



Case Study

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A CASE STUDY ON AYURVEDIC MANAGEMENT OF CROHN'S DISEASE

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ABSTRACT

Introduction- Diseases of the digestive system constitute a significant role in increasing the disease burden in society. *Grahani Roga* (Disorder of gastro-intestinal tract especially duodenum and lower G.I Tract), according to Ayurveda, is a disease related to gastrointestinal disorders. Observation- A clinically diagnosed male patient with Crohn's disease 20 years old. The signs and symptoms of Crohn's disease are like the manifestations of *Grahani Roga*, as explained in Ayurveda texts. Most of the symptoms of *Grahani Roga*, as mentioned in Ayurveda, resemble Crohn's Disease. These include loss of appetite, fever, weight loss, diarrhea, depression. So, there can be a correlation between the two conditions. To provide practical insights into the therapeutic concepts of Ayurveda, a diagnosed case of Crohn's Disease in a preview of *Grahani Roga* is discussed in this article. The condition was managed with the help of holistic Herbal and Herbo-mineral compounds mentioned in authentic Ayurveda texts. In this Case Study, treatment given to the patient consisted of a combination of herbs like *Kutaj*, *Bilwa*, *Darvi*, *Kamdudha*, *Vidangadi*, *Pachak*, and *Rasasindur* with *Anupan* (co-administer of medicine) of *Ghee*. Classical Herbo-mineral compounds like *Kutajghan vati*, *Shankh vati*, *Suwarnmalini Vasant* and *Panchamrut parpati* play an essential role in the treatment plan. According to Ayurveda, it is concluded that there is a correlation between the signs and symptoms of Crohn's Disease and *Grahani Roga*. *Nidan Parivarjana*, *Pathya- Apathya* also play a vital role in *Grahani Roga*.

Keywords: *Grahani Roga*, Crohn's Disease, *Anupan*

INTRODUCTION

Grahani Roga (Disorder of Gastro-intestinal tract especially duodenum and lower G.I Tract), according to Ayurveda, is a disease related to gastrointestinal disorders.¹, overall estimated IBD population in 2010 India was found to be 14 million seconds highest, followed by USA. ² *Grahani* (Duodenum) is the seat of *Agni* (Digestive factors) and an organ that receives an organ food for digestion. The structural framework and physiological functioning of *Grahani* depends upon the *Bala* (Strength) of *Agni*, which is present in the area above the *Nabhi*(Umbilicus).³ *Grahani* is capable of retaining the food till *Samyak Pachan* (Proper Digestion) occurs before the food is passed on *Pakwashay* (Large Intestine)

The disease in which the *Bala* of *Grahani* and *Agni* is vitiated is called *Grahani Roga*. *Grahani Roga* is a disorder of *Annava* *Strotas* (Digestive system) in which there is the involvement of *Tridosha* (Three regulatory factors of the body) along with vitiation of *Agni*. Due to the disturbed physiology of *Agni* and *Grahani* symptoms like *Malvibandha* (Constipation) or *Dravamala* (loose stools), *Trishna* (Thirst), *Arochak* (Anorexia), *Asyavairsya* (Altered Taste), *Tampravesh* (Fainting) and *Daurbalya* (Weakness) are commonly observed.

Ayurveda described various *Chikitsa Tattva* (Treatment Protocol) for *Grahani Roga*, including specific use of herbs, *Pathyapathya* (Wholesome regime), and lifestyle modification.

Crohn's Disease is a chronic inflammatory condition of the Digestive Tract. It is considered Inflammatory bowel disease, most commonly affecting adults aged 20 to 30 years. This disease has a significant genetic predisposition that can affect the entire

digestive system, most commonly the ileum and ileocecal junction.⁴ The most common symptoms include the passage of watery stools with blood, nausea, weight loss, indigestion etc., like the *Grahani* disease as explained in Ayurveda.⁵ The principal treatment, according to contemporary sciences, includes the use of immunosuppressant drugs to avoid the flare-up of diarrhea like symptoms. Diet and nutrition play a crucial role, and surgery is advised in non-reactive cases.

The Ayurveda has excellent potential in treating IBD-Inflammatory Bowel Disease disorders. The holistic treatment protocol includes different principles like immunomodulation, enhancing digestive health, maintaining the microbiota, alleviating the psychological factors, thus contributing to the maintenance of gut health. Therefore, this case report underlines the same protocol with the help of a wholesome diet and medication regime.

Case Report

A clinically diagnosed male patient with Crohn's disease 20 years old with chief complaints of increased frequency of motions to several 20 per day in the last 7-8 months presenting with symptoms like *Jwar* (fever), *Dehbarkshaya* (Weight loss), *Daurbalya* (Generalized Weakness) and *Manovaichitya* (Anxiety) since the period of 1 month.

The patient was clinically diagnosed with Crohn's Disease in 2015 and was under treatment from the allopathic hospital but did not find much relief. (All symptoms gradually increased and progressed into Crohn's Disease). With the patient's consent, the patient's treatment was started on 13/2/15 at Saptashringa

Ayurved Chikitsalaya, Pune, India. The Family History and Past History for disease and other conditions were insignificant.

General Examination

The general examination suggested as follows – *Nadi* (Pulse) – *Vatapitta*, *Kshudha* (Appetite) – *Mandya* (Diminished), *Jivha*

(Tongue)- *Sama*, *Mala Vega* (Bowel Frequency)- 20 *Vega*/Day, *Mal Swarup* (Consistency of stools)-*Picchilya* (Sticky), *Drav* (Watery), *Puystrav* (Mucoid), *Mutra* (Urine)- 5-6 veg/day, *Nidra* (Sleep Habits)- *Khandit* (Disturbed), *Dehbhar* (Weight) - 44 kg. Detailed History revealed long term consumption of enlisted *Aahara* (Dietary), *Vihara* (Lifestyle related) and *Manas* factors (Psychological). (Table 1)

Table 1: Etiological factors

<i>Aahara</i>	<i>Katu Ras</i> ++ (Food predominantly Spicy in taste) <i>Vidhahi Aahaar</i> (Spicy Food) <i>Vishmashan</i> (Unbalanced Diet) <i>Mansahar</i> (Consumption of Meat)- Chicken Specifically 4-5 times/ week
<i>Vihara</i>	<i>Ratraujagaran</i> (Sleeping late at night)
<i>Manas:</i>	<i>Atichinta</i> (Excessive Stress), <i>Bhaya</i> (Fearfulness), <i>Vishada</i> (Depression)

Table 2: Preliminary investigations

Hematological findings	Hb% - 8.9gm% WBC count 14100/cumm (24/01/2015) SGPT-23 U/L SGOT-13 U/L. Uric Acid 1.4mg/dl (27/1/2015)
Stool Report	Mucus-Present Pus Cells>100/HPF (25/1/2015)
CRP (C-reactive protein)	9.52mg/dl (21/1/2015)
USG Report-	Long segment concentric wall thickening involving entire sigmoid colon as well as rectum probably suggestive of IBS (19/01/2015)
Colonoscopy	Ileal and left colonic Crohn's Disease (14/08/2014)

Table 3: Investigational findings during follow up period

2015	Hb% - 12.50gm % WBC count 10100/cumm
2016	Hb% - 14.40gm% WBC count 6300/cumm

Table 4: Herbal drug combination administered

Name of the drug/Drug combination	Contents	Quantity
Kutaj <i>Holarrhena pubescens</i> (BUCH-HAM.) WALLICH EX DO	Single herb	1 Part- 750mg
<i>Darvi</i> (<i>Berberis aristate DC</i>)	Single Herb	1 Part- 750mg
<i>Bilwa</i> (<i>Aegle marmelos</i> (L.) CORREA EX. SCHULTZ)-	Single Herb	1 Part- 750mg
<i>Vidangadi Choorna</i>	A powdered mixture contained the following herbs with quantity. <i>Vidanga</i> (<i>Embelia ribes</i>)- 2 parts, <i>Yavani</i> – (<i>Trachyspermum ammi</i>) 1 part <i>Balantshepa</i> – (<i>Anethum sowa</i>)- 1 part Baking Soda – NaHCO ₃ - 4 parts	1.5 gm
<i>Pachaka Choorna</i>	A powdered mixture contained the following herbs with quantity- <i>Saidhav</i> - Rock salt- 4 parts <i>Sauvarchal Lavana</i> – Black salt- 4 parts <i>Vidang</i> - <i>Embelia ribes</i> - 2 parts <i>Ajmoda</i> - <i>Trachyspermum ammi</i> - 2 parts <i>Amalaki</i> – <i>Emblica officinalis</i> - 2 part <i>Balantshepa</i> - <i>Anethum sowa</i> - 2 parts <i>Badishep</i> - <i>Foeniculum vulgare</i> - 2 parts <i>Shunthi</i> – <i>Zingiber officinale</i> - 1 part <i>Chitraka</i> – <i>Plumbago zeylanica</i> - 1 part	1.5 gm

Table 5: Mineral compound administered

<i>Rassindur</i>	Sublimed red sulfide of mercury	125 mg
<i>Kamdudha Choorna</i>	A powdered mixture contained the following herbs with quantity- <i>Shuddha Gairik</i> - Red Ochre 1 part <i>Shankh Jeerak</i> - Indian tale [minerals containing Magnesium]- 2 parts	1.5 gm

Table 6: Herbo mineral compounds administered

Tb. Shankhavati (250 mg each tablet)	2-2 tablets Before Lunch and Dinner with water
Tb. Kutajghan vati (500 mg each tablet)	1-1tablet Before lunch and dinner with water.

Table 7: Treatment plan during the follow-up period

Sr. no	Observation	Treatment given	Justification of changes in treatment
2 nd follow up	<i>Nadi – Vatpitta</i> <i>Kshudha – Mandya</i> <i>Jivha- Sam</i> <i>Mal- 20 veg/Day,</i> <i>Mal Swarup- Picchilya, Drav, Puystrav</i> <i>Mutra- 5-6 veg/day</i> <i>Nidra- Khandit</i> <i>Koshta- Mrudu</i> <i>Dehbhar – 44 kg</i>	The preliminary treatment was continued for a second follow-up, along with that combination of <i>Vidangadi Choorna</i> and <i>Shankha Bhasma</i> (250 mg) was added with warm water before lunch and dinner. The mixture of herbal drug combinations was administered Twice a day, i.e., morning and evening, with ghee for seven days.	The patient symptoms indicated <i>Agni- Mandya</i> . As there was a need for <i>Agni Deepana</i> and <i>Grahi Karma</i> , <i>Vidangadi Choorna</i> and <i>Shankha Bhasma</i> were administered.
3 rd follow up	<i>Nadi- Vatpitta</i> <i>Kshudha- Mandya</i> <i>Jivha- Sam</i> <i>Mal – 20-15veg/day,</i> <i>Mal Swarup- Picchilya, drav, Puystrav</i> <i>Mutra- 4-6 veg/day</i> <i>Nidra- Sometimes Khandit</i> <i>Kostha- Mrudu</i>	The same treatment as administered in the 2 nd follow up was continued.	
4 th follow up	<i>Nadi- Vatpitta</i> <i>Kshudha- Mandya</i> <i>Jivha- Sam</i> <i>Mal – 20 veg/day,</i> <i>Mal Swarup Picchilya, drav, Puystrav</i> <i>Mutra- 4-6 veg/day</i> <i>Nidra- Khandit</i> <i>Kostha- Mrudu</i>	The same Treatment was continued	
5 th follow up	<i>Nadi- Vatpitta</i> <i>Kshudha pravartan</i> <i>Jivha- Sam</i> <i>Mal – 20-15veg/day,</i> <i>Mal Swarup Picchilya, drav, Puystrav</i> <i>Mutra- 4-6 veg/day</i> <i>Nidra-sometimes Khandit</i> <i>Kostha- Mrudu</i>	The same Treatment was continued	
6 th follow up	<i>Jwar Upsham,</i> <i>Kshudha Pravartan</i> <i>Mal vega 10veg/day</i> <i>Mal Swarupa- Puystrava decreased</i> <i>Nadi- Vatapitta</i> <i>Hb %-12.4 gm%</i>	The same Treatment was continued	
Follow up after three months	<i>Nadi- Pitta Vata</i> <i>Mal veg- 8-9/ day</i> <i>Mal Swarupa- Significantly decreased</i> <i>Jwar- Subsided</i> <i>Daurbalya decreases</i>	Along with previous treatment, <i>Panchamrut Parpati +Vidangadi+ Shankha Bhasma</i> 250mg/day (also given before lunch and dinner with <i>Anupana</i> of warm water	<i>Panchamrut parpati</i> was administered to achieve <i>Grahi balya</i> <i>Grahi, Agni deepan</i> <i>Mano bal vardhan</i> The effect was found to help manage psycho-somatic factors as well.
Follow up after one year	<i>Mala vega 6-7/ day</i> <i>Mala Swarup- Samyak Sometimes Picchil</i> <i>Nadi-Pitta Vata</i> <i>Kshudha-increased</i> <i>Nidra- Samyak,</i> <i>Daurbalya–Decreased</i> <i>Adhman- Decreased</i>	Along with previous treatment Tb. <i>Suvarnamalini Vasant</i> 125 mg. 1 tablet was administered Daily in Morning with water.	<i>Suvarnamalini Vasant</i> was added as a part of the treatment protocol for <i>Dhatukshayjanya Daurbalya</i> and for achieving <i>Rasayana</i> effect.
Follow up after two years	<i>Mal veg 3-4/ day</i> <i>Mal swarup Samyak</i> <i>Nadi- Pitta Vata</i> <i>Kshudha-Increased</i> <i>Nidra- Samyak</i> <i>Daurbalya –Decreased,</i> <i>Dehbhar Vriddhi</i>	<i>Kutaj+Darvi+Bilwa+ Vidangadi Choorna+Pachaka Choorna+ Kamdudha.</i> A mixture of the above-mentioned herbal drugs was given in 3gms per day. The combination was administered to the patient with half teaspoon of ghee – Thrice a day, i.e., Morning-Afternoon- Evening, 1 tablet <i>Shankhavati</i> (250 mg each tab) 2-2 tablets Before Lunch and Dinner with water, 2 tablets <i>Kutajghan vati</i> (500 mg each tablet) 1-1 tablet Before lunch and dinner with water.	

Table 8: Rasapanchaka of Herbal Herbo-mineral Combinations

Name of herb	Rasa	Veerya	Vipaka	Guna
Kutaja	Kashaya	Sheeta	Sheeta	Ruksha, Laghu
Bilwa	Kashaya, Tikta	Ushna	Katu	Ruksha, Laghu
Darvi	Tikta	Ushna	Katu	Ruksha, Laghu
Vidangadi yoga	Katu, Lavana, Tikta	Ushna	Katu	Ruksha, Laghu, Ushna
Pachak yoga	Lavana, Katu, Tikta	Ushna	Madhura	Laghu, Teekshna, Ushna
Kamadudha yoga	Kashay, Katu	Sheeta	Katu	Ruksha, Parthiva
Shankhabhasma	Kashay, Madhura	Sheeta	Katu	Ruksha, Laghu

Preliminary treatment plan

The preliminary treatment plan included the herbal drug, mineral compound and Herbo-mineral drug combinations. (Table 4)

A mixture of the herbal drugs was given 3 gm per day. In this combination of herbs, *Kutaj* and *Bilwa* constitute 750mg each, and all others are in an equal quantity of 1.5 gm each. The combination was administered to the patient with half a teaspoon of ghee – Thrice a day, i.e., Morning-Afternoon- Evening for seven days. (Table 5 & 6) This was also administered with *Anupana* as Ghee Thrice a day for seven days along with the herbal drug combination.

This initial treatment was administered during the first follow up of 7 days. In due course of treatment, a few drugs and compounds were added to the treatment protocol depending upon the symptomatology. (Table 7)

RESULTS AND DISCUSSION

Since the study involves human subjects, the study is carried out as per the international conference of Harmonization-Good Clinical Practices Guidelines (ICH-GCP) or as per the Declaration of Helsinki guidelines.

In this Case study, Etiological factors play an essential role to understand the prognosis and disease Manifestation. The excessive consumption of *Vidahi Ahar*, *Katu Rasa* Seven, *Vishmashan*, *Mansahar*, *Ratrojagaran*, and *Atichinta* are responsible for the vitiation of *Tridosha*. This vitiated *Dosha* causes *Agnimandya* and *Agnidushti*, ultimately leading to *Grahani Dushti* (*Avayav Dushti*). Because *Grahani Dushti* food is not adequately digested, and it leads to the causation of *Aam*. This *Aam* causes *Dravam* or *Badham Malpravartan*, i.e., Inconsistent stools and *Aam Ahar Ras* (Undigested Food). This *Aam Aahara Rasa* further leads into Vitiation of *Rasa Dhatu* and further *Dhatu Dushti*, ultimately resulting in *Ojakshay* (Decrease in the component of Oja in the body). Due to this, *Ojakshay Daurbalya* occurs. Persistence of this *Ojadushti* (Vitiation of the element of Oja in the body) along with *Dhatukshay* leads to *Dehabharshay* (Weight loss), which is commonly observed as the reason behind weight loss in a patient with *Grahani Vyadhi*. Hence the mentioned complaints were kept for a long time in the patient study.

Ayurveda has mentioned a concept of *Anukta Vyadhi* (unnamed disorders); hence, those diseases that are not named as such in Ayurveda can be understood by applying fundamental concepts of diagnosis and treatment mentioned in Ayurveda Samhitas. While diagnosing the disease *Hetu*, *Dosh-Dushya* should be considered, Crohn's Disease can be co-related with *Grahani Roga*. Based on this pathogenesis following principles are followed to manage the patient condition effectively.

1. *Nidan Parivarjan*
2. *Vyadhi Chikitsa*
3. *Pathyapathya Palana*

Nidan Parivarjan: *Charaka* has emphasized that avoidance of etiological factors (*Nidan Parivarjan*) baseline of treatment will help to better the outcomes.⁶ Therefore, the patient is advised to avoid *Katu*, *Amla Rasa* and *Guna Yukta Ahariy Dravya*, especially green chilli, nonvegetarian diet and Spicy food. Counselling was also done for *Manas Hetus* like *Bhaya* (Fearfulness) and *Vishada* (Depression).

Chikitsa: As *Rugna* was *Durbala* (weak) and *Vyadhi* was *Chirkari* (Chronic), *Shaman Chikitsa* is given. The drug selection and treatment plan were decided to keep the *Agni* factor in mind. The treatment modality was planned to take into consideration the following factors-

- *Agni Deepana*
- *Aam Pachana*
- *Grahani Bala Vardhana*
- *Manas Bala Vardhana*
- *Grahi and Vatanuloman*
- *Bruhan*

A combination of herbal and herbo-mineral compounds such as *Kutaj Bilwa*, *Vidangadi*, *Pachak*, *Darvi*, *Kamadudha*, *Panchamrutparpati* to achieve the enlisted outcomes *Shankhabhasma* were used in the total quantity of 750 mg/dose Thrice a day with *Anupan of ghee*. The *Rasa Panchaka* of these herbs can be summarized in Table 8.⁷

Kutaj has *Tikta*, *Kashay Rasa*, *Sheetvirya*, *Katu Vipak* and *Deepan*, *Stambhana* properties; hence, it helps control the *Drava Mala Pravritta*. Randomized controlled trials have suggested a significant effect of *Holarrhena Antidiysentrica* in Chronic inflammatory bowel disorders like ulcerative colitis.⁸

Bilwa has *Kashay and Tikta rasa*, *Laghu and Ruksha Guna*, *Ushna Veerya*, *Katu Vipaka*. *Bilwa* has *Deepan Pachan*, *Grahi*, *Vatakaphahara* properties; hence it is used as *Grahani Balya*. The aqueous extract of *Aegle Marmelos* was effective in inflammatory bowel disorders due to its anti-inflammatory, antioxidant, and mast cell stabilizing effects.⁹

Darvi is *Deepana Pachana Dravya* possessing *Grahi* properties. Hence it helps control the *Drava Mala Pravritti* and reduces *Ama*. Multiple studies have revealed that berberine, an active component of *Darvi*, has potent anti-inflammatory activity, capable of reducing the levels of pro-inflammatory cytokines.¹⁰

Vidangadi is also the combination of herbs that are predominant in the property of *Agni Deepana*. It is used as *Agni Vardhan* and *Anulomana* Drug. It results in improvement of Appetite. *Vidanga*, the main content of *Vidangadi Choorna*, has proven anthelmintic properties and has colon protective effects.¹¹ *Yavani*, the second content of *Vidangadi Choorna*,

possesses carminative, antispasmodic properties it is a digestive stimulant with nematocidal and antimicrobial activities. Seed extracts of *A. graveolens* L. have significant mucosal protective, antisecretory and anti-ulcer activities against induced stomach lesions in mice.¹² Baking Soda also forms an important part of *Vidangadi Choorna*, and research suggested that Oral Sodium bicarbonate NaHCO_3 showed a splenic cholinergic anti-inflammatory pathway.¹³

Kamdudha is *Parthiva and Pittashamana Dravya* which is also useful for absorption of *Drava Guna* of *Pitta* and *Drava Mala*. Hence it can help in reducing associated *Daha* like symptoms. Clinical trials containing the *Gairika* have proved effective in *Amlapitta* disorders. *Amlapitta* also affects the *Annavaha Strotasa*, especially *Amashaya* and *Grahani*.

Pachak Choorna has *Aampachan* properties. All the *Dravya* in *Pachaka Choorna* is of *Lavana*, *Katu Rasa Pradhana Dravya* and help reduce *Ama*, *Vatanuloma* and *Agnideepana*. It contains *Saindhava* or Rock salt, an appetizer and regulates the flow of digestive juices. *Samudra Lavana*, or common salt, consists of Sodium chloride, which provides essential electrolytes maintaining the stability of the cellular environment. Both helps to keep the gut healthy and have a carminative effect. Along with *Vidanga* and *Yavani*, *Pachaka Choorna* also contains powder of *Amalaki* or Indian gooseberry showed significant anti-inflammatory activity hence is beneficial in acute and chronic inflammatory conditions.¹⁴ Also being a rich source of Vitamin C, minerals, amino acids, tannins, flavonoids, it has immense therapeutic application. *Mishreya* or *Badishep*, known as *Foeniculum vulgare*, markedly reduces the inflammatory markers and protects intestinal mucosa integrity.¹⁵ *Shunthi* is a drug known for its *Grahi*, *Amapachana* and *Deepana* properties. In-vitro studies on *Shunthi* have proved its anti-inflammatory, antioxidant, and anti-ulcerative properties. According to recent studies, ginger nanoparticles have shown targeted relief in Inflammatory bowel disorders.¹⁶ *Chitraka* is helpful in *Deepana* – *Pachana* and acts on the *Annavaha Strotasa* by managing *Shoola* and *Shotha*. In vitro analysis of *Chitraka Choorna*, i.e., *Plumbago zeylinica* in ulcerative colitis, depicted significant suppression of symptoms along with anti-inflammatory and colon size restorative properties.¹⁷

Rasasindur is *kaphaghna* and useful in *Dhatushay*.¹⁸ It is a mineral compound prepared from *Parada* (Mercury), and *Gandhaka* (Sulphur) has potent immunomodulatory activity.

Panchamrut parpati is the mineral preparation consisting of – *Parad* (Mercury), *Loha bhasma* (Iron oxide), *Abhrak bhasma* (Mica), *Tamra Bhasma* (Calcined copper). One equal part of Each of the above components and *Gandhak* (Sulphur) in twice the quantity. *Panchamrut Parpati* also plays a vital role as it helps correct the *Agnimandya* has *Grahani Balya* and *Kaphaghna*. It has *Deepan*, *pachan*, *dravshoshan* properties. *Parpati kalpa* itself gives strength to the *Grahani* organ.

Shankhabhasma has *Deepan*, *Pachan grahi* properties, while *Shankh Vati* is excellent *deepana*, *pachana*, *shoolnashak* and *vatanuloman*, which helps in managing *udarshoo* (Stomachache) and *Adhman* (Flatulence) associated with the *Grahani* like disorder.

Kutaj ghan Vati plays a vital role by decreasing the frequency of *Dravmalpravartana*. It stimulates the *Agni* and helps as *Grahani Balya*. *Kutaja* having *Stambhana* property helps control the watery and loose stools. It relieves inflammations and excessive secretions.

After achieving *Agni Dipan*, *Aampachan* and *Vatanuloman*, *Bruhan Chikista* is started to restore the *Dhatukshaya*. For this tablet *Suwarnmalini Vasant Kalpa* is used in *Rasayan Kala*, i.e., in the morning with an empty stomach. It has *Sushma Strotogami*, *Dhatavagni vardhan* and *Dhatu Bruhan* properties. Due to its *Bruhana* property, *Suwarnmalini Vasant Rasa* is useful in *Dehabharshay* and *daurbalya*.

It was observed that after six months, All Symptoms gradually decreased, *Mal vega*, i.e., frequency of stools, decreased from 20 per day to 3-4veg per day, *Mal Swarupa*, i.e., consistency of stools, was observed initially as *Picchila* and *Puystrav* to well-formed. Complaint of disturbed sleep was also corrected *Samyak Nidra* was achieved in due course.

Mineral and Herbo mineral compounds were discontinued after about six months to 1 year to avoid the long-term use of Mineral compounds.

The same line of treatment was followed for two years in the subsequent follow-ups. *Acharya Vagbhat* has mentioned that if *Vaidya* (Physician) observes there is even a little bit of *Upashaya* in the patient's condition, there is no need to change the treatment modality. That is the reason why the same line of treatment is maintained. The patient underwent relief during every follow-up.¹⁹

Due to the combination of treatment modalities, the increase in weight or *Dehabhara Vriddhi* was observed from 44 kg to 50 kg for two years. An increase in 2 kg was observed first, followed by a 4 kg rise in weight by the end of the 2nd year. As the patient was unable to walk for even 5 minutes due to *Daurbalya*, the Decrease in weakness led to improvement in walking capacity up to 20 minutes.

Pathyapathya

As *Grahani Vyadhi*, according to Ayurveda or even Inflammatory bowel disease, is the result of faulty diet and lifestyle, there is the significant role of *Pathyapathya* and drug intervention for effective drug intervention management. The patient has been advised to consume *Bhakari*, i.e., *Rotika* / Flatbread up of *Jowar* or *Bajra* like cereals cooked on a hot pan and *Mudga* (Green gram) in the form of *Dal* exclusively for the first three months. The patient was gradually shifted to a regular diet comprised of *Pathyakara* regimen like *Mudga*, *Dadima*, *Navnit*, *Lajamand* etc.

CONCLUSION

According to Ayurveda, there is a correlation between the signs and symptoms of Crohn's Disease and *Grahani Roga*. Ayurvedic treatment in the form of Herbal, Herbo-mineral and Mineral compounds having a potential role in the management of *Grahani Roga* can be helpful in the effective management of Crohn's Disease. *Nidan Parivarjana*, *Pathya- Apathya* also play a vital role in the management of *Grahani Roga*.

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