



## 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.<sup>[1]</sup> IBS is a disorder of the young patients presenting before age 45. Women are affected 2-3 times more often than men.<sup>[2]</sup>

Coexisting conditions, such as non-ulcer dyspepsia, chronic fatigue syndrome, and fibromyalgia 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.<sup>[3]</sup> 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 among *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 (*Apakvamalaprvritti*), Anorexia (*Aruchi*), heaviness in abdomen (*Udaragourava*), fatigue (*Alasya*), and indigestion (*Ajeerna*) since 2 years. These symptoms resemble with the *Grahani Roga*.<sup>[4]</sup>

**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: S<sub>1</sub> S<sub>2</sub> 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**

<i>Dosha</i>	<i>Samanavata, Apanavata, Pachakpitta</i>
<i>Dushya</i>	<i>Annarasa, Rasadhatu</i>
<i>Agni</i>	<i>Jatharagni</i>
<i>Ama</i>	<i>Jatharagnimandyajanya</i>
<i>Srotas</i>	<i>Annavaha</i>
<i>Srotodushti</i>	<i>Atiprvritti</i>
<i>Adhishthan</i>	<i>Grahani</i>
<i>Rogamarga</i>	<i>Abhyantara</i>

**Table 2: Oral Medications Administered**

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

**Table 3: Panchakarma Procedures**

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

**Table 4: Panchakarma procedures Administered**

1st day	2nd day	3rd day	4th day	5th day	6th day	7th day	8th day	9th day	10th day	11th day	12th day	13th day	14th day	15th day	16th day
A	A	N	A	N	A	N	A	N	A	N	A	N	A	A	A

**OBSERVATIONS AND RESULTS**

The follow up was made on 16<sup>th</sup> day, 30<sup>th</sup> day and 60<sup>th</sup> day. During this period patient did not developed any other complaints. After 60<sup>th</sup> 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<sup>th</sup> day, 30<sup>th</sup> day, and 60<sup>th</sup> day after completion of treatment.

**Table 5: Showing Grading for Clinical Features [5]**

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

(excessive salivation)	Moderate salivation with nausea occasionally/day	2	2	1	0	0	100%
	Excessive salivation with nausea & with often Vomiting	3					
<i>Klama</i> (Exhaustion)	No exhaustion	0	2	1	1	1	50%
	Exhaustion with moderate work	1					
	Exhaustion with mild Work	2					
	Exhaustion without effort	3					
<i>Tiktamlodgara</i> (iron pungent odour burps)	No complaint	0	5	2	1	1	80%
	Occasionally	1					
	1-3days/week	2					
	3-5days/week	3					
	5-7days/week	4					
	All the 7 days	5					
<i>Antrakunjan</i> (gurgling sound in abdomen)	No complaint	0	3	1	0	0	100%
	Occasionally	1					
	2-3 times/day before passing stool	2					
	Persistent	3					
Passing mucus in stool	No visible mucous in Stool	0	2	0	0	0	100%
	Visible mucous stickled to the stool	1					
	Passage of mucous with frequent stool	2					
	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*<sup>[6]</sup> (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*<sup>[7]</sup> (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*<sup>[8]</sup> 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*<sup>[9]</sup> (*Embllica 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 *Mustakarishtha*,<sup>[10]</sup> *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.

Kaidaryadi Kashayam described under the Grahaniroga, in Chikitsamanjari. It contains Kaidarya (Murray kenigi), Haritaki (Terminalia chebula), Nagara (Zingiber officinalis), Patola (Trichosanthes cucumerina). It acts as Deepana and Pachana, Tridosahara, Vatanulomaka and Malanulomaka. So it relieves in the symptom of Muhur Muhur Mala Pravritti in Grahani Roga. In Kutjarishta<sup>[11]</sup>, 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<sup>[12]</sup> 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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