



A CASE STUDY ON AYURVEDIC MANAGEMENT OF KAMALA W.S.R. TO JAUNDICE

Ayurveda

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ABSTRACT

Jaundice is a clinical manifestation of disorders of underlying bilirubin metabolism, hepatocellular dysfunction, or biliary obstruction. Jaundice occurs in settings of cholestasis or inability to effectively secrete bile as well as disorders of bilirubin metabolism and hepatocellular dysfunction. Clinical signs of jaundice occur when the serum bilirubin level exceeds 2.5 to 3 mg/dL. This paper discusses a patient seen in the OPD of Prasuti Tantra department at SBLD Ayurveda Vishwa Bharti College and hospital Sardarshahar Churu. Her chief complaints Yellowish discoloration of skin, icterus, Yellowish discoloration of urine, Anorexia, since 10 days. The patient was suffering with hereditary spherocytosis and was on folic acid 5 mg. This patient was effectively treated by the combination of Kutaki churna, Triphala, Trivrita churna, Bhunimba churna, Arogya vardhini vati, Phalatrikadi kashaya, Pitta pramathi hima. All the symptoms showed highly significant results. Hence it can be concluded that these medicines are very effective in patients of jaundice.

KEYWORDS

Ayurveda, Hereditary Spherocytosis, Jaundice, Trivrit Churna, Arogyavardhini Vati And Phalatrikadi Kashaya

INTRODUCTION

Jaundice, also known as icterus is a yellowish or greenish pigmentation of the skin and whites of the eyes due to high bilirubin levels.¹ It is commonly associated with itchiness.³ The faces may be pale and the urine dark.² Causes of jaundice vary from non-serious to potentially fatal. Levels of bilirubin in blood are normally below 1.0 mg/dL (17 μ mol/L) and levels over 2-3 mg/dL (34- 51 μ mol/L) typically results in jaundice. High bilirubin is divided into two types: unconjugated (indirect) and conjugated (direct). Conjugated bilirubin can be confirmed by finding bilirubin in the urine. Other conditions that can cause yellowish skin but are not jaundice include carotenemia from eating large amounts of certain foods and medications like rifampicin.³ This case study show that Ayurvedic herbs which give effective result in jaundice.

CASE REPORT:

A 33 year old female patient visited the OPD of Prasuti Tantra department at SBLD Ayurveda Vishwa Bharti College and hospital (CBPACS) on 17/3/2019 with the following complaints:

Patient name: XYZ

OPD/IPD No.: 1XXXX22

Age/Sex: 33 years /Female

Date of admission: 17/3/2019

Date of discharge: 16/7/2019

CHIEF COMPLIANT:

- Yellowish discoloration of skin
- Icterus
- Yellowish discoloration of urine
- Anorexia
- Generalized Weakness

PERSONAL HISTORY:

- Bowel – constipation,
- Bladder –yellowish discoloration of urine,
- Appetite - poor,
- Sleep- altered,
- Built - Normal
- No history of any type of addiction like smoking, alcohol.

HISTORY OF THE PRESENT ILLNESS:

A 33 year old female patient with past history of hereditary spherocytosis was presented Yellowish discoloration of skin, Icterus, Yellowish discoloration of urine, Anorexia, Generalized weakness since 10 days. The patient was suffering with hereditary spherocytosis and was on folic acid 5 mg. When there was no relief in symptoms, she came to the Prasuti Tantra, OPD of SBLD Ayurved Vishwabharti seeking ayurvedic treatment.

HISTORY OF PAST ILLNESS:

- Medical history-patient was known case of hereditary spherocytosis
- History of Blood Transfusion – 1 time after her first delivery
- Drug History- she was taking folic acid 5 mg daily since 25 years
- Family History: - Hereditary Spherocytosis in father was present.
- Surgical History- Not significant

SYSTEMIC EXAMINATION

CNS- well oriented to person, place and time

CVS system: S1, S2 is audible, No murmur

Respiratory system: no obvious deformity, with B/L clear chest, no added sound present

Digestive System: decreased appetite and constipation

Uro-genital System: yellowish discoloration of urine

ASTHAVIDHA PARIKSHA-

1. Nadi (pulse) = 78 / min.
2. Mala (stool) = Vibandha (constipation)
3. Mutra (urine) = Pitavarniya.
4. Jihwa (tounge) = Ishat pita.
5. Agni = Kshudhamandya.
6. Shabda (speech) = prakrut (Normal)
7. Sparsha (skin) = Pitavarniya.
8. Druka (eyes) = Netrapitata

INVESTIGATIONS:

CBC- Hb-8.8gm %

RDW-CV 23.9% high,

RDW- SD 61.6 Fl high

Liver Function Test

- Total serum billirubin- 28.04 mg/dl
- Direct serum billirubin- 16.54 mg/dl
- Indirect serum billirubin- 11.50mg/dl
- SGOT- 97.35 U/L
- SGPT- 118.90 U/L

URINE COMPLETE-

- colour orange,
- pus cells 1-3/HPF,
- epithelial cells 3-5/HPF
- USG (whole abdomen) - Hepatosplenomegaly, sludge in Gall Bladder.

MATERIAL AND METHOD:

Study type- Simple Random Single Case Study.

Table 1: Showing treatment schedule

Sl. No.	Dravya	Dose	Duration	Anupana
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1.	Kutaki	500 mg	Twice in day	Luke Warm water
	Triphala	500 mg		
	Trivrit Churna	500 mg		
	Bhunimba Churna	500 mg		
2.	Punarnava Mandoor	250 mg	Twice in day	Luke Warm water
3.	Arogyavardhni vati	500 mg	Twice in day	Luke Warm water
4.	Phalatrikadi Kashaya	20 ml	Twice in day	Normal water
5.	Pitta pramathi hima (shanaya, manjistha, munakka)	20 ml	Twice in day	

PATHYAAHARAANDVIHAR-

1. AHARA-

- Carbohydrate rich diet- bread, rice, potato, yam, custard, sugarcane juice
- Cereals - Old rice (*Oriza Sativa*), Barley (*Hordeum vulgare*), Godhuma (wheat).
- Pulses - Adhaki (red gram-Cajanus cajan), Kulattha (horse gram), Mudga (green gram)
- Vegetables – leafy vegetables like lettuce and spinach.
- Fruits - Orange, Watermelon, Apple, Jambu (*Syzigium cumini*), Kapitha (*Feronia limonia*), grapes, pears, carrot and beets.
- Avoid fried and fatty food

2. VIHARA- (LIFESTYLE MODIFICATION)-

Aasanas (*Gomukhasana, Nokasana, Matsyendrasana, Dhanurasana*)
kapalbhathi pranayam

RESULT AND DISCUSSION:

Table 2: Showing Changes in Blood Investigation during Treatment

Test	17.3.2019	23.3.2019	30.3.2019
Sr. Bilirubin (Total)	28.04	5.01	3.43
Sr. Bilirubin (direct)	16.54	1.97	1.41
Sr. Bilirubin (indirect)	11.50	3.04	2.02
SGOT	97.35	39.56	27.40
SGPT	118.90	51.80	19.48

During the treatment, patient was kept only on oral medication for a period of 1 month. Thus, after the one month of treatment, patient had got significant improvement in all symptoms. Now patient is gradually improving and there is no recurrence of symptoms after the 3 months of follow up.

The results were appreciable in both the clinical and laboratory criteria. Statistically, relief in Yellowish color of eyes and urine, loss of appetite, weakness and in reduction in serum bilirubin levels.

The trial drugs have been used in management of Kamala (Jaundice) in Ayurvedic texts and Nighantus.

Study has shown improvement in appetite and taste, Moothrala, Yakrit uttejaka, moothrala properties.

Therefore combination of both the drugs are more significant than individual. Once the doshik homeostasis has been achieved, the signs and symptoms of Kamala are relieved automatically because the disease and its different manifestations are all produced by doshas.

Table 3: Showing Probable Mode of Action of Drvayas Used for Chikitsa-

SN.	Dravya	Samprapti Bhang (Mode of Action)
1.	Kutaki [4]	Rechak, dipan, raktashuddhikara, malabhedani
2.	Triphala [5]	Pittaghna, pittavirechaka, anuloman, rasayani, jwaraghna, dipan, kamalahara
3.	Trivruta[6]	Anuloman, pittaghna
4.	Bhunimb[7]	Pitta sarak, yakrit uttejak, Rechan
5.	Aarogyavardhini vati [8]	Regulation of pitta secretion, maintain healthy fluid level in the body, agnidipan, pachana, grahani dosha nashak

6.	Punarnava Mandura[9]	Agni Deepan, Pitta shamak, Rasayana, Amanashaka, Pachana, Vatanulomaka
7.	Pitta pramathi hima[10]	Yakrut uttejaka, ruchya, dipan, Rakatshodhak, Pittasarak, dipan, Rechan
8.	Phalatrikadi Kashaya[11]	Pittahara, Pitta Recana, Yakriduttejaka, Dipana, Recana, Shothahara, Jvarahara, Kamala-hara, Pandu-hara, KaphaPitta Shamaka, Tridosahara, Rasayana, Kshayaghna

From the above description it appears that the drug exerts an effect in breaking the pathogenesis of Kamala. They act as Rasayana, improve Dhatu formation, are Tridoshaghna, Vatashamaka, Raktashodhaka, Pitta sarana and therefore relieve signs and symptoms of Kamala. The Drugs have proved effective in relieving cardinal features of Kamala. As the Drugs have established properties, it may be inferred that the drugs are safe and suitable in management of Kamala. Regarding mode of action we have rationally discussed above properties and action which might be responsible to bring changes in sign and symptoms of Kamala. This shows majority of action of the drug are due to Guna prabhava. However, observing the outstanding changes in the condition of patients we have opinion that drug acts certainly by Dravya prabhava also. Therefore we may infer that the action of the Drug in improving the sign and symptoms of Kamala patients by Dravya guna prabhava.¹²

On the basis of vivid description of all the herbal drugs are common for the treatment of Hepatocellular jaundice and other liver disorders. Since it is a purely herbal preparation hence very much safe and more effective than any other herbomineral preparation. In Short these Drugs have following properties i.e. Pittahar, Pittarechak, Yakrit utt ejak, Deepan, Rechan, Pachak, Shothhara, Jwarahara, Kamala and Panduhara, Yakrit and Raktvikarhara, Tridoshhar, Rashayan, Mutrajanana, Pittasarak, Anulomak, Shwedak, Daha prashaman and Raktapittahara.¹³

Caraka has mentioned in the 16th chapter of Cikitsa Sthana “Kamali-tu-virecanama”. According to the description of this chapter Virecana is the best method among the all treatments of Kamala roga (Kosthas akhashrita i.e. infective Hepatitis). General principle of treatment of this disease is Sodhana and Sanshamana cikitsa.¹⁴

Liver (yakrit) is the mula-sthana of Rakta. Rakta-Pitta has Ashray and Ashraayi sambhanda hence for elimination of vitiated Pitta Dosh virechan is the best Chikitsa.¹⁵ Prof. R.H. Singh has decided some milestones for a drug to be called as hepato-protective.¹⁶ These includes as-

- Capacity of hepato-cellular regeneration
- Cholegogue and cholertic activity
- Membrane stabilizing effect
- Antiviral and antioxidant effect
- Molecular nutrient effect
- Enzyme and metabolic corrections

On the modern parameters we can say that the Herbal Hepato protective preparations have Cholegogue and Cholertic action, Hepatocellular regeneration, Antiviral, Antioxident, Enzymes and Metabolic correction, Digestive, Membrane stabilizing effect, Immuno modulating action, anti inflammatory action and Antipyretic action.¹⁷

CONCLUSION

In patients of jaundice there was marked reduction of symptoms like Yellowish discoloration of skin, icterus, Yellowish discoloration of urine, Anorexia. No unwanted effect of therapy was observed during treatment and during follow up period. So it can be concluded that these herbal medicines are very effective in management of but to establish this effect further study of longer duration and larger sample is required.

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