

Ayurveda: An ambient way to explore and manage the irritable bowel syndrome

***Pandey Nitin, **Tripathi A.K**

* Professor, Department of Kayachikitsa, Himalayiya (P.G) Ayurvedic Medical College & Hospital, Dehradun, Uttarakhand

Corresponding Author E-mail: drpnitin@gmail.com

**Professor, P.G Department of Kayachikitsa, Gurukul Campus, Haridwar, U.A.U, Director of Ayurveda, Uttarakhand

Abstract

Keywords

Ayurveda,
Irritable Bowel
Syndrome,
Psychosomatic

In the ceaseless expedition for material comforts man has been losing his health. The basic reason why man is reeling under countless problems is because he has not been following the codes of healthy living. Ayurveda has already considered this problem in depth in the light of its comprehensive psychosomatic approach towards the entire problem of health and medicine. Irritable Bowel Syndrome (IBS) is one of the commonest diagnosis/conditions encountered in clinical practice but one of the least well understood, given to patients attending gastroenterology clinics. The diagnosis usually follows the failure of a consultant to find anything wrong in a patient complaining of bowel symptoms. As there is no single disorder in Ayurveda which can be exactly co-relate with IBS because Ayurveda is based entirely on different basic principles. This paper present a comprehensive approach to IBS through Ayurveda.

Introduction

Irritable bowel syndrome (IBS) is a common highly prevalent functional gastro-intestinal disorder (FGID) that places an enormous burden on resource-challenged healthcare systems. The prevalence of IBS is believed to be increasing for both sexes and in all age groups and the risk is expected to be higher among women and young adults. It has a pooled global prevalence of 11.2%

and is more prevalent among women^{1,2}. Irritable bowel syndrome (IBS) is a chronic, cyclical and relapsing functional bowel disorder characterized by abdominal pain, bloating, and changed bowel habits³. IBS seriously affects the quality of life due to its relapsing and chronic nature in which symptoms may change over time⁴.

There is no exact synonym or equivalent term for Irritable Bowel Syndrome in Ayurveda classics. As it has been rightly said that it is not always possible to name a particular disease and not all diseases can be given a definite nomenclature⁵. In Ayurveda classics so many G.I diseases described resemble with symptoms commonly found in IBS. A careful review of the manifestations of various GI diseases, described in Ayurveda reveals that some of the disorders definitely have some clinical symptoms observed in the patients of IBS e.g. *Vataja & Kaphaja Atisara*, *Grahani* and its variants, *Pravahika*, *Pakvashayagatavata*. However, *Grahani Dosha* - a stage found in the pathogenesis of all these diseases may be considered as IBS. Diagnosis of IBS remains a challenge as there is no acceptable biochemical, histo-pathological or radiological tests available. Presently it is diagnosed by using symptom-based criteria initially given by Manning which were subsequently changes and incorporated into various iterations of the Rome criteria⁶⁻⁹.

Aim: -

1. To explore the probable co-relation of IBS in Ayurveda and various Ayurvedic concepts and principles related to it .
2. To explore the best and possible ways for the management of IBS through Ayurveda

Materials and Methods:-

Materials related to IBS in Ayurveda, its present status, shortcomings, solution and other Related topics have been collected. We have used various classical texts and also referred to the modern books and searched various websites to collect information on the relevant topics.

What Ayurveda says?

As there is no any GI disorders in Ayurveda which can be exactly co-related with IBS, but on the basis of symptomatology it is very nearer to *Grahani dosha*, a disease described in Ayurveda under GI disorders. As per acharya Chakrapani, *Agni*, being the fundamental factor in maintaining health and in producing diseases so Protection of *Agni* is very essential in treatment of all diseases. *Arsha*, *atisara* and *grahani dosha* are said to be *paraspara hetu* which means one disease becomes cause for another disease.

As per ayurveda classics, *Grahani* is said to be situated above the *Nabhi* and between the *Amashaya* (stomach) and *pakwashaya* (large intestine)¹⁰⁻¹¹ and is seat of *Agni*, it is so called since it retains the food for proper digestion and assimilation. It holds the food just above the umbilical region and it is supported and nourished by the *Agni*. *Grahani* with help of *agni* holds the undigested food and pushes forward digested food, but when *Agni* becomes weak and vitiated due to *vidagdha ahara* (afflicted by improperly digested food) i.e. *sama dosha* (*dosha* associated with *ama*) it vitiates the *grahani* and releases food in the form of *ama* i.e. undigested form.

Predisposing Factors:

As per Ayurveda, diseases are classified in two types i.e., *Sharirika* (Somatic) and *Manasika* (Psychological)¹². After some time, any *Sharirika Roga* that a person has may transform into *Manasik Roga*, and the same pathogenesis applies to the transformation of *Manasik roga* into *Sharirika Roga*. This demonstrates that Ayurveda has made the most of the significance of *Manas* in the development of diseases.

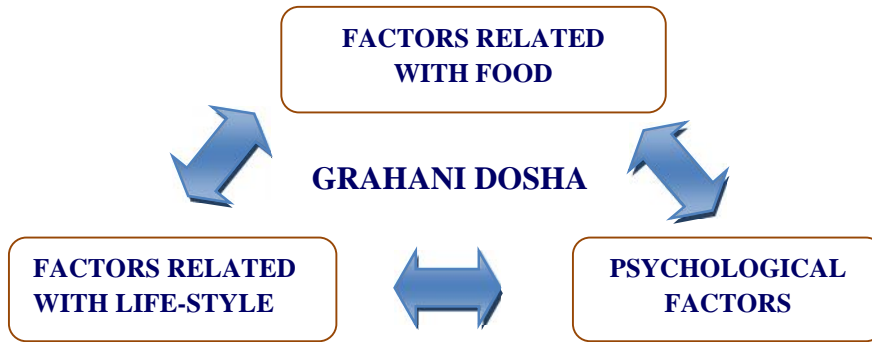


Fig.1

Food & life-style factors: Intake of unwholesome , heavy , cold, excessively unctuous and polluted food, Indulgence less quantity of food or irregular meals or strong alcoholic drinks excessive intake of astringent/ bitter and pungent food, Improper administration of purgation,

emetic and oleation therapies, Seasonal perversions, Suppression of manifested natural urges etc

Psychological factors: Anxiety, fear, depression etc¹³

Variants of Grahani dosha & IBS¹⁴⁻¹⁵:

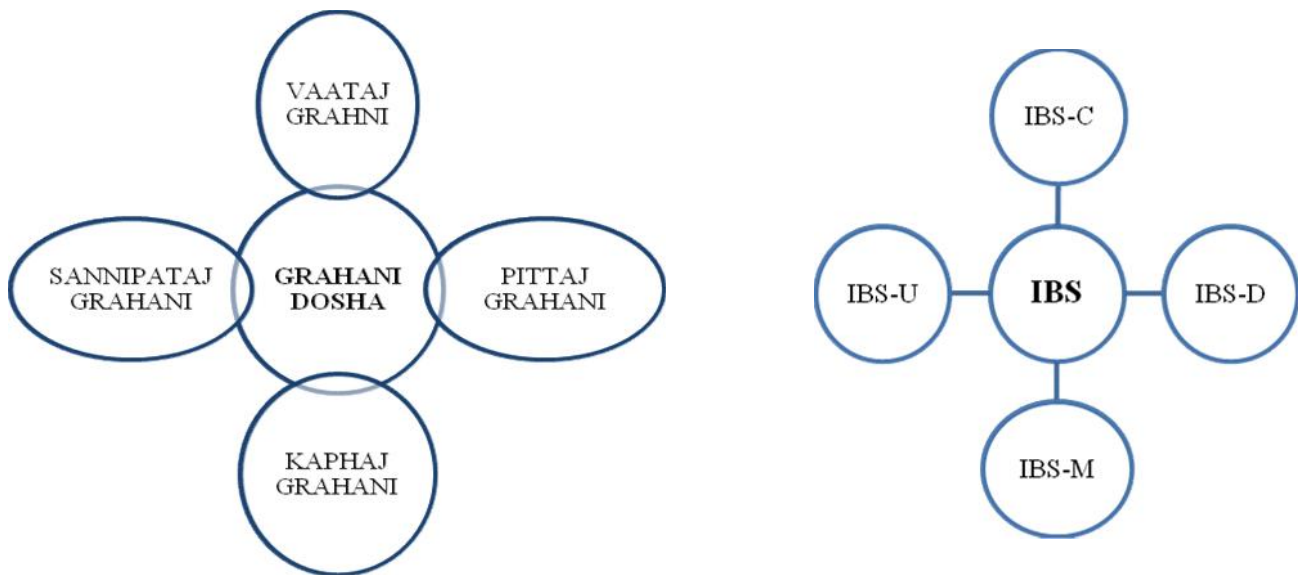


Fig.2

For clinical practice and epidemiological studies, Rome IV classification into IBS subtypes is based on the patient’s perception of their predominant type of abnormal stool consistency (using Bristol Stool Form Scale), not on the frequency of defecation. According to Rome III, IBS was divided into IBS with diarrhea (IBS-D), IBS with constipation (IBS-C), mixed IBS (IBS-M), and

unspecified (IBS-U); based on the proportion of all bowel movements that were loose/hard. In Ayurveda, based on involvement of *doshas*, *Grahani* disorders are of four types in which *vataj grahani* manifested as irregular bowel habit, *pittaj grahani* with diarrhoea, *kaphaj grahani* – stool mixed with mucus and *sannipataj grahani* is having mix features.

Probable co-relation of sign & symptoms of Grahani Doshas with IBS:

<i>Atisrishtam vibaddham va</i>	—————>	Altered bowel habit
<i>Punah punah srijet varcha</i>	—————>	Increased frequency of defecation
<i>Shoola</i>	—————>	Abdominal discomfort/ Pain
<i>Amameva vimunchati</i>	—————>	Stool mixed with mucus
<i>Jeerne jeeryati adhmanam</i>	—————>	Post-prandial fullness
<i>Parshva vankshana hritpeeda</i>	—————>	Pain in flanks, epigastric and hypogastric region
<i>Chirat mala pravritti</i>	—————>	Delayed passage of stool
<i>Dukhena mala pravritti</i>	—————>	Painful defecation
<i>Tiktamlodgar</i>	—————>	Dyspepsia
<i>Shabda phena mala</i>	—————>	Gas, flatulence
<i>Hrillasa</i>	—————>	Heartburn
<i>Chardi</i>	—————>	Vomiting
<i>Shiroruk</i>	—————>	Headache
<i>Manasaha sadanam</i>	—————>	Abnormal psychological behaviour

Principle of management:

GENERAL PRINCIPLE

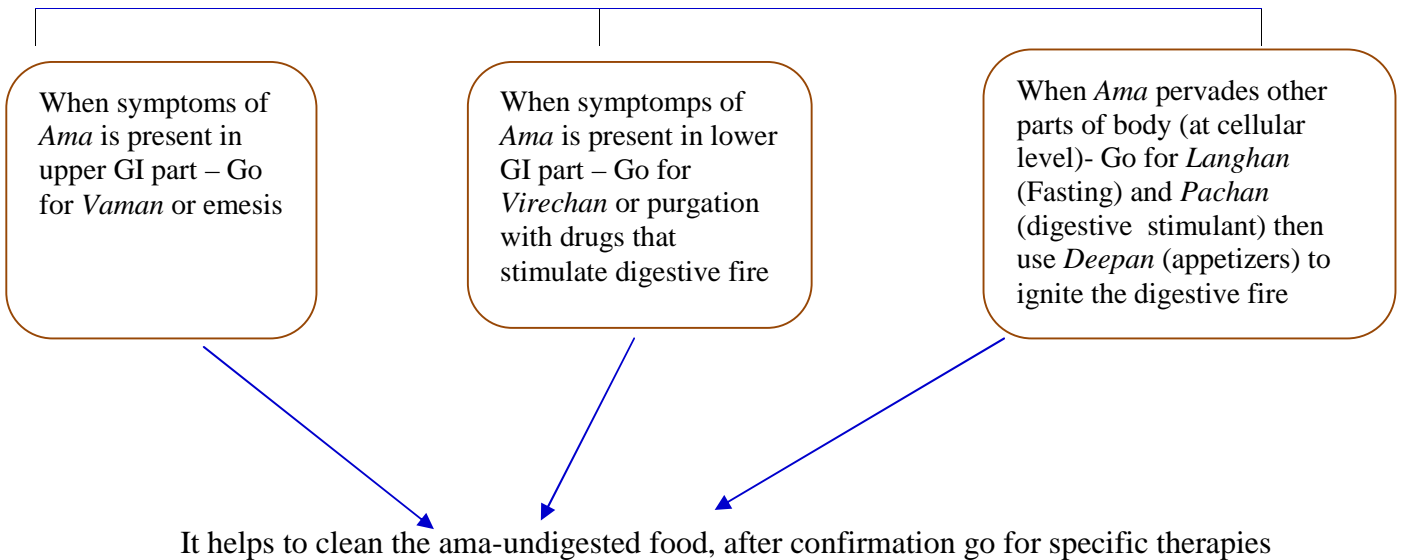


Fig.3

For Vataj Grahani¹⁷- Administration of *niruha*, *virechana* and *anuvasana* therapies as required, the patient should be given light food, and thereafter, a course of (medicated) ghee should be administered

For Pittaj Grahani¹⁸- Firstly confirm that aggravated *pitta* is in its natural site- then one should administer either purgation or emetic therapy for the removal of this *pitta*, use the food which is light, does not cause *vidaha* (burning) and contains bitter ingredients

For Kaphaj Grahani¹⁹ - For aggravated *kapha*, one should use emetic therapy according the prescribed procedure. Thereafter, pungent, sour, saline, alkaline and bitter drugs should be used to enhance the digestive capacity

For Sannipataj Grahani²⁰ - Here all the three doshas are vitiated so in this condition one should judiciously use the different *pancha karma* procedure as required, Thereafter patient should be given medicated ghee, alkalis, *asavas* and *aristas* which stimulate the digestive fire.

Conclusion: Irritable Bowel Syndrome (IBS) is one of the commonest diagnosis/conditions encountered in clinical practice but one of the least well understood, given to patients attending gastroenterology clinics. As there is no single disorder in Ayurveda which can be exactly correlate with IBS but due to similar clinical presentation it can be co-related with *Grahani Dosha*. *Grahani Dosha* is one of the most common pathological consequences of *Agni Dushti*, and considered as a disorders of *Annavaha Srotasa*. The faulty dietary habits along with imbalanced life style pattern etc. considered as responsible factors for *Grahani Dosha*. The multifactorial nature of IBS has created a challenge before the conventional system of medicine in management of this disease completely. So there is need to seek for alternative system of medicine like Ayurveda for its proper management.

Acknowledgement: I acknowledged the Himalayiya (P.G) Ayurvedic Medical College & Hospital, Dehradun, Uttarakhand, for providing library facility.

Source of funding: None

Source of support: Nil

Conflicts of interest: None declared

References

1. Lovell RM, Ford AC. Global prevalence of and risk factors for irritable Bowel syndrome: a meta-analysis. *Clin Gastroenterol Hepatol*. 2012; 10(7):712–721.e4.
2. Lovell RM, Ford AC. Effect of gender on prevalence of irritable bowel syndrome in the community: systematic review and meta-analysis. *Am J Gastroenterol*. 2012; 107(7): 991–1000
3. Enck P, Aziz Q, Barbara G, Farmer AD, Fukudo S, Mayer EA, et al. Irritable bowel syndrome. *Nat Rev Dis Primers*. (2016) 2:16014. doi: 10.1038/nrdp.2016.14
4. Frandemark A, Tornblom H, Jakobsson S, Simren M. Work productivity and activity impairment in irritable bowel syndrome (IBS): a multifaceted problem. *Am J Gastroenterol*. (2018) 113:1540–9. 10.1038/s41395-018-0262-x
5. Agnivesha: Charakasamhita Sutra, 18/45, Ayurveda Dipika Commentary by Chakrapani, Ed. Pt. Y T Acharya: New Delhi, Rastriya Sanskrit Samsasthan; Reprint. 2011
6. Manning AP, Thompson WG, Heaton KW, Morris AF. Towards positive diagnosis of the irritable bowel. *Br Med J*. 1978; 2: 653–4.
7. Drossman DA, Richter JE, Talley NJ. The functional gastrointestinal bowel disorders, pathophysiology and treatment: a multinational consensus. Boston: Little Brown; 1994.
8. Thompson WG, Longstreth GF, Drossman DA, Heaton KW, Irvine EJ, Müller-issner SA. Functional bowel disorders and functional abdominal pain. *Gut*. 1999; 45(Suppl 2):II43–7.
9. Drossman DA, Chang L, Bellamy N, et al. Severity in irritable bowel syndrome: a Rome foundation working team report. *Am J Gastroenterol*. 2011; 106:1749–59
10. Shastri Pandit K., Charak Samhita, Chikitsa sthan 15/56, Chaukhamba Sanskrit Sansthan, Varanasi, 2004, p.388
11. Shastri Ambika Dutta, Sushruta Samhita, Uttaratantra 40/169, Chaukhamba Sanskrit Sansthan, Varanasi, reprint 2012, p.306

12. Vaidya Yadavaji Trikamji, Charaka Samhita, Sutra sthana1/55, Chaukhamba Surbharati Prakashan, Varanasi; reprint ed, 2011, p.15
13. Shastri Ambika Dutta, Sushruta Samhita, Uttarantra 40/4, Chaukhamba Sanskrit Sansthan, Varanasi, reprint 2012, p.290
14. Lacy BE, Patel NK. Rome Criteria and a Diagnostic Approach to Irritable Bowel Syndrome. J Clin Med. 2017 Oct 26; 6(11): 99. doi:10.3390/jcm6110099. PMID: 29072609; PMCID: PMC5704116
15. Vaidya Yadavaji Trikamji, Charaka Samhita, Cikitsasthana 15/58,: Chaukhamba Sanskrit ansthana, Varanasi; 2016, p.518
16. Rajani Kancharla, N. Satyaprasad, A. Swarupa. The Effect of Chavyadi Churnam and Mustakarishtha in Management of Grahani w.s.r. to Irritable Bowel Syndrome. AYUSHDHARA, 2017; 4(4): 1211-1223, 1212
17. Vaidya Yadavaji Trikamji, Charaka Samhita, Cikitsasthana 15/78-81,: Chaukhamba Sanskrit Sansthana, Varanasi; 2016, p.518-19
18. Ibid, 15/122-23, p. 521
19. Ibid, 15/141, p. 521
20. Ibid, 15/194-96, p. 523

Access this Article in Online	
	Website: www.ijarm.com
	Subject: Ayurveda
Quick Response Code	
DOI: 10.22192/ijamr.2023.10.02.001	

How to cite this article:

Pandey Nitin, Tripathi A.K. (2023). Ayurveda: An ambient way to explore and manage the irritable bowel syndrome. Int. J. Adv. Multidiscip. Res. 10(2): 1-6.

DOI: <http://dx.doi.org/10.22192/ijamr.2023.10.02.001>