

## A CASE REPORT REGARDING MANAGEMENT OF GRAHANI DOSHA THROUGH AYURVEDA

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### ABSTRACT

*Grahani* as an organ is considered as the seat of *Agni* which is supported and nourished by *Agni* with *Aadhara Aadheya Sambandha*. This *Agni* is vitiated by *Ama* formed because of improper diet and regimen. Among them, *Grahani dosha* is the prime disease and is seen often in day-to-day practice. **Material And Method:** A 32-years-old male patient was coming to the OPD of *Kaya Chikitsa*, Quadra Institute of Ayurveda with complaints of defecation just after taking a meal, Bowelfrequency 4-5 times/day, irregular bowel habit, loss of appetite, generalized weakness, occasional pain in the abdomen, slow weight gain. These complaints were persisting for the past 1 year. This condition can be understood as *Grahani Dosha*, treatments including with some medicine course of 2 months. **Result:** There were significant improvements in the condition of the patient. **Discussion:** while treating *Grahani*, the drugs alleviating *Vata*, *Pitta*, *Doshas*, which are having *Deepan*, *Pachana*, *Grahi*, *Stambhana* as well possessing *tikta*, *katu rasa* and *ushna veerya* should be selected. there was a significant reduction in all the signs and symptoms of the disease are observed. **Conclusion:** A meticulous planning of treatment considering the *Bala*, and *Agni* of patient accompanied with proper diet will provide encouraging results in treating *Grahani Dosha*.

**Keywords:** *Grahani dosha*, *Agni*, *Aama*, *Stambhana*.

## INTRODUCTION

Approximately 20% of the general population fulfils diagnostic criteria for irritable bowel syndrome (IBS). It is generally believed that most patients develop symptoms in response to psychosocial factors, altered gastrointestinal motility, altered visceral sensation or luminal factors<sup>[1]</sup> Acharya Charaka stated that *Grahani* is situated above *Nabhi* (umbilicus), the strength of *Agni* nourish and support the *Grahani*, digest the food and releases into the next *Ashaya* i.e., *Pakvashaya*<sup>[2]</sup> Because of the impairment of *Agni* it releases food in undigested form. As per Acharya Sushrta *Grahani* is the 6th *Pittadhara Kala* situated between *Amashaya* (Stomach) and *Pakwashaya*.<sup>[3]</sup> Acharya Sushruta mentioned that if an *Atisara* patient enjoys an unjust diet during the *Agnimandya* stage, it may lead to *Grahani Roga*.<sup>[4]</sup> If a person consumes the food incorrectly is responsible for *Grahani Dushti*, especially in a person with disturbed digestion and cause the disease *Grahani*. Acharya Chakrapani mentioned that *Ashraya* is *Grahani*, and *Ashrita* is *Agni*.<sup>[5]</sup> In Ayurveda, an exact correlation cannot be found of IBS but according to signs and symptoms and pathology of disease, we can consider this clinical entity as *Grahani Dushti*. In the present study through the case was diagnosed as *Grahani* (IBS), the patient had GIT symptoms and general symptoms related to *Grahani*. Hence the patient was administered *Deepan*, *Pachan*, *Grahi* oral medication.

**Case History:** A 32-year-old male patient was brought to the OPD of *Kaya Chikitsa*, Quadra Institute of Ayurveda Roorkee, Haridwar by his brother with complaints of

a) defecation just after taking a meal, Bowel fre-

quency 4-5 times/day

b) irregular bowel habit

c) loss of appetite

d) generalized weakness,

e) occasional pain in the abdomen

f) slow weight gain

These complaints were persisting for the past 1 year.

**History of Present Illness:** The patient was healthy 1 year back. Then he gradually developed defecation just after taking a meal, Bowel frequency 4-5 times/day, irregular bowel habit, loss of appetite generalized weakness. At the outset, the family have taken him for consultation in a nearby hospital, where they have given a course of medications, which they have taken, but did not get any satisfactory relief. As days passed, he faced more irregular bowel habits (5-7 times), loss of appetite generalized weakness occasional pain in the abdomen, slow weight gain. The condition got aggravated for the last 15 -20 days. Then, he decided to come for a better evaluation and management in Quadra Institute of Ayurveda, Roorkee, Haridwar. After a thorough interrogation regarding the diet, lifestyle, and habits him the history of the present illness and after a proper evaluation regarding the present condition of the child, he was admitted to the IPD of *Kaya Chikitsa* of our hospital and planned for internal medications.

**History of Patient** – The patients used antacid and antispasmodic drugs unevenly. His family history revealed that there were no such complaints ever.

**Asthavidha Pariksha -**

Assessment of the general condition of the patient:

**Table 1:** *Asthavidha Pariksha*

<i>Naadi</i>	<i>Kaphaja</i>
<i>Mala</i>	<i>Samanya</i>
<i>Jivha</i>	<i>Malavrit</i>
<i>Sabada</i>	<i>Samanya</i>
<i>Spersha</i>	<i>Snigdha</i>
<i>Driga</i>	<i>Samanya</i>
<i>Aakriti</i>	<i>Samaakriti</i>

**On Local Examination Clinical Finding As**

On examination of the patient, mild pallor was present, and his vitals were within normal limit. Appetite and sleeping pattern were normal, altered bowel habits i.e., 5-7-time, loss of appetite, generalized weakness, occasional pain in the abdomen, weight loss. Micturition frequency was also increased (8-10

times). No abnormality was detected in CVS, CNS, and RS. Tenderness is present in P/A examinations.

**Diagnosis – Grahani** (irritable bowel syndrome)

**Date of attending OPD–30/04/2021 Treatments Given**

A single course of treatment is given for 15 Days.

**Table 2: Asthavidha Pariksha**

Avipattikar churna	3gm
Bilva Churna	1gm
Panchamrut parpati	300mg
Sutsekhar Rasa	250 mg
	1×2 with <i>Takra</i> before a meal.

1. *Sankha Vati* - 1tab BID
2. *Kutajghan vati* - 2-tab TID
3. *Kutajarishtha* - 20 ml BID

**Table 3: Showing Grading for clinical features.**

Clinical Features	Grading	BT	AT			% of Relief	
			15 days	30 days	60 days		
<i>Muhurbaddhamu</i>	Passing normal	0	4	3	1	0	100
<i>hurshithil mala</i>	consistency						
(Altered bowel habit)	stool(1time/day)						
	Passing stoolirregular (1-2 time /day)	1					
	without pain						
	Passing stool irregular (2-3 times/day) with pain	2					
	Passing stool irregular & just after a meal (3-4 times/day) with pain	3					
	Passing stool irregular & just after meal (>4times/day) with pain	4					
<i>Aruchi</i>	Taking normal diet with interest	0	1	1	0	0	100
(anorexia)	No interest in	1					

	taking normal diet						
	Food has taken forcefully	2					
	Not taken a food even forcefully	3					
<b>Balakshya (Weakness)</b>	No weakness	0	2	2	1	1	50

	Weakness but performs day to day activities	1					
	Weakness & difficulty in performing day to day	2					
	Cannot be able to get up from bed	3					
<b>Klama (Exhaustion)</b>	No exhaustion	0					
	Exhaustion with moderate work	1					
	Exhaustion with mild work	2					
	Exhaustion without effort	3	2	2	1	1	50
<b>Antrakunjan (Gurgling sound in abdomen)</b>	No complaint	0					
	Occasionally	1					
	2-3 times/day before passing stool	2					
	Persistent	3	3	2	1	0	100
<b>Passing mucus in stool</b>	No visible mucous in stool	0					
	Visible mucous stickled to the stool	1					
	Passage of mucous with frequent stool	2					
	Passage of a large amount of mucous in stool	3	2	2	1	0	100

## OBSERVATIONS AND RESULTS

The follow up was made on the 15th day, 30th day and 60th day. During this period patient did not develop any other complaints. The patient reported gradual improvement in altered bowel habits, stool with mucus, pain in the abdomen, anorexia, indigestion, heaviness in the abdomen. After treatment patient got significant relief and he gained weight up to 54 kg. (Before treatment wt. 51kg)

**Follow Up After Treatment:** After discharging from the hospital patient is advised to continue with *Kutaj Ghana Vati* 1 TDS and *Kutajarishtha* 10ml BD with water.

**Discussion On Disease:** In the present case, the patient presented with complaints of defecation just after taking a meal, Bowel frequency 4-5 times/day, irregular bowel habit, loss of appetite, generalized weakness, occasional pain in the abdomen, weight loss. These complaints were persisting for the past 1

year. This condition can be understood as “Grahani”, treatments including with some medicine course of 2 months. *Vata* and *Pitta* are involved in the manifestation of *Grahani* (IBS), the characteristic feature of *Grahani* is *Muhurbaddhamuhurshithil mala*, *Aruchi*, *balakshaya*, *trushina*, *klama*, and *Antrakunjan*.

**Discussion on Treatment:** The cardinal features of *Grahani*, in our classical texts, are like that of IBS in contemporary science. *Grahani* is a syndrome in which *Agni* becomes depressed, *Ama Dosha* (undigested waste material) accumulates & passes in the stool. Through, *Vata* and *Pitta* are involved in the manifestation of *Grahani*. So, while treating *Grahani*, the drugs alleviating *Vata* & *Pitta doshas*, and enhance the potency of *Agni* should be selected. *Avipattikar Churna* is also used for *Agnimaandjanya* diseases [6]. *Avipattikar Churna* corrects the action of *Apan Vata*, which helps in the proper flow of faeces. *Bilva* has *Kashaya* & *Tikta Rasa*, *Laghu* & *Ruksha*

*Guna, Ushna Veerya, Katu Vipaka and Deepan, Paachan, Graahi, Vata- Kaphahara* properties. *Bilva* have *Sangraahik* properties. So *Bilva* binds up and hold the stool and helps in decreasing the frequency of loose motion. *Panchamruta Parpati* was described under then *Grahaniroga Chikitsaadhyay* in *Bhaishajyaratnavali*. According to Ayurveda properties of *Panchamruta Parpati* includes *Deepan* (stimulation of Agni), *Pachan* (digestive), *Grahi* (carminative), *Laghu* (decreases Ama).<sup>[7]</sup> *Ushna Guna* and *Deepan* properties increase appetite, *Grahi* property improves absorption of nutritive material. *Takra* (buttermilk) is the best *Anupan* mentioned in *Grahani Chikita*. *Acharya Sadananda Sharma* has described the properties of *Shankha Bhasma* in *Ras Tarangini*. It is indicated in GIT disorders like *Grahani Roga* (IBS), *Atisara* (diarrhoea), *Amlapitta* (Hyperacidity) and it shows *Balya, Grahi* (carminative) effects.<sup>[8]</sup> *Kutaj* has *Tikta & Kashaya Rasa, Sheeta Veerya, Katu Vipaka and Deepan, Stamabhan, Pittakapha Shamaka* properties<sup>[9]</sup> Due to the above properties *Kutaj* has stimulated Agni, which leads to removing *Ama* (toxin) formation by proper digestion of food and *Ama*. Due to *Tikta & Kashaya Rasa, Ruksha Guna and Sheeta Veerya*, it pacifies the *Kapha & Pitta Dosh*.

## CONCLUSION

Faulty dietary habits and changes in lifestyle patterns are the important cause of this disease. So, correction of diet patterns and lifestyle modification is mandatory. As the treatment given here showed good remarkable improvement and response along with strict diet regimen gave us a hope and a new finding was found successful as a possible effective Ayurvedic cure in *Grahani* (IBS) *Roga*. Based on the above discussion, it can be concluded that Ayurvedic treatment is very successful in the management of *Grahani* (IBS). It is easily adaptable in routine practice and safe, cost-effective and has no side effects.

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