



**A CASE DISCUSSION ON BIPEDEL OEDEMA (*SHOTHA*)**

\*Vd. Ujwala V. Pawar<sup>1</sup> and Vd. Yasmin F. Shaikh<sup>2</sup>

<sup>1</sup>Professor, Dept. of Rognidan & Vikritivigyan, Govt. Ayurved College, Nanded, Maharashtra.

<sup>2</sup>P.G. Scholar, Dept. of Rognidan & Vikritivigyan, Govt. Ayurved College, Nanded.

\*Corresponding Author: Vd. Ujwala V. Pawar

Professor, Dept. of Rognidan & Vikritivigyan, Govt. Ayurved College, Nanded, Maharashtra.

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**ABSTRACT**

Oedema is explained as *Shotha* or *Shopha* in *Ayurveda*. We come across the edema conditions in different local areas such as face, feet, through the body or half of the body. Even though it usually appears as a symptom, in so many diseases related to vital organs like kidney, liver, heart, lungs, brain etc. It is condition which is characterized by fluid retention in body's tissues which results in swelling.<sup>[4]</sup> Painless swelling of feet & ankles is common problem. Abnormal build up of fluid in ankles, feet & legs can cause swelling. This fluid build up swelling called Oedema. The patient came to us with complaints of bipedal pitting oedema, loss of appetite, Indigestion, General weakness & Dyspnoea on exertion. By modern therapy aims to treated oedema with drugs that expels excess fluid in the form of urine (diuretic).<sup>[4]</sup> Long term management typically focused on treating underlying causes of swelling. So, the treatment like *Shamana chikitsa* drugs- *Punarnava*, *Gokshura*, *Shunthi Kashaya* act as a diuretic action (*mutral*), reduced oedema (*Shothaghna*), improve appetite (as a *Deepan & Aampachan* ).<sup>[8]</sup> This treatment was selected in present case. The result replicated the original study and showed substantial improvement in the patient.

**KEYWORDS:** Bipedel (pitting) Oedema, *Shotha*, *Appetizer*, *Shothaghana*, *Mutravirechniya*(diuretic).

**INTRODUCTION**

Oedema is defined as a state, in which there is increased collection of fluid in interstitial spaces. This causes an increase in weight and swelling at places where the tissue is lax and fluid accumulation is possible, e.g. puffiness of face, around ankle, bipedal oedema etc.<sup>[4]</sup> The causes of bipedal oedema (lower extremities) are overweight, blood clot in legs, Anaemia, leg infection, Injury to legs, Long period standing, use of antihypertensive drug etc. Bipedal oedema may be sign of herat failure, Kidney failure or Liver failure. In these conditions, there is too much fluid in body.<sup>[4]</sup> Modern treatment of oedema depends on underlying cause, reversal of the underlying condition is the basis of treatment; dietary sodium restriction and diuretic therapy in pitting Oedema. According to *ayurveda*, *Kapha*, *Rakta* & *Pitta* enter in the vessels (*Bahya Sira*) and afflicts *Vata Dosha*.<sup>[1]</sup> As a result, the channel of circulation gets obstructed which spreads to the nearby areas, leading to *Shotha*(Swelling). Its treatment include *Agnideepan & Aampachan* – *Shunthi*<sup>[5]</sup>, Helps to increase appetite & to destroy *Samta*. *Shothaghna*, *Raktpittashamak* & *Mutral* is *Punarnava*<sup>[5]</sup> To reduce swelling, helps to decrease accumulate fluid. *Gokshura* acts as *Mutravirechaniya*<sup>[5]</sup> (Diuretic).

**CASE REPORT**

Patient Name- XYZ  
Gender – Female

Age- 55yr

Built – Medium

DOA – 26/2/2017

**Chief Complaints**

A 55 yr ol female patient presenting complain of Bipedel Pitting Oedema, Loss of Appetite, General weakness & Dyspnoea on exertion since 1 month.

**Past History**

Patient had history of Hypertension since 10 year.she was taken medicine for HTN. Patient had history of Renal calculi operated 1 year before.She had history of Diabetes Mellitus since 5 year & taken medicine for DM. And also haematinic medicine (Orofer XT) taking patient since 1 month.

**ON EXAMINATION**

On Inspection at Lower extremities there was Bipedel Oedema noted. Palloriness noted over conjunctiva. On Palpation Pitting Oedema over both legs, 2<sup>nd</sup> grade oedema 4mm sized depression after pressing by thumb.

**O/E**

Nadi (pulse) – 80/min

Mala (Stool) – Samyaka

Mutra (Urine) – Samyaka

Jivha (Tongue)- Saam

Agni – Mandagni  
 Shabda (Speech)- Normal  
 Sparsha (Skin)- Normal  
 B.P.- 130/80 mm Hg

### SYSTEMIC EXAMINATION

Cardiovascular system – S<sub>1</sub> S<sub>2</sub> normal, Sinus Rhythm.  
 Central Nervous System – Conscious & Oriented.  
 Respiratory System – Air entry bilaterally Clear.

### Investigation

HB % - 9.2 gm /dl  
 BSL- Fasting- 113 mg/dl  
 PP – 130 mg/dl  
 Urine- Albumin- Nil  
 Sugar – Nil  
 ECG- Sinus Rhythm.  
 Mild Left Axis Deviation in 3<sup>rd</sup> lead.  
 Chest X-Ray – Normal finding.

DOA- 26/2/2017

DOD – 8/3/2017

### MATERIAL AND METHOD

#### Method

- Centre of study: Government Ayurved Hospital, Nanded.
- Simple random single case study.

#### Material – Drugs

1. *Shunthi* (Zingiber Officinale) – It's properties are *Laghu, Snigdha, Katu rasa, Madhur Vipaak, Ushna*. It is Digestive in action, used to influence all *Tridoshas*. It is also used for *Shotha* (swelling), *Hridroga, Anaha, udhra roga, shool, agnimandya* etc.<sup>[8]</sup>
2. *Punarnava* (Boerhavia diffusa) – It's properties are *Madhura, Tikta, Kashaya Rasa, Laghu, Ruksha Guna, Katu Vipaka, Ushna Veerya*. It's is used as *Shoth Nashana* (Reduces Swelling), *Panduhara* (useful in anaemia), *Hrudroga* (Cardiac disorder). *Punarnava* is an excellent diuretic ( *Mutral*).<sup>[8]</sup>
3. *Gokshura* (Tribulus terrestris) – It's properties are *Madhura rasa, madhura veepaka, Sheet veerya, Guru, Snigdha guna*. It balances all *Tridosha*. Its action are *Shothahara* (Reduces Swelling) and *Mutravirechaniya* (Diuretic).<sup>[8]</sup>

Medicine (Drugs)	Method of peraration Decoction	Dose	Duration
1.Shunthi [Zingiber Officinale] 2.Punarnava [Boerhavia diffusa] 3.Gokshura [Tribulus terrestris]	Take each 5 gm <i>Choorna</i> of this medicine to made decoction. (Kashaya/Kwatha )	40ML Kashaya.	40 ML kashaya BD for 7 days.

### Observation in Present Case

Date	Grading Of Pitting Oedema Over Shin of Tibia		Circumference			
			At Calf Muscle	At lat.Malleolus		
	Right Leg	Left Leg	Right Leg	Left Leg	Right Leg	Left Leg
27/2/2017	Grade 2 4mm Size	Grade 2 4mm Size	24.5cm	24.5cm	23 cm	23 cm
28/2/2017	Grade 2 4mm	Grade 2 4mm	24.5 cm	24.5cm	23cm	23cm
1/3/2017	Grade 2 4mm	Grade 2 4mm	24.3 cm	24 .3 cm	22.5cm	22.5cm
2/3/2017	Grade 1 2mm	Grade 1 2mm	24cm	24cm	22.5cm	22.5cm
3/3/2017	Grade 1 2mm	Grade 1 2mm	23cm	23cm	22cm	22cm
4/3/2017	Grade 1 2mm	Grade 1 2mm	22cm	22cm	21cm	21cm
5/3/2017	Grade 0 No Pitting Oedema	Grade 0 No Pitting Oedema	21 cm	21cm	20 cm	20cm

### Circumference of leg and Ankle joint before treatment.

	Right Leg	Left Leg
At Calf Muscle	24.5 cm	24.5cm
At Lateral Malleolus ( Ankle Jt )	23 cm	23 cm

**Circumference of Leg and Ankle Joint After Treatment.**

	<b>Right Leg</b>	<b>Left Leg</b>
At Calf Muscle	21 cm	21 cm
At Lateral Malleolus ( Ankle Jt )	20 cm	20 cm

**DISCUSSION**

The Classical Texts has described that *Shothaghna* drugs like *Punarnava* & *Gokshura* which acts also along with *Mutravirechaniya* (Diuretic) action to reduce Oedema. *Punarnava* root *Churna* acts as a *Shothanashak*, *Raktapittashamak*, *Hridya* so, ultimately useful for Oedema with hypertension. In this case patient had history of HTN. So, *Punarnava* is also Cardiotonic action. *Gokshura Churna* is a *Mutravirechaniya* (Diuretic) helps to expel out the fluid & reduced oedema. *Shunthi Churna* act as a *Deepan* & *Pachaniya*, helps to increased appetite. So, the Combination of *Punarnava*, *Gokshura* & *Shunthi Churna Kashaya* very much effective to reduce pitting Oedema (Bipedel Oedema).

**CONCLUSION**

The *Agnidipan*, *Shothnashak* & *Mutral* (Diuretic) action of medicine showed effective improvement in patient. Clinically, Bipedel Oedema was reduced, there was increase appetite, reduced Dyspnoea on exertion & also general weakness this symptoms reduced. This is the original study showing clinical improvement in patient.

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