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“A CLINICAL STUDY ON KAMALA VYADHI (JAUNDICE) WITH AYURVEDIC MANAGEMENT– A CASE STUDY”**Dr. Aishwarya P. Dhote¹, Dr Archana S. Dachewar²**

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ABSTRACT:

Yellow is a disease in which yellow lustre occurs in the skin, mucous membranes and sclera. The colour of the fluid also changes. It is yellow and often indicates the problem of liver function. If the liver does not work properly, the waste can be built into the body with bilirubin. Clinical signs of yellownd occur when the serum's suit level exceeds 2.5-3 mg/dL. This is called Ayurvedic Kamala. Ayurveda The text was called hepatocytes iKTERUS kamala. Kamala in frequent records of Pittakar Akhal. This leads to Wint DOSH. This condition is caused by the imbalance of the Pita test, which causes metabolism, energy and digestion. Kamala is a disease in which the Pitta DOSHI is mainly released from the lactation of the date. In Kamal, this means that the needs for physical and mental needs are especially different in nutrition and physical activity. The desire to do something with Kamal's disease disappears. In this article, IPD patients are discussed in the Kaychiki department. The main complaints were the yellowing of skin, icterus, yellow urine, loss of appetite and abdominal pain. This patient has been effectively treated with the combination of Avipattics Churna, Argyavardhini Vati and Paltrikadi KWATH. These Ayurveda rules reduce the symptoms of Dalvaria (weakness of weaknesses), Kushdar (loss of appetite), and Pymatata (discolouration of yellow urine). In addition, the drug reduces bleeding and normalises other blood parameters. This is a random report on the 55-year-old man who is effectively managed by Ayurvee 7 days after being treated in the interior of Ayurveda.

KEY WORDS:- Jaundice, Kamala, Ayurvedic internal medicine, Phaltrikadi Kwath, Arogyavardhini Vati

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INTRODUCTION

Yellow is the yellow discoloration of tissue that occurs as a result of bilirubin failure. Yellow, also known as Icterus, is a bilirubin level with high yellow or green pigmentation in skin and white eyes.^[1]

GelB is a clinical manifestation of metabolism, hepatocyte damage, or major picture disturbances of bile closure. Bilirubin tissue precipitates only by the presence of serum bilirubinemia and is often a sign of liver or hemorrhagic disease. Yellow can be developed for people of all ages and is generally the result of the main condition. Newborns and seniors have the greatest chances. Existence, industrialized scenarios, our lifestyles, especially dietary habits. Most people are used to it on acute fast food days. This lifestyle change will invite you to a variety of illnesses. Furthermore, the prevalence of hepatitis increases. This is caused by increased sanitary consumption, such as population growth, rather than soft food or contaminated water in overloaded areas. Modern science only has symptoms of hepatocellular containers.

An Ayurvedic Approach : A cost effective Opinion

Hepatocellular jaundice has been referred to as Kamala in an Ayurvedic work. Allopathic system of medicine is basically designed to alleviate the symptoms. On the other hand, Ayurveda based upon mind, body, soul theory and make use of natural product with fewer side effects and is targeted to eliminate root cause by establishing balance in body physiology. In order to reduce disease, it also suggests dietary and lifestyle changes. In Ayurveda texts many formulations are described for treatment of Kamala. Ancient Acharyas has also mentioned “Kamali Tu Virechanana” as Chikitsa Sutra.^[2]

CASE PRESENTATION :

A 55-year male came with following chief complaints:

1. Udarshoola (abdominal pain)
2. Kshudhamandya (appetite loss)
3. Hrullas (nausea)
4. Mutra Pitata (yellow discolouration of urine)
5. Vitasanga (constipation)^[3]

CASE HISTORY :

Patient was asymptomatic before 10 days. Gradually he developed abdominal pain, nausea, and constipation, loss of appetite and yellow discolouration of urine. Patient has not taken any medication yet. He came to our hospital Pakwasa Samanvaya Rugnalaya for further management. So he got admitted in our hospital for the treatment.

PAST HISTORY :

No H/o HTN , DM , BA , TSH disorders or any other illness.

H/O Alcoholism since 10years

H/O travelling – 15 daysago

GENERAL EXAMINATION :

Gc : Mod , Afebrile

BP : 110/70 mmhg

Astha Vidha Pariksha

1.Nadi (Pulse) = 76min

2.Mala (Stool) = Vibandh (Constipation)

3.Mutra (Urine)= Pitavarniya

4.Jihwa (Tongue) = Ishat Pita

5.Shabda(Speech) = Prakrut (Normal)

6.Sparsh (Skin) = Pitavarniya

7.Druka (Eyes) = Netrapitata

8.Akriti (Shape) =Prakrit

SYSTEMIC EXAMINATION :

RS : AE=BE-Clear

CVS : S1 S2 – Normal

CNS : Concious, Oriented.

P/A : tenderness all over abdomen

MATERIALS AND METHODS :

Centre of Study : Pakwasa Samanvaya Rugnalaya IPD, Nagpur.

Simple Random Single case study.

TREATMENT PROTOCOL :

1. Virechana Karma

2. Internal Ayurvedic medication

3. Observation of investigation report

Virechana Karma

Due to frequently intake of Pittakara Aahara (spicy and hot food), it leads to vitiation of Pitta Dasha and Virechana (purgation) is the first line of treatment for Pittadushti.^[4] Avipattikar churna 5gm twice in day with luke warm water.

Table no. 1: Shaman Treatment Schedule

Sr. No.	Name of Medicine	Dose	Kala	Anupana	Duration
1	Aarogyavardhini Vati	500 mg	Vyana Udana kaala	Koshna jala	15 days
2	Phalatrikadi Kashaya	30 ml	Vyana Udana kaala	Koshna jala	15 days

Table No. 2 : Drugs, their properties and mode of Action

Sr. No	Drugs	properties	Mode of action
1	Aarogyavardhini Vati ^[5]	akrut Shodhana Regulation of Pitta secretion, Agnidipan, Pachana, Grahani Dosha Nashak	Malashudhhikara (purgative), Kshudhvardhaka (appetizer)
2	Phalatrikadi Kashaya ^[6]	Pittahara, Pitta Rachana, Yakrituttejaka, Dipana	Tridoshahara, Rasayana, Kshayaghna

RESULTS :

The result was appreciable in both the clinical and laboratory criteria. Statistically relief in yellowish colour of eyes and urine, loss of appetite, weakness and reduction in serum bilirubin level.

Table No.3 : Showing changes in Blood Investigation during Treatment

Test	16/12/24	23/12/24
Sr. Bilirubin (Total)	6.13	2.64
Sr. Bilirubin (direct)	3.10	1.95
Sr. Bilirubin (indirect)	3.03	0.69
SGOT	189	96
SGPT	61	39

PAKWASA SAMANVA... Hanuman Nagar, Nagpur - 440024 No. (A) Bombay Public Trust Act F-88 N (B) Society Act. Reg. No. 40-48/49 DEPARTMENT OF PATHOLOGY Name: [Redacted] Date: 10/12/24 By: Kaychikitsa R.No. 532 OPD/IPD No. 5379 R.No. 532			
REPORT ON BIOCHEMISTRY			
Test	Result	Normal Value	
Blood Sugar -Fasting		80 to 100 mg%	
Post meal (After 90 min) random		100 to 140 mg%	
Blood Urea		20 to 40 mg%	
S. Creatinine		0.8 to 1.4 mg%	
Na ⁺ (Sodium)		136-147 mEq/L	
S. K ⁺ (Potassium)		3.5-5.5 mEq/L	
S. Bilirubin - Total	7.63 mg%	0 to 0.8 mg%	
- Direct	0.19 mg%	0 to 0.24 mg%	
- Indirect	0.03 mg%	0 to 0.4 mg%	
S.G.O.T.	189 mg%	10 to 40 mg%	
S.G.P.T.	61 mg%	10 to 30 mg%	
S. Alk Phosphatase	124 IU/L	40-170 IU/L	
Total Proteins - Albumin		6.5 to 7.5 mg%	
- Globulin		3.5 to 4.5 mg%	
S. Uric Acid		2.0 to 3.0 mg%	
S. Calcium		9-11 mg%	
S. Calcium		9-11 mg%	
S. Calcium		9-11 mg%	
S. Calcium		9-11 mg%	

DEPARTMENT OF PATHOLOGY Pt's Name: [Redacted] Date: 23/12/24 Ref. By: Kaychikitsa R.No. 1065 OPD/IPD No. 5336 R.No. 1065			
REPORT ON BIOCHEMISTRY			
No.	Test	Result	Normal Value
1.	Blood Sugar -Fasting		80 to 100 mg%
2.	Post meal (After 90 min) random		100 to 140 mg%
3.	Blood Urea		20 to 40 mg%
4.	S. Creatinine		0.8 to 1.4 mg%
5.	Na ⁺ (Sodium)		136-147 mEq/L
6.	S. K ⁺ (Potassium)		3.5-5.5 mEq/L
7.	S. Bilirubin - Total	2.69 mg%	0 to 0.8 mg%
	- Direct	0.69 mg%	0 to 0.24 mg%
	- Indirect	0.95 mg%	0 to 0.4 mg%
8.	S.G.O.T.	96 mg%	10 to 40 mg%
9.	S.G.P.T.	39 mg%	10 to 30 mg%
10.	S. Alk Phosphatase	95 IU/L	40-170 IU/L
11.	Total Proteins - Albumin		6.5 to 7.5 mg%
	- Globulin		3.5 to 4.5 mg%
12.	S. Uric Acid		2.0 to 3.0 mg%
13.	S. Calcium		9-11 mg%
14.	CRP		0-0 mg%
15.	RF Test		0-20 mg%

DEPARTMENT OF PATHOLOGY Pt's Name: [Redacted] Date: 30/01/25 Ref. By: Kaychikitsa R.No. 33379 OPD/IPD No. 5390 R.No. 33379			
REPORT ON BIOCHEMISTRY			
No.	Test	Result	Normal Value
1.	Blood Sugar -Fasting		80 to 100 mg%
2.	Post meal (After 90 min) random	71 mg%	100 to 140 mg%
3.	Blood Urea		20 to 40 mg%
4.	S. Creatinine		0.8 to 1.4 mg%
5.	Na ⁺ (Sodium)		136-147 mEq/L
6.	S. K ⁺ (Potassium)		3.5-5.5 mEq/L
7.	S. Bilirubin - Total	1.21 mg%	0 to 0.8 mg%
	- Direct	0.76 mg%	0 to 0.24 mg%
	- Indirect	0.45 mg%	0 to 0.4 mg%
8.	S.G.O.T.	49.9 mg%	10 to 40 mg%
9.	S.G.P.T.	27 mg%	10 to 30 mg%
10.	S. Alk Phosphatase	98 IU/L	40-170 IU/L
11.	Total Proteins - Albumin		6.5 to 7.5 mg%
	- Globulin		3.5 to 4.5 mg%
12.	S. Uric Acid		2.0 to 3.0 mg%

DISCUSSION

During treatment, the patient was treated only with oral drugs for one month. Thus, after one month of treatment, the patient received significant improvements in all symptoms. Now the patient is gradually improving, and after three months of observation, there is no recurrence of symptoms. The results were noticeable in both clinical and laboratory standards. Statistically, yellow: reduction of bilirubin levels in the yellow fry and urine, loss of appetite, weakness, and serum. The tested drugs were used for the treatment of Kamaly (jaundice) in Ayurveda texts and Nandus. This study showed the improvement of appetite and taste, Yakrit UTTEJAKA characteristics. Therefore, the combination of the two drugs is more important than the individual drugs. After doshoshchemeostasis is achieved, the disease and various symptoms are produced by milk, so the signs and symptoms of Kamala are automatically alleviated. The drug acts as a Rasayana, improves DHATOR, tridosyany, gang, rocketshak, pitta saran, and symptoms, and symptoms. This drug has been found to be effective for the release of the basic features of Kamal. In Ayurveda, ancient Akiya mentioned AGDIMYNDYA and Pitt Dosh as the main etiology of Kamala. Hypo Function AGNI creates AMA/AmaviSha, which corresponds to Rakta and can produce kamalu. Kamala is a Pitta and Rakta pradoshaj vyadhi and is distorted by Pitta DOSH and can be normalized by Madhura, tikta, and kamayya rasa. In Kamal's ancient classics, individual drugs were mentioned along with complex drugs. This drug has a characteristic of kamalahara. This Ayurveda compound promotes daurveya (weakness), kshudhamandya (appetite loss), Niamate (yellow bleach of urine), hruullasa, and shocking symptoms. In addition, these drugs reduce bile in blood circulation and normalize other blood parameters. In short, this drink includes attributes such as Pitatar, Pytar, Divan, Pag, Pacha, Jvarahara, Kamal, Panduhara, Yakrit, Ractwikarhara, Tridoshar, Rasayan, Pittasarak, and Enta I followed.^[7] Charaka is mentioned in chapter 16 of Chikitsa SHTHAN-KAMALITA-Virehan. According to this

chapter, Virechana is the best way to treat kamal-rogi (kostas akhashrita I... infectious hepatitis). Avipatkar Churna-Trikatu, Triphala, Nishotha, etc., are included. Therefore, it is regulated by the secretion of Pitt, Agni Dipan, and Mala Mutra Vibhanhanasak. The general principles of treating this disease are Shodhan and Sansaman Chikitsa.^[8] Yakrite is a root cover rocket. Ashrei has a rocket feet, and Ashraiai sambnda is to remove the prominent Pitt. DOSH, Virakhan-Best Chikitsa^[9]

CONCLUSION

Based on the debate above, we came to the conclusion that Virechana and Shaman Chikitsa successfully treated Ayurveda under Kamala's direction. By eliminating toxic waste from the body, symptoms including anorexia, icterus, urine yellow signal, and yellow skin have become apparent. The ancient literature states that Kamal visits Pete City. Kamala's MRID Virchaan Chikitsu was cited by Acharya Chark. Virechana is therefore regarded as Pitt Doshi's most suitable candidate for peace.^[10] Neither the treatment nor the observation period revealed any unfavorable effects of the treatment. Thus, we can say that this Ayurvedic medication works quite well for treating kamaly.

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