



AYURVEDIC MANAGEMENT OF CIRRHOSIS OF LIVER: A CASE REPORT

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ABSTRACT:

Cirrhosis of liver is a condition in which the liver does not function properly due to long-term defect. This defect is characterized by the replacement of normal liver tissue by scar tissue. Typically, the disease develops slowly over months or years. Early on, there are often no symptoms. As the disease worsens, a person may become weak, tired, have swelling in the lower legs, itchy, develop yellow skin or develop spider-like blood vessels on the skin, have fluid buildup in the abdomen. Cirrhosis is most commonly caused by hepatitis B and hepatitis C virus, alcohol and non-alcoholic fatty liver disease. Non-alcoholic fatty liver disease has a number of causes, including being jaundice, overweight or obesity, high blood sugar, high levels of fat particularly triglycerides, in the blood. A number of less common causes of cirrhosis include autoimmune hepatitis (inflammation and scarring of the bile ducts), primary biliary cholangitis certain medications, and gallstones. Diagnosis is based on blood testing, medical imaging (Radiology), and biopsy. In Ayurveda, cirrhosis of liver is a disease of *raktavaha* and *udakavahasrotas*. A 48yrs old female patient with a prior diagnosis of Cirrhosis of liver was admitted in P.D. Patel Ayurveda Hospital, Nadiad. She was treated with *mild virechana* of *katukichurna*, daily along with oral medicaments including *Punarnavādikvātha*, *vardhmanpippali*, *Bhūmyāmalakīcūrṇa*, *bhrungrajchurna*, *sarpunkhchurna*, *shwetparpati*. Laboratory investigations (i.e. SGPT, SGOT, Bilirubin) were also decreased. This case report is presented here to share the encouraging results of Ayurvedic treatment in this particular patient of Cirrhosis of liver.

Key words –Cirrhosis of liver, *udararoga*, Ayurvedic management.

INTRODUCTION:

Cirrhosis of liver is a condition in which the liver does not function properly due to long-term defect. This defect is characterized by the replacement of normal liver tissue by scar tissue. Typically, the disease develops slowly over months or years. Early on, there are often no symptoms. As the disease worsens, a person may become weak, tired, have swelling in the lower legs, itchy, develop yellow skin or develop spider-like blood vessels on the skin, have fluid buildup in the abdomen. Cirrhosis is most commonly caused by hepatitis B and hepatitis C virus, alcohol and non-alcoholic fatty liver disease. Non-alcoholic fatty liver disease has a number of causes, including being jaundice, overweight or obesity, high blood sugar, high levels of fat particularly triglycerides, in the blood. A number of less common causes of cirrhosis include autoimmune hepatitis (inflammation and scarring of the bile ducts), primary biliary cholangitis certain medications, and gallstones. Diagnosis is based on blood testing, medical imaging (Radiology), and biopsy.^[1] In Ayurveda, cirrhosis of liver is a disease of *udakavahasrotas*. The signs and symptoms of Cirrhosis suggest aggravation mainly of *vāta* and *kapha* along with vitiation of multiple *dūṣya* (i.e. initially *rasa*, *rakta* and *udaka*).

Multiple *srotas* (mainly *rasavaha*, *udakavaha*, and *raktavaha*) involved in cirrhosis of liver.

CASE REPORT

Patient's history of present illness

According to patient she was physically fit before 6 months. She was diagnosed to have jaundice, in routine check-up before 6 months. She was on allopathic management for it and she came here before not taken any medicine for it. After 1 month she has complain of fever, pedaloedema, yellowish discoloration in both eyes and dryness of mouth. Hence, she went to physician, her blood reports shows raised SGPT, SGOT and Bilirubin level, where she has diagnosed to have cirrhosis of liver. Then she was on oral medicaments of i.e. liver tonic, multi-vitamins and laxatives. Gradually her symptoms being worst and she has other complains like weakness, loss of appetite. So she was advised liver transplantation but she didn't and came to P D Patel Ayurveda hospital, Nadiad on 25th December 2017 with the complaints of lower limb oedema, distension of abdomen, yellowish discoloration in eyes, weakness and dryness of mouth. There was no history of smoking and alcoholism. She was hospitalized and treated with Ayurvedic medicines for 1-month period as IPD and then on OPD bases.

Clinical findings-

- She had an anxious look.

- She was conscious with intact mental status.
- Urine output was 1000 ml/24 hours.
- BP 130/80 mm of hg.
- Pulse 70/min.
- Respiration rate 19/min and regular.

Ultrasonography of abdomen (20/11/17) – Liver cirrhosis with mild to moderate abdomen-pelvis ascites. Mild hepatomegaly with diffuse parenchymal changes. Moderate splenomegaly. Fundus of mild portal HTN.

Bio-Chemistry

Diagnostic Findings-

Table 1: Bio-chemistry tests Before Ayurvedic treatment

SGPT	61 IU/l
SGOT	104 IU/l
HB%	8.7gm%
Total Bilirubin	8.8mg%
Alkaline phosphatase	486 IU/l
Urine Specific Gravity	1.020
Urine Albumin	trace

Ayurvedic treatment

Following treatment was given for 1-month period.

PippaliChurna^[2] will be administered orally in an increasing and tapering dose-pattern twice daily with milk as follows-

Table 2: Vardhman Pippali Karma^[3]

Day	1	2	3	4	5	6	7	8	9	10	11	12	13
Dose [in grams] of <i>PippaliChurna</i> twice daily	1	2	3	4	5	5	5	5	5	4	3	2	1

On the morning of the 14th day, mild purgation will be performed by oral administration of *katukichurna*^[4] with warm milk in varying

doses from 3-6 g according to the patients' individual sensitivity to purgatives (koṣṭha).

- *Bhrungrajchurna* 3gm twice in a day after milk.

- *Bhumiamalkicurna* 3 gm twice in a day after milk.
- *Sarpunkhchurna* 3gm twice in a day after milk.
- *Shwetparpati* 500mg twice in a day after milk.
- *Punarnavadikvath* 40ml two times in a day before milk.

In the IPD phase, all the patients will be kept only on milk diet according to their digestion capacity varying from 2 to 3.5 liters per day. No other food or drinks will be allowed. Patients will be allowed to take little rice, *mung* beans and *Masur* beans. Also non-sour fruits like papaya, sweet apples etc. were permitted.

Diet:

Table 3: Outcomes

Date	Hb(gm %)	SGPT (IU/L)	SGOT(IU/L)	Total Protein (gm %)	Total Bilirubin	ALKPO ₄ (IU/L)	Serum Albumin (gm %)
25/12/17	8.7	61.0	104.0	6.8	8.8	486.0	2.0
09/01/18	8.9	31.0	51.0	7.4	3.6	378.0	2.4
17/01/18	8.9	33.0	44.0	7.8	2.6	307.0	2.6
25/01/18	9.0	32	38	7.2	1.7	285.0	3.3
08/02/18	8.7	27	30	7.9	1.5	187.0	3.8

- During one month of time period pedal edema decreased and no other clinical symptoms.
- SGPT and SGOT level marked decreased so she continued Ayurvedic medicine at OPD level after discharged.
- Also other bio chemistry level maintained.
- After discharged patient was instructed to come for follow up after four weeks.

DISCUSSION:

Cirrhosis is a complication of liver disease which involves loss of liver cells and

irreversible scarring of the liver. According to Ayurveda, Cirrhosis of liver is a disease of *udakavahasrotas*. Though, all the three *doṣas* as well as all the *duṣyas* (mainly *Rasa, rakta, udaka*) are involved in the disease. *Kapha* is responsible for *Agnimandhya*. *Vāta* is responsible for degeneration of the structure of the liver cells. According to the Ayurvedic principles of management of the disease, cells damage can be prevented and repaired by *rasayana* drugs because they have the capability to improve qualities of cells and

hence increased resistance of the cells. *Bhumiamlkichurna*^[5] is *rasayana* for *mutravahasrotas* and *udakavahasrotas*. The main ingredient of *Punarnavadikwath*^[6,7,8] itself has a *sothahara* as well as *mutral* action. Thus, it is helpful to increase the urine output and remove oedema. *Bhrungrajchurna*^[9,10,11] has *rasayana* properties especially beneficial in *udakavahasrotas* and the whole plant showed effects on liver cell regeneration. *Sarpunkhchurna*^[12] is specifically considered for the treatment of inflammation of spleen and liver. *Shwetparpati*^[13,14] has diuretic property. During one month of treatment period she got remarkable improvement in liver function test as well as in signs and symptoms.

CONCLUSION:

The patient shows encouraging results during the management of cirrhosis of liver with given Ayurvedic treatment. The improvement obtained may be attributed to the disease modifying effect of given Ayurvedic treatment by means of its *Agnivardhaka*, *Rasayana* and *Vata-Kapha Shamaka* effect. The treatment protocol improves overall general condition of the patient. This treatment approach is safe, effective and economic alternative. And in a difficult condition where conventional treatments are beyond the financial capacities

of a common man of the country like India, this therapy can be hopeful and promising.

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