

# EFFECT OF VIRECHANA KARMA WITH INDUKANTA GHRITA ON YAKRUT VIKARA (ALTERED LIVER FUNCTION) OF A CHRONIC ALCOHOLIC PATIENT- A Case Study

Dr. Sanjib Ku.Das<sup>1</sup>, Prof.(Dr.) Pramod Ku.Majhi<sup>2</sup>, Dr. Snigdha Rani Patra<sup>3</sup>, Dr. Milli Bisoi<sup>4</sup>, Prof.(Dr.)  
D.P.Dash<sup>5</sup>, Prof.(Dr.)P.K. Panda<sup>6</sup>

1. Asst.Prof. & Consultant, Dept. of Kayachikitsa, Sri Sri College of Ayurvedic Science and ResProfearch Hospital, Sri Sri University,
2. Prof. and HOD, Dept. of PTSR, Govt.Ayurveda College, Patna, Bihar
3. Asst.Prof. & Consultant, Dept. of Panchakarma, Sri Sri College of Ayurvedic Science and Research Hospital, Sri Sri University.
4. Medical officer, Dept. of Panchakarma, Sri Sri College of Ayurvedic Science and Research Hospital, Sri Sri University, Cuttack, Odisha.
5. Medical Superintendent, Sri Sri College of Ayurvedic Science and Research Hospital, Sri Sri University, Cuttack, Odisha,
6. Dean, Sri Sri College of Ayurvedic Science and Research Hospital, Sri Sri University, Cuttack, Odisha,

## Abstract

Intake of Alcohol causes psychological, behavioural and systemic crash like poor attention and memory, lack of concentration and coordination, capricious judgment, labile moods, unsuitable behaviour, Loss of appetite, General weakness, Inadequate Sleep and vomiting etc. This is as a whole called as Alcohol intoxication. A clinical study on 37 years male patient of having 14 years of history of intake of Alcohol thrice a week put his complaints of having loss of appetite, general weakness, inadequate sleep, mild constipation, vomiting was tested elevated liver profile (Total Billirubin, Direct Billirubin, SGOT, SGPT, Alkaline Phosphate) and selected to be given Agnitundi Vati for Deepan-Pachan and Indukanta Ghrita for Snehapana followed by Virechana Karma with Trivrit Leha and Triphala Kashaya in the IPD of Sri Sri Ayurveda Hospital, Sri Sri College of Ayurvedic Science and Research Hospital, Sri Sri University, Cuttack, Odisha

**Keywords:** Kamala, Virechan, Liver function test, Indukanta Ghrita, Trivrit Leha, Triphala Kashaya

## Introduction

A lot of changes in diet and regimen (lifestyle) are being observed now-a- days due to overloaded assignments which is the most important noticeable thing for the people to be affected by Stress, anxiety, depression and to counter these ailments they are addicted to Alcohol and its over consumption for a long term leads to Alcohol intoxication with psychological, behavioural and systemic crash like poor attention & memory, lack of concentration and coordination, capricious judgment, labile moods, unsuitable behaviour,

Loss of appetite, General weakness, Inadequate Sleep and vomiting etc. and finally damage of the Liver. Kamala (Jaundice) is the common presentation with the signs and symptoms of yellowish decolourisation of skin, eyes, urine and fatigue, anorexia and nausea respectively.<sup>1</sup> Acharya Charak has documented the implementation of Virechan Karma for the treatment of Kamala (“kamali tu virechane”).<sup>2</sup> As per the description in Charak Samhita, Kamala is due to Raktavaha Sroto Dushti. Yakrut (liver) and Pleeha (spleen) are the mula sthana of Raktavaha Srotas and Virechana as a principle of treatment is adopted for Raktavaha srotas Dushti.

**Aim:** To explore the role of Virechana Karma On Chronic Alcoholic

**Objective:**

- I. To evaluate and assess the effect of Virechanakarma on Chronic Alcoholic.
- II. To evaluate and assess the LFT of Chronic Alcoholic.

**Materials and Methods**

**I. Selection of the patient**

- I. A patient with the complaints of Loss of appetite since 2 months, general weakness since 2 months, inadequate Sleep since 2 months, occasional vomiting during morning time since 1 1/2 months, mild Constipation irregularly since 2 months and yellow discoloration of urine since 1 month was registered and admitted to IPD off Sri Sri College of Ayurvedic Science and Research Hospitals, Sri Sri University.
- II. **History of Present illness**

Patient was apparently well before 2 months. Gradually he developed loss of appetite, Occasional vomiting during morning time, General weakness, Inadequate Sleep, Mild Constipation and yellow discoloration of urine. Patient was not under medication. Patient came to Sri Sri Ayurveda Hospital, Sri Sri University, Cuttack, Odisha for better management.

**III. History of Past illness**

- a. T2DM
- b. HTN

**IV. Personal history**

- a. Chronic alcoholism

**On Examination(O/E)****CNS**

- Pt. is conscious & oriented
- No focal neural deficit

**CVS**

- **BP-** 140/80
- **Pulse-**72/min
- **S1S2-**Audible (No Murmur)

**RS**

- **B/L Lungs** – Clear
- **R.R.-** 18/min

**GI**

- **Abdo.-** Soft & Scaphoid
- **Liver & Spleen** – NP
- **Bowel-** Constipation
- **Jaundice-**Present
- **Anemia-**Absent

**URINARY**

- yellow discolouration of urine
- No frequency & urgency of micturition

Both subjective and objective criteria of assessment were taken for evaluation.

***I. Subjective Parameter***

- a. Loss of appetite
- b. General weakness
- c. Inadequate Sleep
- d. Occasional vomiting
- e. Mild Constipation

***II. Objective Parameter***

- a. Total Billirubin
- b. Direct Billirubin
- c. SGOT
- d. SGPT
- e. Alkaline Phosphate

***3. Selection of Drug***

Based on clinical features, pathological investigations, involved dosha, dushya and Srotos, **Indukanta Ghrita**<sup>3</sup> prepared by sriveda saattva was admistered which is having the ingredients viz,Putikaranja<sup>4</sup>, Devdaru<sup>5</sup>, Bilva<sup>6</sup>,Shalaparni<sup>7</sup>, Shyonaka<sup>8</sup>, Agnimantha<sup>9</sup>, Brihati<sup>10</sup>, Kantakari<sup>11</sup>, Patala<sup>12</sup>, Gokshura<sup>13</sup>, Prishnaparni<sup>14</sup>, Chavya, Pippali Fruit<sup>15</sup>, Piplamoola, Yavakshara, Ghrita, Kshira.

#### 4. *Posology*

a. Agnitundi Vati(250mg)

One tablet x BID x PC with LWW (Advised for 4 days)

b. Indukanta Ghrita

It was started from 30 ml and ended in 150 ml by daily increase in 30 ml.

c. *Trivrit Leha* (60gm)

d. Triphala Kashaya (500ml)

#### 5. *Assessment criteria*

The subjective and objective parameters were assessed based on severity of the condition and were graded 0-3 as per the assessment scale. The result of the research work was inferred based on statistical evaluation as per research statistical parameter.

#### 6. *Procedure adopted for research study*

##### Virechana Karma

##### i) Purva karma

###### A. Deepan-Pachan(16/04/2021- 19/04/2021)

Day 1- Agnitundi Vati(250mg)

Day 2- Agnitundi Vati(250mg)

Day 3- Agnitundi Vati(250mg)

Day 4- Agnitundi Vati(250mg)

One tablet x BID x PC with LWW (Advised for 4 days)

###### B. Sneha Pana (20/04/2021- 24/04/2021)

Day 1- Indukanta Ghrita (30 ml)

Day 2- Indukanta Ghrita (60 ml)

Day 3- Indukanta Ghrita (90 ml)

Day 4- Indukanta Ghrita (120 ml)

Day 5- Indukanta Ghrita (150 ml)

**C. Sarvanga Abhyanga & Sarvanga Baspa Sweda (25/04/2021- 27/04/2021)****Day 1-** Sarvanga Abhyanga – Ksheera Vala Taila

Sarvanga Baspa Sweda- Dasamoola Kwatha

**Day 2-** Sarvanga Abhyanga - Ksheera Vala Taila

Sarvanga Baspa Sweda- Dasamoola Kwatha

**Day 3-** Sarvanga Abhyanga - Ksheera Vala Taila

Sarvanga Baspa Sweda- Dasamoola Kwatha

**ii) Pradhan Karma (28/04/2021)****Virechana**a) *Trivrit Leha* (60gm)

b) Triphala Kashaya (500ml)

*Trivrit Leha*(60gm) was given at 7 Am in empty stomach with L.W.W. followed by Triphala Kashaya (50ml) in every half an hour until complete intake of Triphala Kashaya. After complete intake of Triphala Kashaya, L.W.W. (100ml) was taken until vega was ended.

Total number of Vega-19

**iii) Paschat Karma (28/04/2021 onwards)**

Samsarjana Krama

**7. Observation and Result**

Liver Function Test (LFT)	Before treatment(16/04/2021)	After treatment(29/04/2021)
Total Billirubin	2.6 mg/dl	0.8 mg/dl
Direct Billirubin	1.0 mg/dl	0.3 mg/dl
SGOT	106.00 IU/L	35 IU/L
SGPT	42.00 IU/L	27.00 IU/L
Alkaline Phosphate	66.0 µ/L	55.0 µ/L

Subjective parameters	Before treatment(16/04/2021)	After treatment(29/04/2021)
a) Loss of appetite	Present	Absent
b) General weakness	Present	Absent
c) Inadequate Sleep	Present	Absent
d) Occasional vomiting	Present	Absent
e) Mild Constipation	Present	Absent

## 8. Discussion

As the patient indulged to pitta aggravating diets (Katu- Amla-Lavana), pitta so aggravated burnt Rakta and Mansa and caused Yakrut Vikara (Altered Liver Function) and manifested discolouration of the body and the circumstance was very much favourable as the patient was of chronic alcoholic in which the whole samprapti was due to Raktavaha Sroto Dushti. Yakrut (liver) and Pleeha (spleen) are the mula sthana of Raktavaha Srotas and Virechana as a principle of treatment was adopted for Raktavaha srotas Dushti. The whole issue was resolved by targeting pitta by adopting Virechana therapy.

## 9. Conclusion

From the case study it was concluded that due to Excessive intake of Alcohol, Alkaline, Sour, Saline, Hot and mutually contradictory food, unwholesome food, pitta dosha was aggravated and burnt Rakta and Mansa and manifested discolouration of the body, Loss of appetite, general weakness, inadequate Sleep, occasional vomiting during morning time, mild Constipation irregularly, yellow discolouration of urine and altered liver function test (LFT). As Raktavaha Srotas was involved and Virechana was adopted as the principle of treatment, all the complaints of the patient during the time of hospital stay after therapy was resolved and liver function test became normal.

## 10. Reference

1. Davidson- principles and practice of medicine, edition 22, vol1 pg-481.
2. Vaidya Bhagwan Dash, Charak Samhita of Agnivesha, Vol-4, Chikitsa Sthan; Panduchikitsaadhya: Chapter 16, Sloka 40: Ed. 2<sup>nd</sup>: Sanskrit Series, Varanasi 2000; Page 93.
3. Sahashra Yoga, Ghrita prakarana
4. B.P.Ni by K.C. Chunekar, edition-1998, Page-352-353
5. D.Ni, Guduchyadi Varga
6. Vaidya Bhagwan Dash, Charak Samhita of Agnivesha, Vol-1, sutra Sthan; Chapter 25, Ed. 2<sup>nd</sup>: Sanskrit Series, Varanasi 2000;
7. Vaidya Bhagwan Dash, Charak Samhita of Agnivesha, Vol-1, sutra Sthan; Chapter 25, Ed. 2<sup>nd</sup>: Sanskrit Series, Varanasi 2000;
8. Prof. K.K. Thakra, Sushrut SAMhita, Vol-1, Sutra Sthana, Chapter-46 Sloka-300-302
9. Dr. Umapati Mishra, Dhanvantari Nighantu
10. Dr. Umapati Mishra, Dhanvantari Nighantu, guduchyadi varga 93-94
11. Vaidya Bhagwan Dash, Charak Samhita of Agnivesha, Vol-1, sutra Sthan; Chapter 4, sloka 9 Ed. 2<sup>nd</sup>: Sanskrit Series, Varanasi 2000;
12. Prof. K.K. Thakra, Sushrut SAMhita, Vol-1, Sutra Sthana, Chapter-11
13. B.P.Ni by K.C. Chunekar, edition-1998, Guduchyadi Varga
14. Prof. K.K. Thakra, Sushrut SAMhita, Vol-1, Sutra Sthana, Chapter-46