



(CASE REPORT)



A case study: Ayurvedic management of *Pravahika* with special reference to inflammatory bowel disease

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Abstract

A 60-year-old male patient reported to the Outpatient Department of *Kayachikitsa*, with the complaints of frequent loose, watery, frothy, and foul-smelling stool stained with mucous and blood with tenesmus. Other associated complaints were loss of appetite, distension and pain in the abdomen, headache, insomnia, and generalized weakness. The patient was diagnosed as Irritable Bowel Disease consistent with Ulcerative Colitis. A combination of *Lavanbhaskar Churna*, *Yashtimadhu*, *Lodhra*, *Sariva*, *Patha*, *Dhamasa* 300 mg each powder three times a day, along with tablet *Praval Panchamrut* 250 mg 2 tablets three times a day and tablet *Kamadudha Rasa* 250mg 2 tablets three times a day before food was administered for 45 days. After the 45 days of treatment, a significant response in various symptoms such as frequent defecation, blood, mucous stained stools, loss of appetite, abdomen distension, headache, and insomnia were found.

Keywords: Inflammatory bowel disease; *Pravahika*; *Shamana Chikitsa*; Ulcerative colitis

1. Introduction

Inflammatory bowel disease (IBD) is an idiopathic disease caused by dysregulated immune response to host intestinal microflora, due to diet, hygiene conditions, stress, and smoking. Two major types of inflammatory bowel disease are ulcerative colitis (UC), which is limited to the colonic mucosa, and Crohn's disease (CD) which can affect any segment of gastrointestinal tract from the mouth to anus. Ulcerative colitis (UC) is a form of inflammatory bowel disease (IBD) that causes inflammation and ulcers in the colon. The disease is a type of colitis, which is a group of diseases that cause inflammation of the colon, the largest section of the large intestine, either in segments or completely. The symptoms can vary depending on the severity of inflammation and where it occurs. The main symptom of this active disease is diarrhea mixed with mucus and blood, along with abdominal pain. Ulcerative colitis can be debilitating and can also lead to life threatening complications. Inflammatory bowel disease (IBD) is a group of inflammatory conditions of the colon and small intestine; among them, ulcerative colitis (UC) is one with a prevalence rate of 2–3% in the world, which is characterized by abdominal pain, vomiting, diarrhea, rectal bleeding, severe internal cramps/muscle spasms in the region of the pelvis, and weight loss.^[1] The main causes include dietary habits and stress.

According to *Ayurveda*, it can be correlated to the disease *Pravahika* which manifests in the form of *Atipravahana* of *Purisha* (repeated defecation with tenesmus), *Atidrava Purisha Pravritti* (watery stool), *Udarashoola* (pain abdomen), *Picchila*, *Saphena* (sticky and frothy), and *Raktayukta Purisha* (blood-mixed stool).^[2]

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In the conventional part, usually, the allopathic treatment is started by administering drugs with high anti-inflammatory effects, such as prednisolone.^[3] Once the inflammation is successfully controlled, the patients usually switched to a lighter drug to keep the disease in remission. Although anti-inflammatory steroids are used to control disease flares and were once acceptable as a maintenance drug, still the prognosis of the disease is very poor.

Looking into these limitations in the treatment and prognosis of Ulcerative Colitis, a single case of *Pravahika* was observed by using *Deepana*, *Pachana* (digestive-carminative), and *Sangrahi Dravya* ^[4] to analyze its effect in the management of disease.

2. Case Report

A 60-year-old male patient visited the outpatient Department of *Kayachikitsa*, with

Complaints of

- *Punaha Punaha Purisha Pravritti* (frequent defecation), *Pravahana of Purisha* (tenesmus), *Durghandhayukta Purisha* (foul-smelling stool), *Pichchhil* and *Raktayukta Purisha* (mucous-and blood-mixed stool), *Kshudhamandya* (reduced appetite), and *Adhmana* and *Udara Shoola* (distension and pain in abdomen) for 1 year.
- Associated complaints of *Daurabhya* (generalized weakness), *Nidranash* (insomnia), and *Shirashoola* (headache) for 6 months.

2.1. History of the present illness

The patient was apparently normal 1 year back. After his son's marriage, 1yr ago because of stress due family problems he started having problems like reduced sleep, headache, reduced appetite, frequent defecation, bloating, abdominal pain, followed by foul smelling stool which were mixed with mucous and blood. The patient consulted local doctor for these complaints but with the treatment given he had no relief in symptoms.

About 7-8 months ago, the patient started experiencing 6-8 loose, frothy, and foul-smelling stool stained with mucous and blood. Pain in the abdomen and distension of the abdomen were the associated symptoms.

2.2. Previous medical/ drug History

The patient consulted a gastroenterologist, where the patient was diagnosed with "Inflammatory bowel disease consistent with Ulcerative Colitis" through OGD scopy and Colonoscopy. The patient was on conservative treatment for 6 months (tablet Mesacol 400 mg thrice a day, tablet Shelcal 500 mg once a day, tablet Pantaprazole 20 mg once a day) where the patient had no relief.

2.3. Personal History

The patient is non-vegetarian with occasional consumption of outside food.

2.4. Occupational History

Patient is of a vegetable vendor

2.5. Addiction

The patient has an addiction of chewing tobacco twice/thrice a day for the past 40-50 years.

2.6. Family History

No family history of major medical or surgical illness was found.

2.7. General Examination

Of the patient showed pallor in conjunctiva and in the nails, vitals being

- Pulse rate- 80/min,
- Respiratory rate- 20/min,

- Blood pressure- 130/80mm of Hg,
- CVS- S₁S₂ Normal,
- CNS- Conscious and oriented,
- SPO₂- 99% at room air,
- Body weight of 60kg.

Per abdominal examination showed shrunken abdomen and moderate to severe tenderness in all quadrants of the abdomen.

2.8. Ashtavidha Pariksha

2.8.1. Nadi

Pitta Kaphaja

2.8.2. Mala

Punaha Punaha Purisha Pravritti, Pravahana of Purisha, Durghandhayukta Purisha, Phenayukta, Raktayukta Purisha

2.8.3. Mutra

Samyaka

2.8.4. Jivha

Sama

2.9. Nidan Panchak

2.9.1. Hetu

Ahara – Akal Bhojan (irregular meal timings), *Ati Amla Aahara* (excessive sour foods), *Atikatu Aahar* (excessively spicy foods), *Adhyashan* (over-eating), consumption of tobacco frequently

Vihara – Atichintan (over thinking, stress), *Ratraujagran* (Staying awake late night, insomnia)

2.10. Samprapti

Hetu sevan → *Kledak Kapha Dushit + Saman Vayu Dushit + Pachak Pitta Dushti* → *Kledak Kapha* becomes *Styan* (more sticky) and sticks to inner layer of *Pakwashay* → *Apan Vayu Dushit* → *Pravahan* → frequent minimal sticky mucous mixed loose stool → again *Vataprakop* due to *Pravahan Shrama* → *Pravahan Yukta* frequent minimal sticky mucous mixed, blood stained loose stool → *Pravahika* [5]

2.11. Differential Diagnosis

Grahani and *Atisara* from *Pravahika* were considered. As there was no *Muhurbhaddham Muhurdravam Purisha Pravritti*, *Grahani* was excluded and also *Vataja Grahani Lakshana* such as *Vatagulma*, *Hridroga*, *Pleeha Shanki Lakshana*, and *Kaphaja Grahani Lakshana* such as *Asyavairasya* and *Guruta* were not observed. *Atisara* was also excluded as *Pravahana* was present. Based on the clinical presentation, the patient was diagnosed as a case of *Pravahika*.

2.12. Treatment given

- A combination of powders *Lavanbhaskar Churna*, *Yashtimadhu Churna*, *Lodhra Churna*, *Sariva Churna*, *Patha Churna*, *Dhamasa Churna* 300 mg each three times a day,
- Tab *Praval Panchamrut* 250 mg 2 tablets three times a day,
- Tab *Kamadudha Rasa* 250mg 2 tablets three times a day before food was administered for 45 days.

2.12.1. Pathya

Freshly cooked, warm meal which includes *Laja Manda*, *Takra*, *Peya*, *Dadima Swaras*, *Kharjuradi Mantha*, *Mudga Yusha*.

2.12.2. *Apathya*

Stale food, non-vegetarian food, tobacco chewing, alcohol consumption.

Follow-up was taken once in 15 days for 2 months.

3. Observation and Result

Table 1 Observation and result with each follow-up

Day/ Follow-up	Clinical Features	Treatment
Day 1	<i>Punaha Punaha Purisha Pravritti, Pravahana of Purisha, Durghandhayukta Purisha, Phenayukta and Raktayukta Purisha, Kshudhamandya, Adhmana and Udara Shoola, Daurablya, Nidranash and Shirashoola</i>	A combination of <i>Lavanbhaskar Churna, Yashtimadhu, Lodhra, Sariva, Patha, Dhamasa</i> 300 mg each with <i>Praval Pishti</i> 100mg powders three times a day, Tab <i>Praval Panchamrut</i> 250 mg 2 tablets three times a day, Tab <i>Kamadudha Rasa</i> 250mg 2 tablets three times a day before food
1 st f/u (Day 15)	Reduction in frequency of bowel reduced by 3–4 times per day. <i>Phenayukta</i> and <i>Raktayukta Purisha</i> were seen once in 2-3 days or occasionally. Improvement was observed in <i>Kshudha. Adhman</i> and <i>Udarashoola</i> were relieved. <i>Shirashoola</i> significantly reduced, and improvement was also seen in <i>Nidralpata</i>	Continue 1 to 3
2 nd f/u (Day 30)	The frequency of bowel reduced to 1–2 times per day. <i>Phenayukta</i> and <i>Raktayukta Purisha</i> completely stopped. Improvement was noted in weakness, appetite, and reduced sleep	Continue 1 to 3
3 rd f/u (Day 45)	Complete relief was reported in all the signs and symptoms	Continue 1 to 3

4. Discussion

According to *Ayurveda*, the patient was diagnosed as a case of *Pravahika* with main *Dosha* being *Kapha* and *Vata* along with *Pitta* associated with *Agnimandya*. The clinical presentation is characterized with *Ama Lakshana Sashoola* (with pain), *Sapichchha* (sticky), and *Punah Punaha* (repeatedly) *Purisha Pravritti* with *Pravahana*. Hence, the line of treatment mainly includes *Deepana, Pachana* (digestive-carminative), and *Sangrahi Dravyas* (digestives and carminatives).^[6]

4.1. *Lavanbhaskar Churna*

Contents of this are *Samudra lavan* (Sea salt), *Dadimabija* (seeds of *Punica granatum*), *Saindhav lavan* (Rock salt), *Vida lavan* (Black salt), *Dhanyak* (*Coriandrum sativum*), *Pippali* (*Piper longum*), *Pippalimula* (*Piper longum* root), *Krushnajeerak* (*Carum carvi*), *Patra* (*Cinnamomum tamala*), *Amla* (*Embilica officinalis*), *Nagkeshara* (*Mesua ferrea*), *Talispatra* (*Abies webbiana*), *Maricha* (*Piper nigrum*), *Shwet jeeraka* (*Cummin cuminum*), *Shunthi* (*Zingiber officinalis*), *Twak* (*Cinnamomum verum*), *Ela* (*Elletaria cardamom*).

It is useful in *Vatakaphaj* disorders. It is useful in *Aamadoshha, Vataj Shoola, Arsha, Bhagandar, Aruchi, Agnimandya, Grahani Dosha*. Contents in this are *Dipana, Pachana, Shoola Prashaman, Anahaghna, Strotogamitva, Chedana, Bhedana, Vatanuloman, Ruchikara*.^[7]

4.2. *Yashtimadhu Churna (Glycyrrhiza glabra) (Linn.)*

It is *Madhura*; *Guna- Guru, Snigdha*; *Vipaka- Madhur*; *Veerya- Sheeta*

It is *Vatapittahara*. Its *Gunas* are opposite to *Vata* thus they pacify it. It is *Jeevaniya, Sandhaniya, Shonitasthapana*.^[8]

4.3. *Lodhra Churna (Symplococcus racemose) (Roxb.)*

It is *Kashay, Tikta*; *Guna-Laghu, Ruksha*; *Vipaka- Katu, Veerya- Sheeta*

It is *Kaphapittahara*. It is *Shonitasthapana, Grahi, Chakshushya*. *Bhavprakash* mentioned it in the treatment of *Pravahika*. Also used in *Raktapitta, Raktaj Vikara, Atisar*.^[9]

4.4. *Sariva Churna (Hemidesmus indicus) (R. Br.)*

It is *Madhura, Tikta*; *Guna- Guru, Snigdha*; *Vipaka- Madhur, Veerya- Sheeta*

It is *Tridoshara*. It is useful in *Kapha* and *Vata* disorders. It is *Jwara, Daha Prashaman, Purisha Sangrahaniya*. It is *Sangrahi* and also alleviates *Rakta* and *Pitta Vikaras*.^[10]

4.5. *Patha Churna (Cyclea peltate) (Miers.)*

It is *Tikta*; *Guna- Laghu*; *Vipaka- Katu, Veerya- Ushna*

It is *Vatakaphara*, also *Kapha Pittaj Rogahar*. It is *Atisaraghna* and *Shoolaghna*.^[11]

4.6. *Dhamasa Churna (Fagonia arabica) (Linn.)*

It is *Madhura, Katu, Kashay*; *Guna- Laghu, Snigdha*; *Vipaka- Madhur; Veerya- Sheeta*

It is *Dahavinashini*. It is *Kapha, Meda, Mada, Bhranti, Pitta, Rakta Doshahar*.^[12]

4.7. *Praval Panchamrut*

Contents in this formulation are *Mukta Bhasma* (Bhasma of pearl), *Shankha Bhasma* (Bhasma of conch), *Shukti Bhasma* (Bhasma of pearl oyster), *Kaparda Bhasma* (Bhasma of cowries), *Praval Bhasma* (Bhasma of coral).^[13]

It is mainly *Kaphamarutaghna*. It *Karya* is specifically seen in *Madhyam Koshta, Yakrut, Pleeha* and *Unduke*. The contents in it are *Pittashamak, Dahashamak, Raktaprasadak, Mutral, Grahi, Pachaka, Agnideepak, Stambhak*.^[14]

4.8. *Kamadudha Rasa*

Contents of this drug are *Amruta satva (Tinospora cordifolia (Willd.), Suvarna Gairik (Red ochre), Mukta Pishti*(Pearl paste infused in pure rose water) , *Praval Pishti* (Coral calyx powdered using rose water), *Kaparda Bhasma* (Bhasma of cowries), *Shukti Bhasma*(Bhasma of pearl oyster) , *Shankha Bhasma*(Bhasma of conch).

Main *Karya* of is *Pittashaman, Raktastambhan, Kshobhanashana* and is *Sheeta Veeryatmak*. Thus, is used in various *Mahastrotas Vyadhis*.^[15]

Overall, due to the improvement in *Agni* (digestion and absorption), the *Dushti of Pachak Pitta, Kapha Dosh* were cured. Also further *Vata Dushti* was also cured. The *Prakrut Karya* of *Doshas* was resumed. *Aamapachan* and bringing back the vitiated *doshas* to their normal, physiological state resulted in improvement in symptoms and *Vyadhimiukti. Bala* (strength), and *Varna* (complexion), body weight of the patient was also improved.

5. Conclusion

Based on the clinical signs and symptoms, the disease *Pravahika* can be correlated to IBD with Ulcerative Colitis. In this study, combination of powders *Lavanbhaskar Churna, Yashtimadhu, Lodhra, Sariva, Patha, Dhamasa* 300 mg each three times a day, along with tablet *Praval Panchamrut* 250 mg 2 tablets three times a day and tablet *Kamadudha Rasa* 250mg 2 tablets three times a day was found to be safe and effective in the management of *Pravahika*.

Compliance with ethical standards:

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Disclosure of conflict of interest

The authors declare that there was no conflict of interest regarding the publication of manuscript.

Statement of informed consent

Informed consent was obtained from the individual participant included in the study.

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