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RESEARCH ARTICLE

CONCEPTUAL STUDY OF AYURVEDIC APPROACH IN THE MANAGEMENT OF UDAR

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ABSTRACT

Most common manifestation of liver dysfunction is Ascites and most common cause of Ascites inspite of advance medical facilities still there is no sure treatment which cure patient of Ascites totally. The modern treatments only provide provisional relief with time dependent recurrence but the fluid gets collected in the abdominal cavity repeatedly. In such a cases, Ayurvedic treatment gives relief without any side effects. *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 pathogenesis of Ascites and by breaking down of pathogenesis gives good result in the management of *Udar* (Ascites). In the developed world, the most common cause of Ascites is liver cirrhosis. Other causes include cancer, heart failure, tuberculosis, pancreatitis and blockage of hepatic vein. In cirrhosis, underlined mechanism involved high blood pressure in the portal system and dysfunction of blood vessels. The outlook for people with Ascites primarily depend on its underlying cause and severity. In general the prognosis of malignant Ascites is pure. Most cases have mean survival time between 20 to 58 weeks, depending on the type of malignancy. In this article we have discuss different *Acharyas* treatment according to Ayurvedic point of view.

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INTRODUCTION

This is interesting statement regarding *Jalodar* found in *Charak Samhita*. If one not doing the treatment then patient will die and even we do treatment then also patient will die. *Udar* (Ascites) is such kind of disease¹. *Jalodar* is generalized abdominal enlargement. *Mandagni* (poor appetite), *Doshati sanchaya* (collection of toxic substance in body), *Paap Karma* (bad nature) are main causes of *Udar* describe in *Ashtanga hrudaya Nidansthan*² In *Charak samhita Pran- Apan- Agni dushti* are main pathology of *Udar* is described.³ In modern science we can correlate it with Ascites. The word Ascites is of Greek origin (*askos*) and mears bag or sacacities describe the condition of pathological fluid collection within the abdominal cavity.⁴ Among *Tridosha* the *prakupita vata* (aggravated *vata*) gets accumulated in *Udara* between *Twaka* (skin) and *Mansa* (muscles) leading to *shotha* (swelling) this is being termed as *Udararoga*. Vitiation of *vatadi doshas* causes *strotasavarodha* which causes *Udararog*.⁵ There are 8 types of *Udar vyadhi* explain in *Charak* as well as *Sushrut Samhita - Vataj pittaj kaphaj, sannipataj, Yakrutodar, baddhodar, kshatodar, Dakodar*.⁶ Ascites is the most common complication in patients with cirrhosis.

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It can lead to several life threatening complications resulting in poor term survival outcome. Today's lifestyle is also one of the cause of increase in Ascites patients, like- drinking too much alcohol, increase in weight, loss of exercise, increase salt intake. In India, cirrhosis of liver is the most common cause of Ascites (55%). Male constitutes predominant number of patients due to sociocultural reasons of liquor consumption. *Udar* is *Kruchadhya vyadhi* according to *Charak* and *Sushruta Samhita*.⁷ Ascites is when there is an accumulation of free fluid in the peritoneal cavity. Large amount of fluids more than one liter is accumulated in the peritoneal cavity. The symptoms includes,

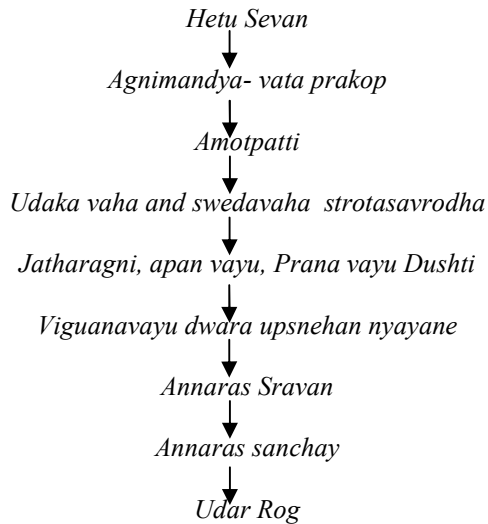
METHODS AND MATERIAL

Data is collected from various websites PubMed, Google scholar, *Charak Samhita, Sushruta Samhita, Vagbhat Grantha*, various articles and published papers.

Samprapti:

Dosh:

*Vata- Praan, Agni(samaan), Apan
Dushya-Ras Dhatu
Srotas sudhti- Ambuwah and swedwah srotas.*



DISCUSSION

- Nidan Parivarjana (Avoid causative factors):** For this diet and water intake was restricted and patient kept only on milk
- Agnidipti (provocation of digestion):** Mandagni is the chief factor in any type of Udararog. For Agnidipti trikatu churna, shivakshar pachan churna used in Udar. It enhances Agni and helps in samprapti vighatana¹¹
- Apyam Doshaharanam and Srotoshodhan (removing the accumulated fluid):** Trivruttavleha used for strotoshodhan by its Ushna (Hot), Tikshna (sharp), Ruksh (dry) Guna. It removes Strotasanga (obstruction) of channels and helps in samprapti vighatana (breakdown of pathogenesis) simultaneously it remove Apya dosha (water retention also)¹²
- Nitya virechan- Chikitsa Sutra of Udar is Nitya Virechan:** To break up the sanga of all dosha Virechan is necessary. Liver is the mula sthan of rakta. Rakta-pitta has Ashraya-Ashrayi sambandh. Purgation is the best treatment for elimination of vitiated Pitta dosha. Virechan also decreases abdominal girth and edema by decreasing fluid in the abdominal cavity¹³

Treatment according to various Acharyas

A. Charak samhita

Shodhan chikitsa: There are 3 main factor in developing Udar - Dosh Sanchay, Mala Sanchay and Strotorodha. 'Virechan' is the best treatment described in Charak samhita in Sampraptibhang of Udar. For Strotorodha and accumulation of fluid in abdominal cavity. 'Tikshna Virechan' used in Udar. Virechan decrease abdominal girth as well as fluid in the abdominal cavity. Pattabandh treatment is used in Udar and for these Arkapatra is used. Due to its Ushna, Tikshna guna it decreases Strotorodha in Udar. It is also called as a type of Anagni Sweda.

Shaman chikitsa: Agnimandya is main factor for developing Udar. In Udar Rog daily milk diet is advised for Virechan. In Udar first six month daily milk and next 3 months milk as and Lavanvirahit Peya is advised. Next 3 month rice and milk is advised.¹⁴

Arogyavardhini Vati : Vati is known for its benefits especially to the liver. It maintains the liver function and promotes balance as well as a healthy digestive system. Its main content is kutaki acts as a Pitta Virechan and acts on Yakruta

Punarnavadi kwatha and punarnavadi mandura¹⁵

It also reduces shotha (swelling). It corrects Pandu and Shwasa.

B. Sushruta samhita: In Sushrut samhita tapping process is described for or treatment of Udar. Trocar and cannula are used for tapping. The bladder having been emptied and anesthesia is injected at the area selected usually midline just above the pubic pelvis and the trocar is inserted in the abdominal cavity fluid escaped trocar is drown and incision closed and sealed with dressing. A tight wide binder must be applied.⁽¹⁶⁾

C. Vagbhata samhita: Cow urine and castor oil is used along with milk. Buffalo and cow urine is also described for treatment of Udar. Camel and cow milk is also described. Castor oil is a mixture of triglycerides consisting of mainly ricinolein, linoleic acid, oleic acid, palmitic acid. Ricinoleic acid acts as an anionic surfactant that reduces net absorption of Fluids and electrolytes and stimulates intestinal peristalsis¹⁷.

D. Bhavprakash Nighantu: Gomutra is used in the treatment of Ascites. Tikshna, Ushna guna of mutra enhances agni. By its ushna, tikshna and ruksha guna it removes strotosang of channels and helps in samprapti vighatana. Simultaneously, there is removal of aapyam dosha (water retention) also¹⁸.

E. Sharangdhar Samhita: Abhayadi modak is also used for treatment of Ascites¹⁹. It contains Jamalharitaki, ghota, amalaki and nishoth that have laxative effects, therefore it used in Ascites for purpose of purgation¹⁹.

Conclusion

Daily Therapeutic purgation, diet restriction and Ayurvedic medicines are used in the symptoms of Udar. Abdominal girth, pedal edema, shotha are reduced with the help of Ayurvedic medicines. In the treatment of Udar daily milk diet along with Ayurvedic medicines shows better results without any side effects. Udar has limitation in other pathies. Ayurvedic management of Udar is one of the most effective therapy.

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