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# MANAGEMENT OF CHRONIC CHOLESTATIC LIVER DISEASE (RUDDHAPATH KAMLA) THROUGH AYURVEDA - A CASE STUDY

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#### **ABSTRACT**

Liver is a vital and important organ in human being, its plays very crucial role in metabolism it's having both secretory and excretory functions. While there are many causes of liver diseases present clinically in a few distinct pattern usually classified as hepatocellular, cholestatic (obstructive) or mixed type. Liver diseases may be acute or chronic, progressive and reversible or progressive and Irreversible. There is no specific hepatoprotective regenerative drugs available in modern medicine till date, vice versa there are lot of Ayurvedic medicines which can be plays vital role in liver protection or repair. In Ayurveda there are two types of liver diseases (Kamla Vyadhi) Bhaupitta kamla & Ruddhapath kamla which is a same classification at modern medicines i. e. Hepatocellular & Cholestatic respectively. A 45 year old male patient was comes for ayurvedic management in M. E. S Ayurved college Hospital - Parshuram Rugnalaya in Kayachikitsa O.P.D. for his chronic cholestatic Liver Disease, i.e Ruddhapath Kamla & also he was suffering from knee joint effusion i. e Kroshtuk shirsha. He was treated with Ayurvedic treatment plan for one month. He got significant relief from his complaint like knee joint pain swelling effusion all over body itching generalized weakness anorexia also there is a positive changes in his stool colour that is from clay colour to normal colour stool. But as Kokan is remote area of Maharashtra, I could not find a long follow up of this patient after 1 month, otherwise it would have been a very good study. But with this case study we can conclude that chronic Cholestatic liver disease can be well manager with Ayurvedic medicine and ayurvedic concepts.

**KEYWORDS:** Chronic cholestatic liver disease, Ruddhapath Kamla, Ayuvedic intervention.

## INTRODUCTION

**Liver disease / Hepatic disease is** a type of damage disease of the liver. Whenever the course of problem last longing more than 6 month chronic liver disease each ensures.

Cholestasis is condition when bile cannot flow from the liver to the duodenum. The two Basic distinctions are obstructive types of cholestasis, one is mechanical obstruction like gallbladder stone, malignancy other is metabolic type of cholestasis disturbance in bile formation this is because of genetic, acquired, auto immune, drug-induced.

Typical Symptoms include itchiness, pruritus, jaundice, fatigue, right upper quadrant pain, dark urine, clay colour stool.

Same pathology, sign and symptoms are described by Acharya thousands year ago, call this disease as Ruddhapad Kamla. Path means channel, way from which someone can flow, means Pitta vahini, Pitta nalika, bile ductus from which bile- Pitta flows. Ruddha means of obstructed & Kamla means jaundice and related symptoms. According to charaka Kaphasamurchit vayu obstruct the pitta vahak Nalika, so pitta (Bile) cannot comes into the koshta, so the stool (Mala) not gets its natural colour. Hence colour of stool is clay colour which is described as a Tilpisthinaabh Malala pravartan, which is a classical sign of obstructive pathology of liver.

Hence Ayurvedic treatment consists of restrictions of Hetu Sevan, kaphaghnachikitsa, samprapti bhang, Uses of katu, amla, lavan dravyas according to dosha pradhanya & as per prakruti of patient.

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#### CASE REPORT

### Patient basic information

Name: xxx, Age: 45 years, Sex: Male, OPD No. 1416, Date: 21 / 02 /2019.

## Complaints of

- 1) Itching all over body since last 8 to 10 years, slightly increased from last month.
- Mild generalized weakness Since 4 to 5 years.
- 3) Mild anorexia: 1 Month
- 4) Right knee joint pain and swelling: since 2 months
- 5) Clay colours stool since 8 to 10 years, with intermittent slightly changes in colour.

## History of present illness

Patient suffering from above disease and complaints are since last 8 to 10 years. Taken treatment from various modern consultant, since last one month patient feeling mild increase in his symptoms. Someone is given reference him of our Ayurvedic hospital for ayurvedic management. Hence patient comes for routine check up and ayurvedic management with his all previous medical records.

## Past history of

History of: cholecystectomy before 2 years, for GB stones.

No History of: DM / HTN / Asthma / COPD / IHD / MI / Thyroid Diseases etc.

No History of: Major illness other than this disease.

Addiction History: No any specific.

Family History: No any.

## Clinical examination

# O/E

G. C.: fair, Afebrile, Pulse – 78 / min,

Blood pressure – 120 / 80 mm of Hg, Weight – 58 kg, Mid icterus present, Non pallor, No clubbing, JVP -Normal, No lymphadenopathy,

No flapping tremors No pedal edema

## Asthavidh Pariksha

Nadi: vaatkaphatmak, Nivamit Mal: Tilpisthinaabh Malpravartan Mutra: samyak, Ishat pit varni

Jivha: Alpa saam Shabda: Prakrut Sparsha: samshitoshna Drika: Alpa pit varni Akriti: Madhyam

**Local examination -**Rt. Knee joint, Mild effusion +

## **Systemic examination**

Respiratory system: AEBE, No Crepitation or wheeze Cardiovascular system: S1 S2 Normal, no murmurs Per abdomen: soft, Liver - nonpalpable, spleen nonpalpable, kidney -nonpalpable

Central nervous system: oriented, planter flexor No E / O Ataxia

## Patients file reports Liver biopsy reports Histopathology

Section showing extensive intrahepatic cholestasis. Approximately five portal areas are included with contain. Mild inflammation consisting of lymphocyte, few plasma cells and polymorphs. Interlobular bile ducts are not well appreciated three portal areas. Parenchyma shows rossettoid armament of lymphocytes. There is marked cholestasis within the bile canaliculi. No evidence of bile ductular proliferation, granuloma or fibrosis Special stains: prussian blue - negative for Iron. Elastic stains - No fibrosis Diagnosis: extensive intraliepatic cholestasis Serum markers: Dated 26/11/2014

Serum Markers: HBSAG / HCV / HAV / HEV / HIV -Negative.

Mitochondria Antibody Test (AMA): Dated 26 / 11 /

Diagnostic titre: 1: 1000 Result - Negative

Serum Immunoglobulin: Dated 2/12/2014

IgG - 713 mg / dl (Normal), IgM - 212.5 mg / dl (Normal)

IgA – 123.5 mg / dl (Normal)

LFT: Dated 24 / 12 / 2024

Sr. Billirubin level Total: 13.8 mg/dl sr. Billirubin level

Direct: 7.1 m

Sr. Bilirubin level Indirect: 6.70 mg / dl SGOT: 88 U / L SGPT: 62 U/L

Alkaline Phosphate level: 79 U /L Sr. protein level: 4.00

Sr. Glonulin level: 2.70 g/dl

**G6PD level:** Dated 8 /1 / 2019

258 U (Normal)

TSH level: Normal CBC: WNL PTINR: Normal

## RADIO DIAGNOSTIC TEST

## **USG Abdomen & Pelvis**

Liver - Slightly smaller in size, Gallbladder -Echoreflective Calculus measuring 9.2 mm in long axis is noted in GB, GB wall Thick is 3.8 mm, Spleen -Normal, Pancreas – Normal,

kidney - Both kidneys are normal in size, Urinary

Bladder – Normal, Prostate – Normal

MR Cholangiopancreatography: Dated 27/11/2014 -Mild Hepatomegaly, Cholelisthasis

## **Treatment Given by Modern consultant**

Tab. UDILIV 300 2 Bid, Tab. Essential 1Tds, Tab. Silybon 1400 1 Bid, Tab. Atarax 1 Hs

Surgical Procdure: Cholecystectomy Done Before 2 years.

## Ayurvedic Treatment protocol

**Shodhan chikitsa:** Local Leech Application (Sthanik Jalokavacharan) done on Rt knee joint for pain & swealling & effusion.

#### Shaman chikitsa

TAB. **AROGYAVARDHINI** 500 MG BID WITH LUKEWARM WATER EMPTY STOMACH

TAB. **AMRUTADI GUGGUL** 500 MG BID WITH LUKE WARM WATER EMPTY STOMACH

TAB. **HARIDRAKHAND** 500 MG BID WITH LUKE WARM WATER EMPTY STOMACH

**PHALTRIKADI KADHA** 15 ML BID AFTER LUNCH WITH LUKEWARM WATER

TRIKATU CHURNA 1GM PLUS SAINDHAV LAVAN 500 MG BID GIVEN WITH NIMBU SWARAS

\*\* Above medicine used for 1 months.

#### RESULT

After one month treatment, symptomatic & pathological Improvement seen in this patient.

Before Treatment			After Treatment	
1)	Itching All over Bod	ly +++	Itching all over Bod	y +
2)	Generalised weaknes	ss ++	Generalised Weakne	ess +
3)	Anorexia +		Appetite improve	
4)	Rt. Knee Jt. Pain & Swelling +++		Rt. Knee Jt. Pain & Swelling +	
5)	Clay colour stool		Mild Yellowish Col	lour Stool
6)	Icterus +		No Icterus	
7)	Sr. Bilirubin Total 2.7 mg / dl		Sr. Bilirubin Total 1.4 mg / dl	
8)	SGOT level	58.5 U/L	SGOT level	40.0 U/ L
9)	SGPT level	60.0 U/L	SGPT level	24 U / L
10)	Alkaline Phosphate	200.00 U/ L	Alkaline Phosphate	168.5 U / L
11)	Sr. Albumin leve	3.8	Sr. Albumin level	4.00 U/L

## Arogyavardhini

Arogyavardhini is Dipan, Pachan, Pathya, Hrudhya, Medovinashni, Malshudhikari, Kshudhapravartini, useful in kushta, jwara and all types of diseases. The drug has been mentioned Specially in Bhaishyajyaratnavali in the context of Yakritvikara. Arogyavardhini has been used for centuries with claimed efficacy in Liver Disorders, Jaundice.

## Ingredients -

Shuddh Parad (Detoxified Mercury), Shuddha Ghandak (Detoxified Sulphur), Loha

Bhasma(Iron), Abhrak Bhasma (Mica), Tamra Bhasma (Copper), Amalaki (Emblica Officinalis), Haritki (Terminalia Chebulla), Bhibhitki (Terminalia bellerics), Shuddh Shilajatu

(Asphaltum), Shuddh Guggul (commiphora wightti), Chitrak (Plumbago zeylanica), Katukki (Picrrorrhiza Kurroa) Bhavana Neem patra swaras (Azadirachta indica).

#### Amrutadi Guggul

The Amrita Guggul is capabale of checking 18 types of kushta, vata rakta, jaundice (Kamla), Amvata, Agnimandya, Bhagandar, Pratisaya, Splenomegaly & Problem of GIT.

## Ingredients -

Guduchi (Amrita), Dashmula, Patha, Murvamula, Bala root, Katuki, Haridra, Eranda root, Triphala, purified Guggul, Sunthi, Pipali.

#### **Haridrakhand Brihat**

According to Bhaisajya Ratnavali Haridrakhand is very useful in curing Sita – Pitta, udarda, Kotha, Kandu, Pama, vicharchika, Jirnajvara, Krimi roga, Pandu & Shotha.

#### Ingredients

Haridra, Trivritta, Haritki, Raw sugar, Daru Haridra, Musta, Caraway seeds, Ajmoda, Bark of Chitrak, Katuki, White Cumin seeds, Pippali, Sunthi, Cinsmon Bark, Cardamom, Cassia leaves, Vidanga, Amrita, Vasa, Kustha, Triphala, Chavya, Dhanyak, Loha Bhasma & Abhrak Bhasma.

## Phaltrikadi Kwath

Phaltrikadi Kwath when used with honey cures Kamla (Jaundice) & Pandu (Anaemia).

## Ingredients

Triphala, Amrita (Guduchi), Vasa, katuki, Bhu – Nimba, Bark of Neem.

## Amalki (Embilica Officinalis)

Pancha Rasa- Lavan varjita, Lahu – Ruksha, Madhur – Vipaki, Sheet – Virya, Rasayani, Tridoshhara. Having Antiviral, Antioxidant activity, Reduce SGOT, SGPT, serum & Hepatic Cholesterol.

## Bibhitki (Terminalia Bellerica)

Kashaya Rasa, Ruksha — Laghu, Mahur — Vipaka, Ushna — virya, Tridoshhara.

Having Anti Oxidant, Anti microbial & Hepato protective property.

Haritaki (Terminalia Chebula)

Pancha Rasa- Lavan varjita, Laghu – Ruksha, Madhur - Vipak, Ushna – Veerya, Tridoshar Antimicrobial, Diuretics, Cardiotonics, Immunosuppressive effect.

Amrita / Guduchi (Tinospora Cardifolia)

Tikta – kashay, Guru – Snighda, Madhu – Vipaka, Tridosha Shamak, Rasayan

Antioxidant, Its suppresses kuffers cells activation witch is outcomes of liver injury. Immuno – Modulator hence useful in cholestasis.

#### Vasa (Adhatoda Vasica)

Tikta, kashaya Rasa, Rukdha – Laghu, Katu – Vipak, Sheet – Veerya, Kapha – Pitta shamak

Antiviral – Antibacterial, Hypoglycaemic, mucolytic, useful in fever, liver enlargement.

#### Katuki (Picrorhzia Kurroa)

Tikta Rasa, Ruksha – Laghu, Katu – Vipak, Sheet – Veerya, Kapha – Pittahara

Antioxidant, Hepato protective, stimulste liver regeneration.

## Nimba (Azadirchata Indica)

Tikta – Kashay Rasa, Laghu, katu – Vipak, Sheet – veerya, Kapha – Pitta shamak.

Anti – inlamamatory, Analgesic & Antipyretic Hepato protective, Anti bacterial & Antiviral.

#### Trikatu Churna

As per Bhavprskash Trikatu is Agnidipak & useful in Shwas, Kas, Skin diseases, Gulma, Meha (DM), Kapha, Obesity, Medo rogs, Filriasis, Pinas. In short useful in various obstructive conditions i. e. Strotorodha.

Ingredients –

Sunthi, Marich & Pippali

#### Saindhav Lavan

According to Bhavprskash Saindhav Lavan is Swadu, Dipan – Pachan, Laghu, Snighda Ruchiksrsk, Dheet Virya, Vrishya, Sukshma Srotogami, Netryam, Tridoshhara.

## **CONCLUSION**

- 1. Significant effect (symptomatic & in pathological lab reports) was observed in patients after one month Ayurvedic Treatment.
- 2. Given Drugs & Treatment is beneficial for Chronic CHOLESTSTIC LIVER DISEASE.
- 3. Need further more study with long follow up in future with large scale number of patients for scientific data collection.
- 4. No side effect were observed in the patient with given drugs and treatment.

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