



The Effect of *Mahish Mutra Ghanvati* in *Udar-jatodakawastha*: A Case Study

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Abstract:

Ayurveda emphasizes that all the diseases are the result of weak state of *Agni*. Improper functioning of *Agni* leads to various metabolic disorders. Ascites describes the condition of pathologic fluid collection within the abdominal cavity. According to Ayurveda *Udar-Jatodakawastha* can be correlated with ascites as the sign and symptoms are same. *Mandagni*, *Ajirna* and *malavrudhi* are the reasons behind *udar-jatodakawastha*. In this article a case study of *Udar-Jatodakawastha* in which *Mahishmutra Ghanvati* has been given over a period of 14 days resulted in the reduction of the abdominal girth, decreases in weight without any treatment emergent adverse effect and reduction of all symptoms. *Mahishmutra Ghanvati* causes *deepan*, *pachan*, *srotorodhanashnam* and *virechan* (Malavishodhana).

Keywords: *Udar*, *Mahishmutra*, *Jatodakawastha*, *srotorodhanashanam*.

Introduction:

Ayurveda is a system of healing unlike any other having a unique approach in

health care. Now a days due to sedentary lifestyle, foreign culture and unhealthy eating habits, excessive consumption of alcoholic beverages gives excessive loads on liver which gives rise to many liver disorder thus liver disorders may result into a disease called ascites.

Ascites is presence of free fluid within the peritoneal cavity. It causes because of imbalance between plasma oncotic pressure and total sodium water excess. It forms because of conditions directly involving the peritoneum (Infection, malignancy) or disease remote from the peritoneum (liver disease, heart failure, *hypoproteinemia*). Pathophysiology of *ascites* is complex. Central to this process is liver disease and portal hypertension, increased lymphatic production and splanchnic capillaries leads to ascites.

Udar-Jatodakawastha is a parallel term ascites in Ayurveda. It is described in all *sanhitas*. It is one of the *ashtau mahagad vyadhi* and is considered a *kruchrra sadhya vyadhi*. The important treatment of this disease mentioned by Charak Sanhita is

virechan(medicated pargation). *Agnisandhkshana* (to increase appetite) *pathyopatya*, *kshirpan* for diet plays an important role in the management of the disease as it is heavy laxative and *bolvardhan* action. In all *sanhitas Mahishmutra* mentioned as *udargna* as it having proper dislike *ushna*, *likshna*, *kshariya*, *virechake*, will all help to break the *samprapti* of *udar*.

A Case Report:

A 48 years male patient brought by relatives to S.C.M. A.V.M and Dr. M.N. Agashe hospital satara patient presenting with

- 1) *Udarvridhi* (Increased abdominal girth)
- 2) *Ubhaypadshoth* (Bipedal oedema)
- 3) *Kshudhamandya* (Decrease apptite)
- 4) *Ayaseen shwas* (Breathlessness)
- 5) *Dourbalya* (General weakness)

Patient had above complaints since one month.

Past history:

Patient is not known case of DM/HTN/Asthma

Patient was admitted in commando hospital in Pune in sep 2020 for hepatitis. Since 1 month patient having said previous complaints and admitted for the same. Patient having addictive history of *madyapan* (alcohol) since 12 years.

On Examination:

- 1) General condition of the patient is moderate
- 2) BP-130/80 mm of Hg, P-98/min, T-Afebrile, Spo2=98%, RR-20/min
- 3) Pallor+, Icterus+
- 4) Weight-68 kg, Height-168 cm
- 5) RS-AEBE clear; CVS-S1S2 normal; CNS- well conscious oriented
- 6) P/A-Abdomen is well distended with bulging flank .fluid thrill test is positive. Shifting dullness present on palpation. liver is 2 finger enlarged.
- 7) *Ashtavid parikshan*
 - a. *Nadi- Vatpradhan pitta*, 98/min
 - b. *Mala- Drava*
 - c. *Mutra- Samyak*
 - d. *Jivha- Sama*
 - e. *Shabd- Spashta*
 - f. *Sparsha- Prakrut*
 - g. *Druk- Pitvarni*
 - h. *Akurti- Madhyam*

Srotodushti – *Rasvahasrotas*,
annavahasrotas, *udavahasrotas*,
pranvahasrotas

Investigation:

- CBC
- Urine-R and M
- LFT
- RFT
- USG Abdomen

Treatment:

Table number: 01

Drug	<i>Mahishmutra Ghanvati</i>
Dose	2 gm/day(2 vati each of 500gm twice daily)
<i>Aunpana</i>	<i>Godhugdha</i>
<i>Sewankala</i>	<i>Abhakta</i> -Twice/day
Duration	14 days
<i>Ahar</i>	<i>Dugdhapan</i> , <i>Takra</i> , <i>Laghu ahar</i>
<i>Vihar</i>	<i>Vishranti</i>

In all Ayurvedic text *Mahishmutra* is mentioned as *Udarghna*. My formulation is based on the sutra that has described in chakradatta udar chikitsa.

Observations and results:

1) *Mahishmutra Ghanvati* showed excellent result in *udar-jatodakawastha*

2) *Mahishmutra Ghanvati* causes 5-6 malaveg with dose of 2 gm
3) *Samyak virechana* lakshana like *strotoshudhi*, *indriyaprasadhana*, *laghuta*, *agnideepan* were observed in patients after treatment.

Table number : 02

Showing improvement in measurement of abdominal girth

		Before treatment	After treatment
Weight (kg)		68 KG	62 KG
Abdominal-girth at umbilicus (cm)	Sitting position	104 cm	94 cm
	Supine position	93 cm	90 cm
Distance between xiphisternum and umbilicus	Sitting position	24 cm	22 cm
	Supine position	23 cm	21 cm
Distance between umbilicus and pubis	Sitting position	13 cm	12 cm
	Supine position	14 cm	13 cm
Distance between umbilicus and right anterior superior iliac spine	Sitting position	23 cm	18 cm
	Supine position	22 cm	16 cm
Distance between umbilicus and left anterior superior iliac spine	Sitting position	23 cm	18 cm
	Supine position	22 cm	16 cm

Table number : 03

Showing improvement in Agni, Ayasen shwas and pedal edema

	Before treatment	After treatment
Agni	Patient feeling hunger after 8-11 hour of taking meal	Patient feeling complete digestion and hunger after 3 hours of taking meal
Ayasen shwas	Person used to walk slower than the person of the same age	No trouble in walking
Ubhaypad shoth	The pressure leaves an indentation of 3-4 mm that rebound in 5 sec	The pressure leaves no indentation

Table number : 04

Investigations before and after treatment

Test	Before treatment	After treatment
Hb%	7.9 gm/dL	8.4 mg/dl
WBC count	4000/mm ³	4200/mm ³
Platelet count	1.51 lakh/mm ³	1.51 lakh/mm ³
Urine analysis	WNL	WNL
RFT	S.Urea-28.3mg/Dl	28.3mg/Dl
	S.Creatinine-0.9 mg/Dl	0.9 mg/Dl
LFT	Bilirubin total-3.5mg/DL	Bilirubin + - 1.8mg/DL
	Direct-2.1 mg/DL	Direct-1.5 mg/DL
	Indirect-1.4 mg/DL	Indirect-0.3mg/DL
USG abdomen	Liver cirrhosis with moderate ascites.	Liver cirrhosis with no ascites

Discussion:

According to Ayurveda treatment of *udar* is *nityavirechana* (Purgative), *agnideepan* (Increase appetite), *balaprapti* (Increase strength). Appreciable results were observed in form of reduction in the abdominal girth, decreased pedal edema, increased appetite and increased strength. *Mahishmutra* has laxative action which helps to eliminate toxic (Aama) out of the body, which is caused due to chronic constipation in ascites. *Mahishmutra* also increases urine output in patient that helps to reduce the pedal edema and abdominal girth. It is observed that *hyperbilirubinemia* also decreased.

Tikshna, *Ushna*, *Kshariy* properties causes *srotorodhanashna* which is helpful to *deepan*, *pachan* and *virechan*. *Godughdha* (cow milk) gives strength to the patient without increasing fluid level in the body. *Udar* is *asadhyavyadhi* (incurable) as per *Ayurveda* but could give symptomatic

relief, reduction in the fluid and improvement in the quality of life to the patient.

Conclusion:

Mahishmutra Ghanvati is effective in *Udar-Jatodakawastha*. All the symptoms like *Udarvrudhi*, *shwas*, *Ubhay-padshoth*, *agnimandya*, *dourbalya* were reduced. Hence this study can be continued on more patients for betterment of the results.

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