

## AYURVEDIC MANAGEMENT OF HEPATITIS B - A CASE STUDY

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## ABSTRACT

HBsAg, commonly known as the Australia antigen, is the surface antigen of the hepatitis B virus (HBV). It implies a current hepatitis B infection. Hepatitis B is a liver infection caused by the hepatitis B virus. It can be acute and self-resolving, or persistent, progressing to cirrhosis and liver cancer. Clinical symptoms such as yellow staining of urine, sclera, mucous membrane, and skin are similar to those of Kamala as described in Ayurveda. HBV is a significant global health issue. In 2015, around 887,000 persons worldwide died due to HBV-related liver disease. Most adults with HBV experience a short-term disease that may not cause permanent damage. However, 2 to 6% of those infected may acquire a chronic infection that can lead to liver cancer. Around 90% of newborns infected with the virus acquire a persistent illness. Although there is no cure for HBV, immunization can help prevent an initial infection. Antiviral medications can be used

to treat persistent infections. Kamala is treated with medications containing pitta shamaka rasas and deepana-pachana guna, which convert sama-pitta to nirama-pitta. It is quite significant in the samprapti vighatana of the Kamala sickness. The subclinical case discussed in this article was managed using the same guidelines as Kamala Chikitsa, and the outcomes were obtained. Ayurvedic treatment for Hepatitis B is far more effective and efficient.

**KEYWORDS:** Hepatitis B, Kamala, Sama-pitta, Antiviral drugs.

## INTRODUCTION

The Hepatitis B virus (HBV) is a virus that spreads via blood and other body fluids. Some people experience symptoms for only a short period of time, while others acquire chronic problems and potentially deadly complications. Many cases go unreported or undetected until the person develops symptoms of end-stage liver disease. HBV can live on environmental surfaces at ambient temperature for up to 7 days after leaving the body. HBV can infect and inflame the liver. A person can be infected and spread the virus without realizing it. Some people have no symptoms, some only have the first infection, and others are chronically infected because the virus continues to damage the liver over time without being discovered. Irreversible liver damage can occur. In 2014, the Centers for Disease Control and Prevention (CDC) recorded approximately 2,953 instances, however the real number of acute cases could be up to 19,200. Chronic HBV infection affects an estimated 240 million individuals worldwide, with around 786,000 people dying each year from HBV-related liver disease. Antiviral medications and vaccinations are the only therapeutic options. The World Health Organization (WHO) advises using an antiviral drug to treat the patient. Although it doesn't cure the virus, it can halt its replication and stop it from progressing to more severe liver damage. A person with a persistent HBV infection may suddenly and rapidly develop cirrhosis or liver cancer. A liver cancer diagnosis may be lethal within months. Individuals suffering from a persistent HBV infection need to get regular medical checkups and hepatic ultrasounds every six months to check for any signs of deteriorating health. Ayurveda provides individualized treatment plans that are specific to each and every situation. Samshodhan and samshaman therapy, among other Ayurvedic treatments for Kamala, break the pathophysiology of the illness and offer a full recovery.

## CASE REPORT

Accidentally diagnosed, a male patient, 25, was identified as having an acute HBsAg infection (9.64 IU/MI). On July 28, 2018, a patient visited our OPD. There were no reported complaints of yellowish urine staining, decreased appetite, widespread weakness, or upper abdominal pain in the right side. The patient had no symptoms.

## Clinical Examination

**Table 1: Dashvidha pariksha.**

Prakriti	Vata - Pitta
Dosha	Tridosha
Dushya	Rasa, Rakta, twak, Mamsa

Desha	Anup
Roga Adhishthan	Yakrit
Bala	Madhyama
Saaratah	Madhyama
Samhanan	Madhyam
Pramaantah	Sama
Satmyatah	Sarva rasa satmya (madhur, katu rasa)
Sattwatah	Madhyam
Aahaar shakti	Abhyavarharan- Avara Jaran- Avara
Vyayam shakti	Madhyam
Vayatah	Baala

**Table 2: Ashtavidha Pareeksha.**

Naadi	80/min, pitta-kaphaja
Mutra	Vaikrit varna
Mala	Vaikrit
Jihwa	Niraama
Shabda	Prakrit
Sparsa	Ushna
Drik	Prakruta
Aakriti	Krusha

**Table 3: General Physical Examination.**

Blood Pressure	110/70mmHg
Pulse Rate	82 beats/min
Respiratory Rate	16/min
Temperature	Afebrile
General condition	Moderate
Pallor	Absent
Icterus	Absent
Cyanosis	Absent

**Table 4: Samprapti Ghatak.**

Dosha	Tridosha
Dushya	Rasa, Rakta, Mamsa
Srotas	Anna, Rasa, Rakta, Mamsa, Mutra, Purisha
Srotodushti	Sanga
Aam	Sama
Agni	Mandagni
Udbhava sthana	Amashaya
Adhishthan	Yakrut

**Diagnosis:** Hepatitis B.

**Table 5: Timeline of Treatment.**

Sr. No.	Dates	Advised Protocol
1	26-07-2018	First investigation
2	28-07-2018 29-07-2018 30-07-2018	Snehapana (with Murchita Ghrita)
3	31-07-2018 01-08-2018 02-08-2018	Swedana (ushna jala snana)
4	03-08-2018	Virechana (with trivrut leha)
5	04-08-2018 05-08-2018 06-08-2018 07-08-2018 08-08-2018	Samsarjana krama (5 days)
6	09-08-2018 to 09-11-2018	Shamana aushadhi (3 months)
7	10-11-2018	Follow up

**Table 6: First investigation reports (as per dated 26/07/2018).**

Test Parameters	Biological values	Test Reference Interval
HBsAg Quantitative	9.64 IU/ML	<0.05
SGPT	396 IU/L	0-30 IU/L
SGOT	355 IU/L	0-25 IU/L

**Table 7: Follow up investigation reports (as per dated 15/01/2019).**

Test Parameters	Biological values	Test Reference Interval
HBsAg Quantitative	0.35 IU/ML	<0.05
SGPT	15 IU/L	0-30 IU/L
SGOT	12 IU/L	0-25 IU/L

**TREATMENT GIVEN****First Sitting**

Shodhananga snehapana with Murchita Ghrita for 3days (till the koshta snigdha).

Swedana in the form of ushnajala snana and pittavruddhikara rasa yukta yusha was given for three days.

Virechana given with 40 grams of Trivrut leha, ushnajala anupana.

Assessment of Shuddhi.

After samsarjana krama, following shamanaushadhis were given for 3 months.

1. Tab Nirocil 1TID. A/F
2. Arogyavardhini vati 1TID. A/F
3. Syrup Abhiliv 2tsf BD. B/F

## Second Sitting

These Shamana aushadhis were given for 2 months.

1. Tab Nirocil 1TID. A/F
2. Syrup Abhiliv 2tsf BD. B/F
3. Yakrutpleehari Rasa 1 BD. A/F

## RESULTS

Following the virechana karma, the patient reported an increase in appetite and generalized strength. During the shamanaushadhi kala, the patient did not report any symptoms of nausea, weakness, or abdominal pain.

## DISCUSSION

Treatment was approached using the concepts listed below, and therapy techniques and medicines were chosen accordingly.

- Dipana, Vikruta pitta Rechana.
- Sroto shodhana.
- Pitta hara / Tridosahara Pitta rechana.
- Rakta shodhana.
- Yakrit uttejaka.
- Hepatoprotective properties,
- Rasayana.

1. Virechana was chosen as the shodhana treatment for the yakrit vikara because it acts on the liver after digestion and removes the vikruta pitta and poisons (viral load) from the body.
2. Shamanaushadhis were assigned to do the remaining pitta and poisons rechana, as well as yakrit uttejana by activating hepatic cells and regulating liver function. Arogyawardhini Vati - This medicine is widely used for hepatic diseases. It is primarily composed of Katuki (50%), which possesses pittarechaka characteristic. It contains anti-inflammatory and antiviral effects.
3. Katuki (*Picrorhiza kurroa*) - This herb has been shown to be effective in treating jaundice, nausea, anorexia, dyspepsia, and periodic fever. "Picroliv" is a glycoside that is a significant component of *Picrorhiza kurroa*. The published literature and ongoing research demonstrate the efficacy and safety of picroliv in (1) acute viral hepatitis (2) therapy of

drug-induced liver damage, such as antituberculous medicines, and (3) long-term prophylactic usage in bronchial asthma.

4. Nirocil Tablet contains Bhumyamalaki, Erand, Guduchi, and Yashada Bhasma.
5. Abhiliv Syrup includes Bhumyamalaki, Kalamegha, Katuki, Triphala, Rohitaka, Punarnava, and Sharapunka.
6. Kalmegh (*Andrographis paniculata*) - Active ingredient: Andrographolide. It boosts hepatocyte viability, stimulates hepatic regeneration, and increases resistance to toxins; activates the reticuloendothelial system; and improves carcinogen detoxification by regulating antioxidant defense and microsomal drug metabolism.
7. Amrita (Guduchi) (*Tinospora cardifolia*): *Tinospora cordifolia* has been researched for its immunomodulatory, anti-allergic, hepatoprotective, and neuroprotective effects.
8. Triphala includes Haritaki, Vibhitaki, and Amlaki. It possesses antioxidant effects. It is hepatoprotective in nature, protecting the liver from free radical damage.

## CONCLUSION

Ayurveda provides a holistic approach to each ailment that is unique to each person. Shodhana, in addition to pittarechaka and yakrit uttejaka, antiviral medicines used in the treatment of Hepatitis B, Despite recent medical developments, including at the cellular and molecular levels, there are no liver-protective drugs that can be used to treat Hepatitis B. However, several effective remedies for the prevention and treatment of Hepatitis B have been discovered through Ayurvedic research. Thus, these medications can be used effectively to treat Hepatitis B.

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