



**Case Study**

**AYURVEDIC MANAGEMENT OF CHOLELITHIASIS -A CASE STUDY**

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*Churna*.

**ABSTRACT**

Cholelithiasis (gallstone formation) is a common Gastrointestinal disorder. The disease Cholelithiasis has not been described directly in Ayurvedic classics. The word *Ashmari* is described only in the context of *Ashmari* (urinary calculi). Surgery is the most common form of treatment for gall stones, however the fact that surgically removing gallstones requires the removal of an entire organ has led to a growing interest in non-surgical treatment. But so far as the medical management of gall stone is concerned, it is not up to the mark in allopathic system. Hence our article is a step in the direction of making an availability of a safe and effective non-surgical management of Cholelithiasis. A 35-year-old female patient reported to OPD Bangalore, with the complaints of severe pain abdomen, anorexia, distension of abdomen and vomiting. The patient was diagnosed as cholelithiasis with physical symptoms and with the help of all investigation. Oral medications like *Arogyavardini vati*, *Varunadi Kashaya*, *Yavakshara* and *Katuki Churna* was administered to the patient for 1 month and follow up was done after 3 months of treatment, a significant response was observed over clinical symptoms and USG reports.

**INTRODUCTION**

There are several diseases which arise in gall bladder and one among them is cholelithiasis (gall stones). Percentage of patients with cholelithiasis in the age group of 21-30 years is 8.2%, 24.7% among the patients of age group 61-70. Females are more frequently affected than males in the ratio of about 4:1, study shows that North Indians are more prone to cholelithiasis than south Indians. Recurrent episodes of cholelithiasis are treated only with surgery i.e., removal of Gall bladder (Cholecystectomy) which leads to impaired digestion of fats and proteins<sup>[1]</sup>. The disease cholelithiasis is not been described directly in the classics of Ayurveda. The term *Ashmari* in *Ayurveda* stands for stone which is described only in the context of *Ashmari* (urinary calculi). Gall bladder stores *Pitta*, hence the organ gall bladder is considered as

*Pittashaya* in Ayurveda and the stone formed in it can be considered as *Pittashmari*.<sup>[2]</sup> Hence this case study was considered with the aim to describe the potentiality of Ayurvedic drugs in the management of cholelithiasis.

**Case Report**

A Hindu, unmarried, 38 years old female patient visited the outpatient department (IP), Sushrutha Ayurvedic Medical College and Hospital, Jigani, Anekal, with an OP number 47474 and Registration number 2018/11/04/65 for the complaints of severe pain abdomen, distension of abdomen and vomiting.

A history of the present illness revealed that the patient was said to be asymptomatic 6 months back. One fine day she suddenly noticed pain in the right side of the abdomen which was not radiating in nature, she was having distension of the abdomen, vomiting and anorexia. She consulted allopathic physician advised her to undergo USG abdomen and pelvis and it has been diagnosed as Gall bladder stones which was single and 9mm in size and advised surgery for the same. As she was not willing to undergo surgery, she consulted Ayurvedic physician and taken treatment for the same.

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Personal history revealed that the patient is mixed diet with reduced appetite, good sleep, and frequency of micturition 4-5/D 2-3/N and the patient had no addiction. The menstrual history is 28days regular cycle for 3 days of normal flow.

#### Systemic Examination of the Patient: PA-

**On Inspection:** Mild Distension of the abdomen observed.

**On Palpation:** Severe tenderness noted over right hypochondriac region.

#### USG impression: Cholelithiasis

(Multiple stones with a large stone measuring about 9mm in size)

The following treatment protocol was followed:

#### OBSERVATION AND RESULTS

Symptoms	Before treatment	First follow up (after 1 month of treatment)	Second follow up (after 3 months of treatment)
Pain abdomen	Severe	Mild	Nil
Anorexia	Present	Absent	Absent
Distension of abdomen	Mild	Nil	Nil
Vomiting	1-2 episodes after food	No	No

#### DISCUSSION

According to Ayurveda, the patient was diagnosed as a case of *Pittashmari* with predominant *Kapha* and *Vata Dosh*. The clinical presentation is characterized by pain in abdomen, anorexia, distension of abdomen and vomiting. Hence the line of treatment mainly includes *Shoolahara* (pain relieving) *Shothahara* (anti-inflammatory), *Deepana-Paachana* (appetizer and carminative), *Agni Deepaka* (appetizer) and *Ashmari Bhedaka* (helps to eliminate calculi).

**Arogyavardhini Vati:** All the ingredients of *Arogyavardhini Vati* possess *Madhura, Tikta* and *Kashaya Rasa* leads to *Pitta Kapha hara*. Main Karma of the ingredients being *Deepana* (appetizer), *Paachana* (carminative), does *Agnivardhana* (appetizer), *Bhedana Karma* (cathetics) does *Ashmaribhedana* (helps to eliminate calculi) and *Shothaghna* alleviates inflammation. *Rogaghata* of almost all the drugs as per the authors is *Shothahara* (anti-inflammatory), and *Yakrit Prasadaka* (liver tonic) helps in restoring the *Prakrita Karma* of *Yakrit*.

Mineral *Shudda Shilajatu* is an effective agent for renewing vitality. It acts like nectar, it has powerful antioxidant property and thereby delays the process of ageing, useful in relieving liver diseases, kidney diseases and digestive disorders etc. The oleo gum resin of *Guggulu (Commiphora mukul)* helps in getting rid of cholesterol by converting it into bile. It is an effective remedy for removing the unwanted fats and balancing cholesterol level. The herb *Chitraka (Plumbago zeylanica)* is an effective agent in relieving

1. Tab. *Arogyavardhini Vati* [3] has been given 2 tablets twice a day after food with warm water
2. *Varunadi Kashay* [4] 30ml twice daily with 30ml of warm water before food with 1 *Ratti* (pinch) of *Yavakshara*.
3. *Katuki Choorna* [5] 1 tsp internally with warm water and *Katuki Choorna* external application in the region of gall bladder has been advised.

These medications were continued for 1 month and follow up visits, symptoms were assessed. The patient has been advised to continue same medications for another 2 months.

**Total duration:** 3 months

digestive disorders like loss of appetite, indigestion and various liver disorders.

**Katuki:** *Rasa* of *Katuki* being *Tikta* helps in *Kaphapitta Prashamana*. Main *Karma Deepana* (appetizer) helps in correcting *Agnimandya* and *Bhedana* helps in breaking *Pittashmari*. Plant extract of *Picrorrhiza kurroa* regressed lipid content of the liver tissue, morphological regression of fatty infiltration, hypolipidemic activity and reduction of cholestasis.

**Yavakshara:** [6] *Ushna, Teekshna Guna* of *Yavakshara* helps in dissolving *Pittashmari* (cholelithiasis) in the bile. As the *Yavakshara* is *Kaphavatahara* helps in removing *Kaphavatasanghata* which is the main cause for *Samprapti* of *Ashmari*. Along with *Shunti, Gokshura* and *Varuna Kwatha* if *Yavakshara* is administered, then the combination helps in removing *Ashmari*, its *Karma* being *Shulahara* helps in relieving pain.

**Varunadi Kashaya:** Combination of *Varunadi Kashaya* drugs acts as *Ashmaribhedaka* helps in disintegration of *Pittashmari*, as well as *Deepana, Pachana Karma* corrects the *Agni* and does *Amapachana Karma* being *Shothahara* helps reducing inflammation and most of the drugs are *Kaphavatahara* helps for *Samprapti Vighatana*.

#### CONCLUSION

In this case study, the patient has shown encouraging results during the management of Cholelithiasis (*Pittashmari*). As per the USG abdomen, the patient got rid of 9mm stone within 3 months of treatment and the general condition of the patient also improved. Therefore, on the basis of observation and

results of this case study it can be inferred that *Arogyavardini Vati*, *Varunadi Kashaya* with *Yavakshara* and *Katuki Choorna Prayoga* has shown marked improvement.

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