

AYURVEDIC MANAGEMENT OF KAMALA WITH SHAMAN CHIKITSA - A CASE STUDY

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ABSTRACT

Background: *Kamala* is a *Pitta*-dominant disorder described in Ayurvedic literature, characterized by yellowish discoloration of the skin, sclera, urine, and stool due to vitiation of *Ranjaka Pitta* and *Rakta Dhatu Dushti*. It is explained either as a complication of *Panduroga* or as an independent disease caused by *Pitta prakopa*. These features closely resemble jaundice in modern medicine, which occurs due to elevated serum bilirubin levels secondary to hepatobiliary dysfunction. Ayurveda focuses on correcting doshic imbalance, improving *Agni*, and restoring liver function.

Case Description and Intervention: A patient presented with complaining of icterus, dark-yellow urine, loss of appetite, nausea, abdominal discomfort, and weakness for ten days. Based on Ayurvedic evaluation, the condition was diagnosed as *Kamala*. The patient was treated with a combination of classical Ayurvedic

formulations possessing *Pittashamana*, *Deepana-Pachana*, *Yakrit-uttejaka*, and *Rakta-prasadana* properties. **Outcome:** The intervention resulted in marked clinical improvement with resolution of symptoms and a significant reduction in serum bilirubin levels, along with

normalization of other blood parameters, demonstrating the effectiveness of Ayurvedic management in *Kamala*.

KEYWORDS: *kamala*, Jaundice, Bilirubin, *Pitta Vyadhi*, Liver Function Tests.

INTRODUCTION

Ayurveda is ancient medical science. In our ancient samhita, *kamala vyadhi* is briefly described. *Kamala* is *pittaj nantmaj* as well as *raktapradoshaja vyadhi*.^[1] In *Kamala* disease there is loss of desire to do anything. *Kama* means different type of desires of the body and mind. Desires especially regarding the diet and physical activity of the body are minimised in *Kamala*.^[2] Charakacharya has considered *kamala* as advanced stage of *panduroga*.^[3] Shushrutacharya has considered *kamala* as a separate disease and also may be due to further complication of *panduroga*.^[4] whereas Vagbhatacharya described *kamala* as a separate disease.^[5] In contemporary medical terminology, *Kamala* is considered comparable to jaundice. Ayurveda is traditionally skilful in treating liver diseases since centuries. Though jaundice as a distinct hepatic disorder is not explicitly described in classical Ayurvedic texts, the condition can be correlated on the basis of comparable clinical features such as yellowish discoloration of the skin (*Twak-pitata*), eyes/sclera (*Netra*), urine (*Mutra*), and stool (*Purisha*). In Ayurveda, *Kamala* is described as a disorder caused by aggravation of *Pitta dosha*. It can be *Swatantra* (primary) or *Paratantra* (secondary)—commonly secondary to *Pandu* (anemia). When excessive *Ranjaka Pitta* causes *Rakta dhatu dushti*, the symptoms of *Kamala* manifest.^[6]

Need for study: Kamala (jaundice) is a commonly encountered hepatobiliary disorder. In modern medicine, its management is mainly supportive and depends on the underlying cause, with limited options for direct improvement of liver function. Ayurveda describes *Kamala* as a *Pitta-pradhana* and *Raktapradoshaja Vyadhi* and provides specific treatment principles aimed at correcting doshic imbalance and enhancing hepatic function. However, clinical documentation supporting the efficacy of Ayurvedic interventions in *Kamala* is limited. Therefore, the present case study was undertaken to evaluate the role of Ayurvedic management in *Kamala* with reference to clinical improvement and reduction in serum bilirubin levels.

CASE REPORT

A 48-year-old male patient presented to the OPD of the Kayachikitsa department with complaints of *Udarshoola* (abdominal pain), *Pitavarni* discoloration of nails, eyes, skin, and urine, and *Daurbalya* (generalized weakness) for the past seven days, along with *Drava malapravrutti* (loose stools), *Hrullasa* (nausea), and *Kshudha mandya* (loss of appetite) for the past three days.

History of present illness: Patient was all right before 7 days. Then he developed *Udarshool*, *Pitavarni* Nakh Netra twak *Mutra*, *Daurbalya*, *Drav Malapravrutti*, *Hrullas*, *Kshudha mandya* since 7 days. Therefore, he reported to the Kayachikitsa O.P.D. for further evaluation and treatment.

No/H/O – HTN/ T.B./ Thyroid/IHD/CVA/BA.

K/C/O – DM on regular medicine Tab.Metpri G1 twice a day before meal

Past History: No history of any previous surgical or medical illness.

Allergy: No any drug/food allergy.

Family History: Not specific.

Addiction : Chronic Alcoholic

Rugna Parikshan

Pulse – 88/min

BP – 110/60 mm of Hg

R.R. – 18/min

Wt. – 56.30 kg

Systemic Examination

RS – B/L Clear

CVS – S1 S2 Normal

CNS – Conscious and Oriented

P/A – Soft / Slight tender

EXAMINATION

1. *Darshana* (Inspection) - Yellow discoloration of skin, eyes, urine, nails.

2. *Sparshana* (Palpation) - Slight Tenderness in upper abdominal region.

3. *Prashna* (Interrogation) History of food habits, alcohol intake, fatigue, Presence of symptoms like nausea, Duration and progress of yellow discoloration.

Ashtavidha Pariksha

Nadi- 88/min

Mala – Asamyaka(Dravmala)

Mutra - Pitvarni

Jivha – Saam

Shabda – Spashta

Sparsha – samashitoshna

Druka – pitabh

Akruti – Madhyam

Samprapti Ghataka

Hetu - Ati madyapaana

Dosha-Pitta

Roga marga: Abhyantara

Dushya- Rakta, Mamsa

Koshta – Mrudu

Agni - Mand

Udbhavsthana: Mahastrotas

Vyaktasthana: Twacha, Nakh, Netra, Mutra, Purish.

Strotas -Rasavaha, Raktavaha, Mutravaha, Purishvaha.

Srotodushti prakara: Vimarg gamana, Atipravrutti, Sanga.

Sadhyा Sadhyata: Sadhyा.

INVESTIGATIONS

CBC- Hb-12.0 gm%

Differential leukocyte count -14400/cumm

Platelet -1,46,000/cumm

BSL Fasting – 145 Post Prandial – 220

HbA1C – 7.86 %.

Liver Function Test

Total serum billirubin- 16.92mg/dl

serum bilirubin Direct -09.51 mg/dl
 serum bilirubin Indirect -07.41mg/dl
 SGOT-104 U/L
 SGPT- 71 U/L
 Alkaline Phophatase – 131 U/L
 Total Protein – 5.42 gm/dl
 Serum Albumin – 2.88 gm/dl.

Urine Complete

colour –Dark Yellow
 puscells 2-3/HPF,
 epithelial cells 2-3/HPF
 Bile Salts –Present
 Bile Pigments – Absent.

USG (abdomen) – Mild hepatomegaly with grade I liver parenchymal disease.

Cholelithiasis however no signs of cholecystitis.

Mild splenomegaly however no varices at splenic hilum.

MATERIAL AND METHOD

Method - A Single Case Study

Material - Ayurved literature samhitas and Journals.

Treatment

Aushadhi	Matra	Kaal	Anupana
Triphala guggul Punarnava guggul	500 mg each	Vyanodane	Koshnajala
Arogyavardhini vati Sutshekhar rasa Kamdunder vati Punarnava mandur	250 mg each	Vyanodane	Koshnajala
Avipattikar churna Amalaki churna Shatavari churna Haritaki churna Kutaki churna	1 gm each	Vyanodane	Koshnajala
Kamalahar Kashaya	30 ml	Vyanodane	Koshnajala
Panchsakar churna	3gm	Nishakale	Koshnajala

Assessment Criteria

Symptoms	Absent	Mild	Moderate	Severe
Peetata	0	1	2	3
Agnimandya	0	1	2	3
Daurbalya	0	1	2	3
Kshudha	0	1	2	3

RESULT

Symptoms	Before treatment	After treatment
Peetata	Grade 2	Grade 0
Agnimandya	Grade 3	Grade 1
Daurbalya	Grade 3	Grade 1
Kshudhamandya	Grade 3	Grade 0

Investigations	Before treatment	After treatment			
	Day 0	Day 11	Day 19	Day 25	Day 30
Bilirubin total (mg/dl)	16.92	12.3	5.72	5.30	0.47
Bilirubin direct (mg/dl)	9.51	8.98	4.77	3.67	0.30
Bilirubin indirect (mg/dl)	7.41	3.32	0.95	1.63	0.17
SGOT (IU/L)	104	114	96	29	23
SGPT (IU/L)	71	48	41	28	22

DISCUSSION

Triphala Guggulu: Triphala Guggulu enhances digestive fire and metabolism, purifies the blood, promotes gentle bowel evacuation, alleviates inflammation, and facilitates scraping of excess pathological tissues.^[7]

Punarnava Guggulu – Punarnava Guggulu is commonly used in Ayurvedic management of Kamala Vyadhi (jaundice). Its mode of action is Hepatoprotective, Shothahara (anti-inflammatory), Mutrala (diuretic), Deepana- Pachana, Yakrit-Uttejaka.^[8]

Arogyavardhini Vati – Hepatoprotective, Pittashamak, Deepana-Pachana, Bile secretion regulator, Shodhana, Krimighna. Thus, it helps in detoxifying the liver, correcting Pitta vitiation, and restoring liver function in Kamala.^[9]

Sutshekhar Rasa – Act Pittashamak, Deepana–Pachana, Yakritottejaka, Chhardi-nashak, Shoolahara.^[10]

Kamdudha Rasa – Pittashamak, Sheetala & Raktaprasadaka, Hridaya & Yakrit Ashraya Dosha Shamana, Amlapitta-nashak, Antioxidant.^[11]

Punarnava Mandura –Yakritottejaka (Hepatostimulant), Raktavardhaka, Pittashamak, Mutrala (Diuretic), Shothahara, Deepana–Pachana.^[12]

Avipattikara + Amalaki + Shatavari + Haritaki + Kutaki

Avipattikara acts by pacifying aggravated Pitta while producing a mild purgative effect; Amalaki functions as a rejuvenative agent with liver-protective activity; Shatavari helps in calming Pitta and promoting Rasayana benefits; Haritaki facilitates digestion of Ama and regulates the normal movement of Vata; whereas Kutaki stimulates hepatic function and aids in detoxification and purification.

Summary: This combination pacifies Pitta, supports liver detoxification, enhances digestion and bile flow, and promotes hepatocyte regeneration, making it highly effective in managing Kamala Vyadhi.

Kamalahara Kashaya works by pacifying aggravated Pitta, enhancing Agni, clearing Srotas (especially Rasavaha & Raktavaha), protecting and regenerating the liver, promoting bile flow, and detoxifying Rakta – thereby correcting the root pathology of Kamala Vyadhi.^[13]

Panchasakar Churna – Pittashamak, Deepana-Pachana, Virechana (Mild Laxative), Mutrala, Shothahara. Overall, Panchasakar Churna acts by correcting digestive disturbances, cleansing Pitta, and supporting liver detoxification, aiding in the management of Kamala Vyadhi.^[14]

CONCLUSION

From above discussion we can conclude that, there were marked reduction in sign and symptoms of Kamala vyadhi. Thus this ayurvedic treatment can be utilized in treating patients who are suffering from Kamala.

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