



AYURVEDIC MANAGEMENT OF JALODARA W.S.R. TO CHRONIC LIVER DISEASE – A CASE STUDY

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ABSTRACT:

Jalodara (ascites) is the most common manifestation of liver dysfunction. The most common cause of ascites is liver disease. It is the accumulation of fluid in the peritoneum. In spite of advanced medical facilities, still, there is no sure treatment which cures a patient of ascites totally. The modern treatment only provides provisional relief with time dependent recurrence but the fluid gets collected in the abdominal cavity repeatedly. In such case, *Ayurvedic* treatment gives relief without any side effect. Ascites can be correlated with *Jalodara* as per *Ayurved*. The proper treatment including diet restriction, medicinal treatment and surgical procedure are mentioned in *Ayurvedic* texts. A 38 year old female patient came to our hospital with abdominal distension, swelling all over the body, anorexia, nausea, abdominal pain and shortness of breath, etc. She was given *Nitya Virechana* (daily therapeutic purgation) with *Triphala Kwatha* and *Erand Taila*, Medicines like *Arogyavardhini Vati*, *Punarnava Mandoor Vati*, *Bhumyamalaki Swarasa* and *Pippali Ksheerapaka* for about 1 month and restricted diet plan (only milk) for 2 months. Just after 2 months, a significant improvement was noted in all the symptoms of the patient. USG findings also showed improvement in comparison with previous report. Hence it was concluded that *Ayurvedic* management gives relief in chronic liver disease induced ascites.

KEYWORDS:

Jalodara, ascites, CLD, *Ayurved*, Diet restriction, *Nitya Virechana*

INTRODUCTION:

Chronic liver disease (CLD) is a progressive deterioration of liver functions for more than six months. CLD is a continuous process of inflammation, destruction and regeneration of liver parenchyma, which leads to fibrosis and cirrhosis resulting into ascites.ⁱ Ascites is a gastroenterological term for an accumulation of fluid in the peritoneal cavity that exceeds 25ml.ⁱⁱ *Ayurved* has always emphasized on the balanced state of *Agni*, *Dosha*, *Dhatu* and *Mala*. Any vitiation among these will lead to diseased condition. In fact all the diseases are caused by *Agnimandya* and improper digestion only and *Udararoga* (diseases of abdomen) is the main disease among them. Other causes are *Ajeerna*, *Dushita Ahara*, *Mala* and *Dosha Sanchaya*, performing sinful and heinous acts, etc. Ascites can be correlated

with *Jalodara*, one type of *Udararoga* as per *Ayurved*.ⁱⁱⁱ *Prakupita* (aggravated) *Vata* among *Tridosha*, gets accumulated in *Udara* between *Twak* (skin) and *Mamsa* (muscle tissue) leading to *Shotha* (swelling); being termed as *Udararoga*. *Vata* and *Manda Agni* are the prime factors in the manifestation of *Udararoga*.^{iv}

Ascites as a disease has been described briefly in *Ayurvedic* literature along with medical treatment and surgical procedures related to the management of this condition. Diet restriction is also having an important role in the management of this condition.

Ayurvedic management with drugs such as provocation of digestion, daily therapeutic purgation, stimulant for hepatic function and only milk diet that acts on root of pathology of ascites and by breaking down of pathogenesis gives good result in this disease.

CASE REPORT:

A 38-year-old female patient registered by the O.P.D. number 12712 on the date of 28/07/2021 came to the O.P.D. number 5 of Government Akhandanand Ayurveda Hospital. She presented herself with the following chief complaints:

- Abdominal distension since 5 months
- Swelling all over the body since 8 months
- Loss of appetite since 8 months
- Nausea since 2 months
- Abdominal pain since 2 months
- Shortness of breath on exertion since 2 months

HISTORY OF PRESENT ILLNESS:

The patient was apparently normal before 8 months. Then she gradually started complaints of loss of appetite and swelling all over the body. She noticed abdominal distension before 5 months and after that complaints like nausea, abdominal pain, shortness of breath starts. For this, the patient took allopathic medicines for 2 months but did not get relief hence she came to get *Ayurved* treatment at our hospital and was admitted to the indoor patient department for daily observation.

PAST HISTORY:

- Episodes of melena (black coloured stool) before 8 months
- Known case of hypothyroidism since 5 years
- Abdominal paracentesis & blood transfusion before 1 month
- No history of tuberculosis, diabetes mellitus and hypertension

FAMILY HISTORY:

No evidence of this type of disease in the family.

PHYSICAL EXAMINATION:

- Bilateral pedal oedema: +++
- Body temperature: 98.6 F
- Mild pallor
- Blood pressure: 100/60mmHg
- Pulse rate: 84/min
- No icterus
- Respiratory rate: 18/min

SYSTEMIC EXAMINATION (PER ABDOMEN):

- Inspection: Distended abdomen
- Palpation: Tenderness in right hypochondriac and umbilical region
- Percussion: Shifting dullness and fluid thrill: Present

INVESTIGATION:

Table 1 summarizes the ultrasound investigations before and after treatment.

Table 1: Ultrasound investigations before and after treatment

Parameters	Before Treatment (24/07/2021)	After Treatment (11/08/2021)	Follow up (01/10/2021)
USG Abdomen	Liver appears relatively smaller in size. Irregular liver surface with coarse echotexture s/o cirrhosis. 6 mm gallbladder calculus. Mild splenomegaly. Gross free fluid in the peritoneal cavity.	Shrunken right lobe of liver. Coarse bright echotexture. Spleen- Normal size. Mild ascites.	Liver- normal size measures 13.1 cm, mildly increased texture. 6 mm gallbladder calculus. Spleen- normal in shape and echotexture, normal in size measures 10.2 cm No ascites appreciated. No mass or collection seen in the RIF region. Mild fatty liver.

TREATMENT:

Table 2 shows the treatment schedule of the patient.

Table 2: Treatment schedule of the patient

Date	Medicine	Dose	Time
28/07/2021 to 18/08/2021	<i>Arogyavardhini Vati</i>	2 Tab (125mg each)	3 times
	<i>Punarnava Mandoor Vati</i>	1 Tab (125mg each)	3 times
	<i>Bhoomyamalaki Swarasa</i>	40 ml	2 times
	<i>Pippali Ksheerapaka</i>	80 ml	1 time
	<i>Nitya Virechana with Triphala Kwath + Erand Taila</i>	40 ml + 10 ml	1 time

Whole day, *Pattabandhana* (tight bandaging) over the abdomen was advised.

PATHYA-APATHYA:

Diet was restricted to the patient and she was kept only on cow milk. All types of food items and water were restricted during whole I.P.D. stay. When the patient was hungry or thirsty, she was given lukewarm *Godugdha* (cow milk) only. Medicines were also given with cow milk only.

RESULT:

Significant results were found in all the symptoms, abdominal girth and weight of the patient.

Table 3: Relief in symptoms

Date	Abdominal distension	Swelling	Loss of appetite	Nausea	Abdominal pain	Shortness of breath
29/07/2021	+++	+++	+++	++	++	++
31/07/2021	+++	+++	++	+	++	++
02/08/2021	++	+++	++	-	++	++
04/08/2021	++	++	+	-	++	+
06/08/2021	++	++	+	-	+	+
10/08/2021	+	++	-	-	+	+
13/08/2021	+	+	-	-	+	+
17/08/2021	-	+	-	-	+	-

Table 4: Measurement of abdominal girth

Date	4 cm below umbilicus (cm)	At umbilicus (cm)	4 cm above umbilicus (cm)
29/07/2021	101	96	93.5
31/07/2021	103	94	90.5
02/08/2021	94.5	90.5	87

04/08/2021	93	86	83.5
06/08/2021	90	85	83
10/08/2021	86.5	79	78.5
13/08/2021	83	78.5	77
17/08/2021	83	78	78

Table 5: Measurement of weight

Date	Weight (kg)
29/07/2021	63.16
02/08/2021	60.22
06/08/2021	56.1
10/08/2021	55
17/08/2021	51.5

DISCUSSION:

Discussion on causes of ascites, *Acharya Charaka* has mentioned many causes of *Udararoga*. In the present case, the patient had low digestive fire, taking spicy, dry and impure diet, negligence of the treatment of severe diseases and suppression of natural urges.

DISCUSSION ON TREATMENT OF ASCITES:

Nidana Parivarjana (To avoid causative factors):

For this, diet and water intake was restricted and only milk was given.^v

Agnidipti (Provocation of digestion):

Mandagni is the prime factor in any type of *Udararoga*. For *Agnidipti*, *Pippali Ksheerapaka* was given to the patient. *Pippali* (*Piper longum* Linn.) is *Agnidipaka* and indicated in *Ajeerna*, *Aruchi* and *Pleeharoga*.^{vi} It enhances *Agni* and helps in *Samprapti Vighatana* (breakdown of pathogenesis).

Nitya Virechana (Daily therapeutic purgation):

Chikitsa Sutra of *Jalodara* is "*Nitya Virechana*".^{vii} To break the *Sanga* of all the *Dosha* and retained fluid and separate them, *Virechana* is necessary. *Yakrit* (Liver) is the *Moolasthan* (Main site) of *Rakta*. *Rakta* and *Pitta* has *Ashraya* and *Ashrayi Sambandha* (Mutual interdependence), hence for elimination of vitiated *Pitta Dosha*, purgation is the best treatment. *Virechana* also decreases abdominal girth and oedema by decreasing fluid in the abdominal cavity. *Triphala Kwath* and *Erand Taila* (*Ricinus communis* Linn.) were given in present case for *Virechana* purpose. Daily 3-4 *Vega* were noted in patient after giving this drug.

Arogyavardhini Vati and *Bhumyamalaki Swarasa*:

Arogyavardhini Vati is known for its benefits especially to the liver. It maintains the liver function and promotes balance as well as a healthy digestive system. Its main content is *Katuki* (*Picrorhiza kurroa* Royle ex Benth.) which acts as *Pitta Virechana* and beneficial to *Yakrit*.^{viii ix} Ascites from liver disease is difficult to be treated; hence, there comes the need to correct the pathology from its root cause. *Bhumyamalaki* (*Phyllanthus niruri* Hook. f. non Linn.) is the drug of choice in spleen and liver disease. It corrects the working of digestive system, improves the liver functions. The study shows that *Bhumyamalaki* has hepatoprotective action.^x

Punarnava Mandoor Vati:

Punarnava (*Boerhavia diffusa* L.) reduces *Shotha* (swelling). *Mandoor* is also indicated in *Pandu* (anaemia), *Shotha* (oedema) and *Shwasa* (difficulty in breathing).^{xi} The patient had all these symptoms with *Jalodara*, hence this medicine was chosen which had shown significant result in all symptoms.

CONCLUSION:

Strict diet restriction, daily therapeutic purgation and *Ayurvedic* medicines had shown marvellous improvement in all the symptoms of *Jalodara*. In the present case, abdominal distension, swelling, anorexia, breathing difficulty and all above mentioned symptoms were significantly improved without any side effect. Although the patient was kept on milk diet, no any side effects were observed during and

after the treatment. Hence it can be concluded that *Ayurvedic* medicines with *Nitya Virechana* give better result in ascites without side effect.

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