

Case Study

MANAGEMENT OF IRRITABLE BOWEL SYNDROME THROUGH AYURVEDA: A CASE STUDY

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ABSTRACT

Irritable bowel syndrome (IBS) is a gastrointestinal disorder characterized by altered bowel habits and abdominal pain in the absence of detectable structural abnormalities. The pathogenesis of IBS is poorly understood, although roles for abnormal gut motor and sensory activity, central neural dysfunction, psychological disturbances, stress, and luminal factors have been proposed. About 10-15% of the population is affected at some time but only 10% of these consult their doctor because of symptoms. In Ayurveda, IBS can be correlated to *Grahani Roga* due to similarity in their clinical presentation. In this case an effort was made to treat a 32 years old male patient having symptoms of *Muhurbaddha Muhurshithil* (episode of constipated and loose stools), *Apakwa Malapravritti* (Stool with mucus), *Udarshool* (abdominal pain). Patient treated with various *Panchakarma* (five Bio-cleaning Ayurvedic therapies) procedures like *Basti* (herbal medicated enema), *Takra Dhara* (pouring Herbal medicated butter milk on head) and oral medications. At the end of 60 days of treatment patient got significant improvement in episode of constipated and loose stools (75%), distension of abdomen (75%), anorexia (100%) and stool with mucus (100%).

KEYWORDS: Irritable bowel syndrome, stress, *Panchakarma*, *Grahani*, *Basti*, *Takra dhara*.

INTRODUCTION

Irritable bowel syndrome (IBS) is characterized by recurrent abdominal pain in association with abnormal defecation in the absence of a structural abnormality of the gut. Nevertheless, IBS is the most common cause of gastrointestinal referral and accounts for frequent absenteeism from work and impaired quality of life.^[1] IBS is a disorder of the young patients presenting before age 45. Women are affected 2-3 times more often than men.^[2]

Coexisting conditions, such as non-ulcer dyspepsia, chronic fatigue syndrome, and fibro-myalgia are common. Between 5 and 10% of patients have a history of a physical or sexual abuse.

Ayurveda considers that the dysfunction of *Agni* is responsible for indigestion which is responsible for various functional and structural defects in the gastro-intestinal tract.

By taking a look on the sign and symptom of *Grahani*, somehow it resembles to IBS. In *Grahani Roga*, due to *Dushit Jathragni* the digestions of food do not occur properly. Undigested food forms a vitiated material called "Ama" which is responsible for producing various disorders. [3] It disturbs the normal flora of GI tract and weakness the muscles and acid fluid configuration of GI tract. So *Prasad*

Bhaga of food is not form properly so nourishment of body does not occur.

In today's practice, one can come across good number of patients suffering from the complaints related to G.I.T. These complaints vary from loss of appetite to chronic abdominal pain, irregular bowel habit, incomplete evacuation, chronic flatulence, constipation, diarrhea and failure to thrive etc. The important factors which play a significant role in most of the digestive disorder are malfunctioning of Agni and Vata Dosha along with significant contribution of mind in the physiological function of Digestive system. Basti being one Panchakarma specially advised for the correction of Vata Dosha and as a site of attain a disease of colon. To overcome the stress and other psychological factor Ayurveda advocates use of Shirodhara, hence in this case, Basti and Shirodhara with Takra were used for the treatment.

MATERIAL AND METHODS

Case Presentation

A 32 years old male patient, case diagnosed as Irritable Bowel Syndrome visited to *Panchakarma* OPD (UHID- 206534), All India Institute of Ayurveda, New Delhi, having complaints of episode of

constipated and loose stools (Muhurbadha Muhurshithil.

Malaprvritti, abdominal pain (Udarshool), stool with mucus (Apakvamalapravritti), Anorexia (Aruchi), heaviness in abdomen (Udaragourava), fatigue (Alasya), and indigestion (Ajeerna) since 2 years. These symptoms resemble with the Grahani Roga.[4]

Past history of Patient

The patient used antacid and antispasmodic drug unevenly. His family history revealed that there was no such complaint ever.

General Examination Vitals

Pulse: 80/min. CVS: S₁ S₂ Normal BP: 110/70 mmHg CNS: Conscious, Oriented

Temp: Afebrile RS: AEBE, Clear RR: 20/min. P/A: Resonance ++ Mild Tenderness Built: Lean Weight: 48 kg. Height: 5'6 feet

Blood Investigation

Hb%: 11.7 g/dL ESR: 40mm BSL(R):120mg/dl Sr.Creatinine: 0.85mg/dl HBsAg: Non-Reactive Urine: Pus cells +

Table 1: Samprapti Ghatakas

| Tubic 1. bumpi upti dilatakas | | | | | | |
|-------------------------------|------------------------------------|--|--|--|--|--|
| Dosha | Samanavata, Apanavata, Pachakpitta | | | | | |
| Dushya | Annarasa, Rasadhatu | | | | | |
| Agni | Jatharagni | | | | | |
| Ama | Jatharagnimandyajanya | | | | | |
| Srotas | Annavaha Ayurveda | | | | | |
| Srotodushti | Atipravritti | | | | | |
| Adhishthan | Grahani | | | | | |
| Rogamarga | Abhyan <mark>ta</mark> ra 💛 🧡 🖔 | | | | | |

Table 2: Oral Medications Administered

| S.No. | Drugs | Dose | Duration | Anupana |
|-------|----------------------------|----------------------|----------|-----------------|
| 1 | Kaidaryadi Kashayam | 10ml+30ml water TID | 16 days | Luke warm water |
| 2 | Sankh vati | 1 TAB. TID | 16 days | Luke warm water |
| 3 | Mustakarishta+ Kutjarishta | 10ml+10ml+20ml water | 16 days | Normal water |
| 4 | Manasamitra vatakam | 2 TAB. HS | 16 days | Normal water |
| 5 | Dadimashtaka choorna | 1TSF | 16 days | With honey |

Table 3: Panchakarma Procedures

| Table 3.1 unchakarma i roceuares | | | | | | | |
|----------------------------------|--------------------------------------|----------|---|--|--|--|--|
| S.No. | Panchakarma Procedures | Duration | Drugs used | | | | |
| 1 | Sarvang Abhyanga | 16days | Kottamchukaddi taila | | | | |
| 2 | Sarvang Vashpa svedana | 16days | Dashmoola kwatha | | | | |
| 3 | Takra dhara | 16days | Takra+Amalaki choorna + Triphala choorna | | | | |
| 4 | Kala Basti (Nirooha Basti For 6days) | 16 days | Makshik (Madhu) 60ml Saindhav lavana-5gm Sneha- Dadimadi ghritam (45ml.) + Pippalyadi taila (45ml) Kalka-Dadimashtaka choorna (30gm) Varunadi kawatha -240ml. | | | | |
| Anuvasan Basti | | 10 days | Dadimadi ghritam (30ml.) + Pippalyadi taila (30ml) + Shatpushpa choorna (2 gm)+ Saindhav lavana (1gm) | | | | |

Table 4: Panchakarma procedures Administered

| 1 st | 2 nd | 3 rd | 4 th | 5 th | 6 th | 7 th | 8 th | 9 th | 10^{th} | 11 th | 12 th | 13 th | 14 th | 15 th | 16 th |
|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| day | day | day | day | day | day | day |
| Α | Α | N | Α | N | Α | N | Α | N | Α | N | Α | N | Α | Α | Α |

OBSERVATIONS AND RESULTS

The follow up was made on 16th day, 30th day and 60th day. During this period patient did not developed any other complaints. After 60th day blood investigations are carried out it shows following results i.e. ESR-8mm, Hb %- 15.4 gm%, Urine Pus cell–Nil. Patient reported gradual improvement in altered bowel habits, stool with mucus, pain in abdomen, anorexia, indigestion, heaviness in abdomen. After treatment patient got significant relief and he gained weight up to 6kg. (Before treatment patient weight was 48kg and after treatment it became 54kg).

The changes observed in the signs and symptoms were assessed by adopting suitable scoring method and the objective signs by using appropriate clinical tools. Assessment was done before treatment, and on 16^{th} day, 30^{th} day, and 60th day after completion of treatment.

Table 5: Showing Grading for Clinical Features [5]

| | 3 3 | | BT | AT | | | % |
|-----------------------------|---|---|----|----------------------|----------------------|----------------------|--------|
| Clinical Features | Grading | | | 16 th day | 30 th day | 60 th day | Relief |
| Muhurbaddha | Passing normal consistency Stool (1time/day) | 0 | | | | | |
| muhurshithil mala | Passing stool irregular(1-2 times/day) without pain | 1 | | | | | |
| (Episode of | Passing stool irregular (2-3 times/day) with pain | 2 | | | | | |
| constipated & loose stools) | Passing stool irregular & just after meal (3-4 times/day) with pain | 3 | | | | | |
| | Passing stool irregular & just after meal (>4times/day) with Pain | 4 | 4 | 2 | 1 | 1 | 75% |
| | No complaint | 0 | | | | | |
| | Rarely complaint once in a week | 1 | | | | | |
| Distention of | Distension of abdomen after taking meal up to 1Hour | 2 | 4 | 1 | 1 | 1 | 75% |
| Abdomen | Distension of abdomen after taking meal up to 1-3 hours | 3 | | | | | |
| | Distension of abdomen after taking meal up to 6 hours | 4 | | | | | |
| | Taking normal diet with Interest | 0 | | | | | |
| | No interest in taking normal diet | 1 | | | | | |
| Aruchi (anorexia) | Food has taken forcefully | 2 | | | | | |
| | Not taken a food even Forcefully | 3 | 2 | 0 | 0 | 0 | 100% |
| | No weakness | 0 | | | | | |
| | Weakness but performs day to day activities | 1 | | | | | |
| Balakshya (Weakness) | Weakness & difficulty in Performing day to day Activities | 2 | | | | | |
| | Cannot able to get up from bed | 3 | 3 | 1 | 0 | 0 | 100% |
| | Normal thirst | 0 | | | | | |
| | Mild thirst, take water Frequently | 1 | | | | | |
| Trushna (Thirst) | Thirst increases | 2 | | | | | |
| | Excessive thirst, never satisfied after taking a good amount of water | 3 | 3 | 1 | 0 | 0 | 100% |
| | Enthusiastic | 0 | | | | | |
| Alasya (laziness) | Occasionally | 1 | | | | | |
| | Often | 2 | 3 | 1 | 1 | 1 | 66.6% |
| | Persistent | 3 | | | | | |
| | No complaint | 0 | | | | | |
| Praseka | Mild Salivation | 1 | | | | | |

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| (excessive salivation) | Moderate salivation with nausea occasionally/day | 2 | | | | | |
|------------------------|--|---|-----|---|---|------|------|
| | Excessive salivation with nausea & with often Vomiting | 3 | 2 | 1 | 0 | 0 | 100% |
| | No exhaustion | 0 | | | | | |
| Klama | Exhaustion with moderate work | 1 | | | | | |
| (Exhaustion) | Exhaustion with mild Work | 2 | _ | | | | |
| | Exhaustion without effort | 3 | 2 | 1 | 1 | 1 | 50% |
| | No complaint | 0 | | | | | |
| | Occasionally | 1 | | | | | |
| Tiktamlodgara | 1-3days/week | 2 | | _ | 1 | | |
| (iron pungent | 3-5days/week | 3 | 5 | 2 | | 1 | 80% |
| odour burps) | 5-7days/week | 4 | | | | | |
| | All the 7 days | 5 | | | | | |
| Antrakunjan | No complaint | 0 | | | | | |
| (gurgling sound in | Occasionally | 1 | | | | 0 | 100% |
| abdomen) | 2-3 times/day before passing stool | 2 | 3 | 1 | 0 | | |
| | Persistent | 3 | | | | | |
| Passing mucus in stool | No visible mucous in Stool | 0 | | | | | |
| | Visible mucous stickled to the stool | 1 | | | | | |
| | Passage of mucous with frequent stool | 2 | 2 0 | 0 | 0 | 100% | |
| | Passage of large amount of mucous in stool | 3 | | | | | |

DISCUSSION

Basti is a multidimensional therapy, it can fulfill the purpose of elimination and palliation of Dosha, nourishment and rejuvenation of Dhatu (tissues). In this study Varunadi kwatha[6] (for Nirooha Basti) was selected for the treatment of Grahani (IBS) because of Varunadi Kwatha possess all the needful properties like Kaphahara Chedana, Lekhana, Tridoshgna, Anulomana, and ingredients of the compound pacify Kapha Dosha by virtue of their Ruksha Guna, Katu Vipaka and Ushna Virya, so it relieves in the symptom of stool with mucus due to its Kaphahara, Chedana, properties. In Dadimadi ghritam[7] (used for Anuvasan basti) contain Dadim, Dadim is Ama, Vata and Kapha Nashaka hence its relives in symptoms constipation, and abdominal pain and may corrects pathogenesis occurring in IBS. Pippalyadi Taila^[8] was also selected for Anuvasan Basti because of its ingredients which acts on Adhman (like Karma Vatanuloman) and does Deepan Pachan action also. As we know the IBS is a Psycho somatic disorder so we selected Takra Dhara for treatment, which is known for its stress relieving effect. When Takra is poured in a continuous stream over the forehead it might communicate with the deepest recesses of the brain by soothing the Mind, through the Limbic system, where the Prana (vital energy of the body) is present. So an improvement in psychic symptoms was achieved. Improvement in circulation to hypothalamus also improves the function of Autonomic Nervous System. Takra Dhara

may also effects on Endocrine system, hypothalamus is the main regulator of endocrine system so effect of *Takra Dhara* on hormone secretion can also be postulated considering the effect on hypothalamus. The limbic system and hypothalamus regulates the feeling of rage, pain, aggression, pleasure and behavioural patterns. It can be postulated that *Takra Dhara* may be having some effect on hypothalamus thus relieving most of the psycho somatic disorders like IBS. *Amalaki choorna*^[9] (*Emblica officinalis*) is indicated in several stress induced disorders and it significantly exhibit adaptogenic, anti-stress effects. *Takra Dhara* with *Amalaki Choorna* may relieve stress and anxiety in patients of IBS.

In Mustakarishta,[10] Mustha is indicated in Ajirna, Agnimandhya, Atisara and Vishuchika and all types of Grahani. Mustha being a Agrya Draya for Sangrahi, Deepana and Pachana action. Many research works proved the effect of Mustha in management of IBS. Grahani being a disorder of GI tract with its associates as Agni mandhya and Ajeerna. This formulation predominantly acts on Agni, it does both Amapachana and Agni Deepana. Along with Mustha there are other drugs like Yavani, Jeeraka, Maricha, Chitraka, Lavanga etc, which pacifies the Koshta Gata Vata, this helps in relieving some of the symptoms like "Jeerne Jiryathi Admanam" (Distension of abdomen). So all the major Lakshanas like "Muhur Muhur Mala Pravritti, Muhur Badda Drava Mala

Pravritti, Amayukta Mala Pravritti, Udarashoola" and flatulence are subsided.

Kaidarvadi Kashavam described under the Grahaniroaa, in Chikitsamaniari, It contains Kaidarva (Murray kenigi), Haritaki (Terminalia chebula), Nagara (Zingiber officinalis), Patola (Trichosanthes cucumerina). It acts as Deepana and Pachana, Tridoshahara, Vatanulomaka and Malanulomaka. So it relieves in the symptom of Muhur Muhur Mala Pravritti in Grahani Roga. In Kutjarishta^[11], Kutaj contains alkaloids like Kurchi bismuth iodide, conessine, and used in bowel complaints and improves Agni (digestive capacity), due to pungent property. It acts as anti-diarrheal and anti-dysentery agent. Dadimashtaka Choorna[12] used to improve taste, digestion, stops loose motions and relieves in bowel complaints. Dadimashtaka Choorna by the virtue of Pachana and Sangrahi action decreased the frequency of bowel due to its Pachaka, Shoolahara (pain relieving), and *Vatanulomana* properties.

CONCLUSION

On the basis of this study, it can be concluded that *Varunadi Kawatha Basti* and *Takra Dhara (Amalaki choorna* and *Triphala choorna*) are found to be effective in reliving symptoms like *Muhurbaddhamuhurshithil mala* (Alternate constipated and loose bowel), distention of abdomen, stool with mucus in IBS. There was no adverse drug procedures reaction seen during the period of study. Further studies should be carried out with larger sample size in different places with a standard control drug in order to obtain more valid data on the effect of this treatment in management IBS. The overall effect of therapies showed marked improvement in sign and symptoms of *Grahani Roga* (IBS).

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