Ayurvedic approach of *Annadravashoola* (Gastric ulcer) - A Case Report

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**Abstract:**
Ayurveda encourages certain lifestyle interventions and natural therapies to regain a balance between the body, mind, spirit, and the environment. *Annadrava shoola* is one of the disease of alimentary canal in which there is colic occurs after digestion, during digestion or at any time. Patient feels relief after vomiting. It can be compared with gastric ulcer on the basis of symptoms. Here, a male patient of 23 years of age came to the hospital with complain of abdominal pain since 2 years. Pain was gradual on onset and burning type in nature. On the basis of history of the patient and endoscopy report, he was diagnosed as gastric ulcer and hiatus hernia. We have done the *Shodhan* and *Shamana Chikitsa* for the patient. In *Sodhan Chikitsa* *Ksheera vasti* was given for 16 days and then *samana chikitsa* was done with combinations of *Amaalaki*, *Shankhabhasma* and *Dhatrilauha* for one month. Endoscopy was repeated after one and half month of treatment. Report showed only hiatus hernia which concluded that the treatment cured the *Annadrava shoola* (gastric ulcer) of the patient. So, there is hope on Ayurveda for the treatment of *Annadrava shoola*.

**Keywords:** Ayurveda, *Annadrava shoola*, Gastric ulcer, Peptic ulcer.

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**Quick Response code**

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Introduction:
Nepal is the developing country due to which people of Nepal going to be busy on their work for a long time. They have stressful condition as well. Similarly Nepalese people used to have too much spicy food. As a result they need to face many health problems. Among the health problems, problems related to alimentary canal is more common. Annadrava shoola is one among them. The colic which occurs after digestion, during digestion or on indigestion and which does not pacify either by wholesome or unwholesome food and by eating or fasting, is named as Annadrava shoola. There is continuous pain in the abdomen but abdominal pain relief was noted by patients after vomiting. [1, 2] As in all kind of Shoola there is vitiation of Vatadosha. This vitiation is mostly caused by Virudhasevan, Asatmayesevan, Abhojan, Atibhojan, Aahar. The diet which is having Rukshyatikshan, Ushnaguna, Shara, Lavan, Katuamla Rasa Sevan. Vegadharan, Ratrijagaran, Krodha, Chinta etc. Nidanasewan also aggravates Vatadosha. [3] Annanadrava shoola can be correlated with gastric ulcer on the basis of similarities in the symptoms. Gastric ulcer falls under the peptic ulcer disease later may cause irritable bowel syndrome and may cause later Arsha (hemorrhoids). [4] A peptic ulcer consists of a break in the superficial epithelial cells penetrating down to the muscularis mucosa of either the stomach or the duodenum; most duodenal ulcer are found in duodenal cap while Gastric ulcer are most commonly seen on the lesser curve near the incisures, but can be found in any part of the stomach.[5] Male to female ratio for gastric ulcer is 2:1. Chronic gastric ulcer is usually single. [6] In the modern science the main cause of gastric ulcer is H. pylori infection and use of NSAIDs. Research indicates the prevalence of H. pylori in Nepalese population is 16%. [7] Modern science treatment for gastric ulcer focused on H. Pylori irradiation therapy and reduction of NSAIDs and aspirin. [8] All types of bacteria in Ayurveda it is correlated with krimi. [9]

Case reports:
A male of 23 years of age came to the hospital with complain of moderate abdominal pain since 2 years. The pain was gradual on onset. Patients used to feel continuous pain which was burning type in nature and of no radiating type. It was associated with belching, sour eructation, burning sensation on chest region. Pain was relieved by vomiting and aggravated by taking spicy foods. There was no complain of fever, bloating. He had no any history of DM, HTN, Thyroid disorder and any surgical intervention. He had normal bowel and bladder habit but he used to study late night. On examination, there was epigastric tenderness of grade II on deep palpation. Then he was advised for esophagi-gastro duodenoscopy. Report showed gastric ulcer with hiatus hernia. On the basis of investigation and history of patient he is diagnosed as gastric ulcer with hiatus hernia. The case was treated with Ksheera vasti for 16 days and oral medicine as mentioned in Table-2.
Table-1: Ingredients of *Ksheeravasti*[^10]

<table>
<thead>
<tr>
<th>Ingredients</th>
<th>Botanical name</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satavari churna</td>
<td>Asparagus recemosus Willd.</td>
<td>20gm</td>
</tr>
<tr>
<td>Bramhi Churna</td>
<td>Bacopa monnieri (Linn.) Pennel.</td>
<td>10gm</td>
</tr>
<tr>
<td>Pippali churna</td>
<td>Piper longum Linn.</td>
<td>5gm</td>
</tr>
<tr>
<td>Milk</td>
<td></td>
<td>250ml</td>
</tr>
<tr>
<td>Water</td>
<td></td>
<td>250ml</td>
</tr>
<tr>
<td>Ghee</td>
<td></td>
<td>20gm</td>
</tr>
</tbody>
</table>

Table -2: Composition of oral medicine:

<table>
<thead>
<tr>
<th>Composition</th>
<th>Quantity</th>
<th>Anupana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amalaki churna</td>
<td>5 gm</td>
<td>Luke warm water</td>
</tr>
<tr>
<td>Shankha bhasma</td>
<td>250 mg</td>
<td></td>
</tr>
<tr>
<td>Dhatri Lauha</td>
<td>250 mg</td>
<td></td>
</tr>
</tbody>
</table>

Fig-1: Gastro-duodenoscopy Report Before Treatment

Fig-2: Gastro-duodenoscopy Report after Treatment
Procedure- all the ingredients are mixed and boiled up and reduce water to one fourth and cow Ghrita of 15-20 gm was added. Decoction was left and given per rectum in empty stomach in left lateral position (Table-1)

The composition of medicine in table 2 are taken on the amount and crushed well on the mixture and given 1tsf BD for a month with Luke warm water before meal.

Diet regulation:
Patient was advised to avoid taking spicy, fried, tormented food products and black grams. He was advised to drink plenty of coconut water, milk and honey.

Behavior regulation:
Patient was advised not to study late night. Go to bed at 9:00 PM and wake up at 4:00 AM. Similarly, he was also advised to do anulom bilom, seetali, seetakari and bhramari pranayama each for 5 minute.

Result and discussion:
According to the principal of Ayurveda, first shodana chikitsa should be done before shaman chikitsa. Here ksheera vasti is given as a purpose of sodhana chikitsa. Vasti is said to be half treatment of all the disease. [11] For the shoola chikitsa Niruhamasti is indicated. [12,13] Niruha vasti can be prepared with ksheera. [14] It is explained in pitodara chikitsa in Charak Samhita. [15] Vasti cleanses the alimentary canal quickly and easily. [16] Vasti reaches the grahami. [17] The ksheera vasti given will imparts healing effect over the peptic ulcers reduces pain and other symptoms associated with peptic ulcers. Satavari (Asparagus racemosus Willd.) has ulcer-protective effect of the methanolic extract from the fresh roots of it. It protects mucosal lining of the stomach, by increasing mucus secretion and keeping the acid and pepsin stable. Research said it also act on Helicobactor pylori. [18] Brahmni; Bacopa monnieri Linn. helps in enhancement of GABA level within the brain and due to its adaptogenic property, generates protective action against the stress induced ulcer. It reduces the damaging effects of free radicals and strengthens the mucosal barrier. [19] Pippali (Piper longum Linn.) itself a rasayan and it intensifies the action of drugs to which it added. [20] Ghreeta has madhuarasa and madhuravipaka, it alleviates vata and pitta dosha. [21] Similarly, milk also has madhura rasa and vipaka as well sheeta virya so helps to alleviates vata and pitta Dosha. [22] In other hand vasti not only alleviates vata dosha, it also helps to alleviates pitta and kapha dosha. So it may remove the avarana of the dosha.

To treat the ulcer we need the drugs which pacify both vata and pitta or drug which are sheeta in virya and madhura in vipak. [23]

Amalaki; Emblica officinalis Gaertn is a potent acidity regulator. It is a rasayan, rakta-pittahara, sheetala, amlapittanashaka, parinama shoolahara. [24] It has a properties of healing the gastric ulcer. [25] Methnoic extract of it reduces the offence factors (acid, pepsin), and increased the defensive factors (mucin secretion, cellular mucous) [26] Shankha bhasma also has anti-ulcer effect [27] and good acid neutralizing capacity. [28] Dhatrilauha is a herbomineral drug mentioned for shola rogadhikara in Bhaishajyaratnavali. It contain Dhatri; amalaki (Emblica officinalis Gaertn), Lauhabhasma, Yastimadhu (Glycyrrhiza glabra Linn.) and Guduchi (Tinospora cordifolia (Willd.) Miers ex Hook. F. & Thoms). [29, 30] Research showed extract of Yastimadhu (Glycyrrhiza glabra Linn.) is more potent then omeprazole in gastric ulcer. [31] Guduchi also has anti-ulcer properties. [32] Here, we prescribed all medication that are potent to heal ulcer. Thus treatment given to the patient healed the gastric ulcer within one and half month.
Conclusion:

Anadrava shoola is the disease of alimentary canal where there is colic which is not relief either by any wholesome or unwholesome food. 23 years male patient with gastric ulcer cured with Ksheera vasti and oral medication which are very effective to heal gastric ulcer. Thus, with ayurvedic treatment and lifestyle management, Anadrava shoola can be managed. Since, it is a single study it may be the lead point for the researcher for the further studies.

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