



ISSN 2456-3110

Vol 8 · Issue 8

August 2023

Journal of  
**Ayurveda and Integrated  
Medical Sciences**

*www.jaims.in*

**JAIMS**

An International Journal for Researches in Ayurveda and Allied Sciences



**Maharshi Charaka**  
Ayurveda

Indexed

# Ayurvedic case study of *Balatisara*

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## ABSTRACT

In contemporary science, watery diarrhoea and *Atisara* are closely related. Ayurveda defines *Atisara* as excessive frequency and volume of watery stools passing, where *Atisara* is ATI (excessive) and *Saranam* (flow). According to folklore, *Atisara* first appeared as a result of eating flesh from cows and bulls. *Agnidushti* is brought on by the *Guru* and *Ushna Guna* of cow and bull flesh. *Bhaya*, *Shoka* and other *Mansika Doshas*, among others, develop *Atisara*. *Atisara* has *Krimi* as a significant cause. According to Ayurvedic science, *Agnidushti* is the main cause of *Atisara*. *Agni's* primary location is *Grahani*. Between *Amashaya* and *Pakwashaya*, it is located. Food particle digestion is incomplete when *Mandagni* is present. *Ama* is created as a result of this. *Ama* is considered like toxins or pathogens which is responsible for etiology of all disease. This *Ama* leads to vitiation of *Vata* like *Saman Vata* and *Apana Vata Dushti*. In *Samyashtha* of *Apana Vata* is responsible for defecation, micturition, and *Nishkramana* of *Shukra* and *Artava*, A 9 year male patient diagnosed with *Atisara* and treated with Ayurvedic management.

**Key words:** Ayurved, *Atisara*, *Agnimandya*, diarrhoea

## INTRODUCTION

*Balatisara* meaning *Atisara* in *Bala* or childhood diarrhoea.<sup>[1]</sup> It is one of the commonest & serious disease during childhood. These liquid stools are usually passed more than three times a day. However, diarrhoea is the recent change in consistency and character of stool is most important rather than number of stool passed. A child suffers from an average 10 to 15 episodes of diarrhoea in the first five year of life, out of these three to five episodes occurs during very infancy. i.e., 1<sup>st</sup> year of age.<sup>[2]</sup> In the tropical belt 15 to 40% of all deaths among children below 5 years are due to diarrhoea. Diarrhoea has its main impact on

infants and young children in the poor section of the developing countries. Existence of mal-nutrition makes the child much vulnerable to suffer from diarrhoea. Diarrhoea has also been shown to have significant effect on nutrition. According to a conservative estimate, almost 500 million children suffer from acute diarrhoea annually, of them 5 million die every year. In India alone, nearly 1.5 million children die due to acute diarrhoea every year.<sup>[3]</sup> The seriousness of the disease owes to the commonest complication i.e., dehydration which the most fatal one. A child may lose almost and much water and electrolytes from the body during an episode of diarrhoea as in an adult, since the length and surface area of intestinal mucosa of a child from where the diarrhoeal fluids are secreted are fairly large.

## CASE STUDY

A 9 -year-old thin built male patient visited the outpatient department for the complaints of *Atisara* like *Dravamalavega* (diarrohea lasting for more than 2 weeks), *Vivarnata* (moderate), *Udara Shoola* (continuous moderate pain), *Trishna* (moderate-drinks poorly), *Kshudhahani* (appetite decreased), *Daurbalya* (weakness), *Nidralpata* (reduced sleep) for more than two weeks. A history of the present illness revealed

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Submission Date: 13/06/2023

Accepted Date: 25/07/2023

### Access this article online

Quick Response Code



Website: [www.jaims.in](http://www.jaims.in)

DOI: 10.21760/jaims.8.8.47

that the patient was apparently normal before one weeks. He had episodic passing watery loose stools for 4 to 5 times per day. The problem increased day by day, and the patient suffered from fever and severe abdominal pain, then consulted with family physician and was on some antibiotic medicine which relieved the condition for a time being. After two days he feels pain in abdomen, with frequent watery stool 3-4 times a day with some associated symptoms. Looking into the signs and symptoms of the patient diagnosed as a case of *Kaphaja Atisara*.

### General Examination

Pallor - absent, Icterus- absent, Cyanosis- absent, Clubbing-absent, Lymph node- nonpalpable,

Oedema -absent, Oral mucosa- normal

BP - 100/70 mm of Hg

Pulse - 78/min

Temperature - 96.4°F

### Systemic Examination

RS - Air Entry Bilaterally Equal, no any abnormality.

CVS - No any abnormality detected in cardiovascular system

CNS - Conscious and oriented

P/A - Abdomen was shrunken and diffuse tenderness present all over abdomen.

### Personal History of Patient

*Kshudha* (appetite) - reduced

*Nidra* (Sleep) - disturbed

*Mala* (Bowel) - loose watery stool 8-10 times per day

*Mutra* (Bladder) - normal

Addiction - no any addiction

*Ahara* (Diet) - vegetarian and non-vegetarian food (taking very spicy, hot and fast food)

### Investigation

Lab investigation - CBC

Hb - 11.0 gm%

TLC - 5400 cells/cu mm

RBC - 3.5million cells/cu mm

PLT - 275000 cells/cu mm DLC and other haematological parameters were normal

### Treatment Given

1. *Bilvadileha* 7ml BD
2. *Kutaja Ghanavati* 125 mg BD
3. *Shunthi, Musta, Indrayava Churna* 1gm each with like warm water BD

### OBSERVATIONS

Lakshana	Before treatment	After Treatment
<i>Dravamalavega</i>	++	+
<i>Udara Shoola</i>	+++	+
<i>Daurbalya</i>	++	-

### DISCUSSION

As mentioned in Ayurvedic text, *Dosha Dushti* in this patient is *Pittapradhan Tridoshdushti*, as there is *Amlodgar, Urodaha, Trushna Lakshnas* were present. Due to increased *Drava, Sara* and *Ushna Guna* of *Pitta* leads to *Agninash* and *Purishbheda*. This leads to *Pittaja Atisara*. So, the *Samprapti* in this patient was postulated as follows:

*Ati Ushna, Tiksha, Lavan, Katu Ahara Sevan* → *Tridosh Dushti (Pitta Dushti Adhik)* → *Drava, Sara* and *Ushna Guna* of *Pitta* increased) *Apa Dhatu* is increased in excess → Downward movement in *Purishashay* by *Vata* → Leading to development of excess watery stool → *Atisara*

Most of the patients were suffering from *Mandagni*, which clearly indicate that *Agnimandya* is the prior stage of almost all the diseases. Here in case of *Atisara* also *Mandagni* leads to *Ama* formation which further leads to *Atisara*. *Dravamala Pravrutti* was nothing but the cardinal signs of the *Atisara*. *Udarshool* was present in the patient followed by *Aruchi*. *Jivha Pariksha* and *Jalnimajan Pariksha* were very important tools of Ayurveda to decide *Sama* or *Nirama Avastha*.

**Bilvadileha<sup>[4]</sup>**

*Bilva* due to its *Kashaya Tikta Rasa, Katu Vipaka* and *Laghu Guna* act as *Agnideepan* and also *Aamapachak*. *Kashaya Rasa* and *Ushna Virya* help in reducing the colonic motility. *Sangrahi* property of *Bilva* is very useful to treat the increased frequency of defecation and the consistency of the stool. In *Bilvadileha* in addition to *Bilva*, *Prakshepa Dravyas* like *Dhanyaka, Jeeraka, Ela, Keshara, Twaka, Trikatu, Musta*, have properties like *Deepan, Pachana, Kaphghna, Vedanasthapaka, Rasayana*. Thus, due to different properties of its ingredients, *Bilvadileha* has property like *Tridosahar, Deepan, Pachana, Aamnashaka, Grahi, Vibandhahar* and *Vatanuloman* which checks the *Samprapti* and pacify the symptoms of *Atisara*.

**Kutaja Ghanavati<sup>[5]</sup>**

It is polyherbal preparation containing two ingredients namely *Kutaja* and *Ativisha*. *Kutaja* has *Tikta, Kashaya Rasa, Laghu, Ruksha Guna, Katu Vipaka* and *Sheeta Virya*.<sup>[6]</sup> It is *Pitta Kapha Shamak* drug. It possesses *Deepan, Pachana, Grahi* and *Stambhaka* properties. Various research studies conducted on *Kutaj Ghanavati* proved its antidiarrheal, anti-dysenteric, bactericidal, antifungal and haemostatic properties.

*Shunthi*<sup>[7]</sup>, *Indrayava*<sup>[8]</sup>, *Musta*<sup>[9]</sup> *Churna - Shunthi* due to its *Grahi* nature, absorb excessive amount of liquid *Purisha* and corrected its pathology and it is *Amapachak* and *Agnideepak*. *Indrayava* and *Musta* are *Deepana, Pachana* and *Sangrahi* helped to decrease the frequency of bowel and increase appetite.

**Pathya and Apathya advised**

**Pathya:** Light foods, Moong-dal khichdi, rice-once/day, mixed aatta roti, kache papitha sabji (raw papaya), kacha kela sabji (raw banana) with more haldi. *Guda* (desi jaggery) Fruits – Pomegranate (anar), apple, gooseberry (*Amla*), Diluted goats milk, *Mustha Siddha*

*Jala* (50g boiled with 3lt water, reduced to 1.5lt) for drinking, *Laghu Vyayama* 45 min, *Pranayama*.

**Apathya:** Spicy foods, fast foods, *Dadhi, Matsya, Mamsa*, strenuous work.

**CONCLUSION**

This brief case study illustrates that patients taking *Atisara* can significantly improve their symptoms in only a few weeks. However, our goal is to serve as an example of the beneficial effects that can result from using readily available herbal medications, as indicated in traditional Ayurvedic texts.

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**How to cite this article:** Ashok Kumar Yadav. Ayurvedic case study of Balatisara. J Ayurveda Integr Med Sci 2023;08:287-289.

<http://dx.doi.org/10.21760/jaims.8.8.47>

**Source of Support:** Nil, **Conflict of Interest:** None declared.