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An Ayurvedic Approach towards Nephrotic Syndrome

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ABSTRACT

Nephrotic syndrome is an important chronic renal disease occurs most commonly among paediatric population. It is an immunological disorders which is characterized by Proteinuria (> 40 mg per square meter body surface area per hour in children), Hypoalbuminemia (< 2.5 g/dl), Hyperlipidaemia, and edema that begin with face. Prognosis of treatment depends upon patient's response to steroid. Initially patients were sensitive towards steroids, but in later stage they became irresponsive or resistant to steroids. An alternate therapy is needed to treat these steroid dependent/ steroid resistant Nephrotic syndrome, So here is the case study of An Ayurvedic Approach in the management of Nephrotic Syndrome.

Key Words Nephrotic syndrome, Proteinuria, Hypoalbuminemia, Steroids, Paediatric Population

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INTRODUCTION

Childhood Nephrotic Syndrome is a group of symptoms that indicates kidney damage¹. It is characterized by Edema, Urine Protein: Creatinine ratio >2000mg/gm, protein > 300 mg/dl, dipstick urine protein 3+ (+++) and hypoalbuminemia². Lipid abnormalities generally resolve when nephrotic syndrome is in remission³ There is an increased permeability through the damaged basement membrane in the renal glomerulus especially infectious or thromboembolic, which causes Nephrotic syndrome. It can be divided into two types: Primary Nephrotic Syndrome (95%) & Secondary Nephrotic Syndrome.Primary **Nephrotic** Syndrome is the result of an abnormality of glomerular permeability that may be primary with a disease-specific to the kidneys. Secondary Nephrotic Syndrome is due to congenital infections, diabetes, systemic lupus erythematosus, neoplasia, or certain drug use. This disorder can affect people of all ages. In most children, facial swelling is the first sign of nephrotic syndrome. Adults usually present with dependent edema.

Nephrotic Syndrome In Ayurveda

Nephrotic syndrome is not directly mentioned in the *Ayurvedic* classics. It may be included under the heading of *Prameha* (a disease of urinary system with altered composition, frequency and quantity of urine) because of main characteristic



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features of albuminuria with hyperlipidaemia associated with oedema. Albuminuria makes urine concentrated, viscid or dense. These features can be correlated with *Sandrameha* a subtype of *Prameha*. According to *Ayurveda*, *kapha Vata* dominating *Tridosha&Rasa*, *Mutra*, *Udaka*, *Ojas*are the components which get vitiated in this disease. Any disease even ifit is not described in ancient text can be managedby applying the fundamental principles related topathogenesis and treatment in *Ayurveda*. On thisbasis Nephrotic Syndrome indicates the aggravation of *kapha dosha* along with vitiation of *Rasadhatu*, *Ojas*, *Mutra* and *Udaka* involving *MutravahaSrotas* and *UdakavahaSrotas*.

CASE SUMMARY

A diagnosed case of Nephrotic syndrome(R.N.T. Medical College Udaipur) was reported on 03/06/21 in OPD) of Govt. Ayurved Hospital Motichohhta, Udaipur. Patient reported frequent/ common relapse (4/> 4 time attack of nephrotic since June 2020 syndrome) along with haematuria and most relapses were surfaced whenever steroids were discontinued/tapered. Patient also had swelling on face & around the eyes in morning time. Associated complaints was loss of appetite & indigestion.

Personal examination

Patient age -3 yrs.

Weight - 9.7kg

Height - 3 ft. 6 inch

Temp.- 98.6⁰F

Physical examination – -

Ashtavidhapariksha-

Nadi - VP

Mutra – Samyak mutra Pravriti

Mala – Sama

Jiwha- Sama

Shabda – Samyak

Sparsha- Ushna

Drika – Samanya

Aakriti – Krisha

Dashvidhapariksha-

Prakriti (nature) - Vatapittaja,

Sara (Purest body tissue) - Madhyama (medium)

Samhanana(Body compact) - Madhyama (minimum)

Pramana (Body proportion) - Madhyam (medium)

Satmya (homologation) - Madhyam (medium)

Satva (mental strength) - Madhyam (medium)

Vaya (age) - Bala

Vyayamshakti (to carry on physical activities) -

Avara (least capability)

Aharashakti (food intake and digestive power)

Abhyavarana shakti &Jarana shakti – Madhyam

Laboratory Findings (Figure 1)

♣ Urine protein - +++

🖶 Urinary -Albumin/Creatinine Ratio –

415mg/gm

Table 1 Treatment protocol

S.	Aushadh	Quantity
no.		
1.	Krimimudgar Rasa	2 times a day with
	100 mg	honey
	GiloySatva	
	250mg	
	Gokshur churna	
	500mg	
	Mutrakrichhantak rasa	



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	60mg Balchaturbhadrachurna 1gm	
2.	Syrup Nefree	1 tsp., 3 times a day
3.	Syrup Nefroright	1 tsp., 3 times a day
4.	Arvindasava 10ml	2 times a day, with equal amount of water

DISCUSSION

In the above mentioned treatment protocol, all the medications were used to treat Nephrotic Syndrome.

- **♣** *Gokshur Churna* can alleviates vata and pitta relieves edema and swelling.
- ♣ Giloy Satvaacts as immunomodulator thus it improves immunity. It also helps in indigestion and loss of appetite.
- ♣ *Mutrakrichhantak rasa* helps to lower down increased urea and creatinine levels⁵.
- ♣ Balchaturbhadrachurna is an effective solution for the most common children's problems. It is also indicated in indigestion, abdominal distension, and abdominal pain Therefore, it is considered as an important medicine in ayurvedic science for infants⁶.
- Regular use of Nephroright keeps kidneys and the urinary tract flushed and working at optimum efficiency.
- Clear urinary tract infections.
- Disintegrates and expels urinary stones.
- Treats Burning micturition.

♣ *Arvindasava*is useful in almost all children's health problems. It also improves indigestion & loss of appetite⁷.

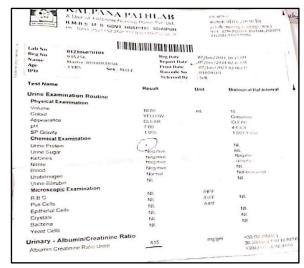


Figure 1 Before treatment



Figure 2 After treatment

CONCLUSION

After 2 months of treatment (Figure 2) from the use of above mentioned ayurvedic drugs

- Let Steroid Use was limited which would prevent the side effects of long term steroid uses.
- ♣ Urine protein traces/ Negative.
- ↓ Urinary Albumin/ Creatinine Ratio- 350 mg/gm

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In this 2 months of Ayurvedic medications , Patient did not took any steroid/ allopathy medications.