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Research Article

EVALUATION OF MARICHADI CHURNA IN MANAGEMENT OF GRAHANI DOSHA

Arti Sharma ^{*1}, Savaj Vaishali Nanubhai ¹, Om Pandey ², Vandana Raval ³

¹Final year, P.G. Scholar, Upgraded Department of Kayachikitsa, Government Akhandanand Ayurved College, Ahmedabad, India

²Private Practitioner, Faizabad, Utter Pradesh, India

³Lecturer of Upgraded Department of Kayachikitsa, Government Akhandanand Ayurved College, Bhadra, Ahmedabad, India

*Corresponding Author Email: rt8arti@gmail.com

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ABSTRACT

Grahani Dosha is prime diseases of gastro intestinal track. It occurs due to vitiation of Agni i.e. functional derangement of Grahani regarding production of Pachaka Pitta and also holding (Grahana) of Ama (undigested food) for digestion, but when it converts in structural deformity then that chronic condition can be considered as Grahani Roga. The principal of Grahani Dosha treatment is boost Agni and reduce Ama with the help of Katu Rasa, Laghu, Ruksha, Deepana, Pachana Guna, Ushna Veerya and Katu or Madhura Vipaka. Considering the treatment principals evaluate the effect of Marichadi Churna in the management of Grahani Dosha total 20 patients were randomly selected for the study. Marichadi Churna 6 g/day in two equally divided doses before meal were given for 6 weeks with *Takra* (Buttermilk). The effects of therapy were assessed by a specially prepared Performa designed on the basis of classical sign and symptoms of Grahani Dosha. The results were analysed statistically by Paired t-test. Statistically highly significant improvement was observed in symptoms like Muhurbaddha/ Drava Mala Pravritti, Durgandhita / Picchila Mala Pravritti, Madhura/ Tikta/ Amla Udgar Pravritti, Arochaka, Bala Kshaya, Tama Pravesha, Praseka and Alasya in the management of Grahani Dosha.

Keywords: Agni, Ama, Grahani, Marichadi Churna.

INTRODUCTION

A balanced diet and regular exercise are the keys to good digestive health. But in current era, poor dietary habits, sedentary life style and stress play a key role in the development of all disease.

These all factors primarily initiate GI tract disturbances leading to poor digestion, absorption and retention capacity of gut. One of the most common digestive disorders prevalent in the society is "Grahani Dosha". About 60 to 70 million people affected by the one or other digestive diseases.¹

Acharya Vagbhatta described Agni Viktruti (Agnimandhya) as the Nidanbhut (root cause) of Arsha (Haemorrhoid), Atisara (Diarrhoea) and Grahani Dosha², while Acharya Sushruta considered Atisara as one of the predisposing factor of "Grahani Roga"³. Grahani has Adhara Adheya Sambandh (inter related) with Agni⁴. This shows that Agni and hence Grahani is very important part of human body, considering above all things this subject is selected. Malfunction of Agni i.e. Mandagni causes improper digestion which leads to Grahani Dosha.

The present study was conducted using the ancient Ayurvedic literature. There are two fundamental element of line of treatment, first one is nidana parivarjana i.e. removal of cause and other one is maintenance of dhatus i.e. dhatusamya. In the Grahani dosha if the treatment of Agni is done it can give the proper relief because Agni (digestive fire) gets vitiated in this disease⁵. Marichadi Churna ⁶ was used as trial drug having Amapachaka, Dipana, & Kapha Vata Shamaka Properties have

been selected. Marichadi Churna contains Maricha, Chitraka and Sauvarchala Lavana.

Aims and objectives

- To study the etio-pathogenesis of Grahani Dosha according to Ayurveda.
- To evaluate the effect of Marichadi Churna in the management of Grahani Dosha.

MATERIALS AND METHODS

In the present study 20 patients fulfilling the criteria for diagnosis of the disease were selected from the OPD of Kayachikitsa department, Govt. Akhandanand Ayurved college and hospital, Ahmedabad. The research protocol was registered in Clinical Trials Registry of India (CTRI/2016/04/006184; date: 15/09/2015). An informed consent from each enrolled patient was obtained before commencement of the treatment.

Inclusion Criteria

- Patient having age between 20 years to 60 years.
- Patients having symptom of Grahani Dosha, i.e. Muhur Baddha / Drava Mala Pravritti Durgandhita / Picchila Mala Pravritti, Madhur/ Tikkat/ Amla Udgar Pravritti, Arochaka (Anorexia), Praseka (Hypersalivation), Vidaha (Burning sensation), Trishna (Thirst) etc.
- Uncomplicated cases with classical pictures of Grahani Dosha have been selected irrespective of sex, caste, religion and profession.

Exclusion Criteria

- Patients having age < 20 and > 60 years.
- Patients suffering from Acute diarrhea, Intestinal T.B., Gastric and Peptic ulcer, uncontrolled D. M. and H.T, Gulma, Atisara, Arsha.

Investigations

Routine Hematological examinations-Hb, TLC, ESR
Above investigations has been done before and after treatment to see patients general condition and to rule out any other pathology. These investigations were not the part of diagnostic criteria for Grahani Dosha.

Posology

There was 20 Patients were registered for the study only 17 patients were completed the study.

Marichadi Churna (Table 1)

Dose: 3grm two times a day before meals.

Duration: 6 week.

Anupana: Takra (Buttermilk)

Diet:-The patients were strictly advised to follow the restrictions regarding food, food habits and life style. They were instructed to avoid the possible causative factors of disease and causes for Agnimandya.

Criteria for assessment

The improvement provided by the therapy was assessed on the basis of classical signs and symptoms of Grahani Dosha. All the signs and symptoms were assigned score depending upon their severity to assess the effect of the drugs objectively. The following pattern was adopted for the scoring.

Muhur Baddha /Muhur Drava Mala Pravritti

Passing normal consistency stool (once/day).	0
Passing stool (1-2 times /day) irregular, without pain.	1
Passing stool (2-3 times /day) irregular, without pain.	2
Passing stool (3-4 times / day) just after meals, irregular, with pain.	3
Passing stool (4-6 times / day) just after meals, irregular, with pain.	4
Passing stool more than 6 times/day just after meals, irregular, with pain	5

Mala Swaroop : Durgandhita / Picchila Mala

Passing of normal consistency stool (once/day).	0
Passing stool with slight foul smell and mild unctuousness	1
Passing stool with moderate foul smell and moderate unctuousness	2
Passing stool with severe foul smell and severe unctuousness	3
Passing stool with either intolerable foul smell or intolerable unctuousness	4
Passing stool with intolerable foul smell and intolerable unctuousness	5

Udgara Pravritti : Madhura /Tikta /Amla

No Udgara at all	0
Occasionally during day or night for less than half hour after meals.	1
Udgara occurs daily for two to three times for 1/2 - 1 hours and relieved by sweets, water and antacids, etc.	2
Udgara after every intake of meal any food substance for half to one hour, and relieved by digestion of food or vomiting	3
Udgara for more than one hour not relieved by any measure	4
Udgara disturbing the patient's even small amount of fluid regurgitate to patients mouth	5

Trishna

Normal 1.5-2 litres	0
Increased but can be controlled 2-2.5 litres	1
Increased with increased frequency of drinking water 2.5-3 litres	2
Very much increased >3 litres	3

Arochaka

Willing towards all Bhojya Padartha	0
Unwilling towards some specific Ahara but less than normal	1
Unwilling towards some specific Rasa i.e. Katu/ Amla/ Madhura food	2
Unwilling for food but could take the meal	3
Unwilling towards unliking foods but not to the other	4
Totally unwilling for meal	5

Vidaha

Normal, no Vidaha.	0
Occasionally after taken spicy food.	1
Once in week after taken spicy food.	2
Every day after taken spicy food.	3
Every day without taken spicy food.	4
Burning all the time even after normal food	5

Bala Kshaya

No Daurbalya	0
Not able to perform strenuous activity.	1
Not able to perform moderate activity.	2
Cannot perform moderate activity but can perform mild activity without any difficulty.	3
Even mild activities cannot be performed	4

Tama Pravesha

No feeling of Tama	0
Occasional feeling of Tama	1
Feeling of Tama < 2-3 times a day	2
Feeling of Tama 3-6 times a day	3
Many times a day with problem in maintaining posture, tries to sit	4

Praseka :Hypersalivation

Normal salivation	0
Increased salivation but no inconvenience	1
Increased salivation and patient has to spit once or twice	2

Aalasya

No Aalasya (doing satisfactory work with proper vigour and in time)	0
Doing satisfactory work/late initiation, like to stand in comparison to walk	1
Doing unsatisfactory work/late initiation, like to sit in comparison to stand	2
Doing little work very slow, like to lie down in comparison to sit.	3
Don't want to do work/no initiation, like to sleep in comparison to lie down	4

Chardi : Vomiting

No vomiting at all	0
Frequency of salivation on every day	1
Feels sense of nauseating and vomits occasionally	2
Frequency of vomiting is two to three times or more per weeks and comes whenever Daha or pain is aggravated	3
Frequency of vomiting is daily	4
Frequency of vomiting after every meal or even without meals	5

Pad Shotha

No swelling	0
Mild swelling (1-2 times in a week)	1
Moderate swelling (3-4 times in a week)	2
Severe swelling (Continuous, not decreasing)	3

Total effect of therapy

The obtained results were measured according to the grades given below

Complete Remission	100% relief
Marked Improvement	76% to 99% relief
Moderate Improvement	51 % to 75 % relief
Mild Improvement	26 % to 50 % relief
Unchanged	= &<25 % or No relief

Statistical Analysis

The Paired t-test is applied to the statistical data for evaluating the difference in the B.T. and A.T. scores of subjective parameters.

The obtained results were interpreted as:

P > 0.05 insignificant

P < 0.05 significant

P < 0.001 highly significant

OBSERVATION AND RESULTS

Total percentage of relief in Marichadi Churna (75.3%) was observed. Marichadi Churna 7 patients had marked improvement, 10 patients had moderate improvement. While evaluating the overall effect of therapy, it was observed that none of the patients showed complete remission, mild improvement and remained unchanged. (Table 2)

Effect of Marichadi Churna

17 patients who completed treatment in, highly significant results were found in cardinal signs like Muhurbaddha/ Drava Mala Pravritti, Durgandhita / Picchila Mala Pravritti, Madhura / Tikta/ Amla Udgar Pravritti, Arochaka, Bala Kshaya, Tama Pravesha, Praseka and Alasya, while in Trishna and Chardi had significant result. Pad Shotha was observed in only one patient so it cannot evaluate by any statically test (Table 3). There was statistically highly significant increase in Hb, ESR and WBC.

Probable mode of action Marichadi Churna

On the basis of physiochemical properties of Marichadi Churna, probable Samprapti Vighatana can be understood as follows, Due to its Laghu-Ruksha-Tikshna-Visada Guna and Katu Rasa, it works as Kapha shamaka. On the other hand, it clears Vata with Tikshna Guna and Ushna Veerya. By the Agnideepana properties of all drugs, it increases the level of Jatharagni. Katu Rasa, Laghu-Ruksha-Tikshna Guna and Ushna Veerya of the drug are dominant with Agni, Akasha and Vayu Mahabhuta, which aggravates Agni. Agni and Grahani have Ashraya-Ashrita-Sambandha. Therefore, it works on Grahani as well. Through Laghu and Tikshna Guna of drug, it enters into Sukshma Srotasa and clear Ama from Srotasa. Marichadi Churna has properties like Katu Rasa, Laghu, Rukshaand Tikshna Guna, which acts as Amapachaka and Agni Deepaka which finally help in Muhurbaddha and Drava Mala Pravritti.

Table 1: Contents of Marichadi Churna

Name of Drug	Latin Name	Parts Used	Proportion
Maricha	<i>Piper nigrum</i> Linn.	Fruit	1 Part
Chitraka	<i>Plumbago zeylanica</i> Linn.	Multvak	1 Part
Sauvarchala	Black salt (eng)	Whole Part	1 Part

Table 2: Overall effect of therapy on 17 Patients of Grahani Dosha

Drug	Complete remission	Marked Improvement	Moderate Improvement	Mild improvement	Unchanged
Marichadi Churna	00%	41.18%	58.82%	00%	00 %

Table 3: Effect of therapy on signs and symptoms of Grahani Dosha

Symptoms	N	Mean		% Relief	X	S.D.	S.E.	't'	P
		BT	AT						
Muhurbaddha-Muhurdrava Mala Pravritti	17	3.77	0.71	81.3	3.06	0.83	0.20	15.25	<0.001
Durgandhit/ Picchila/ Sanna Mala Pravritti	17	2.47	0.41	83.3	2.06	0.97	0.23	8.78	<0.001
UdgaraPravritti- Madhur/ Tikta/ Amla	10	2.40	0.40	83.3	2	0.67	0.21	9.49	<0.001
Trishna	8	2.13	0.88	58.8	1.25	0.71	0.25	5.00	0.002
Arochaka	10	3.30	0.50	84.8	2.80	0.79	0.25	11.23	<0.001
Vidaha	4	3.30	1.25	64.3	2.25	0.50	0.25	9.00	0.003
Bala-Kshaya	16	2.25	0.75	66.7	1.50	0.63	0.16	9.49	<0.001
Tam Pravesha	14	1.43	0.43	70	1	00	00	(+inf)	<0.001
Praseka	3	1	00	100	1	00	00	(+inf)	<0.001
Alasya	11	2.27	1.00	56	1.27	0.47	0.14	9.04	<0.001
Chardi	4	2	0.25	87.5	1.75	0.50	0.25	7.00	0.006
Pad Shoth	1	-	-	-	-	-	-	-	-

DISCUSSION

The observations made in this aspect lead to the conclusions that maximum number of Patient's was from age group of 34-47 years. This age group is major working class in the society. Recurrent abdominal infections are very common in this age group due to unhygienic and fast food culture, irregularity in consuming meal (i.e. Adhayasana, Vishamasana). Due to this Agni Dushti occurred and it causes the Tridosha Prakopa.

Maximum patients were having Madhyama Ruchi, Madhyama Abhyavaharanashakti and Madhyama Jarana Shakti. This signifies the importance of Agni in the pathogenesis of Grahani Dosh.

In the present clinical study, highest number of patients had Madhyama Kshudha. Alpa Kshudha results into vitiation of Dosh which leads to Ama formation. It plays a key role in Samprapti of Grahani Dosh. Therefore here drug was given having Deepana and Pachana properties.

According to Nidana of Grahani Dosh, Ati Ambupana, Ati Snigdha and Abhojana were observed in maximum patients. Ati Katu Ahara, Ati Vidahi Aharawas found in most of patients. According to Viharaja Nidana, Vega Vidharana was observed in maximum patients. In Manasa Nidana, Krodha was observed in most of patients. In all of cases, involvement of Purishavaha was observed. These all factor were vitiated the Agni and this vitiated Agni will cause Grahani Dosh.

All patients were having Muhurbaddha / Drava, Durgandhita, Picchila Mala Pravritti, irregular bowel habit. Maximum patients were had motion frequency 4 to 6 times / day was observed. Most of patients having Alpa Sama Mala Pravritti while other patients having Ati Sama Mala pravritti. This observation shows, vitiation of Agni may cause improper digestion and it may create irregular, Sama, Durgandhita, Picchila Mala Pravritti.

CONCLUSION

This is evident from both clinical and statistical improvement that the drugs Marichadi Churna is effective in the treatment of Grahani Dosh. All the contents of Marichadi Churna have the appetizer, carminative and antimicrobial activity. Maricha is

very useful in Dhatvagni Pradeepka. This composition is work on Trayodasha Agni level and Grahani and Agni have inter-related. So it can be conclude from present study that the Marichadi Churna is very effective in management of Grahani Dosh. The drug Marichadi Churna is described by Acharya Sharangdhar in Madhyama Khand Churna Prakarana, which was selected for study is an excellent combination of Deepana, Pachana drugs.

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