

**AYURVEDIC MANAGEMENT OF GRAHANI (IRRITABLE BOWEL SYNDROME): A  
CASE STUDY**Shalu Jain<sup>1\*</sup>, Aayushi Dawar<sup>2</sup>, Umesh Shukla<sup>3</sup> and Babita Dash<sup>4</sup><sup>1,2</sup>PG Scholar, <sup>3</sup>Professor & Head, <sup>4</sup>Lecturer,  
PG Department of Panchakarma, Pt. Khushilal Sharma Government (Autonomous) Ayurveda College and Institute,  
Bhopal (MP).**\*Corresponding Author: Shalu Jain**

PG Scholar, PG Department of Panchakarma, Pt. Khushilal Sharma Government (Autonomous) Ayurveda College and Institute, Bhopal (MP).

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**ABSTRACT**

The fast life of modern era and utmost alteration in ambience gives rise to stress that affects the peace of mind and disturbs human physiology. Nowadays Grahani roga is common GIT disorder affecting the normal life style of approx every human being at one time. Diagnosis of grahani is symptom based and it is characterized by intermittent loose motion/constipation, abdominal pain, discomfort, bloating, altered bowel habits, stool with mucus, unsatisfactory evacuation of bowel etc. In modern science the symptoms of grahani corresponds with IBS. Improper functioning of Jatharagni leads to various ailments. Grahani roga is one of gastrointestinal disorder which occurs due to agnimandya that leads to Ama development in the body. In this case, an effort was made to treat a 44 years old female patient having symptoms of grahani with ayurveda medicine. At the end of 30 days of treatment patient got substantial improvement in symptom.

**KEYWORDS:** Grahani, IBS, Vrihat Gangadhar Churna, Kutajghanvati, Takra.**INTRODUCTION**

Grahani is most significant part of Mahasrotas (Gastro-intestinal System) and according to the Acharya Sushruta Pittadhara Kala located between Amashya and Pakwashya is called Grahani.<sup>[1]</sup> Grahani is also recognized as a seat of agni which assist in the digestion and absorption of food. Grahani roga is due to impairment of jatharagni and it is a tridoshic involvement condition in which Muhurbaddha – muhurdrava malalakshana with feeling of unsatisfactory voidance of stool and symptoms like arochaka, trishna, bala kshaya, alasya, asthi-parva ruja.<sup>[2]</sup> The disease in which Grahani gets vitiated and there is deterioration of Agni is called as Grahani Roga. Grahani is a disease which have unambiguous link with the unwholesome dietary habits and stressful life style of the present time. In modern science according to the symptoms matched up with IBS. Irritable Bowel Syndrome (IBS) is the most common cause of gastrointestinal referral and accounts for frequent absenteeism from work and impaired quality of life. Young women are affected 2-3 times more often than men. IBS is a functional bowel disorder and defined by the absence of structural abnormality of gut.<sup>[3]</sup>

**MATERIAL AND METHODS****Case Presentation**

A 44 years old female hindu married patient was registered from the OPD (registration no. 26503) department of panchakarma, Pt. Khushilal Sharma

government (auto.) ayurveda college and institute Bhopal (M.P.) on 3<sup>rd</sup> October 2020 with chief complaints of increase frequency of motion sometimes it may be 8-10times /day and defecation after intake of food since last 5 years. The patient had the complaint of hypertension for 4 years, diabetes for 2 years and hypothyroidism for 2 years. She was taking anti-hypertensive, anti-diabetic and anti-thyroid drug regularly. Her family history revealed that there was no such complaint ever. Patient had taken allopathic treatment for above complaints, she got mild relief but could not get relief entirely. Now patient approached our hospital for further treatment. Routine hematological and biochemical investigation were normal. Colonoscopy was also advised to rule out any other pathology and it was normal.

**General Examination**

Patient's BP was recorded 140/90 mmHg, pulse rate 80/min, whereas the body weight was recorded to 93kg, height 157.5cm. On the systemic examination no abnormality was found. The Prakriti of the patient was pittajakaphaj. There was no complaint with related to Mutra. The Mala was hard and loose irregularly with mucus and foul smell. Her Jihwa was seemed to be coated. Patient got depressed psychologically. Products of Milk, gram flour and more walking had become a cause of trigger for the patient. She has on addiction of pan-parag 3-4times /day.

**Rog Vinishchay and Samprapti Vighatan**

Dosh	– Tridosh
Dushya	– Rasa
Srotas	– Annavaah, Purishvaha
Adhishthan	– Grahani
Srotodushti	– Atipravrutti
Swabhav	– Chirkari
Agni	– Jathragni Mandya

**Diagnosis**

The diagnosis was made on the basis of clinical features of grahani described in ayurvedic text.

**Treatment Plan**

Treatment plan has been made by keeping in mind of involved dosha, sroto dushti and sharir-manas bala of patient, we planned following treatment.

1. Vrihat gangadhar churna- 2gm
- Punarnava churna- 1gm
- Shuddha kupilu -125mg

**3 doses after meal with water**

2. Kutaj ghan vati – 1TDS after meal with water
3. Chitrakadi vati – 1TDS after meal with water

During the medication period patient was advised to take pathya aahara-vihara especially intake of takra 1-2glass/day.

**Study duration – 30 days****Assessment Parameters**

Symptoms (Parameters)	Before Treatment	After Treatment	
		1 <sup>st</sup> follow up on 15 <sup>th</sup> day	2 <sup>nd</sup> follow up on 30 <sup>th</sup> day
Frequency of defecation	8-10 times /day	4 times /day	1-2 times/ day
Defecation after meal	Present	Occasionally	Absent
Aruchi	Present	Absent	Absent
Stool with mucus	Present	Occasionally	Absent
Abdomen pain	Moderate	Mild	Absent

**RESULT**

The patient was recovered tardily in the first then she kept on the treatment and periodically valuated clinically. She was bettered further and now she is almost symptoms free and taking prescribed oral medicine. After treatment, the patient got significant symptomatic relief.

**DISCUSSION**

Grahani is a disease of Agni with differing levels of Dosha association. Aim of treatment should be to improve the strength of Agni and to decrease the formation of Ama.

Vrihat Gangadhar Churna is a formulation of musta, Bilva and dhatki pushp, mircha, dadima leaves, jamuntwak, kiratikta etc. It is a well-known ama removing, anti-diarrheal, anti-spasmodic and anti-inflammatory ayurvedic drug for grahani roga.<sup>[4]</sup> Punarnava churna has ushna virya by which it causes kapha-vata shaman. It helps to cure gut inflammation.

Shuddha kupilu have krimihar (intestinal worm infestation), rochan, agnikrut (improves digestive strength), samgrahi properties.

Kutajghan vati contains Kutaj (*Holarrhena antidysenterica* L.) and Ativisha (*Aconitum heterophyllum*). It has antimicrobial, anti-dysenteric, anti-diarrheal, anti-amoebic activity and haemostatic properties. In ayurveda, kutaj has been described to be utilized as anti-helminthic for diarrhea and skin diseases. Three doshas particularly provoked Kapha and Pitta are pacified by kutajghanvati.<sup>[5]</sup>

Chitrakadi vati contains mostly those drugs which have deepana-pachana, rochana, vata-anulomana, shoolahara properties which are usna virya, katu-lavana-tikta-madhura-amla rasa, Laghu-tikshna- Snigdha guna dominant with Katu vipaka which gives an excellent results on gastrointestinal tract diseases. So it is to be prescribed in case of Grahani.<sup>[6]</sup>

Laghu guna and deepan properties of takra assisted to correct agni without aggravating piita due to its madhura vipaka. Ayurveda classics had described that it is beneficial in most of the gastric disorders like grahani, arsha, udar, prameha.<sup>[7]</sup>

**CONCLUSION**

It can be finalized that the given treatment as quite efficacious in managing the above discussed symptoms of Grahani (IBS). This study proves that given treatment have got substantial effect on the grahani patient along with strict diet regimen. Ayurveda have a cocksure counsel to the most of the patients in depressed conditions.

**REFERENCES**

1. Ambikadutt Shastri, Hindi Commentary Chaukhambha Sanskrit Sansthan Varanasi, Susruta Samhita, Utter tantra, Atisar Pratised Adhyay chapter, 2012; 306: 40/169.
2. Dr. A. Komala A “A Clinical Study on the role of Dadimadi Ghrita in the Management of Grahani Dosha. S.D.M. College of Ayurveda Hassan, 2012-13. 2. Vd. Kushwaha Harishchandra Charaka Samithi First Ed. Chaukhamba Orientalia Varanasi, 2009; 2 P. 392.
3. Nicholas A. Boon, Nicki R. Colledge, Brian R. Walker, John A. A. Hunter, Davidson’s. Principles & Practice Medicine 20th Edition Chapter, 22: 920.
4. Shri vaidhynath, ayurveda sar samgraha ayurveda bhavan limited, nainy elahabad, 666.
5. Snehadri Sinha et.al. journal of pharmacy research /volume 6/ issue 4/Evaluation of phytochemical and pharmacological aspects of *Holarrhena antidysenterica* (Wall.): A comprehensive review, april 2013.
6. Kamayani Shukla et. Al/ Ayu/ volume 30/ issue 4/Evaluation of the role of *Chitrakadi Vati* in the

management of *Bandhyatva* w.s.r to anovulation (as a consequence of unruptured follicle), 2009.

7. Shastri Kashinath, Chaturvedi Gorakhnath edited Charak Samhita of Agnivesha, revised by Charaka and Dridhbala, part II, Chaukhambha Bharati Academy, Varanasi. Reprint, 2009; Chikitsa Sthana 15/117; pagen.