



Ayurvedic Management Of Jaundice) – A Case Study

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ABSTRACT

Background: Jaundice is marked by a yellowish tint in the skin, sclera, mucous membranes, and bodily fluids, caused by elevated bilirubin levels. In *Ayurveda*, this condition is described under the terminology *Kamala Vyadhi*. Here we discuss a case of 25 years female presented with chief complaints of *Kshudha Mandhya* (loss of appetite), *Daurbalya* (weakness), *Hrullas* (Nausea), *Mutra peetata* (yellow discolouration of urine), *Peeta-anagata* (yellowish discolouration of skin and sclera). Since 5 days was reported to Department of Agadatantra OPD in SDM College of Ayurveda, Hassan. Case was diagnosed as *Kamala* and treated as per principles (*Chikitsa sutra*) of treatment.

Methods: Patient was treated with *mrudu shodhana* (mild purificatory measures) along with *shamanoushadhis* (oral medications) for the period of 30 days.

Results: patient symptoms were significantly reversed by 7th day of treatment and showed marked increase in appetite, reduction of *Daurbalya*, complete reversal of abnormal biochemical parameters at the end of 30 days.

Conclusion: Case was successfully treated using *Ayurveda* principles and found to be significant to obtain symptomatic relief & reversal of abnormal biochemical entities.

Keywords: Ayurveda, *Kamala*, Jaundice, *Virechana*

INTRODUCTION

Jaundice is characterized by a yellow discoloration of the skin, sclera, and mucous membranes, which results from either increased bilirubin production or decreased hepatic clearance. Elevated bilirubin levels are classified into two types: unconjugated (indirect) and conjugated (direct). The presence of bilirubin in the urine confirms conjugated bilirubin. Industrialization has significantly altered our lifestyle, particularly our eating habits, with an increase in the consumption of spicy and fast foods. Additionally, there is a rising prevalence of hepatitis due to the growing population living in congested areas, poor sanitation, polluted water, and the consumption of unhygienic food. Often, patients present with symptoms of feeling "sick and tired," which is later diagnosed as *Kamala* (jaundice). Acharya Charaka explained

Kamala as *Pittaja Nanatmaja Vyadhi* and *Raktapradoshaja Vyadhi*. Acharya Vaghbata and Sushruta have mentioned *Kamala* has advanced stage of *Pandu Roga*. When a *Pandu Rogi* (a person cured of *Pandu*) continues to consume *Pitta VardhakAahar* (foods that increase *Pitta*), it causes excessive aggravation of *Pitta Dosha*, which can subsequently lead to *Kamala*.

Acharya Charaka mentioned *Haridra Netra*, *Haridra TwakNakhanana* (eyes, skin, nails and face become yellow), *Daah*, *Avipak*, *Dourbalya* as symptoms of *Kamala*. The clinical features of jaundice include abdominal pain, nausea, anorexia, and fatigue. These symptoms are also described in cases of *Kamala*. Therefore, based on their common characteristics and pathology, *Kamala* can be correlated with jaundice. Acharya Charaka has mentioned "*Kaamli Tu Virechanam*" as a treatment principle. The basic concept is that the vitiation of *Rakta* and *Pitta* are responsible for *Kamala*. Timely administration of *Virechana* and *Shamana Chikitsa* helps to eliminate the vitiated *Rakta* and *Pitta*.

CASE REPORT

A 25 years female was approached to OPD, Department of Agada Tantra in SDM College of Ayurveda and Hospital Hassan with chief complaints of *Kshudha mandhya* (loss of appetite), *Daurbalya* (weakness), *Hrullas* (Nausea), *Mutra peetata* (yellow discolouration of urine) and *Haridra Netra*, *Haridra Twak Nakhanana* (yellow discolouration of eyes, skin and nails) since 15 days.

HISTORY OF PRESENT ILLNESS

The patient was asymptomatic until 5 days ago, when she began to experience lack of appetite, nausea, vomiting, weakness, and discolored urine. She approached our hospital's SDM College of Ayurveda at the *Agada Tantra* outpatient department. The patient underwent a clinical and laboratory examination (Liver function test), found that abnormal rise in the bilirubin and other values indicative of Jaundice.

HISTORY OF PAST ILLNESS

Nothing significant, no history of taking any hepatotoxic drugs in recent past.

PERSONAL HISTORY

Bowel – constipated

Urine –yellowish discolouration of urine

Appetite - poor

Sleep- altered

Built – Normal

No history of any type of addiction like smoking, alcohol.

SYSTEMIC EXAMINATION

CNS - well oriented to person place and time

Respiratory system - no added sound present, no obvious deformity

Digestive system - loss of appetite

Urogenital system - yellowish discoloration of urine

Table 1- Asthavidha Pareekasha

| | |
|---------------------------|----------------------|
| 1. <i>Nadi</i> (Pulse) | 70/min |
| 2. <i>Mala</i> (Stool) | <i>Vibandha</i> |
| 3. <i>Mutra</i> (Urine) | <i>Peeta varna</i> |
| 4. <i>Jihwa</i> (Tongue) | <i>Ishat Pita</i> |
| 5. <i>Shabda</i> (Speech) | <i>Prakrut</i> |
| 6. <i>Sparsha</i> (Skin) | <i>Peeta varna</i> |
| 7. <i>Druk</i> (Eyes) | <i>Netra peetata</i> |
| 8. <i>Akriti</i> (Shape) | <i>Prakrit</i> |

Diagnosis:

In consideration of the findings of clinical examination and investigations case was diagnosed as Kamala (Jaundice)

MANAGEMENT:

1. Patient was managed on OPD basis with *Mrudu Virechana* and *Shamana Aushadi* for the period of 30 days
2. During the course of treatment patient was instructed to abstain from *Ahara* and *vihara* which is responsible for *Pitta -Rakta Dusti*.

Table -2: LIST OF PRESCRIBED MEDICATIONS

| | Name of the medicine | Dose & Duration |
|---|--------------------------------|---|
| 1 | <i>AvipathikaraChurna</i> | 3gms at Night with warm water for 30 days |
| 2 | <i>Vasaguluchyadi Kashayam</i> | 20 ml thrice a day with Luke warm water before food for 30 days |
| 3 | Tab Liv 52 DS | One tablet thrice a day with Luke warm water after food for 30 days |
| 4 | <i>Bhumyamalaki Swarasa</i> | 50ml in Empty stomach once daily for 30 days |

Table 3: Results (Liver function test of all visits)

| | Assessment Parameter | 01/07/2024 (0 th Day) | 09/07/2024 (7 th day) | 31/07/2024 (30 th day) |
|---|----------------------|----------------------------------|----------------------------------|-----------------------------------|
| 1 | Sr.Bilirubin Total | 3.8mg/dl | 1.17mg/dl | 0.6mg/dl |
| 2 | Direct | 2.7mg/dl | 0.90mg/dl | 0.4mg/dl |
| 3 | Indirect | 1.1mg/dl | 0.27mg/dl | 0.2mg/dl |
| 4 | SGOT | 865.0 U/L | 81.2U/L | 28.4mgU/L |
| 5 | SGPT | 892.1U/L | 97.5U/L | 30.4mgU/L |

The result was appreciable in both the clinical and laboratory criteria. Significant relief was obtained in terms of subjective symptoms like relief in yellowish colour of eyes and urine, loss of appetite, weakness which was complimented by normalizing the biochemical derangement of liver function parameters like reduction in serum bilirubin level.

DISCUSSION

In Ayurvedic *Samhitas*, *Kamala* is explained under *Raktavaha Strotas Vyadhi*. Regular consumption of *Ushna- Tikshna Ahara* by a *Pandurogi* leads to the vitiation of *Pitta Dosha*. Due to the intake of *Katu*, *Amla*, and *Lavana Ahara*, *Pitta* becomes vitiated, causing hypofunction of *Jatharagni*. This results in the production of *Amavisha* and ultimately leads to the disease known as *Kamala*. As it is *Pitta* and *Rakta Pradoshaj Vyadhi* it will be managed by *Madhura Tikta* and *Kashaya Rasa*. In *Ayurveda*, various formulations are described for the management of *Kamala* as a supportive medicine. In this case study formulations like *Avipathikarachurna*, *Liv52*, *Vasaguluchiyadi Kashaya*, *Bhumyamalaki Swarasa* all these preparations contain the drugs having *Tikta Rasa*, *Deepana*, *Pachana*, *Rechan*, *Pittakaphashamaka*, *Yakruttotejaka* and *Rasayana* properties.

Patient was given with *Avipathikarachurna* 3gms at night. which it regulates of *Pitta* secretion, *Agni Deepana*, *Mala-Mutra Vibhandhanasak*. *Liv 52* contains herbs which are known to prove functional efficacy of liver with antioxidant, stimulant, and antibacterial properties. *Vasaguluchiyadi Kashayam* explained in *Ashtanga Hridayam Chikitsa Sthana* contains *Vasa*, *Guduchi*, *Triphala*, *Katuki*, *Bhunimba Neem* indicated for mainly for *pandu* & *kamala* all ingredients has potent Hepato protective effect. *Bhumyamalaki Swarasa* *Phyllanthus Niruri* (*Phyllanthus Niruri*) is well established Hepatoprotective herb which is helpful in enhancing the functions of the liver and it contains *Phyllanthin* which reduces the liver marker enzymes and the levels of collagen. It has a *Pitta* balancing property which manages the *pitta dosha* in the body.

CONCLUSION

Results of this care demonstrate *mrudu virechana* and *shamanoushadhis* resulted in significant reversal of clinical symptoms and biochemical parameters within 30 days of treatment.

REFERENCES:

1. Davidson, Edited by brain R. Walker, Davidsons Principles and practice of medicine, 22nd edition, Diabetic neuropathy, page 831, year-2006
2. Shastri A, Shusrutasamhita with Hindi commentary, chikitsa sthana, chapter 1, Verse 3, Reprinted. Vara-nasi, Chaukhamba Sanskrit Sansthan Prakashan;2013:1
3. O.P. Vyas, Arti Dixit, Abhishek Kumar Tyagi. Management of Kamala (Jaundice) with Ayurveda Treatment - A Case Study. J Ayurveda Integr Med Sci 2023;09:187-190.
4. A Case Report Regarding Management of Kamala through Ayurveda. International Ayurvedic Medical Journal {online} 2021 {cited November 2021}
5. Shukla VD, Tripathi RD, Charak Samhita of Agnivesh Elaborated Wit Part 2 Chikitsa Sthan;Pandu Rog Chikitshitam: Chaper 16 Verse no. 34 ed. 2007 Varanasi Choukhamba Sanskrit Pratishtan Page No. 399