

Role of early intervention of Ayurveda in Hepatitis-A - A Case Study

Pydi R^{1*} , Pandiri T² 


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^{1*} Rajani Pydi, Professor, Department of Kaumarabhritya, Noble University, Gujarat, Junagadh, India.

² Tulasidas Pandiri, Associate Professor, Department of Swasthavritta, Noble University, Gujarat, Junagadh, India.

Hepatitis A is the inflammation of the liver caused by the Hepatitis-A virus. 1.5 million clinical cases are recorded annually worldwide and are responsible for 15,000 to 30,000 deaths per year.[1] Acute viral hepatitis (AVH) has resemblance with Kamala mentioned in Ayurveda. Kamala is a disease of the Rakta Dusti and Pitta Prakopa. Virechana with Mridu and Tiktaka drugs along with wholesome diet is the principle to treat the condition in Ayurveda. A 20-year-old male diagnosed with hepatitis-A treated in accordance to the Ayurvedic principles, that is, Mridu Virechana and Pitta Samana. The total duration of the treatment is for 30 days. In this case, a complete remission of symptoms with a substantial reduction in bilirubin and hepatic enzymes observed following Ayurvedic treatment.

Keywords: Bilirubin, Hepatitis-A, Kamala, Virechana

Corresponding Author	How to Cite this Article	To Browse
Rajani Pydi, Professor, Department of Kaumarabhritya, Noble University, Gujarat, Junagadh, India. Email: rajanidas76@gmail.com	Pydi R, Pandiri T, Role of early intervention of Ayurveda in Hepatitis-A - A Case Study. J Ayu Int Med Sci. 2025;10(3):403-406. Available From https://jaims.in/jaims/article/view/4171/	

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Introduction

Hepatitis-A is the commonest cause (10-30%) of acute viral hepatitis. Hepatitis-A is responsible for 20-25% of clinical hepatitis in the developing countries due to improper sanitisation, limited access to clean water and poor hygienic conditions in these countries.[2]

HAV infection is highly infectious and is spread by faeco oral route. HAV belongs to the picornavirus group of enteroviruses and HAV infection has an incubation period of 15-45 days. Infected person excretes viruses in the faeces for about 2-3 weeks before the onset of the illness and for up to 2 weeks thereafter.[3]

It is characteristically an acute febrile illness, with a typical duration of 7- 14 days, presenting with an abrupt onset of anorexia, nausea, malaise, vomiting and jaundice. Acute hepatic failure is rare in HAV infection. In extrahepatic disease, the most common features are joint pain, muscle ache, and rashes.[1]

Anti HAV of IgM type is diagnostic of acute HAV infection.[3] Rise in ALT, AST, bilirubin, ALP and GGT are almost universally found in all acute viral hepatitis.[2]

Hepatitis-A is a self-limiting disease and there is no specific treatment for hepatitis-A. The treatment is usually symptomatic and supportive.[4]

Ayurveda mentions a clinical condition named *Kamala*. If a patient of *Pitta*, indulges in *Pittavitiating* diet and regimen, the *Pittaso* aggravated burns the *Rakta* and the *Mamsadhatu* cause the disease *Kamala*.

Its clinical features[5] are हारिद्रनेत्रः स भृशं हारिद्रत्वङ्मखाननः (the eyes, skin, nails and face of the patient become exceedingly yellow), रक्तपीतशक्नुमूत्रो (stool and urine become reddish-yellow in colour), भेकवर्णो (complexion develops a colour similar to that of a frog), हतेन्द्रियः (the senses get impaired), दाह (burning sensation), विपाक (indigestion), दौर्बल्य (weakness), सदन (prostration), अरुचि (anorexia). Acharya Charak has mentioned "कामली तु विरेचनैः" as *Chikitsa Sutra*. [6]

Pitta Prakopa and *Rakta Dushti* are responsible for *Kamala* and timely planned *Virechan* along with *Shamana Chikitsa* helps to get rid of vitiated *Pitta* and *Rakta*.

Case Report

A 19-year-old male patient presented with low grade fever, yellowish discolouration of eyes and urine, loss of appetite, vomiting 4-5 per day, indigestion, bloating, fatigue along with itching all over the body and gradual weight loss since six days, had visited *Swasthavritta* OPD on 28/12/2024.

The condition was diagnosed as Hepatitis A as per his blood investigation reports dated 27/12/2024 – HAV-IgM – 6.57 s/co. Patient was on paracetamol 500mg qid prior coming for Ayurvedic management. The assessment of the patient's conditions was done based on symptoms, supported by blood investigation reports and Ayurvedic parameters, the condition was diagnosed as *Kamala*.

Clinical findings

The patient's immediate vitals revealed hemodynamic stability with heart rate of 84/min, respiratory rate of 18, temperature 99°F, axillary, blood pressure of 140/86, and oxygen saturation of 100% on room air. His physical exam revealed a well-nourished, diffusely jaundiced male in no acute distress. The patient was alert and oriented and answered all questions appropriately, albeit with short answers. Apparently scratched his body (pruritus) during the whole examination.

Further examination revealed prominent bilateral yellow discoloration of the eyes (i.e., scleral icterus) and abdominal examination demonstrated a mildly distended abdomen with mild tenderness in the right upper quadrant. There were no other indications of peritonitis and the remainder of the physical examination was within normal limits.

Further questionnaire revealed a past history of dengue 2 months back, and frequent attacks of fever once in every month that lasted for 2 days, sweats a lot, short tempered and had visible greying of hair. (revealing his *Pitta Prakriti Lakshana*)

Astavidha Pariska revealed *Nadi* of 84/min, a *Vikruta Varna Mutra* (Peetha Varna-yellow coloured urine), a *Vikruta Varna* and *Katina Mala* (dark and hard stools), *Alpasama Jihwa* (mild coated tongue), *Madhyama Shabda* (mild feeble voice), *Ushna Sparsha* (warm on touch), *Peetha Varna Drik* (yellow coloured sclera), and a *Pravara Akriti* (71 kgs).

Table 1: Treatment protocol

SN	Drug	Dose	Frequency	Before/after food
1.	Punarnava + Bhumyamalaki Swarasa (whole plant)	50ml	TID	Before food
2.	Arogyavardini Vati	250 mg	TID	Before food
3.	Patola Katurohinyadi Kashaya	15 ml	BID	Before food
4.	Amlycure DS	10ml	BID	After food
5.	Trivrit Lehyam	4 tsf	Weekly once HS for 4 weeks	After food

BID - twice a day, TID - thrice a day, HS - at bedtime, tsf - tea spoonful

Patient started medication on 30/Dec/2024

30 Dec 2024 - 4 Jan 2025 - on medicines 1,2,3,4

4 Jan 2025 - 4 tsf of *Trivrit Lehyam* at bed time after food

5 Jan 2025 -

1. *Mridu Shodana* (6 Vegas due to *Trivrit Lehyam* on previous night - 4 Jan 2025)

2. On light diet - *Khichdi* or *Rasam* + rice or home-made soup

3. No medication on this day

The same pattern has been repeated for four weeks.

On 4 Jan, 11 Jan, 18 Jan, 25 Jan - 4 tsf of *Trivrit Lehyam* at bed time after food

On 5 Jan, 12 Jan, 19 Jan, 26 Jan - 6 Vegas, 4 Vegas, 5 Vegas, 5 Vegas respectively

On light diet and no medication.

Pathya: *Purana Shali*,^[7] wheat, barley, *Mudga*, *Mridvika Ras*,^[8] *Amalaki ras*, vegetable soups of dry radish,^[9] increased intake of fruits, boiled vegetables and *Takra*. Patient was advised to have meals on time. Early dinner. Advised to sleep on time and maintain hygiene

Apathya: advised not to consume items prepared by refined flour (Maida), oily and spicy food and no screen time. *Vega Dharana*, *Vyayama* and *Divaswapna* are contraindicated.

Follow-up: It was done after a week with a review on the bilirubin level.

Result

All symptoms like fever, yellow discoloration of the eye, fatigue and itching of the body reduced completely within ten days of treatment.

The patient has put on 2 kg weight with one month medication. The following shows the blood report of the patient before and after treatment:

Table 2: Blood investigation

Bio chemical test	Values B/T on 28-12-2024	Values on 6-1-2025	Values on 1-2-2025	Normal range values
Bilirubin total	6.24	1.83	0.72	up to 1.2mg/dl
Bilirubin direct	3.76	1.14	0.38	up to 0.2mg/dl
Bilirubin indirect	2.48	0.69	0.34	up to 1.0mg/dl
SGOT	209.09	64	58	Up to 40 U/L
SGPT	32.65	208	31	Up to 41U/L
ALP	230.97	162	98	40 - 136 U/L

Discussion

Symptomatically the above case has been taken as *Kamala* as the patient had दाह, हारिद्रनेत्रः, हारिद्रत्वङ्गखाननः, विपाक, दौर्बल्य, सदनारुचि, पीतमूत्रो as mentioned in the *Charka Samhita*. The Ayurvedic formulations selected in this case were aimed to improve the liver functions, regulate metabolism and improve digestion. The main focus was placed on implementing *Chitiksa Sutra* of *Kamala*, that is *Virechana*, on a weekly basis with *Trivrit Lehyam* for four consecutive weeks.

Bhumi Amalaki helps in managing liver disorders and reverses any damage caused to the liver due to its hepatoprotective, antioxidant and antiviral activities.^[10] **Punarnava** is used as a *Rasayana* in *Ayurveda*, it helps to rejuvenate and heal the body. Furthermore, it comes with hepato-protective, immuno-modulatory, anti-inflammatory, diuretic, antibacterial properties.^[11]

Patola Katurohinyadi Kashayam is a combination of drugs like *Patola*, *Katuki*, *Chandana*, *Patha* with *Kapha Pitta Shamaka* property. *Murva* and *Guduchi* mainly act as *Pitta Shamaka*. So, this drug used in *Yakrut Shotha* and *Kamala*.^[12] **Arogyavardini Vati** has been mentioned in *Bhaishyajaratnavali* in the context of *Yakrit Vikara* (liver disorder).

This classic drug is used for centuries with claimed efficacy and safety in treatment of jaundice and other liver and skin disorders.[13] **Trivrut Lehyam** has anti-bacterial activity, anti-inflammatory activity, anti-secretory activity, anti-microbial activity, anti-diabetic activity, Hepato-protective activity.[14] **Amlycure DS** enhances liver metabolism, rejuvenates with considerable protection to hepatic cells. The hepatoprotective role of *Amlycure DS* is effective due to available anti-oxidants, tannins and flavonoids and also due to antimicrobial & anti-inflammatory properties.[15]

Conclusion

Ayurvedic management showed good results in this case. Pruritus caused by increased bile salts was effectively controlled by single drugs *Bhoomyamalaki* and *Punarnava* in just two days. Formulations used in this case study showed improvement in all the symptoms within ten days. *Virechana* is proved to be effective in elimination of aggravated *Pitta* in this case as mentioned in classics. Restoration of liver cells and its functions has been validated with reduction in the parameters of liver function tests. This outcome shows that an early intervention of *Ayurveda* in Hepatitis-A is very effective

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