



ijapc

E ISSN 2350 0204

www.ijapc.com

VOLUME 12 ISSUE 3

MAY 10, 2020

GREENTREE GROUP
PUBLISHERS





A Case Study of Ulcerative Colitis Successfully Managed with Ayurvedic Treatment

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ABSTRACT

A 30 year old female patient came to *Ayurveda chikitsalay* and *Panchkarm* Centre, Upleta with compliant of bloody diarrhoea, sticky fecal with foul smell, abdominal pain , nausea and burning in chest since 2 years. She was treated with ayurvedic treatments as an outdoor patient for six month period. Āyurvedic preparations like *grahankapatras*, *mustadiyog*, and Tablet: Ayopan were given. After 6 months of treatment patient was improving through Āyurvedic management without need of hospitalization and immunosuppressive medicine like Mesalamine1.2gm. All of her complaints like bleeding per ano, sticky fecal with foul smell, abdominal pain, nausea and burning in chest were cured. After six month of *ayurvedic* treatment Colonoileoscopy report was totally normal.

KEYWORDS

Ulcerative Colitis, Raktatisar, Grahanikapatras, Mustadiyog



Greentree Group Publishers

Received 04/02/00 Accepted 24/03/2020 Published 10/05/2020



INTRODUCTION

Ulcerative colitis is a inflammatory bowel disease. It mainly involves rectum (proctitis) and inflammatory process is limited to the mucosa and spares the deeper layers of the bowel wall. The major symptom is bloody diarrhea. In this case patient was already diagnosed with ulcerative colitis by gastro-enterologist when came for *ayurveda* treatment. In *ayurveda* ulcerative colitis is consider as a *raktatisara* (bloody diarrhea= ulcerative colitis) due to dominant vitiation of *pitta dosh* and *raktadhatu*.

PATIENT'S HISTORY OF PRESENT ILLNESS

CLINICAL FINDINGS

Patient was conscious with intact mental status but an anxious look. Holding symptoms like bloody diarrhea, abdominal discomfort and hyperchlorhydria.

DIAGNOSTIC FINDINGS

Colonoileoscopy report (19-11-2013)

Inflamed ulcerated mucosa at rectum, sigmoid colon, descending colon and up to mid part of transverse colon suggest a case of ulcerative colitis.

THERAPUTIC INTERVENTION

Patient was treated with following *Āyurvedic* management.

1. *Grahanikapatras* 1tab three times per day.

2. *Kutajghanvati* 2tab three times per day

3. *Mustadiyog* (which contain *musta, lodhra, bilva, shatavari* and *dadim* with equal quantity) 3gram two times per day.

4. Tab-Ayopan (Alarsinpharma) (modified pushyanug churn) 2tab two times per day.

Other medicinal intervention were symptomatic according to the present complain of patient.

OUTCOMES

Patient was treated with above treatment from 5th June 2015 to 26th January 2016. Patient's colonoileoscopy investigations were carried out on 21st November-2015 as mentioned here.

Colonoileoscopy report (21/11/2015)

The mucosa in descending colon, sigmoid colon and proximal rectum had lost its rigidity and became smooth with area of well spread healed ulcers without any active bleeding or inflammation. There is no active disease in whole of large bowel.

DISCUSSION

This case was considered as a *raktatisar* (a disease of large intestine in which there is frequent passing of stool with blood). According to *Āyurvedic* principles of management of the disease, this disease is



occurred due to vitiation of *pitta dosh* and *raktadhatu*.

Ayurveda always prefer to treat cause of disease so in this case *raktastambhak* and *pitta shamak* remedies were prescribed and with use of these medicaments patient had improvement in his physical complaints as well as in pathological investigations.

CONCLUSION

Ulcerative colitis is considered as a type of *Pittaj Vyadhi* mainly *Raktatisara*. It is well managed with *Ayurvedic* multi drug therapy and *Pitta shamak* regimen. *Ayurvedic* drugs acts as a *stambhak* mainly *raktastambhan*, *vranropan* and *pachan* effect as per pharmacological aspect of *Ayurvedic* medicine.



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