

A CASE STUDY: AYURVEDIC INTERVENTION ON GRAHANI DOSHA W.S.R. TO IBS

ABSTRACT: -

Grahani, organ located between *Amashaya* and *Pakwashaya*, is an essential part of the digestive system, or *Mahasrotas*. This is a place of *Agni*, which supports and strengthens the metabolism and digestion of body. According to ancient Ayurvedic principles, *Grahani* controls intake, retention, digestion, absorption, and elimination of food. Vitiating in digestion can disrupt these activities, leading to the origin of *Grahani dosha*. In modern times, unhealthy lifestyles, irregular food intake, and excessive consumption of junk food have led to *Grahani*-related disorders and mental stress also, affecting digestion and absorption of food. *Samhitas* suggest that symptoms are mainly seen in *Grahani dosha*.

Mandagni can lead to *Grahani dosha*, a condition caused by a chronic imbalance of *Pachaka Pitta*, *Saman Vayu*, and *Kledaka Kapha*. Symptoms include alternate bowel movements, stomach pain, foul-smelling stool, and mucus in feces.

In modern science, above symptoms can be correlated with IBS (Irritable Bowel Syndrome). In IBS, the intestinal wall becomes sensitive to even small stimuli, resulting in excessive cramping in the abdomen and changes in the bowel movement and indigestion. In India, approximately 15% of adults suffer with IBS. The pathophysiology of *Grahani Roga*, a disorder associated with compromised digestive function, is covered in this study along with a number of treatment options. such as, including herbs, Yoga, and lifestyle modifications.

Keywords – *Grahani dosha*, *Agni*, IBS,

INTRODUCTION: -

Review of *Grahani Roga* by Ayurveda:

The most prevalent gastrointestinal ailment is "*Grahani Roga*". The hypofunction of *Agni*, or *Mandagni*, is the root cause of all illnesses. There are several etiological causes of *Grahani Roga*, and *Dushti* or Vitiating of *Pachakagni* and *Samana Vayu* damages the *Grahani*. *Acharya Charaka* states that a functionally weak *Agni*, also known as a *Mandagni*, results in improper food digestion that either moves in *Urdhva* or *Adhomarga*. It causes *Grahani Gada* if it moves in *Adhomarga*. According to *Acharya Sushruta*, patients with *Atisara* who consume an imbalanced diet during the *Agnimandya* stage may develop *Grahani Roga*.

IBS (Irritable Bowel Syndrome)-

Irritable Bowel Syndrome (IBS) is a gastrointestinal disorder characterized by altered bowel habits with intermittent and chronic abdominal pain or discomfort in the absence of detectable structural abnormalities. IBS patients are having some sort of psychological disturbance. women are affected 2-3 times more than males.

IBS SYMPTOMS -

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41 The symptoms of IBS typically include-

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43 **Abdominal pain-**

44 ➤ Recurrent abdominal pain associated with defecation.

45 ➤ Cramping and colicky in nature relieved by defecation.

46 ➤ Variable intensity and location.

47 ➤ Pain is often exacerbated by eating or emotional stress and improved by passage of flatus
48 or stool.

49

50 **Altered bowel habits-**

51 ➤ Abnormal stool frequency and consistency (less than three times per week or over three
52 times per day)

53 ➤ Diarrhoea or Constipation

54 Diarrhoea- Most often occurs in the morning or after eating preceded by lower abdominal
55 pain and sense of urgency (possibly with tenesmus)

56 Constipation-pellet shaped, can also have sensation of tenesmus.

57 ➤ Feeling of incomplete evacuation.

58 ➤ Passage of mucous stool

59 ➤ Bloating and abdominal distension.

60 ➤ Weight loss

61 ➤ Symptoms can be altered by emotional (ex. stress), social, cultural factors.

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63 **Patient Information: -**

64 • OPD NO.- 62105

65 • Consulting Date – 26/05/2023

66 • NAME – XXXX

67 • AGE/SEX -34 Yrs./male

68 • ADDRESS- laxmi nagar, Raipur

69 • RELIGION- Hindu

70 • EDUCATION- Graduate

71 • MARITAL STATUS- Married

72 • SOCIO-ECONOMIC STATUS- Middle Class

73 • OCCUPATION- Bank clerk

74 • HABITATION- Sub-urban

75

76 **Chief complaints-**

- 77 • Recurrent abdominal pain and problem in defecation (loose stool) 3 to 4 times in a
78 day especially just after meal.
- 79 • Mucous seen in stool.
- 80 • Abdomen fullness and discomfort (*aadhman*) for last 2 years.
- 81 • *Tikta amla udgar*
- 82 • Emotional stress (*avsad*).

83

84 **Presenting Illness-**

- 85 • A 34 years old male patient, occupation of bank PO, consulted in our OPD comes
86 with these complaints According to patient he was asymptomatic before one year,
87 after that he was feeling abdominal discomfort and fullness. He ignores this condition
88 for some months. Gradually he feels abdominal pain and problem in defecation (loose
89 stool) 3 to 4 times in a day especially just after meal. He takes some allopathic
90 medication and got symptomatic relief. After stop medication he suffer again from
91 these problem along with mental stress.

92

93 **Past medical history: -**

94 The patient used antacids, Proton Pump Inhibitors, painkiller and antibiotics last 1 year.

95 Family history: - No history of DM/HTN/BA/HYPOTHYROIDISM/RA/IBS.

96

97 **Personal History –**

- 98 ▪ Lifestyle –Sedentary
- 99 ▪ Appetite – Good
- 100 ▪ Dietary Habits – Irregular & Mixed
- 101 ▪ Bowel habits – Irregular, predominantly diarrhoea
- 102 ▪ Bladder habits – Normal
- 103 ▪ Sleep – Normal
- 104 ▪ Habits – Tea, gutkha
- 105 ▪ Physical exercise –No exercise

106

107 **General examination –**

- 108 ▪ General condition Good

- 109 ▪ BP-130/80 mm/hg
110 ▪ P/R-68/min
111 ▪ R/R-18/min
112 ▪ Height- 5ft 5 inch
113 ▪ Weight-80 kg
114 ▪ Patient was afebrile
115 ▪ On examination of GI system, abdominal palpation shows mild tenderness and
116 discomfort in abdomen.

117

118 ***Ashtavidha pariksha -***

- 119 • *Nadi – 68/min, gati(rate)-manda, yati(rhythm)-sama, aayati(volume)-sthula,*
120 • *Dosha - VK*
121 • *Mutra – 5-6 time/at day, 1-2 time/in a night, Ishat-peetabh Varn, samanya*
122 *mutragandhi Gandh*
123 • *Mala – 3-4 time/day, Atisaran, adhha samhati.*
124 • *Jivha – Niraam*
125 • *Shabda – Prakrit*
126 • *Sparsha – Snigdha*
127 • *Drik – Samanya*

128

129 ***Dashvidha Pariksha –***

- 130 • *Prakriti – VK*
131 • *Vikriti – Dosha- VK*
132 *Dushya- Anna,Rasa*
133 *Adhistan- grahani*
134 • *Saar – Mansa saar, Meda sar*
135 • *Samhanan – Madhyam*
136 • *Satva – Madhyam*
137 • *Satmya – Madhyam*
138 • *Aharshakti – Pravara*
139 • *Vyayamshakti – Avara*

- 140 • *Vaya – Madhyam*
 141 • *Pramana – Madhyam (165 cm)*

142

143 **Diagnosis –**

144 *Grahani dosha (IBS)*

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146 **Differential Diagnosis –**

147 *Atisar, grahani dosha*

148

149 **DIAGNOSTIC CRITERIA: - ROME IV Diagnostic Criteria for “IBS”:**

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151 ➤ Recurrent abdominal pain, on average at least 1 day per week in the last 3 months,
 152 associated with > 2 of the following criteria:

153

- 154 • Related to defecation.
- 155 • Associated with change in frequency of stool.
- 156 • Associated with a change in form (appearance) of stool.

157

158 **ASSESSMENT CRITERIA: –**

- 159 1. *Muhurbaddham muhur drava mal pravritti .*
- 160 2. *Shleshma mala pravritti.*
- 161 3. *Aadhmana*
- 162 4. *Tikta amla udgar*
- 163 5. *Aruchi*

164 1.G0- Absent

165 2.G1- Mild

166 3.G2- Moderate

167 4.G3- Severe

168 **Scoring Pattern**-Grading of parameters taken for assessment: -

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170 **1- Muhurvaddha Muhurdrava Mala Pravriti (Frequency of Passing Stool)**

| Grading | Criteria |
|----------------|--|
| | <i>Muhurvaddha Muhurdrava Mala Pravriti</i> |
| Grade 0 | Passing of normal consistency stool (1 time / day) in the morning. |
| Grade 1 | Passing of stool (1-2 times /day) irregularly, without pain |

| | |
|----------------|--|
| Grade 2 | Passing of stool (2-3 times / day) just after meals, irregularly with pain. |
| Grade 3 | Passing of stool more than 4 times/day just after meals, irregularly with pain |

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173 **2- Shleshma Mala Pravriti (Presence of mucous in stool)**

| | |
|----------------|--|
| Grading | Criteria |
| | <i>Shleshma Mala Pravriti (Presence of mucous in stool)</i> |
| Grade 0 | No visible mucous in stool. |
| Grade 1 | Visible mucous sticked to the stool. |
| Grade 2 | Passage of mucous with frequent stool. |
| Grade 3 | Passage of large amount of mucous in stool. |

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176 **3- Adhmana (Distention of abdomen)**

| | |
|----------------|--|
| Grading | Criteria |
| | <i>Adhmana</i> |
| Grade 0 | No Complaint |
| Grade 1 | Occasionally Once in a week |
| Grade 2 | Distention of abdomen after taking meal up to 1-3 hour |
| Grade 3 | Distention of abdomen after taking meal up to 6 hour |

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178 **4-Tikta Amlodgara**

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| | |
|----------------|-------------------------------|
| Grading | Criteria |
| | <i>Tikta Amlodgara</i> |
| Grade 0 | No complaint |
| Grade 1 | 1-3 Days/week |
| Grade 2 | 3-5 Days/week |
| Grade 3 | 5-7 Days/week |

180

181 **5- Aruchi**

| | |
|----------------|--|
| Grading | Criteria |
| | <i>Aruchi</i> |
| Grade 0 | No complaint/ Taking normal diet with interest |
| Grade 1 | No interest in taking normal diet |
| Grade 2 | Food has taken forcefully |
| Grade 3 | Not taken a food even forcefully |

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183

184 **TREATMENT PLAN: -**

लीनं पक्काशयस्थं वाऽऽप्यामं स्राव्यं सदीपनैः।
शरीरानुगते सामे रसे लङ्घनपाचनम्॥

185
186

187 As Acharya Charaka mentioned *Deepana, langhana & pachana* and *kostha shodhana* is
188 the line of treatment for the *grahani dosha chikitsa*. *Deepan, pachana, langhana, kostha,*
189 *shodhan* and *rasayan* is choosen as the choice of treatment.

190

191 Our treatment modality is: -

192 Consulting Date - 26/05/2023, Dept. of Kayachikitsa, Govt. Ayurved hospital, Raipur, C.G.

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195 **Treatment Schedule:** - Treatment schedule was prepared after ascertaining involvement of
196 Doshas.

197 **1st visit 21-01-2023:**

| 198 DRUG NAME | DOSE | ANUAPANA | TIME/DURATION |
|----------------------------------|----------------|----------------------|-----------------|
| 199 1. <i>Panchamrit Parpati</i> | 250 mg | | |
| 200 <i>Sutshekhara rasa</i> | 250 mg | | |
| 201 <i>Laghugangadhar churna</i> | 3 gm | | |
| 202 <i>Shunthi churna</i> | 1 gm | <i>Takra</i> | BD, After meal |
| 203 2. <i>Chirtakadi Vati</i> | 250 mg (2 Tab) | <i>Ushnodaka</i> | BD, Before Food |
| 204 3. <i>Kutajarishtha</i> | 20ml | <i>Sambhaga Jala</i> | BD, After food |
| 205 4. <i>Bramhi vati</i> | 250 mg (2 tab) | <i>Madhu</i> | BD, After food |

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207 **2nd visit: - 05-02-2023**

208 Symptoms reduce markedly.

209 Repeat same medicine for more 15 days.

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211 **3rd visit 02-03-2023**

212 *Hingwashtaka churna* added according to patient bloating complaints.

213

214 **DISCUSSION: -**

215 *Grahani roga* is a syndrome in which *Agni* especially *jatharagni* (the digestive fire) gets
216 vitiated after consumption of certain *nidanas* and when *Agni* becomes *dushta*, *avasthapaka*
217 completely gets hampered & as a result *Ama* (undigested food material) is produced.

218 Simultaneously, *vatadi doshas* i.e. *samana vayu*, *pachaka pitta* & *kledaka kapha* also
219 become vitiated.

220 Due to malfunctioning *grahani*, *ama* gets accumulated & it passes through the stool to form a
221 mixture of *pakva-apakva mala*. So aim of treatment should be to enhance the potency of
222 *Agni*, thereby reducing the formation of *Ama*.

- 223 • The oral medications like *Chitakadi Vati* has an excellent activity of *ama pachana*.
224 *Panchmrita parpati*, *sutshekhara rasa* & *bilva majja churna* has properties like
225 *deepana*, *pachana*, *grahi*, *shulaghna*, *vata-kapha shamana* etc. and with the help of
226 these properties, these drugs act as excellent medication in GI tract diseases.
- 227 • *Brahmi Vati* (with *madhu anupana*) is also a very good drug to prevent anxiety &
228 stress, induce sleep & alleviate *vata*. By all of these medications patient was nicely
229 improving day by day and it was continued upto 45 days.
- 230 • In the view of clinical features, excellent improvement happened, Moderate
231 improvement was happened in defecation of just after food. So, overall improvement
232 of the patient signified the success of the treatment.
- 233 • So, *amapachana* and *Agni deepana* are the main line of treatment of *Grahani roga*.
234 And by the application of medications, these were successfully done in this patient.

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236 **RESULT AND OBSERVATIONS: -**

- 237 • On the day of first visit of OPD after getting proper history and thorough check up the
238 patient prescribes treatment schedule (visit I)
- 239 • After 15 days he was feeling very well after getting the therapies of visit I. Then same
240 medication with proper *anupana* and *pathya* had been advised to the patient and asked
241 to follow-up visit after 15 days.
- 242 • After 15 days (30 day from 1st visit) he had visited at OPD and as per his statement
243 bowel habit was corrected along with improvement of other subjective parameters.
- 244 • After 1n half month (45 day from 1st visit) he had visited again at OPD and very
245 significant improvement was seen.

246

247 **CONCLUSION: -**

248 In the present case, as the treatment given here like *panchmrita parpati*, *Chittrakadi Vati*,
249 *bilva majja churna*, *Brahmi Vati*, *kutajarishtha* along with *pathya ushnodaka* & *takra* had
250 showed good remarkable improvement and response in this case suffering from *Grahani*
251 *roga*. This study has given us a successful as well as effective Ayurvedic management in

252 *Grahani roga* also curing its complications. Hence, it can be clearly depicted that IBS can be
253 cured with special reference to *Grahani roga* by its Ayurvedic management.

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