

**MANAGEMENT OF GRAHANI ROGA W.S.R. TO ULCERATIVE COLITIS THROUGH
PANCHAKARMA—A CASE STUDY****Dr. Nidhi Nirmal^{*1}, Dr. Niranjana Rao²**^{*1}PG Scholar, Dept. of Panchakarma, SDM College of Ayurveda, Hospital and Research Centre, Udupi, Karnataka, India.²Professor and HOD, Dept. of Panchakarma, SDM College of Ayurveda, Hospital and Research Centre, Udupi, Karnataka, India.***Corresponding Author: Dr. Nidhi Nirmal**PG Scholar, Dept. of Panchakarma, SDM College of Ayurveda, Hospital and Research Centre, Udupi, Karnataka, India. DOI: <https://doi.org/10.5281/zenodo.20713074>**How to cite this Article:** Dr. Nidhi Nirmal^{*1}, Dr. Niranjana Rao² (2026). Management Of Grahani Roga W.S.R. To Ulcerative Colitis Through Panchakarma—A Case Study. World Journal of Pharmaceutical and Medical Research, 12(6), 489–492. This work is licensed under Creative Commons Attribution 4.0 International license.

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ABSTRACT

Ulcerative colitis is a chronic inflammatory condition in which patients show altered bowel habit such as diarrhoea, constipation, rectal bleeding, tenesmus, passage of mucous and crampy abdominal pain etc. These symptoms may be relapsing and remitting episodes of inflammation limited to the muscles layer of colon. In Ayurveda, *Pittaja Grahani* shows symptoms having resemblance with Ulcerative colitis. Ayurveda described various treatment modalities for the management of *Pittaja Grahani* such as *Matra Basti*, *Piccha Basti*, *Samshamana Yoga*, meditation etc. This paper highlights a single case study of a patient whose imperfect lifestyle became a cause for his impairment of the *Agni* and thus leading to *Grahani roga*. In this study, a diagnosed case of ulcerative colitis, age 45 years male complaints of blood and mucus mixed stools associated with abdominal pain and generalized weakness was treated with *Panchakarma Chikitsa* along with *samshamana yoga* and his complaints not only relieved but delayed remission as well. The goals of the treatment are to improve quality of life and achieve steroids free remission of the disease ulcerative colitis.

KEYWORDS: *Pittaja Grahani*, Ulcerative Colitis, *Piccha Basti*, Mucus in stool, Blood mixed stool.**INTRODUCTION**

Ulcerative colitis is a chronic inflammatory disease affecting the colon, and its incidence is rising worldwide. The pathogenesis is multifactorial, involving genetic predisposition, epithelial barrier defects, dysregulated immune responses, and environmental factors. Patients with ulcerative colitis have mucosal inflammation starting in the rectum that can extend continuously to proximal segments of the colon. Ulcerative colitis usually presents with bloody diarrhoea and is diagnosed by colonoscopy and histological findings. The aim of management is to induce and then maintain remission, defined as resolution of symptoms and endoscopic healing.^[1] According to Ayurveda, vitiated *Pitta* and *Rakta* are responsible for inflammation and ulceration. The symptoms of ulcerative colitis can be co-related with *Pittaja Grahani*. According to Ayurvedic classics, people with *Pittaja Grahani* have tendency to develop

Raktatisara when they do not follow *pathya ahara* and *vihara*. Again, consumption of hot, spicy and fried food along with stress, anxiety etc leads to *Raktatisara*. Therefore, the first line of treatment is *Nidana parivarjana* followed by use of *Panchakarma* and *Samshamana Chikitsa*. To measure to digest the *Ama* to bring *Agni* in its normal state and control the diarrhea and get the restoring health digestion and creating a bacteria friendly environment in the body and relief in all other complaints.^[2]

CASE STUDY

A male patient age of 45 years with negative history of Diabetes Mellitus, Hypertension and Thyroid Dysfunction was diagnosed with ulcerative colitis since 2 years. He visited OPD with complaints of blood and mucus mixed stools associated with abdominal pain and generalized weakness since 2 years.

Personal history

PERSONAL HISTORY	
Bowel	5-6 times/ day – Loose stools – Blood and Mucus mixed
Appetite	Reduced since 1 year
Micturition	Normal
Sleep	Disturbed
Dietary History	Non-vegetarian, Regular intake of curd at night, Spicy food intake, Irregular food habits, Consumption of oily & junk food

SYSTEMIC EXAMINATION	
GIT	Pain and tenderness over hypogastric and right iliac region
Respiratory	NAD
Cardio vascular	NAD
CNS	HMF Intact

GENERAL EXAMINATION	
Pulse	79 bpm
Blood Pressure	120/80 mm of hg
Respiratory Rate	18 cycles/min
Temperature	Normal

Diagnosis: Ulcerative Colitis/*Pittaja Grahani Roga*.

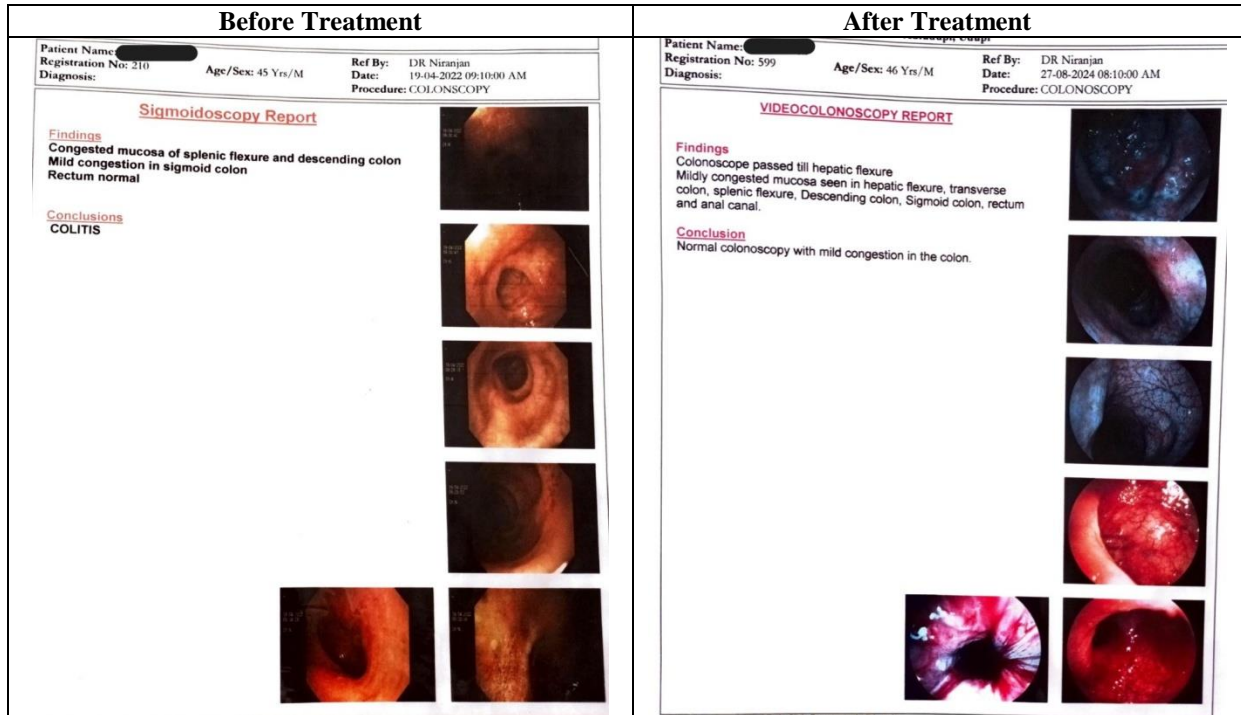
Treatment plan

S. NO.	TREATMENT	DOSE/ DURATION/ DAYS
1	<i>Piccha Basti</i>	<i>Kaala Basti</i> i.e. 6 <i>Piccha Basti</i> + 9 <i>Matra Basti</i> with <i>Jatyadi Taila</i> was given <i>Kinchitbhubhukshitam</i> i.e. after very light food <i>Piccha basti</i> was given
2	<i>Sarvanga Abhyanga</i>	Gentle full body massage was done for 20-25 minutes per day for 7 days
3	<i>Takradhara</i>	A specialized form of <i>Shirodhara</i> involves the rhythmic application of medicated <i>Takra</i> over the forehead was done for 7 days
4	Discharge medicines	Chandrakala Rasa 1-1-1 Madhukaasava 15ml-15ml-15ml Kutajghana vati 1-0-1 Bilva Avaleha 1tsf-1tsf-1tsf Mebarid 1-1-1

Above said *Panchakarma* treatment plan was followed for 4 sittings over a period of 2 years along with the oral medications.

RESULT

The patient experienced symptomatic relief from the first sitting of the *Panchakarma* treatment. A reduction in blood and mucus mixed stools, abdominal pain, and bowel urgency was observed, along with improvement in generalized weakness. The treatment protocol was repeated for four sittings over a period of two years. Progressive and sustained improvement was noted after each sitting, with marked reduction in rectal bleeding, mucus discharge, and abdominal discomfort. The patient reported improved bowel habits, better overall well-being, and longer periods of remission without significant flare-ups. Baseline colonoscopy findings were suggestive of colitis, whereas follow-up colonoscopy revealed a normal study with only mild congestion, indicating significant improvement in colonic mucosal health.



DISCUSSION

Ulcerative colitis is a chronic inflammatory bowel disease characterized by recurrent episodes of inflammation involving the colonic mucosa, presenting clinically with bloody diarrhoea, mucus in stools, abdominal pain, urgency, fatigue, and generalized weakness.^[3] In this case, a 45-year-old male with a two-year history of ulcerative colitis presented with blood-and mucus-mixed stools, abdominal pain, and generalized weakness. From an ayurvedic perspective, the clinical presentation closely resembles *Pittaja-Grahani* conditions, where vitiation of *Pitta* and *Vata dosha* leads to inflammation, mucosal damage, bleeding, and disturbed bowel function.^[4] The treatment protocol was designed to address both the local intestinal pathology and the systemic manifestations of the disease. *Piccha Basti* administered in the form of *Kaala Basti*, served as the principal therapeutic intervention. *Basti* is regarded as the most effective treatment for *Vata* disorders, and in ulcerative colitis, *Vata* aggravation contributes to increased bowel frequency, abdominal pain, and impaired mucosal healing. The mucilaginous and soothing properties of *Piccha Basti* helps protect the colonic mucosa, reduce inflammation, control bleeding, and promote ulcer healing.^[5] Administration after very light food i.e *Kinchitbhukshitam* facilitates better retention and absorption of the medicated enema in the intestine, enhancing its therapeutic efficacy. *Matra Basti* included within the *Kaala Basti* schedule, provides nourishment and lubrication to the colon while pacifying aggravated *Vata*. The combination of cleansing and nourishing enemas may have contributed to restoring normal bowel function and reducing the frequency of bloody stools.^[6] *Jatyadi Taila* also helps in ulcer healing. *Sarvanga Abhyanga* was performed daily for seven days to alleviate *Vata* aggravation, improves peripheral

circulation, reduces physical weakness, and promotes overall relaxation.^[7] Chronic ulcerative colitis often results in fatigue and reduced quality of life; therefore, *Abhyanga* may have played a supportive role in improving strength and well-being. *Takradhara* administered for seven consecutive days, likely contributed to stress reduction and neuropsychological balance. Psychological stress is recognized as an important factor in triggering and exacerbating ulcerative colitis.^[8] *Takradhara* exerts a calming effect on the central nervous system, promotes mental relaxation, and may help modulate the gut-brain axis, thereby reducing disease aggravation associated with emotional stress. The discharge medications were selected to sustain remission, improve digestion, control inflammation, and prevent recurrence. The overall therapeutic approach appears to have targeted the major pathological components of ulcerative colitis, including intestinal inflammation, mucosal ulceration, bleeding, altered bowel habits, and systemic weakness. The combined use of *Basti* therapy, external procedures, and oral medications may have acted synergistically to restore *doshic* balance, improve intestinal integrity, reduce symptoms, and enhance the patient's quality of life. Although the positive clinical response observed in this case suggests the potential usefulness of Ayurvedic interventions in the management of ulcerative colitis, conclusions regarding efficacy should be interpreted cautiously. Ulcerative colitis is a chronic relapsing disease, and long-term follow-up with objective assessment parameters such as stool frequency, bleeding score, inflammatory markers, and endoscopic findings would be valuable to further evaluate treatment outcomes. Nevertheless, this case highlights the possible role of an integrative Ayurvedic management strategy in achieving symptomatic relief

and supporting remission in patients with ulcerative colitis.

CONCLUSION

This case study demonstrates that an ayurvedic treatment protocol comprising *Piccha Basti* in *Kaala Basti* schedule, *Sarvanga Abhyanga*, *Takradhara*, and appropriate oral medications may provide significant symptomatic relief in ulcerative colitis. The therapy helped address rectal bleeding, mucus discharge, abdominal pain, and generalized weakness while promoting mucosal healing and restoring bowel function. These findings suggest that ayurvedic interventions can play a supportive role in the management of ulcerative colitis and improving patients' quality of life. However, further studies with larger sample sizes and long-term follow-up are required to establish their efficacy and safety.

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