



AYURVEDIC MANAGEMENT OF HEPATOMEGALY W.S.R. OF YAKRIT DALYODAR – A CASE STUDY

Dr. Jyoti Jangid

P.G. Scholar, P.G. Dept. of kayachikitsa Madan Mohan Malviya Govt. ayurveda College, Udaipur (Raj)

Dr. Ravi Sharma*

Prof. & H.O.D., P.G. Dept. of kayachikitsa Madan Mohan Malviya Govt. ayurveda College, Udaipur (Raj) *Corresponding Author

ABSTRACT

Hepatomegaly is an enlargement of the Liver. It is caused by inadequate life style and food habits, infection (like viral hepatitis), toxins (such as alcohol), genetic disease or autoimmune disease. Benign and cancerous tumors may also cause liver enlargement. In Ayurveda hepatomegaly (*Yakritdalyodar*) is described as one of the type of *Udara Roga*. In Ayurveda there are many herbs and natural remedies available for treatment of liver disorder. In this case study a 33 yrs old married patient was reported in Kayachikitsa OPD, Govt. Ayurved Hospital and Research Centre associated with M.M.M. Govt. Ayurvedic College, Udaipur with complain of anxiety, abdominal pain, constipation, tenderness in Rt. Hypochondrium, gaseous abdomen, coated tongue, excessive thirst. The condition is well managed with Ayurvedic medicines viz. *Triphala Churna*, *Mandur Bhasma* in short time effectively. The patient recovered in 10 days prescription of these medicines and the LFT is expressive as normal.

KEYWORDS : Hepatomegaly, *Yakritdalyudar*, *Udara Roga*.

INTRODUCTION

Present day lifestyle especially of a hardworking teacher is difficult with respect to his diet habits. The maintenance of the food regulation and life style are difficult and leads to the indigestion, a chief cause of *Udara Roga*. i.e. ascites and organomegaly. Even though many infectious conditions are placed before to get a "Hepatomegaly" in medical practice. In Ayurveda according to sign and symptoms and the pathology of the disease we can consider this clinical entity as *Yakritdalyudar*. There is no detailed description of *Yakritdalyudar* but Acharyas correlate its symptoms with *Pleehodar* as "*Evameva Yakridapi Dakshinparshvasthan Kuryat.*" Clinical features of *Yakritdalyudar* are *Dorba* (weakness), *Aruchi* (anorexia), *Avipaka* (Indigestion), *Varcha Graha* (retention of stool), *Trishnadhikya* (excessive thirst), *Mandagni* (indigestion), *Udarshool* (abdominal pain), *Tamapravesh* (anxiety). Main causative factor of this disease is *Mandagni*, altered food habits etc. The presented case has no history or evidence of generating the hepatomegaly other than his altered food habits and life style.

CASE PRESENTATION

A 33 yrs old hindu married male patient residing Udaipur presented to the OPD of *Kayachikitsa Ayurvedic College*, Udaipur on 14/3/19 (OPD No. 3265) with complain of anxiety, constipation, tenderness in Rt. Hypochondrium, gaseous abdomen, coated tongue, excessive thirst, polyurea, abdominal pain and burning after taking food. The pain was aggravated by oily, spicy and heavy foods. Patient's life style was disturbed, irregular food habits and sleep was also disturbed. There was no significant family history. The Ayurvedic diagnosis on these condition is *Yakritdalyudar* can be correlated with Hepatomegaly.

On physical examination, vitals were normal and was fatty built. His pulse rate was 80/min, BP- 140/80 mmofHg and respiratory rate 20/min with normal body temperature. The skin, mucous membrane were normal. On systemic examination, GIT examination showed the tenderness in right hypochondrium and mild liver enlargement was observed. There was no any abdominal mass was reported. Before coming here patient look out another physician and he has suggested some essential investigations like complete blood count, Liver function tests, urine complete and USG whole abdomen. First time he diagnosed hepatomegaly in 6/12/18. USG suggested showed hepatomegaly with fatty infiltration of liver grade – . After that patient took Allopathy and other

treatment but didn't get satisfied. Then patient came in *Anusandhan Hospital OPD*.

Table No. 1 Showing blood investigation report before and after treatment

Particulars	B.T. (13/10/18)	A.T. (24/3/019)
SGOT	55.2 U/L	27.80 U/L
SGPT	52.3 U/L	37.10 U/L

MANAGEMENT AND TREATMENT

The treatment planned according to patients condition. First of all patient is advised his life style and dietary changes (*Pathya* and *Apathya*) and some medicines for 10 days. After 10 days patient came for follow up and reported relief in his complaints and patient's reports showed remarkable improvement in his reports in SGOT, SGPT, HB% etc. Then same treatment was continued till his for next 10 days due some mild symptoms present. Some medication added according to patient's complaint. After next 10 days follow up, patient visited to hospital, there was complete relief in symptoms. After treatment reports were showed encouraging results with improvement in liver echotexture. (Table no.1)

Table No. 2 Showing given treatment and follow up.

Date	S.No.	Given treatment	Anupana
14/3/19	1.	Triphala churna 3gm Madoor bhasma 500mg BD	Madhu
22/3/19	2.	Same repeated	Madhu
03/4/19	3.	Repeated same t/t	Madhu

In this preparation *Triphala Churna* works as *Rechana Dravya* because *Yakritdalyudar* is one type of *Udara Roga* and *Rechana* is specially mentioned in *Udara Roga* by Acharyas and *Triphala* also have *Rasayana*, *Agni Pradipak* and *Kapha-Pitta Shamak* properties. *Mandoor Bhasma* also have hepatoprotective properties and it also helps to increase blood cells in our body.

DISCUSSION

In present case *Triphala Churna* and *Mandoor Bhasma* is advised to the patient. *Triphala* contain *Haritaki*, *Amalaki* and *Bibhitak*. *Haritaki* is a good liver tonic, promote overall body health and for the support of digestive system and functioning and have *Vatanulaman* property. *Bibhitak* is laxative in nature, cure loss of appetite and enhance immunity. *Amalaki* also

balance *Agni*. In *Ayurveda* all *Udara Roga* caused by mainly due to *Agni Mandhya* and all the drugs contents have property of increase the *Agni*. *Mandoor Bhasma* is a iron formulation. It contains iron dust, *Triphala* decoction, cow's urine and Aloe vera juice. In *Ayurveda* it is used for anemia, jaundice, hepatomegaly(*Yakritdalyudara*) and also in spleenomegaly (*Pleehodara*). In this formulation *Triphala* and cow's urine works as a *Virechana Dravya* which helps in detoxification of liver and whole body and *Yakritdalyudara* is one type of *Udara Roga* and *Virechana* is first line of treatment in *Udara Roga* so it is helpful in *Yakritdalyudara*.

CONCLUSION

Results of this study indicates that the *Ayurvedic Drugs* has the effect in hepatomegaly by improving the health of liver. It is concluded that *Ayurveda* is useful for treating *Yakritdalyudara* as an alternative to purgative drugs. In present case we get remarkable improvement in clinical and objective parameters with *Ayurvedic* treatment. This is quite safe and no any adverse effect. *Ayurvedic* treatment is proved to be an effective, cheapest and safe in management of hepatomegaly(*Yakritdalyudara*).

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