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### RESEARCH ARTICLE

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

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#### 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 PachakaPitta, 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 GrahaniRoga, 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.

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#### Introduction:-

##### Review of GrahaniRoga by Ayurveda:

The most prevalent gastrointestinal ailment is "GrahaniRoga". The hypofunction of Agni, or Mandagni, is the root cause of all illnesses. There are several etiological causes of GrahaniRoga, 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 GrahaniRoga.

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**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 -**

The symptoms of IBS typically include-

**Abdominal pain-**

- Recurrent abdominal pain associated with defecation.
- Cramping and colicky in nature relieved by defecation.
- Variable intensity and location.
- Pain is often exacerbated by eating or emotional stress and improved by passage of flatus or stool.

**Altered bowel habits-**

- Abnormal stool frequency and consistency (less than three times per week or over three times per day)
- Diarrhoea or Constipation  
Diarrhoea- Most often occurs in the morning or after eating preceded by lower abdominal pain and sense of urgency (possibly with tenesmus)  
Constipation-pellet shaped, can also have sensation of tenesmus.
- Feeling of incomplete evacuation.
- Passage of mucous stool
- Bloating and abdominal distension.
- Weight loss
- Symptoms can be altered by emotional (ex.stress), social, cultural factors.

**Patient Information: -**

- OPD NO.- 62105
- Consulting Date – 26/05/2023
- NAME – XXXX
- AGE/SEX -34 Yrs./male
- ADDRESS- laxminagar, Raipur
- RELIGION- Hindu
- EDUCATION- Graduate
- MARITAL STATUS- Married
- SOCIO-ECONOMIC STATUS- Middle Class
- OCCUPATION- Bank clerk
- HABITATION-Sub-urban

**Chief complaints-**

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

**Presenting Illness-**

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

**Past medical history: -**

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

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

**Personal History –**

- Lifestyle –Sedentary
- Appetite – Good
- Dietary Habits – Irregular & Mixed
- Bowel habits – Irregular, predominantly diarrhoea
- Bladder habits – Normal
- Sleep – Normal
- Habits – Tea, gutkha
- Physical exercise –No exercise

**General examination –**

- General condition Good
- BP-130/80 mm/hg
- P/R-68/min
- R/R-18/min
- Height- 5ft 5 inch
- Weight-80 kg
- Patient was afebrile
- On examination of GI system, abdominal palpation shows mild tenderness and discomfort in abdomen.

**Ashtavidhpariksha -**

- Nadi – 68/min, gati(rate)-manda,yati(rhythm)-sama,aayati(volume)-sthula,
- Dosha - VK
- Mutra – 5-6 time/at day, 1-2 time/in a night, Ishat-pectabh Varn, samanyamutragandhi Gandh
- Mala – 3-4 time/day, Atisaran, adhhasamhati.
- Jivha – Niraam
- Shabda – Prakrit
- Sparsha – Snigdha
- Drik – Samanya

**Dashvidha Pariksha –**

- Prakriti – VK
- Vikriti – Dosha- VK
  - Dushya- Anna,Rasa
  - Adhisthan-grahani
- Saar – Mansa saar, Meda sar
- Samhanan – Madhyam
- Satva – Madhyam
- Satmya – Madhyam
- Aharshakti – Pravara
- Vyayamshakti – Avara
- Vaya – Madhyam
- Pramana – Madhyam (165 cm)

**Diagnosis –**

Grahani dosha (IBS)

**Differential Diagnosis –**

Atisar,grahani dosha

**Diagnostic Criteria:- Rome IV Diagnostic Criteria for “IBS”:**

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

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

**Assessment Criteria:-**

1. Muhurbaddhamuhurdrava mal pravritti .
  2. Shleshma mala pravritti.
  3. Adhmana
  4. Tikta amla udgar
  5. Aruchi
- 1.G0- Absent
  - 2.G1- Mild
  - 3.G2-Moderate
  - 4.G3-Severe

**Scoring Pattern-**

Grading of parameters taken for assessment:-

**1-MuhurvaddhaMuhurdrava Mala Pravriti (Frequency of Passing Stool)**

Grading	Criteria
	<b>MuhurvaddhaMuhurdrava Mala Pravriti</b>
<b>Grade 0</b>	Passing of normal consistency stool (1 time / day) in the morning.
<b>Grade 1</b>	Passing of stool (1-2 times /day) irregularly, without pain
<b>Grade 2</b>	Passing of stool (2-3 times / day) just after meals, irregularly with pain.
<b>Grade 3</b>	Passing of stool more than 4 times/day just after meals, irregularly with pain

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

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

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

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

**4-Tikta Amlodgara**

Grading	Criteria
	<b>TiktaAmlodgara</b>
<b>Grade 0</b>	No complaint
<b>Grade 1</b>	1-3 Days/week
<b>Grade 2</b>	3-5 Days/week
<b>Grade 3</b>	5-7 Days/week

**5-Aruchi**

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

**TREATMENT PLAN: -**

लीनं पक्काशयस्थं वाऽऽप्यामं स्राव्यं सदीपनैः।  
शरीरानुगते सामे रसे लङ्घनपाचनम्॥

As Acharya Charaka mentioned Deepana, langhana & pachana and koshashodhana is the line of treatment for the grahani dosha chikitsa. Deepan, pachana, langhana, kosta, shodhan and rasayanis chosen as the choice of treatment.

Our treatment modality is:-

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

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

**1<sup>st</sup> visit 21-01-2023:**

DRUG NAME	DOSE	ANUAPANA	TIME/DURATION
1. PanchamritParpati	250 mg		
Sutshekhar rasa	250 mg		
Laghugangadharchurna	3 gm		
Shunthichurna	1 gm	Takra	BD, After meal
2. Chirtakadi Vati	250 mg (2 Tab)	Ushnodaka	BD, Before Food
3. Kutajarishta	20ml	SambhagaJala	BD, After food
4. Bramhi vati	250 mg (2 tab)	Madhu	BD, After food

**2<sup>nd</sup> visit:- 05-02-2023**

Symptoms reduce markedly.

Repeat same medicine for more 15 days.

**3<sup>rd</sup> visit 02-03-2023**

**Hingwashtakachurna** added according to patient bloating complaints.

**Discussion:-**

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

Simultaneously, vatadi doshas i.e. samanavayu, pachaka pitta & kledaka kapha also become vitiated.

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

- The oral medications like Chitakadi Vati has an excellent activity of ama pachana. Panchmritaparpati, sutshekhar rasa & bilvamajjachurna has properties like deepana, pachana, grahi, shulaghna, vata-kapha shamana etc. and with the help of these properties, these drugs act as excellent medication in GI tract diseases.
- Brahmi Vati (with madhuanupana) is also a very good drug to prevent anxiety & stress, induce sleep & alleviate vata. By all of these medications patient was nicely improving day by day and it was continued upto 45 days.
- In the view of clinical features, excellent improvement happened, Moderate improvement was happened in defecation of just after food. So, overall improvement of the patient signified the success of the treatment.
- So, amapachana and Agni deepana are the main line of treatment of Grahaniroga. And by the application of medications, these were successfully done in this patient.

**Result and Observations:-**

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

**Conclusion:-**

In the present case, as the treatment given here like panchmritaparpati, Chitrakadi Vati, bilvamajjachurna, Brahmi Vati, kutajarishta along with pathyaushnodaka&takra had showed good remarkable improvement and response in this case suffering from Grahaniroga. This study has given us a successful as well as effective Ayurvedic management in Grahaniroga also curing its complications. Hence, it can be clearly depicted that IBS can be cured with special reference to Grahaniroga by its Ayurvedic management.

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