varanasi, 2014 edn., pp. 120-122.[scribd](#)
11. Vagbhata. Ashtanga Hridaya, Sutrasthana 7/45-50, Chaukhamba Sanskrit Sansthan, Varanasi, 2015 edn., pp. 90-92.[iafaforallergy](#)
12. Deole YS, Swarup S, Chandola HM, Baghel MS. Viruddha Ahara: A critical view. Ayu. 2013;34(1):3-8.[ayureshmi](#)
13. Sharma A, Kumar P. Effect of Viruddha Ahara on the Gut Microbiota - A Review. Journal of Ayurveda and Integrated Medical Sciences. 2024;9(3):45-52.[healthshots](#)
14. Gupta R, Singh V. An approach to IBS as Garavishajanya Grahani. International Journal of Ayurveda and Pharma Research. 2024;15(2):112-118.

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