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Comparative clinical study of *Nagradya Churna* and *Bhunimbadya Churna* in management of *Grahani* w.s.r. to Irritable bowel syndrome

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ABSTRACT

Grahani Dosha is vitiation of Agni i.e. functional derangement of Grahani regarding production of Pachaka Pitta (enzymes responsible for digestion) and also holding (Grahana) of Ama (food) for digestion. Grahani in Ayurveda is called as Pittadhara kala which is the seat of Agni responsible for digestion of food and situated above Nabhi. The part of small intestine and large intestine lying between Amashaya and Pakwashaya should be considered as Grahani. This part is also described as the sole site of Pitta. Various disorders of GI tract like irritable bowel syndrome (IBS) can be considered under heading of Grahani Roga. Both the formulations Nagradya Churna and Bhunimbadya churna are highly effective, promote appetite, digestion and remove Ama Dosha from the system by increasing the power of Agni. Madhu is Yogabahi and it helps to initiate the absorption through intestine properly. Total 40 patients of Grahani were registered and randomly divided into 2 groups for clinical trial of 45days. Result of the study revealed that both the formulations produced significant results in almost all cases barring a few patients who were suffering from longer period.

Key words: *Nagradya Churna, Bhunimbadya churna, Grahani, Irritable bowel syndrome.*

INTRODUCTION

In the extant Brihatraies, the word Grahani Dosha, and Grahani Gada are found to be used vary erratically. But Acharya Chakrapani, found to use the word Grahani Dosha on commentating on term Grahani Roga, Grahani Gada etc.[1] Acharya Indu while commenting on said that, the Vishama, Tikshana, Manda Agni's mentioned in Shara Vibhagadhyaya due to their Grahani Ashritatva can be considered as Grahani Dosha. The disease Grahani Dosha is one of the leading disorders of Annavaha Srotasa. Agni Dosha (malfunctioning of enzymes responsible for digestion) is main culprit in causation of Grahani Dosha.[2] Acharya Charaka states that Grahani is situated above Nabhi (Umbilicus).[3] while Acharya Sushruta described its location between Pakwashaya and Amashaya and called it as Pitta Dhara Kala. Acharya Sushruta described the location of Amashaya as, above the Pittashaya where food enters with the help of Prana Vayu (Adana Karma).[4] It is not only a seat of Agni but is also supported and strengthened by it (i.e. Jatharagni). The digestion in Amashaya (Stomach) can be broadly divided into two phases. Initial phase with predominance of Kapha and then phase of Pitta predominance respectively called as Madhura Avasthapaka and Amla Avasthapaka. The Pitta enters the finer particles of food and brings about Paka (Transformation) in both aspects Parinamana (physical stage) and Pravrtti (Chemical stage) When Amla Bhava (Acidity) has reached its maximum Mudrika Dwara (Pyloric sphincter), opens

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and food is allowed to pass slowly into Grahani. All this mechanism is under control of Samana Vayu and Vyana Vayu. The digestion occurring in Grahani is very important. Due to the Amla Bhava of Ahara coming from the stomach, Achcha Pitta is secreted in the Grahani. The maximum Sara Bhaga absorption takes place in Kshudantra part of Grahani. The remaining Sara Bhaga is separated in Brihadantra part of Grahani from the food, which is predominantly in Kitta form. Dravamsha of Mala also absorbed along with Sara Bhaga. This function continues until the contents reach the Pakwashaya.[5] All these functions are carried out by the sole site Agni, (Pachaka Pitta) and Samana Vayu i.e. Grahani, Pitta Dhara Kala and Mala Dhara Kala in Grahani, Adhogami Dhamanies; the remaining functions are carried out by Pakwashaya. In this Pakwashaya the Kittamsha is dehydrated by Agni and it takes a bolus form (Paripinda Rupa) resulting in pungent taste and formation of Vayu.[6] 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. Purvarupa of Grahani are Aalasya (inaction), Balakshaya, Trishna (excessive thirst), Anna Vidaha (burning sensation), Chirapaka (delayed digestion), Kayagaurava[7] and Rupa are Ati Srushta mala pravritti, vibbadha mala pravritti (Occasional hard and soft stool) Arochaka, Vairashya (altered in tongue), praseka (nausea), Tamaka, Shunapadkara, Asthiparvaruka, chhardana (vomiting), Jwara (fever), Lohanugandhi Udgara.[8] As Grahani is caused due to Agnimandya the main line of treatment should be to correct the Agnidushti by following Langhana and administering drugs which are Deepana and Pachana in action.[9] It is presumed that Nagaradya churna[10] and Bhunimbadya Churna.[11] are effective in the treatment of Grahani. Bhunimbadya Churna contains Chirayita, Kutki, Sunthi, Marich, Peeper. Nagarmotha, Inderjau, Chitraka, and Vatsak is indicated in case of Grahani. Nagradya churna contains Nagarmotha, Shunthi, Ativisha, Dhatki, Rasont, Vatsak, Inderjau, Bilva, Patha and Kutki. All these drugs we can see have Deepana and Ama Pachan properties. Hence study is selected as entitled 'Comparative Clinical study of Nagradya Churna and Bhunimbadya Churna in Management of Grahani w.s.r. to Irritable bowel syndrome'.

Aims and Objectives

1. To evaluate clinical efficacy of Nagaradya churna in the patient of Grahani.
2. To evaluate clinical efficacy of Bhunimbadya Churna in the patient of Grahani.
3. To compare the clinical efficacy of Nagaradya churna and Bhunimbadya Churna in the patient of Grahani.

Materials and Methods

40 patients suffering from Grahani with presenting complains of frequent motion, Alternate loose motion with constipation, passage of mucus, Abdominal pain, Delayed digestion, Aruchi, Alasya, Change in thirst, Weakness associated with anaemia were selected from OPD/IPD of Kayachikitsa department for investigation and trial. Patients were selected randomly irrespective of race, caste, sex, religion etc.

Inclusion Criteria

1. Patients with clinical sign and symptoms of Grahani in classical ayurvedic texts and modern literature.
2. Abdominal pain, flatulence and bloating that have been present for at least 3 Months.
3. Age between 18 to 60 years irrespective of both sex.
4. Patient willing for trial.

Exclusion Criteria

1. Patients having systemic diseases like Diabetes, Hypertension etc.
2. Pregnant and lactating women
3. Patients having tuberculosis, malignancy or hepatic abscess.
4. Any other state thought fit for exclusion

Investigations

Following investigation were carried out before & after treatment, stool test, CBC, Plain X-Ray abdomen (only for differential diagnosis)

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Study Design

In this clinical trial 40 patients of Grahani (Irritable bowel syndrome) satisfying the inclusion criteria were selected for the study and randomly divided in two groups A and B.

Table 1: Drug, dose and duration.

	Group A	Group B
Trial drug	Nagradya Churna orally	Bhunimbadya Churna orally
Drug dose	2 gm twice a day	2 gm twice a day
Anupana	Honey	Honey
Duration of trial	Total 45 days, with assessment on 15th, 30th and 45th day.	Total 45 days, with assessment on 15th, 30th and 45th day.
Follow-up	15 days	15 days

Table 2: Ingredients of Nagradya Churna.

Drug Name	Botanical Name	Part Used	Quantity
Nagarmotha	Cyperus rotundus	Roots	1 Part
Shunthi	Zinziber officinale	Roots	1 Part
Atis	Aconitum heterophyllum	Tuberous roots	1 Part
Dhatki	Woodfordia fruiticosa	Flower	1 Part
Rasont	Berberis aristata	Panchang	1 Part
Vatsak	Holarrhena antidysenterica	Bark	1 Part
Inderjau	Wrightia tinctoria	Seeds	1 Part
Bilva	Aegel marmelos	Fruit	1 Part
Patha	Cissampelos parieira	Roots, leaves	1 Part
Kutki	Picrorrhiza kurrora	Root	1 Part

Table 3: Ingredients of Bhunimbadya Churna.

Drug Name	Botanical Name	Part Used	Quantity
Chirayita	Swertia Chirayita	Panchang	1 Part
Kutki	Picrorrhiza Kurrora	Roots	1 Part
Sunthi	Zinziber Officinale	Roots	1 Part
Marich	Piper Nigrum	Fruit	1 Part
Peeper	Piper Longum	Fruit	1 Part
Nagarmotha	Cyperus Rotundus	Roots	1 Part
Inderjau	Wrightia Tinctoria	Seeds	1 Part
Chitraka	Plumbago Zeylanica	Root	2 Parts
Vatsak	Holarrhena Antidysenterica	Bark	16 Parts

ASSESSMENT OF THERAPY

Criteria for assessment

The patients were examined as per suitable scoring pattern and objective signs were recorded to assess any changes present in the patients. After completion of 15th, 30th and 45th day of Nagradya Churna orally, the efficacy of the therapy was assessed on the basis of the following subjective criteria.

Follow up: Follow up study was done after 15 days.

Subjective criteria

The result of the treatment will be evaluated based on the detailed case sheet proforma prepared on Nidana and lakshana of Grahani as mentioned in the text.

Gradation criteria of specific symptom is as follows;

1. Muhubaddha / Muhudrava Malpravriti

A. Frequent bowel habit (in a day)

G0 : Bowel habit with frequency 1 to 2 times.

G1 : Bowel habit with frequency 3 to 4 times.

G2 : Bowel habit with frequency 4 to 6 times.

G3 : Bowel habit with frequency 6 times or more.

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B. Alternate loose motion with constipation

G0 : Normal.

G1 : Occasional constipation with diarrhoea.

G2 : Twice in a week.

G3 : More than twice in a week.

2. Arochaka

G0 : Taking normal diet with interest.

G1 : No interest in taking normal diet.

G2 : Food has taken forcefully.

G3 : Not taken a food even forcefully.

3. Trishna

G0 : Normal thirst.

G1 : Mild thirst,

G2 : Moderate thirst increase. frequent intake of water.

G3 : Excessive thirst, never satisfied after taking a good amount of water.

4. Praseka

G0 : No complaint.

G1 : Mild salivation.

G2 : Moderate salivation with nausea occasionally per day.

G3 : Excessive salivation with nausea and with often vomiting.

5. Shoonpaadkaraha

G0 : Normal, no swelling

G1 : Occasional swelling around ankle joint

G2 : Occasional swelling in legs and hands

G3 : Continuous swelling in legs and hands

6. Asthiparvaruk

G0 : No pain.

G1 : Mild pain in bone and joints

G2 : Moderate pain in bone and joints but no medication required

G3 : Excessive pain in bone and joints, medication required

7. Chhardan

G0 : Normal, No vomiting

G1 : Occasional vomiting

G2 : Frequent vomiting but no medication required.

G3 : Frequent vomiting, medication required.

8. Udara Shool

G0 : No abdominal pain

G1 : Some time / rarely abdominal pain

G2 : Intermittent crampy abdominal pain which is relieved by passage of flatus & stool

G3 : Continuous abdominal pain which is not relieved by passage of flatus & stool

9. Shleshma Malapravriti

G0 : No visible mucous in stool

G1 : Visible mucous stickled to the stool

G2 : Passage of mucous with frequent stool

G3 : Passage of large amount of mucous in stool

10. Atopa

G0 : No complaint.

G1 : Occasional burberism

G2 : Before passing stool. 2-3 times/day

G3 : Whole day.

11. Alasya

G0 : Enthusiastic.

G1 : Occasionally feel litharge.

G2 : Often feel litharge.

G3 : Persistent.

12. Jwara

G0 : No fever

G1 : Mild Fever only at night

G2 : Mild fever throughout the day

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G3 : Severe fever throughout the day

13. Lohaamagandhi-tiktaamla Udgaar

G0 : No complaint.

G1 : Occasional (1-3 days/week)

G2 : Frequent (3-5 days/week)

G3 : Persistent (throughout the week)Statistical analysis

The information gathered on the basis of above observation was subjected to statistical analysis. Data was analyzed statistically in terms of Mean score, Percentage of relief, Standard Deviation (S.D.), Standard Error (S.E.) and 't' test. interpreted as: Insignificant P > 0.05, Significant P < 0.05, Highly significant P < 0.01

OBSERVATIONS AND RESULTS

Table 4: Showing the percentage of patients in both group improved, After treatment in trail group with respect to Clinical signs and symptoms.

Sign & Symptoms	AT1 (After 15D)		AT2 (After 30D)		AT3 (After 45D)	
	Group A	Group B	Group A	Group B	Group A	Group B
Frequent bowel habit (in a day)	65	70	100	100	100	100
Frequent bowel habit (in a day)	65	40	100	100	100	100
Arochaka	56.25	58.82	100	100	100	100
Trishna	58.82	62.50	100	100	100	100
Praseka	82.35	80	100	100	100	100
Shoonpaadkaradaha	58.82	72.22	100	100	100	100
Asthiparvaruk	73.68	63.16	100	100	100	100
Chhardana	64.29	73.33	100	100	100	100
Udara shola	58.82	63.16	100	100	100	100
Slesma malapravriti	55.56	61.11	100	100	100	100
Atopa	84.21	78.95	100	100	100	100
Alasya	84.21	83.33	100	100	100	100
Jwar	75	76.47	100	100	100	100
Lohaamagandhi-tiktaamla Udgaar	68.75	70.59	100	100	100	100

Table 5: Statistical analysis showing the effectiveness of treatment with respect to the sign and symptoms in Group A.

Sign / symptoms	Study period	Mean ± SD	Df	SE	t value	P value
Frequent bowel habit (in a day)	BT	2.40±0.6				
	AT1	1.75 ± 0.44	19	0.13	5.94	< 0.001
	AT2	1.15 ± 0.49	19	0.11	12.58	< 0.001
	AT3	0.25 ± 0.44	19	0.1	19.64	< 0.001
Alternate loose motion with constipation	BT	2.25 ± 0.55				
	AT1	1.40 ± 0.50	19	0.11	5.94	< 0.001
	AT2	0.95 ± 0.50	19	0.11	12.36	< 0.001

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	AT3	0.20 ± 0.41	19	0.1	23.677	< 0.001
Arochaka	BT	2.31 ± 0.48				
	AT1	1.75 ± 0.45	15	0.11	4.39	< 0.001
	AT2	1.19 ± 0.40	15	0.1	13.17	< 0.001
	AT3	0.31 ± 0.48	15	0.12	12.09	< 0.001
Trishna	BT	2.24 ± 0.56				
	AT1	1.65 ± 0.49	16	0.12	4.78	< 0.001
	AT2	1.76 ± 0.11	16	0.12	11.78	< 0.001
	AT3	0.18 ± 0.39	16	0.1	19.79	< 0.001
Praseka	BT	2.29 ± 0.59				
	AT1	1.47± 0.62	16	0.09	8.64	< 0.001
	AT2	1.65 ± 0.49	16	0.12	13.78	< 0.001
	AT3	0.24 ± 0.44	16	0.1	19.79	< 0.001
Soonapadakardaha	BT	2.12 ± 0.49				
	AT1	1.53± 0.51	16	0.123	4.78	< 0.001
	AT2	1.71 ± 0.47	16	0.123	11.47	< 0.001
	AT3	0.12 ± 0.33	16	0.08	23.32	< 0.001
Asthiparvaruk	BT	1.42 ± 0.49				
	AT1	1.53± 0.61	18	0.1	7.09	< 0.001
	AT2	0.84 ± 0.50	18	0.11	12.1	< 0.001
	AT3	0.32 ± 0.48	18	0.12	12.33	< 0.001
Chhardana	BT	1.71 ± 0.61				
	AT1	1.07 ± 0.27	13	0.13	4.83	< 0.001
	AT2	0.36 ± 0.50	13	0.13	10.2	< 0.001
	AT3	0.07± 0.27	13	0.13	12.36	< 0.001
Udarashoola	BT	2.00 ± 0.61				
	AT1	1.41± 0.62	16	0.123	4.78	< 0.001
	AT2	1.71 ± 0.47	16	0.114	11.36	< 0.001
	AT3	0.18 ± 0.10	16	0.154	11.82	< 0.001
Slesma mala pravrutti	BT	2.17 ± 0.51				
	AT1	1.61± 0.61	17	0.121	4.61	< 0.001
	AT2	0.89 ± 0.32	17	0.109	11.76	< 0.001

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	AT3	0.11± 0.32	17	0.09	20.95	< 0.001
Atopa	BT	2.11 ± 0.46				
	AT1	1.26± 0.56	18	0.86	9.79	< 0.001
	AT2	0.63± 0.50	18	0.118	12.52	< 0.001
	AT3	0.11± 0.32	18	0.76	26.15	< 0.001
Alasya	BT	2.11 ± 0.57				
	AT1	1.26± 0.56	17	0.86	9.79	< 0.001
	AT2	0.63± 0.50	17	0.118	12.52	< 0.001
	AT3	0.11± 0.32	17	0.76	18.49	< 0.001
Jwara	BT	1.56 ± 0.63				
	AT1	0.81± 0.54	15	0.112	6.7	< 0.001
	AT2	0.19± 0.40	15	0.12	11	< 0.001
	AT3	0.06± 0.25	15	0.13	11.6	< 0.001
Lohamagandhi Tiktoamlodgara	BT	2.00 ± 0.63				
	AT1	1.31± 0.8	15	0.12	5.54	< 0.001
	AT2	0.44± 0.51	15	0.128	12.19	< 0.001
	AT3	0.13± 0.34	15	0.12	15	< 0.001

Table 6: Statistical analysis showing the effectiveness of treatment with respect to the sign and symptoms in group B.

Sign / symptoms	Study period	Mean ± SD	Df	SE	t value	P value
Frequent bowel habit (in a day)	BT	2.40±0.4				
	AT1	1.70 ± 0.47	19	0.105	6.65	< 0.001
	AT2	1.1 ± 0.45	19	0.105	12.36	< 0.001
	AT3	0.20 ± 0.41	19	0.117	18.8	< 0.001
Alternate loose motion with constipation	BT	2.25 ± 0.64				
	AT1	1.65 ± 0.49	19	0.11	5.33	< 0.001
	AT2	0.85 ± 0.49	19	0.11	12.45	< 0.001
	AT3	0.25 ± 0.44	19	0.14		< 0.001
Arochaka	BT	2.24 ± 0.66				
	AT1	1.65 ± 0.70	16	0.12	4.78	< 0.001
	AT2	1.06 ± 0.56	16	0.09	12.34	< 0.001
	AT3	0.29 ± 0.47	16	0.13	14.40	< 0.001
Trishna	BT	2.13 ±				

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		0.62				
	AT1	1.50 ± 0.73	15	0.12	5	< 0.001
	AT2	1.75 ± 0.45	15	0.12	11	< 0.001
	AT3	0.13 ± 0.34	15	0.13	19.49	< 0.001
Praseka	BT	2.40 ± 0.51				
	AT1	1.40± 0.51	14	0.09	7.48	< 0.001
	AT2	0.73 ± 0.46	14	0.12	13.23	< 0.001
	AT3	0.20 ± 0.41	14	0.1	20.58	< 0.001
Soonapadakaradaha	BT	2.11 ± 0.47				
	AT1	1.39 ± 0.61	17	0.11	6.64	< 0.001
	AT2	0.61 ± 0.50	17	0.12	12.36	< 0.001
	AT3	0.06 ± 0.24	17	0.09	20.95	< 0.001
Asthiparvaruk	BT	2.05± 0.52				
	AT1	1.42± 0.61	18	0.11	5.55	< 0.001
	AT2	0.84 ± 0.50	18	0.09	12.59	< 0.001
	AT3	0.32 ± 0.48	18	0.12	13.47	< 0.001
Chhardana	BT	1.80 ± 0.56				
	AT1	1.07 ± 0.26	14	0.11	6.2	< 0.001
	AT2	0.67 ± 0.49	14	0.13	8.5	< 0.001
	AT3	0.00± 0.00	14	0.14	12.43	< 0.001
Udarashoola	BT	2.11 ± 0.46				
	AT1	1.41± 0.62	18	0.14	5.55	< 0.001
	AT2	1.47 ± 0.51	18	0.11	12.21	< 0.001
	AT3	0.68 ± 0.48	18	0.07	26.15	< 0.001
Slesma mala pravrutti	BT	2.00 ± 0.49				
	AT1	1.39± 0.61	17	0.11	5.16	< 0.001
	AT2	0.67 ± 0.49	17	0.11	5.16	< 0.001
	AT3	0.06± 0.24	17	0.09	19.8	< 0.001
Atopa	BT	2.00 ± 0.47				
	AT1	1.21 ± 0.63	18	0.96	8.21	< 0.001
	AT2	0.58± 0.51	18	0.11	12.21	< 0.001
	AT3	0.11± 0.32	18	0.72	26.19	< 0.001

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Alasya	BT	2.22 ± 0.43				
	AT1	1.39 ± 0.50	17	0.09	9.21	< 0.001
	AT2	0.67± 0.49	17	0.12	12.90	< 0.001
	AT3	0.17± 0.38	17	0.05	18.37	< 0.001
jwara	BT	1.65 ± 0.70				
	AT1	0.88± 0.40	16	0.10	7.2	< 0.001
	AT2	0.18± 0.39	16	0.12	11.78	< 0.001
	AT3	0.06± 0.24	16	0.15	10.59	< 0.001
Lohamagandhi Tiktoamlodgara	BT	2.00 ± 0.63				
	AT1	1.35± 0.49	16	0.11	6.19	< 0.001
	AT2	0.41± 0.51	16	0.11	13.78	< 0.001
	AT3	0.18± 0.39	16	0.11	16	< 0.001

Table 7: Showing the clinical assessment of sign and Symptoms after treatment in both Group.

Clinical Assessment	AT1				AT2				AT3			
	Gr. A		Gr. B		Gr. A		Gr. B		Gr. A		Gr. B	
	f	%	f	%	f	%	f	%	f	%	f	%
Cured	0	0	0	0	0	0	0	0	7	35	5	25
Maximum Improvement	0	0	0	0	2	10	3	15	13	65	15	75
Moderate Improvement	12	60	11	55	18	90	17	85	0	0	0	0
Mild Improvement	8	40	9	45	0	0	0	0	0	0	0	0
Unsatisfactory	0	0	0	0	0	0	0	0	0	0	0	0

Discussion

The result shows that in Group A, after 15 days moderate improvement was seen in 12 patients (60%) and mild improvement was seen in 8 patients (40%) After 30 days, moderate improvement was seen in 18 patients (90%) and maximum improvement was seen in 2 patients (10%). After 45 days in Group A, 7 patients (35%) got cured, 13 patients (65%) got maximum improvement. In Group B, the result shows that after 15 days of treatment 11 patients (55%) got moderate improvement and 9(45%) got mild improvement, After 30 days of treatment, 3 patients (15%) got maximum improvement and 17 patients (85%) got moderate improvement and After 45 days of treatment, the result shows that 5 patients (25%) got cured, 15 patients (75%) got maximum improvement, 5 patients (33.33%) got moderate improvement. No unsatisfactory results were found during treatment. Nagradya churna maintained in Grahani Chikitsa contains Nagarmotha, Shunthi, Ativisha, Dhatki, Rasont, Vatsak, Inderjau, Bilva, Patha and, Kutki. [12] All these drugs have Dipana, Pachana, Samgrahi, Visaghna, Kriminut, Sandhaniya, Ama, dosahara properties. It contain Katu Tikta rasa which increase Agni, due to Kashaya, Madhur rasa it is Grahi. Most of drug has Kapha pitta Shamak properties. Bhunimbadya churna maintained in Grahani Chikitsa contains Chirayita, Kutki, Sunthi, Marich, Peeper, Nagarmotha, Inderjau, Chitraka, and Vatsak. All these drugs have Dipana, Pachana, Jvaraghna,

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Vranasodhana, Saraka, Trsnapaha, Ruchya and Ama dosahara properties. It contains Katu Tikta rasa which increase Agni, due to Kashaya rasa it is Grahi. Due to Ruksha Laghu guna it goes deep in Srotus and remove Kapha Avarana Most of drug has Kapha pitta Shamak properties. According to constituents of Bhunimbadi Churna, pusses anti-inflammatory, Anti hyperglycaemic, hypolipidemic, antioxidant and other therapeutic properties.[13] Most of the drug alkaloid has antisecretory, spasmolytic, antienteropooling, antimotility, and antiperistaltic activity.[14] The postulated mechanism of drugs action is due to its anti-motility action on the bowel and there by correcting the disordered colonic motor activity and Ama pachana and Deepana property of medicine. It is also found in normalising the excessive excitation of Doshas and marked decrease of excess formation of mucus. Thus all the properties of Nagradya Churna and Bhunimbadi Churna improves the sign and symptoms of Grahani Roga.

Conclusion

According to Charaka, lifespan, complexion, strength, health, enthusiasm, immunity, energy and all other vital factors of life depend on Agni. One may die if this Agni is extinguished. Any erratic disorder of Agni causes vitiation of Grahani, hence disorder of Agni is the main cause of Grahani Roga. The trial drugs Nagradya churna and Bhunimbadya churna administered in the dose of 2gm twice a day after food for 45 days and cases followed up for 15 days. It produced significant results in almost all cases barring a few patients who were suffering from longer period. Comparison of therapeutic response in both the trial groups revealed that 65% of Group A patients exhibited improvement of maximum degree & 75% of patient in Group B showed maximum degree of improvement and significant results were obtained in almost all cases in both the trial group. No unsatisfactory results were found in both the groups. Further the trial drugs did not produce any side effects.

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