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# A SINGLE CASE STUDY OF BALATISAR WITH MANAGEMENT OF AYURVEDIC DRUG AND HERBS

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## ABSTRACT

Ayurveda defines Atisar meaning Ati (much) and Saranam (Flow) meaning excessive stool in both volume and frequency. Balatisar is very common disease in children and sometimes life threatening. It occurs due to disturbed bowel movements. According to Ayurveda there are seven types of atisar. These are Vataja, Pittaja, Kaphaja, Bhayaja, Tridoshaja, Shokaja and Raktatisaraja.[1] Diarrhoea can be caused by a lack of immunity, a vulnerability to the causing pathogen, poor hygiene, malnutrition, and ingestion of contaminated food. Common symptoms of Balatisara include increased frequency of bowel movements, abnormal electrolyte balance, thirst, weakness, gases and cramping in the abdomen. Due to nidana sevana vitiating Vata leads to the Mandagni and causes Koshtha shoonata and increasing Dravata in Pureesha in the form of aam in PakwashayaIn Balatisara mainly Annavaha Strotas and Purishvaha Strotas Dushti is involved. The major complication of Balatisara is Dehydration and Malnutrition. With the help of ayurveda we can effectively treat acute as well as chronic cases of Balatisara.

**KEYWORDS**: - Balatisar, Atisar, Diarrhoea and Herbs.

**INTRODUCTION:-** Balatisara meaning Atisara in Bala or childhood diarrhoea. <sup>1</sup>It is one of the commonest & serious disease during childhood. These liquid stools are usually passed more than three times a day. However, diarrhoea is the recent change in consistency and character of stool is most important rather than number of stools passed. A child suffers from an average 10 to 15 episodes of diarrhoea in the first five year of life, out of these three to five episodes occurs during very infancy.<sup>2</sup> Diarrhoea contributes about 40% death in age < 5 year. Almost 500 million children suffer from acute diarrhoea annually. Out of them 5 million die every year. In India alone, nearly 1.5million children becomes a casualty case due to acute diarrhoea every year.<sup>3</sup> Total diarrhoea morbidity can be as high as 1/3 of the 1-2 years of child's life. Ayurvedic texts state that increased stool mass and a malfunctioning of gastrointestinal tract that is aam cause atisara. This aam is expelled out through rectum. The term atisar derived from 'ati' means excessive and 'sara' means passing liquid through the rectum. In infants atisara is mainly caused due to Pittaja Stanyadushti, MrittikaBhakshan, Dantodbhedan etc, also poor socio-economic status, poor hygienic conditions, and consumption of impure water are the precipitating factors for diarrhea in children. In Balatisara children shows loss of appetite, fluid loss due to hyper secretary response of intestine, leading to formulation of Aama which again stimulates the hyper secretary action of intestines. Madhavnidan claims that Atisar is the result of Mandagni. Food is a basic need for all living things. Food is the source of nourishment and development for all sharir dhatu. The body is what food does to you. All Sharirdhatu are impacted if there is unclean food. Acharya Kashyap described the signs, symptoms and diagnosis of atisara in the Sutrasthana's Vedanadhyaya.

गुदेन बहुद्रवसरणं अतिसारम्। [2] - मा.तन. (मधुकोष तिका)

Dehydration and malnutrition are the major complications seen in diarrhea in children therefore immediate management is required in this condition.

## **Case Summary:-**

A male patient of 5-year-old patient came in OPD of Department of *Kaumarabhritya* R. N. Kapoor Memorial Ayurvedic Medical College and hospital Indore (M.P). with complaints of Atisara like Dravamalavega (diarrohea lasting for more than 20 days), Vivarnata (moderate), Udara Shoola (continuous moderate pain), Trishna (moderate-drinks poorly), Kshudhahani (appetite decreased), Daurbalya (weakness), Nidralpata

(reduced sleep) for more than two weeks.

**Basic information of the patient.** Age 5-year Sex Male Weight 15 kg, Religion – Hindu, Socio-economic status - Middle class.

**Pradhan Vedana Vishesh (Chief Complaints)** - Watery loose stool with foul smell since approx. 20 days about 8 to 10 episodes per day. Vomiting - 1 to 2 episodes.

Vartaman Vyadhi Vritta (History of Present Illness) - Patient was healthy with normal growth and development as per the age. Before 20 days he started having watery stools and vomiting, patient took Allopathy medicines from 18 days for the same complaints but had no significant relief. Then approached Ayurveda for further treatment. Looking into the signs and symptoms of the patient diagnosed as a case of Kaphaja Atisara.

**Purvavyadhivritta (History of past illness)** - Patient had a history of viral fever with common cold treated with allopathic medicine.

**Birth history** Patient was delivered vaginally with Full Term Normal Delivery and cried immediately after birth. With no postnatal complications.

**History of immunization -** Proper for the age.

Personal History -

Kshudha (appetite) - reduced

Nidra (Sleep) - disturbed

Mala (Bowel) - loose watery stool 8-10 times per day

Mutra (Bladder) - normal

**Addiction -** no any addiction Ahara (Diet)

**Aharaj** – vegetarian and non-vegetarian food (taking very spicy, hot and fast food.

**Viharaj** – patient was active enough as per age,

**Sleep** – 10 hrs aprox.

General Examination -

**Body Built-** Normal,

Weight- 15kg

Height- 105 cm,

Pulse rate-90/min,

**B.P.-** 100/70mm of HG,

Respiration rate- 18/min,

**Temp-** 98.7 F, **Spo2** – 98,

Pallor- Present+

- Physical Examination -
- Ashvidha pariksha -

| Nadi    | Vatadhik tridoshaj   |
|---------|--|
| Mutra   | Colour and frequency normal and along with stools                          |
| Mala    | Watery Loose stools 12 to 14 times a day with foulsmell and whitish colour |
| Jiva    | Saam   |
| Shabda  | Ksheen   |
| Sparsha | Ruksha due to dehydration  |
| Druk    | Normal   |
| Akruti  | Lean   |

# S/E (Systemic examination) -

**RS** - Air Entry Bilaterally Equal, no any abnormality.

**P/A** - Abdomen was shrunken and diffuse tenderness present all over abdomen.

**CNS** - Conscious Oriented

CVS - S1 S2 Normal

Laboratory investigation -

## **Blood examination -**

**CBC Hb** -10.0 gm%, **TLC**-5600 cells/cu mm, **RBC**-3.5million cells/cu mm, **PLT** -325000 cells/cu mm, **DLC** and other **hematological parameters** were normal.

Treatment Given -

| MEDICINE                            | DOSE   | USE                |
|-------------------------------------|--------|--------------------|
| Bilvadileha                         | 8ml    | BD after meal      |
| Kutaja Ghanavati                    | 125 mg | BD after meal      |
| Laghusutashekhar rasa               | 125 mg | BD before meal     |
| Shunthi, Musta,<br>Indrayava Churna | 1gm    | BD with warm water |

#### Observation -

| Sign and Symptoms   | Before treatment     | After treatment   |
|---------------------|----------------------|-------------------|
| Frequency of stool  | 8 – 10 times per day | 2-3 times per day |
| Mucus in stool      | With each defecation | 1-2 times per day |
| Pain in abdomen     | ++                   | +                 |
| Weakness            | +++                  | +                 |
| Nausea and vomiting | Present              | Absent            |
| Weight              | 15                   | 17                |

## Discussion: -

**Bilvadileha** [4] Bilvadue to its Kashaya Tikta Rasa, Katu Vipaka and Laghu Gunaact as Agnideepan and also Aamapachak. Kashaya Rasa and Ushna Virya help in reducing the colonic motility. Sangrahi property of Bilva is very useful to treat the increased frequency of defecation and the consistency of the stool. In Bilvadilehain addition to Bilva, Prakshepa Dravyas like Dhanyaka, Jeeraka, Ela, Keshara, Twaka, Trikatu, Musta, have properties like Deepan, Pachana, Kaphghna, Vedanasthapaka, Rasayana. Thus, due to different properties of its ingredients, Bilvadileha has property like Tridoshahar, Deepan, Pachana, Aamnashaka, Grahi, Vibandhahar and Vatanuloman which checks the Samprapti and pacify the symptoms of Atisara.

**Kutaja Ghanavati** [5] It is polyherbal preparation containing two ingredients namely Kutaja and Ativisha. Kutajahas Tikta, Kashaya Rasa, Laghu, Ruksha Guna, Katu Vipaka and Sheeta Virya [6]. It is Pitta Kapha

Shamak drug. It possesses Deepan, Pachana, Grahi and Stambhaka properties. Various research studies conducted on Kutaj Ghanvatiproved its antidiarrheal, anti-dysenteric, bactericidal, antifungal and haemostatic properties.

**Laghusutashekhar rasa -** it contains shudha Swarna gairik, sunthi and nagvalli swaras for bhavana, gairik having properties like Madhur, Kashaya ras, snigdha guna and sheet virya, and laghu guna, act as

amapachak and agnideepan. It also does the function of vatanulomana due to its Madhura vipaka.

**Shunthi [7], Indrayava [8], Musta [9] Churna** Shunthi due to its Grahi nature, absorb excessive amount of liquid Purisha and corrected its pathology and it is Amapachakand Agnideepak. Indrayava and Mustaare

Deepana, Pachana and Sangrahi helped to decrease the frequency of bowel and increase appetite. Pathya and Apathya advised Pathya: Light foods, Moong-dal khichdi, riceonce/day, mixed aatta roti, kache papitha

sabji (raw papaya), kacha kela sabji (raw banana) with more haldi. Guda (desi jaggery) Fruits-Pomegranate (anar), apple, gooseberry (Amla), Diluted goats milk, Mustha Siddha Jala (50 g boiled with 3 lt water,

reduced to 1.5 lt) for drinking, Laghu Vyayama 45 min, Pranayama.

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**Apathya:-** Spicy foods, fast foods, Dadhi, Matsya, Mamsa, strenuous work, ensure hygiene and avoid school/outing until symptoms resolve.

**Conclusion** - This brief case study illustrates that patients taking Atisara can significantly improve their symptoms in only a few weeks. However, our goal is to serve as an example of the beneficial effects that can result from using readily available herbal medications, as indicated in traditional Ayurvedic texts.

#### References -

1. Nelson textbook of paediatrics, 20th edition, Author-Robert Kiegman, Bonita Stanton, Josephst. Game, Nina schor.

- 2. Suraj Gupte. Text book of pediatrics. 11th edition, Page no 444.
- 3. Nelson textbook of paediatrics, 20th edition, Author-Robert Kiegman, Bonita Stanton, Josephst. Game, Nina schor.
- 4. Ayurvedic Pharmacopeia of India 1&2. Govt. of India, Ministry of health and family Welfare, Dept. ISM & H, New Delhi, 2000.
- 5. Vaidyanatha. Ayurveda Sar Sangraha. Shree Baidyanath Ayurveda Bhawan limited. Gutika Vati Prakarana, 2015; 505.
- 6. Chunekar K. Bhavprakash Nighantu (Indian Materia Medica). Chaukhambha Bharati Academy, Varanasi. 2020; 332.
- 7. Bramhshankar Mishra, Rupalalji Vaisya. Bhavaprakash, part- I. Chaukhambha Sanskrut Bhawan, Varanasi. Edition 2012, Haritakyadi varga, 13.
- 8. Bramhshankar Mishra, Rupalalji Vaisya. Bhavaprakash, part- I. Chaukhambha Sanskrut Bhawan, Varanasi. Edition, 2012; 347. 9. Bramhshankar Mishra, Rupalalji Vaisya. Bhavaprakash, part- I. Chaukhambha, Sanskrit Bhawan, Varanasi. Edition, 2012;