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A CLINICAL AND COMPARATIVE STUDY OF MANADYA GUDIKA & SHOBHANJANADI KWATH IN THE MANAGEMENT OF YAKRITPLEEHA VIKAR

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ABSTRACT

The liver is the largest organ and gland in the human body and it is responsible for both metabolism and detoxification. Acharya Charak and Sushruta mention that the Yakrit (liver) and Pleeha (spleen) are the two organs that originated from Shonita (blood) in Ayurveda. Both Yakrit (liver) and Pleeha (spleen) are roots of the Shonitvaha Srotsa. According to Ayurveda Ranjaka pitta, which is found in the liver and spleen, is responsible for Rakta dhatu's (blood) production. As a result, hepatomegaly and splenomegaly should be treated with Rakt Dhatu in mind. To treat hepatomegaly and splenomegaly, 15 of the herbal contents in Manadya Gudika and 5 of the herbal contents in Shobhanjanadi Kwath are used. Giloya, Pippali Chitrak and Shobhanjan, are the main hepatoprotective, carminative, and blood purification drugs used in this Shastriya Aushadh Yog. An evidencebased medicine, that can benefit other Vaidyas and the medical community for the treatment of hepatomegaly and splenomegaly. Aim: A Clinical and Comparative Study of Manadya Gudika and Shobhanjanadi Kwath in the Management of Yakritpleeha Vikar. Design: This study was conducted as a prospective, open-level clinical, interventional, & comparative trial with before and after treatment with the administration of Manadya Gudika (1 gm per day) and Shobhanjanadi Kwath (40 ml per day) for a period of 90 days with a follow up of 15 days. Method: This is a study with a sample size of 22 patients in each group (Group A and B). A total of 44 patients with hepatomegaly and splenomegaly were chosen from the O.P.D. of Shri Khudadad Dunga ji, Govt. Ayurved College Hospital Raipur (C.G.) between the ages of 18 and 60. Results: The clinical study showed highly significant results in relieving the clinical symptoms of Yakrit vikar (Hepatomegaly) and Pleeha vikar (Splenomegaly).

KEYWORDS: Ayurved, Yakritpleeha Vikar, Hepatomegaly and Splenomegaly.

INTRODUCTION

Our Ayurveda is the oldest book among the many oldest books in the world. This Scripture is eternal. It is a subsidiary of *Atharvaveda*. *Acharya Kashyap* has accepted Ayurveda as the fifth Veda.^[1] Diseases and their effects have been around ever since human life originated in the universe. In the present, with hard work and a busy schedule, human beings are not able to properly follow the natural principles of staying healthy. due to which he always suffers from physical ailments. Ayurveda is being widely used for happiness and good health. Ayurveda considers the root cause of the origin of all substances on the basis of *Panchamahabhuta* principles and treats all living beings on the basis of this *Panchamahabhuta* principle. *Acharya Charak, Sushruta,* and *Vagbhatta* count *Udar Roga* among the *Ashtha Maharoga* (major diseases).^{[2][3][4]} "रोगा: सर्वsपि मन्देऽग्नौ स्तराम्दराणि त्"। (AH.Ni.12/1)The diseases caused by Agni vikriti are on the rise as a result of the consumption of contaminated food (Dushita Aahara). The root cause of the origin of all diseases is Agnimandya, which causes abdominal disease. Human society is widely affected by Yakrit (liver) and Pleeha (spleen) disorders. Human society is widely affected by Yakrit (liver) and Pleeha (spleen) disorders. Acharya Charak explains the symptoms of both hepatomegaly and splenomegaly in Chikitsa Esthan 13/38. These symptoms are Dourbalya, Arochaka, Avipaka, Varchomutragrah, Tamahpravesha, Pipasa, Aangamarda, Chhardi, Murchha, Aangasad, Kasa, Shwasa, Mridujwar, Aanah, Agninasha, Karshya, Aasyavairasya, Parvabheda, Kosthavata, Shoola, Aruna, Neel-Haridra Vaivarnta and Rajimad.^[5] In the Ayurvedic treatment, along with many classical medicines, there is a special description of Aahar-Vihar

and *Anupan*, using which liver and spleen disorders can be safely treated.

AIM

A Clinical and Comparative Study of *Manadya Gudika* & *Shobhanjanadi Kwath* in the management of *Yakritpleeha Vikar.*"

OBJECTIVES

- Clinical study of *Manadya Gudika* and *Shobhanjanadi Kwath* in liver and spleen disorders.
- To study the effectiveness of *Manadya Gudika* and *Shobhanjanadi Kwath* in liver and spleen disorders.
- Analyzing the results of statistical data obtained from the study of the therapeutic effect of *Manadya*

Gudika and *Shobhanjanadi Kwath* in liver and spleen disorders.

• Drawing conclusions on the basis of symptoms described in modern texts and experimental tests.

MATERIALS AND METHODS

Study Design

As a prospective, open-level clinical, interventional, and comparative trial, *Manadya Gudika* (1 gm per day) and *Shobhanjanadi Kwath* (40 ml per day) were administered for a duration of 90 days, with a follow-up of 15 days, before and after treatment. The sample size for this study is 22 patients, 22 in each group (Group A and B). From the Kayachikitsa OPD of Shri Khudadad Dunga ji, Govt. Ayurved College Hospital Raipur (C.G.), 44 patients with hepatomegaly and splenomegaly between the ages of 18 to 60 were selected.

No.	Group A	Group B		
No. of Patient	22 Patient	22 Patient		
Age	18 to 60	18 to 60		
Washout Period	7 Days	7 Days		
Follow-up	15 Days	15 Days		
Medicine	Manadya Gudika(250mg x 2tab/ BD)	Manadya Gudika(250mg x 2tab/ BD)		
Medicine	Ushnodak (Lukewarm Water)	Shobhanjanadi Kwath (20ml /BD)		
Duration	90 Days (3 month)	90 Days (3 month)		
Patient selection	Patient selected from the Kayachikit	sa OPD of Shri Khudadad Dunga ji, Govt.		
Center	Ayurved College	Hospital Raipur (C.G.)		
Pathya- Apathya v	vas followed by both groups.			

Drug concept

The main ingredient used in this is the use of various *kalpas* of *Mankand*, which are specified in liver and spleen diseases. *Saindhav* salt has been used in *Manadya Gudika* and *Shobhanjanadi Kwath*, which gives strength to fire with its *Ushana* and *Tikshana* properties. *Kshara*

used in *Manadya Gudika* and *Chitrak* used in *Manadya Gudika* and *Shobhanjanadi Kwath*, are by nature the ones that lighten and enrich the digestive fire. According to *Manadya Gudika's falshruti, "Yoga: Parikaro Namnah Hygnisandipana: Parh,"* it works on the digestive enzymes (*Pachkagni*).

Contents of the Manadya Gudika^[6] (Chakradatta- pleeha-yakrit chikitsa adhyaya 38/17)-

No	Contents	Botanical Name	Guna	Rasa	Vipak	Virya	Pryojyang
1-	Mankand	Alocasia indica	Guru, Snigdh	Madhur	Madhur	Sheeta	Kand, Patra
2-	Apamarg	Achyranthes aspera	Laghu Rukshya Tikshana	Katu, Tikta	Katu	Ushna	Panchang
3-	Guduchi	Tinospora cordifolia	Rukshya, Guru	Tikta	Madhur	Ushna	Panchang
4-	Vasa	Adhatoda vasica	Laghu, Rukshya	Tikta, Kashaya	Katu	Sheeta	Panchang
5-	Shalparni	Desmodium gangeticum	Guru, Snigdh	Madhur Tikta	Madhur	Ushna	Panchang
6-	Pippali	Piper longum	Laghu, Snigdh	Katu	Madhur	Anushna Sheeta	Phala
7-	Chitrak	Plumbago zeylanica	Laghu Rukshya Tikshna	Katu	Katu	Ushna	Mula
8-	Shunthi	Zingiber officinale	Guru Rukshya, Tikshana	Katu	Katu	Ushna	Kand

9-	Talpushapa	Borassus flabellifer	Laghu, Snigdh	Madhur	Madhur	Sheeta	Pushpa				
10	Saindhav	चक्षुष्यं सैन्धवं हृद्यं रुच्यं लघ्वग्नि दीपनम्। स्निग्धं समधुरं वृष्यं शीतं दोषघ्न मुत्तमम्।।									
10-	Lavan	(सु.सू. 46/315)	(सु.सू. 46/315)								
11-	Vida Lavan	सक्षारं दीपनं सूक्ष्मं शूलह	इद्रोगनाषनम् । रोचनं त	११क्ष्णमुष्णं च वि	वेडं वातानुलो	मनम्।					
11-	viaa Lavan	(सु.सू. 46/317)									
12-	Sauvarchal	लघु सौवर्चलं पाके वीर्योष्णं विशदं कटु। गुल्मषूल विबंधघ्नं हृद्यं सुरभि रोचनम्।।									
12-	Sauvarenai	(सु.सू. 46/318)									
13-	Yavakshar	ज्ञेया वन्हिसमौ क्षारौ स्व	र्जिकायावशूकजौ। शुब्र	⁵ श्लेष्मविबंधाश	र्गिगुल्म प्लीह	विनाशनौ।।					
15-	Tavaksnar	(सु.सू. 46/325)									
14-	Gomutra	गव्यं समधुरं किंचित् दो	षघ्नं क्रिमिकुष्ठनुत।।	(च.सु.1/103)							
15-	Madhu	वातलं गुरू शीतं च रक्तपित्तकफापहम्। सन्धातृच्छेदनं रूक्षं कषायं मधुरं मधुर।।									
13-	wanu	(च.सु. 27/245)									

Contents of the Shobhanjanadi Kwath^[7] (Chakradatta- pleeha-yakrit chikitsa adhyaya 38/08)-

No	Contents	Botanical Name	Guna	Rasa	Vipak	Virya	Pryojyang	
1-	Sahijan	Moringa oleifera	Laghu, Rukshya Tikshana	Katu, Tikta	Katu	Ushna	Twak	
2-	Pippali	Piper longum	Laghu, Snigdh	Katu	Madhur	Anushna Sheeta	Phala	
3-	Chitrak	Plumbago zeylanica	Laghu, Rukshya, Tikshana	Katu	Katu	Ushna	Mula	
4	C	चक्षुष्यं सैन्धवं हृद्यं रुच्यं लघ्वग्नि दीपनम्। स्निग्धं समध्रं वृष्यं शीतं दोषघ्न मुत्तमम्।।						
4-	Saindhav	(सु.सू. 46/315)			-			

Inclusion Criteria

- People aged 18 to 60 were chosen.
- Patients exhibit classic signs and symptoms of Yakrit and Pleeha vikar, according to Ayurvedic and modern texts:- Yakrit Vridhi, Pleehavridhi, Alpakshudha, Mridujwar, Dourbalya, Mandagni and Aruchi

Exclusion Criteria

- People below 18 and above 60 are not selected.
- Liver abscess (Pyogenic and Amoebic)
- Cirrhosis of liver
- liver failure
- Ischemic heart disease
- Chronic renal failure
- Nephrotic syndrome
- Sickle cell anemia
- Severe HTN [B.P. more than 150/100]
- Hepatocellular or any other carcinoma
- Portal hypertension
- Tuberculosis
- Ascites
- HIV Positive
- Type 1 DM
- Cancer
- Sexual Transmitted Disease.

MATERIALS AND METHODS

Patients had clinical examinations. The clinical signs and symptoms were thoroughly evaluated. All patients who received treatment had records and were followed up on. The patient gave his or her written permission. Using standards, the therapy's effectiveness was evaluated.

Subjective criteria: Yakrit Vridhi, Pleehavridhi, Alpakshudha, Mridujwar, Dourbalya, Mandagni and Aruchi.

Objective Criteria

• LFT - Liver Function Test-SGOT (AST) SGPT (ALT) Serum Alkaline phosphatase Serum bilirubin - Total, Direct, Indirect Total protein, albumin, globulin

- CBC
- Blood sugar level: Fasting & PP
- USG (Ultrasonography)
- Urine routine and microscopic

No.	Symptoms	Grade – 0	Grade – I	Grade – II	Grade – III
1.	<i>Yakritvridhi</i> (Hepatomegaly)	Not palpable	Below 2 c.m. Right hypochondrium	2 – 5 c.m. Right hypochondrium	>5 c.m. Right hypochondrium
2.	2. Pleehavridhi (Splenomegaly) Not palpable		1-3 c.m. Mild enlargement	4-7 c.m. Moderate enlargement	>7 c.m. Severe enlargement
3.	<i>Raktalpta</i> (Anaemia)	Normal HB % 12-18 gm%	10.1-12 gm%	8.1-10 gm%	< 8gm%
4.	<i>Jwar</i> (Fever)	Normal temperature 98-99 °F	99.1-100 °F Mild fever	100.1 – 103 °F Moderate fever	> 103 °F High fever
5.	<i>Mandagni</i> (Loss of Appetite)	Normal Appetite	Over day 1 Time Breakfast 1 Time Meal	Over day 1 Time Meal	Eating small quantity once a day.
6.	<i>Chhardi</i> (Vomiting)	No Vomiting	Nausea but no vomiting.	Vomiting at any time 1- 2 times a week.	Vomiting 3 times or more a week.
7. <i>Aruchi</i> (Anorexia)		Generally desire to eat.	Eating 2 times a day when there is little desire.	Eating once a day when there is little desire.	Eating once a day even if you don't feel like it.

Criteria for Assessment

Drug Identification: All the raw drugs were verified by the Department of Dravyaguna of the Government Ayurveda College, Raipur (Chhattisgarh).

Statistical analysis: Paired **"t"** Test and independent **"t"** Test, Wilcoxon Rank Sum Test and Mann Whitney U Test.

IEC Certificate: The patient was selected on the basis of the certificate obtained by Institutional Ethics Committee (IEC/2020/152 DATE 06/10/2020). GOVT. AYURVED COLLEGE, RAIPUR (Chhattisgarh)- 492010

CTRI Certificate: Trialed on the basis of CTRI No.: CTRI/2021/11/038245 [Registered on: November 25, 2021] and Acknowledgement Number -REF/2021/09/047398.

Washout period: 07 days

Potential functionality of drugs (Sambhavita Karmukta)

On the basis of the *Vatashamak*, *Kaphvatashamak*, and *Tridoshashamak* properties of *Manadya gudika*, which remove the symptoms of *vata* and *kapha dosha* in liver and spleen disorders. *Kshar* has been used in this yoga. which does the work of *Lekhan karma* and *Chhedan karma*.^{[8][9]}

The properties of *Pippali, Chitrak* and *Guduchi* in the constituent substances strengthen the functioning of the liver. The main components used are calcium, potassium, phosphorous, ascorbic acid, iron, zinc, and magnesium, which are present in *Mankanda* and from which the liver produces different types of enzymes.^[10] Vitamins B, C and E are found in *Shobhanjan Patra*, which provides nutrition to the body. Using *Manadya Gudika* and *Shobhanjanadi Kwath* together increases their effect. because the constituent substances of both medicines are the same.

Table 01: Classification of total patients selected according to A	Age.
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			Number of	of patient:	S		
No.	Age	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	18-20	0	2.27%	1	4.54%	1	2.27%
2.	21-30	3	13.63%	3	13.63%	6	13.63%
3.	31-40	7	36.36%	9	40.9%	16	36.36%
4.	41-50	5	18.18%	3	13.63%	8	18.18%
5.	51-60	7	29.54%	6	27.27%	13	29.54%

 Table 02: Classification of total patients selected according to Gender.

			Number of	of patients	s	total	
No.	Gender	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Male	16	72.72%	15	68.18%	31	70.45%
2.	Female	6	27.27%	7	31.81%	13	29.54%

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			Number o	of patients			
No.	Religion	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Hindu	22	100%	22	100%	44	100%
2.	Muslim	0	0	0	0	0	0
3.	Siksh	0	0	0	0	0	0
4.	Christian	0	0	0	0	0	0

Table 03: Classification of total patients selected according to Religion.

			Number o	of patients	8	total	
No.	Residence	Group "A"	Percent	Group "B"	Percent	total	Percentage
1-	Urban	18	81.82%	16	72.73%	34	77.27%
2-	Rural	4	18.18%	6	27.27%	10	22.72%

Table 05: Classification of total patients selected according to Marital status.

	Marital		Number of patients				
No.	status	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Married	16	72.72%	18	81.82%	34	77.27%
2.	Single	5	22.72%	4	18.18%	9	20.46%
3.	Widower	1	4.56%	0	0%	1	2.27%

Table 06: Classification of total patients selected according to Education.

			Number o	of patients			
No.	Education	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Uneducated	1	4.54%	0	0%	1	4.54%
2.	Primary school	3	13.63%	4	18.18%	7	31.81%
3.	Middle school	4	18.18%	3	13.63%	7	31.81%
4.	High school	5	22.72%	7	31.81%	12	54.54%
5.	Higher secondary	6	27.27%	5	22.72%	11	50%
6.	Graduation	3	13.63%	3	13.63%	6	27.27%
7.	Post-graduation	0	0%	0	0%	0	0%

Table 07: Classification of total patients selected according to Economic status.

			Number of	of patients	5		
No.	Economic status	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Below middle class	10	45.45%	06	27.27%	15	36.36%
2.	Middle class	12	54.54%	15	68.18%	29	61.36%
3.	Above middle class	0	0%	1	4.55%	01	2.28%

Table 08: Classification of total patients selected according to Diet.

			Number of patients				
No.	Diet	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Shakahari	05	22.73%	03	13.64%	08	18.18%
2.	Sarvahari	17	77.27%	19	86.36%	36	81.81%

Table 09: Classification of total patients selected according to Aaharvidhi.

			Number of	total			
No	Aaharvidhi	Group "A"	Percent	Group "B"	Percent	total	Percentage
1.	Samshan	4	18.18%	3	13.63%	7	15.9%

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2.	Adhayashan	3	13.63%	4	18.18%	7	15.9%
3.	Virudhashan	8	36.36%	7	31.81%	15	34.09%
4.	Pramitashan	3	13.63%	2	9.09%	5	11.36%
5.	Vishmashan	4	18.18%	6	27.27%	10	22.72%

Table 10: Classification of total patients selected according to Addiction/Habit.

No.	Addiction/Habit	Number	r of patient	total	Percentage		
		Group "A"	Percent	Group "B"	Percent		
1.	Tea	5	22.72%	4	18.18%	9	20.45%
2.	Tea- Tobacco	3	13.63%	5	22.72%	8	18.18%
3.	Coffe	1	4.54%	0	0%	1	2.27%
4.	Tea- Alcohol	9	40.9%	11	50%	20	45.45%
5.	Cigratee- Alcohol	4	18.18%	2	9.09%	6	13.63%

Table 11: Classification of total patients selected according to Agni.

No.			Number o	of patients	6			
INU.	Agni	Group "A"	Percent	Group "B"	Percent	total	Percentage	
1.	Samagni	3	13.63%	3	13.64%	6	13.64%	
2.	Vishmagni	7	31.83%	4	18.18%	11	25%	
3.	Mandagni	12	54.54%	15	68.18%	27	61.36%	

Table 12: Classification of total patients selected according to Dehaprakriti.

			Number of	of patients	6		
No.	Dehaprakriti	Group "A"	Percent	Group "B"	Percent	Total	Percentage
1.	Vatapitaja	3	13.63%	3	13.63%	6	13.63%
2.	Vatakaphaja	7	31.82%	6	27.27%	13	29.54%
3.	Kaphapittaja	12	54.55%	13	59.1%	25	56.83%

Table 13: Classification of total patients selected according to Sara.

Ī				Number of	of patients	6		
	No.	Sara	Group "A"	Percent	Group "B"	Percent	total	Percentage
Ī	1.	Pravar	0	0%	1	4.54%	1	2.27%
Ī	2.	Madhayam	18	81.82%	14	59.09%	32	72.72%
	3.	Avar	4	18.18%	7	31.81%	11	27.27%

Table 14: Classification of total patients selected according to Samhanan.

			Number o	of patients	5		
No.	Samhanan	Group "A"	Percent	Group "B"	Percent	Total	Percentage
1.	Sthula	1	4.54%	2	9.09%	3	6.81%
2.	Madhyam	17	77.28%	15	68.18%	32	72.72%
3.	Krish	4	18.18%	5	22.73%	9	20.46%

Table 15: Classification of total patients selected according to Deha-Pramana.

	Deha-		Number o	of patients	6		
No.	Pramana	Group "A"	Percent	Group "B"	Percent	Total	Percentage
1.	Pravar	2	9.09%	2	9.09%	4	9.09%
2.	Madhayam	14	63.64%	16	72.7%	30	68.18%
3.	Avar	6	27.27%	4	18.18%	10	22.72%

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ſ				Number o	of patients	5	total	
	No.	Satmya	Group "A"	Group Group Group		total	Percentage	
ſ	1.	Pravar	0	0%	1	4.54%	1	2.27%
ſ	2.	Madhayam	20	90.9%	18	81.82%	38	86.36%
	3.	Avar	2	9.09%	3	13.64%	5	11.36%

Table 16: Classification of total patients selected according to *Satmya*.

			Number o					
No.	Satva	Group "A"	Percent	Group "B"	Percent	Total	Percentage	
1.	Pravar	1	4.54%	1	4.54%	2	4.54%	
2.	Madhayam	16	72.73%	14	63.64%	30	68.18%	
3.	Avar	5	22.73%	7	31.82%	12	27.27%	

Table 18: Classification of total patients selected according to Aahara Shakti.

	Aahara		Number o					
No.	shakti	Group "A"	Percent	Group "B"	Percent	Total	Percentage	
1.	Pravar	1	4.54%	2	9.09%	3	6.81%	
2.	Madhayam	8	36.36%	9	40.9%	17	38.63%	
3.	Avar	13	59.09%	11	50%	24	54.54%	

Table 19: Classification of total patients selected according to Vyayam Shakti.

	Vuguam		Number of					
No.	Vyayam Shakti	Group "A"	Percent	Group "B"	Percent	Total	Percentage	
1.	Pravar	1	4.55%	3	13.63%	4	9.09%	
2.	Madhayam	8	36.36%	9	40.92%	17	38.63%	
3.	Avar	13	59.09%	10	45.45%	23	52.27%	

Table 20: Classification of total patients selected ad	ccording to Aaharaj Nidan.
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			Number o	total			
No.	Aaharaj Nidan	Group "A"	Percent	Group "B"	Percent	totai	Percentage
1.	Atisnigdh	8	36.36%	6	27.27%	14	31.81%
2.	Abhishyandi	5	22.72%	9	40.90%	14	31.81%
3.	Guruanna	6	27.27%	3	13.63%	9	20.45%
4.	Paryushita Bhojana	3	13.63%	4	18.18%	7	15.90%

Table 21: Classification of total patients selected according to Viharaj Nidan

			Number of	of patients		total		
No.	Viharaj Nidan	Group "A"	Percent	Group "B"	Percent	totai	Percentage	
1.	Bhojan ke turant bad Savari karna	4	18.18%	5	22.72%	9	20.45%	
2.	Bharvhan	2	9.09%	3	13.63%	5	11.36%	
3.	Bhojnottar Sharirik Chestaen	5	22.72%	5	22.72%	10	22.72%	
4.	Ativyavay	3	13.63%	4	18.18%	7	15.9%	
5.	Atimarg-gaman	8	36.36%	5	22.72%	13	29.54%	

I

Γ				Number o	total				
	No.	Chirkalita	Group "A" Percent		Group "B"	Percent	totai	Percentage	
Γ	1.	Below 1 Year	2	9.09%	3	13.64%	5	11.36%	
Γ	2.	1 to 2 Year	13	59.09%	14	63.63%	27	61.36%	
	3.	Above 2 Year	7	31.82%	5	22.73%	12	27.27%	

Table 22: Classification of total patients selected according to Chirkalita (Chronicity).

Table 23: Table showing the intensity and improvement of symptoms before and after treatment of liver and spleen disorder in 22 patients of group "A".

	Group "A"													
S.N.	Symptoms	Before treatment					After Treatment					% Relief		
9.11 .		G ₀	G ₁	G ₂	G ₃	Total	G ₀	G ₁	G ₂	G ₃	Total	70 Kellel		
1	Hepatomegaly	0	15	7	0	29	8	13	1	0	15	48.28		
2	Splenomegaly	0	22	0	0	22	8	14	0	0	14	36.36		
3	Anaemia	10	11	1	0	13	10	11	1	0	13	0.00		
4	Fever	0	18	4	0	26	5	17	0	0	17	34.62		
5	Loss of Appetite	0	5	9	8	47	9	9	4	0	17	63.83		
6	Vomiting	0	19	3	0	25	13	9	0	0	9	64.00		
7	Anorexia	0	3	10	9	50	12	7	3	0	13	74.00		

Table 24: Statistical analysis of medical work done for 90 days in different symptoms of liver and spleen disorder in 22 patients of group "A".

S N	Sumatoma	Me	an	Mean	Relief	Z-	р-	Domonia
S.N.	Symptoms	BT	AT	Difference	%	value	value	Remark
1	Hepatomegaly	1.32	.68	0.64	48.48	3.50	0.00	HS
2	Splenomegaly	1.00	.64	0.36	36.00	2.82	0.005	HS
3	Anaemia	.64	.64	0	0.00	0.00	1.00	NS
4	Fever	1.18	.77	0.41	34.75	2.71	0.007	HS
5	Loss Appetite	2.14	.77	1.37	64.02	4.04	0.00	HS
6	Vomiting	1.14	.41	0.73	64.04	3.77	0.00	HS
7	Anorexia	2.36	.59	1.77	75.00	4.23	0.00	HS

Table 25: Table showing the intensity and improvement of symptoms before and after treatment of liver and spleen disorder in 22 patients of group "B".

	Group "B"												
Symptoma		Befo	re tre	eatme	nt	After Treatment					% relief		
Symptoms	G ₀	G ₁	G ₂	G ₃	Total	G ₀	G ₁	G ₂	G ₃	Total	% rener		
Hepatomegaly	1	15	6	0	27	15	7	0	0	7	74.07		
Splenomegaly	15	6	1	0	8	21	1	0	0	1	87.50		
Anaemia	7	13	2	0	17	9	13	0	0	13	23.53		
Fever	6	11	3	2	23	15	7	0	0	7	69.57		
Loss Appetite	0	3	10	9	50	12	9	1	0	11	78.00		
Vomiting	11	7	4	0	15	15	6	1	0	8	46.67		
Anorexia	0	0	14	8	52	9	13	0	0	13	75.00		

Table 26: Statistical analysis of medical work done for 90 days in different symptoms of liver and spleen disorder in 22 patients of group "B".

	Group "B"													
Symptoms	Mean		Mean	Relief %	t-value	n voluo	Remark							
Symptoms	BT	AT	Difference	Kellel 70	t-value	p-value	кешагк							
Hepatomegaly	1.23	0.32	0.91	73.98	3.60	0.00	HS							
Splenomegaly	0.36	0.05	0.31	86.11	2.65	0.008	HS							
Anaemia	0.77	0.62	0.15	19.48	1.34	0.18	NS							
Fever	1.05	0.32	0.73	69.52	3.55	0.007	HS							
Loss Appetite	2.27	0.50	1.77	77.97	4.17	0.00	HS							

Vomiting	0.68	0.36	0.32	47.06	2.64	0.008	HS
Anorexia	2.27	0.59	1.68	75.01	4.28	0.00	HS

Table 27: Table showing percentage of improvement in intensity of symptoms after treatment of liver and spleen disorder in total 44 patients of group "A" and group "B".

No.	Symptoms	Group "A"relief %	Group "B"relief %
1.	Hepatomegaly	48.48%	73.98%
2.	Splenomegaly	36.00%	86.11%
3.	Anaemia	0.00%	19.48%
4.	Fever	34.75%	69.52%
5.	Loss Appetite	64.02%	77.97%
6.	Vomiting	64.04%	47.06%
7.	Anorexia	74.00%	75.01%

Table 28: Statistical analysis of laboratory test of 3 months (90 days) in 22 patients of group "A" of Yakritpleeha vicar.

Group "A"										
S.N.	Parameter	Mean		Mean	Relief	SD	SE	t-	р-	Rema
	Farameter	BT	AT	Difference	%	(±)	SL	value	value	rk
1	Hb%	11.94	12.0	0.064	0.50	0.37	0.078	0.81	0.43	NS
2	SGOT	46.41	43.55	2.86	6.16	2.68	0.57	5.02	0.00	HS
3	SGPT	40.0	34.95	5.045	12.63	13.69	2.91	1.73	0.09	NS
4	ALK PHOSEPHATAS	11.70	9.86	1.84	15.73	1.12	0.24	7.67	0.00	HS
5	B Total	1.35	1.28	0.077	5.19	0.138	0.027	2.84	0.01	S
6	B Direct	0.43	0.39	0.037	9.30	0.24	0.05	0.75	0.46	NS
7	Protein Total	7.12	7.08	0.045	0.56	0.67	0.15	0.32	0.75	NS
8	Albumin	4.59	4.51	0.08	1.74	1.13	0.24	0.32	0.75	NS
9	Globulin	2.52	2.55	0.03	1.19	1.29	0.27	0.12	0.91	NS
10	ESR	19.72	19.68	0.05	0.20	7.08	1.51	0.03	0.98	NS
11	RBS	122.40	119.63	2.77	2.26	5.22	1.11	2.49	0.02	S
12	BSPP	118.13	113.40	4.73	4.00	2.69	0.57	8.23	0.00	HS

Table 29: Statistical analysis of laboratory test of 3 months (90 days) in 22 patients of group "B" of Yakritpleeha vicar.

Group "B"										
	Parameter	Mean		Mean	Relief	SD		t-	р-	
S.N.		BT	AT	Difference	%	(±)	SE	value	value	Remark
1	Hb%	11.73	12.09	0.36	3.07	0.43	0.08	3.99	0.001	HS
2	SGOT	37.22	34.59	2.64	7.07	2.09	0.44	5.94	0.00	HS
3	SGPT	39.90	37.05	2.86	7.14	3.06	0.65	4.39	0.00	HS
4	ALK PHOSEPHATAS	11.74	9.81	1.96	16.44	1.32	0.28	6.86	0.00	HS
5	B Total	1.36	1.11	0.25	18.38	0.241	0.052	4.79	0.00	HS
6	B Direct	0.44	0.39	0.06	11.36	0.05	0.02	4.89	0.00	HS
7	Protein Total	7.37	6.65	0.73	9.77	0.51	0.11	6.59	0.00	HS
8	Albumin	4.64	3.98	0.66	14.22	0.59	0.126	5.20	0.00	HS
9	Globulin	2.61	2.66	0.06	1.92	0.81	0.17	0.31	0.76	NS
10	ESR	22.86	19.22	3.64	15.92	1.59	0.338	10.73	0.00	HS
11	RBS	126.36	121	5.36	4.24	7.61	1.62	3.30	0.003	HS
12	BSPP	118.14	113.63	4.50	3.82	4.48	0.95	4.71	0.00	HS

A.T. – After treatment

B.T. – Before treatment

H.S. – Highly significant **N.S** – Non significant

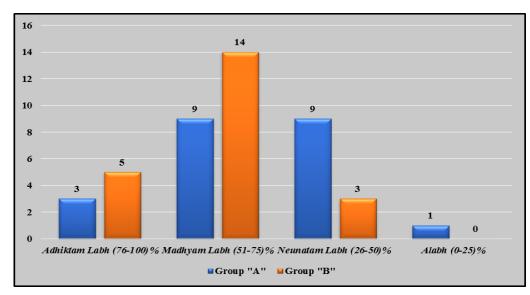
S – Significant **Hb** – Hemoglobin

TLC – Total leucocyte count **ESR** – Erythrocyte sedimentation rate **BSR** – Blood sugar random

BSPP - Blood sugar post prandial

Result	Grou "A"	-	Grou "B"	-	Total		
percentage	Number of patients	Percent	Number of patients k	Percent	Number of patients k	Percent	
Adhiktam Labh (76-100)	3	13.63%	5	22.72%	8	18.18%	
Madhyam Labh (51-75)	9	40.9%	14	63.63%	23	52.27%	
Neuntam Labh(26-50)	9	40.9%	3	13.63%	12	27.27%	
Alabh (0-25)	1	4.54%	0	0%	1	2.27%	
Total	22		22		44		

Table 30: Table showing overall effect of 90 days treatment of liver and spleen disorder in total 44 patients of Group "A" and Group "B".



Pathya Apathya

To cure any disease, as well as medicines, there is a need for diet, so the following diet was followed in the selected patients:

- Consume boiled water only.
- Consume half a litre of lukewarm water after waking up in the morning.
- Stay in the red light of the sun for 15 minutes in the morning. (Keep in mind that light should fall on most parts of the body.)
- Consume hot water (200ml), lemon (5 ml), saindhav (500 mg), and turmeric (1 gram) after half an hour of Yoga/Pranayama/Aasan/Morning walk.
- Use *saindhav* (500 mg) + ginger (3 grams) 10 minutes before meals.
- Consume 1 *Aamla* daily, especially.
- Use home ground spices, of which *Methi, Dalchini, Jeera, Haldee, Heeng, Ajavaayan, Lahasun, Kalimirch, Adarak* etc. should be consumed regularly. (Do not use garam masala.)
- Drink boiled water in sufficient quantity (4-5 litres) during the day.
- Do not drink water immediately after having food.
- Drink water only when you feel thirsty after 30 minutes
 of
 eating.

(Drinking water immediately after eating does not allow proper digestion of food.)

 After 1 hour of eating, drink half to 1 litre of water. (So that we can stop the lack of water in the body at night.)

DISCUSSION

Enlargement of the liver Due to the accumulation of *Kapha, Kleda,* and *Meda* in the liver, as a result of obstruction and *Aama Visha,* the growth of the liver is due to the increase in *Ras* and *Raktadhatu* contamination. This *Sama Rasa-Rakta Dhatu* comes to an end due to the high percentage of *Katu* and *Tikta rasa* in *Shobhanjanadi Kwath.* In this *Aushadh yoga,* by exploiting the *Snigdhata* and *Dravta* of the *meda* accumulated in the liver cells, it digests the *Aam,* which improves the functioning of the cells. This drug, by its *Sukshama Tikshana, Ushana* properties, removes the source of obstruction arising from *Sama Kapha.* In this way, *Manadya Gudika* and *Shobhanjanadi Kwath* suppress liver enlargement.

Atimadyapan, atisnigdha consumption of guru Aahar and the side effects of various chemicals and drugs all lead to liver function impairment, causing metabolic activities to become irregular and fat to accumulate in liver cells. They seem to damage cells by lying dormant in the body for long periods of time. Because of the medicine's *Sukshama Tikshana, Ushana*, and other properties, fat accumulation in the liver is prevented ^[11]. By which the toxic elements are able to come out from the liver due to the removal of the source of obstruction *(Shrotasavrodha).*

CONCLUSION

In the modern era, unhealthy diets for various types of health, overuse of medications, and liver and spleen disorders are affecting the health of ordinary people. Acharya Charaka has described Udar roga (abdominal disease) under Ashtamahagada^[12].Out of the eight types of this Udar roga (abdominal disease), the symptoms have been described in detail while describing liver and spleen disorders. In Manadya Gudika and Shobhanjanadi Kwath, Katu and Tikta ras predominant substances have been used in the constituent substances, which disintegrates the attainment. The drugs used in these are cough suppressants, tridoshamak, carminatives, and cough suppressants. The synonym of Guduchi is Jvaranashini. antipyretic, hepatoprotective, antibacterial, and antimicrobial. does the work of It works as tridoshamak, medhya, rasayana, rakta shodhak, jwarhar, and *medohar*. It is clear from the beneficial improvement percentage of the symptoms of both groups of patients, like agnimandya, aruchi, and anah, that according to Maanadya Gudika's falshruti, "योगः परिकरो नाम्ना

EUifitititiwork of *agnisandipana*, it worked to bring the *Agni* into equilibrium. *Kasthaushadhi* was used in *Manadya Gudika* and *Shobhanjanadi Kwath*, which are easily available. These do not contain metals of any kind, so the chances of any toxicity or side effects are extremely low. For this reason, it can be used for a long time in liver and spleen disorders. Ayurveda holds that the right diet for a particular disease is just as effective as medication. As prevention is better than cure, everyone should avoid *apathy* and follow *pathya* according to the shastras for a particular disease.

RESULT

In the research work, group "B" (Maanadya Gudika and Shobhanjanadi Kwath) patients got more benefits as compared to group "A" (Maanadya Gudika and Ushnodak). Because the contents of Maanadya Gudika and Shobhanjanadi Kwath are similar, they have a synergistic effect on liver and spleen disorders.

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