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Ayurvedic Management of Chronic Kidney Disease –A Case Study.

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ABSTRACT:

The term chronic Renal Failure applies to the process of continuing significant irreversible reduction nephron number .In present scenario the cost of dialysis can't be afforded by every patient &understanding this by means of principle explained Ayurveda is necessary to manage the disease &make the patient comfortable to perform his daily routine .CKD patients treated with Ayurved may Prolong Dialysis or reduce its frequency, it also maintains the stage without further damage .Various Receipes of Ayurveda are reported to be effective for CRF kidney failure &goal is to provide with better drug formula.

In this study, punarnava Guggul, Chandraprabha Vati, Punarnavasa, Gandharav haritki Churna are found to be quite effective in management of Chronic Renal Failure. Here we are Reporting case of CKD of a 32years female patient who was given some Ayurvedic preparations.

KEYWORDS: chronic kidney disease, punarnavasav, chandraprabhavati, kwath, churna

INTRODUCTION:-

CKD is the presence of kidney disease, or a decrease level of kidney function for a period of 3 months or more. It usually affect the both kidney ckd is rarely reversible and leads to progressive decline the renal function. Reduction in renal mass leads to hypertrophy of the remaining nephrons with hyper filtration and the progressive glomerular sclerosis and interstitial Fibrosis.

Chronic Kidney diseases had always remained a major area of concern for physician. Incidence of kidney diseases leading to kidney failure are increasing day by day. some people develop irreversible kidney disease called Chronic Renal Failure or Chronic Kidney disease.

The treatment of chronic kidney disorder consist of treatment of the underlying caused if possible, and other symptoms, liquid and diet control cessation of symptoms, liquid & diet control cessation of smoking, use of various Pharmacological drug. But with progressive end-stage disease, restoration of kidney function, can only the possible with dialysis or a kidney transplant .So the treatment modalities are very costly &may not be affordable by all.

In Ayurved CKD ,described as aMootra dosh vikar and causes of edema .Both kidney are root of Medovaha srotas. According to Acharya Charak the causes of Mootra dosha vikar are vitiated by the intake of drinks and foods, sexual intercourse while having the urge for micturition disorder of wasting malnutrition &sever traumatic injury. The pathogenesis of kidney diseases in not separately mentioned. It can be in prameha ,Mutra dosha, included Mutrakshaya, Mutra krichha, injury of vankshana, Ashmari (stone diseases)and oedema (sotha)etc. In Charak samhita described that kidney and bladder are the root (controlling organ) of the channels carrying urine and fat ,the opening of these channels gets affected by fat, mansa &liquid Dhatus of the body. The viated doshas while coming in contact with the opening of these channels obstruct them. This result in the manifestation of kidney disease which become chronic or incurable due to the affection of all the qualities of doshas and also due to the simultaneous vitiation of homogenous & heterogenous dhatus.

AIMS & OBEJECTIVE:-

To Prove the efficacy of Ayurvedic Preparations in management of CKD.

MATERIALS & METHOD:-

Methods:- Methods adopted for this study is single case study.single blind method.

TYPE:- Prospective study, Single case study, Clinical controlled study

PLACE:-Department of *kayachikitsa* Laxmanrao kalaspurakar Ayurved college, yavatmal, affiliated with D.M.M. Ayurved college, Yavatmal.

MATERIALS:-

Brihatrayee, laghutrayes samhitas, various articles and journals, dravaygun books were reffered for this study.

Case Report:- A female patients of age 32 years came in OPD of *kayachikitsa* laxamanrao kalaspurakar *Ayurved* hospital yavatmal &DMM college Ayurved yavatmal.

- NAME:- XYZ
- **Sex:**Female
- Age:-32 years
- Occupation:-Housewife

Chief Complaints

- Davay pada shoth (bialatterly swelling on legs)
- Aakshikuth shoth
- *Aaruchi* (loss of appetite)
- Daurbalya (weakness)
- *Mutradah* (Burning micturition)

On Examination:-

General condition 2was Afebrile

Pulse: 68/min

Blood pressure -110/70 mm hg

No pallor, no ictures

Weight-35kg

Systemic Examination:

RS-AEBE

CVS-S₁S₂Normal

CNS-well oriented

P/A-soft non tender, liver, spleen not palpable

Astavidhparikshan

- *Nadigati-68/min*
- Mala-Samayak
- Jivha-Alpsama
- Mutra-Daha
- Sparsh-Ruksha
- Akurti-Krush

Present Illness:-

Patients had developed above complaints before 1 years and for its management they visited OPD of kayachikitsa.

Past History:-

Before that patients admitted in private Nephrology Hospital & taken intravenous antibiotics for 3 days & for further management advice to take dialysis which is not affordable for this patients hence came in opd of kayachikitsa in L.k. Ayurved Hospital ,Yavatmal.

Family History:-

No any relevant family History.

Investigation:-

Hb-11.3%

KFT-

Serum Creatinine -4.5mg/dl

Serum Urea-114mg/dl

Urine Protein -Negative

USG-on admission-small reniform cystic structure in the right renal fossa with few septations within likely s/o grossly hydronephrotic right kidney with paper thin cortical parenchyma.

Grade III left renal parenchymal diseases .

The patient was treated with certain combinations drugs.

Treatment Protocol:-

- 1. Punarnava Guggul 500mg Bd
- 2. Goksshuradi Guggul 500 Mg Bd
- 3. Chandraprabha Vati 250 Mg Bd
- 4. Punrava+Gokshur+Avipatikar+ Bd
- 5. Triphala Churna-Each 1gm
- 6. Punarnava+Gokshur Kwath 30
 - 7. Syp.Punarnavasav 2 Tsp Tds
 - 8. Gandharav Haritki 3 Gm Anulomak Hs

This medicines were given to the patients.

RESULTS:

Showing results on various parameters

DATE	19-4-2022	4-7-2022	14-9-2022
Blood	114mg/	135.6mg/	17 mg/dl
urea	dl	dl	
(mg/dl)			
Sr.	4.5mg/	1.83mg/dl	0.84mg/
creatinin	dl		dl
e			
(mg/dl)			

pg. 3

The general condition also improved, *shoth* reduced.

DISCUSSION:-

Chronic renal failure is a disease of *mutravahastrotas*, all the three *doshas* & *dushti* was involved in the disease, due to this morbid changes like filtration, reabsorption & secretions depending upon number of glomeruli involved.

In Ayurveda no one has put direct relation and description of the disease in ancient text. But increase creatinine are indicative of *mutravahastrotas dushti*. As the *vruka* is made from *rakta & meda* so in this disease decrease filtration rate has been occurred due to accumulation of *meda & rakta dushti* which is carried out by *vata dosha*.

As *punarnava* has the fibrinolytic activity, inhibition of lipid peroxidation, anti –oxidant properly, also as hepato protective activity, smooth muscle relaxation has improved the filtration rate also removing waste out of body which damage the kidney.

Gokshura has diuretics action which is beneficial in CKD for decrease the oliguria & Rasayana properties of gokshura which can be prevented & Rasayana drug by their anti oxidative properties.

Chandraprabha vati helps to remove harmful AMA (i.e toxins) like urea, creatinine & uric acid from the body. It promotes healthily functioning of the kidney by acidizing the excretion of excess uric acid & maintaining the uric acid level in the kidneys. It is also proven beneficial CKD.

CONCLUSION:-

On the basis of above case study it can be concluded that *punarnava guggul*, *gokshradi guggul*, *chandraprabha vati*, *punarnavasav*, *punarnava &gokshur kwath*, *gandhrav haritki* are quite effective in management of chronic renal failure.

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