

# **AYURLINE**

e-ISSN: 2456-4435 Vol. 09<sup>th</sup> | Issue:5<sup>th</sup> | 2025

# International Journal of Research in Indian Medicine

Article Received Date: 09/08/2025 | Reviewed on Date: 28/09/2025 | Accepted on: 15/10/2025

# Management of Ascites by Ayurvedic Treatment- A Case study. Mrunal Khilare\* Sarika Deore2

- 1. MD (Kayachikitsa) Assistant Professor
- 2. MD(Kayachikitsa) Professor and HOD

Kayachikitsa Dept., Ashokrao Mane Ayurvedic Medical College Kolhapur. 416112 \*Corresponding author: mrunalkhilare95@gmail.com; Mob.no.7972844891

#### **ABSTRACT: -**

Hepatic cirrhosis is one of the leading causes of death worldwide, especially if complicated by ascites. Liver cirrhosis with ascites is a challenging medical condition. chronic condition can be related to the classical disease entity Jalodara in Traditional Indian Medicine (Ayurveda). Ascites is the accumulation of fluid in peritoneal It is the most common manifestation of liver dysfunction. modern science still there is no sure treatment which cure the patient of totally. Ascites it gives symptomatic relief with time dependent recurrence. In such type of cases ayurvedic treatment therapy gives result without any side effects. In Ayurveda there are 8 types of Udarroga are mentioned, and this case will be correlated with Jalodara. A 54 yrs. male patient came to OPD with abdominal distension, bipedal edema, anorexia, icterus, general weakness etc. since1 month. He was given Nitya Virechana with Trivruttavaleha and ayurvedic

Shamana Chikitsha as well as restricted diet plan for 3 months with cow milk. after two months of treatment marked improvement was noted in all Symptoms of the patient. Ayurveda interventions resulted in significant improvement Hence it was concluded that ayurvedic management are useful in Jalodara.

**KEYWORDS:** -Liver cirrhosis *Jalodara*, Ascites, Ayurveda, *Nitya Virechana, Godugdha*, diet restriction.

#### **INTRODUCTION: -**

Ascites is a gastroenterological term for an accumulation of fluid in the peritoneal cavity that exceeds 25 ml. Ascites treatment requires hospitalization, can lead to life threatening complications and need liver transplantation. The development of ascites marks the onset of worsened prognosis and increased mortality. Alcohol consumption, viral hepatitis B & C, metabolic syndrome related to obesity are the most common causes of cirrhosis. Liver cirrhosis is responsible for 1,70,000 deaths yearly in

Europe. Hepatic cirrhosis incidence in India could be high due to high prevalence of Hepatitis B & C fatty liver disease and even increasing trends of alcohol intake. Cost of hepatic cirrhosis on quality of life, loss of productivity, medical expenses are high. Treatments to stop progression from compensated to decompensated stage are being tried. Liver transplantation is the only treatment in the end stage liver disease.

Jalodara(Ascites) is one of the critical disease among the eight types of *Udarroga*<sup>1</sup>. According to ayurveda, Jalodara is accumulation of fluid in abdominal cavity. It is of two types i.e., Svatantra <sup>2</sup>(independent or primary) and Paratantra (secondary) that is due to other diseases. Acharya charaka says Jalodara is an incurable disease and Susruta called all Udara Roga as a Mahagada i.e., garve alinment and difficult to treat. Among Tridosha, Prakupita Vata gets accumulated in Udara between Twaka (skin) and Mansa (muscle). Because of Mandagni, there is Mala Sanchya and Dosha Sanchaya occurs and which causes Strotorodha of *Udakvaha & Rasavaha Strotasa*<sup>3</sup>. Then it disturbs Prana (heart) Apana (renal), Agni (liver) and ultimately causes accumulation of *Udaka* (fluid) in body mainly in Udara, which is cardinal feature of Jalodara. Jalodara (Ascites) a disease has been described extensively in ayurveda along with medical treatment & surgical procedures.

Along with the aggravated *Vata*, *Agni* (digestive fire) which is *Manda* (low)also causes *Udararoga*. Hence, there are multiple factors involved in the causation of *Udararoga*<sup>4</sup>.

In other terms, *Udara* is manifested because of vitiated *Rasa Dhatu* portion which gets extravagated from *Koshtha* and *Grahani* gets collected in *Udara*<sup>5</sup>. Ayurvedic management with drugs such as provocation of digestion, daily therapeutic purgation, stimulant for hepatic function and only milk diet that acts on root of pathology of ascites and by breaking down of pathogenesis gives good result in ascites.

Diet and water restriction is an important thing in the management of Ascites. Ayurvedic management with drugs such as provocation of digestion, daily purgation, hepatic stimulation and only milk as a diet, that acts on root of pathology of Ascites and breaking down pathogenesis gives good results in *Jalodara* <sup>6</sup>(Ascites).

#### CASE REPORT: -

A 54 yrs. male patient with chief complaints of Anorexia, Abdominal distension, Bipedal edema, Mild icterus, General weakness: 1 months

#### PRESENT HINESS-

The patient was alright before 1 months, after that the patient has develops Anorexia, abdominal distension, bipedal edema, mild icterus and general weakness. Hence, he came to kayachikitsha dept. Patient was admitted in indoor patient department for ayurvedic treatment &daily observation.

**PAST HISTORY:** HTN, DM etc.

**SURGICAL HISTORY**: No major surgical illness.

**FAMILY** 

**H/O** – Addiction: Chronic Alcoholic since 20 yrs.

### PHYSICAL EXAMINATION: -

1. SYSTEMIC **EXAMINATION** (per abdomen).

edema - ++

- 2. INSPECTION Distended abdomen.
- 3. PALPATION- Tenderness in the right hypochondriac region. Hepatomegaly - 3cm below Rt costal margin.

4 PARCUSSION Fluid thrill present Shifting dullness.

# Pathya-Apathya<sup>7</sup>:

Diet was restricted to the patient and she was kept on only cow milk (Shunthi Siddha Godugdha). All type of food items and water were restricted for 3 months. When the patient was hungry or thirsty, she was given lukewarm Shunthi Siddha Godugdha only. Medicines were also given with cow milk as an adjuvant.

Table No. 1. Treatment given to the nationt: -

Day	Drugs	Effect
1.	1.Arogyavardhini Vati 2 TDS.	Appetite decreases,
	2. Brihatyadi Kashayam 4 tsp BD.	Tongue coated,
	3. Trivrittavahaleha 1 tsp at 4 am OD.	Bowel not passed.
	4.Punarna Asava 4 tsp BD.	
	5. Tapyadi loha 1 tab twice a day.	
	6. Sootshekhar rasa. 1 tab twice a day.  Anupana- Godugdha. 7.Panchakarma	
	a. Arkapatta Bandhana (Udarapradeshi)	
	b. Hingu shunthi lepa. (Udarapradeshi)	
	c. Punanrava Lepa (Ubhayapada)	
2.	1.Continue till <i>Upasaya</i>	Appetite improves,
	2 1 tab twice a day.	Rasayan effect on liver
		Tongue coated,
		Bowel passed

In Ascites diet and fluid restrictions plays an important role. Fluid restriction is up to 1.5 L per day. It includes 500 ml milk per day, boiled rice water ad linitum, green gram soup measures 100 ml twice a day and medicinal decoctions and juices which is approximately 20-100 ml twice a day. Complete salt restricts diet. Post Nitya virechana (purgation) diet Peya (boiled rice water) during day time and at night Khichadi (Dish of rice and legumes). ResultsSignificant results were found in all the symptoms, abdominal girth and bipedal edema.

### **DISCUSSION:**

### Discussion on cause of Ascites: -

Charaka Samhita, Acharya Charaka has mentioned many causes of Udararoga. In the present case patient was alcohol addict and he consume alcohol since 6yrs continuously and he has habit of eating spicy, salty and over

eating in the presence of low digestive fire (Mandagni).

# Discussion on treatment of Ascites: - Nidan Parivarjana8: -

This disease can occur due to multiple causative factors. It includes Ushna, Lavana, Vidahi, Amla Virudha Ahar Sevana, and poor lifestyle such as Vegdharana (suppuration of natural urges).so avoid all these factors and it will help to breakdown of pathogenesis of Ascites. Along with diet and water intake was restricted and the patient was kept only on milk diet. *Mandagni* is the main cause of all types Udarroga. For Agnidipana, Hingvasthaka Churna and Kumari Asava were given.

It enhances Agni (digestive power) and helps to Samprapti Vighatana. Stroto Shodhana and Apya Dosha Harana. Mainly Strotosangha is occurs in *Udarroga*, it is necessary to go for Strotoshodhana9 in order to remove the obstruction by using Tikshna, Ushna, Kshara Yukta medicine. such Arogyavardhini Vati. removes Strotosanga (obstruction) of channels and helps in Samprapti Vighatana. Simultaneously, there was removal of Apya Dosha (water retention) also. Nitva Virechana (daily therapeutic purgation) Restoring the Agni by expelling Bahudoshatva by means of Stoka Stoka Nirharana and preventing further accumulation. This can be done by administering 'Nitya Virechana'.

# Indication of Nitya Virechana Durbalapi Mahadosha: -

Patient who are weak and in whom there is excessive accumulation of *Dosha*. *Dosha Atimatra Upachayath:* If *Dosha* are in morbid state.

Margavarodhath: When morbid doshas causes the obstruction to the channels. Chiktsa Sutra is Nitva Virechana to break up the Sanga of all Doshas and retained fluid and separate them, Virechana is necessary. In the present case Trivruttavleha was given for Virechana purpose. Daily 6-8 Vega ware noted in patient after giving Trivruttavleha.

# Nidana Parivarjana<sup>10</sup> (Avoid Causative Factors):

For this diet and water, intake was restricted and the patient was kept only on milk diet.

# Agnideepti<sup>11</sup> (Provocation of Digestion)

Mandagni is the chief factor in any type of Udararoga. For Agnideepti, Trikatu Churna (for 6days)

and Shivakshar Pachana Churna (for 15 days) were given to the patient. It enhances Agni and helps in Samprapti Vighatana (breakdown of pathogenesis).

# Nitya Virechana<sup>12</sup> (Daily Therapeutic Purgation): -

Chikitsa Sutra of Jalodara is "Nitya Virechana." To break up the Sanga of all Dosha and retained fluid and separate them, Virechana is necessary. Liver (Yakrita) is the Mula Sthana (main site) of Rakta. Rakta

Pitta has Ashraya and Ashrayi

Sambandha (mutual interdependence). hence for elimination vitiated Pitta Dosha, purgation is the best treatment. Virechana also decreases abdominal girth and edema by decreasing fluid in the abdominal Abhayadi Modaka was given in present case for *Virechana* purpose. Daily 8 Vega were noted in patient after giving *Abhayadi Modaka*. More results were achieved in all the symptoms after starting daily therapeutic purgation.

# Arogyavardhini Vati<sup>13</sup>: -

Its main content is *Kutki*, which acts as pitta *Virechana* and act on *Yakruta* (liver). *Arogyavardhini Vati* maintains the liver function and promote the balance as well as healthy digestive system. It also contains *Tamra*, *Loha and Abhraka Bhasma* (purified metals power). These *Bhasma* also having *Chedana*, *Bhedana* property and helps to open the obstructed channels. In the management of *udar roga* and it also reduces the *Shotha* (swelling). In the present case, patient had all these symptoms with *Jalodara*.

Arogyavardhini Vati is known for its benefits especially to the liver. Arogyavardhini maintains the liver function and promotes balance as well as a healthy digestive system.

Its main content is Katuki (Picrorhiza kurroa) which acts as Pitta Virechana and acts on Yakrita. Ascites may be caused due to any pathology of liver, heart, kidney, etc., but ascites from liver disease is difficult to be treated; hence, there comes the need to correct the pathology from its root cause. In the present case, the patient also has hepatomegaly hence these drugs were administered. Sharapunkha is the drug of choice in spleen and liver diseases. It corrects the working of digestive system. It improves the functioning of liver. The study shows that Sharapunkha has hepatoprotective activity.

# Brihatyadi Kashayam

It is an ayurvedic classical medicine mainly used for the treatment of dysuria. It has diuretic action and improves urine flow. It is also beneficial in other urinary diseases such as urinary calculi and ascites.

#### **ACTION -**

The main pharmacological action of Brihatyadi Kashayam is due to its action on urinary system that improves the urine flow and induces easier urination. It has diuretic action. Some ingredients also have anti-inflammatory, antibacterial and antilithiatic actions, so it can also help in cases of kidney and ascites.

# **Key Benefits:**

- It may help boost immunity
- It can reduce indigestion and constipation
- It may remove toxins from the body and regulate bowel movements
- It may improve the digestion process

#### **Directions For Use:**

Take 3-6 teaspoonfuls (15-30ml) before meals with an equal quantity of water.

# Trivrith Lehyam<sup>15</sup>: -

Trivrith Lehyam is an effective Ayurvedic medicine for constipation. It is in herbal jam form. It is also known as Trivritadi Lehyam and Trivrth Leham. It is mainly used in Ayurvedic Panchakarma treatment called Virechana.

### Trivrith Lehvam Benefits:

- It helps to relieve constipation; this is a first-rate purgative with no bad taste.
- It is good for the heart.
- It is used in Ayurvedic Panchakarma treatment called *Virechana*
- This medicine should be taken strictly under medical supervision only.

## Trivrith Lehyam Dose:

- 3-6 grams once or two times a day after food or before food.
- It is administered along with honey, milk, or warm water.

For purgation, it is taken between 4 to 6 a.m. to be following up with frequent drafts of hot water. Keep in mind that Virechana is done after Snehana and Swedana. As a daily laxative, this is taken 5-10 grams after dinner.

### Punarnava Asava:

In Liver disorders, Punarnava is used to revitalize and clean the liver. According to Ayurveda, when the liver is unable to perform well it also leads to an imbalance of – Pitta-Kapha Vata Doshas. This might lead to liver diseases like jaundice. Taking Punanarva helps to correct the function of the liver by removing toxins from the liver cells. This is because of its Shodhan (purification) Mutral (diuretic) and properties. Punanarva also helps to improve digestive fire due to its Deepan (appetizer) property. It helps to digest the food easily and reduce the burden of liver. This useful in gastritis, oedema, liver diseases and widely used as herbal anti- inflammatory and anti-oedema medicine. It reduces swelling, useful in liver and spleen condition. It reduces excess water collection in the body.

## Tips:

- a. Take 1-2 teaspoon of Punarnava juice.
- **b.** Add the same quantity of water to it.
- c. Have it once or twice a day before taking meals to

get rid of the symptoms of liver disorders.

Arkapatta Bandhana avoids varaprakop by mruduswedana and is supportive to diureticaction. Cow milk gives strength to the patient without increasing body fluid level in the body. Udara is Asadhya vyadhi as ayurveda but we could give symptomatic relief, reduction in fluid, improvement in quality of life of the patient.

# Tapyadi Loha,

Tapyadi Loha is believed to improve liver and spleen function, which are essential for overall health and can play a role in managing ascites *Tapyadi* Loha, an Ayurvedic formulation, is traditionally used for conditions like jaundice, and anemia, liver/spleen disorders. While it's not specifically a treatment for ascites, some believe it might be beneficial in managing liver and spleen disorders that can lead to ascites. Ascites is a condition where fluid accumulates in the abdominal cavity, and liver problems are a common cause.

An Ayurvedic formulation, is traditionally used for conditions like anemia, jaundice, and liver/spleen disorders. It's also used for anemia and as a blood purifier, which might be relevant in cases of ascites where blood volume and composition can be affected. Tapyadi Loha is used for managing weakness and general prostration, which can be symptoms of ascites and liver-related conditions.

## Sutshekhar Ras

It is an important medicine used in Ayurveda,

which acts on Pitta Dosha and reduces symptoms like heartburn,

nausea, vomiting, abdominal pain, epigastric tenderness, hiccup,

fever, breathing troubles, headache etc. The second action also appears on the mind and improves the desire to eat. It helps in inducing soothing feeling, relaxes the mind, reduces stress and ultimately gives relief from the sleep talking and results in sound sleep.

#### **CONCLUSION: -**

Daily therapeutic purgation, diet restriction and ayurvedic Medicine had shown improvement in all the Symptoms of Jalodara. In the present case abdominal distension, bipedal edema, anorexia, and all above Symptoms ware significantly improved without any side effect. The patient was kept only on milk diet. No any complication ware noted during & after the treatment. Hence, it concluded can that ayurvedic Medicines with Nitva Virechana & restricted diet gives better result in Ascites.

### **REFERANCES: -**

- 1. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.284.
- 2. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.285.
- 3. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.286.
- 4. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.287.

- 5. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.288.
- 6. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.290.
- 7. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.291.
- 8. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.293.
- 9. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.294.
- Y. G. Joshi, Vatavyadhi Chikitsa,
   Charak Samhita Chikitsasthana,
   Vaidamitra Prakashana 2003, page no.295
- 11. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.296.
- 12. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita, *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.300.
- 13. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita, *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.301.
- 14. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita, *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.302.
- 15. Y. G. Joshi, *Vatavyadhi Chikitsa*, Charak Samhita, *Chikitsasthana*, Vaidamitra Prakashana 2003, page no.626.

Conflict of Interest: Non Source of funding: Nil

Cite this article:

Management of Ascites by Ayurvedic Treatment- A Case study.

Mrunal Khilare, Sarika Deore

Ayurline: International Journal of Research In Indian Medicine 2025; 9(5):01-07