

A CASE STUDY ON GRAHANI AS AN AGNI ADHISHTHANA

Dr. Tanvi Singh*

Associate Professor, Department of Kayachikitsa, Smt. Urmila Devi Ayurvedic College & Hospital, Hoshiarpur, Punjab, India.

*Corresponding Author: Dr. Tanvi Singh

Associate Professor, Department of Kayachikitsa, Smt. Urmila Devi Ayurvedic College & Hospital, Hoshiarpur, Punjab, India.

Article Received on 20/11/2020

Article Revised on 10/12/2020

Article Accepted on 31/12/2020

ABSTRACT

Grahani is depicted as an Agni Adhishthana by the greater part of the acharyas. Mandagni is a main driver of Ama Dosha and it is the critical factor for indication of the greater part of the sicknesses. Among them, Grahani is the prime illness of gastro-intestinal parcel and seen frequently in everyday practice. Grahani term identified with the seat of agni (stomach related fire), which help in the digestion and absorption of food. The old content of ayurveda depicted that ingestion, processing, retention and digestion of Aahaar is directed by Grahani. At the point when this Agni becomes; mandagni then inappropriate processing of ingested food leads obsessive condition named as Grahani roga. Essentially Trividh irregularities of the Jatharagni likewise named as Grahani dosha. Grahani is an infection which influences huge populace around the world particularly in non-industrial nation and related with ill-advised food propensities alongside distressing way of life. The pathogenesis of Grahani roga works around Agnidosh which related with weakened stomach related capacity of stomach related fire. Ayurveda depicted different treatment modalities for the administration of Grahani roga, for example, utilization of spices and plan, yoga and way of life adjustment. Present article summed up ayurveda point of view of Grahani roga and its administration by ayurveda standards and life style modification.

KEYWORDS: Grahani, Kutaja, Avipittakara Churna, Chitrakadi Vati.**INTRODUCTION**

The sickness Grahani Roga is clarified in all old style writings of Ayurveda. Its Lakshanas and Chikitsa are referenced in Charaka Samhita, Sushruta Samhita, Astanga Hridaya, Madhavanidana, Sharangadhara Samhita and Yogratnakar. For Grahani Roga, it is referenced in the writings.

HETU

Agni gets vitiated as a result of the exorbitant quick, heartburn, over eating and unpredictable eating, admission of unwholesome substantial, chilly, unreasonably unctuous and contaminated food. Additionally if the loose bowels isn't appropriately treated, and the individual beginnings eating ill-advised eating regimen without stomach related fire turning out to be ordinary, at that point this illness is made. Arsha, Atisara, and Grahani are create because of Agnimandya and they can be made from one another. Consequently in all these sickness, insurance of Agni is the main factor.

SAMPRAPTI

Because of ill-advised eating routine, stomach related fire gets vitiated causing acid reflux. Because of this, Grahani becomes frail and the illness is made. The infection starts because of Agnimandya, Its fundamental

site is small digestive tract and the side effects are seen in field of Samana and Apana Vayu.

PURVARUPA

Thirst, laziness, postponed absorption, weight in body, anorexia, gas in midsection and something retching. (Ch.Chi. 15/55 and M.N.).

ROOPA

The afflicted individual voids stool in enormous amount either in strong or fluid structure and thirst, anorexia, aversion of mouth, excessive salivation, Tamaka Shwas, oedema in leg and hands, torment in bone, retching, fever, and eructation having metallic smell, smell of Ama, unpleasant as well as acrid tastes.

LITERATURE

1) Samhita Kaal

In Charaka Samhita – Acharya Charaka portrayed Grahani Roga in Chikitsa Sthana section 15.

In Sushruta Samhita – Acharya Sushruta portrayed Grahani Roga in Uttaratantra section 40.

2) Sangraha Kaal

In Astanga Hridaya – Acharya Vagbhatta depicted Grahani Roga in Nidan Sthana part 8, and Chikitsa Sthana section 10.

In Madhava Nidana – Grahani Roga depicted in section 4.

In Yoga Ratnakara – Grahani Roga portrayed in Purvadhagat.

In Chakradatta – Grahani Roga depicted in part 4.

Case Presentation

A clinically analyzed 37 years of age hindu wedded patient dwelling in punjab, with boss protests of increment recurrence of movement and stomach torment after admission of food and weight reduction additionally since 4 years.

Tolerant was clinically analyzed since two years and take treatment from various allopathic emergency clinics yet not discovered a lot of alleviation. All manifestations were steadily expanded and changes into ulcerative colitis (in 2014 diffuse ulceratives cohorts found in colonoscopy).

General Examination

On assessment of patient gentle whiteness was available and its vitals were inside typical cutoff. Craving and dozing design was typical, adjusted inside propensities i.e.4 recurrence in day and 3 recurrence in night with delicate consistency of stool (free movement). Micturition recurrence was likewise increased(in night multiple times). No irregularity recognized in CVS, CNS and RS. Delicacy present in P/An assessment. On assessment of per rectum, little territories of ulcerations of bodily fluid layers were seen. There was no H/O of mass/rectum prolapsed.

Treatment plans

Mode of action of Avipittakar Churna

Avipittakar churna 03 grams OD is often used to treat imbalances in the dosha known as pitta and, in turn, promote healing from various disorders.

Mode of action of Kutaja Ghan Vati

Kutaja Ghana Vati 1 BD is a customary ayurvedic cure that has powerful enemy of dysenteric, antidiarrheal, hostile to amoebic activity and haemostatic properties for treating and relieving a crowd of diseases including looseness of the bowels, the runs, fractious entrail condition, malabsorption disorder, intestinal contaminations and diverse draining problems.

RESULT

The patient was improved slowly in the beginning. He continued the treatment and periodically assessed clinically. He was improved further and now he is completely symptoms free and taking some oral medicine like (Dadimaashtak Churna, Bilvadi Churna, Chitrakadi Vati).

OBSERVATIONS AND DISCUSSION

Grahani is a condition where Agni, the stomach related force, should be to blame, when Agni become discouraged, Ama Dosha (undigested waste material)

aggregates and it passes in the stool. So point of treatment ought to be to improve to strength of Agni, accordingly decreasing the development of Ama.

Grahani is an illness of Agni with differing levels of Dosha association. The over the top utilization of nourishments and way of life., at first upset processing of food and prompting development of Ama that gets stored between the villi of digestive system, framing a smooth coating that debilitates the typical capacity and insusceptibility of the digestive organs. Vata Dosha in the lower colon is additionally irritated and in the beginning phases impedes the Pitta and Kapha channels, causing inflammation, mucous amassing and oedema.

Kutaj and Bilva both are Sangraahik properties. So both are tie up and hold the stool and helps into diminishing the recurrence of free movement.

Avipattikar Churna is additionally demonstrated for Agnimaandjanya sicknesses Avipattikar Churna remedies the activity of Apan Vata, which helps in a legitimate low of defecation.

Kutaj Ghana Vati is an Ayurvedic definition, which pacifies each of the three Dosha. Particularly it pacifies irritated Kapha and Pitta in stomach related framework. Kutajghana Vati invigorates stomach related and reestablish absorption by normalizing the capacity Grahani organ.

Chitrakadi vati is given as a supportive line of treatment in mid of the food. Which gives an excellent results.

CONCLUSION

As the treatment given here demonstrated great noteworthy improvement and reaction alongside exacting eating routine gave us an expectation and another finding was discovered fruitful as a potential compelling Ayurvedic fix in Grahani(IBS) Roga. On the premise of above conversation it tends to be presumed that Ayurvedic treatment is effective in administration of Grahani(IBS). It is effectively adoptable in routine practice and furthermore protected, financially savvy and no adverse results.