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# **The Ayurvedic Treatment Protocols of Grahani Irritable-Bowel Syndrome: Case Report**

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# ABSTRACT

The fast evolving present era is not only upfront in case of technological developments but also been in top for the manifestation of lifestyle disorders. The origin of almost all the diseases start basically from the food habits itself. The alterations in the gastro-intestinal system will later lead to the development of wide spectrum of diseases.Irritable Bowel Syndrome (IBS) is one among the common gastrointestinal functional disordersthat affects millions of people worldwide. IBS is characterised by a complex group of symptoms including abdominal pain or bloating, diarrhoea and constipation, which can affect the quality of life of an individual Called Grahani in Ayurveda. The word Grahani in ayurveda relates to Agni (digestive fire) which helps metabolism and digestion of food. The symptomatologies explained in IBS had been explained under a spectrum of diseases called Grahani.Grahani,according to Ayurvedic classics, is caused by the imbalance of Agni or digestive fire, which leads to the imbalance in the digestion metabolism. Grahani can be effectively treated through the combination of dietary and life style modifications along with Ayurvedic medicines and therapies. The treatment aims nothing but tobalance the digestive fire as well as to remove toxins from the body inorder to restore proper digestion as well as overall health. A successfully treated Grahani case using Shamana oushadhi's will be discussed in this article.

Keywords: Grahani, Pittadharakala, Vataj, IBS.

# **INTRODUCTION**

Grahani is the seat of Agni (digestive fire), it retains the ahara (until it gets fully digested) and then passes it into Pakwashya(intestine).[1] Grahani is one of the important parts of Mahasrotas (GI tract) and according to Acharya Sushruta 6th Pittadhara Kala situated between Amashaya and Pakwashaya is called Grahani.[2] The disease in which Grahani naadi gets vitiated by the aggravated doshas produced from the impairment of Agni is called as Grahani Roga.[3] Grahani roga is the advance stage of grahani dosa where not only vatadi doshas get vitiated, but also grahani naadi also gets vitiated.[4] Grahani roga is the disorder of digestive system due to vitiation of Pachaka pitta, Saman Vayu & Kledaka Kapha. It occurs with the lakshanas or symptoms like Muhurbaddha Muhurdravam (alternate passing of hard & loose bowel habits), sarujam ama-apakwa puti Malapravritti(painful foul smelling defaecation in form



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of ama-pakwa Avastha), bahusho bimunchati (defaecation in large quantity), Vairasya (tastelessness), Suktapaka(acid eructation). Trishna(excessive thirst), Daurbalya(weakness), manasa sadanam(depression) etc.[5] Due to malabsorption and lack of nutrition, various complications due to predominance of vata become manifested like swasa, kasa, gulma, hridroga, pliharoga, parikartika.[6] In modern concept, though the exact correlation of Grahani roga cannot be found but according to signs and symptoms and pathology of disease we can consider this clinical entity as Irritable Bowel Syndrome (IBS). The wall of intestine exhibits rhythmic contraction called the peristaltic movements, which helps moves the contents in the tract. In IBS the wall of the intestine becomes sensitive to even mild stimulus which causes excess abdominal cramps & hence the bowel movement alters. In India, IBS affects about 15% of adult population and the ratio of male and female is 3:1 which is just reverse to the ratio in the western countries. It is a functional disorder of GI tract. Clinically IBS shows symptoms like altered bowel habit i.e. constipation, diarrhoea or mixed type, abdominal pain and bloating, indigestion, heart burn, feeling of incomplete defecation, passage of mucus in stool etc. Once the disease manifests, secondary factors such as Apana vata and Pranavata also have significant role in the further progression of the disease. Grahani is such a disorder, where in its significance is emphasized by its inclusion among Ashtamahagadas. [7] It occurs with the symptoms like Muhurbaddha-Muhurdrava Malapravritti (voids frequently hard or loose stool), Udarshoola, Antrakujan, Arochaka, Klama etc. Most of the symptoms of IBS are clinically same as that of Grahani roga. So, we can treat IBS patient on the line of Grahani roga.

# ETYMOLOGY OF GRAHANI (Ch.Chi.15):

The word Grahani is derived from Dhatu "Graha" which means "to catch", "to hold" or "to get". Grahani is the specialized part of the Mahasrotas (Gastro intestinal system).

NIDANA (Ch.Chi.15/42-44) अभोजनादजीर्णातिभोजनाद्विषमाशनात्| असात्म्यगुरुशीतातिरूक्षसन्दुष्टभोजनात्||४२|| विरेकवमनस्नेहविभ्रमाद्व्याधिकर्षणात्| देशकालर्तुवैषम्याद्वेगानां च विधारणात्||४३|| दुष्यत्यग्निः, स दुष्टोऽन्नं न तत् पचति लघ्वपि| अपच्यमानं शुक्तत्वं यात्यन्नं विषरूपताम् ||४४||

# POORAVROOPA OF GRAHANI (Ch.Chi 15 /55)

पूर्वरूपं तु तस्येदं तृष्णाऽऽलस्यं बलक्षयः| विदाहोऽन्नस्य पाकश्च चिरात् कायस्य गौरवम्||५५||

#### SAMPRAPTI (Ch.Chi.15) SAMPRAPTI GHATAKA –

Dosha - Tridosha Dushya - Anna, Rasa Srotas - Annavaha, Purishavaha Adhishthan - Pittadharakala, Grahani



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Srotodusti Prakara - Atipravarti Agni - Manda Sadhya-Asadhyata- Kruchrasadhya

CHIKITSA SUTRA (Ch.Chi.15/75) लीनं पक्वाशयस्थं वाऽऽप्यामं स्राव्यं सदीपनैः| शरीरानुगते सामे रसे लङ्घनपाचनम्||७५||

# **CASE REPORT**

# **Case History**

A 28 year old male patient came with complaints of frequent defecation 10-15 times per day, passage of loose stools just after taking food which was alternating with constipation since 6 months.

# **Associated Complaints**

This was associated with passing blood and mucus along with stools occasionally since 6 months. Also patient noticed intermittent onset of pain in abdomen and lately loss of interest in taking food since 3 months.

# **History of Presenting illness**

Patient was apparently normal before 6 months. Then gradually, he started developing difficulty in passing stools at first which was associated with abdominal pain and abdominal distension. There after few days, this difficulty in passing stools was alternating with passage of loose stools and occasionally patient was also passing blood and mucus along with the stools.

## **Treatment History**

For the above mentioned complaints, the patient had consulted a general physician, 2 months back, who advised him to take an antacid (pantocid), probiotic (derolac) and an antibiotic (rifagut) for 2 weeks by which no significant changes in symptoms were noticed.

# **Personal History**

Diet-Vegetarian

Appetite-Good

Bowel-Alternative constipation and loose stools since 6 months.

Bladder-1-2 times a day, no burning micturition

Sleep-Undisturbed 9-10 hours of sleep at night, no day sleep

Habits-Eats oily, fried foods and dairy products regularly

#### **Clinical Examination**

#### **1.General Examination**

General Appearance:Fair Built: Hyposthenic Nourishment:Poor Pallor: Absent Icterus: Absent Cyanosis:Absent Koilonychia: Absent Lymphadenopathy: Absent



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Odema: Absent Vitals BP-120/80 mm of Hg PR-80b/m Temp-97.8°F SPO2-98% Weight-40kgs Height-140cms Ashtasthana Pareeksha Nadi-80b/m Mutra-1-2times/day Mala-Alternate hard and loose stools Jihwa-Aliptha Shabdha-Prakruta Sparsha-Anushna Sheeta Druk-Prakruta Akruthi-Krisha Dashavidha Pareeksha Prakruti-Vata -Pittaja Vikruti-Pitta pradhana Tridosha Sara-Madhyama sara Samhanana-Asamhata Pramana-Madhyama Satmya-Madhura pradhana Shadrasa Satva-Avara Satva Ahara Shakti-Madhyama Vyayama Shakti-Madhyama Vaya-Yuva Systemic Examination 1. Respiratory System: NVBS heard, no added sounds 2. Cardio Vascular System: S1 and S2 heard, no cardiac Murmurs 3. Central Nervous System: Conscious and well oriented to time, place and person 4. Gastrointestinal System:

P/A -soft and non-tender ,No Organomegaly

Borborygmus Present

#### **Diagnostic Criteria**

The case was diagnosed as Vataja Grahani based on the presence of symptoms explained inour classics[8]. The case was diagnosed as Irritable Bowel Syndrome using Rome IV Criteria as well as Manning's criteria[9] and both Grahani as well as IBS had some sort of similarities in the symptomatologiesmanifested. Hence, line of treatment explained in Grahani was adopted here.



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#### Table no.1 Rome IV Criteria

Recurrent abdominal pain on average atleast 1 day/week in the last 3 months,	Criteria satisfied by
associated with two or more of the following criteria	the patient
1. Related to defecation	$\checkmark$
2. Associated with a change in the frequency of stool	$\checkmark$
3. Associated with a change in the form (appearance) of stool	$\checkmark$

#### Manning's Criteria

Manning Criteria	Criteria satisfied by the patient		
Looser Stools at pain onset	$\checkmark$		
More frequent stools at pain onset	$\checkmark$		
Pain relief with defecation	$\checkmark$		
Visible abdominal distension	$\checkmark$		
Mucus per rectum	$\checkmark$		
Feeling of incomplete evacuation	$\checkmark$		

# TREATMENT PLAN

#### **Drugs:**

- 1. Tab. Koshtasanjeevani 1TID for 30 days after food
- 2. Mustakarishta 1tsp TID for 1 month after food
- 3. Panchamrita Parpati + Pravala Bhasma + Guduchi Satva 125mg BD for 15 days after food
- 4. Cap. Ashwagandha 1 OD for 15 days at bedtime
- 5. PittashekharaRasa 1 BD after food

	Normal once daily	0
	Alternative days	1
1.Baddha mala	Once in two days	2
	once in three days	3
	Once in four or more days	4
	Normal once daily	0
2.Muhur drava mala	Twice daily	1
pravritti	3-4 times daily	2
	5-6 times daily	3
	>6times daily	4
	No abdominal pain	0
3. Udara shula or	Occasional/rarely abdominal pain	1
discomfort	Intermittent lower abdominal pain	2
	Relieved by passage of flatus and stool	3
	Continuous pain not relived by passage of flatus and stool	4



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	No sense of incomplete evacuation	0
4. Sense of	Sense of incomplete evacuation till two motions	1
incomplete evacuation	Sense of incomplete evacuation till 3 to 4 motions	2
	Sense of incomplete evacuation till 5 to 6 motions	3
	Sense of incomplete evacuation even after 6 motions	4

#### **Table 3: Objective Parameters.**

	Semisolid	0
1.Consistency	Solid	1
	Very hard stools with pellets	2
	Watery stool	3
	No visible mucus in stool	0
2.Amayukta mala (mucus in stool)	Visible mucus sticked to stool	1
	Passage of mucus with frequent stool	2
	Passage of large amount of mucus in stool	3

#### Table 6: Patient Assessed Outcome.

Sl.no	BT	AT	28 <sup>th</sup> day	45th day
Baddha mala	2	1	0	0
Muhur drava mala pravritti	1	1	0	0
Udara shola	3	2	1	0
Sense of incomplete evacuation	2	1	0	0
Conisitency	1	0	0	0
Amayukta mala	1	0	0	0

# DISCUSSION

Ayurveda the science of life is having the great heritage of healing diseases.

**Role of Modern Diagnostic Criteria's in Grahani** The criteria's for diagnosis of IBS have been updated timely by the contemporary medical fraternity. The two of the most valued criteria's for IBS diagnosis are Rome IV and Manning's criteria. If we analyse these criteria's deeply, we can infer that these criteria's cover most of the symptomatologies of Grahani Roga such as Muhurbadha muhurdrava mala pravrutti etc. Hence, if we understand IBS as nothing but Grahani Rogain the classics, we can easily manage it in a very good manner.

**Tab. Koshta sanjeevani** Koshta Sanjeevani tablet is a proprietary medicine manufactured by the pavman pharmaceuticals Bijapur, Karnataka. The ingredients include Abhraka bhasma, Kajjali, Hingu, Ajamoda, Bhringaraja and other drugs with Deepana and Pachanaproperties. This formulation mainly corrects Vataand Pitta dosha'sand relieves indigestion generated symptoms like abdominal distension, pain etc. Since, inGrahani, all the Tridosha'sare involved, this medicine acts well to relieve symptoms.

**Mustakarishta** Musta(Cyperus rotundus) has Katu, Tikta and Kashaya Rasa's,Laghu and Ruksha guna's, Sheeta Virya and Katu Vipaka.It is having Kapha pittahara guna's, Deepana, Pachana,Grahi, Jwarahara, Atisaraghna, Kanduhara, Vranashodhana and Ropana properties[10-13].Cyperus rotundus has the



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properties of antimicrobial activity, anti-laceration/ulcer activity, analgesic activity, anti-inflammatory activity, anti-diarrhoeal activity, antipyretic activity due to the presence of the chemical constituents such as flavonoid, tannin, triterpenoids, sesquiterpenes, cyperolone, cyperone, copaene, cyperene, cyperene, cyperenone[14].

**Panchamrita Parpati, Pravala Bhasma and Guduchi Satva** Panchamrita Parpati Grahani manifests mainly because of Mandagni and hence, the restoration of Agniis the main focus on the treatment of Grahani. The process of Parpatipreparation is aSamskaraprovided through Agni. The properties responsible for increasing appetite such as Ushnaand Deepana guna's are all derived from this Agni. Due to the Ushna guna, Vata shamanahappens, as a result of which the Atipravruttiof Malastops, which is the main symptom of Grahani. By virtue of its Deepana, Pachanaas well as Ushna guna's, the intestinal ducts gets opened and proper absorption of Rasa dhatu occurs which will eventually relieve the associated symptoms of Grahanisuch as Pandu, Gulma, Udaraetc. Along with this the Grahi guna of Parpatialso helps in the proper absorption of iron etc and provides strength to the patients along with relieval of associated symptoms

**.Pravala Bhasma** Pravala Bhasmais having Deepanaand Pachanaproperties[15] and it maintains the normalcy of Agni. Due to Sheetha veerya, it does Pitta Shamana. Pravala bhasmais also useful in relieving the burning sensation as well as dyspepsia[16] and hence can be a better choice with the combination of other drugs in Grahani.

**Guduchi Satva** Guduchi Satva used has Tridoshashamaka, Deepaniya, Grahi, Rasayana properties and hence was used in the management of this case. It acts as a rejuvenator, useful in irritable bowel syndrome, cures skin disease, urinary tract infection, jaundice[17]s. By virtue of the Vata pittaharaproperties of Guduchi, the correspondingDoshajasymptoms gets corrected upto an extent by the use of Guduchi Satvain Grahanimanagement.

Capsule ashwagandha for promoting physical andmental well-being was adviced

**Pittashekhar Rasa** The ingredients in Pittashekhar Rasa are Sootashekhar Rasa, Bilva Majja, Aragvadh Majja, Kalamegha, Shankha Bhasma, Shouktik Bhasma, Kapardika Bhasma, and Avipattikar Choorna, that is used to treat conditions caused by vitiated pitta.

#### CONCLUSION

In conclusion grahani can be controlled by using ayurveda treatment for long period time with proper diet.Shamana Ousadhi's provided a very satisfactory result in the managements of all the presenting complaints in the above discussed Grahani case. Its effect can be ascertained only if the study is conducted in larger number of cases. This treatment protocol could be explored further on larger sample and standardisation of this treatment modality can be established which will be helpful in many ways to doctors as well as patients suffering from Grahani.

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