

**A CASE STUDY-AN AYURVEDIC MANAGEMENT OF CAD  
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Sambhajinagar.**ABSTRACT**

Ischemic heart disease (IHD), a form of coronary artery disease (CAD), is one of the many cardiovascular diseases (CVDs) whose prevalence has reached epidemic proportions. The initial symptom of coronary artery disease is the development of atherosclerotic plaques in the coronary arteries. The greatest pharmaceutical strategy to manage atherosclerosis, however, still does not seem to appear to have widespread acceptance. Coronary heart disease is the leading cause of death worldwide, and its incidence is rapidly accelerating in developing nations. Patients In Coronary Artery Disease, the etiology is generally discussed in terms of “risk factors”; where risk factor is an attribute or exposure that is significantly associated with the development of a disease and can be modified by intervening, which reduces specific outcomes. The present case study highlights the

management of CAD (hrudroga) with the help of gokshura, amalaki and haridra siddha basti along with dietary changes and ayurvedic medicinal treatment.

**INTRODUCTION**

The word ‘Hrudaya’ in Ayurveda is a synonym for heart in Modern medicine. The name itself indicates the function of this vital organ. ‘Hru’ means, one which draws fluid or blood from the body forcibly<sup>[1]</sup> and ‘Da’ which means to donate. Simply saying, Rasa (body fluids) and

Rakta (blood) are circulated in the body, by the dual action of forcible collection and supply by the heart and thus the name Hrudaya in Ayurveda. This is the fundamental function of the heart. According to Ayurvedic texts, the heart originates from The essence of Rakta and Kapha, predominantly from maternal side, and develops into a muscular organ<sup>[2]</sup> Movement of the heart is controlled by Vyanavayu.

Due to poor life style habits like smoking, drinking, lack of exercise and having a history of diabetes, dyslipidemia, high blood pressure, obesity which results into developing atherosclerosis which is an underlying cause of coronary artery disease. Coronary heart disease is the leading cause of death worldwide, and its incidence is rapidly accelerating in developing nations. Patients In Coronary Artery Disease, the etiology is generally discussed in terms of “risk factors”; where risk factor is an attribute or exposure that is significantly associated with the development of a disease and can be modified by intervening, which reduces specific outcomes.<sup>[4]</sup>

Risk factor identification has contributed to a significant decrease in CAD mortality rates<sup>[5]</sup> Vegadharana is a risk factor for Hrdroga and since habitual suppression of natural urges is a modifiable behavior, it comes under the purview of behavior change.<sup>[6,7]</sup> However there exists a lacunae of research work establishing the association of Vegadharana as risk factor of the outcome Hrdroga, followed by which it could be considered in behavior change process. Epidemiological studies are required to provide relevant evidence of an association of suspected risk factor and disease.<sup>[8]</sup> Various therapeutic approaches for increasing the Functional ability and quality of life in patients with cardiovascular illnesses are Mentioned in classical Ayurvedic writings. 12Ayurveda is the foundation of Indian Traditional medicine, and it has been adopted by many alternative physicians to treat a Variety of ailments.<sup>[9]</sup>

## CASE PRESENTATION

A patient having medical history of HTN since 5 yrs came to hospital after an attack of MI and with the Angiography and suggested CABG. Pt having symptoms of constipation, fatigue, unstable angina, bloating.

### Vitals as follows – (Before)

- Bmi- 27
- Ag ( Abdominal girth)-107
- Wt-80.90

- Pulse- 84/min
- Bp-160/90 mm of hg
- Bsl-99
- SpO<sub>2</sub>-99%
- Walk test 6min- Initially calculated VO<sub>2</sub>max was 9.98.

**Diagnosis:** CAD.

### **Treatment**

- Gokshura , haridra, amalaki ghana tab – 250 mg 2 BD× 1month
- Panchasakar churn- 2gm before meal at night × 1month
- Hingavashtaka Churna- 2gm BD before meal × 1month
- Arjun kwatha- 20ml BD after meal×1month
- Diet- 1 month

800kcal controlled diet with low carbohydrate and moderate fat was advised.

- Panchakarma- After every 4days

Snehan with Til tail

Nadi swedana with Dashmool kadha

Siddha basti of Gokshura, Haridra and Amalak.

### **RESULT AND DISCUSSION**

The main factors that promote vascular inflammation include hypertension, diabetes Mellitus, smoking, and stress. The atheroma that forms when an inflamed coronary tries To mend itself may go away if the process of inflammation is stopped over time, but there Lies a chronic phase of inflammation that causes progressive atherosclerosis.

One of the current therapeutic problems is the potential for slowing or perhaps causing The regression of human atherosclerosis. Thus, here we have introduced the Ayurvedic Approach to the treatment of coronary atherosclerosis. The weight, ABG, SBP, DBP, and HR of all the patients improved after the treatment.

Before	After
VO <sub>2</sub> max- 9.98	VO <sub>2</sub> max-35.7
AG-107	AG- 93

WT-80.90	WT-76.5
BMI-27	BMI- 25

## CONCLUSION

The findings of our study suggest that Panchakarma treatment along with restricted diet programs can serve as treatment for patients with coronary atherosclerosis in known CAD. Panchakarma along with a restricted diet can aid to stabilize the plaque for a longer lifespan in addition to slowing the progression of atherosclerosis. Another advantage is that it considerably lessens patients' dependence On allopathic treatments.

## REFERENCES

1. V.B. Athavale Cardiology in Ayurveda (1<sup>st</sup> ed.), Chaukhamba Sanskrit Pratishthan, 1999.
2. J.L.N. Sastry, K. Nisteswar Ayurvedic management for heart diseases (1<sup>st</sup> ed.), Chaukhamba Sanskrit.
3. A Prospective Trial of Ayurveda for Coronary Heart Disease: A Pilot Study Robert DuBroff et al. Altern Ther Health Med., 2015 Sep-Oct.
4. Park K. 25<sup>th</sup> ed. M/S Banarsidas bhanot publishers; Jabalpur: 2019. Parks textbook of preventive and social medicine, Chapter Concept of Health and Disease, 744–745.
5. Brown J.C., Gerhardt T.E., Kwon E. vol. 6. StatPearls Publishing; Risk factors for coronary artery disease. (StatPearls. Treasure island (FL), 2020.
6. Murthy A.R., Singh R.H. Ayurvedic concept of Hridroga its present relevance. Ancient Sci Life., 1993; 12(3–4): 403. [PMC free article]
7. White N.D., Lenz T.L., Smith K. Tool guide for lifestyle behavior change in a cardiovascular risk reduction program. Psychol Res Behav Manag, 2013; 6: 55. [PMC free article]
8. National Research Council . National Academies Press; 2012. Analysis of cancer risks in populations near nuclear facilities: phase 1.
9. Ramesh S, Kosalram K. The burden of noncommunicable diseases: A scoping Review focus on the context of India. Journal of Education and Health Promotion., 2023 Feb 1; 13(2): 1-7.