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AYURVEDIC MANAGEMENT OF ULCERATIVE COLITIS: A CASE STUDY

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ABSTRACT

Ulcerative colitis is an idiopathic inflammatory bowel disease causing inflammation and ulcers in the rectum and colon. Ulcerative colitis affects approximately 5,00,000 individuals in US with an incidence of 8-12 per 1,00,000 population per year. It is manifested as ano-rectal bleeding with increased frequency of bowel evacuation, general debility. In the contemporary science treatment is Corticosteroids, 5-Aminosalicylates, Anti-TNF therapy which results in other complications and the disease may even relapse after a period of time. In UC there is an abnormal activation followed by lack of suppression of immune response to luminal contents, leading to chronic inflammation. In *Ayurveda*, *Ama* considered as toxin, resulting from improper digestion of food is considered as the root cause of all the diseases. Bad habits of eating along with other factors leads to Impaired digestive fire i.e. *Agni* leading to formation of *Ama*. This *Ama* being toxin, activates immune reaction initiating pathogenesis of Ulcerative colitis. Getting rid of *Ama* by treating and preventing its further formation breaks the pathogenesis of the ulcerative colitis and further progression of inflammatory process.

KEYWORDS: Ulcerative colitis, Inflamatory Bowel Disease, *Ama*, *Agni*, *Ama pachana*,

Nidan parivarjan.

INTRODUCTION

Inflammatory bowel disease (IBD) is an immune-mediated chronic intestinal condition. Ulcerative colitis (UC) and Crohn's disease (CD) are the two major types of IBD.[1] UC is a mucosal disease that usually involves the rectum and extends proximally to involve all or part of the colon. About 40-50% of patients have disease limited to the rectum and recto sigmoid, 30-40% have disease extending beyond the sigmoid but not involving the whole colon, and 20% have a pan colitis.[2]

Prevalence of IBD known to be high in western countries but now there is rising incidence and prevalence of disease in India topping the Southeast Asian (SEA) countries.[3] and India is projected to have one of the highest disease burden across the globe.[4] The major symptoms of UC are diarrhoea, rectal bleeding, tenesmus, passage of mucus and crampy abdominal pain.[5]

According to Ayurveda, vitiated Pitta and Rakta are responsible for inflammation and ulceration.[6] The symptoms of ulcerative colitis can be co-related with Rakta tisara[7], Raktajpravahika[8] as the frequent stool and blood in stool are the main culprits deteriorating the patient's general health.

CASE REPORT

Patient information: A 47-year-old hindu, male, married came with complaints of bleeding per rectum associated with mucus, abdominal pain while taking meal and generalized weakness since 2020. There was no positive family history. Patient had frequent habit of eating spicy, oily and outside junk food.

According to patient he owns and operates his own hotel.

SYSTEMIC EXAMINATION

Pain and tenderness were noticed in the lower abdomen during a gastrointestinal examination. There were no signs of aberrant respiratory, cardiovascular, or nervous system function.

ASHTAVIDH PARISKHA

Nadi - 70 / min, Pittadhik Vata Mutra - Samyak, 6-7 time /day

Mala - with blood (less stool no blood) and Mucus 4-5 times/day Jihva - Sama

Sabdha - Parakrut Saprsha - Prakrut Drik - Singhdha Akruti –Madhyam

PERSONAL HISTORY

Diet: mixed (veg) Addiction: No any found Job: own hotel

Past history: not ant major illness Family history: not any

Surgical history: not any GENERAL EXAMINATION

1. Pallor-mild,
2. Blood pressure observed normal.
3. Pulse –regular and thready in nature. SYSTEMIC EXAMINATION
4. CVS–No abnormality detected in cardiovascular system,
5. RS-No abnormality
6. P/A- Soft, mild tenderness over abdomen
7. CNS- Higher mental function were intact.

In Ayurveda, the ancient system of India medicine, is mainly based on the concept of Dosha and Dushya. Due to sedentary life style, faulty food habit, stressful working nature, [9]Pitta dosha aggravated diet intake finally led to suppression of Agni (Digestive fire) which are mentioned as root cause of Pittatisara which in chronic stage manifest as Raktatisara.

Diets high in animal protein, sugars, sweets, oils, fish and shellfish, and dietary fat, especially w-6 fatty acids, and low in w-3 fatty acids have been implicated in increasing the risk of IBD. This factors mentioned are nothing but contributers to *Agni dushti* and *Ama* formation.

Agni dusthi i.e. Impaired digestive fire results in improper digestion of food leading to production of *Apakva aahar-ras*(incompletely/improper digested food) which is known as *Ama*. This *Apakva aahar rasa* or *Aama* is not readily absorbed from intestine and leads to *Shuktatva*(putrid) which acts like *Visha* (poison). This *Ama* when mixed with with bodily eliments like *Dosha, Dushya* and *Mala* leads to *Saamdosha, Saamadushya, Saamamala*, which leads to disturbed bodily elements responsible for many diseases.[10] *Ama* therefore is cause of all diseases.

Management

Taking this in consideration management of UC should focus primarily on treating *Ama* that will break the pathogenesis of UC.

1. *Nidan parivarjan* i.e. avoidance of causative factors that leads to *Ama* formation

e.g. Avoiding heavy meals(quantitatively and qualitatively), overeating, too much liquid diet etc.

2. *Agni deepan* i.e. provocating digestive fire for proper digestion of food materials.
3. *Ama pachana* i.e. getting rid of already formed *Ama* by using herbs like *Pippali*, Dried *ginger*, *Vidanga.*

4. Treatment given

1 Panchamrit Parpati 300 mg bid with honey. 2. Takrarishtha 30 with 20 ml of water bid.

2. Bilwadi Ghanvati 2 bd with water

4. Mouktik Kamdudha Tab 1 tab BD 5.Shatavari Ghanvati Tab 2 bd

7. Shirodhara Kshir Dhara (yashtimadhu and Shatavari Sidha Dhara

DISCUSSION

As per presentation of disease is progressive disorder of unknown etiology on the basis of sign and symptoms that diagnosed as Ulcerative colitis correlated with Raktatisara. The disease Ulcerative colitis is not curable as we know well, but we can improve the life span and quality of life of the patient. Here some of the preparation selected on the basis of involvement of Doshas, Dushya of the disease. All the treatment of Ayurevda formulations mainly Rakta Pitta Shamaka, Deepana & Grahi are in nature.

Taking this in consideration inhibiting formation of *Ama* and clearing already formed *Ama* by *Nidan parivarjana* and *Ama pachana* will break the pathogenesis of UC followed by stoppage of inflammatory cascade.

Panchamrut Parpati: Acts on digestive system especially 'Grahani'as Doshaghna, Jantughna andBalyaand calms the irritation andinflammation of intestinal mucosa by reducing laxity.

Takrarishta: Is an Ayurvedic milk fermented medicinal product used to maintain normal gut flora against inflammatory bowel disease.

Bilvadi Ghanvati: Specially indicate in Atisara & having Deepana, Pachana, Grahiproperties. Bilvais a main ingredientshaving anti-diarrheal, antioxidant, antibacterial, antiviral, gastroprotective, anti-ulcerative colitis,wound healing properties.

Mauktik Kamdudha Vati: traditionally considered Pitta-shamaka and Daha-shamaka; may

be used when symptoms such as burning, Pitta aggravation, or Raktatisara features are present.

Shatavari Ghanvati: Shatavari is traditionally considered Brimhana, Pitta-shamaka and Rasayana and may be used as supportive therapy for intestinal nourishment and recovery.
Shirodhara (kshir dhara): Relieves stress and calms mind.

CONCLUSION

This case report presents a potential of Ayurveda treatment in the management of ulcerative colitis. So, from above discussion it can be concluded that, Ayurvedic management is very successful in the management of Ulcerative Colitis. Ayurvedic management with oral herbs and Basti along with dietary modifications is very beneficial. It is safe, cost effective and having no adverse effects. This disease is a challenging medical problem. Continuous degradation of health disturbs the daily routine life and mental wellbeing of the patient. The patient is suffering from ulcerative colitis since last 5 years.

Long follow-up and a greater number of patients are required to reach any conclusion but, in this case, it can be stated that this treatment is a hope for the patients with ulcerative colitis resistance to conventional medicine.

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