



Review Article

## CONCEPTUAL UNDERSTANDING OF *SMRITI* (MEMORY): A LITERARY REVIEW FROM AYURVEDIC CLASSICS AND CONTEMPORARY NEUROSCIENCE

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### ABSTRACT

*Smriti* (memory) in Ayurveda is described as the capacity to recall knowledge previously perceived, heard, or experienced, representing a higher dimension of cognitive function. Classical texts explain that *Smriti* does not function independently but arises from the coordinated interaction of *Atma* (self), *Mana* (mind), *Indriya* (sense organs), and *Buddhi* (intellect). It is considered a vital component of *Pragya* (wisdom), along with *Dhee* (comprehension) and *Dhriti* (retention). Impairment of *Smriti* leads to *Prajnaparadha* (intellectual error), which is regarded as a fundamental cause of disease. This review compiles references from major Ayurvedic treatises and commentaries to explore the philosophical and functional aspects of *Smriti*. It analyses the role of *Tridosha*-particularly *Prana* and *Udana Vayu*, *Sadhaka Pitta*, and *Tarpaka Kapha*-in memory regulation. Internal and external factors such as *Abhyantara Karana*, *Bahya Karana*, *Abhyasa*, *Sattvanubandha*, and *Punahshrutata* influencing memory formation and recall are discussed. Classical descriptions of *Smriti Vibhramsha*, *Jara* (age-related decline), and *Prakriti*-based variations are critically examined. Modern neurophysiological concepts, including synaptic plasticity, hippocampal function, and memory consolidation, are correlated with Ayurvedic principles, highlighting significant conceptual parallels and supporting a holistic understanding of cognitive health.

### INTRODUCTION

*Smriti* is the remembrance of previously directly perceived, heard or experienced event. It is understood not simply as passive recall, but as an active faculty emerging from the interaction of mental and physiological components of the individual. Memory is a complex mental ability where the brain takes in information, keeps it safe, and brings it back when needed. It plays a big role in how we visualise *buddhi*, which is intelligence. *Smriti* is more connected with *Buddhi* and *Manovyapaar*. It is the coordinated activation of the same neurons engaged during the original experience that brings about the re-creation of past experiences. *Mana* helps keep knowledge remembered and connects the mind with the surroundings through the different sense organs called *Gyanendriyas*.

Ayurveda is the science that is based on understanding how things work in a functional way. It seems like a common issue in student life to grasp the concept of *smriti*. In this review, we aim to discuss the psychological and physical aspects of *Smriti* from a modern point of view.

### MATERIAL AND METHODS

This review involved a systematic compilation of information from Ayurvedic classical texts like *Charaka Samhita*, *Sushruta Samhita*, and commentaries and peer-reviewed research articles on *Smriti* and related mental faculties. Ayurvedic concepts were explored using textual analysis of Sanskrit verses and classical interpretations, while modern correlations were drawn from indexed journals and PubMed searches focusing on memory, cognition, and neurocognitive enhancement. Articles specifically addressing Ayurvedic memory concepts, influencing factors, and therapeutic approaches were included.

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## Philosophical Basis of *Smriti* in Ayurveda

The understanding of *Smriti* in Ayurveda is derived from *Darshana*- based principles (different schools of philosophy), particularly *Samkhya* and *Nyaya darshanas*. According to classical thought, memory arises when *Jnana* (previous knowledge) is reactivated through mental association. Acharya Charaka states that *Smriti* is dependent on the proper coordination of sensory perception, mental processing, and intellectual discrimination.<sup>[1]</sup> This indicates that memory is not an independent entity but a dynamic cognitive phenomenon, influenced by both internal and external factors.

### *Smriti* as a Component of *Pragya*

*Pragya* is a composite intellectual faculty comprising *Dhee* (comprehension), *Dhriti* (retention/control), and *Smriti* (recall). Acharya Charaka explains that impairment of any of these three leads to *Pragyaparadha*, which is considered a primary cause of disease.<sup>[2]</sup> *Smriti* specifically plays a vital role in learning, decision-making, and behaviour regulation. Thus, preservation of *Smriti* is crucial not only for cognitive health but also for maintaining overall physical and psychological equilibrium.

### Physiological and Functional Importance of *Smriti*

*Smriti* is closely associated with higher mental functions, enabling an individual to interpret present experiences based on past knowledge. Classical texts highlight that normal functioning of *Smriti* contributes to *Medha* (intelligence), *Prajna* (wisdom), and *Sadvritta* (appropriate conduct).<sup>[3]</sup> *Smritivibhramsha* (disturbance in memory) is described in conditions involving vitiation of *Doshas*, especially *Rajas* and *Tamas*, indicating the psycho-somatic nature of memory disorders.

*Doshas* function as the regulatory principles of the human body. Among them, *Vata* plays a predominant role in governing mental functions and activities, as indicated by the description "*Niyanta praneta ca manasaḥ.*" In the process of *Smriti* formation, *Udana Vayu* is considered the primary dosha involved in the acquisition and expression of memory.<sup>[4]</sup> *Prana Vayu* also contributes significantly by sustaining the normal functioning of *Buddhi* (intellect), *Mana* (mind), and *Indriya* (sense organs).<sup>[5]</sup> *Sadhaka Pitta*, located in the *Hridaya*, facilitates the proper operations of intellect and mental processes, while *Tarpaka Kapha*, situated in the head region, provides nourishment and protective support to the sensory and cognitive centres of the brain.<sup>[6]</sup> These components- *Praṇa Vayu*, *Udana Vayu*, *Sadhaka Pitta*, and *Tarpaka Kapha*- work in coordination to support the processes involved in memory. Among the various *Sara*, individuals possessing *Tvak Sara* are described as

having superior intellect, while those with *Sattva Sara* are endowed with strong memory capacity. In terms of *Prakriti*, individuals with *Vata Prakriti* are characterized by *Sruta grahi* (quick grasping ability) but comparatively *Alpa smriti*<sup>[7]</sup> (poor memory) and *Chala smriti*<sup>[8]</sup> (unstable memory), whereas those with *Pitta Prakriti* are regarded as *Medhavi*<sup>[9]</sup> (intellectually sharp). Individuals of *Kapha Prakriti* tend to grasp information slowly but retain it well, being described as *Chiragrahi* and *Smritiman*.<sup>[10]</sup> With respect to *Manasa Prakriti*, persons dominated by *Sattvika* qualities exhibit superior memory functions.

### Factors Responsible for *Smriti*

According to Acharya Charaka, *Smriti* (memory) is governed by two principal factors: *Abhyantara Karana* (internal factors) and *Bahya Karana* (external factors).

#### *Abhyantara Karana*

The *Sannikarsha* (coordinated interaction) of *Atma* (self), *Mana* (mind), *Indriya* (sense organs), and *Indriyārtha* (sense objects) plays a crucial role in the manifestation of *Smriti*. Proper association among these internal components facilitates the formation and retrieval of memory.

#### *Bahya Karana*

Acharya Charaka has described eight external factors that contribute to the development and strengthening of memory. These include:

1. ***Nimitta Grahana***- Perception or understanding of the cause.
2. ***Rupa Grahana***- Perception of form or appearance.
3. ***Sadrishyata*** - Recognition of similarity.
4. ***Viparyaya***- Comprehension of contrast or dissimilarity.
5. ***Sattvanubandha***- Focused attention or mental concentration.
6. ***Abhyasa***- Repeated exposure or practice of the same subject.
7. ***Jnana Yogata***- Acquisition of higher or metaphysical knowledge.
8. ***Punah shrutata***- Repeated or subsequent hearing of an event or information.<sup>[11]</sup>

### *Smriti* as a Crucial Attribute

In Ayurveda, *Smriti* (memory) plays a vital role and is regarded as an essential attribute of a patient. A physician acquires knowledge related to the aetiology from the patient by the information retained i.e. *Smriti* of the patient.<sup>[12]</sup> Also, clinical features and management of diseases are retained by the physician and applies this information through the effective retention and recall facilitated by *Smriti* (memory). Disturbances in *Dhee* (intellect), *Dhriti* (restraint), and *Smriti* (memory)- collectively described as

*Prajnaparadha* are considered fundamental causes of human suffering. Such impairment of *Smriti* (memory) occurs when the mind is predominantly influenced by *Rajas* and *Tamas doshas*, leading to errors in judgment and behaviour.

### Power of *Smriti* (Memory) in Attaining Salvation

Metaphysical memory is regarded as a supreme means to liberation, as demonstrated by enlightened beings. Individuals who adhere to this path are not entangled again in worldly attachments. It is considered an excellent method for the attainment of both *Yoga* and *Moksha*. The achievement of liberation is viewed as the ultimate objective of human life. Acharya Charaka highlights that this state is attained through the continual remembrance of the distinction between the *Atman* and the physical body, acknowledging that the latter has no real association with the former. By maintaining awareness of the true nature of reality, an individual becomes free from suffering. Hence, *Smriti* holds significant importance not only in the management of physical disorders but also in the resolution of spiritual afflictions.<sup>[13]</sup>

### Impairment of *Smriti* (Memory)

Impairment of memory, referred to as *Smriti Vibhramsha*, denotes a disturbance in normal memory functions. When an individual's mind is predominantly influenced by *Rajas* and *Tamas*, memory becomes deranged, leading to *Smriti Vibhramsha*. Under normal conditions, memory encompasses all experiences that are capable of being recalled; however, its disturbance contributes significantly to the development of various psychological disorders, which may subsequently manifest as psychosomatic illnesses.<sup>[14]</sup>

### Jara (Ageing) and *Smriti* (Memory)

During *Jara* (old), extending up to the hundredth year of life as per Acharya Charaka, there is a progressive decline in *Dhatu*s (tissue elements), *Indriyas* (sensory and motor functions), *Bala* (vital strength), *Grahana Shakti* (power of comprehension), *Dharana Shakti* (retentive capacity), and *Smarana Shakti* (memory recall). This gradual deterioration is attributed to the depletion of bodily tissues and the predominance of *Vata Dosha* characteristic of this stage of life.<sup>[15]</sup>

### Physiological Aspect of Memory

From a physiological perspective, memory formation occurs in the brain through alterations in the sensitivity of synaptic transmission between neurons, brought about by previous neural activity. These activity-dependent changes result in the formation of newly facilitated neural pathways known as memory traces. Once established, these traces can be selectively activated by the thinking mind, allowing past experiences to be reproduced.<sup>[16]</sup>

### Classification of Memory

Memory based on the duration for which information is retained can broadly be categorized into:

- a) Short-term memory
- b) Long term memory

#### Short term memory

- (i) Working memory- The temporary holding of information for a brief period, ranging from a few seconds to one or two minutes. A common example is remembering a newly looked-up telephone number just long enough to dial it, after which the information is quickly forgotten. This form of memory is often referred to as working memory because it remains active only for a short duration.
- (ii) In some instances, short-term memory may persist for several minutes or even a few hours. Such memory is believed to result from repeated neural oscillations generated in the cerebral cortex by sensory stimuli. When these oscillations become fatigued or are disrupted by incoming sensory signals, the memory gradually fades. At the synaptic level, short-term memory involves transient events at the presynaptic terminal, including calcium ion accumulation and neurotransmitter release, which lead to temporary facilitation or inhibition of synaptic transmission.<sup>[17]</sup>

#### Long term memory

The storage of information for extended periods and is further divided into intermediate long-term memory and true long-term memory.

- (i) **Intermediate long-term memory-** The memory that persists for hours, days, or weeks before eventually fading. For example, facts memorized while preparing for an examination may be retained for several days or weeks. This type of memory is associated with temporary chemical and structural changes occurring at both the presynaptic and postsynaptic terminals. When a sensory terminal and its associated facilitator terminal are activated simultaneously, serotonin is released from the facilitator terminal into the sensory terminal. This neurotransmitter acts through the adenylate cyclase-cAMP pathway to block potassium channels, resulting in prolonged action potentials. Consequently, increased calcium influx occurs at the sensory terminal, leading to enhanced neurotransmitter release and improved synaptic transmission. Repetition through revision, rehearsal, or restudy can prolong the duration of intermediate memory. Memory that lasts for minutes to days is commonly referred to as recent memory.

**(ii) True long-term memory-** refers to the storage of information for prolonged periods, extending over several years and often lasting throughout an individual's lifetime. Personal details such as one's name, age, and date of birth, along with significant life events, are typically retained permanently. In addition, basic arithmetic knowledge, including addition, subtraction, and multiplication tables, as well as certain important facts and experiences, may be remembered for many years.<sup>[18]</sup>

### Essential Factors of Memory

The ability to remember previously acquired knowledge depends on three fundamental processes: retention, recall, and recognition. Retention refers to the preservation of impressions formed from past experiences within the mind. The capacity for retention varies among individuals and is influenced by factors such as the recency and frequency of experiences, personal interest, and associative links.

Recall involves the retrieval or recollection of these stored mental impressions, which may be triggered by various internal or external stimuli. Recognition occurs when the recalled impressions enable the identification of a specific person, object, or subject, thereby completing the process of memory formation.<sup>[19]</sup>

### Consolidation and Storage of Memory

Memory consolidation refers to the process through which the structural and biochemical changes required for long-term memory formation take place. Memory stored in this stabilized form is known as an engram. The development of memory is attributed to synaptic modifications that lead to the creation of new neural pathways or memory traces. For short-term memory to be transformed into long-term memory, consolidation is essential. Minor consolidation is believed to require approximately five to ten minutes, whereas stronger consolidation may take an hour or longer. Repeated rehearsal or continuous repetition of the same information enhances this consolidation process and strengthens memory retention.<sup>[20]</sup>

### Anatomical Aspect of Memory - Limbic Network

The term *limbic* is derived from the Latin word meaning "border" and was originally used to describe the structures located along the margins of the basal regions of the cerebrum. Over time, the concept of the limbic system has expanded to include the entire neuronal network responsible for emotional behaviour, motivation, autonomic regulation, and endocrine control.<sup>[21]</sup> This distributed system comprises limbic and paralimbic structures such as the hippocampus, amygdala, and entorhinal cortex, along with the anterior and medial nuclei of the thalamus and portions of the striatum. One of the most clinically

significant functions of the limbic network is its role in declarative (conscious) memory, particularly for recent experiences and events. Dysfunction of this system results in amnesic states. Although damage to the limbic network disrupts memory recall, it does not serve as the primary storage site for memories. Instead, memories are stored widely across the cerebral cortex. The limbic system plays a crucial role in integrating these distributed memory fragments into coherent experiences that can be consciously recalled. When this integration is impaired, declarative recall suffers, although implicit memory may remain intact.

### Role of Specific Brain Regions in Memory

The hippocampus, located in the medial portion of the temporal lobe, plays a central role in memory storage and consolidation. It curves beneath the brain and extends into the inner surface of the lateral ventricle.<sup>[22]</sup> Bilateral damage or removal of the hippocampus leads to severe impairment of memory formation. While previously learned skills and remote memories may remain intact, the ability to form new memories is markedly reduced, resulting in anterograde amnesia. In such individuals, newly acquired information is retained only for a few seconds, significantly affecting learning ability. Thus, the hippocampus is essential for the consolidation of long-term memories and the formation of memory traces.

### Diencephalon and Associated Structures

The diencephalon, a division of the forebrain, is situated between the telencephalon and the midbrain and forms a major part of the walls and cavity of the third ventricle. The hypothalamic sulcus divides it into dorsal and ventral regions. The dorsal portion includes structures such as the thalamus, a large mass of grey matter that serves as a major relay centre, and the metathalamus, which consists of the medial and lateral geniculate bodies which are situated on each side of the midbrain below the thalamus. The epithalamus, forming the posterior roof of the diencephalon, includes the pineal gland and habenular nuclei.<sup>[23]</sup>

The ventral portion comprises the hypothalamus, which is regarded as the chief regulatory centre of the autonomic nervous system due to its role in maintaining visceral, metabolic, and homeostatic functions. Adjacent to this lies the subthalamus, composed of both grey and white matter and positioned between the thalamus and midbrain.<sup>[24]</sup>

### Amygdala and Emotional Memory

The amygdala consists of paired, almond-shaped nuclei located deep within the medial temporal lobes and forms an integral part of the limbic system. It plays a vital role in emotional processing, particularly

in relation to fear, anxiety, aggression, and decision-making. The amygdala also contributes significantly to memory, especially memories associated with emotional experiences, thereby influencing both learning and behavioural responses.

## DISCUSSION

The present review attempts to comprehensively analyse the concept of *Smriti* by integrating classical Ayurvedic descriptions with contemporary neurophysiological understanding of memory. Ayurveda perceives *Smriti* not merely as a cognitive faculty but as a dynamic function arising from the coordinated interaction of *Atma*, *Mana*, *Indriya*, and *Buddhi*, regulated by *Tridosha* and influenced by both internal and external factors. This multidimensional approach aligns with modern perspectives that consider memory as an emergent property of complex neural networks rather than a localized or isolated function.

Classical Ayurvedic texts emphasize *Smriti* as a component of *Pragya*, along with *Dhee* and *Dhriti*, and clearly describe that impairment of any of these leads to *Pragyaparadha*, which is considered a fundamental cause of disease. This concept finds resonance in modern behavioural sciences, where memory dysfunction is closely linked to impaired judgment, decision-making, maladaptive behaviour, and psychosomatic disorders. The Ayurvedic explanation of *Smriti Vibhramsha* due to the dominance of *Rajas* and *Tamas* parallels modern observations that emotional stress, anxiety, depression, and altered affective states significantly impair memory processes. The role of *Doshas* in *Smriti* elaborated in Ayurvedic physiology offers a functional framework comparable to modern neurobiological mechanisms. *Vata*, particularly *Praṇa* and *Udana Vayu*, governs neural transmission, cognition, and expression, resembling the role of neuronal signalling and cortical activation. *Sadhaka Pitta* facilitates intellectual processing and emotional regulation, which may be correlated with neurotransmitter-mediated cognitive processing, especially within the limbic system. *Tarpaka Kapha*, responsible for nourishment and stability of mental functions, can be conceptually related to neuroprotective mechanisms and synaptic stability. The *Prakriti*-based variations in memory functions described in Ayurveda reflect individual differences in learning styles, retention, and recall acknowledged in modern cognitive psychology.

The classification of memory into short-term, intermediate, and long-term memory in modern neuroscience finds a conceptual parallel in the Ayurvedic emphasis on *Abhyasa* (repetition), *Punahshrutata* (repeated hearing), and

*Sattvanubandha* (focused attention) as essential factors for strengthening *Smriti*. The description of synaptic plasticity, neurotransmitter release, and consolidation processes in modern physiology complements the Ayurvedic understanding that repeated exposure and focused engagement are necessary for durable memory formation.

Anatomically, the limbic network- particularly the hippocampus and amygdala- plays a central role in memory consolidation and emotional memory. Ayurveda does not localize *Smriti* to a specific structure but describes *Hridaya* as the seat of higher mental functions, supported by *Doshic* components such as *Sadhaka Pitta* and *Tarpaka Kapha*. This non-localized yet functional description aligns with modern evidence that memory storage is distributed across the cerebral cortex, while limbic structures facilitate integration and recall.

Age-related decline in memory described as part of *Jara* due to *Dhatu-kshaya* and *Vata* predominance corresponds closely with modern observations of cognitive decline, synaptic loss, and reduced neuroplasticity in ageing. Thus, Ayurvedic explanations provide a holistic, preventive perspective that emphasizes maintenance of *Doshic* balance, mental discipline, and lifestyle regulation to preserve *Smriti* across the lifespan.

Overall, the Ayurvedic conceptualization of *Smriti* offers a biopsychosocial and spiritual framework that complements modern reductionist models, highlighting the importance of *Sattva* (mental purity), *Sadvritta* (ethical conduct), and repeated cognitive engagement in maintaining memory health.

## CONCLUSION

*Smriti*, as described in Ayurveda, represents a comprehensive cognitive function that extends beyond mere recall of past experiences and encompasses learning, judgment, behaviour, and spiritual awareness. The classical Ayurvedic framework explains memory as a result of harmonious interaction between psychological, physiological, and metaphysical components, regulated by *Tridosha* and influenced by individual constitution and mental qualities.

When examined alongside modern neurophysiology, striking conceptual parallels emerge in terms of synaptic plasticity, memory consolidation, emotional modulation, and age-related cognitive decline. The Ayurvedic emphasis on *Abhyasa*, *Sattvanubandha*, and *Doshic* balance provides valuable insights into preventive and promotive strategies for memory enhancement.

This integrative understanding underscores the relevance of Ayurvedic principles in contemporary

cognitive health research and highlights the potential of Ayurveda in addressing memory disorders, stress-related cognitive impairment, and age-associated decline. Further interdisciplinary research exploring these correlations through experimental and clinical studies may help bridge traditional wisdom with modern neuroscience, contributing to a more holistic approach to cognitive health and well-being.

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