



## An Ayurvedic management of Udavarta - A Case Report

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DOI:10.21760/jaims.10.1.44

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**Introduction:** Constipation is a condition where a person is having infrequent and un satisfied bowel movements. The passage of stool may become difficult due to its dryness and hardness. This in chronicity may result in abdominal distension, gas formation, loss of appetite, rumbling sounds in abdomen, occasional pain in abdomen and even sour belching. This chronic constipation along with the associated symptoms can be considered as Udavarta, a unique concept explained in Ayurveda.

**Methodology:** A 32-year-old female patient with alleged history of severe constipation for 9 years along with burning sensation over chest and neck region, sour belching, nausea, occasional vomiting, feeling of heaviness in the abdomen and occasional rumbling and severe pain in the abdomen. She also complained of having headache and cough when the constipation becomes chronic. She was treated with both internal and external Ayurvedic interventions. Internal medications were given for two weeks followed with Panchakarma procedures for 11 days.

**Result:** The patient was assessed with Bristol stool form scale (BSFS) and constipation assessment scale (CAS) which showed good improvement.

**Conclusion:** This study bear witness to the fact that Ayurvedic treatment have an important role in the management of Udavarta.

**Keywords:** Udavarta, Constipation, Ayurveda

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<b>Manuscript Received</b> 2024-12-13	<b>Review Round 1</b> 2024-12-24	<b>Review Round 2</b> 2025-01-03	<b>Review Round 3</b> 2025-03-13	<b>Accepted</b> 2025-01-24
<b>Conflict of Interest</b> None	<b>Funding</b> Nil	<b>Ethical Approval</b> Not required	<b>Plagiarism X-checker</b> 12.75	<b>Note</b>



## Introduction

*Udavarta* is a unique concept explained in *Ayurveda* which portrays itself as a disease or as *Nidana* or sometimes plays a major role in *Samprapti* of a disease. In *Udavarta*, the normal *Gati* of *Vata Dosha* is being obstructed. The obstruction can be due to any of the thirteen *Vega Dharana* mentioned in the classics or due to excessive consumption of *Kashaya*, *Tikta*, *Ushna*, *Ruksha Bhojana*, or *Abhojan* [1] (not taking food at all). In the present case, the patient was not taking food at appropriate time and was doing fasting most of the time. The foods she consumed included most of *Ruksha Dravyas*. Habituated by these routines, she gradually developed *Udavarta* which presented as severe constipation which in turn caused the acidity and abdominal fullness. For these complaints, she was taking allopathy medications which gave only relief to the acidity and not constipation. Unsatisfied by those treatment protocols she approached our hospital for a permanent relief of her condition. The multidimensional approach of *Ayurveda* provides a promising pathway for managing such chronic conditions with permanent solution.

## Case Report

A 32-year-old female patient with an alleged history of severe constipation for 9 years along with burning sensation over chest and neck region, sour belching, nausea, occasional vomiting, feeling of heaviness in the abdomen, occasional rumbling and severe pain in the abdomen was presented to the hospital. The patient had severe burning sensation over chest and neck region when the duration of non-passage of stool increases more than 4 - 5 days. The Bristol stool form scale (BSFS) revealed the constipation to be of type 1 (very constipated) and constipation assessment scale (CAS) showed the score to be 14. She was advised with oral medications at first followed by 11 days admission in the hospital.

### Examination

On examination, the patient was anxious; tongue was coated; appetite was poor; micturition was regular and bowel movement was irregular and constipated. The patient was in *Madhyama Avasta*, with *Vata Pitta Prakriti*, with *Madhyama Samhanana* (medium body built), *Madhyama Sara* (medium purest body tissue),

*Sama Pramana* (symmetrical body proportion), *Madhyama Satmya* (medium homologation), *Madhyama Satva* (medium mental strength), *Madhyama Ahara Sakti*, *Avara Jarana Sakti* (medium food intake and less digestive power) and *Madhyama Vyayama Sakti* (medium capability to carry on physical activities). Physical examination revealed the blood pressure to be 128/86mm/Hg; pulse 92 beats per minute; body weight 51kg; height 160cm and body mass index (BMI) 19.92kg/m<sup>2</sup>. Per abdominal examination revealed abdominal fullness, hard on palpation than normal with no bowel sounds. There was no any tenderness or masses. The rectal examination ruled out presence of any masses, hemorrhoids, anal fissures, inflammation, rectal prolapse, and hard stool.

The complete blood count, liver and kidney function tests, thyroid profile and Ultrasonography abdomen revealed within the limit values.

### Diagnosis and Assessment

Based on the history, physical examination as well as clinical findings, the case was diagnosed as chronic constipation. In *Ayurveda*, we can consider this condition as *Udavarta*. The patient was assessed both before as well as after treatment using Bristol stool form scale [2] (BSFS) and constipation assessment scale [3] (CAS).

### Treatment Protocol

Considering the chronicity of the disease, OP level treatment was started initially with *Gandharvahastadi Kashayam*, *Aamapachan Vati*, *Erandabrishta Haritaki*, *Sootasekhar Rasa* and *Abhayareshtha* for 1 week (Table 1). After one week, the patient was admitted for IP treatment. Initially we started with *Sarvanga Abhyanga* with *Dhanwantaram Taila* and *Sarvanga Swedana* with *Dashamoola Kwath* for three days. Then the patient was administered *Yoga Basthi* with *Anuvasana* using *Pippalyadi Anuvasana Taila* and *Niruha* using *Erandamooladi Kwatha* along with *Poorvakarma*. After these 11 days of IP treatment (Table 2), patient was discharged and she reported 99% relief of her symptoms. She was discharged by prescribing *Aamapachan Vati* and *Dashamoolarishtam* for continuing for two more weeks. Assessment of the symptoms of the patient was done both before and after the treatment using Bristol stool form scale (BSFS) and constipation assessment scale (CAS).

## Results

The patient was assessed with Bristol stool form scale (BSFS) (Table 3) and constipation assessment scale (CAS) (Table 4) before and after therapy. Improvement was found in the scores of these scales (Table 5) evaluated after oral medication followed by 11 days IP treatment. Complete recovery from constipation, sour belching, nausea, occasional vomiting, burning sensation over chest and neck region, feeling of heaviness in the abdomen, occasional rumbling and severe pain in the abdomen was achieved which helped in improving her quality of life.

## Discussion

*Udavarta* is a most common clinical condition that can be presented as a disease or *Nidana* or *Samprati*. It is characterized by the reverse movement of *Vata*, arises due to factors such as *Vegadharana* (suppression of natural urges) and improper dietary practices. This pathophysiology leads to obstruction in the *Adhogami Srotas*, resulting in varied symptoms like abdominal pain, distension, nausea, flatulence, and retention of stool and urine.[4] If left untreated, *Udavarta* can contribute to chronic systemic complications and the progression of other diseases. In the present case, a structured Ayurvedic approach was employed to address the vitiation of *Vata* and associated symptoms. The therapeutic strategy combined internal medications with external therapies to achieve significant relief.

Internal medications such as *Aamapachan Vati* and *Gandharvahastadi Kashayam* played a pivotal role in correcting the digestive imbalance and *Gati* of *Vata*. *Aamapachan Vati* facilitated the digestion by removing *Ama*, thereby improving *Agni* and clearing *Srotodushti*. [5] *Gandharvahastadi Kashayam* not only relieved constipation but also addressed *Vata* imbalance and enhanced appetite, making it highly beneficial for the patient. [6]

*Erabdabrishta Haritaki* (EBH) was instrumental in facilitating the downward movement (*Anulomana*) of *Vata* [7], while *Sootasekhar Rasa* effectively managed symptoms of acidity, such as sour belching and burning sensations. [8] *Abhayarishta* was incorporated as it helps in managing *Chardi*, correcting the *Gati* of *Vayu* as well as increasing the *Agni*. [9]

These formulations highlighted the precision with which *Ayurvedic* remedies target both primary symptoms and associated conditions. The details of internal and external therapies are depicted in table no. 1 and 2. The external therapies administered during the inpatient phase were equally crucial. *Sarvanga Abhyanga* with *Dhanwantaram Taila* [10] and *Swedana* with *Dashamoola Kwatha* were effective in pacifying *Vata* and addressing systemic symptoms. *Yoga Basti*, involving a combination of *Pippalyadi Anuvasana* and *Erandamooladi Niruha*, provided targeted relief by clearing residual stool adhesions and addressing abdominal distension. *Pippalyadi Anuvasana Tailam* is best for relieving retention of *Vata* and *Varchas*. It also helps in mitigating *Moodhavata* and *Anaha*. [11] *Erandamooladi Niruha Basti* is best for *Vata Mutra Nigraha*, *Adhmana* and *Anaha*. [12]

During the course of IP treatment, all the oral medications were also continued. This integrated approach underscores the importance of *Panchakarma* procedures in managing chronic conditions like *Udavarta*. After 11 days of IP treatment, the patient was discharged by giving discharge medication for 2 weeks that included *Aamapachan Vati* and *Dashamoolarishtam*. The patient's remarkable 99% improvement after 11 days of inpatient care and subsequent follow-up with oral medications highlights the efficacy of this combined therapeutic approach. The use of the Bristol Stool Form Scale (BSFS) and Clinical Assessment Scale (CAS) provided objective measures to validate the outcomes.

This case demonstrates that addressing the root cause of *Udavarta* through a comprehensive Ayurvedic treatment protocol can yield significant clinical improvements. It emphasizes the importance of integrating internal medications and *Panchakarma* therapies to provide holistic and sustainable relief. Additionally, this approach minimizes the risk of recurrence, highlighting the potential of Ayurveda in managing chronic gastrointestinal disorders effectively.

## Conclusion

The comprehensive *Ayurvedic* treatment protocol, which encompassed both internal and external therapies, was effective in alleviating chronic constipation and its associated symptoms, referred to as *Udavarta* in *Ayurveda*.

By the time of discharge, there was a significant improvement, as evidenced by a marked reduction in the Bristol Stool Form Scale (BSFS) and Constipation Assessment Scale (CAS) scores. The patient reported complete relief from symptoms such as a burning sensation in the neck and chest, abdominal fullness, occasional abdominal pain, abdominal rumbling, and chronic constipation. Upon discharge, the patient expressed full satisfaction with the outcomes of the treatment.

**Table 1: Timeline of Internal Medication**

Medicine	Dose	Anupana	Duration
Gandharvahastad i Kashayam	20 ml Kashaya twice daily before food	60 ml Luke warm water	04/09/2024 to 21/09/2024
Aamapachan Vati	2 tablets thrice daily before food - chew	Nil	04/09/2024 to 05/10/2024
Erandabrishta Haritaki	2 tablets at night after food	Luke warm water	04/09/2024 to 21/09/2024
Sootasekhar Rasa	2 tablets twice daily after food	Luke warm water	04/09/2024 to 21/09/2024
Abhayarishtha	30 ml thrice daily after food	30 ml Luke warm water	04/09/2024 to 21/09/2024
Dashamoolarishta	30 ml thrice daily after food	30 ml Luke warm water	22/09/2024 to 05/10/2024

**Table 2: Timeline of External Intervention**

Procedure	Medicine used	Duration
Sarvanga Abhyanga	Dhanwantaram Taila	11/09/2024 to 21/10/2024
Sarvanga Sweda	Dashamoola Kwatha	11/09/2024 to 21/10/2024
Yoga Basti	Anuvasana - Pippalyadi Anuvasana Taila Niruha - Erandamooladi Kwatha	14/09/2024 to 21/10/2024

**Table 3: Bristol stool form scale**

Grading Before Treatment	Grading After Treatment
Type 1 - Separate hard lumps (very constipated)	Type 4 - Like a smooth sausage or snake (Normal)

**Table 4: Constipation Assessment Scale**

Item / Symptom	Grading / Score Before Treatment	Grading / Score After Treatment
Abdominal distension or bloating	2	0
Change in amount of gas passed rectally	2	0
Less frequent bowel movements	2	0
Oozing liquid stool	0	0
Rectal fullness or pressure	2	0
Rectal pain with bowel movement	2	0
Smaller stool size	2	0
Urge but inability to pass stool	2	0
Total	14	0

**Table 5: Comparative Outcome of Assessment Score**

Assessment Scale	Before treatment	After treatment
BSFS	Type 1 (Very constipated)	Type 4 (Normal)
CAS	14	0

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