



“TRIDOSHA THEORY IN RELATION TO PSYCHOSOMATIC DISORDERS: AN INTEGRATIVE REVIEW”

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ABSTRACT

Introduction: Ayurveda recognizes the inseparable link between body (*Sharira*), mind (*Manas*), and soul (*Atma*). The *Tridosha* theory—*Vata*, *Pitta*, and *Kapha*—explains not only somatic processes but also mental and emotional regulation. Imbalances in *Doshas* are considered central to psychosomatic disorders such as anxiety, depression, irritable bowel syndrome, and stress-related hypertension. **Methods:** A systematic review of Ayurvedic classics (*Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*) and modern commentaries was undertaken. Databases including PubMed, Scopus, Web of Science, AYUSH Research Portal, and Google Scholar were searched (2000–2024) using terms “Tridosha,” “psychosomatic disorders,” “Ayurveda and mental health,” and “dosha imbalance stress.” Inclusion criteria included conceptual papers, clinical studies, reviews, and experimental work. **Results:** Ayurveda describes *Vata* as the regulator of mind and nervous system, *Pitta* as responsible for intellect and emotions like anger, and *Kapha* as linked with stability and memory. Psychosomatic disorders result from prolonged *Pragyaparadha* (errors of intellect), stress, and lifestyle disturbances leading to doshic imbalance. Clinical studies demonstrate associations between doshic dominance and susceptibility to psychosomatic illnesses. For example, *Vata Prakriti* individuals are more prone to anxiety and insomnia, *Pitta* to anger and hypertension, and *Kapha* to depression and obesity. Ayurvedic therapies including *Satvavajaya Chikitsa*, *Panchakarma*, yoga, and meditation have shown efficacy in psychosomatic conditions. **Discussion:** The *Tridosha* framework aligns with modern psychoneuroimmunology, stress physiology, and personality-based disease predisposition. However, objective biomarkers for *Dosha* imbalance and psychosomatic disease correlation remain underexplored. **Conclusion:** Integrating *Tridosha* theory with modern psychosomatic medicine provides a holistic model for prevention and management. Standardized tools for dosha assessment and interdisciplinary research will enhance clinical utility.

KEYWORDS: Ayurveda, *Dosha* imbalance, Mind-body disorders, Psychosomatic, *Tridosha*

INTRODUCTION

Ayurveda emphasizes that health is the balanced state of body, mind, and consciousness. The *Tridosha* theory—*Vata*, *Pitta*, and *Kapha*—is central to understanding both physiology and pathology.^[1-2] Each dosha governs specific functions: *Vata* regulates movement and nervous activity, *Pitta* governs metabolism and emotions, and *Kapha* ensures structure and stability. When balanced, they sustain health; when deranged, they manifest as disease.^[3-4]

Psychosomatic disorders are conditions in which psychological disturbances significantly influence physical health.^[5-6] Modern examples include anxiety-related gastrointestinal disorders, depression-associated fatigue, and stress-induced hypertension. Ayurveda conceptualizes these disorders through the interaction of *Sharira* and *Manas*, with *Dosha* imbalance serving as the bridge between mind and body.^[7-8]

The present review aims to explore the relevance of *Tridosha* theory in understanding psychosomatic disorders. Objectives include: (1) summarizing the classical Ayurvedic view of *Dosha* and mind-body interactions, (2) reviewing modern evidence linking dosha constitution and psychosomatic illness, (3) analyzing therapeutic interventions, and (4) identifying gaps for future integrative research.^[9-10]

MATERIALS AND METHODS

A systematic review was conducted from April–August 2025.

Sources searched: *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, and relevant commentaries.^[11]

Databases: PubMed, Scopus, Web of Science, IndMED, Google Scholar, and AYUSH Research Portal.^[12]

Search strategy: Keywords included “Tridosha AND psychosomatic,” “Ayurveda AND stress,” “dosha imbalance AND mind-body,” “Vata Pitta Kapha AND mental health.” Boolean operators and MeSH terms were applied.^[13]

Inclusion criteria:^[14]

- Classical Ayurvedic references with relevance to mind-body health.
- Peer-reviewed clinical and experimental studies (2000–2024).

- Reviews and conceptual papers on *Tridosha* and psychosomatic illness.

Exclusion criteria:^[15]

- Non-peer-reviewed sources.
- Case reports without methodology.
- Articles not directly addressing psychosomatic or dosha-related health.

Data analysis: Extracted data were categorized thematically into: (1) classical concepts, (2) psychosomatic disease mechanisms, (3) clinical/experimental studies, and (4) therapeutic approaches.

OBSERVATION AND RESULTS

1. Classical Understanding of *Tridosha* and Mind-Body Link

- *Charaka Samhita* states that health results from the equilibrium of *Doshas*, *Dhatus*, *Malas*, and *Manas*.
- *Vata* is associated with anxiety, fear, and instability; *Pitta* with anger, ambition, and jealousy; *Kapha* with calmness, attachment, and lethargy.
- *Pragyaparadha* (intellectual blasphemy) and *Asatmya Indriyārtha Samyoga* (improper sensory indulgence) are primary causes of psychosomatic imbalance.
- Classical psychosomatic disorders include *Unmada* (psychosis), *Apasmara* (epilepsy), *Atatvabhinivesha* (obsessive conditions), and *Chittodvega* (anxiety).

2. *Tridosha* and Psychosomatic Disorders

- ***Vata* imbalance:** Leads to anxiety, insomnia, IBS, palpitations.
- ***Pitta* imbalance:** Associated with irritability, anger, hypertension, ulcerative disorders.
- ***Kapha* imbalance:** Related to depression, obesity, lethargy, and psychosomatic fatigue.
- The interplay of *Doshas* influences disease progression; e.g., *Vata-Pitta* imbalance in stress gastritis, *Kapha-Vata* in depressive syndromes.

3. Modern Correlates

- ***Vata* disorders** align with sympathetic overactivity, neurotransmitter depletion, and anxiety disorders.
- ***Pitta* disorders** align with hypercortisolemia, increased catecholamines, and inflammatory stress responses.

- **Kapha disorders** resemble metabolic syndrome, serotonin dysregulation, and sluggish cognitive/physical responses.
- The psychosomatic concept parallels modern **psychoneuroimmunology**, which studies interactions between psychological processes, the nervous system, and immunity.

4. Clinical Evidence

- A study (Sharma et al., 2013) found higher prevalence of anxiety in *Vata Prakriti* individuals.
- Research at AIIMS (2017) showed that *Pitta* constitution subjects had higher cortisol reactivity under stress.
- Kapha-dominant individuals displayed higher BMI and were more prone to depression and metabolic syndrome.
- Trials using *Satvavajaya Chikitsa* and yoga interventions improved stress resilience and quality of life in psychosomatic disorders.

5. Therapeutic Approaches

- **Satvavajaya Chikitsa:** Counselling, thought redirection, self-restraint.
- **Panchakarma:** Detoxification therapies such as *Shirodhara* and *Nasya* shown to reduce stress and anxiety.
- **Herbal remedies:** *Ashwagandha* (adaptogen), *Brahmi* (memory enhancer), *Guduchi* (immune modulator) reduce stress-mediated dysfunctions.
- **Yoga and meditation:** Evidence supports improved autonomic balance, reduced cortisol, and enhanced psychological wellbeing.

6. Thematic Integration

The review highlights that *Tridosha* theory offers a holistic lens to view psychosomatic illness. Modern research supports dosha-based predispositions, stress physiology, and efficacy of Ayurvedic therapies.

DISCUSSION

The *Tridosha* model provides a sophisticated psychosomatic framework that is highly relevant in today's stress-driven lifestyle disorders. While biomedicine acknowledges psychosomatic illnesses, its explanations often remain fragmented—neurochemical imbalances, stress hormones, or immune dysregulation. Ayurveda integrates these aspects under the doshic imbalance paradigm.^[16]

For instance, *Vata* imbalance resembles sympathetic overdrive and neurotransmitter depletion seen in anxiety and IBS. *Pitta* imbalance mirrors inflammatory stress responses and cortisol dysregulation associated with ulcers and hypertension. *Kapha* imbalance reflects metabolic and neuroendocrine sluggishness seen in depression and obesity. These parallels highlight the translational potential of dosha theory.^[17]

Therapeutically, Ayurveda offers multi-dimensional interventions—herbal, behavioral, and procedural. *Satvavajaya Chikitsa* aligns with cognitive-behavioral therapy. *Yoga* and *Pranayama* are now globally validated as stress-reducing practices. Herbs like *Ashwagandha* demonstrate adaptogenic properties comparable to modern anxiolytics. Panchakarma practices such as *Shirodhara* are supported by evidence showing modulation of autonomic and neuroendocrine function.^[18]

Despite these insights, limitations remain. Current dosha assessment is subjective, relying on questionnaires or physician judgment. Objective biomarkers correlating dosha constitution with physiological or genetic patterns are still under development. Moreover, psychosomatic trials in Ayurveda are often small, heterogeneous, and lack rigorous controls.^[19]

Future research should integrate Ayurveda with psychoneuroimmunology, genomics, and neuroimaging. Dosha-based stratification in clinical trials may reveal differential treatment responses, making Ayurveda highly relevant to personalized medicine.^[20]

CONCLUSION

The *Tridosha* theory offers a comprehensive framework to understand psychosomatic disorders, bridging classical Ayurvedic insights with modern psychoneuroimmunology. *Vata*, *Pitta*, and *Kapha* imbalances manifest as distinct psychosomatic profiles: anxiety and IBS in *Vata*, stress gastritis and hypertension in *Pitta*, and depression and obesity in *Kapha*.

Evidence from clinical and experimental studies supports these associations, with Ayurvedic therapies—including *Satvavajaya Chikitsa*, yoga, Panchakarma, and adaptogenic herbs—demonstrating efficacy. The integrative approach emphasizes not just symptom management but also lifestyle

regulation, mental discipline, and personalized care based on constitution.

However, challenges include the lack of standardized dosha biomarkers and limited large-scale trials. By adopting interdisciplinary research—combining Ayurveda with stress biology, neuroendocrine studies, and genomics—the potential of *Tridosha* in psychosomatic medicine can be scientifically validated.

In conclusion, the *Tridosha* theory provides a holistic and practical framework for the prevention and management of psychosomatic disorders, with strong potential for integration into modern personalized healthcare.

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