AYURVEDIC MANAGEMENT OF ULCERATIVE COLITIS – A CASE STUDY

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Abstract

Ulcerative colitis (UC) is an idiopathic, chronic inflammatory bowel disease involving the colon. The inflammation usually involves the rectum (proctitis), but may spread to sigmoid colon (procto-sigmoiditis) or whole colon (pancolitis). It is manifested as rectal bleeding, mucus discharge, frequent stool, weight loss, anemia, fever, malaise, abdominal pain, bloody diarrhoea etc. In allopathic medical science, no significant treatment is there for UC. Corticosteroid, anti-diarrhoeal agents etc. are used which results in other complications too. A chronic patient of ulcerative colitis came to consult in Ayurveda O.P.D. to take better management for him. The features like blood in stool, frequent stool and general debility was treated with concept of Rakt-atisara in Ayurveda. Rakta-stambhaka, pitta shamaka chikitsa and rakta prasadana chikitsa was adopted as line of treatment, and the patient responded well with much improvement in his general condition.

Key words: Ulcerative colitis; Rakta-atisara; Rakta-stambhaka; Rakta prasadana chikitsa.

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INTRODUCTION

Ulcerative colitis is an ulcero-inflammatory disease affecting the colon but limited to mucosa and submucosa. Its incidence is 7 per 1,00,000 population and with a peak incidence between age 20 to 25 years. It begins in rectum and can extend proximally to involve whole colon. The presentation is usually insidious, with cramps, tenesmus, and colicky lower abdominal pain that is relieved by defecation [1]. Numbers of stool are 30-40 per day, consisting of small amount of watery stool, mucus, blood and pus. Extreme dehydration, hypocalcemia, anaemia, hypoproteinaemia and marked weight loss are the features of acute fulminating form of UC. [2] In some cases it is also associated with systemic illness as sacroilitis, ankylosing spondylitis, uveitis, hepatic involvement and migratory polyarthritis etc. The diagnosis is confirmed by barium enema, endoscopy and biopsy. The medical treatment includes antidiarrhoal (lomotil), antibiotics (sulphasalazine), corticosteroids, multivitamins, intravenous fluid to overcome dehydration and electrolyte imbalance. Sometimes blood transfusion is required to correct anemia. [3]

CASE REPORT

A male patient of age 24 years, having the complaint of 20-25 bloody diarrhoea per day, pain abdomen and severe weakness came to Rishikul Govt. P.G. Ayurveda college & Hospital, Haridwar [OPD Registration number: KC-255/20459] to take a better management. He was very lean, thin, lethargic, anemic and weak. According to him he was not able to do his daily routine works due to weakness. The patient could not take the normal diet due to aggravation of the symptoms. In allopathic hospital he was diagnosed as a patient of Ulcerative colitis and by the treatment provided he felt no improvement in his general condition.

On examination

G.C.- Very poor
Pulse-100/min
B.P.- 90/70 mm hg
Palor– p+++ 
Icterus- I°
No Lymphadenopathy, no cyanosis, no clubbing
Abdomen- Tender and sunken

Rectal examination – No perianal inflammation in the form of fissure, fistula or pile mass is noticed.
Examination of joints, eye, skin - WNL, To exclude complication like ankylosing spondylitis etc.
The patient was diagnosed as a case of UC with the help of biopsy.

So the patient was planned for Ayurvedic management to him. The symptoms of ulcerative colitis can be co-related with Raktaatisara (bloody diarrhoea) as the frequent stool and blood in stool are the main culprits deteriorating the patient’s general health. Therefore the first line of treatment rakta-stambhana (blood coagulatory) and purisha-sangrahana (anti-diarrhoeal) was adopted. Purish-sangraha can be done by Grahi medicine or Stambhana medicine. [4] The grahi medicines are katu, ushna, deepana, pachana and drava shoshaka as shunthi, jeeraka and jatiphala. [5] While the stambhana dravya are sheeta, ruksha, kasaya and laghu paki and does shoshan e.g. kutaja, syonaka etc. [6] The stambhana medicines are used where there is no involvement of agni, only to stop the diarrhoea, while grahi medicines are used where the agni is manda, so they increase the agni, digest the ama and control the diarrhoea. Therefore here stambhana chikitsa is advantageous because agni vardhana (bio-fire stimulator) is not the goal. As pitta vardhak medicines used to increase the agni may deteriorate the bloody diarrhoea.
The treatment of rakta atisara is rakta stambhana chikitsa by use of ruksha, sheeta and kasaya medicine. So the patient is kept on line of treatment of Raktatritisara. Thus following prescription was provided to patient

1. Gangadhara churna 20 g
   Bilva churna 20 g
   Mukta pisti 4 g
   Karpura rasa 1 g
   Kahrava pisti 10 g
   Swarna basant malati 1 g
   Godanti bhashma 10 g
   Amrita satva 20 g

Made 60 doses of above yoga and advised to take 1 dose twice a day with water before meal.

2. Kutaja ghanavati (250 mg) – 2 tablets twice a day with lukewarm water after meal. Mahanshipkha vati (250 mg) – 2 tablets twice a day with lukewarm water after meal.

The patient was advised to take the medicine for 2 months, and then review after 2 months. He has also explained with do and don’ts of ahara-vihara (food habit and regimen) as avoidance of amla (sour), tikshna (pungent), spicy, pitta-vardhaka ahara, adhyasana (repeated eating before the prior digestion of food), ajirasana, diva-swapna (day time sleep), ratri-jagrana (Night awakening), sleeping after meal, over exertion, heavy meals, smoking, alcohol, non-vegetarian diet etc.

RESULTS AND OBSERVATION

After two months there was much improvement in clinical symptoms and signs of the patient. It is shown in the Table 1.

DISCUSSION

Probable samprapti (pathogenesis) and chikitsa sutra (line of treatment)

When the patient of pittaja atisara does ushna ahara-vihara injudiciously, then vitiated pitta further vitiate the rakta dhatu and inturns results in blood in stool, guda-daha (burning in anal region), frequent diarrhoea etc. The treatment is shaman chikitsa (palliative treatment) where Stambhana dravyas (binding nature of drugs) are drug of choice. In some stage, if the numbers of bloody stools are less and with spasm, then vridhha vayu is controlled by Piccha basti (enema).

Mode of action of treatment given

The treatment of Rakta-atisara in Ayurveda is madhura and sheeta chikitsa (sweet and cold potency drugs), e.g. Chandana (Santalum album), Dhakali (Woodfordia fruticosa), Neelakamala (Nymphoea stellata), goat milk with honey and sugar etc. are used in different way for oral use and for local application. The concept behind that is stambhana of excessive excretion of essential bio humors. Here the bilva churna (powder of Aegle marmelos unripe fruits) and gangadhara churna are potent stambhaka due to its ingredients like Bilva (Aegle marmelos), Musta (Cyprus rotundus), Lodhra (Symplocos racimosa), Dhakali pushpa (Woodfordia fruticosa), Mochras (Salmalia malabarica) and Kutaja (Holarrhena antidisenterica). Karpura rasa contains Ahiphena (Papaver somniferum), Musta (Cyprus rotundus) and Jayphala (Myristica fragrans) which are strong stambhaka. Other medicines like Kahrava pisti / trinakamantani pisti, mukta pisti, etc are too cold in nature, so they pacify the vikrit pitta (vitiated pitta) and also soothes the rakta dusti. Swarnabasamantamalati bhasma enhances the immunity and strength, due to its ingredients like gold which is potent balya (promotes strength), medhya (memory booster), brimhana (nourishes the body), ojovardhaka (promotes ojas) and tridoshaghna (pacifies all three doshas).

Kutaja ghanavati and maha shankh vati helps to control diarrhoea and pain in abdomen respectively.
Table 1: Symptoms and signs before and after treatment

<table>
<thead>
<tr>
<th>Signs &amp; Symptoms</th>
<th>Before Treatment</th>
<th>After Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency of stool</td>
<td>15-20 times per day</td>
<td>3-4 times per day</td>
</tr>
<tr>
<td>Blood in stool</td>
<td>With each defecation</td>
<td>Absent</td>
</tr>
<tr>
<td>Pain abdomen &amp; discomfort</td>
<td>Whole day esp. before defecation</td>
<td>Much relieved</td>
</tr>
<tr>
<td>Pallor</td>
<td>Hb- 4.5 %</td>
<td>Hb 8.9 %</td>
</tr>
<tr>
<td>Body strength</td>
<td>Very weak</td>
<td>Improved</td>
</tr>
<tr>
<td>Weight loss</td>
<td>Severe</td>
<td>Gained 2 kg of weight</td>
</tr>
<tr>
<td>Appetite</td>
<td>Poor</td>
<td>Improved</td>
</tr>
<tr>
<td>Mental status</td>
<td>Very depressive and dull</td>
<td>Sound and relaxed</td>
</tr>
</tbody>
</table>

Here the patient is not suitable for piccha basti, due to increased frequency of stool and excessive blood loss, so only stambhana chikitsa is opted for patient. The sheeta and stambhaka medicines stop the bleeding due to their astringent effect. These drugs not only stop blood in stool but also heal the inflamed mucosa by their vrana ropana (wound healing) properties. If the pathya ahar-vaivaha is followed, the healed mucosa will not be vulnerable for irritation again and the patient can get relief permanently.

CONCLUSION

The ulcerative colitis is a chronic relapsing and remitting disorder of colon marked by bloody mucoid diarrhoea with cramps. Clinically it can be correlated with Raktatisara. The sheeta and stambhana chikitsa is the line of treatment for it. By following it, the symptoms can be controlled; the anemia and weakness can be recovered. Besides it, there is much importance of suitable diet regimen, as a little mistake at this part can irritate the colon mucosa and lead to bleeding per rectum.

Besides the oral administration of medicines, the local application of stambhaka dravya in the form of guda-pichu, guda prakshala, lepa (local application in form of keeping medicated cotton, medicated decoction shower or medicated pack at anal region) is also very effective for the management of it.

REFERENCES


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