



ARTICLE – GILBERT'S SYNDROME

Aabha Sharma

Assistant Professor, Department of PG Studies in Kayachikitsa, JIAR, Jammu

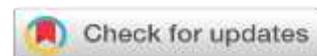
Corresponding Author: aabha302004@gmail.com<https://doi.org/10.46607/iamj1911042023>

(Published Online: April 2023)

Open Access

© International Ayurvedic Medical Journal, India 2023

Article Received: 04/03/2023 - Peer Reviewed: 19/03/2023 - Accepted for Publication: 09/04/2023.



ABSTRACT

Background: Rakta and Yakruta-Pleeha (Blood, Liver, Spleen) are considered to be the sthana for Pitta, and any Vikruti in these leads to the manifestation of skin issues, one such condition is Vivarnata (skin discolouration). Yellow discolouration of the skin, sclera, urine, and stool is named Kamala as per Ayurveda. In the classics, a detailed description presents the disease. By seeing the similarities in the symptoms, it can be correlated to Jaundice. Sometime the features are not prominently exhibited, and the disease comes out with mild symptoms, one such condition is presented here, Gilbert's syndrome, is an inherited liver condition (a genetical condition caused by a mutation in UGT1A1 gene, creating less bilirubin-UGT an enzyme that breaks down bilirubin) in which liver can't fully process a compound called bilirubin (by broken RBCs and released in faeces and urine). In this condition bilirubin builds up in blood stream, causing hyperbilirubinemia (recorded in blood analysis). It is often not diagnosed until early adulthood, as it may never show any symptoms (jaundice, nausea, diarrhoea, abdominal discomfort, fatigue mainly). One can worsen the condition, if follows the bilirubin levels increasing things (alcohol intake, not eating-drinking-sleeping enough, stress, infections, etc.)¹. By understanding this, the liver considered as common causative factor accepted by both branches of medical sciences. **Aim:** to manage the liver disorder with Ayurvedic management. **Material and Methods:** herbo-mineral Ayurvedic medicines are used for the management of liver disease (mrudu kamala) in 15 years old females, till the clinical features subside. **Results:** laboratory findings and complaints normalised within 15 days. **Conclusion:** herbal medicines do well rather best when it comes to liver issues, in healthier and safer ways.

Keywords: *Yakruta, Rakta, Kamala*, Gilbert's Syndrome, Hyperbilirubinemia.

INTRODUCTION

Kamala is a Pitta nanatmaja, Rakta pradoshaja vikara, involving Raktavaha srotas (moola of yakruta-pleeha), a term derived from the root word 'Kamu' means kaanti and 'Lunati' means nasha. "Kaantim Lunati" means a pathological condition in which normal skin colour gets vitiated/ lost. Some other features are also seen in this condition like, diminished or lost appetite, vitiated mala, and their discoloration². Though there are different opinions in Ayurveda for this condition too, like; Charakacharya states it's an advanced stage of Pandu (anemia), Sushrutacharya considered Kamala as a separate disease and the complication of Pandu roga, whereas, Vagabhatacharya described it as a separate disease. But by focusing on the Samprapti ghataka it is clear that by managing Yakruta/ liver pathology, this condition can be well managed [Ranjaka pitta, Bhrajaka pitta balances by the normal functioning of yakruta] inspite of difference of opinions. Gilberts syndrome is a mild condition in which the liver doesn't process properly and manifests harmless signs and symptoms, with a yellow tinge of sclera and skin being the chief complaints.

Case report:

Type of study: a case report (interventional study)

Study centre: Ayurvedic Clinic, Trikatu Nagar, Jammu, (J&K)- India.

Chief Complaints: yellowish discoloration over the sclera (B/L), generalized weakness, since 5 days. Associated with occasional aversion towards food.

A brief history of present illness: a 15-year-old female patient came to the clinic with a complaint of yellowish discoloration and weakness. For, 5 days she observed yellowish discoloration over both sclerae, and it increased gradually two days ago.

Past history: h/o jaundice one and a half years ago.

Family history: nothing significant

Treatment history: nil, no medication taken yet.

Personal history: Appetite- aversion; Diet- mixed; Bowel- regular, normal colour; Micturition- regular,

yellowish; Addiction- sleeping late at night (watching mobile); M/C- regular.

General examination: Built- moderate; Nourishment- moderate; Pallor- mild; Icterus- present at B/L sclera; Cyanosis-Clubbing-Oedema-

Lymphadenopathy- absent; Gait-Behaviour-Skin-Lips-Tongue- normal; Temp.= 98.4°F; Pulse= 72 bpm; Heart rate= 73 bpm; Resp. rate= 20/min; BP= 116/78 Mm Hg; Height= 5'1"; Weight= 52 kgs

Inspection: no swelling or scar at Abd. region and body.

mild yellowish discoloration of bilateral sclera; skin normal coloured. **Palpation:** tenderness (-ve); hardness/ swelling (-ve) over the right hypochondriac region. **Percussion:** dullness (-ve). **Auscultation:** normal bowel sound.

Ashtasthana Pareeksha: Naadi- sama (72 bpm); Mala- prakruta; Mootra- prakruta.

Jihwa- Alipta; Shabda- Spashta; Sparsha- prakruta; Druka- peetavbhasiat; Akrti- madhyama

Dashavidha pareeksha: Pakruti- pittaataja; Vikruti- yakruta roga; Sara-Samahanana-Pramana- madhyama; Satmya- sarva satmya; Aahara shakti- Vyayama shakti- madhyama; Vaya- bala

Nidana panchaka: Nidana- anuvanshaki (genetic), viruddha vidahi aahara; Poorvaroopa- daurbalya, jwara; Roopa- none/ slight jaundice; Samprapti- nidana sevana → kupita vataadi dosha → rakta kana daurbal- ta → twaka netraadi gata pitta sthana-sanshraya → haridra vama yukta netra mootraadi, aruchi, sadanaadi lakshana → Kamala roga

Samprapti Ghataka: Dosha- pitta pradhana tridoshaja; Dushya- rasa, rakta, mamsa, meda.

Agni- mandagni; Ama- nirama; Srotas- rasa, rakta, annavaha; Srotodushti prakara- sanga, vimarga gamana; Udbhava sthana- amashaya; Sanchara sthana- sarva shareera (koshta); Vyakta sthana/ adhishtana- twak, nakha, netra; Roga marga- madhyama

Lab. Findings: Blood routine (19.10.22) → Hb= 12.2gms/dl; LFT: S. Bilirubin (T)= 2.3mg/dl; S. Bilirubin (D)= 0.9mg/dl; Unconjugated bilirubin=

1.4mg/dl; (22.10.22) ESR= 15 mm/hr; Platelets count= 2.4400/mm³; USG (Abd.) not done (31.10.22) S. Bilirubin (T)= 1.1mg/dl; S. Bilirubin (D)= 0.7mg/dl; Conjugated bilirubin= 0.5mg/dl

Diagnosis: Yakruta vikara (Kamala/ gilberts syndrome)

Intervention:

Internally- Arogyavardhani vati 1tab BD with Syp. Amlycure DS 2tsf between meals.

-Bhumiamlaki churna 1tsf (3gms) with Takra (1 glass) BD (at noon & evening).

-Katuki churna (3gms) OD with water [2 weeks only]

Pathya- Akruta takra (buttermilk), purana shali-godhuma (1-year-old rice, wheat), ghruta, laghu supachya home-made meals without spices-frying. Sugarcane juice, radish salad, and juice. **Assessment:** assessment done with the symptoms and lab findings, which were improved after a few days.

DISCUSSION

Arogyavardhani vati acts as deepana-pachana-hrudaya-meda nashini-mala shodhani-kshudha vardhaka-arogyavardhaka and shubha for jwara roga. The main ingredient is Katuki³. **Syrup Amlycure DS** is taken as anupana, an ayurvedic composition indicated in indigestion, poor assimilation, poor liver functions, loss of appetite, and adjuvant to hepatotoxic drugs. **Bhumiamlaki** having laghu-ruksha guna, tikta-kashaya-madhura rasa (pitta shamaka), madhura vipaka, sheeta virya, act as kaphapitta shamaka, shotha hara, deepka-pachaka, yakruta uttejaka, anulomaka, trishna nigrahana, jwaraghna, aruchi-agnimandya-kamala-raktapitta, yakruta-pleeha vrudhi shamaka⁴. **Takra** is taken as Anupana, according to Acharya Sushruta, takra is prepared by adding the water to curd (1/2:1), after churning it properly extract the whole butter, the left fluid is Nisneha Takra. Having the properties Madhura-Amla-Kashaya Rasa, Laghu-Rooksha Guna, Ushna Virya, Madhura Vipaka, and Kapha-Vatahara. Moreover, it is well known for its digestive property and administration in Kapha-Medo Roga⁵. **Katuki churna** is kaphapitta hara, kapha nisaraka, kaphaghana, pitta saraka,

deepaka, rochaka, yakruta uttejaka, raktashodhaka, shotha hara, pramehaghna, kusththaghna, daha shamaka, jwaraghna, kasa-shwasa-hrudaya-rakta vikara upyogi, lekha (in atimatra- lekha, udararoga rechaka), (in Alpamatra- aruchi, agnimandya, yakruta vikara, kamaladi pitta vikara upayogi)⁶. Here, the ingredients used work on pitta as mrudu virechaka, which is a specific treatment for kamala. Virechaka aushadha have jala and pruthvi mahaboota pradhanta along with ushna, tikshna, vyavi, vikasi guna helping remove dushita pittadosha from adhomarga (anal route)⁷. It also helps improve digestion and leads to proper formation and circulation of essential matters (dosha, dhatu, etc.) of the body. **In between meals**, medication intake cures samana vayu, which maintains jatharagni. After the features subsided, the Arogyavardhini vati combo continued for 1 month, rest stopped.

CONCLUSION

The above study can conclude that *guda* plays a vital part in the excretory process of the human body. It helps in the excretion of *mala* and *apan vayu* or excretory products of our body. Along with these functions, it has significant surgical importance in the human body. Its structural relevance should be kept in mind while performing any surgical or para-surgical procedures. Otherwise, it can be a life-threatening condition.

REFERENCES

1. <https://www.healthline.com/health/gilberts-syndrome>
2. Raja Radhakantadeva Bahadur, Shabdakalpadruma, Vol. 4, Naga Publication, Delhi, Edition: 1987, Page-60.
3. Bhaishajya Kalpana Vigyana, Acharya Siddhinandan Mishra, Mishra Kalpana, Page-186, Publisher Chaukhamba Surabharati Prakashana Gopala Mandir Lane, Varanasi.
4. Acharya Priya Vrat Sharma, Dravyaguna Vigyana, Vol. II, Varanasi, Published Chaukhamba Bharati Academy Varanasi, Reprinted:2005, Chapter-8, Page-683.
5. Divodasa Dhanvantari, Sushruta Samhita, edited with Ayurveda-Tattva-Sandipika by Kaviraja Ambikadutta Shastri, Published by Chaukhamba Sanskrit Sansthan,

- Varanasi; Reprint 2015, Vol I, Sutra Sthana 45/85, Pp-227.
6. Acharya Priya Vrat Sharma, Dravyaguna Vigyana, Vol. II, Varanasi, Published Chaukhamba Bharati Academy Varanasi, Reprinted:2005, Chapter-5, Page-443.
7. Agnivesha, Charaka Samhita, Ayurveda deepika commentary by Chakrapanidatta, Editor Yadavji Trikamji, Publication Chaukhamba Surabharati Prakashana Varanasi, Edition: 2016, chikitsa sthana 16/40, Pp-532.

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Aabha Sharma: Article – Gilbert's Syndrome. International Ayurvedic Medical Journal {online} 2023 {cited April 2023} Available from: http://www.iamj.in/posts/images/upload/883_886.pdf