Management of Kamala (Jaundice) through Ayurved – A Case Report

Case Report

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Abstract
Jaundice is a yellow pigmentation of the skin, the conjunctival membrane over the sclera and other mucous membrane caused by hyperbilirubinemia (increase level of bilirubin in blood). Today’s lifestyle with unhygienic and poor dietary habit and alcoholic habits, etc. which are responsible factor to promote hepatic damage which clinically reflect as kamala. In this case study 25 years male patient having kamala who was suffering from pain in abdomen, weakness, anorexia, burning maturation and fever on and off, the patient was treated with shodhan chikitsa (Virechan with panchatikta ghrita) followed by shaman chikitsa. Patient got significant result as per the values of bilirubin with symptomatic relief in complaints within 30 days, Kamala can be successfully managed by shodhan and shaman chikitsa, the effect of ayurvedic treatment was assessed in relation to improvement in overall clinical sign and symptoms and biochemical investigations. Further study will be needed as per different assessment criteria.

Key Words: Kamala, Shodhan, Virechan, Jaundice.

Introduction
In today’s era lifestyle of most of the peoples has got addicted to oily, junk food & alcohol which is a primary cause for occurrence of hepatic disease. Resent researches proves that sedentary lifestyle is also responsible for hepatic impairment which eventually leads to manifestation of symptoms such as lack of appetite weakness yellowish discoloration of eyes and skin., indicating excess bilirubin which is bile pigment in the blood. Patients also complain of fatigue, anorexia and nausea (1). These are particularly called as hepatocellular jaundice.

An ayurvedic text has mentioned hepatocellular jaundice as kamala (bahupitta kamala) kamala is describe under raktavaha strotas (2). Yakruta and pleeha are the moolashan of the raktavaha strotas (3). So Rakta and pitta has ashray ashrayi sambhandha. So ancient acharya has mentioned “kamali tu virechanama” as a Chikitsa sutra (4).

Case report
A 25 years old patient working as a waiter came to OPD of kayachikitsa Mahatma Gandhi Ayurvedic Hospital, Salod (H) Wardha.

Chief complaint-
• Udara shool (pain in abdomen)
• Kshudha mandhya (loss of appetite)
• Daurbalya (weakness)
• Hrullas (Nausea)
• Mutrapitata (yellow discolouration of urine)
• Vibhandha (constipation)

History of present illness
Patient was asymptomatic before one month gradually he developed abdominal pain, nausea, vomiting, weakness, discoloration of urine. Patient has not taken any medication before. For ayurvedic treatment he came to our hospital Mahatma Gandhi Ayurved Hospital in Kayachikitsa outpatient department. We admitted patient in Inpatient department section for better management.

Personal history
• Addiction- alcohol consumption
• Frequent consumption of junk, oily and spicy food was observed

On examination
• Nadi (Pulse)- 72/min
• Mal (stool)- Malavshatambha( constipation)
• Mutra(urine)- Peetavarniya
• Jivha (Tongue)- Samata
• Kshudha(Apetite)- Mandya
• Shabda (speech)- spashta
• Sparsha (skin)- peetavarniya, anushnasheet
• Druk (eyes) – Arakta pitata
• Akruti – Madhyam

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Email id - nayansupare133@gmail.com
• Bala – Madhyam
• Raktaadab (BP) - 120/70 mmHg

Investigation

Blood investigation revealed raise level of serum glutamic oxaloacetic transaminase (SGOT), serum glutamic pyruvic transaminase (SGPT), Sreum bilirubin, etc.

Treatment

Virechan Karma: Due to excessive intake of Pittakara ahara causes vitiation of pitta dosha and virechana is the first line of treatment for Pittadusti. Patient was given 20ml panchatikta ghrita before a day of virechana as a snehapana followed by sadya virechana on next day. 20 ml quath is prepared with Manuka 20gm and Kutaki churna 20gm along with 1 tablet of ichabhedi rasa. Virechan was given on first and seventh day followed by internal medicines for 30 days.

Internal Medication

Table No.1: (List of Internal Medicines with dose and duration and time)

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Drug given</th>
<th>Dose</th>
<th>Duration and time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Arogyavardhini vati</td>
<td>250 mg x Twice a day</td>
<td>15 days x Before meal</td>
</tr>
<tr>
<td>2</td>
<td>Bhunimbadi kwath</td>
<td>20 ml x Twice a day</td>
<td>30 days x After Meal</td>
</tr>
<tr>
<td>3</td>
<td>Syp Liv52</td>
<td>20 ml x Twice a day</td>
<td>30 days x After Meal</td>
</tr>
<tr>
<td>4</td>
<td>Tablet Kutaki</td>
<td>1 tab x Twice a day</td>
<td>10 days x Before Meal</td>
</tr>
</tbody>
</table>

Observations and Result

Table no. 2 (Result in the form of blood investigations before and after virechan)

<table>
<thead>
<tr>
<th>Sr. N. O.</th>
<th>Investigation</th>
<th>Before treatment</th>
<th>After first virechan</th>
<th>After secon d virechan</th>
<th>After 30 day</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Hb gm%</td>
<td>12.2</td>
<td>12.7</td>
<td>12.7</td>
<td>12.9</td>
</tr>
<tr>
<td>2</td>
<td>Total bilirurbin (mg%)</td>
<td>16.98</td>
<td>7.49</td>
<td>4.25</td>
<td>1.15</td>
</tr>
<tr>
<td>3</td>
<td>SGPT (IU/L)</td>
<td>3465</td>
<td>194</td>
<td>54</td>
<td>24.12</td>
</tr>
<tr>
<td>4</td>
<td>SGOT (IU/L)</td>
<td>2871</td>
<td>500</td>
<td>45</td>
<td>28.16</td>
</tr>
<tr>
<td>5</td>
<td>Sr.Protin (gm%)</td>
<td>7.1</td>
<td>7.2</td>
<td>7.2</td>
<td>7.3</td>
</tr>
<tr>
<td>6</td>
<td>Sr.Albumin (gm%)</td>
<td>3.7</td>
<td>4.2</td>
<td>4.2</td>
<td>4.6</td>
</tr>
<tr>
<td>7</td>
<td>Globulin (gm%)</td>
<td>3.4</td>
<td>3.4</td>
<td>3.4</td>
<td>3.6</td>
</tr>
</tbody>
</table>

Discussion

In Ayurvedic Samhita, kamala is explained under Raktaavaha Strotas Vyadhi. Due to regularly consumption of Ushna-Tikshna Ahara by Pandurogi, causes vitiation of Pitta Dosha. All above aggravating factor and consumption of alcohol was taken by patient. Due to katu, anila lavan ahara there is vitiation of pitta which leads to hypo function jatharagni followed by production of amavisha and formation of disease called kamala. As it is pitta and rakta pradoshaj vyadhi it will be managed by madhura tikta and kashaya rasa. According to texts snehapana followed by virechana is the best treatment modality for kamala. It removes increased Pitta (bile) and purifies the body and give significant relief in Kamala patient act as detoxification process. Kutaki churna with ichabhedi rasa tablets followed by manuka quath was used for virechana as it is having purgative property.

In Ayurveda various formulations are described for the management of kamala as a supportive medicine with virechana. In this case study formulations like Arogyavardhini vati, Liv52, Bhunimbadi kwath and Tablet kutaki are used for the management of kamala. All these ras aushadi & herbomineral formulations contain the drugs having tikta rasa, dipana, pachana, rechan, pittakaphashamaka, yakruttotejaka and rasayana properties.

Probable mode of action of medicines

1) Arogyavardhini vati - usually indicated for the treatment of jaundice, and other liver disorders wisely having deepan ,paachan, strotoshodhan, yakra pleeha shothkar ,tridoshashamak properties(5), produces agnivedithan by acting on madagni of yakrit helping in formation of new liver cells which contains Haritaki (Terminalia chebula Retz.), Bibhitaki(Terminalia bellerrima Roxb.), Amalaki(Emblica officinalis Gaertn.), Sudha Silajatu (Asphaltum), Shuddha Guggulu (Commiphora wightii Arn.), Eranda (Ricinus communis L.), Katuka (Picrorrhiza kurroa Royleex Benth), Nimba (Azadirachta indica A Juss), with Shuddha Rasa (Purified mercury), Shuddha Gandhaka (Purified sulfur), Lauha bhasma, Abhrak bhasma, Tamra bhasma, this vati is mentioned in Ayurveda formulay(6), Research conducted on it proves its choleretic, anti-inflammatory and antiviral action. Hence this drug is widely used in the hepatic disorders(7).

2) Liv52(8) contains Himsra (Capparis spinosa ) 65 mg, Kasani (Cichorium intybus) 65mg, Mandur Bhasma (Ferric oxide calx) 33mg, Kakamachi (Solanum nigrum) 32mg, Arjun (Terminalia arjuna) 32 mg, Kasamarda (Cassia occidentalis) 16 mg,
bhiranjasipha (Achillea millefolium) 16mg, Jhavuka (Tamarix gallica) 16 mg ,all these drugs are being used to improve functional efficacy of liver with antioxidant, stimulant, antibacterial property.

3) Tablet kutaki(9)
(Picrohiza kurrooa) Being katu tikta rasa, and ushna viryak property it is having rechak, deepak, raktashudhikar, malabhedaniya activity.

4) Bhunimbadi kwath(10)
Contains Bhunimba (Andrographis paniculata), Ativisha (Aconitum heterophyllum), lodhra (Sympllicos racemosa), Musta (Cyperus rotundus), Indrayava (seeds of Holarrhena antidysenterica), Amruta (Tinospora cordifolia), Balaka (Coleus vettiveroides), Dhanyaka (Coriandrum sativum), Bilva (Aegle marmelos) which is used mainly in liver disorders as it is having laxative, digestive, antibacterial and haemostatic property.

Conclusion
From the above case study it can be concluded that effective treatment of kamala is possible by Ayurveda with the help of virechana as a main modality and other formulations as a supportive medicines. As this was a single case study, if taken on large sample size, treatment of kamala can be emphasise more effectively for the betterment of society.

References
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