ROLE OF AYURVEDA DRUGS AND VIRECHANA IN THE MANAGEMENT OF KOSHTA SHAKHASHRITA KAMALA W.S.R. TO ALCOHOLIC HEPATITIS

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Abstract

Kamala is Pitta Pradhana Vyadhi and consequences of Pandu Roga or alcoholism can manifest independent type of Kamala termed as Koshtashakhashrita Kamala. It occurs due to the excessive consumption of Madya for a prolonged period of time. Symptoms manifested through Netra, Rakta, Mootra and Twak. The condition characterized with Daha, Dourbalya, Aruchi and Avipaka, etc. Snehana, Virechana with Ghrita & Mrudu Dravyas and uses of ayurveda drugs can offers beneficial effects in the management of such types of diseases. The habits of alcoholism increases day by day leading to the high incidences of liver diseases, considering this aspect present study was planned to summarize role of some ayurveda measures in the management of alcoholic liver disease.

Key-Words: Ayurveda, Liver Disease, Kamala, Virechana
Introduction

*Koshta Shakhashrita Kamala* can be correlated with hepatocellular jaundice which may occur due to the infection, alcohol intake and drug toxicity, etc. *Haridra Varna* of *Netra & Twacha, Rakta Peeta Varnayukta Mala & Mutra, Daha, Avipaka, Sadana* and *Aruchi*, etc. are common clinical features of *Kamala*. The pathological progression gets initiated when weak person indulges in *Paittika Ahara* and *Vihara* which further cause *Pitta* vitiation resulting *Daghata* of *Rakta Dhatu* and *Mamsa Dhatu* ultimately leads *Koshta shakashrita Kamala*. The major pathological component involved in disease depicted in Figure 1.

![Figure 1: Samprapti Ghataka of Koshtashakhashrita Kamala](image)

The prevalence of liver problems increases day by day due to the awful dietary habits and increase consumption of alcohol therefore present study was planned to evaluate the efficacy of Ayurveda formulations and *Shodhna Karma* in the management of Alcoholic hepatitis.

**OBJECTIVE**

- To evaluate the effect of *Virechana* in the management of *Koshta Shakashrita Kamala*.
- To evaluate combined effect of *Drakshadi kwatha, DPACK Vati* and *Virechana* in the management of *Koshta Shakashrita Kamala*.

**MATERIALS**

- *Drakshadi kashaya*.
- *DPACK (Daruharidra, Ashwaganda, Chitraka, Pippali, Kalmegha) Vati*.
- *Drakshadi Gritha* possesses *Kamalahara, Panduroghara* and *Jwaraghna* properties.
Virechana used to relieve cholestasis and for eliminating Malaroopi pitta.

Method
Subjects were selected from the OPD and IPD of Government Ayurveda Medical College and Hospital, Mysore and Government Hi-tech Panchakarma Hospital, Mysore.

SAMPLING
- Total 42 subjects completed study those were divided into two groups equally, 21 in each group. Subjects were selected irrespective of gender, socio-economic status and religion; possess symptoms of Kosta Shakashrita Kamala.
- Group A was served to DPACK Vati which was prepared from Daruharidra, Ashwaganda, Chitraka, Pippali and Kalmegha. Drakshadi kwatha also prescribed to subjects of Group A.
- Group B served with DPACK Vati, Drakshadi kwatha, Drakshadi gritha for Snehapana and Trivrut lehya for Virechana Karma.

METHOD OF PREPARATION
- DPACK Vati and Drakshadi Kwatha Churna were prepared from a GMP certified unit, Belgaum.
- Trivrut lehya obtained from Arya Vaidya Shala Ayurveda Pharmacy, Kottakkal, Kerala, India.
- Drakshadi ghrita was prepared from Murchita ghrita, Draksha kalka and Draksha kashaya. Draksha was pounded and was triturated to form Kalka, process of Ghrita murchana was also carried out to obtain Murchita ghrita which was taken in mouthed vessel. This mixture was placed over fire and specified quantity of Drakshadi kalka was added to it, finally Ghrita was filtered through a clean cloth.

INCLUSION CRITERIA
- Subjects of all gender, between the age group of 20-60 years.
- Cases presented with the symptoms of Koshta Shakhashrita Kamala vis-a-vis Alcoholic hepatitis were selected for study.
- Treated subjects included already diagnosed as Koshta Shakhashrita Kamala vis-a-vis alcoholic hepatitis, who had voluntarily discontinued the treatment were also included.
- Subjects possess history of alcohol consumption for a minimum period of 3 years was also included.

EXCLUSION CRITERIA
- Subjects with the complication of alcoholic liver disease such as ascites, hepatic encephalopathy, coagulopathy, variceal bleeding and cirrhotic changes.
Subjects with uncontrolled diabetes mellitus, uncontrolled hypertension or other uncontrolled systemic diseases were excluded from the study.

Pregnant and lactating women were also excluded from the study.

Subjects those were found unfit for Virechana were also excluded from the study.

ASSESSMENT CRITERIA

- Peeta Mutrata
- Peeta Netrata
- Agnimandya
- Hrullasa and Chardi
- Udara Shoola
- Jwara
- Atisara

Follow up Period:
Assessment was done as per following schedule:
- Pre test -0 day,
- Mid test-20th day,
- Post test-30th day.

STATISTICAL METHODS

The results were analyzed statistically using Paired sample ‘t’ test, ANOVA and Contingency coefficient test analysis using Service product for statistical solution (SPSS) for windows software.

INTERVENTIONS/DOsing

GROUP A:
- Drakshadi kwatha 50 ml in two equally divided doses along with water after meal.
- DPACK Vati 3 g. in three equally divided doses with water after meal for thirty days.

GROUP B:
- Drakshadi kwatha 50 ml in two equally divided doses after meal for initial twenty days.
- DPACK Vati 3 g. in three equally divided doses after meal with water for initial twenty days.
- Drakshadi ghrita as Shodhananga Snehapana was administered from the day of Nirama Lakshana in Arohana Krama, starting with Hrasiyasi Matra until Samyak Snigdha Lakshanams were observed, Snehapana was carried out for 3-4 days.
- Abhyanga followed by Ushna Jala Snana and Guru Pravarana for Swedana was done during Vishrampa Kala for three days.
Trivrut lehya with hot water was administered during morning time, in empty stomach. Dose was varied from 30 to 40 g. depending upon the Koshta of the subjects for Virechana purpose.

Samsarjana karma was advised according to Shuddhi prakara.

Result & Discussion

Study revealed statistically significant results for Peeta Mootrata within the groups. Group A showed 81% while Group B showed 95% relief in Peeta Mootrata. The effect may be attributed to the Pitta Rechaka, Rakta Shodhaka and Rakta Prasadaka properties of Drakshadi Kashaya. Pitta rechaka and Sroto shodhaka action of DPACK Vati also imparts beneficial effects.

Study showed statistically significant result for Peeta Netrata, Group A showed 85% while Group B showed 95% relief in Peeta Netrata. The effect may be due to the Pitta Rechaka and Rakta Shodhaka properties of prescribed formulations.

The result for Agnimandya in between the groups was found statistically non-significant thus both group were considered equally effective in terms of Agnimandya. The Deepana and Pachana properties of Chitraka, Pippali and Daruharidra can be considered responsible for improving Agni.

The improvement in Udarashhola was found more for group B than group A. The effect may be due to the Udara Shoolahara action of Pippali and Chitraka of DPACK Vati and Vatanulomaka action of Drakshadi Kashaya.

Improvement in Hrillasa and Chardi was found statistically significant within the groups. Improvement was found more in Group B than group A, the Amapachana action of ingredients may be attributed to the observed action. Pittakapha Hara property of Chandana, Usheera and Draksha drugs present in Drakshadi Kashaya offers relief in Hrillasa and Chardi.

Study revealed that the result on reduction of Jwara within the group was statistically significant; Group B received more improvement than group A. It is believed that Jwaraghna, Pittahara and Amapachaka action of Daruharidra, Chitraka, Madhuka and Kalmegha offered relief from Jwara.

Assessment result pertaining to Atisara was found statistically significant within the groups and Group A observed more improvement than group B, may be due to the Sthambana action of Daruharidra, Madhuka and Hribera present in formulations.

Probable Mode of Action of Therapy:
Drakshadi kashaya helps in withdrawal symptoms of alcohol; it acts as a Pitta Shamaka, indicated for Daha, Kamala, Amlapitta and Madatyaya. Pittakaphahara property of prescribed formulations
helps in nausea and vomiting. The ingredient of DPACK Vati offers hepato-protective activity. Daruharidra induces regeneration of hepatocytes, Ashwagandha act on CNS manifestations of Alcoholic hepatitis like confusion and tremors. Chitraka acts as Deepana and Pachana drug thus helps to improve appetite. Kalamegha has choleric action and helps to reduces elevated liver function in hepatitis. The combined effect of these formulations probably resulted hepato-protective activity and helped in hepatic tissue regeneration.

**Conclusion**

Excessive consumption of alcohol i.e. Madyapana is considered foremost cause of Raktadushti which further leads Pitta Prakopa. Indulgence in Nidana leads functional impairment in liver resulting Koshta Shakhashrita Kamala. Group A was received DPACK Vati and Drakshadi kashaya for thirty days. Group B was received DPACK Vati, Drakshadi Kashaya for twenty days followed by Virechana. The formulations have hepato protective action thus help to reduces signs and symptoms of Alcoholic Hepatitis. Study revealed significant improvement in assessment parameter. Study finally concluded that DPACK Vati, Drakshadi kashaya and Virechana can offer significant role in the management of Koshta Shakhashrita Kamala.

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