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Case Study

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AYURVEDIC MANAGEMENT OF VAATIK HRIDROGA W.S.R. ATRIAL FIBRILLATION: A CASE REPORT

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ABSRTACT

In this category heart disease related problems like arrythmia, fibrillation, myocardial infarction, valvular diseases also increasing due to many reasons like modification and change in life style. In Ayurvedic aspect *hridroga* refers to the diseases related to cardiovascular system in the body. *Hridaroga* itself is a broad term in which all heart related abnormal conditions lies within this category. According to Ayurveda acharyas also described the types of hridaroga (*vataja*, *pittaja*, *kaphaja*, *sannipataja*, *krimija*). *Hridaya* is one of the three *marmas*(vital parts) of body. *Hridaya* is the *moola* of *Praanavaha strotasa*. If there is Any disturbance in function of heart it

can leads to the fatal condition for the patient. Previously Many research articles also proven that Ayurvedic drugs has the potency to protect the heart from diseases and prevention also by life style changes. In this present case of *VAATIKA HRIDAROGA* significant improvement seen in subjective symptoms.

KEYWORDS: Hridroga, Vaatik hridroga, Atrial Fibrillation.

INTRODUCTION

Hridroga is a disease of *Marma* (vital organ), which is the seat of many vital activities. In Ayurveda all the heart diseased conditions consider under the broad classification of *Hridroga*. According to Sushruta any condition which produces disturbances in the heart is called as *Hridroga*. ^[1] Definition of heart diseases, aetiology, pathogenesis and management

has been described in *Charak Samhita*. Ayurvedic concept of *Hridroga* is somewhat difficult to understand in exact correlation with Modern pathology, but Ayurvedic treatment of *Hridroga* is quite effective and helps in prevention of the disease also. The increasing evidence of cardiac disorders in present times it is necessary to assume aetiology of *Hridroga* as some lifestyle modifications, as a result in complication of other metabolic disease like hyperthyroidism.

Ayurveda has been described 5 types of *Hridroga*. E.g. *Vataj, Pittaj, kaphaj, sannipatik, krumij*.^[3] Nature of pain is somewhat distributing in character although it is because of Vata. Among these *vatik* type is seems to be ischemic heart diseases category. Pittaj seems to be inflammatory conditions, in *kaphaj* heaviness is there, *Kramij Hridroga* patient gets acute pain, pricking pain and itching characteristic of pain is *Suchibhirivatoda* (Pain like piercing by needles) *Chidyamanam Yatha Shasthairjatam* (As heart cut by weapon) it is more sever type of condition among all types of *Hridroga*. For treating the patients of hridroga many factors should be kept in mind such as chronicity, age, mental as well as physical strength. looking all these parameters we should treat the patient.

MATERIAL AND METHODS

A female patient aged 50 years visited in OPD Department of Kayachikitsa of AIIA. She came with complaints, shortness of breath since 2 days, pain in middle of the chest region, palpitation, chest discomfort since 7 days and irritation in throat since 2 months. During examination of vitals the pulse was 164 per minutes, BP-110/60 mmHg, pSo₂₋ 96%. Observing the condition of patient she advised to admit in IPD for continuous observation. She has history of hyperthyroidism. She has no history of DM or HTN.

Detailed previous history of the patient

The patient was asymptomatic before 1 year then she developed the symptoms of hyperthyroidism. She was under treatment for hyperthyroidism since 1 year at that time her thyroid profile was abnormal having TSH <0.005. In conventional therapy she has advised neomercazole 10 mg. She was continuously under treatment for 1 year then gradually she developed the cardiac symptoms like chest pain, heaviness in chest, shortness of breath etc. according to ayurvedic point of view the symptoms presented was akin to VAATIK HRIDROGA. The symptoms vepathu(palpitation), veshtana(twisting like pain in chest), shoonyata(feeling of emptiness in left side of chest) were found, then she visited to ayurvedic

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hospital for the further treatment. Patient was admitted in IPD and kept under observation for 12 days. Marked improvement was observed after the treatment.

Physical Examination

On examination the pulse rate was found 164 beats per minute with regularly irregular, B.P. 110/70 mmHg. Respiratory rate was 22 per minutes, there was no sign of pallor, icterus, cyanosis or clubbing found. On auscultation of precordium heart sound was rapid and ectopic beats heared, there was shortness of breath, weakness and giddiness. There was no any deformity found during respiratory system examination. Rest system of body function found normal.

DASHAVIDHA PARIKSHA

Prakriti- vaata prdhaana kaphaja Vikriti-vaata kaphaja

Saara- avara Samhanana- madhyam

Sattva- avara Saatmya- madhyam

Aahara Shakti- madhyam Vyaayam Shakti-avara

Vaya-pravar

Investigations

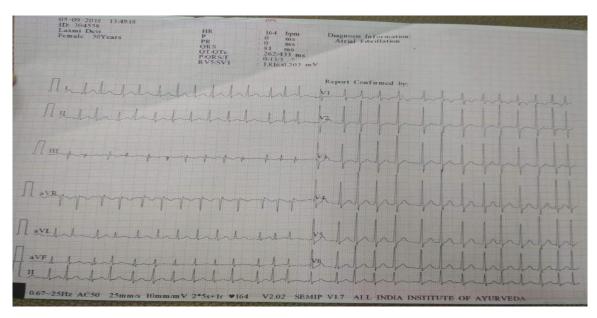
Due to onset of the cardiac symptoms, the blood routine examinations were carried out and a 2D Echo was also advised to rule out the internal pathological changes in heart. The findings was as follow-

Hb-13gm/dl ESR-18 mm/1st hr,

RBS- 112.78gm/dl, SGOT- 40.25 IU/ml,

SGPT-57.73 IU/ml S. Bilirubin-0.66 gm/dl

ECG FINDINGS-(5-9-18)



2D Echo Findings-(7-9-2018)

LVEF- 57%

Atrial fibrillation during study,

Moderate concentric LVH

Mild TR, Mild MR

TREATMENT GIVEN

- 1. Prabhakar $Vati^{[4]}$ 250 mg BD with water
- 2. Nagarjunabra $ras^{[5]}$ -250 mg Hridayarnava $ras^{[6]}$ -125mg Jaharmohara pishti-100 mg
- 3. Sidhmakardhwaj ras^[7]-125mg OD with honey
- 4. Arogyavardhini vati- 250mg BD with water
- 5. Dashmooola Haritaki Avaleha-10 gm BD with Luke warm water
- 6. Sahacharadi Kashaya -15 ml BD with equal amount of water before meal

Patient started to take medicines with according to appropriate dose as prescribed and kept in observation for 12 days. The vitals was recorded twice daily morning and evening.

Vitals chart

DATE	Blood Pressure (in mmHg)		Pulse Rate (in per minutes)		Respiratory Rate
	Morning	Evening	Morning	Evening	(in per minutes)
5-9-18	110/80	114/80	164	124	24
6-9-18	110/70	110/80	110	112	22

7-9-18	112/70	114/80	112	108	22
8-9-18	120/70	108/60	114	108	22
9-9-18	118/74	112/76	108	102	20
10-9-18	112/70	110/70	96	98	20
11-9-18	110/70	118/74	94	96	22
12-9-18	118/78	122/70	72	76	18
13-9-18	106/70	110/64	80	84	22
14-9-18	108/70	112/72	77	80	20
15-9-18	122/80	120/80	78	82	20
16-9-18	110/70	124/78	74	84	20
17-9-18	110/72	120/78	87		
26-9-18	114/70		81		

At the time of discharge the patient was instructed to follow the diet plan as follow-

- 1. To take 2-3 teaspoon of *Goghrita* in diet at a time.
- 2. Must include Pomegranate, cow milk,
- 3. Easily digestible food like *moong dal, masoor dal*, gourd, pumpkin,
- 4. Avoid to take more salt, spices, cold drinks, coffee, tea, ice, deep fried street food etc.

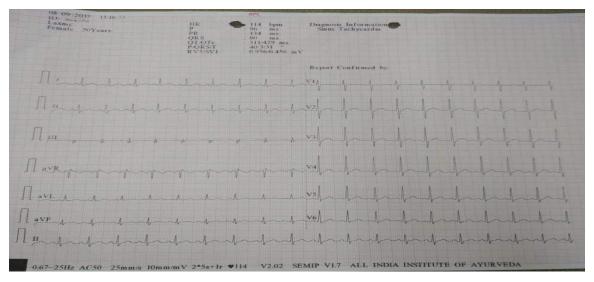
Patient was on regular follow up and was stable during treatment period i.e, for 7 months. As the major symptoms get subsided then patient was put on lesser medicines. Meanwhile patient complained of mild gastric symptoms observed then treated accordingly.

Medicines Prescribed During Follow Up Period

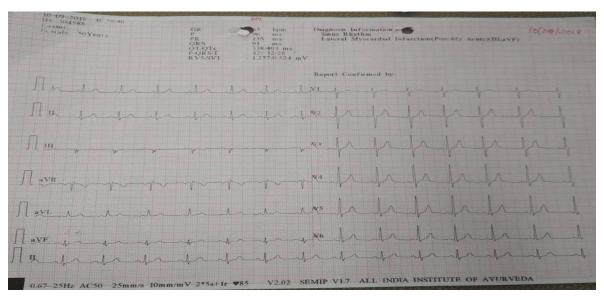
- 1. Bilwadi avaleha-10 gm BD with water after meal
- 2. Dashamoola haritaki Avaleha- 10 gm BD after meal with luke warm water
- 3. Prbhakar vati-250 mg BD
- 4. Parthadyarishta 15 ml with equal amount of water
- 5. Yaakuti Rasayan- 250 mg BD

RESULTS

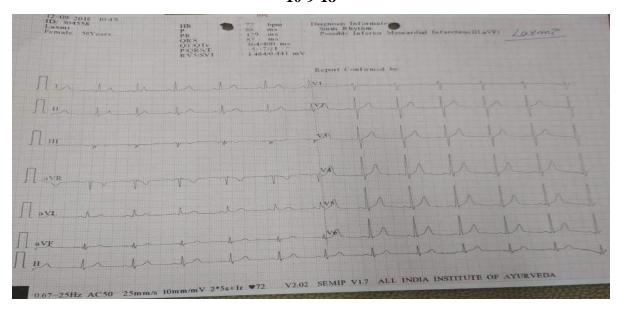
After 4 days of treatment the symptoms like *vepathu*(*palpitation*), *veshtana* (*twisting like pain in chest*), *shoonyata*(*feeling of emptiness in left side of chest*) were decreasing and the heart rate found below 100 beats per minutes. The treatment remain continuous under observation in IPD and ECG was done at regular intervals. After 12 days the symptoms moderately subsided and advised to discharge with weekly regular follow up. The ECG finding are as follows-



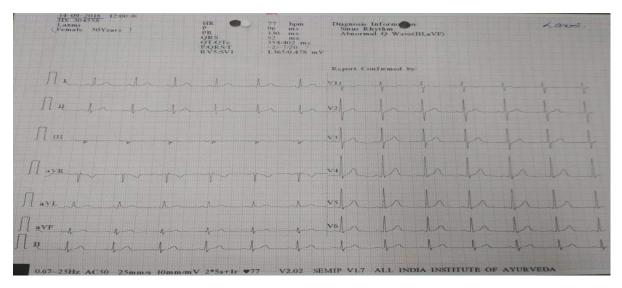
8-9-18



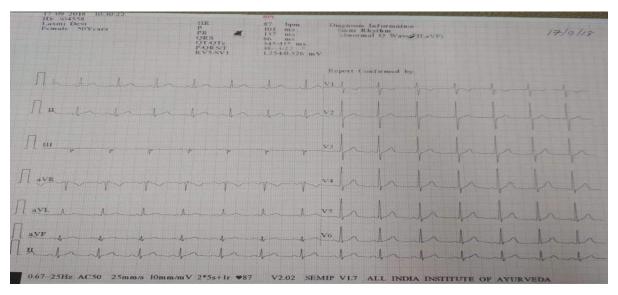
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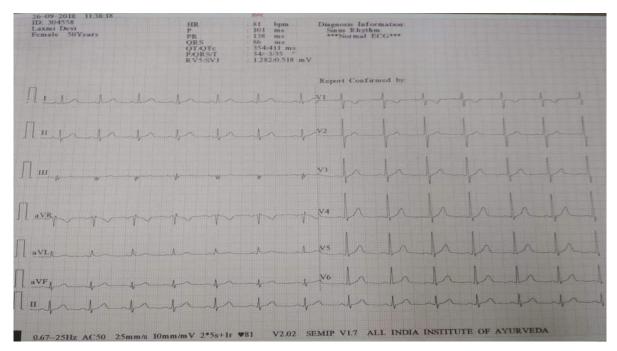
12-9-18



14-9-18



17-9-18



26-9-18

After treatment of 21 days the patient get relief approximately 80% in symptoms *vepathu(palpitation),veshtana(twisting like pain in chest),shoonyata(feeling of emptiness in left side of chest)*. During the follow up period of 7 months patient did not suffer from any severe cardiac symptoms. Patient was also advised for regular investigation for TSH as she was under treatment for hyperthyroidism.

DISCUSSION

The patient was of *madhyam bala* and *avara sattva* so *shodhana chikitsa* was not feasible that's why *shamana chikitsa* was done to the patient. Herbo mineral preparations are quite effective and fast acting if properly administered in required dosage and with suitable anupana. *Rasaushadshis* like *kharaliya* and *kupipakwa Rasayana* which are included in this intervention study are more quite effective in very minimal dosage because of their specific traditional preparation method, rejuvenating action and *Rasibhavana process* as described by *Rasaratna samuchhaya*, an ancient classical rasa text. Because of the lesser particle size, they possess more bioavailability and quickly gets into systematic circulation.

Nagarjunabhra Ras having main content abhrak bhasma impregnated with arjuna swarasa shows the cardioprotective action. Siddhamakar dhwaja rasa has Rasayana guna (rejuvenating properties) so used as Rasayana. In this case of vaatika hridaroga, Sahacharaadi Kashaya was given because of having predominantly vaata shaamak

properties. *Dashamoola haritaki avaleha* was given for combating breathing difficulty and as *Anulomana* of *vaata*. After discharge and during follow up the patient was kept on limited medicines.

CONCLUSION

In this case patient got significant relief in symptoms of vaatika hridroga (atrial fibrillation) by using described medications but in charaka samhita, Aacharya charaka told that the *vyadhi* (diseases) progressed in *Marma Pradesh* are *yaapya*^[8] in nature (can not be cured but controlled by medications). Here an attempt was made to treat the patient of *vaatika hridroga*, the results was challenging after oral administration of cardioprotective drugs. On observing the results we can interpret that Ayurvedic drugs has the potency to protect the heart from diseases without any complications.

REFERENCES

- Sushruta, Dalhana, Sushrut Samhita, uttara Tantra, Hridrog pratishedh Adhyaya, 43/4, edited by P. G. Aathavale, 2 edition, Godavari publishers and book promoters, Nagpur, 2008; 543.
- 2. Agnivesha, Charaka, Dridhabala, Charaka samhita, Chikitsa sthana, Trimarmiya chikista Adhyaya, 26/77-104, edited by Acharya Vidyadhar shukla 2 edition, Chaukhamba Sanskrit Sansthan, Varanasi, 259.
- 3. Agnivesha, Charaka, Dridhabala, Charaka samhita, sutrasthna, kiyantshirsiya Adhyaya, 17/30-40, edited by Acharya Vidyadhar shukla 1 edition, Chaukhamba Sanskrit Sansthan, Varanasi, 259.
- 4. Bharat bhaisajya ratnakar, bhaishajya ratnavali hridrogadhikara, 33/40-41.
- 5. Gopalakrishna Bhatta, Ramtej pandey, Rasendra saar sangraha, hridroga chikitsa, shloka, 4-6, 320, rev. Edition 2011, Chaukhamba Sanskrit Sansthan, Varanasi.
- 6. Govinda das Sen, Bhaishajya ratnavali, Hridroga chikitsa prakarana, Shloka no-39 & 40, 489.
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6153918/ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4078501/
- 8. Agnivesha, Charaka, Dridhabala, Charaka samhita, sutrasthna, kiyantshirsiya Adhyaya, 10/18, edited by Acharya Vidyadhar shukla 1 edition, Chaukhamba Sanskrit Sansthan, Varanasi.