

# WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 10, Issue 12, 1723-1729.

Case Report

ISSN 2277-7105

# EFFECT OF TRIPHALA RASAYANA IN SHONITA ABHISHYANDA WITH SPECIAL REFERENCE TO HYPERLIPIDEMIA- A SINGLE CASE REPORT

Swathi<sup>1</sup>\*, Aniruddha<sup>2</sup> and Shrilatha Kamath<sup>3</sup>

<sup>1</sup>3<sup>rd</sup> year PG Scholar, <sup>2</sup>Associate Professor, <sup>3</sup>Professor & HOD,
Department of PG studies in Kayachikitsa & Manasaroga, Sri Dharmasthala
Manjunatheshwara College of Ayurveda, Udupi, Karnataka, India.

Article Received on 06 August 2021,

Revised on 26 August 2021, Accepted on 16 Sept. 2021

DOI: 10.20959/wjpr202112-21806

# \*Corresponding Author Dr. Swathi

DI. Swaan

3<sup>rd</sup> year PG Scholar, Department of PG studies in

Kayachikitsa &

Manasaroga, Sri

Dharmasthala

Manjunatheshwara College

of Ayurveda, Udupi,

Karnataka, India.

#### **ABSTRACT**

Shonita abhishyanda is characterized by the presence of excessive Kapha and Medas in the Rasa-Rakta dhatu, similar to Hyperlipedemia, which is characterized by excess lipoproteins travelling in the blood streams. In due course of time, the same Shonita abhishyanda ends up in Stoulya or in all the sequels of Margavarana like Vatavyadhi, Shiromarmabhigata, Vatarakta, Hritshula, Mutraukasada and so on. Hence it is crucial that individual diagnosed with Shonita abhishyanda /Hyperlipidemia should undergo full clinical assessment with routine investigations and treatment. **Material and Methods:** This is a case of a male patient of aged 66 years known case of Hypertension and not a known case of Diabetes mellitus presented with the complaint of bilateral knee joint pain, fatigue and difficulty in swalking since 4 years. On routine investigation, it was revealed that the person was Hyperlipidemic. The patient was assessed objectively for lipid profile

essay before and after the intervention of Triphala Rasayana. **Results:** Results were interpreted on the basis of the lipid profile essay. The total cholesterol came down to 162mg/dl from initial value of 209mg/dl. The triglyceride level was 293mg/dl before the treatment, which reduced to 125mg/dl after the oral administration of Triphala rasayana. **Conclusion:** This case study was a genuine attempt to observe the effect of Triphala Rasayana as the dosage mentioned in our classics (2 karsha) as Vyadhihara Rasayana in reducing the levels of serum lipids in patient diagnosed with Shonita Abhishyanda/ Hyperlipidemia.

**KEYWORDS:** Shonita Abhishyanda, Hyperlipidemia, Triphala Rasayana, Lipid Profile.

#### INTRODUCTION

An abnormal state characterised by the presence of excessive Kapha and Medas in the Shonita dhatu is referred as Shonita abhishyanda. [1] Pleural clinical condition including Dhamani Pratichaya are attributed to this Santarpana nidana and Shonita abhishyanda. [2]

Hridroga, Vatarakta, Vatavyadhi, Unmada, Gulma, Mutraukasada are the few conditions to mention that are caused by Santarpana nidana and Shonita abhishyanda. [3,4,5,6,7] The description of Shonita abhishyanda matches with the clinical state of Hyperlipidemia. Where excess lipids binds with protein to form large molecules called as lipoprotein. When these travels in blood stream in excess called as Hyperlipidemia. [8] Plethora of clinical condition that include obesity, diabetes mellitus, atherosclerosis, hypertension, cardiovascular diseases, ischemic heart diseases, ischemic limb diseases, ischemic renal diseases etc. are said to be predisposed by Hyperlipidemia. [9] The management of Shonita abhishyanada includes Apatarpana, Virukshana and Chedana with regards to Shodana, Shamana and Rasayana measures. Oral medication with Triphala, Guggulu, Shilajatu is a matter of appreciation in this regard [10]. One such medication is Triphala Rasayana. It is a Rasayana, which is administered orally in large doses for short duration and found to be effective in controlling Shonita abhishyanda and also improves the quality of life by extending the life expectancy and age related geriatric disorders.

#### Triphala rasayana

In India, there is popular proverb saying, 'a child need not worry even if he does not have a mother and a Triphala will take care of his requirements. This denotes that Triphala has the power to look after both internal as well as external body organs, just like a mother who looks after her child's need. The three herbal fruits of Triphala-Haritaki, Vibhitaki and Amalaki in combination is considered to be one of the most praised herbal preparation worldwide.

Any Dravya when given in moderate dosage for the cure of an illness it forms Aushadha. The same Dravya when given in large dosage in a short duration of time is considered as Rasayana. Hence any medicine when administered in the Rasayana Vidhi for achieving the excellence of morbid dhatu in the body is considered as Rasayana. Triphala is such drug which has Rasayana property as well as Vyadhihara property. Hence it acts as Vyadhihara

Rasayana, which not only cures the disease but also rejuvenates the body and increases the life span and quality of life.

#### **CASE REPORT**

A male patient of age 66 years, known case of Hypertension and not a known case of Diabetes mellitus presented with the complaint of bilateral knee joint pain, fatigue and difficulty in walking since 4 years. Clinical examination and X-ray was taken and diagnosed as Osteoarthritis of knee which is one of the Vata vyadhi (complication of Shonita abhishyanda) On routine investigation, it was revealed that the person was Hyperlipidemic, But as per patient's history, he was previously been diagnosed with Hyperlipidemia a year ago, and was not on regular medication. He was also on aggressive exercise and with consistent diet. Even after maintaining normal BMI and weight, his Hyperlipidemia was not under control. For all the above problems, he got admitted to our hospital on 6/1/2021. On the basis of complaint history, clinical examination, laboratory investigations, the patient was diagnosed to be suffering from Shonita abhishyana/ Hyperlipidemia. His treatment protocol was decided after assessing all the pathological reports which showed raised lipid level in all types of cholesterol and tryglycerides. Ayurveda considers Shonita abhishyanda as one of the Santarpanotha vikara which is best treated with Apatarpana and Triphala Rasayana with its dual action acts as apatarpana for medo dhatu and tarpana for succeeding dhatu and corrects in the dhatvagni level. Considering all this factors, he was selected for the study after taking the consent form.

Table 1: Rasa panchaka of triphala.

Dravya	Haritaki <sup>[11]</sup>	Vibhitaki <sup>[12]</sup>	Amalaki <sup>[13]</sup>	Triphala <sup>[14]</sup>
Rasa	Pancharasa	Kashaya	Pancharasa	Kashaya
	(Kashaya)		(Amla)	
Guna	Laghu, Ruksha	Laghu, Ruksha	Laghu, Ruksha	Ruksha, Sara
Virya	Ushna	Ushna	Sheeta	Anushna
Vipaka	Madhura	Madhura	Madhura	Madhura
Prabhava	Rasayana	Chedana	Rasayana	Rasayana
Dosha-	Vata	Kapha	Pitta	Tridosha
Karma				
Karma	Anulomana,	Chakshushya,	Vrishya,	Chakshushya,
	Chakshushya,	Keshya,	Chakshushya	Deepana,
	Deepana, Hridya,	Bhedana,		Vranaropana,
	Medhya,	Kriminashana		Ruchikara,
	Sarvadosha-			Medohara
	Prashamana			

#### MATERIALS AND METHODS

#### Plan of work

The patient diagnosed with Shonita abhishyanda/Hyperlipidemia was screened under strict diagnostic, inclusion and exclusion criteria. The patient was included in the study after signing the informed consent. The patient having a Triglycerides >150mg/dl and Total cholesterol >200mg/dl was allocated to the study. The patient was given 12 capsules of Triphala Rasayana orally, early morning in empty stomach for 30 days with Ushna jala. He was taken for the study from In-Patient-Department of Kayachikitsa, Shri Dharmasthala Manjunatheshwara Ayurveda Hospital, Udupi. The Triphala Rasayana in capsule form required for the intervention was obtained from Shri Dharmasthala Manjunatheshwara Ayurveda Pharmacy, Udupi.

#### Method of preparation of triphala rasayana

Triphala Rasayana is a combination of three fruits i.e Haritaki, Vibhitaki, and Amalaki which can be used as Vyadhihara Rasayana in the management of Shonita abhishyanda. In the treatment of Shonita abhishyanda the daily use of Shilajatu, Triphala, Guggulu etc dravyas has been mentioned. Mentioning of Triphala Rasayana and its dosage is different according to different Acharyas. As per one version, when Haritaki, Vibhitaki and Amalaki taken in equal quantity and if it is given in two karsha(24g) Matra in early morning, in empty stomach, it will act 100 times more efficiently to improve the quality of life and also makes the person, free of diseases and geriatric changes. Triphala as a whole can be used as following manner. Such as Triphala Swarasa, Triphala Kwatha, Triphala Shrita Kashaya, Triphala Rasakriya, Triphala Churna, Triphala Ghana Vati, Triphala Ghrita etc. In the present study Triphala Rasayana was administered in the form of Rasakriya or Gana vati where aqueous extract was taken and filled in empty veg capsules of 500mg. The ratio of aqueous extract to raw drug was 1:4. Hence Dwikarsha or Two Karsha matra (24g) of Triphala, [15] the aqueous extract will be 6 g which when filled in 500mg capsule will be equivalent to 12 capsules.

## **OBSERVATIONS AND RESULTS**

**Table 2: Bio-chemical parameters.** 

Sl. no.	Bio-chemical	Before	After
51. 110.	Parameters	Treatment	Treatment
1	Fasting Blood Sugar	94mg/dl	110mg/dl
2	Sr. Total Cholesterol	209mg/dl	162mg/dl

3	Sr. Triglycerides	293mg/dl	125mg/dl
4	Sr. Low Density Lipoprotein	119mg/dl	104mg/dl
5	Sr. Very Low Density Lipoprotein	58mg/dl	25mg/dl
6	Sr. High Density Lipoprotein	35mg/dl	38mg/dl

Table 3: Parameters.

Sl. No.	Parameters	Before Treatment	After Treatment
1	Weight	58Kg	56Kg
2	BMI	21.9	21.2

#### DISCUSSION

In the current study, the marked reduction in the lipid profiles that include Triglycerides, Total cholesterol, VLDL cholesterol and increase in the HDL cholesterol proves the efficacy of Triphala Rasayana in reducing the Shonita abhishyanda. Synthesis of lipids is mainly by liver and intestine using dietary lipids. It is claimed that Haritaki, one of the component of Triphala, has been reported to increase gastric emptying which might be the reason for decreased absorption of lipoproteins with less density large molecule. Hence there was more reduction of lipids in triglycerides, VLDL cholesterol, LDL cholesterol and total cholesterol, whereas it increased high density small lipoprotein HDL. Vibhitaki is one more component of Triphala which has more Chedaniya property than Rasayana, which helps in Srotoshodana and might reduce the size of the lipoprotein, which again increases HDL and decreases VLDL. As the fact goes, HDL is the smallest and most dense lipoprotein and VLDL is the largest and less dense lipoprotein particle. Most plasma triglycerides is transported in chylomicrons or VLDL and most plasma cholesterol is carried as Cholesteryl esters in LDL and HDL. The liver is a multipurpose organ regulating various metabolic pathways in the body. It is the chief place for elimination and synthesis of lipoproteins. It gets cholesterol, triglycerides and fat soluble vitamins from peripheral tissues and diet, convert them into lipoprotein complexes and releases back into the circulation. Amalaki, which is a well-known Hepato-protective drug, is again a component of Triphala. It helps in improving the hepatocyte cells and helps in improving the transport of hepatic lipids. In this way, Triphala, as an individual component as well as in combination has a balancing and rejuvenating effect on Vata, Pitta and Kapha. Triphala also works on exogenous, endogenous and reverse cholesterol transport pathways. The study also proved to be effective in improving the quality of life, which again defines its Rasayana effect on the body. In a nut shell, Santarpana nidana or Virudha ahara resulting in Shonita abhishyanda, which sooner or later may predispose to different Santarpanottha vikaras, are all effectively treated with Triphala Rasayana. Hence Triphala Rasayana may be prescribed or plan in all the sequels of Margavarana like Vatavyadhi, Shiromarmabhigata, Vatarakta, Hritshula, Mutraukasada and so on.

The dosage followed in the study was well tolerated by the subject and no adverse effects was noticed. Thus it can be said that Triphala Rasayana is safe and effective medication for the effective control of Shonita abhishyanda and related disorders. Observing the therapeutic benefits of Triphala Rasayana in Hyperlipidemia, more evidence based studies may be placed to prove the therapeutic effect of same in diseases like Diabetes Mellitus, Ischemic Heart Disease, Ischemic Stroke, Ischemic Limb Disease, Parkinsonism, Obesity etc.

#### **CONCLUSION**

On comparing the effects of Triphala Rasayana before and after therapy, it is found that the formulation of Triphala at its optimal dosage is effective and quite beneficial in reducing the knee joint pain and fatigueness. A significant reduction in the parameters were also observed which included weight, BMI, FBS, Triglycerides, Total cholesterol, VLDL, LDL and also increase in the level of HDL. Triphala Rasayana as the dosage mentioned in our classics (2 karsha) as Vyadhihara Rasayana helped in reducing the levels of serum lipids in patient diagnosed with Shonita Abhishyanda / Hyperlipidemia. This study gives a huge hope for such lifestyle disorders and alternate solution for treatment. It is absolutely free from any kind of side effects or toxic effects.

## **ACKNOWLEDGEMENT**

My sincere gratitude to my Guides, Late Dr G Shrinivasa Acharya and Dr Aniruddha for their immense support throughout. I would also like to thank Dr Shrilatha Kamath, HOD and all other faculty members of Kayachikista Department, Sri Dharmasthala Manjunatheshwara College of Ayurveda, Udupi.

#### REFERENCES

- 1. Dalhana. Susruta Samhita. Vaidya Jadavji Trikamji Acharya, Narayanaram Acharya editor. Varanasi: Choukhamba Sanskrit Sansthan, 2010; 73: 824.
- 2. Agnivesha. Charaka Samhita. Vaidya Yadavji Trikamji Acharya editor. Varanasi: Choukhambha Surbharati Prakasham, 2011; 738: 149-150.

- 3. Dalhana. Susruta Samhita. Vaidya Jadavji Trikamji Acharya, Narayanaram Acharya editor. Varanasi: Choukhamba Sanskrit Sansthan, 2010; 726: 824.
- 4. Dalhana. Susruta Samhita. Vaidya Jadavji Trikamji Acharya, Narayanaram Acharya editor. Varanasi: Choukhamba Sanskrit Sansthan, 2010; 73: 824.
- 5. Agnivesha. Charaka Samhita. Vaidya Yadavji Trikamji Acharya editor. Varanasi: Choukhambha Surbharati Prakasham, 2011; 470: 738.
- 6. Agnivesha. Charaka Samhita. Vaidya Yadavji Trikamji Acharya editor. Varanasi: Choukhambha Surbharati Prakasham, 2011; 435; 738.
- 7. Agnivesha. Charaka Samhita. Vaidya Yadavji Trikamji Acharya editor. Varanasi: Choukhambha Surbharati Prakasham, 2011; 627: 738.
- 8. N H Naveenchandra. Text Book on Clinical Biochemistry and Haematology with clinical concepts, Bangaluru: Jagruti printers, 2015; 88: 304.
- 9. Complications of Hyperlipidaemia, Published on August, 2010; 25. [cited 2019 Feb 14]. Available from: URL: http://www.healthline.com/health/high-cholesterol-complications
- 10. Dalhana. Susruta Samhita. Vaidya Jadavji Trikamji Acharya, Narayanaram Acharya editor. Varanasi: Choukhamba Sanskrit Sansthan, 2010; 73: 824.
- 11. Chunekar K.C. Hindi Commentary, Bhavaprakash Nigantu. Varanasi: Choukhamba Krishnadas Academy Publication, 2010; 5: 960.
- 12. Chunekar K.C. Hindi Commentary, Bhavaprakash Nigantu. Varanasi: Choukhamba Krishnadas Academy Publication, 2010; 9: 0960.
- 13. Chunekar K.C. Hindi Commentary, Bhavaprakash Nigantu. Varanasi: Choukhamba Krishnadas Academy Publication, 2010; 10: 960.
- 14. Chunekar K.C. Hindi Commentary, Bhavaprakash Nigantu. Varanasi: Choukhamba Krishnadas Academy Publication, 2010; 12: 960.
- 15. Vagbhata. Astanga Hridaya. Hari Sadasiva Sastri editor. Varanasi: Choukhamba Sanskrit Sansthan, 2010; 930: 956.