



# Decoding *Krodha*: A Conceptual Study of Anger in Ayurvedic and Contemporary Perspectives

## Authors-

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## **Abstract:**

Anger (*Krodha*) is a complex emotional and physiological phenomenon with significant implications for mental and physical health. *Ayurveda*, the traditional Indian system of medicine, views *Krodha* not merely as a psychological issue but also as a result of imbalance of *doshas*, particularly the aggravation of *Pitta dosha*. This study examines *Krodha* through both *Ayurvedic* and modern scientific perspectives, exploring its causes, manifestations, and effects. *Ayurveda* conceptualizes *Krodha* as a reaction influenced by imbalances in the mind-body system, while contemporary psychology and neuroscience view it as a psychophysiological state shaped by environmental triggers, cognitive appraisals, and neural mechanisms, especially within the limbic system and prefrontal cortex. By integrating insights from classical *Ayurvedic* texts with findings from modern psychology and neuroscience, this study highlights the convergence and divergence in understanding anger, aiming to provide a more holistic, culturally sensitive, and effective approach to anger management.

**Keywords:** Anger, *krodha*, *Pitta Dosh*a

## **Introduction:**

Anger, or *Krodha*, is a fundamental emotion experienced across all human cultures. While often viewed as a negative affect, anger has adaptive roles in communication, boundary-setting, and motivation. However, chronic or unregulated anger can result in adverse psychological, social, and physiological consequences. *Ayurveda* provide profound insights into the etiology and effects of anger, emphasizing a balance between body, mind, and spirit. In contrast, contemporary science examines anger through the lenses of psychology, neurobiology, and behavioral science.

This study aims to examine *Krodha* through both *Ayurvedic* and modern lenses to offer an integrated conceptual framework for understanding and managing anger.

### Methodology:

#### ◆ *Ayurvedic* Literature Review-

Primary sources such as *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridayam*, *Kriya Sharir* Texts were reviewed for references to *Krodha*, its classification, *dosha* associations, and management. Commentaries by *Chakrapani* and *Dalhana* were consulted for interpretive clarity.

#### ◆ Modern Scientific Literature Review-

Databases including PubMed, Scopus, and PsycINFO were searched using keywords such as “anger,” “neuroscience of anger,” “anger management,” and “emotional regulation.” Articles from the last 20 years were prioritized, although seminal older works were also included.

### *Ayurvedic* Perspective on *Krodha*:

#### 1) Definition and Classification-

In *Ayurveda*, *Krodha* is considered as a *rajasik* expression. As per *Ayurveda*, *Krodha* is a *manasika bhava* (mental emotion) arising due to mental and *doshas* imbalances. It is influenced by *Rajas guna* and *Pitta Dosha*. At the level of *Trigunas* (three basic elements of mind namely *Sattva*, *Rajas* & *Tamas*), *Krodha* (Anger) is a manifestation of aggravated *Rajas Guna*.<sup>(1)</sup> When *Rajas* is predominant gives rise to emotions like Anger. As per *Paanchabhautikatva*, Anger or *Krodha* is described as ‘*Aagneya*.’<sup>(2)</sup> It is often linked to the *Pitta dosha* due to its association with heat, intensity, and transformation. *Ayurveda* has explained Anger as *Dharneeya Vega* (suppressible urge) and its importance.<sup>(3)</sup>

#### 2) Etiology-

*Krodha* is believed to result from the disturbance of *sattva* by *rajas* and *tamas*, especially when combined with aggravated *Pitta*. Improper diet (*ahara*), lifestyle (*vihara*), and poor moral conduct (*achara*) can provoke *Krodha*.

#### 3) Pathophysiology-

As *Krodha* (Anger) is *Aagneya* (heat power of the body), the basic mechanism of the effect of Anger on body functioning lies in its *Ushna* (heat) nature, which affects the normal functioning of *Agni*, disruption of *ojas* (vital essence).<sup>(4)</sup> Intense *Krodha* (Anger) has a major role to play in the potential development of disorders such as hypertension, skin diseases, and mental instability. In *Charaka Samhitha* it is mentioned that indulgence in *Kama* (lust), ***Krodha* (anger)**, *Lobha* (avarice), *Irshya* (jealousy), *Mana* (pride), *Mada* (vanity), *Shoka* (grieve), *Chinta* (anxiety), *Udvega* (agitation), *Harsha* (exhilaration) causes the vitiation of *Manasik Doshas* (*satva*, *Rajas*, *tamas*) these in turn vitiate *Sharirik Doshas* and cause diseases like *Jwara* (fever), *Atisara* (diarrhea), *Shosha* (emaciation), *Meha* (diabetes) and *Kustha* (skin disorders) etc.<sup>(5)</sup>

#### 4) Krodha and Prakriti-

According to *Ayurved Samhita*, *Vata Prakriti* individuals react quickly,<sup>(6)</sup> *Pitta Prakriti* individuals are very short tempered<sup>(7)</sup> and *Kapha Prakriti* individuals are with less in anger.<sup>(8)</sup>

#### 5) Management-

- *Sattvavajaya Chikitsa*: Strengthening the *sattva guna* through introspection, ethical conduct, and detachment.
- *Medhya Rasayana*: Herbs like *Brahmi (Bacopa monnieri)*, *Mandukaparni (Centella asiatica)*, and *Shankhpushpi* are recommended.
- *Panchakarma*: Detoxification techniques like *Virechana* (purgation) for *Pitta balance*, *Shirodhara* for mental stability.
- *Yoga and Meditation*: *Asanas*, *pranayama*, and *dhyana* to cultivate equanimity.

### **Contemporary Perspective on Anger:**

Anger is a compounded incident. It has dispositional properties, expressive and motivational components, situational and individual variations, cognitive and excitatory interdependent manifestations and psychophysiological (especially neuroendocrine) aspects. Any threat to one's welfare (physical, emotional, social, financial, or mental) is met with anger.<sup>(9)</sup>

#### 1) Psychological Understanding-

Anger is classified as a basic emotion by theorists like Ekman and Izard. It is often triggered by perceived injustice, threat, or frustration. Cognitive appraisal theories highlight that how an individual interprets an event influences their anger response. Anger is a basic human emotion that arises in response to perceived threats, injustices, or frustrations. It is considered a secondary emotion, often following primary emotions such as fear, hurt, or disappointment. Psychologically, anger functions as a defense mechanism to mobilize energy and assert boundaries when an individual perceives a challenge to their goals or sense of self. [Ekman, 1992; Izard, 1977]

### **Theories Explaining Anger:**

- a. Cognitive Appraisal Theory- Anger results from how individuals evaluate (appraise) events. If an event is seen as unjust, intentional, and blameworthy, anger is likely to arise. This involves the prefrontal cortex, which interprets the context and assigns meaning to events.
- b. Frustration-Aggression Hypothesis- Proposed by Dollard et al. (1939), this theory suggests that aggression is an automatic response to any goal-blocking frustration. Anger serves as a mediator between frustration and aggressive behavior. [Dollard et al., 1939]
- c. Social Learning Theory- According to Bandura, anger and aggressive responses can be learned behaviors, acquired through observing others and reinforced through environmental rewards or consequences. [Bandura, 1973]
- d. Biopsychosocial Model- Anger is influenced by a complex interaction of biological (e.g., genetics, neurochemistry), psychological (e.g., personality traits, thought patterns), and social (e.g., cultural norms, upbringing) factors.

#### 2) Neurological Mechanisms-

Anger is a complex emotion that arises from the interplay of neural circuits involved in emotional regulation, threat detection, and decision-making. It engages subcortical and cortical brain regions, particularly those involved in the limbic system and prefrontal cortex. [Neuroscience of Emotion, 2020]

### Key Brain Regions Involved

- i. Amygdala- Central to detecting threats and initiating emotional responses. When activated, it signals danger, triggering autonomic arousal and the release of stress hormones. In anger, the amygdala is hyperactive, especially in individuals with poor emotional regulation.<sup>(10)</sup>
- ii. Hypothalamus- Coordinates the autonomic and endocrine response to emotional arousal. Plays a role in aggressive behavior through connections with the amygdala and brainstem.
- iii. Periaqueductal Gray (PAG)- Involved in the expression of defensive and aggressive behaviors. Works with the hypothalamus and amygdala to mediate motor patterns related to aggression.
- iv. Prefrontal Cortex (PFC)- Especially the ventromedial (vmPFC) and dorsolateral prefrontal cortex (dlPFC) are critical for regulating anger and suppressing impulsive reactions. Dysfunction or reduced activity in these areas is linked to impulsivity and reactive aggression.
- v. Anterior Cingulate Cortex (ACC)- Monitors conflict and emotional distress. Helps assess social cues and modulate anger responses based on context.
- vi. Insular Cortex- Plays a role in interoception—the sense of the physiological condition of the body. Linked to the subjective experience of anger and disgust.

### Neurochemical Systems

- Serotonin (5-HT): Inhibitory role in aggression and impulsivity. Low serotonin levels are associated with increased anger proneness and poor emotional regulation.
- Dopamine (DA): Involved in reward and motivation. Dysregulation can enhance reactivity to provocation and reinforce aggressive behavior.
- Norepinephrine (NE) and Epinephrine: Promote arousal and vigilance during anger episodes. Released by the locus coeruleus and adrenal glands during the fight-or-flight response.
- Cortisol: Regulated by the HPA axis. Chronic anger can alter cortisol patterns, contributing to health risks like hypertension and cardiovascular disease.<sup>(11)</sup>

### 3) Psychosocial Impacts-

Anger, though a normal human emotion, can have profound psychological consequences when it becomes intense, chronic, or poorly managed. It affects how individuals think, feel, relate to others, and cope with life events. While adaptive in some contexts, unregulated anger is associated with various mental health challenges, interpersonal problems, and cognitive distortions.

- i. Cognitive Consequences- Impaired judgment and decision-making: Anger can narrow attention, increase risk-taking, and bias cognitive appraisals.
- ii. Emotional and Behavioral Outcomes- Chronic anger is linked with increased irritability, hostility, and resentment, contributing to a negative emotional state.
- iii. Relationship and Social Effects- Anger often leads to communication breakdown, conflict, and social isolation.
- iv. Mental Health Disorders Associated with Anger
  - Depression
  - Generalized Anxiety Disorder (GAD)
  - Intermittent Explosive Disorder (IED)

- Personality Disorders

4) Management Strategies-

- Cognitive Behavioral Therapy (CBT): Identifying and restructuring maladaptive thoughts.
- Mindfulness-Based Interventions: Enhancing emotional regulation through present-moment awareness.
- Pharmacotherapy: Use of SSRIs and mood stabilizers in clinical cases.
- Anger Management Programs: Structured group or individual programs using behavioral techniques. [CBT for Anger]

**Table No.1: Comparative Framework: Ayurvedic vs contemporary Perspective on Anger (*Krodha*)**

Aspects	Ayurvedic View	Contemporary View
<b>Definition</b>	<i>Krodha</i> as <i>Rajasika</i> emotion, suppressible urge ( <i>Vega</i> )	basic emotion triggered by injustice or threat
<b>Etiology</b>	Aggravated <i>Pitta</i> , imbalance of <i>Gunas</i> .	cognitive appraisal, learned behavior, frustration
<b>Physiology</b>	Disrupts <i>Agni</i> , increases <i>Ushnata</i> , weakens <i>Ojas</i>	neurotransmitters and HPA axis dysregulation
<b>Primary Systems Involved</b>	<i>Doshas</i> (specifically) <i>Pitta</i> , <i>Agni</i> , <i>Ojas</i> .	Amygdala, PFC, ACC, neurotransmitters
<b>Management</b>	<i>Sattvavajaya</i> , <i>Rasayana</i> , <i>Panchakarma</i> , <i>Yoga</i>	CBT, mindfulness, and pharmacotherapy

**Discussion:**

The *Ayurvedic* model offers a qualitative and energetically rooted perspective on anger (*Krodha*), viewing it as a result of constitutional imbalances, particularly in the *Pitta dosha*. It emphasizes ethical conduct (*Dharma*), self-regulation, and spiritual well-being, and promotes preventive strategies through personalized routines like *Dinacharya* (daily practices), *Rutucharya* (seasonal regimens), and mindfulness. This holistic approach integrates physical, emotional, mental, and spiritual dimensions.

In contrast, modern science views anger through a biomedical and neuropsychological lens, focusing on measurable factors such as cortisol levels, amygdala activity, and behavior. It offers structured, evidence-based treatments, including pharmacological and psychotherapeutic methods, for symptom control and emotional regulation.

Together, *Ayurveda* and modern science form a synergistic model. *Ayurveda* provides long-term, personality-centered care fostering resilience, while modern science contributes empirical rigor and scalability. This integration broadens our understanding of anger and supports the development of effective, culturally sensitive, and ethically grounded interventions.

**Conclusion:**

*Krodha*, when viewed through integrative and interdisciplinary lenses, is not merely an emotion but a complex phenomenon involving body, mind, and spirit. Rooted in *Ayurvedic* concepts like *doshas* imbalance—particularly *Pitta*—and supported by neurobiological findings on brain circuit dysregulation, anger demands a holistic approach. Integrating *Ayurvedic* and modern scientific insights allows for personalized prevention and treatment strategies. This dual framework acknowledges the physiological, psychological, and spiritual dimensions of anger. Future research should prioritize rigorous empirical studies that assess the effectiveness of *Ayurvedic* interventions—such as dietary modifications, herbal formulations, meditation, and lifestyle changes, using standardized scientific methodologies. Bridging ancient wisdom with modern evidence-based practices can pave the way for innovative, sustainable, and culturally sensitive mental health solutions.

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