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Case Study

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AYURVEDIC MANAGEMENT OF GRAHANI ROGA – A SINGLE CASE **STUDY**

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ABSTRACT

Irritable Bowel Syndrome is the most prevalent gastrointestinal disorder found in general population. It is characterised by recurrent abdominal discomfort in association with alternate episodes of diarrhoea and constipation. About 10-15% of the population are affected at same time but only 10% seek for medical help.[1] Psychological factors like stress, anxiety etc, plays an important role in the manifestation of IBS. In Ayurvedic texts, the symptoms of grahani resembles with symptoms of IBS which appears as Muhurbaddha Muhurdrava *malpravritti* (episode of constipated and stools), Apakwa Malapravritti (Stool with mucus), (abdominal pain), Aruchi (Anorexia), ashuddha udgar (belching). [2] Improper food habits, sedentary lifestyle and stressful routine has contributed in the cases of IBS especially in young individuals. Modern medicine provides a temporary relief but frequent relapses

have generated a need to find alternatives in Ayurveda and other branches. A 44-year-old male patient known case of irritable bowel syndrome was successfully treated with Putikbilvadi Kashay.

KEYWORDS: Irritable Bowel Syndrome, *Grahani*, *Putikbilvadi Kashay*.

INTRODUCTION

Irritable Bowel Syndrome is a chronic, relapsing and functional bowel disorder characterized by abdominal pain or discomfort and altered bowel habits in the absence of detectable structural abnormality.^[3]

The pathogenesis of IBS is not fully understood, although roles of abnormal gut motor and sensory activity, central neural dysfunction, psychological disturbances, stress and luminal factors have been proposed.

IBS is the most common cause of gastro intestinal referral and accounts for frequent absenteeism from work and impaired quality of life. Young women are affected 2-3 times more often than men (it begins before the age of 35 in 50% of people).

It presents as one of the three predominant subtypes^[4]

- (1) IBS with constipation (IBS-C)
- (2) IBS with diarrhoea (IBS-D)
- (3) mixed IBS (IBS-M).

Rome III criteria is widely used for diagnosis of irritable bowel syndrome.

According to Ayurveda, the Grahani is the main seat of agni. [5] Primary function of grahani is Annagrahana (holding the food), Pachana (digestion), Shoshana (absorbing essential nutrients) and Munchana (releasing fully digested food for further processing). Grahani is the sthan of pachak pitta which has vital role in retention and further assimilation of food.

In Charak Samhita, Grahani doshaadhyay, various abnormalities of metabolism are explained starting from ajirna to Grahani roga. Thus, the dysfunction of metabolism is broadly covered under the title of Grahani dosha in Ayurveda. The pittadharakala is related to grahani. Pittadharakala stands for the digestive & absorptive processes when the food travels down from the stomach to the colon. The deformity in the pittadharakala situated in grahani is responsible for the grahani roga.

Due to dushit jathragni, the digestion of food does not occur properly. Undigested food forms a vitiated material called "Ama" which is responsible for producing various disorders. It disturbs the normal flora of GI tract resulting in failed nutrition of the patient.

Dushti lakshan of rasavaha strotas includes chitanamatichintan^[6] – which indicates stress and anxiety leads to poor appetite, resulting in vishamagni and gradually over a period of time the symptoms of *Grahani roga* are seen. Thus *samprapti* (pathogenesis) of grahani revolves around Annavaha, Purishava, Rasavaha and Manovaha Srotodushti.

According to Vagbhat Samhita, the main reason for Grahani roga is Agnisaad so the drug chosen mainly focuses on agnivardhan, aam pachan and agni deepan. [7]

Modern therapeutic molecules may provide instant relief in patients of IBS, but tend to develop a number of adverse drug reaction and no permanent cure is visible. The goal of the study is to find out complimentary treatment to help IBS patient is need of an hour.

MATERIALS AND METHODS

CASE PRESENTATION

A 44-year-old male patient presented in the outpatient department (OPD) of Kayachikita, Y M T Ayurvedic Medical College, Kharghar, Navi Mumbai, India (OPD Registration No.109180), with complaints of Abdominal pain especially in epigastric region on & off for 5-6 months. Sometimes watery, sometimes hard stool and stool with mucus in the last 6 months. Belching & Bloating for 2 months (on & off). Generalised Weakness for 2 months, history of weight loss, unsatisfied bowel habits present.

Endoscopy was done twice within the duration of 4 yrs in which no abnormalities were detected.

Clinical Findings

The general condition of the patient was good and was vitally stable. He had frequent loose motions associated with mucus with tenesmus which affected sleep patterns.

Ashtavidh Parikshan

- Nadi-Vat pitta Shabda- Spashta
- Mal- Visragandhi, picchila Sparsha-Twak rukshata
- Mutra- Normal Druka- Normal
- Jivha- Coated/Saam Aakruti- Krush
- Prakriti- Vat-Pitta predominant
- Agni -Manda

Koshta- Mrudu.

Case conception and selection of Ayurvedic management

The patient was aware of his illness as informed. But was not satisfied with the modern treatment due to frequent relapses, also he had faith in ayurveda so turned up for Ayurvedic management.

DIAGNOSTIC CRITERIA

ROME III CRITERIA^[8]

Recurrent Abdominal Pain or discomfort on at least 3 days /month in the last 3 months, associated with 2 or more of the following.

- 1. Improvement with defecation.
- 2. Onset associated with change in Frequency of Stool.
- 3. Onset associated with change in Appearance of Stool.

ASSESSMENT CRITERIA

IBS SEVERITY SCORING SYSTEM^[9]

Results will be assessed by using IBS severity scoring system (IBS - SSS) before (DAY - 0) and after treatment (DAY - 30) IBS - SSS is a five-item questionnaire measuring different symptoms scoring from 0 to 500.

The following widely used we cut off IBS-SSS score to evaluate the severity of IBS.

Abdominal Pain Severity - 0 to 100

Abdominal Pain Frequency - 0 to 100

Abdominal Distension severity - 0 to 100

Bowel Habit Dissatisfaction - 0 to 100

Interference with Quality of Life - 0 to 100

MILD - 75 TO 174

MODERATE - 175 TO 299

SEVERE - 300 OR MORE.

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TREATMENT

Contents of PUTIK BILVADI KASHAY $^{[10]}$

The botanical identity form and its relative proportion of ingredients in formulation are as follows

SR NO.	DRUG USED	BOTANICAL NAME	PART USED	QUANTITY
1.	Putik	Caesalpinia bonducella linn (API Standards)	Twak (Bark)	Equal
2.	Bilva	Aegle marmelosa cort. (API Standards)	Phal (Fruit)	Equal
3.	Chavya	Piper retrofractum vahl (API Standards)	Mool (Root)	Equal
4.	Agnik	Plumbago zeylanica linn (API Standards)	Mool (Root)	Equal
5.	Kanamool	Piper Longum Linn (API Standards)	Mool (Root)	Equal
6.	Punarnava	Boehhavia diffusa Linn. (API Standards)	Mool (Root)	Equal
7.	Pathya	Terminalia chebula Retz. (API Standards)	Phal (Fruit)	Equal
8.	Shunthi	Zinziber officinale Gaertn. (API Standards)	Kand (Rhizome)	Equal

Properties of Putikbilvadi Kashay^[11]

DRUG CONTENT	RASA	VIRYA	VIPAK	GUNA	ACTION
1. Putik	Katu, Tikta	Ushna (Hot)	Katu	Laghu, Ruksha	Anti- inflammatory, Analgesic
2. Bilva	Madhur, Katu	Ushna (Hot)	Madhur	Guru, Snigdha	Antimicrobial, Digestive
3. Chavya	Katu	Ushna (Hot)	Katu	Laghu,Ruks ha	Digestive stimulant, Carminative
4. Agnik	Katu	Ushna (Hot)	Katu	Laghu, Ruksha	Anti- inflammatory, Pain relief
5. Kanamool	Katu	Ushna (Hot)	Katu	Laghu, Ruksha	Enhances digestion, Anti- mucosal
6. Punarnava	Tikta, Katu	Ushna (Hot)	Katu	Laghu, Snigdha	Diuretic, Anti- inflammatory
7. Pathya	Katu, Tikta	Ushna (Hot)	Katu	Laghu, Ruksha	Aids digestion, Rejuvenating
8. Shunthi	Katu, Tikta	Ushna (Hot)	Katu	Laghu, Ruksha	Digestive aid, Anti-nausea

Method of Preparation^[12]

1. As per the reference of *Sharangadhar Samhita* (*Madhyam Khanda* 2/1 and 8/1) to above mentioned contents, 16 parts of water will be added and it will be heated to reduce it to 1/8th part.

2. Mixture will be filtered and decoction will be obtained.

Treatment details

Dose – 96 ml

Frequency- Once a day

Time -Early morning (empty stomach)^[13]

Mode of Administration- Orally

Duration-1 month.

DISCUSSION

Acharya Vagbhat included grahani roga in Ashtamahagadas which means it is difficult to diagnose and difficult to get cure. Acharya Charak and Vagbhat included Arsha, Atisar and Grahani are primarily caused due to agnimandya and thus can be prevented by maintaining the bala of agni.

The fundamental idea to keep in mind while treating a patient of *grahani* is their *Ama* (indigested) or *Pakva* (digested) state. *Grahi* (anti-diarrheal), *Stambhana* (checks bleeding), *Agni Deepana* (enhances digestive fire), *Ama Pachana* (digestion of indigested particles), *Dhatu* Poshaka (nutrition supplement at the tissue level), and *Sattvavajaya chikitsa* (psychotherapy) should be considered based on the severity of the disease.

- ➤ Putik with its ushna veerya and katu vipak has anti diarrhoel, anti-inflammatory and anti-microbial actions which help in reducing the frequency of stool, nausea etc.
- ➤ Bilva possess kashay and tikta rasa and laghu, ruksha, grahi properties. Its fruit contains carotenoids, flavonoids, alkaloids, terpenoids, and coumarins. It helps to correct frequent loose stools which lead to poor absorption and ultimately reduces nutrition of the patients.
- Chavya has piperine as active compound which possess digestive enhancer, anti-diarrheal, anti- inflammatory properties. Chavya has katu vipak and ushna veerya which make it an ideal drug for aam pachan and agni deepan.
- Chitrak has laghu, ruksha, tikshna guna and is vat kaphahar so relieves aruchi, ajeerna and agnimandya by enhancing the digestive fire.

- ➤ Kanamool is rich in piperine, an alkaloid and some essential oils which are caryophyllene, pinene, and phellandrene, contributing to its antispasmodic effects thus reducing abdominal pain severity and frequency. It is used to cure stomachache, constipation, dysentery, diarrhea, pacify thirst, stimulate the spleen and also act as a mild laxative. Acharya Charak, Sushrut and Vagbhat indicated use of pippalimool in grahani dosha.
- ➤ Punarnava with madhur, tikta ras and katu vipak work as anti-oxidative, anti-inflammatory and diuretic. It can support digestion by stimulating appetite and reducing indigestion.
- ➤ Pathya has all ras except lavana and is Madhur vipaki which makes it tridoshhar. It helps cleanse the digestive tract and promotes bowel regularity. It helps to alleviate issues like constipation, indigestion, and bloating. With its rasayan properties, it enhances agni and improves absorption. So corrects weight loss.
- > Shunthi is an excellent appetizer. It works as agni deepan, aam pachana and have anit emetic and carnitive effect. Regulates symptoms like aruchi, ashuddha udgar, bloating etc.

Putikbilvadi kashay with its above mentioned properties improved over all sypmtoms of patient. Aam pachan has led to the breakdown of samprapti and further enhanced the bala of agni, ultimately ruling out the primary cause.

RESULTS

After successful treatment of 1 months, patient shown significant results. IBS severity score after treatment went down from 286 to 71, thus proves the overall reduction in severity of disease. On the basis of this case study, it can be concluded that *Putikbilvadi kashay* with instructed diet regime is effective in management of IBS. There was no relapse in the symptoms seen. Overall, the patient's body weight increased significantly as a result of improvements in agni, bala, and varna. Thus, Ayurvedic management of IBS can be considered effective and economically feasible in comparison with modern medicine.

REFERENCES

1. World Journal of Ayurveda Science, Harmohan Maharansa et al. Therapeutic efficacy and mechanism of action of Ayurvedic Shirodhara. WJS Jan., 2017; 2(1).

- 2. Acharya Vidyadhar Shukla edited by Vidya Vijay Kale, Charak Samhita, Varanasi, Chaukhamba Sanskrit Prakashan, 2014. (१५/५३-५४)
- 3. Modern ibs.
- 4. Modern api.
- 5. Sushrut Samhita with the Nibandhasangraha commentary of Sri Dalhanacharya, Vaidya Jadyji Trikamji Acharya, Chaukhamba Publication Varanasi, 2010. Sushrut Uttartantra 40/169.
- 6. Charak viman 5.
- 7. Kaviraj Atridev Gupt, Chaukhamba prakashan Arshchikitsa 8/164, 480.
- 8. https://theromefoundation.org/rome-iv/rome-iv-criteria
- 9. C Y Francis, J Morris, P J Whorwellhttps://pubmed.ncbi.nlm.nih.gov/9146781/
- 10. Dr. Sharma Ramnivas, Sahastrayoga, kashay prakaran, Chaukhamba Sanskrit Prakashan, 2014; 64.
- 11. Dravyaguna.
- 12. Tripathi Bramhananda, Sharangdhar Samhita, Varanasi, Chaukhambha Surbharti Prakashan, Madhyam khanda, 2017; 90.
- 13. Tripathi Bramhananda, Sharangdhar Samhita, Varanasi, Chaukhambha Surbharti Prakashan, Madhyamkhanda, 2017; 90.