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Case Study

EFFECT OF *MUSTAKADI VATI* IN THE MANAGEMENT OF *GRAHANI DOSHA* IN CHILDREN – A CASE STUDY

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KEYWORDS: Grahani Dosha, Mustakadi Vati, Mala Parikshana.	 ABSTRACT BACKGROUND: Grahani is the Adhishthana of Agni and Agni Dushti is the main reason of the disease. The disease Grahani Dosha is very commonly seen in present pediatric practice and it aggravates to form a critical condition if the proper care is not taken. MATERIAL AND METHOD: A 8-years-old male patient of Grahani Dosha with complaints of defecation just after taking meal, Bowel frequency 3-4 times/day, irregular bowel habit, loss of appetite, generalized weakness, occasional pain in abdomen, slow weight gain for 5-6 months was treated by Mustakadi Vati in three divided doses of 10 Vati per day after meal for 8 weeks with SukhoshnaJala.
*Address for correspondence Dr. Sonam Chaudhary PG Scholar Dept. of Kaumarbhritya, IPGT & RA, GAU Jamnagar Gujarat, India. Email: <u>drsonam1@gmail.com</u> Mobile: 7905554010	RESULT : Marked improvement was found after 8 weeks of treatment i.e., bowel frequency reduced to 1 time/day, no weakness, abdominal pain relieved, 2 kg body weight gained. Hematological parameters along with routine and microscopic investigations of stool and urine were done before and after the treatment, all were found normal. <i>Mala Parikshana</i> was done before treatment which showed sinking of stool in water and foul smell and after 8 weeks of treatment again <i>Mala Parikshana</i> was done where floating of stool in water and no foul smell were found. CONCLUSION : This case study has shown that <i>Mustakadi Vati</i> is effective in improving the symptoms of <i>Grahani Dosha</i> . Marked improvements were found in all the symptoms of <i>Grahani Dosha</i> in Children.

INTRODUCTION

If a person consumes the food incorrectly is responsible for *Grahani Dushti*.^[1] Acharva Charaka mentioned functionally weak Agni i.e. Mandagni causes improper digestion of ingested food leading to Grahani dosha.^[2] And finally, unless treated promptly, Grahani Roga follows, as Grahani Dosha is preliminary stage of Grahani Roga. Acharya Sushruta mentioned that if an Atisara patient enjoys an unjust diet during the *Agnimandva* stage, it may lead to *Grahani Roga*^[3], therefore any disturbance in function of *Grahani* results in indigestion symptoms and is symbolized as Grahani dosha. Acharya Chakrapani mentioned that Ashraya is Grahani and Ashrita is Agni.^[4] Agni management is same as the management of Grahani Dosha. It should be therefore treated primarily for *Agni* correction by drugs with properties of Deepana and Pachana.

Ingredients of *Mustakadi Vati* have *Deepana* and *Pachana* properties as mentioned in *Bhavprakash*.^[5] **AIM AND OBJECTIVE:** To evaluate the effect of *Mustakadi Vati* in the management of *Grahani Dosha*

MATERIAL AND METHODS:

Place of Study

in Children.

OPD of Kaumarbhritya department, Institute for Post Graduate Teaching & Research in Ayurveda Hospital, Jamnagar, Gujarat, India.

Case Report

A boy aged 8 years old from Jamnagar city of Gujarat with OPD Registration no. PG35721 came with her mother in OPD of Kaumarbhritya department IPGT & RA Hospital, Jamnagar on 23rd April 2018 at around 11:00 am with the chief complaints of: -

1. Irregular bowel habit, defecation just after taking meal

2. Bowel frequency 3-4 times/ day

- 3. Occasional pain in abdomen
- 4. Loss of appetite
- 5. Generalized weakness
- 6. Slow weight gain

Patient had above symptoms since last 2 Years.

Haematological, Urine & Stool Investigations (Before & After Treatment) Table 1: Haematological Investigation

	B.T.	A.T.	
Total W.B.C.	7200/Cumm	11300/cumm	
Differential W.B.C. Count			
Neutrophils	42%	73%	
Lymphocytes	51%	20%	
Eosinophils	04%	05%	
Monocytes	03%	02%	
Basophils	00%	00%	
Haemoglobin	13.1gm%	12.9 gm%	
P.C.V.	36.5%	35.8%	
E.S.R.	08 mm/hr	12mm/hr	
Total R.B.C. count	4.89mil/cumm	4.69mil/cumm	
Platelet count	456 10 ³ / ul	358 10 ³ /ul	

Table 2: Urine Investigation

Physical Examination	B.T.	A.T.
Colour		
Appearance	NAD	NAD
Reaction	USHDHARA	
Sp.Gr.	and the	
Chemical Examination		
Albumin		
Sugar	NIL	NIL
Acetone		
Bile Pigments		
Microscopic Examination		
Pus cells		
RBC	NIL	NIL
Epi. Cell		
Casts		
Crystals		

Table 3: Stool Investigation

Macroscopic Examination	B.T.	A.T.
Consistency		
Colour		
Blood	NAD	NAD

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Mucus		
Reaction		
Microscopic Examination		
Ova, Cyst, RBC, Pus Cell, Fat globules		NIL
Vegetable Cells	Present	

On Systemic Examination

Inspection: No abdominal distension present

Palpation: Abdomen soft and tenderness present around umbilical region

Percussion: Dull sound, No fluid thrill

Auscultation: Bowel sound present

History of present illness

According to her mother, patient was asymptomatic approximately 2 years back. But since then patient started complaints of irregular bowel habit, bowel frequency 3-4 times/day, occasional pain in abdomen, loss of appetite, generalized weakness **Personal History** and slow weight gain. They have consulted to allopathic doctor and taken treatment for the same and got relief for some months but again above complaints started. Hence, they came to Institute for Post Graduate Teaching & Research in Ayurveda Hospital, Jamnagar, Gujarat, India for management.

Past History

Not significant.

Family History

Not significant.

Name: XYZ	Appetite: Poor	Bowel: Irregular	Wt.: 17 kg
Age/Sex: 8 yrs/M	Dietary habits: Veg.	Urine: Regular	Ht.: 110cms
Habitat: Urban	Prakriti: Vata-Kapha	Sleep: Sound	BMI: 14 kg/m ²
Occupation: Student	Agni: Mandagni	Bala: Avara	Immunization: Proper as per age
SES: Middle Class	Koshtha: Madhyam	Addiction: None	Growth & Development: Proper as per age

Ashtavidha Pariksha

Nadi (Pulse):72/min	Shabda (Speech): Clear
Mala (Bowel): Muhurbaddhama- muhurdravama	Sparsha (Touch): Normal
Mutra (Urine): Regular	Drika (Eyes): Normal
Jivha (Tongue): Coated	Akriti (Built): Krisha

Treatment Plan

Patient was treated on OPD basis. Drug prepared in the Pharmacy of Gujarat Ayurved University, IPGT & RA, Jamnagar.

Following Drug used for internal use:

Mustakadi Vati: Contains 4 ingredients- Mustaka, Kutaja, Ativisha, Bilwa.

Posology: Dose prepared by following Sharangdhara guideline^[6]

Dose	10 Vati
Dosage form	<i>Vati</i> (500mg)
Route of administration	Oral
Time of administration	Adhobhakta
Anupana	Sukhoshna Jala
Duration	8 weeks
Follow up	4 weeks

Pathya-Apathya^[7]

Patient is strictly advised to follow *Pathya palana* (do's and don'ts)

Pathya		Apathya	
Ahara	Vihara	Ahara	Vihara
 ✓ Purana Shali, Shashtika (1 yr. Old rice) ✓ Takra (Buttermilk) ✓ Masura (Red gram) ✓ Mudga (Green gram) ✓ Arhara (Split pigeon pea) ✓ Ushna Jala (luke warm Water) ✓ Agnideepaka (Appetizer) and Laghu Ahara (light diet) 	 ✓ Langhan (fasting) ✓ Vyayama (Exercise), ✓ Kaleshayanam (Sleeping on time) 	Snigdha (Oily), Kathina (hard), Guru (heavy), Ahara (diet), Dugdha (milk), Dushtambu (Contaminated water), Kanda (Tuber).	Ratrijagrana (late night awakening), Viruddhashana (Antagonistic food), Atapasevana, (Sun Bath) Vega- vinigraha (Urges detention), Shrama (Labor), Ativyayama (Excessive exercise)

Subjective Criteria of assessment

Muhurbaddhama muhurdravama mala pravritti^[8] (Irregular bowel habit)

Udarashula^[9] (Abdominal pain)

Arochaka^[10,11] (Anorexia)

Mukhavairasya^[12,13] (Tastelessness)

Balakshaya^[14,15] (weakness)

Jarana Shakti^[16] (Intake Capacity)

Abhyavarana Shakti^[17] (Digestive Capacity)

Objective Criteria of assessment

Sama and Nirama Mala Parikshana done^[18] (before and after treatment)

Sama Mala – Sinks in water foul smell

Nirama Mala - Floats on water

Haematological, stool and urine investigations done before and after treatment in which not found any significant findings.

RESULT

Bowel frequency reduced to 1 time/day in morning.

Abdominal pain relieved

Appetite increased

2 kg body wt. gained

On Mala Parikshana

Nirama mala lakshana found i.e. stool floats on water and no foul smell.

On Investigations (Haematological, Stool and Urine)

No significant findings found.

DISCUSSION

In *Grahani Dosha* due to *Mithya Ahara Vihara Sevana* vitiation of *Samana Vayu* and *Pachaka Pitta* occurs that disturb the normal function of *Grahani* which cause indigestion of food that leads to *Amotpatti* cause *Shukta Paka* by which formation of *Annavisha* occurs these all leads to *Grahani Dosha* and when further *Dosha dushti* occurs it leads to *Grahani Roga. Mustakadi Vati* contains ingredients *Musta, Ativisha, Bilwa, Kutaja* which have *Katu Tikta Rasa, Katu Vipaka, Ushna Virya* and *Deepana, Pachana, Sangrahaka* properties so, it pacifies *Pachaka Pitta* and *Samana Vayu* that results in *Agni pradipti*. Due to increase in *Agni,* improvement is seen in *Abhyavarana* and *Jaranashakti* and finally helps to get relief in symptoms of *Grahani Dosha*.

CONCLUSION

Faulty dietary habits and changing in life style pattern are the important cause of this disease. So, correction of diet pattern and lifestyle modification is mandatory among children. As Drug had shown better result in reducing the symptoms of *Grahani Dosha*, but to confirm the efficacy of above treatment protocol needs further larger sample clinical evaluation.

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