



Case Study

AYURVEDIC MANAGEMENT OF CHRONIC KIDNEY DISEASE –A CASE STUDY

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KEYWORDS: Chronic Kidney Disease, *Bakayan*, *Melia azedarach*.

ABSTRACT

The term Chronic Renal Failure applies to the process of continuing significant irreversible reduction in nephron number. In present scenario the cost of dialysis can't be afforded by every patient and understanding this by means of principles explained in *Ayurveda* is necessary to manage the disease & make the patient comfortable to perform his daily routine. CKD patients treated with Ayurveda may prolong dialysis or reduce its frequency, it also maintains the stage without further damage. Various recipes of *Ayurveda* are reported to be effective for CRF kidney failure and goal is to provide with a better drug formula. In this study, *Bakayan Swaras*, *Ksheerpaka* of *Ashvagandha*, *Shatavari* and *Gokshura churna*, Syrup Neeri KFT, *Shiva Gutika* are found to be quite effective in management of chronic renal failure. Here we are reporting a case of CKD of a 41 year old female patient who was given some Ayurvedic preparations. The drug under consideration is effective in increasing the gap between two successive dialysis cycles in few patients but as the sample size was very small no concluding statement can be given in this regards meanwhile trial drug (*Melia azedarach*) can be used as adjuvant therapy in patients of chronic renal failure along with other treatment modalities.

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INTRODUCTION

Chronic kidney diseases have become a major public health problem. The direct description of the diseases is not available in Ayurvedic science, so we can compare the disease with Ayurvedic concepts only on the basis of *Nidanpanchaka*.

With increasing life expectancy & prevalence of life style diseases, US have 30% increases in prevalence of Chronic Kidney disease in the last decade^[1]. Unfortunately, from India there is limited data on prevalence of Chronic Kidney disease, in western countries, diabetes & hypertension account for over 2/3rd of the cases of Chronic Kidney disease^[2]. In India Diabetes & Hypertension account for 40-60% of Chronic Kidney disease cases^[3]. As per Indian council of Medical research (ICMR) data, prevalence of diabetes in Indian adult population has rises to 7.1% and in urban population 28%.^[4,5]

Modi and Jaha^[6] reported an age adjusted incidence of ESRD as 229/million population, this is more than double of what has been believed

(100/million) over a long time, was the previous data not very exact or the prevalence has actually rises due to increased longevity & life style diseases. As one can see from published Indian studies, the population has increased & criteria used for Chronic Kidney disease are different by different researches.

Clinical and laboratory manifestation of Chronic kidney diseases include fluid, electrolyte and acid base disorders, disturbed potassium homeostasis, metabolic acidosis, disorders of calcium and phosphate metabolism, cardiovascular abnormality include ischaemic heart diseases, heart failure, hypertension, left ventricular failure and pericardial diseases, haematological abnormalities include anemia, neuromuscular abnormalities, G.I.T and nutritional abnormalities, endocrine and metabolic disturbance etc^[7].

Case Report-A 41 year old female patient came to N.I.A. O.P.D. on 16-6-2015 with following complaints-

Chief complaints - Itching all over body, swelling on face and feet since 2 years.

Associated complaints- Generalized weakness, Indigestion.

History of present illness

The patient was quite asymptomatic 2 years before. Gradually she developed itching all over body. After 2 days she noticed boil formation on skin followed by swelling on face and feet. Patient with these complaints came to NIA OPD (OPD Case No. 22, National Institute of Ayurveda, Jaipur). Then she was advised to go for sonography. On that basis she was diagnosed with Medical renal disease then accordingly the treatment was started.

Past history-No h/o Diabetes, Hypertension, Tuberculosis, No any surgical history.

Drug history-No any drug history.

Family History-No any relevant family history.

Vitals at time of first visit to N.I.A.- B.P.- 100/70 mm of Hg, Pulse-82/min, Afebrile, R.R- 18/min.

Physical examination - General condition - fair, Pallor-+, Icterus-0, Cyanosis-0, Clubbing-0, Pedal oedema with facial puffiness, Lymph node not palpable, Respiratory system- NAD,

CVS-NAD, GIT-NAD, CNS-NAD

Investigations Done

Blood examination- (on dated 16-06-2015)

HB - 8.2

ESR- 40 mm/hr

RFT

Serum urea-143 mg /dl

Serum creatinine-5.2 mg/dl

Urine protein -2+

USG: Dated (18-06-15)

-B/L Echogenic kidney with poor corticomedullary differentiation and relatively small sized Right kidney, MRD.

The patient was treated with certain combinations of the drugs.

1. *Bakayana Swaras* 15ml BD before meal
2. *Ksheerpaka* of *Ashvagandha*, *Shatavari* and *Gokshura churna* 20 ml BD
3. Syrup Neeri KFT (Aimilpharma) 10 ml TDS
4. *Shiva Gutika* 250mg BD

These medicines were given to the patient for six months with follow up of 7 days.

RESULTS

Showing results on various parameters

Date	16-06-2015	23-06-15	29-06-15	17-07-2015	3-12- 2015
Blood Urea (mg/dl)	143	170	157	100	100
Sr.Creatinine (mg/dl)	5.2	3.0	2.8	2.5	2.0
Urine protein	+2	+2	+1	+2	+1

DISCUSSION

Probable mode of drug action

1. *Bakayana Swaras*

This drug possesses nephroprotective activity^[8]. The drug having *Katu*, *Tikta*, *Kashaya Rasa* which also has the property of *Deepana*, *Pachana*, *Lekhana* and *Shodhana*^[9].

It is also *Adhobhaga Doshahar* and *Virechaka*. (सु.सू.३९/४)

2. *Ksheerpaka* of *Ashvagandha*, *Shatavari* and *Gokshurachurna*

It leads to *Utrottar Dhatu Pushti* and improves *Rogibala*. *Gokshura churna*^[10] acts on *Mutravaha Sansthan*. It has properties of *Srotoshodhana* and *Mutravirechana*.

3. Syrup Neeri KFT

It is a perfect polyherbal regime, developed and formulated on the scientific concept, which exerts overall therapeutic activity with safety in various types of urinary disorders like urinary calculi, UTI, cystitis, prostate associated disorders.

These extracts are the enriched sources of several phytoconstituents like arbutin, tannins, quinolone derivatives, bioflavanoids, glucosides. It acts as nephroprotective, antioxidants, immunomodulator. Ingredients (chemical compounds) used in this syrup are as follows *Gokshru*, *Punernava*, *giloe*, *Makoya*, *Palashpushp*, *Sirisa*, *Haridra*, *Shigru*, *Dhania*, *Varun*, *Shwet Parpati*, *Lalchandana* etc.

A scientific study published in the Indo American journal of pharmaceutical research gauged the efficacy of established kidney protective herbs in Ayurvedic formulation, amongst which Neeri KFT was shown to produce promising results in experimental subjects by significantly reducing the increased levels of kidney function parameters such as serum creatinine, uric acid and electrolytes and also helped to maintain histological parameters of kidneys.

4. *Shiva gutika*

It contains *Shilajit, Shunthi, Pippali, Katuka, Karkatashringi, Maricha, Vidarikanda, Talishpatra, Vamshalochana, Patra, Twak, Nagkeshara, Ela, sesamum* oil, sugar, Ghee, honey. *Shilajit* is the main ingredient of *Shiva Gutika*. It is useful in alleviating *Tridosha*. It possesses *Rasayana, Vrishya* properties^[11]. It is said that there is no such diseases which cannot be cure with *Shilajit*^[12]. *Shilajitu* is also used as *Yogavaha*, as it increases efficacy of many drugs. *Shilajitu* has significant anti-inflammatory, analgesic and antioxidant activity.^[12]

CONCLUSION

On the basis of above case study it can be concluded that *Bakayan Swaras, Ksheerpaka* of *Ashvagandha, Shatavari* and *Gokshurachurna*, Syrup *Neeri KFT, Shiva Gutika* are quite effective in management of chronic renal failure.

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Cite this article as:

Chhavi Gupta, Chhaya Gupta. Ayurvedic Management of Chronic Kidney Disease –A Case Study. AYUSHDHARA, 2016;4(3):1198-1200.

Source of support: Nil, Conflict of interest: None Declared

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