



ISSN 2456-3110

Vol 3 · Issue 4

July-Aug 2018

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS



Charaka
Publications

Indexed

A comparative clinical study to evaluate the efficacy of *Shuntyadi Churna* & *Mustakadi Churna* in the management of *Grahani Roga* w.s.r. to Irritable Bowel Syndrome

Dr. K. G. Muddapur,¹ Dr. Uma A. Patil²

¹Post Graduate Scholar, ²Associate Professor, Department of Kayachikitsa, BLDEA's AVS Ayurveda Mahavidyalaya, Vijayapur, Karnataka, India.

ABSTRACT

Grahani is the seat of *Agni* and it is so called because of holding up the food. The term *Grahani Dosha* implies the malfunctioning of *Agni*. Improper digestion of ingested food causes *Grahani Dosha*. If left untreated it finally leads to *Grahani Roga*. *Muhurbadha* and *Muhurdrava Mala Pravrutti* is the main *Lakshana* and associated with symptoms like *Udarashoola*, *Arochaka*, *Sharirika Balakshaya*, *Asthi Parvashoola*, *Avipaka* etc. As *Agnimandya* is the main cause, the first line of treatment is to correct the *Dusti* of *Agni*. *Shuntyadi Churna* and *Mustakadi Churna* have the qualities of *Deepana*, *Pachana*, *Grahi*, etc. and can be used in *Sarvagrahani Chikitsa*. This study is undertaken to clinically analyze the independent effect of *Shuntyadi Churna* and *Mustakadi Churna* in *Grahani Roga*. The study shows that both *Shuntyadi Churna* and *Mustakadi Churna* are effective in relieving the symptoms of *Grahani Roga*.

Key words: *Agni*, *Grahani*, *Shuntyadi Churna*, *Mustakadi Churna*, *Irritable Bowel Syndrome*.

INTRODUCTION

Ayurveda attributes its prime importance to maintain health in healthy individuals and alleviation of diseases in ailing populace.^[1] In Ayurveda, *Grahani Dosha* is one among the *Mahagadas*. In modern science, *Grahani Dosha* is included into digestive disorders. Due to modern life style, disorders are increasing day by day. Due to irregular consumption of food, junk

food and untimely habit gastro-intestinal problems are most common in society.

The organ *Grahani* is the seat of *Jatharagni* (digestive fire) both are interrelated. It's supported and nourished by the strength of *Agni*. Normally, it receives the ingested food, which is retained by restraining the downward movement (*Grahanati*). After digestion it releases the food through sides of lumen to next *Ashaya* i.e. *Pakwashaya*. In abnormal conditions due to weakness of *Agni*, it gets vitiated and releases food in indigested form. When *Agni* is not proper the food will not get digested properly and this undigested food gets fermentation and acts like poison in the body. It's called *Ama*. *Ama Utpatti* leads to *Grahani Dosha*.^[2] *Agnimandhya* is important factor in the *Samprapti* of the disease *Grahani Dosha*. This disturbs the normal flora of GI tract and weakens the muscles and acid fluid configuration of GI tract. So *Prasad Bhaga* of food is not formed properly so nourishment of whole body does not occur. Because of this the people may suffer from gastro intestinal

Address for correspondence:

Dr. K. G. Muddapur

Post Graduate Scholar, Department of Kayachikitsa, BLDEA's AVS Ayurveda Mahavidyalaya, Vijayapur, Karnataka, India.

E-mail: preeti.sonar1990@gmail.com

Submission Date : 13/07/2018 Accepted Date: 19/08/2018

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.v3i4.13277

disorders like indigestion loss of appetite, irregular bowel movements, ulcers etc.^[3]

These factors affecting people will not only disturb the growth and development of physical health of it but its activities, social behavior, immunity and concentration power too. If above mentioned problems remained untreated or unnoticed, they may turn in to its related complications. According to modern science, this disease can be understood under the context of Irritable bowel syndrome characterized by abdominal pain and altered bowel habits with no particular structural pathology of the gastrointestinal tract. This syndrome is most frequent in women between the age of 20-40 years.^[4] About 15% of the general population has symptoms that justify a diagnosis of IBS; in western series, female patients predominate, in South Asia and in India, most reporting patients are young men.^[5]

So it should be mainly treated for *Agnivardhana* by drugs with *Deepana* (which enhances digestive power) and *Pachana* (digestive) qualities.

Ayurveda considers that the dysfunction of *Agni* is responsible for undigested food which is responsible for various functional and structural defects in the gastro-intestinal tract. According to modern science, this disease can be understood under the context of Irritable Bowel Syndrome characterized by abdominal pain and altered bowel habits with no particular structural pathology of the gastro-intestinal tract.

Grahani is the seat of *Agni* and it is so called because of holding up the food. The term *Grahani Dosh* implies the malfunctioning of *Agni*. The main pathology lies in the *Dusti* of *Agni* due to change of modern lifestyle, taking improper, junk and unwholesome food the *Agni* gets vitiated.

In *Grahani Roga*, due to *Dushita Jatharagni* the food gets undigested. Undigested food forms a vitiated material called *Ama*, which is responsible for producing various disorders.

In Ayurveda, *Acharya Charaka* has given a vivid description about *Grahani Roga*. *Acharya Sushruta* and *Vagbhata*, also has thrown a very good light on

Grahani Roga. *Grahani* is considered under *Ashta Maharoga* - and very difficult to treat.

OBJECTIVES OF THE STUDY

A comparative clinical study to evaluate the efficacy of *Shuntyadi Churna* and *Mustakadi Churna* in the management of *Grahani Roga* w.s.r. to irritable bowel syndrome.

MATERIALS AND METHODS

Study design: It is a randomized clinical study design where a minimum of 30 patients fulfilling the inclusion criteria were included in the study.

Sample size: Minimum of 30 patients fulfilling inclusion criteria were selected and registered for the study.

Diagnostic Criteria

Patients with classical signs and symptoms of *Grahani Dosh* are taken for the study.

- *Muhurbadda Muhurdrava Mala Pravrutti*
- *Arochaka* (loss of taste)
- *Sharirika Balaksahya* (weakness)
- *Asthi* and *Parva Vedana* (bone pain)
- *Alasya* (fatigue)
- *Tamaka* (dizziness)
- *Atisara* (diarrhoea)

Inclusion Criteria

- Patients within the age group of 17-60 years.
- Patients were selected randomly irrespective of their caste, religion and sex.

Exclusion Criteria

- Patient with associated systemic disorders like tuberculosis, malignancy and other complications.
- Patients suffering from acute diarrhea, ulcerative colitis, gastric and peptic ulcers, intestinal obstruction.
- Pregnant and lactating women.

Posology**Group A:**

- Sample size : 15 patients
- Procedure : *Shuntyadi Churna* 3 gm BID 30 minutes before food with *Jala*.
- Duration : 30 days

Group B:

- Sample size : 15 patients
- Procedure : *Mustakadi Churna* 3 gm BID 30 minutes before food with *Madhu*.
- Duration : 30 days

Assessment Criteria

A case proforma was prepared for the assessment of signs and symptoms by grading them. The obtained data was tested for statistical significance.

OBSERVATION AND RESULTS**Effect of therapy in Group A**

In Group A therapy, there was 78.79% improvement in the symptom of *Muhurbaddha / Muhurdrava Mala Pravriti* ($p < 0.001$). Marked improvement was noted in *Alasya* (90.00%, $p < 0.01$), *Atopa* (88.89%, $p < 0.001$), *Arochaka* (85.71%, $p < 0.01$), *Udara Shoola* (81.48%, $p < 0.001$), Sense of incomplete evacuation (70.97%, $p < 0.001$) and *Sharirika Balakshaya* (70.00%, $p < 0.001$). There was complete resolution in the symptoms of *Atisara* (100.00%, $p < 0.1$) and *Shleshma Mala Pravriti* (100.00%, $p < 0.1$). Amongst all symptoms, least improvement was noted in *Swaroopa of Mala* (58.75%, $p < 0.01$) and *Asthiparva Shoola* (52.38%, $p < 0.001$).

Effect of therapy in Group B

In Group B therapy, there was 74.29% ($p < 0.001$) improvement in the symptom of *Muhurbaddha / Muhurdrava Mala Pravriti*. Significant improvement was noted in *Arochaka* (83.33%, $p < 0.001$), *Atisara* (80.00%, $p < 0.05$), Sense of incomplete evacuation (75.86%, $p < 0.001$), *Atopa* (73.08%, $p < 0.001$), *Alasya* (71.43%, $p < 0.02$) and *Udarashoola* (62.96%, $p < 0.001$). There was complete resolution in the symptom of

Shleshma Mala Pravriti (100.00%, $p < 0.1$). Amongst all symptoms, least improvement was noted in the symptoms of *Swaroopa of Mala* (53.10%, $p < 0.02$), *Sharirikbalakshaya* (47.62%, $p < 0.01$) and *Asthiparva Shoola* (36.36%, $p < 0.01$).

DISCUSSION

In the present study a total 32 subjects of *Grahani Roga* were selected from OPD and registered for the treatment. Out of which 30 patients completed the full duration of treatment, while 2 patients were drop outs. It was observed from the study that maximum subjects of *Grahani Roga*, 15 (50.00%), presented in the third decade of life (Age group: 21-30 years) followed by 8 (26.67%) subjects in fourth decade of life (Age group: 31-40 years). In the third and fourth decade of life people have busier and stressed life span, so they usually indulge in unwholesome regimen e.g. *Adhyashana*, *Vishamashana*, *Ratrijagarana*, *Diwasvapana* etc. This leads to inequilibrium of *Tridosha* mainly *Shamana Vayu*, *Pachaka Pitta* and *Kledaka Kapha*. Anxiety and stress badly affects function of *Agni* so that function of *Grahani* gets disturbed and they produce *Grahani Roga*.

The present study suggests that females (60%) are more prone to *Grahani Roga* than males (40%). Out of 30 subjects, 18 females were registered and 12 males were registered for this study. This may be due to more family stress and burden of household chores, untimely meals, etc. Hence they are more prone to gastrointestinal disorders like *Grahani Roga*.

Among enrolled subjects 63.33% were married and 33.33% were unmarried which suggests that disease is more prominent in married people. Although there is no relation between the *Grahani Roga* and Marital status but due to increased stress and hurry-burry life they are more prone to be affected with this disease.

Among enrolled subjects, it was observed that 40.00% subjects were housewives and 26.67% were students, 20% service class, 10% business man and 3.33% belonged to labour class. Today's stressful and hectic life styles play a role in development of

Grahani. Sedentary life style produce *Mandagni*, whereas hectic lifestyle produce *Vishamagni*. Both states of *Agni* are responsible for *Grahani Roga*.

In the present study, it was observed that 46.67% subjects were vegetarian and 53.33% belonged to Non-vegetarian group which suggests that the disease is some what more prominent in non-vegetarian group. The Non-vegetarian diet contains *Ati-guru*, *Ati-snidgha* etc. elements in high concentrations compared to vegetarian food, which as per the *Grahani Nidana* are the factors responsible for *Grahani Dosh*.

This study shows 43.33% subjects were taking timely meals as compared to 56.67% who were taking untimely meals. *Vishamasana* is one of the main reasons for development of *Grahani Roga*. Suppressing the hunger (*Vegavarodha*) may lead to vitiation of *Agni* which is directly proportional to *Grahani*.

In the present study, *Muhurbaddha / Muhurdrava Mala Pravrutti*, sense of incomplete evacuation, *Udara Shoola* and *Atopa* were chief complaints in 100% subjects, while *Asthiparvashoola* was found in 90%, *Sharirika Balakshaya* in 86.67%, *Arochaka* in 66.67%, *Lohagandhi Tiktaamladgara* in 56.67%, *Alasya* in 46.67% patients, *Atisara* in 23.33%, *Shleshmamala Pravrutti* in 33.33% subjects. *Tamaka Shwasa* was not found in any of the subject.

These all are the cardinal symptoms of *Grahani Roga*. Faulty dietary habit, mental disturbance and sleeping pattern etc. are the etiological factors, due to these factors there is vitiation of *Tridosha* and by these *Agni* is vitiated which leads to vitiation of *Grahani* that results in symptoms of *Grahani Roga*.

Effect of therapy in Individual group

In group A therapy, there was 78.79% improvement in the symptom of *Muhurbaddha / Muhurdrava Mala Pravrutti*. Marked improvement was noted in *Alasya* (90.00%), *Atopa* (88.89%), *Arochaka* (85.71%), *Udarashola* (81.48%), Sense of incomplete evacuation (70.97%) and *Sharirika Balakshaya* (70.00%). There was complete resolution in the symptoms of *Atisara*

(100.00%), *Shleshma Mala Pravrutti* (100.00%) and *Swaroopa of Mala* (58.75%), Amongst all symptoms, least improvement was noted in *Asthiparva Shoola* (52.38%).

In group B therapy, there was 74.29% improvement in the symptom of *Muhurbaddha / Muhurdrava Mala Pravrutti*. Significant improvement was noted in *Arochaka* (83.33%), *Atisara* (80.00%), Sense of incomplete evacuation (75.86%), *Atopa* (73.08%), *Alasya* (71.43%) and *Udarashoola* (62.96%). *Swaroopa of Mala* (53.10%). There was complete resolution in the symptom of *Shleshma Mala Pravrutti* (100.00%). Amongst all symptoms, least improvement was noted in the symptoms of *Sharirika Balakshaya* (47.62%) and *Asthiparva Shoola* (36.36%).

CONCLUSION

The vitiation of *Agni (Mandagni)* is the *Pradhanakarana* for *Grahani*. The other *Nidanas* such as *Adhyashana*, *Vishamasana* are *Nimitta Karanas*. Persons habituated to continuous intake of either of the three *Rasa*, two *Rasa*, or even one *Rasa* are more prone to diseases, which is evidently shown in present study of *Grahani Roga*. *Shuntyadi Churna* and *Mustakadi Churna* contains drugs that act through *Deepana* and *Pachana Prakriya*. *Shuntyadi Churna* and *Mustakadi Churna* demonstrated beneficial effects in *Grahani Chikitsa*.

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How to cite this article: Dr. K. G. Muddapur, Dr. Uma A. Patil. A comparative clinical study to evaluate the efficacy of Shuntyadi Churna & Mustakadi Churna in the management of Grahani Roga w.s.r. to Irritable Bowel Syndrome. J Ayurveda Integr Med Sci 2018;4:9-13.

<http://dx.doi.org/10.21760/jaims.v3i4.13277>

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