



## A CLINICAL CASE STUDY ON AYURVEDIC MANAGEMENT OF KAMALA WITH SPECIAL REFERENCE TO JAUNDICE

**Dr Rachana Patidar<sup>1</sup> Dr Nripendra Mishra<sup>2</sup> Dr Shubham Nargave<sup>3</sup> Dr Aadarsh Patidar<sup>4</sup> Dr Anurag Pandey<sup>5\*</sup>**

<sup>1-3</sup>PG Scholar, Department of Panchakarma, Govt. Dhanwantari Ayurvedic College and Hospital, Ujjain, MP, India

<sup>2</sup>Professor - In charge and HOD, Department of Panchakarma, Govt. Dhanwantari Ayurvedic College and Hospital, Ujjain, MP, India

<sup>4</sup>PG Scholar, Department of Rasashashtra & Bhaishjya Kalpana, Parul institute of Ayurved & Research, Parul University, Vadodara, Gujarat, India

<sup>5</sup>\*Assistant professor, Department of Vikriti Vigyan, Faculty of Ayurveda, Institute of Medical Sciences, Banaras Hindu University, Varanasi,

**\*Corresponding Author- Dr Anurag Pandey**

**\*Assistant Professor, Department of Vikriti Vigyan, Faculty of Ayurveda, Institute of Medical Sciences, Banaras Hindu University, Varanasi, Email-dr.anubhu@gmail.com**

---

### Abstract

Jaundice, or icterus, is characterized by yellowish discoloration of the skin, sclera, and body fluids, primarily due to elevated serum bilirubin levels. This condition generally indicates impaired liver function, with clinical symptoms typically appearing when serum bilirubin exceeds 2.5–3 mg/dL. In Ayurvedic texts, hepatocellular jaundice is described under the condition known as Kamala. The increasing prevalence of Kamala is closely linked to modern dietary habits, sedentary lifestyles, and poor hygiene, all of which contribute to hepatic dysfunction.

Ayurveda offers a comprehensive approach to managing Kamala through both Shamana Chikitsa (palliative therapy) and Shodhana Chikitsa (bio-purificatory therapy), particularly Virechana (therapeutic purgation). This case study presents the Ayurvedic management of a 22-year-old male diagnosed with Kamala (hepatocellular jaundice), who was treated using Shamana and Virechana therapies. The patient showed significant improvement in clinical signs, symptoms, and biochemical parameters. The case highlights the efficacy of classical Ayurvedic interventions in managing Kamala, though further studies are warranted to develop standardized clinical assessment criteria.

**Keywords:** Ayurveda, Kamala, Hepatocellular Jaundice, Virechana, Shamana Chikitsa, Liver Disorders

### INTRODUCTION

Jaundice refer to the yellow appearance of the skin, sclera and mucous membranes resulting from an increased bilirubin concentration in the body fluids.<sup>[1]</sup> The phenomenon of industrialization has significantly altered our lifestyles, particularly our dietary habits, leading many individuals to increasingly favor spicy fast food. This shift in lifestyle has been linked to a rise in various health issues. Additionally, the incidence of hepatitis has surged, largely due to the growing population

residing in densely populated areas, coupled with inadequate sanitation, the consumption of unhygienic food, and contaminated water sources. Frequently, individuals report feelings of weakness and fatigue, symptoms that are reminiscent of Kamala disease (jaundice). Hepatocellular Jaundice results from an inability of the liver to transport bilirubin into the bile, occurring as a consequence of parenchymal liver disease.<sup>[2]</sup> This condition arises from an imbalance in Pitta, presenting with symptoms such as "Haridra Netra Twak Nakh Anana".<sup>[3]</sup> Contemporary medical science primarily offers symptomatic treatments for hepatocellular jaundice. However, ancient scholars have noted the therapeutic approach of "kamali tu virechanama" as a guiding principle in treatment.<sup>[4]</sup> This case study illustrates that Ayurvedic herbs can yield effective results in the management of jaundice.

**Conceptual background:** In Ayurvedic classics, Kamala is described as a Raktapradoshaja Vyadhi (a disorder caused by vitiation of Rakta). It primarily affects the Raktavaha Srotas (channels carrying blood). The Yakrit (liver) and Pleeha (spleen) are considered the roots (Moola) of these channels. Virechana (therapeutic purgation) is considered the first line of management for disorders of the Raktavaha Srotas. Acharya Charaka has stated "Kamale Tu Virechanam" as the treatment principle (Chikitsa Sutra). He also regarded Kamala as an advanced stage of Pandu Vyadhi (anemia). When a patient suffering from or recovered from Pandu continues to consume Pitta-aggravating diet, it leads to excessive aggravation of Pitta Dosha, eventually resulting in the manifestation of Kamala.

### **CASE REPORT:**

A 22 year old male patient visited the OPD of Panchakarma department at Govt. Dhanvanatari Ayurved College and hospital on 27/01/2025 with the following complaints:

Patient name: XYZ

OPD/IPD No.: 1XXX22

Age/Sex: 22 years /Male

### **CHIEF COMPLIANT:**

Yellowish discoloration of skin

Icterus

Yellowish discoloration of urine

Anorexia

Generalized Weakness

### **PERSONAL HISTORY:**

Bowel – constipation

Bladder –yellowish discoloration of urine

Appetite - poor

Sleep- altered

Built - Normal

No history of any type of addiction like smoking, alcohol.

### **History of Present illness**

The patient reported a gradual onset of symptoms, starting with a feeling of tiredness and loss of appetite, followed by the yellowish discoloration of the sclera and skin. Over time, the patient noticed darkening of urine and mild discomfort in the upper abdominal region. He sought medical consultation after the symptoms persisted for two weeks without improvement.

### **History of Past History**

No H/C DM, Asthma, HTN

No H/C alcoholism

## SYSTEMIC EXAMINATION

CNS- well oriented to person, place and time

CVS system: S1, S2 is audible, No murmur

Respiratory system: no obvious deformity, with B/L clear chest, no added sound present

Digestive System: decreased appetite and constipation

Uro-genital System: yellowish discoloration of urine

## ASHTA VIDHA PARIKSHA-

- Nadi /Pulse - 78/min
- Mala (stool) - Malavshtambha (constipation)
- Mutra (urine) - Peetavarniya
- Jihva (tongue) - Samata
- Kshudha (appetite) - Mandya
- Shabda (speech) - Prakrut (normal)
- Sparsha (skin) - Prakrut (normal)
- Akruti - Madhyam
- Bala - Madhyam
- Raktadab(BP)- 110/70mmHg
- Druk (eyes) - Pita Varniy

## MATERIAL AND METHOD:

Study type- Simple Random Single Case Study.

**Table 1: Showing treatment schedule**

Date	Sr. No.	Dravya & Dose	Duration	Anupana
27/01/25	1.	Punarnavadi mandur- 250 mg Arogyavardhani vati -250 mg Yavakshar-250 mg Punarnava churna- 2 gm	BD	Luke Warm water
	2.	Syrup Jaundex -2 tsf	BD	Luke Warm water
	3.	Kutaki Churna – 3gm Fennel seed powder-3gm	HS	Luke Warm water
03/02/25	1.	Punarnavadi mandur- 250 mg Arogyavardhani vati -250 mg Yavakshar-250 mg Punarnava churna- 2 gm	BD	Luke Warm water
	2.	Syrup Jaundex -2 tsf	BD	Luke Warm water
	3.	Punarnavashtaka kwath (dry)-1tsf	BD	Luke Warm water
	4.	Kutaki Churna – 3gm Fennel seed powder-3gm	HS	Luke Warm water
17/02/25	1.	Punarnavadi mandur- 250 mg Arogyavardhani vati -250 mg Yavakshar-250 mg Shankha bhasma-125mg Guduchi churna- 2 gm	BD	Luke Warm water
	2.	Tab.Nirocil – 2 tab	BD	Luke Warm water
	3.	Tab. Liv 52 DS- 1 tab	BD	Luke Warm water
	4.	Syrup Jaundex -2 tsf	BD	Luke Warm water
	5.	Kutaki Churna – 3gm Fennel seed powder-3gm	HS	Luke Warm water

## Pathya Ahara:

- A light and easily digestible diet (laghu ahara).

**RESULT:****Table 2: Showing Changes in Blood Investigation during Treatment**

Test	24/01/25	02/02/25	13/02/25	01/03/25
Billirubin Total	13.0 mg%	7.2 mg%	3.1 mg%	1.7 mg%
Billirubin Direct	11.0 mg%	5.0 mg%	1.8 mg%	0.6 mg%
SGPT	1040 IU/L	171 IU/L	68 IU/L	31 IU/L
SGOT	436 IU/L	101 IU/L	64 IU/L	29 IU/L

During the treatment, patient was kept only on oral medication for a period of 1 month. Thus, after the one month of treatment, patient had got significant improvement in all symptoms. The results were appreciable in both the clinical and laboratory criteria.

**DISCUSSION:****Table 3: Showing Probable Mode of Action of Drvayas Used for Chikitsa**

SN	Dravya	Mode of Action
1.	Kutaki [5]	Rechak, dipan, raktashuddhikara, malabhedani
2.	Arogyavardhani vati [6]	Regulation of pitta secretion, maintain healthy fluid level in the body, agnidipan, pachana, grahani dosha nashak
3.	Punarnavadi Mandur [7]	Agni Deepan, Pitta shamak, Rasayana, Amanashaka, Pachana, Vatanulomaka
4.	Yavakshar [8]	Deepana, pachana, srotoshodhana properties
5.	Syrup Jaundex	hepatoprotective property and reduce increased bilirubin.
6.	Punarnavashtak kwath [9]	Diuretic anti-inflammatory, hepatoprotective
7.	Cap. Nirocil	Hepatoprotective, immunomodulator
8.	Tab. Liv 52 DS	hepatoprotective agent, enhancing detoxification processes

From the above description it appears that the drug exerts an effect in breaking the pathogenesis of Kamala. They act as Rasayana, improve Dhatu formation, are Tridoshaghna, Vatashamaka, Raktashodhaka, Pitta sarana and therefore relieve signs and symptoms of Kamala.

Patient was treated with an integrated approach of Ayurvedic treatment. As mentioned by ancient Acharyas, Virechana Karma and Shamaṇa chikitsa including above said medications gave good result in the management of Kamala.<sup>[10]</sup>

**CONCLUSION**

in patients with jaundice, there was a notable reduction in symptoms like yellowish skin discoloration, icterus, yellow urine, and loss of appetite. No negative effects from the treatment were observed during or after the therapy. Hence, it is suggested that additional research with a bigger sample size and longer duration is needed for more thorough finding

**REFERENCES**

1. Davidson JA, Hunter AA, editors. Davidson's Principles and Practice of Medicine. 19th ed. 2002. p. 842.
2. Davidson JA, Hunter AA, editors. Davidson's Principles and Practice of Medicine. 19th ed. 2002. p. 844.
3. Agnivesh. Charak Samhita elaborated with Part-2, Chikitsa Sthan; Panduchikitsaadhya: Chapter 16/35. Varanasi: Choukhambabharti Academy; 2020. p. 444.
4. Agnivesh. Charak Samhita elaborated with Part-2, Chikitsa Sthan; Panduchikitsaadhya: Chapter 16/40. Varanasi: Choukhambabharti Academy; 2020. p. 445.
5. Bhava Misra S. Bhavaprakasa, Vidyotini Hindi Commentary. Varanasi: Chaukhamba Sanskrit Bhawan; Part 1. p. 268-269.
6. Vagabhattacharya S. Ras ratnasamuchchaya. Edited by Ambikadatta Sastri K. p. 400.
7. Agnivesh. Charak Samhita elaborated with Part-2, Chikitsa Sthan; Panduchikitsaadhya: Chapter 16/40. Varanasi: Choukhambabharti Academy; 2020. p. 452.
8. Vagabhattacharya S. Ras ratnasamuchchaya. Edited by Ambikadatta Sastri K. p. 384.

9. Govindadas Sen S. Bhaishjya Ratnavali, Udarrogchikitsa. Edited by Ambikadatta Sastri K. p. 756.
10. Yadavji T. Ayurved Dipika, Sanskrit Commentary, Charak Samhita. Varanasi: Chaukhamba Surbharati Prakashan; 2013. p. 40.