



### *A Case of Ayurvedic management of chronic kidney disease with use of varunaadi kadha*

**Indore Sangram Khanderao**

Professor, Dept. of Shalya Tantra,  
Yashvantrao Chavhan Ayurved College, Aurangabad, Maharashtra, India.

**Author Correspondence:** sangram.indore@yahoo.com

#### **ABSTRACT- :**

Chronic renal failure, a consequence of chronic kidney disease, trauma, immune disorder, and certain other conditions, is a growing public health concern worldwide. Often causing high health care costs but yielding poor outcomes, kidney disease is the ninth leading cause of death in the United States, and is growing in incidence in other industrialized nations. All individuals with GFR <60 ml/min/1.73 m<sup>2</sup> for 3 months are classified as having chronic kidney disease, irrespective of the presence or absence of kidney damage. Ayurvedic text have also described various categories of mutraroga like mutraghata, mutrakricchr, ashmari and wide range of herbo mineral drugs as therapeutic measures. This clinical observation was undertaken to notice the action of Ayurvedic drugs in the management of CRF on a 69 years old patient. Patient was advised Gomutra, Gokshur seed decoction and Gokshuradi Guggula with Varunadi kwath anupan for regularly two months. Significant improvement in all subjective as well as objective parameters was noted.

#### **KEYWORDS:**

Chronic renal failure, mutrakricchr, Gomutra, Gokshuradi Guggula, Varunadi kwath, Gokshur seed decoction.

#### **INTRODUCTION**

The kidney is one of the most highly differentiated organs in the body. Endocrine functions, the regulation of blood pressure and intraglomerular hemodynamics, solute and water transport, acid-base balance, and removal of drug metabolites are all accomplished by intricate mechanisms of renal response. Chronic renal failure, a consequence of chronic kidney disease, trauma, immune disorder, and certain other conditions, is a growing public health concern worldwide. Often causing high health care costs but yielding poor outcome kidney disease is the ninth leading cause of death in the United States, and is growing in incidence in other industrialized nations.[1] It has been recently estimated that in India, the incidence rate of end stage renal disease (ESRD) to be 229 per million population (pmp)<sup>5</sup> and more than 1,00000 new patients enter renal replacement programs annually.

Chronic kidney disease (CKD) encompasses a spectrum of different pathophysiologic processes associated with abnormal kidney function and a progressive decline in glomerular filtration rate (GFR). Based on guidelines of the National Kidney Foundation [Kidney

Dialysis Outcomes Quality Initiative (KDOQI)], in which stages of CKD are defined according to the estimated GFR. All individuals with GFR <60 mL/min/1.73 m<sup>2</sup> for 3 months are classified as having chronic kidney disease, irrespective of the presence or absence of kidney damage.[2] The rationale for including these individuals is that reduction in kidney function to this level or lower represents loss of half or more of the adult level of normal kidney function, which may be associated with a number of complications.

The current therapy in kidney pathology is having minimal scope for specific curative treatment. Dialysis & renal transplantation are applicable only in a selected class of sufferer. So the management of kidney diseases is a challenge for medical profession.

In Ayurveda term “Basti” refers to urinary organ from kidney to bladder.[3] Apanavayu is the controlling principle for proper functioning of Basti.[4] In vitiation of apana vayu, the act of micturition is affected. Ayurvedic text have also described various categories of mutraroga like mutraghata, mutrakricchr, ashmari and wide range of herbo mineral drugs as therapeutic measures. This clinical observation was undertaken to notice the action of Ayurvedic drugs in the management.

**CRF MATERIAL AND METHOD** Case Study A 69 year old female patient visited our hospital with following complaints: Fatigue and Generalized Weakness, from around one year Loss of appetite, around 3 months Nausea with occasional vomiting, around 1 month Oedema, around 3 months Dyspnoea, around 1 month Reduced urine frequency, around 3 months.

Dryness of mouth and skin, around 1 month. No H/O Diabetes or any other major illness.

**H/O Past Illness**-Patient was relatively normal around 2 years ago but gradually she felt off and on weakness. She was started to developed generalized oedema with diminished urine frequency. For same she got treatment of various hospitals and started allopathic drugs. But not got relief and she was advised for regular heamo-dialysis. Patient refused for same and came to us for Ayurvedic treatment. Family History- Not Significant

**O/E**

- Nadi-84/min,
- Mal-Malavshtambha
- Mutra-Alpa-Mutrata,
- Aavil Varna
- Jihva – Saam
- Shabda – Kshin
- Sparsha – Ushna
- Drukh – Samyak
- Akruiti - Madhyam

BP-150/94 mmHg S/E- RS- Mild crepts on right lower lobe CVS- NAD CNS- Giddiness P/A- Soft, No Hepato-spleenomegaly Pitting generalized Oedema + Pallor + Deh Prakriti: Pitta pradhan vataj Dushta Shrotas: Medovaha, Mutravaha, Rasvaha Vyadhi Vinishchaya-Sannipatik Mutrakrichha

**Treatment Given** Ayurveda generally states that following a lifestyle and diet according to your body constitution is essential for maintaining good mental and physical health.

- Medicines advised Gomutra ark 20 ml empty stomach once in morning Gokshur seed decoction 20 ml (3gm Gokshur seed soaked in 50 ml water for whole night)

Gokshuradi guggul 2 vati twice daily with Varunadi Kwath anupan. Salt restricted simple diet. Total water intake allowed up to 1 liter O/E- Nadi-84/min, **All Allopathic drugs were stopped except Tablet Amlodepin AT** once daily. Patient was followed for two months continue.

### **OBSERVATIONS AND RESULTS:**

Significant improvement in all subjective as well as objective parameters.

#### **Investigations:**

Initial Values and after 2 Months Treatment Parameter Hb (13.5 - 17.5 g/dL) 8.8 9.8 10.8 S.Creatinine (0.2 - 2.2 mg/dl) 5.1 3.1 2.23 BI.Urea (7–21 mg/dL) 99.4 58.0 33.67 WBC(400011000 cmm) 11,000 8,000 8,200 Urine Albumin ++ Trace Trace RBC in Urine (0 – 2/hpf) 56 1-2 1-2 S. Na (142.9 ± 1.9) 149.9 138 136 S. K<sup>+</sup> (4.2 ± 0.3†) 5.2 4.0 3.7 S. Cl (104.6 ± 1.8†) 110.6 102.0 101.2 USG (Whole Abdomen) Shows Raised Parenchymal echogenicity of both kidney S/o Bilateral Renal Paranchymal diseases (CKD).Significant Parenchymal echogenicity decreased. B/L Kidney is in normal Size and Shape

### **DISCUSSION:**

The ancient scriptures of ayurveda consider cow urine to be the elixir of life.[5] It is the most effective natural remedy and the safest method of treatment bestowed upon us by nature.

Cow Urine is scientifically proven to enhance the anti-microbial effects of antibiotic and antifungal agents.[6] The invention relates to a novel use of cow urine as activity enhancer and availability

facilitator for bioactive molecules, including anti-infective agents.[7] The invention has direct implication in drastically reducing the dosage of antibiotics, drugs and anti-infective agent while increasing the efficiency of absorption of bio-active molecules, thereby reducing the cost of treatment and also the side-effects due to toxicity. Renal health is maintained by nitrogen, which acts as a renal stimulant, and urinary components which act as diuretic agents.[8]

Vata is responsible for degeneration of the structure of the kidney. The kidneys are made up of principally the “Rakta” and “Meda” dhatus. Treating these two dhatus imbalance is also an effective way to treat the kidneys. So the herbal drugs which can modulate these dhatus are effective in kidneys disease. According to Ayurvedic principles of management of the disease, tissue damage can be prevented and repaired by Rasayana for Mutravaha Srotas drugs because they have the capability to improve qualities of tissues and hence increase resistance of the tissues. It increases urine filtration by causing Rakta bhar vridhi whereby it acts as shothaghna and overcome muttrakrichha.

Gokshura (*Tribulus terrestris*) has been used for centuries as a general tonic by the Ancient Greeks. It is used in Ayurvedic medicine to maintain efficient kidney and urinary function and in reducing renal discomfort. It is effective in treating urinary tract disorders because it promotes the flow of urine and cools and soothes the membranes of the urinary tract. Gomutra, Gokshur and Guggula have Lekhana action having scraping effect on blocked channels. It is good diuresis accompanied by increase sodium excretion.

Crataeva nurvala is an important Ayurvedic herb that is especially valued for its effectiveness in the treatment of renal conditions. The main health actions of crataeva nurvala are diuretic, antilithiatic, rubefacient (reddening the skin by producing hyperemia) and anti-inflammatory. The bark decoction of varuna is believed to have antioxidant, contraceptive, anti-inflammatory, antimicrobial, and urinary-renal supportive qualities. Varun(Crateva nurvala) revitalizes kidneys weakened by vata, calms pitta inflammations.

### CONCLUSION:

In this case study, the patient has shown encouraging results during the management of Chronic Kidney Disease. The improvement obtained may be attributed to the disease modifying effect of given Ayurvedic treatment by means of its Rasayana (Guggul) effects.

Laboratory tests showed good improvement even within two months and serum creatinine, blood urea and albuminuria were reduced to good extent. The patient had shown great relief in all the signs and symptoms. In addition, the treatments also improved the general condition of the patient. With this treatment requirement of dialysis is eliminated in patient. Currently patient is living healthy and happy life. This treatment approach is a safe and effective alternative in case of CRF. In a difficult condition where conventional treatments

are beyond the financial capacities of a common man of the country, this therapy can be hopeful and promising.

### REFERENCES:

1. [http://www2.kidney.org/professionals/KDOQI/guidelines\\_ckd/p4\\_classes\\_g1.htm](http://www2.kidney.org/professionals/KDOQI/guidelines_ckd/p4_classes_g1.htm)
2. <https://www.parexel.com/solutions/clinical-research/phase-ii-iii/phase-iii/case-studychronic-renal-failure/>
3. Acharya JT, editor. Sushruta. Sushruta Samhita, Reprint. Sharer Sthan, 09/12. Varanasi: Chowkhambha Surabharati Prakashan; 1994; 122.
4. Pandeya G, editor. Agnivesa. Charaka Samhita. Part-I. 5th ed. charak chikitsa 28/10-11. Varanasi: Chowkhambha Sanskrit Sansthan; 1997; 778.
5. Pandeya G, editor. Agnivesa. Charaka Samhita. Part-I. 5th ed. charak Sutrasthan 01/96100. Varanasi: Chowkhambha Sanskrit Sansthan; 1997; 44-45.
6. Singh Khanuja SP. Pharmaceutical composition containing cow urine distillate and an antibiotic, patent number: 2000; 6410059.
7. Chauhan RS, Singh BP, Singhal LK. Immunomodulation with kamdhenu Ark in mice. J Immunol. Immunopathol 2001; 71: 89-92.
8. <http://www.remedyspot.com/content.php/132-Cow-UrineCan-Cure-Many-Diseases>.

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