

A CASE STUDY: ROLE OF GUDUCHYADI KWATH IN GRAHANI ROGA

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ABSTRACT

Grahani roga is a disease of *Annavaha Strotas* i.e Gastrointestinal tract.Grahani as accordingly to stahana co relate to Agni. Health is maintained when this Agni is balanced properly in body.Root cause of all disease is *Mandagni* and main site of agni is Grahani. When the digestive fire becomes weakened (*Mandagni*), it leads to the formation of Ama Dosha.The symptoms of *Grahani roga* are co related Irritable bowel disease,Malabsorption syndrome,coeliac disease and tropical sprue as mentioned in modern text.In *Saam Grahani* first pachan of *Aam dosha* convert it into *Niram Avastha* then *Deepan Pachan* drugs to improve *Agni* and then *Saman* and *Sodhan chikitsa* is applied. *Guduchayadi Kwath* has *Aam dosh har* and *deepan pachan* and *Grahi* properties that will be helpful to cure *Grahani roga* associated with *Aam dosha*.Here a patient of 26 years old male patient who came with symptoms like *muhurbaddam muhurdravam,apakva malapravruti,udara shola udar gaurav* and *aruchi* was treated with *Guducayadi Kwath* with proper giving *pathya Apathya* diet chart.

KEYWORDS:Grahani,Annava strotas,Mandagani,Deepan Pachan,Guduchayadi kwath etc

INTRODUCTION:

Classical texts describe that derangement of Agni results in dysfunction of Grahani, giving rise to a spectrum of clinical features such as irregular appetite, altered bowel habits, passage of loose or semi-formed stools, abdominal discomfort, and a sense of incomplete evacuation. The condition is often chronic in nature and may fluctuate in severity depending upon diet, lifestyle, and mental factors.Irritable bowel syndrome (IBS) is a frequently observed chronic disorder affecting the gastrointestinal tract. In India, its prevalence is estimated to range between 11% and 14%. It is regarded as a functional condition primarily involving disturbances in intestinal motility, often influenced by psychological factors. Individuals with IBS commonly experience abdominal pain, irregular bowel patterns, and a persistent feeling of incomplete evacuation. Psychological conditions such as anxiety, depressive states, and obsessive–compulsive tendencies are often seen alongside this disorder.

MATERIAL AND METHODS

CASE PRESENTATION

A male patient of age 26 years was registered from the OPD (OPD/IPD No.4513/33729)of *kaya chikitsa*, Rishikul campus, Haridwar on 21/11/2025 .The patient have many complaints related to *grahani rog* , which includes altered bowel habit (*Mahabudou Muhsdravam*), abdominal pain (*Udarashool*), Stool with mucous (*Apakvamala-pravruti*),

indigestion(Ajeerna) , heaviness in abdomen (Udaragourava) since last 6 to 7 months, Anorexia (Aruchi),fatigue (Alasya) since last one month.

HISTORY OF PRESENT ILLNESS

According to the patient, he was asymptomatic 6 month ago, since then he has been suffering from abdominal pain, altered bowel habits, indigestion, and heaviness in abdomen ,urgency to pass stool just after taking meal and sometimes without meal too, there is no history of bleeding per rectum. The patient underwent treatment to allopathy but could not get relief completely. Now patient approached us for proper and better management.

PAST HISTORY OF THE PATIENT

No history of HTN/DM/Thyoid disorder and Family history was not relevant. **GENERAL EXAMINATION**

Pulse rate of the patient was recorded to 84bts/min, BP was 118/70 mmHg and temperature was recorded normal 98.4 F. No abnormality was detected on examination of gastrointestinal, respiratory, cardiovascular and nervous system. The Prakruti of the patient was diagnosed as vata while nadi was vatpradhan tridoshaj. There was no complains regarding Mutra(urine) that was normal in colour and frequency. The Mala (stool) was sometimes mild constipated and sometimes loose stool with mucous and his jihwa (tongue) was found to be sama (coated).

DIFFERENCIAL DIAGNOSIS

The diagnosis was confirmed on the basis of subjective symptoms as told by the patient. His biochemical parameters in the laboratory investigations are given in table 1

Table 1:Biological data of Patient

Parameters	Values Before Treatment	Values After Treatment
Hb %	9 gm/dl	11.3 gm/dl
TLC	4500	4400
Blood sugar random	100	90
ESR	18	15
Serum Bilirubin	0.67 mg/dl	0.5 mg/dl
SGOT	27.3 mg/dl	15.2 mg/dl
SGPT	24.6 mg/dl	14.2 mg/dl

STUDY DESIGN

On the basis of symptoms, *Guduchayadi kwath*, described in *Sarangdhar Samhita (Madhyam Khanda)* in the management of *Grahani Roga*, was used as a drug for the present case, the dose was decided as 40 ml twice a day after food for 45 days. The treatment was single arm open trial and the assessment of the patient was done at the interval of the 15 days. The subjective assessment was done on the basis of signs and symptoms of *Grahani Roga* as described in classics. The symptoms were graded as 0,1,2,3, and 4 for none, mild, moderate, moderate to severe,

and severe respectively.

Table 2.Symptoms of Grahani as described in classics.

<i>Muhurbaddam-muhurdrava malapravruti</i>	<i>Vidaha</i>
<i>Apakvamalapravruti</i>	<i>Vistambha</i>
<i>Udarashool</i>	<i>Aruchi</i>
<i>Udaragourava</i>	<i>Alasya</i>
<i>Daurgandhit malapravruti</i>	<i>Ajeerna</i>

Pathya and Apathya Aahar vihar:

Vargas	Pathya	Apathya
Shookadhanya Varga(Cerealswith h bristle)	<i>Lohita Shaali (Red rice)</i> <i>Shashita Shali (Oryza sativa),</i> <i>Yava(Hordeum vulgare)Godhuma(Triticum aestivum) etc</i>	<i>Nava Dhanya (newly harvested grains) – Guru, causes Ama</i> Excessively heavy grains (e.g., certain millets)
Shamidhanya Varga(pulses)	<i>Tila(Sessam indicum),Mudga(Phaseolusmungo),Masure(Lens culinaris),Kulatha(Dolichos bifloris) etc</i>	<i>Nishpava(Dolichos lab lab,Kalaaya(Pisum sativum)</i> <i>Masha (black gram) – Guru, Abhishyandi</i>
		<i>Kulattha (horse gram) – too heating and heavy</i> <i>Chana (Bengal gram) – causes bloating in weak Agni</i>
Mamsa Varga(group of meats)	<i>Shasak(Rabbit),Ena(Black buck),Lava(Common Quil)Tittir (Partridge), Jangala mamsa rasa (meat soup of dry land animals) etc</i>	<i>Aanupa mamsa (marshy animals)Guru,Abhishyandi,Heavy redmeat,preparation,sshka mansh(dry meat)</i>
Shaka Varga(group of fruits)	<i>Changeri(oxalis corniculata),Varshambu(Boerhavia diffusa)</i> <i>Lauki (bottle gourd),Tori (ridge gourd)</i> Well-cooked, soft vegetables etc	<i>Raw vegetables (difficult to digest)Leafy greens in excess (may increase Vata)</i> <i>Gas-forming vegetables</i>
Phala Varga(group of fruit)	<i>Dadima (punica granatum), Bilva (indian bael), Kapitta (Feronia limonia), Nyagrodaadi Phala (Ficus benghalensis etc</i>	<i>Narikela (Cocos nucifera)</i> Excessively sour fruits,Heavy fruits (banana in excess) Incompatible fruit combinations.

Gorasa Varga(milk product)	<i>Grita (ghee), Takra (butter milk) etc</i>	<i>Milk,Dadhi(curd)-especially at night,Heavy products: paneer, cheese,Cold milk (reduces Agni)</i>
Kritanna Varga(food preparations)	<i>Laaja Manda, Vilepi (thick gruel), Peya (Gruel), Yavagu (Rice gruel) etc</i>	<i>Gurvannapana (food and drinks which are heavy for digestion), Rasala (medicated curd) and All types of Apooa (flour cakes)</i>
Peya Varga	<i>Ushna Jala (warm water) Jeera/Ajwain infused water etc</i>	<i>Cold water Refrigerated drinks Aerated beverages</i>

Vihar

Dinacharya (Daily Regimen):

Wake up early (Brahma muhurta) – helps regulate digestion

Evacuate bowels without suppression (vegavidharana should be avoided)

Perform mild Abhyanga (oil massage) to balance Vata

Take lukewarm water in the morning

Follow light exercise (not excessive)

Vyayama (Exercise):

Do mild to moderate exercise only Avoid overexertion (Ati-vyayama worsens Grahani) Beneficial Asana: Vajrasana (especially after meals)

Pavanamuktasana

Walking after meals improves digestion

Manasika Vihara (Mental Discipline)

Avoid stress, (anxiety), and anger

Maintain a (calm mind)

Practice meditation and pranayama

Psychological factors are very important (similar to IBS concept) **Nidra (Sleep):**

Take adequate night sleep (6–8 hours).

Avoid day sleep (Diwaswapna) – increases Kapha and Ama. Avoid late-night (night awakening).

Apathya Vihara (To Avoid):

Irregular lifestyle

Excess travel, especially jerky journeys

Day sleep, night awakening

Excessive exercise or complete inactivity

(mental stress)

Eating in hurry or while talking

RESULTS

The follow up made on the 15th days, 30th days and 45th days. During the period, the patient did not develop any other complaint. He reported gradual improvement in altered bowel habit, stool with mucous, fatigue, heaviness in abdomen, indigestion, pain in abdomen, anorexia. The progress of the patient is given in table 3 in the form of grades. After treatment, the patient got significant relief in the symptoms.

Table 3:Progress of the patient in three follow up visits.

Symptoms	BT	After 15 days	After 30 days	After 45 days
Muhurbaddam muhurdravum malapravruti	3	3	2	1
Apakvamalapravruti	3	2	2	0
Udarashool	3	1	1	0
Udaragourava	2	0	0	0
Daurgandhit malapravruti	4	3	2	0
Vidaha	0	0	0	0
Vistambha	0	0	0	0
Aruchi	4	4	3	1
Alasya	3	3	2	1
Ajeerna	2	1	1	0

Grade 0,1,2,3 and 4 for none,mild,moderate,moderate to severe and severe respectively. **DISCUSSION:**

EFFECT OF GUDUCHYADI KWATH

Principle of Treatment (Chikitsā Siddhānta):Management of Āmaj Grahaṇī mainly requires.

Āma pachana (digestion of toxins), Deepana (kindling digestive fire), Vāta-Kapha śamana, Grahaṇī sthīrīkaraṇa (restoring intestinal function), Guduchyadi Kwatha works exactly on these principles.

Drugs of Guduchyadi Kwatha and Their Karma

1. On Agnimāndya

Śuṇṭhī and Musta stimulate Jatharāgni. Guduchi supports Agni without producing heat imbalance. Restores proper digestion.

2. On Āma

Guduchi and Ativiśā digest and eliminate Āma. Śuṇṭhī helps in breaking down sticky metabolic toxins. Clears obstruction in channels (srotoshodhana).

3. On Doṣa

Kapha is reduced by Śuṇṭhī and Musta. Vāta is regulated due to improved digestion. Pitta remains balanced due to Guduchi.

4. On Grahaṇī Duṣṭi

Musta and Ativiśā act as Grahī, improving retention power of intestine. They reduce frequency of loose stools and mucus. Grahaṇī regains its functional stability.

5. On Symptoms

Arochaka (loss of appetite) → corrected by Dīpana drugs

Atisāra / loose stools → controlled by Grahī action

Udara śūla (pain) → relieved by Vāta śamana

Ālasya and gaurava → reduced by Āma pachana

CONCLUSION

Guduchyadi Kwatha is a well-balanced formulation for Āmaj Grahaṇī. Its ingredients collectively perform Dīpana, Pachana, Grahī and Doṣa śamana actions. By targeting Agnimāndya and Āma—the main factors of disease—it effectively breaks the samprapti and restores normal digestion and bowel function.

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REFERENCES AND BIBLIOGRAPHY

1. Vagbhatta, Ashtang Hridaya, Varanasi, Chaukhamba Prakashan, Sutra Sthan, 2020; 12-1.p.358.
2. Vidhyadhar Shukla & Prof. Ravidutta Tripathi, Charak Samhita, Uttarardha, Chaukhamba Sanskrit sansthan Delhi, 2013; 15: 57.p.369.

3. Vidhyadhar Shukla & Prof. Ravidutta Tripathi, Charak Samhita, Uttarardha, Chaukhamba Sanskrit sansthan Delhi, 2013; 15: 51.p.369.
4. Vidhyadhar Shukla & Prof. Ravidutta Tripathi, Charak Samhita, Uttarardha, Chaukhamba Sanskrit sansthan Delhi, 2013; 15: 75.p.372.
5. Kaviraja Ambikadutta Shastri, Susruta Samhita of Maharishi Sushruta, Part II (Uttaratantra) Varanasi; Chaukhamba Sanskriti Sansthan, 2016; 40-183 p.309.
6. Kaviraja Ambikadutta Shastri. Susruta Samhita of Maharishi Sushruta, Part -II (Uttaratantra 40, Verse 167). Varanasi; Chaukhamba Sanskriti Sansthan, 2008; p. 237.
7. Naveen Chandra n.h. Text book on clinical biochemistry and haematology published by the author, SDM college of Ayurveda, kuthpady, Udipi, First impression, 2015; 163-260.
8. Vidhyadhar Shukla & Prof. Ravidutta Tripathi, Charak Samhita, Uttarardha, Chaukhamba Sanskrit sansthan Delhi, 2013; 15: 129-131.
9. Pt. Kashinath Shastri & Dr. G.N. Chaturvedi, Charak Samhita, "Vidyotini" purvardha/Part-2, hindi Tika, Chapter Arshachikitsa-adhyaya 14/76-77, Chaukhambha bharti Academy, Varanasi, (India), Reprint, 2012; page- 431.
10. Sri Bhavmisra, Bhavaprakasa, edited by pandit shri brahma Shankar misra. part 1, Grahani chikitsa 4/25-26, Chaukhambha Sanskrit Sansthan Varanasi, edition, 2005.
11. 14. Sharangdhar Samhita Madhyam khanda-B.Tripathi chaukhamba pub.ED 2 1944



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