



Ayurvedic Concept And Management of Cirrhosis of Liver

**Dr. JAISHREE
BHIMRAOJI
GAWANDE
(RUNGHE)**

M.D.(KAYA) PhD(Sch), ASSOCIATE PROFESSOR & HOD DEPT. OF KAYACHIKITSA, POST GRADUATE TEACHER(KAYACHIKITSA), PMT'S AYUVED COLLEGE SHEVGAON DIST:-AHMEDNAGAR,

**DR MANOJ
R.RUNGHE**

(M.D.) PGDEMS(EMERGENCY MED.) DYA, PMT'S AYURVED COLLEGE, SHEVGAON DIST:-AHMEDNAGAR

**DR PRADIP S.
PAWAR**

M.D. (SAMHITA) JAIPUR, ASSISTANT PROFESSOR , MANJARA AYURVED COLLEGE LATUR

ABSTRACT

Hypersensitivity to certain drugs (alcohol & nsoids) and its liver manifestation is known to us.

Rat race in a day to day life & resultant stress is contributing to liver disease.even with advances in medicine dietary restriction play an important role of liver disease.

Alcohol is also predisposing factor for cirrhosis of liver (yakrut vyadhi)

In food allergies, to find out toxigance & avoid it is only effective treatment.

Cirrhosis of liver is treatable with ayurved medicine according to condition.

Liver cirrhosis may be sequel in congestive cardiac failure.

Even if cause is alcohol it is also reaches the liver through blood.Generally the pH of blood tend to be acidic in the liver disease.

Purgative and dirutics are useful in this disease.

We can prolong the life of patient with the help of ayurvedic treatment in liver cirrhosis.

KEYWORDS : yakrut vyadhi

INTRODUCTION:-

Next to air we breathe and water we drink,food has been basic to our existence.

In fact,food has the primary concern of man in his physical environment throughout all recorded history.Man must "Eat to live and live to eat"what he eat will effect in a high degree his ability to keep well to work to be happy and live long.

Lord aatreya explained importance of ahara(diet).food and drink with desirable smell,taste, and touch have been taken according to prescribed method in granths is said to be vital strength.

The expert on basis of observing their result directing,because the condition of internal fire depends on their fuel.They produced energy to the mind,constitution of *dhatu*,strength.

Modern dietetic theory(balanced)diet theory is totally depends on calorie requirement And proximal principal (vitamins &minerals)and their uses.

Ayurveda explained *toxicity of alcohol* as "all drugs and diets which dislodge the various *Doshas* but donot expel them out of body are to be regarded"as unwholesome diet and alsoexplained their 18 constituents.charakacharya also explained the diseased caused by *alcohol* cha.chikitsa 24/104.

The result of *alcohol* on the body can be correlated with *gara visa* i.e. two types –one composed of non toxic substances and other composed of poisonous substances.the formeris called *gara* and later artificial.the effect of *gara visa* on body is very slowly just like effect of *alcohol* The diseases caused by *alcohol* is *asukari*(acute)as well as emergency with some complication.i.e.O.V.&PHYPERTENSION.H.R.SYMDRONE

LITERATURE REVIEW:-

It is impossible to study of cirrhosis of liver in Ayurveda isolating from other liver disease.

Liver is considered as a visceral organ or even as a part of GI tract (*koshthaangga*) in Ayurveda (A.H.SAA.3/32)

The organs named as *koshthaangga* are in some way connected with GI tract.

Liver is directly connected to the tract through the bile duct.

Liver(*yakrut*) is also termed as *koshtha* in susruta samhita s.ci.2/12)

Yakrut is considered as one among ten sites of abscess(A H NI.11/5

In the chapter on abdominal enlargement,both splenomegaly & hepatomegaly mentioned.

In the case of splenomegaly it is mentioned that *udaavarta*,.....pain and distension of abdomen occur in the predominance of *vaata*;

Confusion,thirst,burning sensation,& fever in predominance of *pitta*.

Heaviness,anorexia, & hardness occur in predominance of *kapha*... ..A.H.NI.12/27

The description of liver enlargement is compare to that spleen enlargement (AHNI12/28

Thus according to *vagbhata*,there are three types of splenomegaly & hepatomegaly.but

According to *charak samhita* there are five types(charak sutra 19/34)

As per classification,we consider cirrhosis because the involvement of

blood in it to be stressed.

In cirrhosis the degeneration begins as an inflammation of liver cells. hence vidradhi to be considered. In the etiology of *vidradhi* factor that vitiate blood, trigger the pathogenesis

(AH ni11/1). In *vata shinita* also the same etiology is mentioned (AHNI 16/1)

Factors causes vitiation of blood.....cs24/5-10

SR NO	AAHARA(FOOD)	VIHARA(HABITS)
1	Teekshna, ushna food and drinks	Day sleep
2	Salty, alkaline, acidic, acrid in taste	Sleep after food, anger
3	Excessive use of hoarse gram, black gram, beans, sesame, sesame oil	Excessive exposure to sun & hot
4	Excessive use of sea food	Suppression of urge vomiting
5	Excessive use of heavy unctuous, liquid food	Abstinence from bathing time at prescribed time
6	Excessive use of curd, whey, vinegar, beer, acetic soup of cereals	Excessive physical exercise, trauma Heating upto body Indigestion
7	Incompatible food materials	Eating before the digestion of previous food
8	Use of exytramealy soaked food	Autumn season due to nature of season

LAKSHANE OF VITIATED BLOOD:-S SOO 14/21

VAATA	PITTA	KAPHA
Foamy, blackish, brownish, rough Dilute, blood that flow Fast, & which does not coagulate	Bluish, yellow, greenish, or blackish, blood which is foul Smelling, this will also not clot, once shed, this will not At tract insects such as ants & insects	Blood having the colour Of water mixed with iron Oxide. (gairik) It will be unctuous & sticky It will flow slowly, it Resembles fresh.

Once there is oedema in liver cells it may either resolve or persist.

Cirrhosis is the progressive and widespread death of liver cells associated with inflammation & fibrosis leading to loss of normal lobular liver architecture and thus loss of normal hepatic vasculature with the development of portal systemic vascular shunt & the formation of nodules rather than lobules due to proliferation of surviving hepatic cells.

Formation of serous fluid as the sequel of the inflammation of liver cells is the result of undissolved inflammation. All liver diseases need not culminate in hepatomegaly (*yakrutodara*). The stage of formation of fluid is termed in ayurveda as *jatodakavastha*.

The common hepatitis need not lead to ascites. Inflammation usually subsides and there are no further complications for the development of ascites there should be accumulation of filth (*malasanchaya*).

Approximately 20% of chronically infected patients will develop cirrhosis after 20 years of infection & 50% after 30 years. (once cirrhosis is present 2-5% 2 years will develop hepatocellular carcinoma.)

There are two types of cirrhosis.

liver cells may shrink and reduce the size of liver (usg)

liver will enlarge.

Even then there is impairment in liver function as indicated by SGOT, SGPT

And alkaline phosphate, the disease need not develop into ascites. The etiology of *udara* accumulation of filth is mentioned. (AHNI..12/1)

Carakacharya states that substances present in the body can be broadly into waste materials (filth) and clarified material (essence). cha sha6/17

Hareeta has opined that infective microbe will reach liver from the intestines. perhaps this may be *entamoeba histolitica*. In amoebic dysentery we find that subsequently liver is infected by *entamoeba*. amoebic hepatitis is very common. when cirrhosis is not presenting

Fluid accumulation, the symptoms will not be prominent.

There will be vague symptoms such as weakness and indigestion..

Clinical features of liver cirrhosis:-

- Hepatomegaly
- Jaundice
- Ascites

1	Circulatory change	Spider telangiectasia, palmer erythema, cyanosis
2	Endocrine change	Loss of libido, hair loss
3	In men	Gynaecomastia, testicular atrophy, impotency
4	In women	Breast atrophy, irregular menses, amenorrhea
5	Haemorrhagic tendency	Easy bruises, purpura, epistaxis, menorrhagia, portal hypertension, splenomegaly, collateral vessels, varicel bleeding, fetor hepaticus, Hepatic encephalopathy.
6	Other features	Pigmentation, digital clubbing, low grade fever

Causes of cirrhosis:-

- *any cause of chronic hepatitis
- *alcohol
- *primary biliary cirrhosis
- *primary sclerosing cholangitis
- *secondary biliary cirrhosis
- *haemochromatosis
- *Wilson's disease
- *alpha 1 antitrypsin deficiency
- *cystic fibrosis

The route of microbes and viruses entering the liver is through blood. Even if cause is alcohol it is also reaches the liver through blood. Generally the pH of blood tends to be acidic in the liver disease. This constant acidity damages liver cells. Malnutrition along with increased acidity of blood causes inflammation to the liver cells.

Liver cirrhosis may be sequel in congestive cardiac failure. There is a condition called

Hepato renal syndrome. There may be renal failure due to hepatic disorder. Also when liver is damaged, hepatic coma occurs affecting the brain. All these prove the ayurvedic

Contention that all internal organs are closely interrelated.

Liver diseases are diseases occurring in the middle pathway of disease (*madhyam rog marga*). AH500 12/47/48.

AIMS & OBJECT:-

- 1) To evaluate the concept of cirrhosis of liver in ayurvedic view.

TREATMENT:-

Separate chapters are not devoted in early classics for disease of liver & spleen. In *Bhaishajratnawali* we have chapters on disease of spleen and liver. (*pleeha-yakrut-adhikarana*). There are a lot of preparations in above chapters aimed at purification of blood. Some have diuretic action.

- 1) *Arka lawan* is safe medicine mentioned in this chapter. BR Pleeha 3..orally..
- 2) *Sarpunkha* (tephrosia purpura) paste of route with buttermilk.
- 3) *Guduchyaadi churna*. (guduchi, aconite, dry ginger, chitraka, indian night shade, nut grass tuber, long paper, barley alkali, ferrous sulphate, & champak.)
- 4) *Bhrishat-loknath-rasa* with juice of aloe vera & *solanum nigrum*
- 5) *Traayantyaadi kwatha*....purgative
- 6) *Gomutra haritaki*..more effective
- 7) *Dashamoola panchakoladi kwatha* with *punarnavasao*
- 8) *Aalopaadi kwatha* in (*jaldodhara*)

- 9) In ascitis occurring in liver disease should be managed with su-
varn makshik bhasma Silajatu, is very beneficial
- 10) In chronic alcoholic cirrhosis, where there are nodules and liver fi-
brosis should administer abrasive ...lekhana .panchatiktaguggu-
lu....with drakshadi kwatha

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