

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

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### ABSTRACT

Ulcerative colitis is a chronic inflammatory condition that affects the colon and rectum. It is distinguished by mucosal and submucosal inflammation, which may occasionally affect the entire large intestine. The global prevalence of ulcerative colitis was estimated to be 5 million cases in 2023, and the incidence is on the rise. The quality of life can be significantly impacted, and the potential for life-threatening complications is present. Symptoms typically develop gradually. Although there is no cure, treatment can significantly alleviate symptoms and achieve long-term remission. Grahani bears a striking resemblance to ulcerative colitis. In Ayurveda, Grahani is the location of the digestive fire (Agni) that is responsible for the digestion and metabolism of food. Impaired Agni (Agnidosha) results in Grahaniroga, which is characterized by gastrointestinal symptoms and improper digestion. Ayurveda provides a variety of treatment options

for Grahaniroga, such as lifestyle adjustments, yoga, and herbal formulations. The beneficial role of Ayurveda in the management of ghrhani roga in a 65-year-old male who has been treated at our institute for six months is subsequently described in this case study.

**KEYWORDS:** Ayurveda; Grahani; Agnidosha, Gastrointestinal diases.

## INTRODUCTION

Idiopathic inflammation is the cause of chronic diseases, ulcerative colitis, referred as inflammatory bowel disease. The diagnosis of this disorders is influenced by clinical, endoscopic, and histologic factors; however, no single finding can definitively diagnose the disease. Continuous ulceration that originates in the rectum and is restricted to the colon is a prevalent characteristic of ulcerative colitis.<sup>[1]</sup> A moderate form of ulcerative colitis is characterized by granular, hyperemic, and edematous mucosa. When the disease becomes more severe, the mucosa ulcerates and the lesions extend to the lamina propria. Only the colon is affected by ulcerative colitis, which originates in the rectum and may progress to a more severe form in a continuous pattern.<sup>[2]</sup> Increased bowel frequency and stool leakage are the distinguishing symptoms of this condition. Weakness is more prevalent as a result of the stool's loss of blood and hydration.<sup>[3]</sup>

In 2023, the global prevalence of ulcerative colitis was estimated to be 5 million cases, and the incidence is increasing, which is a cause for concern. Topical and systemic steroids are employed to induce and sustain clinical and endoscopic remission during treatment. Amino salicylates are the primary therapeutic option for mild to moderate ulcerative colitis. Moderate to severe illnesses are managed with immunosuppressants and biological medications.<sup>[5]</sup> Medical practitioners are confronted with a substantial challenge as a result of the elevated morbidity and mortality rates. The mortality rate associated with colon cancer is highest during the initial stages of the disease and for an extended duration. Consequently, individuals are perpetually in search of alternative therapies that offer secure and superior outcomes.

In Ayurveda, an ancient Indian system of medicine, Pittaja Grahani can be associated with ulcerative colitis. The agni (Digestive fire) area is referred to as grahani in ayurveda, and it is responsible for the digestion and metabolism of food.<sup>[6]</sup> In accordance with the ancient ayurvedic literature. Aahaar's digestion, absorption, assimilation, and ingestion are all under the control of Grahani. Grahani roga, a pathological disease, is the consequence of incorrect digestion of ingested food when Agni becomes mandagni. Grahani dosha is the term used to describe the Trividh anomaly of Jatharagni.<sup>[7]</sup> Grahani is a disease that is prevalent in developing nations and is linked to poor dietary practices and a stressful lifestyle, affecting a significant number of individuals worldwide. This research work present a case of 53 year

old male diagnosed with superficial aphthous ulceration at duodenum and ceacum. Patient was treated with Panchakarma therapy supported by conservative ayurvedic treatment.

### **Ayurvedic perspective**

The term "Pittaja Grahani" is used to describe ulcerative colitis. Ayurveda believes that the state of perfect health is achieved when the three doshas—Vata, Pitta, and Kapha—are in harmony. Pittaja Grahani, an intestinal imbalance, is caused by Pitta Dosha. The Pitta energy is employed in the processes of digestion, assimilation, metabolism, and biochemical transformation. Pitta regulates the body's temperature, pigmentation, vision, intelligence, vitality, ambition, courage, and understanding through enzymatic and endocrine activity. Pitta is distinguished by its hot, quick, light, liquid, spreading, slightly oily, and fleshy odor.

Mandagi is a term that describes a lack of appetite and digestion, as well as irregular, improper, and irrelevant eating habits, hard-to-digest or indigestible foods, junk food, diets that aggravate Pitta, such as spicy, pungent, acidic, sour, or alkaline foods, foods that burn, and exposure to excessive heat, alcohol, smoking, anger, and other similar situations. This disease can also be caused by a poor diet, which is referred to as Pathya, in digestive disorders such as post-diarrhea and irritable bowel syndrome. In severe cases, Pitta vitiation can lead to inflammation, ulceration, and bleeding in the rectal region.

The treatment is primarily focused on the restoration of colon function, the preservation of digestive health, and the healing of ulcers. The medicines that may be internally consumed are Agni Deepana, Amapachana, Grahi, Stambhana, and Vrana Ropaka. a treatment referred to as Panchakarma.<sup>[8]</sup> In severe cases, panchakarma therapy can manage inflammation, rectal bleeding, and ulcerations. It also rejuvenates and detoxifies the digestive system in a very short period of time. In general, the results of Ayurvedic treatment are favorable. Early cases exhibit a more rapid response than chronic conditions. A complete recovery is feasible provided that all of the guidelines are adhered to.<sup>[9]</sup>

## **MATERIAL AND METHODS**

### **Case presentation**

A 52-year-old male patient presented to the kayachikitsa outpatient department of the Y.M.T Medical Ayurvedic college and Hospital in Kharghar, Navi Mumbai, with chief complaints of Loss of weight (16.5 wieght loss in one year), pain abdomen, tingling numbness all over the body, vertiligo and dryness of mouth. K/C/O HTN and DM. When he arrived at our

panchkarma centre, she weighed 4.1 kg, had a temperature of 98.4 degrees, 22 respiratory rate (RR), blood pressure of 130/70 mmHg, and a pulse of 64 beats per minute. An examination of the patient's physical condition revealed that his CNS was conscious orientetation, P/A was SOFT NT, CVS was S1S2 and RS was AEBE.

### **Patient history**

### **Examination of patient**

### **General physical examination**

- Pulse: 60/min
- BP: 130/70 mmHg
- Weight: 44.1 Kgs
- Stool: Not-satisfactory
- Urine: 2-3/Day
- Spo2: 100%
- Temp: 98f

### ***Ashtavidha pariksha***

- *Nadi*: 76 bpm, reg. *Vatapaitik*
- *Mala*: Samyak
- *Jihva*- *Saam*
- *Shabd* - *Aspasht*
- *Sparsh*- *Anushan shit*
- *Drika*- *Prakrut*
- *Akriti*- *Stool*

### **Systemic examination**

- CVS – S1/S2, Heard
- CNS – Conscious and well oriented
- RS – AEBE and Clear
- P/A: Soft and Non-tender

### **Investigations**

**RTPCR for COVID-19 – NEGATIVE**

**Rapid Antigen Test – NEGATIVE**

**Previous medication given**

Tab Normaxin 2.5mg po 1-1-1

Tab Tenolol 50mg po 1-0-0

Tab Pan 40mg po 1-0-0

Tab Ganaton 50mg po 1-1-1

Tab Pregalid 50mg po 0-0-1

Tab Metro 400mg po 1-0-1

Syrup Duphalac 30ml 0-0-1

**Differential diagnosis**

Grahani is the name given to the primary source of agni, which is required for the digestion and assimilation of food. Grahani is also known as the digestive system. The agni is the source of sustenance and nourishment for Grahani. According to Acharya Chakrapani, the Grahani dosha is caused by a single defect in the Grahani organ to be the cause of the condition. Vidaha, which refers to the upward and downward movement of food through the gastrointestinal tract, is the result of weak Agni (Durbala), which is also referred to as Mandagni. To put it another way, only a portion of the food is eaten and digested, while the remaining portion is left undigested. Grahani Gada, also known as Spree Syndrome, is the consequence of the Pakwa-ama proceeding in a downward direction. Arochaka (Anorexia), Asya Vairashya (Distaste in mouth), Trishna (Excessive thirst), Chhardana (Vomiting), and Praseka (Excessive salivation) are some of the symptoms that are associated with Annavaḥa Srotodusti. The symptomatology of Annavaḥa Srotodusti is strikingly similar to that of Grahani Dosha. The two It indicates that there is a functional impairment as well as a structural abnormality (Durbalta) in Grahani, which is an organ or component of Annavaḥa Srotasa.<sup>[10]</sup> It was stated by Acharya Sushruta in Uttar Sthana and commentator Dalhana that patients who are either suffering from Atisara or in the process of remission of Atisara engage in Ahitahara and neglect the dietary regimen that is recommended after the Shodhana Virechana. This practice ultimately results in the further vitiation of Agni. When Agni is vitiated, it leads to the vitiation of Grahani, which is referred to as Grahani Adhithana. It is four It can be concluded that the metabolism that takes place at the Paramanu level, which is commonly known as Sukshma Pachana, is wholly reliant on the Sthula Pachana that is carried out in the Grahani branch. After having such a lengthy conversation about the topic, it is clear that the Grahani Dosha is vitiated as a consequence of the vitiation of Pachakagni, Samana Vayu, and Kledaka Kapha, which is caused by a number of different etiological

factors. Because of this, a number of different occurrences take place, including Agni Dushti, the potential for improper absorption of digestion products, and improper digestion of food that has been placed in the mouth.

### ***Treatment***

**Table 2: Panchakarma procedures.**

Sr. No	Procedure	Duration
1	Deepana	1 to 12 th day
2	Pachana	1 to 12 th day
3	Sarvanga abhyanga	1 to 12 th day
4	Niruh Basti	1 to 12 th day

**Table 2: Ayurvedic treatment details.**

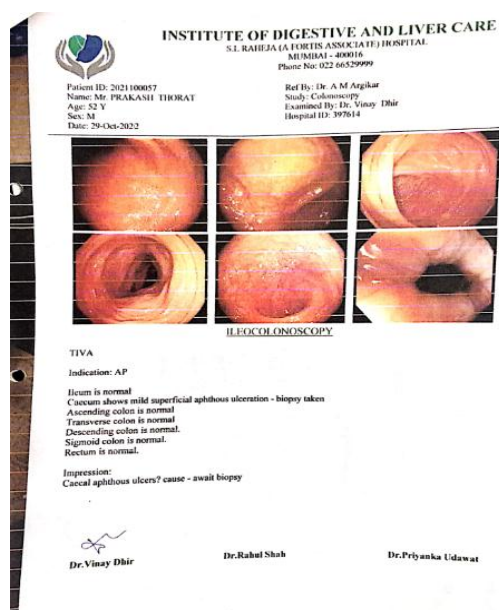
Sr No.	Treatment Given	Dose	Anupaan	Days
1.	Udumbara kvatha	40 ml/two times a day	Luke warm water	30 days
2.	Lodhra tvak churna + Musta moola churna Nagakesara + panchamrut rasa + Mukta bhasma + Praval bhasma + Banga bhasma + Shankha bhasma + Shukti bhasma	2 Table spoon twice a day	Luke warm water	30 days
3.	Kutaja Ghana vati	1 mg thrice a day	Luke warm water	30 days

## **RESULT AND DISCUSSION**

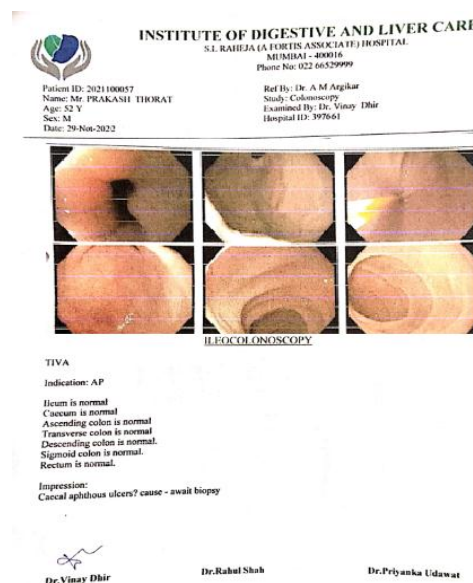
The prolonged use of conventional standard drugs frequently leads to mild to severe side effects and may ultimately lead to drug resistance in ulcerative colitis. Therefore, there is a necessity for alternative treatments that are both safe and effective. Various treatment modalities for Raktatisar (Ulcerative colitis) are described and used successfully in Ayurveda. According to Ayurveda, the initial course of treatment is Nidanaparivarjana, which is followed by the administration of Shamana Chikitsa, which comprises Amapachana, Agni Deepana, Grahi, Rakta Stambhana, and Vrana Ropaka medicine. In the mild to moderate stages of Raktatisar, Piccha Basti (Slimy enema) is beneficial in conjunction with oral medicine to control bleeding, inflammation in the anorectum, diarrhea, and abdominal pain. Initially, Acharya Susruta recommends that all forms of Atisara be managed through a light diet, as this can effectively eliminate Ama from the body.

Pitta pradhana Vata doshas are the cause of ulcerative colitis, a purisha vaha srotas disease. Udumbara kvatha possesses the properties of Pitta Vata shamana, vrana shodana, and ropana,<sup>[11]</sup> which aid in the healing of ulcers in the colon through basti karma. It also

possesses stambhana properties that aid in the regulation of bleeding and the reduction of bowel frequency. Kutaja ghan vati<sup>[13]</sup> is composed of the ghana satva of Kutaja tvak and an Atisara nashaka (Stambhana) guna that also aids in the reduction of bowel frequency. Musta has the ability to alleviate ama in the body and decrease the frequency of bowel movements through its grahi action. Mukta panchamrut rasa<sup>[14]</sup> is a classical Ayurvedic compound that alleviates excessive Pitta dosha and ushna guna in the body. Mental stress, which is a contributing factor to the disease, is also alleviated by one of the ingredients of Mukta. Bellow shows the significant affect on treatment on caecum.



(A) Before Treatment Reports



(B) After treatment reports

## CONCLUSION

The management of ulcerative colitis can be accomplished through the utilization of a wide range of Ayurvedic treatment modalities that improve the patient's quality of life. Panchkaram and other oral medications have been shown to be effective in alleviating symptoms and reducing the severity of severe conditions. This has been demonstrated through clinical experience. Ayurvedic principles and concepts are brought to light by the current investigation, which sheds light on how UC can be managed in accordance with Ayurvedic principles. The results that were obtained could be attributed to the disease-modifying effect of the trial therapy, which is made possible by the anti-pitta, vranashodhana-ropana, grahi, and stambhana properties that it possesses.

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