



AN AYURVEDIC MANAGEMENT OF GRAHANI (IRRITABLE BOWEL SYNDROME): A  
CASE REPORT

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ABSTRACT

*Grahani* is a common disorder of GIT system of great clinical relevance in modern era because of the improper food habits, junk food, stressful lifestyle etc. *Grahani* is the main functional part of *Mahasrotas* in between *Amashaya* & *Pakwashaya* and also known as the 6th *Pittadhara Kala*. *Grahani* springs from *Dhatu "graha"* which suggests "to catch" "to hold" or "to get". The word *Grahani* in *Ayurveda* is related to *Agni* (digestive fire) which helps in the metabolism, ingestion, digestion, absorption and assimilation of *Aahar* by *Grahani*. *Ayurveda* characterize the disease by passage of stool with alternate constipation or diarrhoea, passing of foul smelling stool, mucus in faecal matter and with undigested or digested food particles. And also associated with thirst, abdominal cramping & pain and vomiting. In modern science, above symptoms can be correlated with IBS (Irritable Bowel Syndrome). In IBS the wall of the intestine becomes sensitive to even mild stimulus which causes excess abdominal cramps & hence the bowel movement alters along with indigestion. In India, IBS affects about 15% of adult population and the ratio of male and female is 3:1 which is just reverse to the ratio in the western countries. Whole world is looking towards *Ayurveda* for safe treatment modalities, so it is essential to find out the effective therapeutic procedure from our science. In this case study patient was administered combination of *Grahanikapata rasa*, *Rasasindur*, *Swarnagarika*, *Mukta bhasma*, *Sutashekhara rasa*, *Sankh bhasma*, *Bilvamajja churna*, *Agnitundi vati*, *Kutajaghna vati*, *Takraarista*.

**KEYWORDS:** *Pittadhara Kala*, *Ayurveda*, *Grahani*, *Agnidosha*, Life style, IBS.

INTRODUCTION

*Ayurveda* is one of the oldest holistic healing systems in the world. It is supported the assumption that health and well-being depend upon a fragile balance between mind, body and spirit and it's only going to happen when proper diet, lifestyle is followed, but now a days improper eating habits, sedentary lifestyle leads to *Agni's* vitation. The faulty lifestyle, consumption of junk food, stress, inadequate sleep and avoidance of *Sadvritta* are the major reasons of *Grahani Dosh*. *Grahani* is one of the major illness of Gastro-intestinal tract, included in *Astha mahagada* by *Vagbhata*.

According to *Ayurveda* "Swastha" person has 'Samaagni' or 'Prakrit Agni'. *Agni* has a very important role in the process of digestion. After taking meal, *Agni* (especially *Jatharagni*) converts *Aahara Dravya* (Food) into *Ahara-rasa*. This *Aahar-rasa* converts into *Rasa*, *Rakta* and *Mams* etc. *Dhatu* respectively with the help of *Dhatvagni* and *Bhutaagni*. This process provides the

*Poshaka ansh* to the body for maintainance of life. *Acharya Charaka* explains importance of *Agni* in *Grahani Chikitsa* as *Ayu* (Life span), *Varna* (complexion), *Bala* (strength), *Swasthya* (health), *Oja* (Nutritious part of all *Dhatu*s), *Upachaya* (Body development) etc. All these things depend on *Agni* i.e. body fire. A person lives long and free from disease if *Agni* works/functioning properly. On another way one dies if this *Agni* is extinguished, get ill if it is deranged, hence *Agni* is the root cause of all.

If a person consumes the food incorrectly is responsible for *Grahani Dushti*. *Acharya Charaka* mentioned functionally weak *Agni* i.e. *Mandagni* causes improper digestion of ingested food leading to *Grahani dosha*. And finally, unless treated promptly, *Grahani Roga* follows, as *Grahani Dosh* is preliminary stage of *Grahani Roga*. *Grahani* is one of the important parts of *Mahasrotas* (GI tract) and according to *Acharya Sushruta* 6th *Pittadhara Kala* situated between *Amashaya* and *Pakwashaya* is called *Grahani*. The



disease in which *Grahani nadi* gets vitiated by the aggravated *doshas* produced from the impairment of *Agni* is called as *Grahani Roga*. *Grahani roga* is the disorder of digestive system due to vitiation of *Pachaka Pitta, Saman Vayu & Kledaka Kapha*. It occurs with the *Lakshanas* or symptoms like *Muhurbaddham Muhurdravam* (alternate passing of hard & loose bowel habits), *sarujam ama-apakwa puti Malapravritti* (painful foul smelling defaecation in form of *ama-pakwa Avastha*), *bahusho bimunchati* (defaecation in large quantity), *Vairasya* (tastelessness), *Suktapaka* (acid eructation), *Trishna* (excessive thirst), *Daurbalya* (weakness), *Manasa sadanam* (depression) etc. *Acharya Sushruta* mentioned that if an *Atisara* patient enjoys an unjust diet during the *Agnimandya* stage, it may lead to *Grahani Roga*, therefore any disturbance in function of *Grahani* results in indigestion symptoms and is symbolized as *Grahani dosha*. *Acharya Chakrapani* mentioned that *Ashraya* is *Grahani* and *Ashrita* is *Agni*. *Agni* management is same as the management of *Grahani Dosh*. In modern science, above symptoms can be correlated with IBS (Irritable Bowel Syndrome). Clinically IBS shows symptoms like altered bowel habit i.e. constipation, diarrhoea or mixed type, abdominal pain and bloating, indigestion, heart burn, feeling of incomplete defecation, passage of mucus in stool etc. In present study, the case was diagnosed as *Grahani roga* (IBS). Hence the patient was treated primarily for *Agni* correction by drugs with properties of *Deepana* and *Pachana*. This article described general consideration of *Grahani Dosh* and its management by *Ayurveda* and conduction of disciplinary life style.

## MATERIAL AND METHOD

### Case Report

The present case study is a successful *Ayurvedic* Management of *Grahani roga*. A 24 year old male

Table 1: Personal History.

<b>General condition:</b> Average	<b>Diet:</b> Mixed
<b>Appetite:</b> Decreased	<b>Sleep:</b> Disturb
<b>Bowel:</b> Irregular (4-5 times)/day, mucous mixed stool	<b>Thirst:</b> Normal
<b>Micturition:</b> Normal	<b>Addiction:</b> NAD
<b>Exercise:</b> Reduced	

Table 2: General Examination.

<b>Weight:</b> 65 kg	<b>Height:</b> 5'4"
<b>Temperature:</b> 99.4°F	<b>Pulse:</b> 76bpm
<b>B.P:</b> 120/80mmHg	<b>Respiratory Rate:</b> 18bpm
<b>Pallor:</b> Absent	<b>Icterus:</b> Absent
<b>Cyanosis:</b> Absent	<b>Clubbing:</b> Absent
<b>Oedema:</b> Absent	<b>Lymphadenopathy:</b> Absent
<b>JVP:</b> Not raised	<b>Hepato-jugular reflex:</b> Not raised

patient came to OPD of *Kaya Chikitsa, Rishikul Campus, Haridwar, UAU, Dehradun* on 16-07-2021 with chief complaints of pain in abdomen during defecation, incomplete evacuation of bowel, stool pass in a day 4-5 times, urge of stool pass immediate after meal, indigestion, stool present with mucous since 3 mnths.

### History of present illness

According to patient, He was asymptomatic before 3 months. Then he gradually develops pain in abdomen during defecation, incomplete evacuation of bowel, stool pass in a day 4-5 times, urge of stool pass immediate after meal, indigestion, stool present with mucous since 3 mnths. He took allopathic treatment from 3 mnths but didn't get satisfactory relief. So he came to PG dept. of *Kaya Chikitsa, Rishikul Campus, Haridwar* for better treatment and further management.

### History of Past illness

- No history of HTN, DM, TB, Thyroid, Asthma and any other severe illness.
- No history of Malaria, Jaundice, Typhoid, Dengue, Covid etc.

### Treatment History

Patient took allopathic medication for present complaints from 3 months but did not get satisfactory relief.

1. Cap. Oflox-oz – 1 bd
2. Cap. Pantop DSR – 1 od (empty stomach)
3. Tab. Mefal spas – 1 sos

### Surgical History

No H/O any surgery.

### Family History

Family history was negative for similar condition or IBS Syndrome and no history of severe illnesses.



Table 3: *Asthavidha Pariksha.*

<i>Nadi: Vatakaphaja</i>	<i>Mutra: Samanya</i>
<i>Mala: Asamanya (Badh or Abadh mala)</i>	<i>Jihva: Samanya (Nirama)</i>
<i>Shabda: Spastha (Samanya)</i>	<i>Sparsha: Samanya</i>
<i>Drik: Samanya</i>	<i>Aakriti: Madhyama</i>

Table 4: *Dashavidha Pariksha.*

<i>Prakriti: Vata kaphaja</i>	<i>Vikriti: Vata kaphaja</i>
<i>Sara: Madhyama</i>	<i>Samhanan: Madhyama</i>
<i>Pramana: Madhyama</i>	<i>Satva: Avara</i>
<i>Satmya: Madhyama</i>	<i>Aahar Shakti: Avara</i>
<i>Vyayama Shakti: Avara</i>	<i>Vaya: Yuvavastha</i>

**Systematic Examination****RVS**

- **Inspection:** No scar on chest region.
- **Palpation:** Chest is bilateral symmetrical
- **Auscultation:** Normal air entry in B/L lungs, Normal breath sounds present.
- **Percussion:** No pain & congestion in throat and chest region

**GIT**

- **Inspection:** No scar on abdomen region.
- **Palpation:** Abdomen is hard & tender
- **Auscultation:** Alternate bowel sounds present (sometimes increase or decrease).
- **Percussion:** Pain in abdomen, No apparent Organomegaly present.

**CVS**

- S1 & S2 heard normal
- No murmur or abnormal sounds present

**CNS**

- Patient is well conscious & oriented about date, time, place, person & origin but emotionally unstable.
- Insomnia present
- No abnormality in gait
- Normal ocular movements present

**Urino-genital**

- No Burning micturition present.

- Mild burning sensation around anus region & Pain during defecation
- No patches & rashes around genital region

**Locomotory**

- No pain in joints & no difficulty in movements.
- No any bone deformity

**Samprapti Ghataka**

- **Dosha** – Tridoshaja (*Vata Samana, Apana, Pachakpitta, Kledaka Kapha*)
- **Dushya** – Rasa
- **Agni** – Jatharaagni
- **Srotas** – Annavaha,
- **Srotodushti** – Atipravritti
- **Adhishthana** – Grahani
- **Rogamarga** – Abhyantar

**Investigations: (9/4/2019)**

All routine investigations (Hb%, TLC, DLC, ESR, RBS etc.) done and were within normal range.

- **Terminal ileum Biopsy:** Non-specific Ileitis
- **Lower GI Endoscopy:** Multiple mini Aphthous ulcers in terminal ileum.

**Differential Diagnosis**

- ✓ *Grahani*
- ✓ IBS
- ✓ Ulcerative Colitis
- ✓ Chron's disease

Table 5: **Treatment Given.**

Sr. no.	Drug	Matra (Dose)	Duration	Anupana
1.	<i>Grahanikapata rasa</i>	250 mg	Bd	With honey
	<i>Rasasindur</i>	100 mg		
	<i>Swarnagairika</i>	250 mg		
2.	<i>Bilvamajja churna</i>	3 gm	Bd	With <i>Takra</i>
	<i>Mukta bhasma</i>	250 mg		
3.	<i>Sutasekhara rasa</i>	500 mg	Bd	<i>Koshna jala</i>
	<i>Sankh bhasma</i>	250 mg		
4.	<i>Agnitundi vati</i>	1 tab	Qid	<i>Chushnaartha</i>
5.	<i>Kutajaghna vati</i>	2 tab	Bd	<i>Koshna jala</i>
6.	<i>Tkraarista</i>	40 ml	Bd 1hr after meal	With equal amt. of water

## RESULTS AND DISCUSSION

*Grahani* is a disease which affects large population globally especially in developing country and associated with improper food habits along with stressful lifestyle. The pathogenesis of *Grahani roga* works around *Agnidosha* which associated with impaired digestive function of digestive fire. *Ayurveda* described various treatment modalities for the management of *Grahani roga* such as; use of herbs & formulation, yoga and life style modification. In this case, an effort was made to treat oral medications having properties like *Dipana*, *Pachana*, *Medhya* etc. for 60 days (2 mnths). Within 2 mnths of treatment patient got improvement in symptoms as well as investigations. Present article summarized *Ayurveda* perspective of *Grahani roga* and its management by *Ayurveda* principles and life style modification.

## CONCLUSION

*Grahani roga* is related to digestion of food and its absorption is becoming more common than the past due to our faulty food habits, which are covered under *Grahani Dosh*. They are treated more pronounced way with considering *Ayurvedic* concept of *Agni* and administrating *Deepana*, *Pachana* drugs. 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 Roga* (IBS). On the basis of above discussion it can be concluded that *Ayurvedic* treatment is very successful in management of *Grahani* (IBS). It is easily adoptable in routine practice and also safe, cost effective and no side effects.

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