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KAYACHIKITSA CLINICAL CASES NOTES BY SD

DR SD NOTES APTA AYURVEDA

Clinical cases file

🔍 About This Collection

This compilation features selected **clinical cases**, observations, and interpretations derived from practical experience and Ayurvedic principles. It aims to provide learning material for students, practitioners, and enthusiasts seeking to deepen their understanding of case-based learning in Ayurveda.

🧭 Guidelines for Readers

- These cases are for **educational purposes** only.
- **Confidentiality** has been maintained. Patient identifiers have been removed or altered.
- Interpretations are based on **traditional Ayurvedic understanding** supported by clinical insights.
- Readers are advised to **consult qualified professionals** before applying any knowledge in clinical practice.
- Feedback and academic discussion are welcome for future revisions.

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JWARA (FEVER) - DETAILED HISTORY

I. GENERAL INFORMATION (Samanya Parichaya)

1. **Name:** (Patient's full name)
2. **Age:** (Infant, Child, Adult, Elderly)
3. **Gender:** (Male/Female/Other)
4. **Occupation:** (Manual worker, Office job, Student, etc.)
5. **Address:** (Urban/Rural, Climate considerations)
6. **Date of Examination:** (Day, Ritu/season)

II. CHIEF COMPLAINTS (Pradhana Vedana)

- ✅ High or low-grade **fever**
- ✅ **Chills & shivering**
- ✅ **Sweating** after fever subsides
- ✅ **Headache, body ache, fatigue**
- ✅ **Loss of appetite, nausea, vomiting**

III. HISTORY OF PRESENT ILLNESS (Samprapti Ghataka Analysis)

1. **Onset of Fever:** Gradual/Sudden
2. **Nature of Fever:** Continuous, Intermittent, Recurrent
3. **Periodicity of Fever:**
   - Daily (Santata Jwara)
   - Every alternate day (Vishama Jwara)
   - Every third day (Tritiya Jwara)
   - Every fourth day (Chaturthaka Jwara)
4. **Time of Fever Occurrence:**
   - Morning (Kapha dominant)
   - Afternoon (Pitta dominant)
   - Night (Vata dominant)

5. **Associated Symptoms:**
    - Chills & rigor
    - Burning sensation (Daha)
    - Excessive thirst (Trishna)
    - Joint pain, weakness (Daurbalya)
    - Digestive issues (Loss of appetite, bloating)
6. **Agni (Digestive Fire):**
    - Low digestion (Mandagni)
    - Loss of taste (Aruchi)
    - Increased thirst (Trishna)
7. **Bowel & Urine Changes:**
    - Constipation/Diarrhea
    - Dark yellow urine

IV. PAST HISTORY (Poorva Vrittanta)

1. Any **previous history** of recurrent fevers?
2. Any **history of chronic illness** (TB, Typhoid, Jaundice)?
3. Previous use of any **antibiotics or Ayurvedic medicines**?

V. FAMILY HISTORY (Kula Vrittanta)

✅ Any **similar fever episodes** in family members?
✅ Any **genetic predisposition** to chronic fevers or immune disorders?

VI. PERSONAL HISTORY (Vyaktigata Vrittanta)

1. **Dietary habits:** Vegetarian/Non-Vegetarian
2. **Daily routine:** Sedentary/Active
3. **Sleep pattern:** Normal/Disturbed
4. **Stress & emotional status:** Anxiety/Depression
5. **Addictions:** Alcohol, smoking, excessive tea/coffee

VII. ENVIRONMENTAL HISTORY (Parisaraja Vrittanta)

1. **Living conditions:** Clean/Unhygienic area
2. **Water source:** Clean/Contaminated
3. **Exposure to mosquito bites:** Yes/No
4. **Weather conditions:** Summer, Monsoon, Winter

VIII. ROGA PARIKSHA (DISEASE EXAMINATION)

A. Trividha Pariksha (Threefold Examination)

1. **Darshana (Inspection)**
   - Facial pallor or redness
   - Sweating, dry skin
   - Yellowish eyes (if Pitta involvement)
2. **Sparshana (Palpation)**
   - Hot or cold touch on forehead
   - Liver, spleen enlargement (if suspected)
   - Tenderness in joints or muscles
3. **Prashna (Interrogation)**
   - Type of fever
   - Aggravating & relieving factors
   - Effect on digestion & thirst

B. Ashtavidha Pariksha (Eightfold Examination)

1. **Nadi Pariksha (Pulse Examination)**
   - Pitta Jwara – Fast, strong pulse
   - Kapha Jwara – Slow, deep pulse
   - Vata Jwara – Irregular, weak pulse
2. **Mutra Pariksha (Urine Examination)**
   - Dark yellow urine (Pitta Jwara)
   - Clear urine (Kapha Jwara)
3. **Mala Pariksha (Stool Examination)**
   - Diarrhea (Pitta Jwara)
   - Constipation (Vata Jwara)
4. **Jihva Pariksha (Tongue Examination)**
   - White coating (Kapha Jwara)
   - Dry, red tongue (Pitta Jwara)

5. **Shabda Pariksha (Voice Examination)**
    - Hoarseness or weakness
6. **Sparsha Pariksha (Touch Examination)**
    - Cold extremities (Vata involvement)
    - Burning sensation (Pitta involvement)
7. **Drik Pariksha (Eyes Examination)**
    - Redness in Pitta Jwara
    - Dull, lifeless eyes in Kapha Jwara
8. **Akruti Pariksha (Body Appearance)**
    - Weak, exhausted look

C. Dashavidha Pariksha (Tenfold Examination - Patient Strength Assessment)

1. **Prakriti (Body Constitution)** – Vata/Pitta/Kapha dominance
2. **Vikriti (Dosha Imbalance)** – Primary Dosha affected
3. **Sara (Tissue Quality)** – Rasa, Rakta Dushti?
4. **Samhanana (Body Build)** – Weak/Strong
5. **Pramana (Body Measurements)** – Normal/Abnormal
6. **Satmya (Adaptability to Food/Climate)** – Good/Poor
7. **Satva (Mental Strength)** – High/Moderate/Low
8. **Ahara Shakti (Digestive Power)** – Low/High
9. **Vyayama Shakti (Exercise Capacity)** – Weak/Normal
10. **Vaya (Age Assessment)** – Young/Old

IX. MODERN DIAGNOSTIC INVESTIGATIONS (IF REQUIRED)

1. **CBC (Complete Blood Count) - WBC Count**
2. **Peripheral Blood Smear - Malaria Parasite Test**
3. **LFT (Liver Function Test) - If Jaundice Suspected**
4. **Fever Chart Monitoring**

X. FINAL DIAGNOSIS (SIDDHANTA)

➡️ Based on **history, clinical examination & investigations**, determine:
✓ **Type of Jwara** – Vataja/Pittaja/Kaphaja/Sannipataja
✓ **Dosha Involvement** – Primary & secondary Dosha affected
✓ **Dushya (Affected Dhatus)** – Rasa, Rakta Dushti
✓ **Strotas (Body Channels Involved)** – Rasavaha, Raktavaha Strotas

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DETAILED CASE HISTORY OF JWARA (FEVER) IN AYURVEDA

I. GENERAL INFORMATION (सामान्य परिचय)

- **Patient Name:** Mr. XYZ
- **Age:** 30 years
- **Gender:** Male
- **Occupation:** Farmer
- **Residence:** Rural, mosquito-prone area
- **Date of Examination:** 01/03/2025
- **Chief Complaints:** Fever with chills for 5 days

II. CHIEF COMPLAINTS (प्रमुख लक्षण)

✅ **Fever with chills & shivering** – 5 days
✅ **Body ache, joint pain, and headache** – 4 days
✅ **Sweating after fever subsides** – 3 days
✅ **Loss of appetite & nausea** – 3 days
✅ **Generalized weakness & fatigue** – 5 days

III. HISTORY OF PRESENT ILLNESS (वर्तमान रोग इतिहास - सम्प्राप्ति घटक)

1. **Mode of Onset:** Sudden
2. **Nature of Fever:** Intermittent, every alternate day
3. **Fever Pattern:**
    - High fever in the evening (101-103°F)
    - Chills followed by sweating
    - Fever reduces after sweating

4. **Associated Symptoms:**
    - Burning sensation (दाह)
    - Excessive thirst (तृष्णा)
    - Loss of appetite (अरुचि)
    - Joint pain & body ache (अङ्गमर्द)
    - Weak digestion (मन्दाग्नि)
5. **Effect of Food Intake on Fever:** No improvement
6. **Bowel & Urinary Habits:**
    - Soft stool, no constipation
    - Dark yellow urine

IV. PAST MEDICAL HISTORY (पूर्ववृत्तान्त)

- No history of chronic fever
- No history of tuberculosis, diabetes, or hypertension

V. FAMILY HISTORY (कुलवृत्तान्त)

- No similar illness in family members
- No hereditary diseases

VI. PERSONAL HISTORY (व्यक्तिगत इतिहास)

1. **Dietary Habits:**
    - Vegetarian, prefers spicy food
    - Irregular eating habits
2. **Daily Routine:**
    - Wakes up at 6 AM, sleeps at 11 PM
    - Exposure to mosquito-infested areas
3. **Sleep Pattern:** Disturbed due to fever
4. **Mental Status:** Irritable due to illness
5. **Addictions:** Occasionally consumes tea & coffee

VII. ENVIRONMENTAL HISTORY (परिसरज इतिहास)

- ✅ **Living Area:** Rural, marshy surroundings
- ✅ **Sanitation:** Moderate cleanliness
- ✅ **Water Source:** Well water
- ✅ **Mosquito Exposure:** Yes, frequent bites

VIII. ROGI PARIKSHA (रोगी परीक्षण - CLINICAL EXAMINATION)

A. त्रिविध परीक्षा (Threefold Examination)

1. **Darshana (दर्शन - Inspection)**
   - Weak, pale appearance
   - Sweating present after fever episode
   - Slight icterus (yellowish sclera)
2. **Sparshana (स्पर्श - Palpation)**
   - Fever: **102°F**
   - Cold hands & feet, warm forehead
   - Liver & spleen slightly enlarged
3. **Prashna (प्रश्न - Interrogation)**
   - Fever periodicity: Every 2nd day
   - Severe body pain, nausea
   - Weak digestion

B. अष्टविद परीक्षा (Eightfold Examination)

Factor	Findings
Nadi (Pulse - नाड़ी)	Pitta-Kapha dominant (Tachycardia)
Mutra (Urine - मूत्र)	Slightly dark yellow
Mala (Stool - मल)	Soft, normal frequency
Jihva (Tongue - जिह्वा)	Coated white (Ama accumulation)
Shabda (Voice - शब्द)	Feeble, weak tone
Sparsha (Touch - स्पर्श)	Cold extremities, hot forehead
Drik (Eyes - दृष्टि)	Yellowish sclera, dull look
Akruti (Body Build - आकृति)	Weak, emaciated

C. दशविद परीक्षा (Tenfold Examination - Patient Strength Assessment)

Factor	Findings
Prakriti (प्रकृति)	Pitta-Kapha
Vikriti (विकृति)	Vishama Jwara (Malaria)
Sara (सार)	Madhyama (Moderate Strength)
Samhanana (संहनन)	Medium body frame
Pramana (प्रमाण)	Normal BMI
Satmya (सात्म्य)	Mixed diet
Satva (सत्त्व)	Moderate mental strength
Ahara Shakti (आहार शक्ति)	Reduced digestion
Vyayama Shakti (व्यायाम शक्ति)	Weak, fatigue on mild exertion
Vaya (वय)	Madhyama (Middle age)

IX. DIAGNOSIS (व्याधि निदान)

Ayurvedic Diagnosis:

➡️ **Vishama Jwara (Malaria-like fever) - Pitta-Kapha Pradhan**
➡️ **Involvement of Raktavaha & Rasavaha Srotas**
➡️ **Dosha: Pitta-Kapha with Vata involvement**

Modern Diagnosis:

➡️ **Malaria (Plasmodium Vivax)** – Confirmed by Peripheral Blood Smear Test

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X. TREATMENT PLAN (चिकित्सा सूत्र)

A. निदान परिवर्जन (Avoiding Causative Factors)

✅ Prevent mosquito bites (Mosquito nets, repellents)
✅ Avoid damp, marshy areas
✅ Maintain hygiene & sanitation

B. शोधन चिकित्सा (Detoxification Therapy - If Suitable)

- **Virechana (Purgation Therapy)** – To remove Pitta Dosha
- **Raktamokshana (Bloodletting Therapy)** – If severe Pitta-Rakta Dushti signs appear

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C. शमन चिकित्सा (Internal Medications)

Medicine Name	Dosage	Indication
Sudarshana Churna	3-5 gm with honey	Fever control
Amritarishta	15-20 ml after meals	Immunity booster
Tribhuvan Keerti Rasa	1 tablet twice daily	Fever with chills
Godanti Bhasma	250 mg twice daily	High fever & headache
Praval Pishti	250 mg twice daily	Pitta-pacification
Laxmivilas Ras	1 tablet twice daily	Fatigue & weakness

D. पथ्य आहार (Dietary Advice)

✅ **Light & warm food** – Moong dal soup, khichdi
✅ **Herbal drinks** – Tulsi, ginger, and black pepper tea
✅ **Fruits** – Pomegranate, coconut water
❌ Avoid oily, spicy, junk food, and cold items

E. पथ्य विहार (Lifestyle Modifications)

✅ Complete **bed rest**
✅ Avoid **daytime sleep**
✅ Keep room **well-ventilated**

XI. FOLLOW-UP & PROGNOSIS

✅ **Follow-up every 3 days** – Monitor fever pattern
✅ **CBC after 7 days** – Assess recovery
✅ **Full recovery expected in 2-3 weeks**

Modern Diagnostic Tests & Treatment Comparisons for Jwara (Malaria)

I. MODERN DIAGNOSTIC TESTS FOR MALARIA (Vishama Jwara)

1. **Complete Blood Count (CBC)**
    - **Findings:**
        - Low hemoglobin (Anemia)
        - Increased WBC count (Infection)
        - Low platelet count (Thrombocytopenia)
2. **Peripheral Blood Smear (PBS) - Gold Standard Test**
    - **Findings:**
        - Presence of **Plasmodium vivax/falciparum** parasites
        - Ring-shaped trophozoites in RBCs
3. **Rapid Diagnostic Test (RDT) for Malaria Antigens**
    - Detects **Plasmodium falciparum & Plasmodium vivax** antigens in blood
4. **Liver Function Test (LFT)**
    - **Findings:**
        - Elevated **SGPT/SGOT** (Liver enzyme disturbance due to parasite)
        - Mildly elevated bilirubin (Jaundice in severe malaria)
5. **Renal Function Test (RFT)**
    - **Findings:**
        - Increased creatinine (Kidney involvement in severe malaria)
6. **Blood Glucose Level**
    - Hypoglycemia in severe malaria cases
7. **Dengue & Typhoid Tests** (To rule out co-infection)
    - **NS1 Antigen, IgM, IgG for Dengue**
    - **Widal Test for Typhoid**

II. MODERN TREATMENT VS AYURVEDIC TREATMENT COMPARISON

Treatment Aspect	Modern Medicine (Allopathy)	Ayurveda Approach
Fever Control	Paracetamol 500 mg SOS	Sudarshana Churna, Godanti Bhasma
Anti-Malarial Drugs	Chloroquine/Artemisinin Combination Therapy (ACT)	Tribhuvan Keerti Rasa, Amritarishta
Immunity Boosting	Multivitamins, Iron supplements	Giloy (Guduchi), Amalaki Rasayana
Liver Protection	Hepatoprotective drugs	Kalmegh (Andrographis), Bhumiamalaki
Anemia Management	Iron supplements	Lohasava, Punarnava Mandura
Hydration & Electrolyte Balance	ORS, IV Fluids if needed	Coconut water, Peya (Thin gruel)
Post-Recovery Strength	Protein supplements	Chyawanprash, Ashwagandha Lehyam

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III. PROGNOSIS & FOLLOW-UP

✅ **Recovery Time:**

- **With Modern Medicine:** 7–10 days
- **With Ayurvedic Treatment:** 10–15 days (Holistic healing with lifestyle correction)

✅ **Follow-up Plan:**

1. **Monitor Fever Pattern:** Every **3 days**
2. **CBC Test:** After **7 days** (Check for anemia recovery)
3. **LFT & RFT:** After **10 days** (Assess liver/kidney recovery)
4. **Diet & Lifestyle:** Continue for **at least 1 month**

Conclusion & Integrated Approach

- **Acute Cases: Modern medicine (Anti-malarials) + Ayurveda for recovery**
- **Chronic & Recurrent Cases: Ayurveda (Rasayana therapy) + Herbal support**
- **Severe Cases (Complications): ICU care (Allopathy) + Ayurveda for post-recovery detox**

Post-Malaria Recovery Plan in Ayurveda

(Rasayana Chikitsa)

I. Rasayana Chikitsa (Rejuvenation Therapy)

1. Dietary Plan (Pathya Ahara)

✓ Easily digestible, nourishing, and strengthening foods
✓ Herbal drinks & soups to restore strength
✓ Avoid heavy, oily, and spicy foods

Food Type	Examples	Benefits
Grains	Khichdi (Rice & Moong Dal), Oats, Barley	Strengthens digestion
Soups	Mung Dal Soup, Carrot & Beetroot Soup	Boosts immunity & blood production
Fruits	Pomegranate, Dates, Banana, Coconut Water	Helps in blood formation & hydration
Milk & Ghee	Warm milk with Ashwagandha, Cow's ghee	Enhances strength & immunity
Herbal Drinks	Ginger-Tulsi Tea, Giloy-Kadha	Detoxifies & prevents relapse
Nutrient-Rich Foods	Almonds, Raisins, Walnuts, Sesame Seeds	Revitalizes body tissues

2. Herbal Medicines for Post-Malaria Recovery

Herbal Medicine	Dosage & Usage	Benefits
Chyawanprash	1 tsp with warm milk daily	Boosts immunity & restores strength
Guduchi (Giloy) Satva	500 mg with honey, twice daily	Strengthens immunity & detoxifies blood
Ashwagandha Lehyam	1 tsp daily after meals	Improves muscle strength & stamina
Shatavari Kalpa	1 tsp with warm milk	Restores energy & improves digestion
Punarnava Mandura	1 tablet twice daily	Supports liver & kidney function
Lohasava	10 ml with water after meals	Treats anemia & boosts hemoglobin
Drakshasava	10 ml with water after meals	Acts as a natural energy tonic

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3. Panchakarma for Detoxification & Strength

- ✅ **Abhyanga (Oil Massage with Bala Taila)** – Strengthens muscles
- ✅ **Swedana (Herbal Steam Therapy)** – Removes toxins & boosts circulation
- ✅ **Shirodhara (Medicated Oil on Forehead)** – Reduces post-malaria weakness
- ✅ **Basti (Herbal Enema - Dashmool Basti)** – Restores digestion & balances Vata
- ✅ **Virechana (Pitta Detox with Trivrit Churna)** – If needed for liver detoxification

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4. Daily Lifestyle Changes (Pathya Vihar)

- ✅ **Early Sleeping & Waking Routine** – Ensures full recovery
- ✅ **Mild Physical Exercise (Yoga & Pranayama)** – Improves stamina
- ✅ **Avoid Cold Exposure & Strenuous Work** – Prevents relapse
- ✅ **Stay Hydrated with Herbal Drinks** – Coconut water, Tulsi-Ginger tea
- ✅ **Use Mosquito Prevention Measures** – Net, herbal repellents (Neem, Tulsi)

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5. Ayurvedic Home Remedies for Strength

- 🌿 **Giloy & Tulsi Juice** – 10 ml daily for immune boosting
- 🌿 **Warm Milk with Turmeric & Ashwagandha** – Strengthens body tissues
- 🌿 **Pomegranate & Date Syrup** – Helps in blood formation
- 🌿 **Dry Ginger & Black Pepper Tea** – Supports digestion & immunity

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Conclusion: Holistic Recovery Plan

- ✅ **Balanced Diet + Ayurvedic Herbs**
- ✅ **Detox Therapy (Panchakarma) + Daily Lifestyle Discipline**
- ✅ **Regular Follow-up with CBC & LFT Tests**

Customized Daily Meal Plan for Post-Malaria Recovery (Rasayana Ahara)

🌅 Morning (6:00 - 7:00 AM)

✅ **Warm Water with Lemon & Honey** (Flushes toxins, boosts metabolism)
✅ **Herbal Drink:**

- **Option 1:** Giloy & Tulsi Juice (10 ml) – Immunity booster
- **Option 2:** Dry Ginger & Black Pepper Tea – Enhances digestion

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🍽️ Breakfast (8:00 - 9:00 AM)

✅ **Light & Easily Digestible Foods**

- **Khichdi with Ghee** (Moong Dal + Rice) – Nourishes body
- **Ragi Porridge with Almonds & Dates** – Rich in iron & calcium
- **Steamed Idli with Coconut Chutney** – Gentle on digestion
- **Warm Milk with Ashwagandha/Shatavari Powder** – Strengthens body

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🍏 Mid-Morning (10:30 - 11:00 AM)

✅ **Fresh Seasonal Fruits** (Easily digestible, rich in nutrients)

- Pomegranate (Rakta Vardhak – Increases blood count)
- Apple or Banana (Instant energy)
- Coconut Water (Hydration & electrolyte balance)

✅ **Herbal Supplement:**

- **Chyawanprash (1 tsp with warm milk)** – Immunity & vitality booster

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🍛 Lunch (12:30 - 1:30 PM)

✅ **Balanced Meal for Strength & Digestion**

Food Item	Benefits
Jeera Rice + Moong Dal Soup	Light & protein-rich
Chapati with Ghee	Enhances digestion
Steamed Vegetables (Carrot, Beetroot, Bottle Gourd)	Rich in vitamins & minerals
Buttermilk with Roasted Cumin (Jeera)	Improves digestion & cools Pitta
Small Portion of Jaggery	Helps in blood formation

Avoid: Fried, spicy, sour, and fermented foods.

☕ Evening Snack (4:00 - 5:00 PM)

✅ **Healthy Options:**

- **Dry Fruits (Almonds, Raisins, Dates, Walnuts)** – Energy-boosting
- **Herbal Tea (Ginger, Tulsi, Cardamom)** – Prevents weakness
- **Sprouts Salad (Green Gram, Black Gram)** – High protein

🍛 Dinner (7:30 - 8:30 PM)

✅ **Light & Nourishing Meal**

- **Vegetable Soup (Lauki, Carrot, Pumpkin) with Jeera & Ajwain** – Aids digestion
- **Soft Roti with Dal & Ghee** – Easy to digest, gives strength
- **Rice with Buttermilk** – Cooling & light

✅ **Herbal Supplements:**

- **Drakshasava or Lohasava (10 ml with water)** – Strengthens blood & digestion
- **Turmeric Milk (Golden Milk)** – Promotes deep healing

🌙 Before Bed (9:00 - 10:00 PM)

✅ **Soothing Night Rituals:**

- **Warm Milk with Ashwagandha or Shatavari** – Strength & immunity
- **Light Foot Massage with Warm Oil** – Relaxes body & improves sleep

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💡 Additional Tips for Faster Recovery

✅ **Hydration:** Drink **at least 2.5-3 liters of water daily**
✅ **Avoid:** Junk food, carbonated drinks, excessive salt, and sour foods
✅ **Regular Sunlight Exposure:** 15-20 mins daily for Vitamin D
✅ **Gentle Yoga & Pranayama:** Improves strength & lung function

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📝 Weekly Monitoring Plan

🔹 **Week 1:** Focus on hydration, light diet, and herbal support
🔹 **Week 2:** Introduce strength-building foods (Nuts, Ghee, Khichdi)
🔹 **Week 3 & Beyond:** Increase stamina with herbal Rasayana

General Treatment of Jwara (Fever) in Ayurveda

I. Nidana Parivarjana (Elimination of Cause)

✓ Avoid cold exposure, contaminated food, and stress
✓ Prevent indigestion (Mandagni) and accumulation of Ama (toxins)
✓ Ensure proper rest and hydration

II. Shodhana Chikitsa (Detoxification Therapy) – Panchakarma

If the fever is chronic, recurrent, or due to excess Dosha accumulation, detox therapies are used.

✅ **Langhana (Fasting & Light Diet)** – First-line treatment for Ama-associated fever
✅ **Vamana (Therapeutic Emesis)** – If fever is due to excess Kapha
✅ **Virechana (Purgation Therapy)** – If Pitta is aggravated (burning fever)
✅ **Basti (Medicated Enema)** – If fever is due to chronic Vata imbalance
✅ **Nasya (Nasal Therapy)** – If Jwara is associated with sinus issues or headache

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III. Shamana Chikitsa (Palliative Treatment – Herbal Medicines)

🌿 **1. Sudarshana Churna** – 1 tsp with honey, twice daily (Best for all types of fevers)
🌿 **2. Tribhuvan Keerti Rasa** – 1 tablet with Tulsi decoction (For viral & recurrent fevers)
🌿 **3. Amritarishta** – 10-15 ml with water after meals (For chronic fevers, malaria, typhoid)
🌿 **4. Guduchi (Giloy) Satva** – 500 mg with honey, twice daily (Immunity booster)
🌿 **5. Godanti Bhasma** – 250 mg with honey, twice daily (For high-grade fever)
🌿 **6. Praval Pishti** – 250 mg with coconut water (For burning fever)
🌿 **7. Laxmi Vilas Rasa** – 1 tablet twice daily (For viral fevers with body pain)

IV. Pathya Ahara (Diet During Jwara – Healing Foods)

✅ **Light, easily digestible, and nourishing foods**
✅ **Avoid spicy, heavy, and fried foods**

Food Type	Examples
Grains	Barley, Oats, Moong Dal Khichdi
Soups	Mung Dal Soup, Bottle Gourd Soup
Herbal Drinks	Tulsi-Ginger Tea, Giloy Decoction
Fruits	Pomegranate, Apple, Coconut Water
Milk & Ghee	Warm milk with turmeric & ghee
Liquids	Rice Gruel (Peya), Buttermilk with cumin

V. Pathya Vihar (Lifestyle & Precautions)

✅ **Bed rest** – Essential for full recovery
✅ **Warm water intake** – Helps in toxin removal
✅ **Light exercise (after fever subsides)** – Improves metabolism
✅ **Avoid AC & cold water exposure** – Prevents fever recurrence
✅ **Maintain hygiene & avoid infections**

VI. Special Ayurvedic Kwathas (Herbal Decoctions) for Jwara

🌿 **1. Giloy-Tulsi-Kalmegh Decoction** – Immunity & fever relief
🌿 **2. Neem-Turmeric Kwatha** – For bacterial infections
🌿 **3. Dashmool Kwath** – For post-fever body pain.

रक्तपित्त की इतिहास वृतांत (History Taking of Rakta Pitta)

1. परिचय (Introduction)

- **हिंदी:** रक्तपित्त आयुर्वेद में वर्णित एक गम्भीर विकार है जिसमें शरीर के विभिन्न मार्गों से रक्तस्राव होता है।
- **English:** Rakta Pitta is a severe disorder described in Ayurveda where there is bleeding from different body channels.

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2. रोगी का सामान्य विवरण (General Information of Patient)

- **हिंदी:**
  - नाम, आयु, लिंग
  - धर्म, जाति, निवास स्थान
  - व्यवसाय, आर्थिक स्थिति
  - आहार एवं जीवनशैली
- **English:**
  - Name, Age, Gender
  - Religion, Caste, Place of Residence
  - Occupation, Economic Status
  - Diet and Lifestyle

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3. प्रमुख लक्षण (Chief Complaints - मुख्य शिकायतें)

- **हिंदी:** रक्त का निकलना विभिन्न मार्गों से - नासिका, मुख, मलद्वार, मूत्र मार्ग आदि।
- **English:** Bleeding from different channels – nose, mouth, rectum, urinary tract, etc.

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4. इतिहास पूछताछ (History Taking - Anamnesis)

(क) उत्पत्ति एवं अवधि (Onset and Duration)

- **हिंदी:**
  - रक्तपित्त कब से शुरू हुआ?
  - क्या यह अचानक हुआ या धीरे-धीरे बढ़ा?
  - दिन में कितनी बार होता है?
- **English:**
  - When did the Rakta Pitta start?
  - Was it sudden or gradual?
  - How many times does it occur in a day?

(ख) रक्त के गुण (Character of Blood)

- **हिंदी:**
  - रक्त का रंग (लाल, काला, पीला, नीला)
  - रक्त पतला है या गाढ़ा?
  - कोई दुर्गंध या झाग है?
- **English:**
  - Color of blood (Red, Black, Yellow, Blue)
  - Is the blood thick or thin?
  - Any foul smell or froth?

(ग) संबद्ध लक्षण (Associated Symptoms)

- **हिंदी:**
  - क्या रक्तस्राव के साथ जलन होती है?
  - शरीर में कमजोरी, सिर दर्द, चक्कर, प्यास अधिक लगना?
  - त्वचा का पीलापन या अन्य रंग परिवर्तन?
- **English:**
  - Any burning sensation with bleeding?
  - Weakness, headache, dizziness, excessive thirst?
  - Paleness or color changes in skin?

(घ) नाड़ी परीक्षा (Pulse Examination)

- **हिंदी:** नाड़ी का स्वरूप - तीव्र, मंद, कपिश या मिश्रित?
- **English:** Nature of pulse – Fast, Slow, Kapha dominant, or Mixed?

(ङ) दोष-प्रकृति विचार (Dosha Analysis)

- **हिंदी:**
  - रक्तपित्त मुख्यतः पित्तप्रधान विकार है।
  - क्या रोगी पित्त प्रकृति का है?
  - क्या तेजस्वी या गर्म खाद्य पदार्थों का सेवन अधिक होता है?
- **English:**
  - Rakta Pitta is mainly a Pitta-dominant disorder.
  - Is the patient of Pitta Prakriti?
  - Does the patient consume hot, spicy foods frequently?

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5. निदान हेतु अन्य महत्वपूर्ण प्रश्न (Other Diagnostic Questions)

- **हिंदी:**
  - क्या कोई आनुवंशिक (Genetic) कारण है?
  - क्या कोई पुरानी बीमारी (Chronic Disease) है?
  - क्या दवाइयों (Medicines) या विषाक्त पदार्थों (Toxins) का सेवन हुआ है?
- **English:**
  - Any hereditary (Genetic) causes?
  - Any chronic diseases?
  - Any history of medicines or toxin exposure?

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6. रोग वृद्धि एवं शमन कारक (Aggravating & Relieving Factors)

- **हिंदी:**
  - कौन से पदार्थ या गतिविधियाँ रक्तस्राव बढ़ाते हैं?
  - कौन सी चीजें आराम देती हैं?
- **English:**
  - What factors worsen the bleeding?
  - What provides relief?

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7. उपशय एवं अनुपशय (Palliative & Non-Palliative Factors)

- **हिंदी:**
  - ठंडी चीजों से लाभ मिलता है या नहीं?
  - गर्म खाने से रक्तपित्त बढ़ता है या नहीं?
- **English:**
  - Does cooling therapy provide relief?
  - Does hot food aggravate bleeding?

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8. सप्त धातु व अग्नि स्थिति (Seven Dhatu & Digestive Fire Status)

- **हिंदी:**
  - क्या जठराग्नि मंद है?
  - क्या धातु क्षीण हो रही है?
- **English:**
  - Is digestive fire weak?
  - Is there any depletion of Dhatus?

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9. मानसिक एवं शारीरिक स्थितियाँ (Mental & Physical Status)

- **हिंदी:** रोगी का मानसिक संतुलन कैसा है? क्या रोगी को अधिक क्रोध, चिंता, तनाव होता है?
- **English:** What is the patient's mental balance? Is there excessive anger, anxiety, or stress?

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10. निदान निष्कर्ष (Diagnostic Conclusion)

- **हिंदी:** प्राप्त सभी लक्षणों एवं परीक्षाओं के आधार पर रक्तपित्त के प्रकार (ऊर्ध्वग, अधोग, तिर्यग) का निर्धारण।
- **English:** Based on symptoms and examination, classification of Rakta Pitta (Urdhvaga, Adhoga, Tiryaka).

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11. उपचार योजना (Treatment Plan)

- **हिंदी:**
  - दोष एवं धातु विचार कर औषधि चयन।
  - पित्त शमन हेतु औषधियाँ एवं आहार-विहार।
- **English:**
  - Selection of medicines based on Dosha and Dhatu.
  - Pitta-pacifying treatments, diet, and lifestyle changes.

Clinical Case of Raktapitta in Ayurveda

1. Patient Information:

- **Name:** Mr. Rajesh Kumar
- **Age:** 42 years
- **Gender:** Male
- **Occupation:** Businessman (Frequent travel, irregular meals)
- **Chief Complaint:** Recurrent episodes of nasal bleeding (Nakseer) and vomiting of blood (Haematemesis) for the last 1 month

2. Present History:

- The patient has been experiencing **frequent episodes of epistaxis** (nosebleeds) and **occasional vomiting of blood**.
- Blood is **bright red**, mixed with Kapha (mucus).
- Increased intensity of symptoms **after consuming spicy, hot, and fermented foods**.
- Associated complaints: Burning sensation in the chest, mild dizziness, and excessive thirst.
- Bowel movements are irregular, often with **constipation** and **mild blackish stools**.
- Sleep is **disturbed** due to discomfort and anxiety.

3. Past History:

- **History of Pitta-aggravating diet** (spicy, oily, sour foods).
- **Alcohol consumption occasionally** (2-3 times a week).
- **History of long-standing acidity (Amla Pitta).**
- No history of major systemic illness.

4. Family History:

- No family history of Raktapitta or bleeding disorders.

5. Personal History:

- **Diet:** Spicy, sour, fried, and fermented foods frequently.
- **Lifestyle:** Irregular eating habits, excessive workload, stress.
- **Sleep:** Disturbed due to discomfort.
- **Bowel habits:** Sometimes hard stools, occasional loose stools.

6. Clinical Examination:

- **General Appearance:** Lean body structure, **mild pallor**, signs of dehydration.
- **Pulse (Nadi Pariksha): Tikshna, rapid (Pitta Prakopa Lakshana)**
- **Tongue Examination: Reddish tongue with a dry coating**
- **Skin:** Warm to touch, **mild yellowish discoloration of sclera**
- **Eyes:** Slightly red and irritated
- **Nose:** Dry nostrils with crusting, mild bleeding spots
- **BP:** 130/80 mmHg
- **Heart Rate:** 92 bpm
- **Abdominal Examination:** Mild tenderness in the epigastric region

7. Ayurvedic Diagnosis:

- **Vyadhi Name: Raktapitta (Urdhwaga Type)**
- **Dosha Involvement:** Predominantly **Pitta Dosha with Rakta Dushti**
- **Dushya: Rakta, Rasa Dhatu**
- **Srotas Affected: Raktavaha Srotas**
- **Srotodushti Type: Atipravriti (excess flow of blood)**
- **Adhisthana (Seat of Disease):** Primarily **Urdhwaga (upper part – nose & mouth)**

8. Nidan (Etiology):

- **Ahara (Dietary causes):** Excess intake of **spicy, hot, oily, sour, fermented, and alcohol-based foods**.
- **Vihara (Lifestyle causes): Late-night work, excessive stress, and excessive sun exposure.**
- **Manasika Hetu: Stress and anger (Aggravation of Pitta and Rakta Dushti).**

9. Samprapti (Pathogenesis) of Raktapitta:

1. **Pitta Prakopa (Vitiation of Pitta Dosha)** due to improper food and lifestyle.
2. **Pitta enters Rakta Dhatu**, leading to **Rakta Dushti (toxicity in the blood).**
3. **Increased Ushna and Tikshna Guna** of Pitta liquefy Rakta, causing **excess flow from Srotas (Atipravriti).**
4. The blood moves **upward (Urdhwaga Raktapitta)**, causing **nasal bleeding and hematemesis.**

10. Chikitsa (Treatment Plan):

a) Nidana Parivarjana (Avoiding the Cause)

- **Avoid spicy, sour, oily, fermented foods, and alcohol.**
- **Reduce stress, practice cooling pranayama (Sheetali, Sheetkari).**
- **Maintain hydration and proper sleep.**

b) Shodhana Chikitsa (Detoxification Therapy):

- **Virechana Karma (Purgation therapy) with Avipattikar Churna** – To eliminate excessive Pitta.
- **Raktamokshana (Bloodletting) using Jalaukavacharana (Leech Therapy)** – If symptoms persist.

c) Shamana Chikitsa (Pacifying Therapy):

1. Internal Medications:

- **Drakshadi Kashaya** – Cooling and Pitta-pacifying.
- **Praval Pishti + Kamdudha Ras** – For immediate relief from burning sensation and acidity.
- **Mulethi (Yashtimadhu) Churna** with honey – To heal gastric mucosa and control bleeding.
- **Pitta-shamak Dravyas**: Guduchi, Shatavari, Amalaki.
- **Raktapitta Hara Medications:**
    - **Bol Parpati** – For hemostasis.
    - **Lauh Bhasma (in small quantity) with Amalaki Rasayana**.
    - **Sutshekhar Ras** – For Pitta pacification.

2. External Therapies:

- **Sheetala Lepana (Coolant paste) on forehead and chest using Chandan (Sandalwood) & Usheera (Vetiver).**

d) Pathya-Apathya (Diet & Lifestyle Recommendations):

✅ **Pathya (Recommended Diet & Lifestyle):**

- **Coolant diet:** Boiled rice with milk, moong dal soup, ghee.
- **Drinks:** Coconut water, sugarcane juice, pomegranate juice.
- **Herbal drinks:** Coriander water, Amalaki juice, Guduchi decoction.
- **Lifestyle:** Early sleeping, avoiding excessive sun exposure, and stress management (meditation).

❌ **Apathya (To Avoid):**

- **Spicy, sour, fermented foods.**
- **Excessive physical exertion, late-night work.**
- **Direct sun exposure, stress, anger.**

11. Prognosis (Sadhya-Asadhyata):

- **Sadhya (Curable) in the initial stage** if managed with proper Shodhana and Shamana Chikitsa.
- **Chronic cases** with excessive bleeding and systemic involvement may take longer to manage.

12. Follow-Up Plan:

- Weekly follow-up to monitor symptoms.
- Gradual reduction of medications once symptoms subside.
- **Long-term use of cooling and rejuvenating herbs like Amalaki, Guduchi, and Shatavari.**

Ayurvedic Treatment of Raktapitta (Urdhwaga Raktapitta)

1. Nidana Parivarjana (Avoiding the Cause)

✅ Avoid **Pitta-aggravating diet & lifestyle**

- **Spicy, sour, fermented, fried foods, alcohol, caffeine**
- **Excessive sun exposure, stress, anger, late-night work**

✅ **Adopt a cooling & soothing routine**

- Drink plenty of **cool water, herbal infusions, coconut water**
- Practice **meditation, pranayama (Sheetali, Sheetkari, Anulom Vilom)**

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2. Shodhana Chikitsa (Purification Therapies) – To expel aggravated Pitta & Rakta

A) Virechana (Therapeutic Purgation) – Main Therapy

- **Indication:** Patients with Pitta Prakopa, excessive burning, acidity, heat in the body.
- **Procedure:**
  - **Preparation (Poorva Karma):**
    - Snehapana (Internal Oleation) with **Ghrita (Ghee) – Amalaki Ghrita / Mahatikta Ghrita**
    - Swedana (Mild Steam Therapy)
  - **Main Procedure (Pradhana Karma):**
    - **Triphala Churna + Drakshadi Kashaya / Avipattikar Churna** at night
    - **Eranda Sneha (Castor oil) in warm milk**
- **Benefits:** Removes excess **Pitta from the body**, purifies Rakta.

B) Raktamokshana (Bloodletting) – If severe bleeding continues

- **Leech therapy (Jalaukavacharana)** on forehead, liver area
- **Siravedha (Venesection) – Controlled bloodletting** in high-risk cases
- **Benefits:** Removes vitiated Rakta, reduces Pitta Dushti

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3. Shamana Chikitsa (Pacification Therapy) – Balancing Doshas & Stopping Bleeding

A) Internal Medicines

✅ Pitta-Shamak & Raktastambhak (Hemostatic) Medicines

Medicine	Dosage	Benefits
Kamdudha Ras	125 mg BD with honey	Pitta-pacifying, cooling
Praval Pishti	250 mg BD with honey	Stops bleeding, reduces heat
Mukta Pishti	125 mg BD	Cooling, hemostatic
Sutshekhar Ras	125 mg BD with honey	Reduces acidity, gastritis
Bol Parpati	250 mg BD	Stops bleeding
Lauh Bhasma	125 mg BD with Amalaki	Prevents anemia after bleeding
Amalaki Rasayana	1 tsp BD	Rejuvenates blood, balances Pitta

✅ Herbal Decoctions & Powders

Herbs/Combination	Dosage	Benefits
Drakshadi Kashaya	20 ml BD	Cooling, Pitta pacifier
Yashtimadhu Churna (Licorice powder)	3 gm BD with milk	Heals ulcers, stops bleeding
Guduchi Satva	500 mg BD	Detoxifies, immune-booster
Musta + Amalaki + Shatavari Churna	3 gm BD with honey	Rejuvenates, controls bleeding
Nagakesara Churna	1 gm BD	Stops excessive bleeding

✅ Ghee Preparations (Pitta-Pacifying Ghritas)

- **Siddharthaka Ghrita** – Useful in burning sensation
- **Tiktaka Ghrita** – Detoxifies Pitta
- **Amalaki Ghrita** – Rejuvenates blood

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4. External Treatments

✅ **Coolant Applications (Lepas & Abhyanga)**

- **Chandan (Sandalwood) + Usheera (Vetiver) + Rakta Chandan** paste – Applied on forehead & chest
- **Sheetala Dravya Abhyanga (Cooling Oil Massage)** with **Coconut oil / Bala Taila**

✅ **Pitta-Pacifying Lifestyle Practices**

- Sheetali & Sheetkari Pranayama
- Applying **rose water or Triphala eyewash** for burning eyes

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5. Pathya-Apathya (Diet & Lifestyle Management)

✅ **Pathya (Recommended Foods & Habits)**

🔹 **Cooling & Pitta-Pacifying Diet**

- **Drinks:** Coconut water, pomegranate juice, sugarcane juice
- **Milk & Ghee:** Cow's milk with Yashtimadhu
- **Vegetables:** Bottle gourd, ash gourd, cucumber, karela
- **Grains:** Old rice, wheat, barley
- **Legumes:** Green gram (moong dal)

🔹 **Lifestyle Recommendations**

- Stay in **cool places, avoid heat & stress**
- **Daily head massage with cooling oils (Chandanadi Taila)**
- **Sleep early**, avoid late-night work

❌ **Apathya (Foods & Habits to Avoid)**

- **Spicy, oily, fermented, and non-vegetarian foods**
- **Excess tea, coffee, alcohol, and tobacco**
- **Excessive sun exposure & over-exercise**
- **Sleeping late at night & excessive mental stress**
-
- ## 6. Prognosis & Follow-Up

- **Mild to moderate cases:** Recover within **2-4 weeks** with proper treatment
- **Severe cases with chronic bleeding:** Require long-term therapy
- **Regular follow-up** every 7-10 days for improvement monitoring

प्रमेह (Prameha) का केस हिस्ट्री लेना - आयुर्वेदिक पद्धति में

(Case History Taking of Prameha in Ayurvedic Pattern)

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1. परिचय (Introduction)

- रोगी का नाम (Name of the Patient)
- आयु (Age)
- लिंग (Gender)
- जाति (Caste)
- धर्म (Religion)
- पता (Address)
- पेशा (Occupation)
- वैवाहिक स्थिति (Marital Status)
- आर्थिक स्थिति (Economic Status)

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2. मुख्य शिकायतें (Chief Complaints - Pradhana Vedana)

- मधुर-मूत्रता (Sweet Urine)
- बार-बार मूत्र त्याग (Frequent Urination)
- अत्यधिक प्यास (Excessive Thirst)
- दुर्बलता (Weakness)
- अधिक भूख लगना (Excessive Hunger)
- वजन में कमी या वृद्धि (Weight Loss or Gain)
- त्वचा रोग (Skin Diseases – खुजली, फोड़े-फुंसी)
- हाथ-पैरों में झुनझुनी (Tingling Sensation in Hands and Feet)
- दृष्टि दोष (Blurred Vision)

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3. इतिहास लेना (History Taking - Anamnesis)

A. वर्तमान रोग का इतिहास (History of Present Illness - Vyadhi Anubhava)

- रोग की शुरुआत कैसे और कब हुई? (Onset & Duration)
- रोग की प्रकृति - तीव्र (Acute) या जीर्ण (Chronic)
- क्या कोई अन्य लक्षण हैं? (Associated Symptoms)
- रोग का पूर्व में किया गया कोई उपचार? (Previous Treatments)
- जीवनशैली में कोई परिवर्तन (Lifestyle Modifications Tried)

B. पूर्व रोगों का इतिहास (Past Medical History - Poorva Vyadhi Anamnesis)

- पूर्व में कोई प्रमेह संबंधी लक्षण थे? (Any Past Episodes of Prameha)
- अन्य व्याधियाँ - उच्च रक्तचाप, हृदय रोग, गुर्दे की बीमारी आदि (Any Comorbidities)
- परिवार में प्रमेह का इतिहास (Family History of Diabetes)

C. पारिवारिक इतिहास (Family History - Kula Anamnesis)

- माता-पिता या भाई-बहनों में प्रमेह है या नहीं? (Any Relatives with Prameha)
- आनुवंशिक प्रवृत्ति (Genetic Predisposition)

D. व्यक्तिगत इतिहास (Personal History - Vyaktigata Anamnesis)

- आहार (Dietary Habits) – मधुर, गुरु, स्निग्ध भोजन का अधिक सेवन? (Excessive Intake of Sweet, Heavy, and Oily Food)
- विहार (Lifestyle) – शारीरिक श्रम का अभाव? (Sedentary Lifestyle)
- निंद्रा (Sleep Pattern) – रात्रि जागरण, अनियमित निद्रा? (Irregular Sleep or Night Awakening)
- व्यसन (Addictions) – मद्यपान, धूम्रपान, ताम्बूल सेवन? (Alcohol, Smoking, Betel Nut Chewing)

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4. रोगी का प्रकृति परीक्षण (Prakriti Assessment of the Patient)

- वातज प्रमेह (Vata Type) – शरीर दुर्बल, शुष्क त्वचा, अतिसार प्रवृत्ति
- पित्तज प्रमेह (Pitta Type) – प्यास अधिक, पसीना अधिक, जलन
- कफज प्रमेह (Kapha Type) – स्थूल शरीर, भारीपन, अधिक श्लेष्म

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5. दशविद परीक्षाएँ (Tenfold Examination - Dashavidha Pariksha)

1. **दोष परीक्षा (Dosha Examination)** – वात, पित्त, कफ का संतुलन
2. **दूष्य परीक्षा (Dushya Examination)** – रक्त, मेद, मज्जा, शुक्र आदि पर प्रभाव
3. **देश परीक्षा (Desha Examination)** – रोगी का निवास स्थान एवं वातावरण
4. **काल परीक्षा (Kala Examination)** – ऋतु एवं दिनचर्या का प्रभाव
5. **बल परीक्षा (Bala Examination)** – रोग प्रतिरोधक क्षमता
6. **आग्नि परीक्षा (Agni Examination)** – जठराग्नि की स्थिति
7. **सात्म्य परीक्षा (Satmya Examination)** – खान-पान व जीवनशैली की अनुकूलता
8. **प्रकृति परीक्षा (Prakriti Examination)** – वात, पित्त, कफ प्रकृति
9. **वय परीक्षा (Vaya Examination)** – बाल्य, यौवन, वार्धक्य
10. **व्यायाम शक्ति परीक्षा (Vyayama Shakti)** – शारीरिक श्रम करने की क्षमता

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6. अष्टविद परीक्षाएँ (Eightfold Examination - Ashtavidha Pariksha)

1. **नाड़ी परीक्षा (Pulse Examination - Nadi Pariksha)** – वातज, पित्तज, कफज नाड़ी
2. **मूत्र परीक्षा (Urine Examination - Mutra Pariksha)**
    - मूत्र की मात्रा (Quantity)
    - मूत्र का रंग (Color)
    - मूत्र का गंध (Odor)
    - मूत्र का स्वाद (Taste - मधुरता)
    - मूत्र की फेनिलता (Frothy Urine)
3. **माल परीक्षा (Stool Examination - Mala Pariksha)**
4. **जिह्वा परीक्षा (Tongue Examination - Jihva Pariksha)**
5. **शब्द परीक्षा (Voice Examination - Shabda Pariksha)**
6. **स्पर्श परीक्षा (Touch Examination - Sparsha Pariksha)**
7. **नेत्र परीक्षा (Eye Examination - Drik Pariksha)**
8. **आकृति परीक्षा (General Appearance - Akruti Pariksha)**

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7. विशेष आधुनिक परीक्षण (Relevant Modern Investigations)

- **रक्त शर्करा परीक्षण (Blood Sugar Tests)** – FBS, PPBS, HbA1c
- **लिपिड प्रोफाइल (Lipid Profile)**
- **किडनी फंक्शन टेस्ट (Kidney Function Tests - KFT)**
- **यूरीन शुगर एवं कीटोन टेस्ट (Urine Sugar & Ketone Test)**
- **न्यूरोपैथी एवं रेटिनोपैथी परीक्षण (Neuropathy & Retinopathy Screening)**

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8. संभावित निदान (Probable Diagnosis - Vyadhi Nidan)

- कफज प्रमेह - प्रारंभिक अवस्था (Kapha Type - Initial Stage)
- पित्तज प्रमेह - मध्यम अवस्था (Pitta Type - Moderate Stage)
- वातज प्रमेह - उग्र एवं जीर्ण अवस्था (Vata Type - Severe/Chronic Stage)

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9. उपचार योजना (Treatment Plan - Chikitsa Siddhanta)

1. **निदान परिहार (Avoidance of Causative Factors)** – मधुर, गुरु, स्निग्ध आहार का त्याग
2. **शोधन चिकित्सा (Detoxification Therapy)** – वमन, विरेचन, बस्ती
3. **शमन चिकित्सा (Palliative Treatment)** – हर्बल औषधियाँ (Gudmar, Haridra, Amalaki)
4. **आहार-विहार सुधार (Dietary & Lifestyle Modification)** – योग, व्यायाम, संतुलित आहार
5. **रसायन चिकित्सा (Rejuvenation Therapy)** – मधुनाशिनी, शिलाजीत, चंद्रप्रभा वटी

प्रमेह (Diabetes Mellitus) - केस स्टडी

(Case Study of Prameha in Ayurvedic Pattern)

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1. रोगी का सामान्य विवरण (General Information of the Patient)

- **नाम (Name):** रामकुमार शर्मा (Ramkumar Sharma)
- **आयु (Age):** 52 वर्ष (52 years)
- **लिंग (Gender):** पुरुष (Male)
- **पता (Address):** जयपुर, राजस्थान (Jaipur, Rajasthan)
- **पेशा (Occupation):** व्यापारी (Businessman)
- **वैवाहिक स्थिति (Marital Status):** विवाहित (Married)
- **आर्थिक स्थिति (Economic Status):** मध्यम वर्ग (Middle Class)

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2. मुख्य शिकायतें (Chief Complaints - Pradhana Vedana)

- **मूत्र त्याग की अधिकता (Polyuria)** – दिन में 8-10 बार एवं रात में 3-4 बार पेशाब जाना
- **अत्यधिक प्यास (Polydipsia)** – बार-बार पानी पीने की इच्छा
- **अत्यधिक भूख (Polyphagia)** – बार-बार खाने की इच्छा
- **शरीर में दुर्बलता (Weakness)** – दिनभर थकान महसूस होना
- **वजन में गिरावट (Weight Loss)** – 6 महीने में लगभग 5 किलो की कमी
- **पैरों में झुनझुनी (Tingling Sensation in Feet)** – चलने में कठिनाई
- **त्वचा रोग (Skin Issues)** – घाव होने पर देर से भरना

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3. रोग इतिहास (History of Present Illness - Vyadhi Anamnesis)

- **रोग की शुरुआत (Onset):** 2 वर्ष पहले रोगी को थकान, अधिक प्यास एवं बार-बार पेशाब जाने की समस्या हुई।
- **वर्तमान स्थिति (Present Condition):** लक्षण बढ़ रहे हैं, विशेष रूप से रात में अधिक प्यास और मूत्र त्याग।
- **पिछला उपचार (Previous Treatment):** रोगी ने पहले केवल घरेलू उपचार किया लेकिन कोई विशेष सुधार नहीं हुआ।

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4. पूर्व रोगों का इतिहास (Past Medical History - Poorva Vyadhi Anamnesis)

- 5 साल पहले उच्च रक्तचाप (Hypertension) का निदान हुआ था।
- गैस और अपच की समस्या पहले से बनी हुई है।

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5. पारिवारिक इतिहास (Family History - Kula Anamnesis)

- **पिता (Father):** 60 वर्ष की आयु में मधुमेह (Diabetes) से प्रभावित थे।
- **माता (Mother):** उच्च रक्तचाप (Hypertension) से पीड़ित थीं।

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6. व्यक्तिगत इतिहास (Personal History - Vyaktigata Anamnesis)

- **आहार (Dietary Habits):**
  - ✔ प्रतिदिन मिठाइयों का सेवन
  - ✔ तली-भुनी एवं गुरु आहार (Heavy and Fried Food)
  - ✔ फल एवं हरी सब्जियों का कम सेवन
- **विहार (Lifestyle):**
  - ❌ शारीरिक श्रम का अभाव (Sedentary Lifestyle)
  - ❌ कोई व्यायाम या योग नहीं
  - ❌ अधिक समय तक बैठकर कार्य करना
- **निद्रा (Sleep Pattern):**
  - ✔ 6 घंटे की अनियमित नींद
- **व्यसन (Addictions):**
  - ❌ 10 वर्षों से पान-मसाले का सेवन

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7. दशविद परीक्षाएँ (Tenfold Examination - Dashavidha Pariksha)

1. **दोष परीक्षा (Dosha Examination):** कफज एवं वातज प्रभाव अधिक
2. **दूष्य परीक्षा (Dushya Examination):** मेद, रक्त, मज्जा, शुक्र
3. **देश परीक्षा (Desha Examination):** अनूप देश (नमीयुक्त क्षेत्र)
4. **काल परीक्षा (Kala Examination):** ग्रीष्म ऋतु में लक्षण बढ़ते हैं
5. **बल परीक्षा (Bala Examination):** मध्यम बल
6. **आग्नि परीक्षा (Agni Examination):** मंदाग्नि (Weak Digestive Fire)
7. **सात्म्य परीक्षा (Satmya Examination):** मधुर रस में सत्म्यता
8. **प्रकृति परीक्षा (Prakriti Examination):** कफ-प्रकृति
9. **वय परीक्षा (Vaya Examination):** मध्यम अवस्था (Middle Age)
10. **व्यायाम शक्ति परीक्षा (Vyayama Shakti):** न्यून (Low Physical Strength)

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8. अष्टविद परीक्षाएँ (Eightfold Examination - Ashtavidha Pariksha)

1. **नाड़ी (Pulse):** कफज प्रवृत्ति, मंदगति
2. **मूत्र (Urine):**
    - अधिक मात्रा में (Increased Quantity)
    - पीला रंग (Yellowish)
    - मधुर गंध (Sweet Odor)
    - फेनिलता (Frothy Urine)
3. **मल (Stool):** गुरु और आलस्य कारक
4. **जिह्वा (Tongue):** सफेद परत जमी हुई
5. **शब्द (Voice):** भारी एवं मंद
6. **स्पर्श (Touch):** रूखी त्वचा
7. **नेत्र (Eyes):** पीला पीलापन, दृष्टि मंद
8. **आकृति (Body Structure):** स्थूलता, हल्का पेट बाहर निकला हुआ

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9. आधुनिक परीक्षण (Modern Investigations)

✅ **रक्त शर्करा परीक्षण (Blood Sugar Test):**

- FBS: 160 mg/dL (नॉर्मल < 100 mg/dL)
- PPBS: 250 mg/dL (नॉर्मल < 140 mg/dL)
- HbA1c: 8.5% (नॉर्मल < 5.7%)
    - ✅ **लिपिड प्रोफाइल (Lipid Profile):** उच्च कोलेस्ट्रॉल
    - ✅ **किडनी फंक्शन टेस्ट (KFT):** क्रिएटिनिन हल्का बढ़ा हुआ

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10. संभावित निदान (Probable Diagnosis - Vyadhi Nidan)

➞ **कफज प्रमेह (Kapha Type Diabetes) - प्रारंभिक अवस्था (Initial Stage)**

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11. उपचार योजना (Treatment Plan - Chikitsa Siddhanta)

A. निदान परिहार (Avoidance of Causative Factors)

❌ अधिक मिठाई, तले-भुने पदार्थ, भारी भोजन बंद करना
❌ आलस्य एवं शारीरिक निष्क्रियता त्यागना

B. शोधन चिकित्सा (Detoxification Therapy)

✔ विरेचन (Purgation Therapy) – त्रिवृत चूर्ण
✔ बस्ती चिकित्सा (Medicated Enema) – मधुतैलिक बस्ती

C. शमन चिकित्सा (Palliative Treatment)

✅ **औषधियाँ (Herbal Medicines):**

- गुड़मार (Gymnema Sylvestre)
- हरिद्रा (Turmeric)
- अमलकी (Amla)
- मधुनाशिनी वटी
- चंद्रप्रभा वटी

✅ **आहार योजना (Diet Plan):**

- जौ, कुल्थी, तिखट रस युक्त आहार
- गर्म पानी सेवन
- दिन में नींबू-शहद पानी

✅ **विहार (Lifestyle Modification):**

- प्रतिदिन प्राणायाम एवं योग (मंडूकासन, धनुरासन)
- हल्का व्यायाम
- 7-8 घंटे की पर्याप्त नींद

✅ **रसायन चिकित्सा (Rejuvenation Therapy):**

- शिलाजीत, अश्वगंधा, च्यवनप्राश

प्रमेह (Diabetes Mellitus) - आयुर्वेदिक एवं आधुनिक चिकित्सा की तुलनात्मक तालिका

विषय (Aspect)	आयुर्वेदिक चिकित्सा (Ayurvedic Treatment)	आधुनिक चिकित्सा (Modern Treatment)
1. चिकित्सा सिद्धांत (Treatment Principle)	दोष-प्रकृति के अनुसार शोधन एवं शमन चिकित्सा (Dosha-based Detoxification & Palliation)	ग्लूकोज नियंत्रण एवं जटिलताओं की रोकथाम (Glucose Control & Complication Prevention)
2. निदान परिहार (Avoidance of Causative Factors)	अधिक मीठे, तले-भुने व गुरु आहार का त्याग (Avoidance of Sweets, Oily & Heavy Food)	संतुलित आहार एवं कैलोरी नियंत्रण (Balanced Diet & Caloric Restriction)
3. शोधन चिकित्सा (Detoxification Therapy)	✅ विरेचन (Purgation) - त्रिवृत चूर्ण ✅ बस्ती (Medicated Enema) - मधुतैलिक बस्ती	❌ शोधन चिकित्सा नहीं अपनाई जाती
4. शमन चिकित्सा (Palliative Treatment)	✅ मधुनाशिनी, गुड़मार, हरिद्रा, अमलकी, चंद्रप्रभा वटी ✅ मधुसूदन वटी, शिलाजीत वटी	✅ मेटफॉर्मिन (Metformin) ✅ सुग्लिफ्लोजिन, ग्लिपिजाइड, इन्सुलिन
5. आहार (Diet Plan)	✅ जौ, कुल्थी, तिखट रस युक्त आहार (Barley, Kulthi, Bitter Foods) ✅ नींबू-पानी, गर्म जल सेवन	✅ कम ग्लाइसेमिक इंडेक्स वाला भोजन (Low GI Diet) ✅ अधिक फाइबर एवं कम कार्बोहाइड्रेट
6. विहार (Lifestyle Modifications)	✅ योग एवं प्राणायाम (मंडूकासन, धनुरासन) ✅ हल्का व्यायाम	✅ एरोबिक व्यायाम (Aerobic Exercise) ✅ प्रतिदिन 30-45 मिनट की शारीरिक गतिविधि
7. रसायन चिकित्सा (Rejuvenation Therapy)	✅ शिलाजीत, अश्वगंधा, च्यवनप्राश	❌ कोई प्रत्यक्ष समान चिकित्सा नहीं

विषय (Aspect)	आयुर्वेदिक चिकित्सा (Ayurvedic Treatment)	आधुनिक चिकित्सा (Modern Treatment)
8. जटिलताओं की रोकथाम (Prevention of Complications)	✅ रक्तवह संचार सुधारने हेतु रसायन द्रव्य	✅ नियमित ब्लड शुगर मॉनिटरिंग ✅ रक्तचाप एवं लिपिड प्रोफाइल नियंत्रण
9. फॉलो-अप (Follow-up)	1 माह पश्चात पुनः मूल्यांकन (Re-evaluation after 1 month)	3-6 माह में HbA1c परीक्षण (HbA1c Test every 3-6 months)

निष्कर्ष (Conclusion)

- आयुर्वेद में प्रमेह का उपचार मूल कारण (दोष विकृति) पर केंद्रित होता है, जबकि आधुनिक चिकित्सा लक्षणों को नियंत्रित करने पर ध्यान देती है।
- योग, आहार एवं औषधियों का संयोजन आधुनिक चिकित्सा के साथ अपनाने से अच्छे परिणाम मिल सकते हैं।
- आयुर्वेदिक चिकित्सा **नैसर्गिक (Natural)** एवं **होलिस्टिक (Holistic)** है, जबकि आधुनिक चिकित्सा त्वरित प्रभावी लेकिन दीर्घकालिक निर्भरता उत्पन्न कर सकती है।

Modern Prescription for Diabetes Mellitus (Type 2 Diabetes - Prameha)

Patient Details:

- **Name:** XYZ
- **Age/Sex:** 50/M
- **Diagnosis:** Type 2 Diabetes Mellitus
- **Chief Complaints:** Polyuria, Polydipsia, Fatigue
- **BP:** 130/85 mmHg
- **Random Blood Sugar (RBS):** 250 mg/dL
- **HbA1c:** 8.5%

Rx (Prescription):

Drug Name	Dose & Frequency	Mechanism of Action	Indications
Metformin 500 mg	1 tablet BD (After meals)	Decreases hepatic glucose production & increases insulin sensitivity	First-line for Type 2 DM
Glimepiride 1 mg	1 tablet OD (Before breakfast)	Stimulates pancreatic β-cells to release insulin	If blood sugar is uncontrolled
Sitagliptin 100 mg	1 tablet OD	DPP-4 inhibitor, increases incretin levels	Helps in postprandial sugar control
Atorvastatin 10 mg	1 tablet OD (Night)	Lowers cholesterol & reduces cardiovascular risk	If dyslipidemia present
Aspirin (EC) 75 mg	1 tablet OD	Prevents blood clot formation	If cardiovascular risk factors present

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Lifestyle & Diet Advice:

✅ **Diet:**

- Low-carbohydrate, high-fiber diet
- Avoid refined sugars, processed foods
- Increase intake of vegetables, whole grains

✅ **Exercise:**

- 30–45 minutes of moderate exercise (e.g., walking, cycling) at least 5 days a week

✅ **Monitoring:**

- Fasting Blood Sugar (FBS) & Postprandial Blood Sugar (PPBS) every 15 days
- HbA1c every 3 months

✅ **Follow-up:**

- Review after 1 month with blood sugar reports

Remarks:

- If blood sugar remains uncontrolled, **Insulin therapy** may be considered.
- Monitor for hypoglycemia with sulfonylureas (Glimepiride).
- Regular foot examination to prevent diabetic neuropathy.

Case History of Kushta Roga (Skin Diseases) in Ayurveda

I. GENERAL INFORMATION (Samanya Parichaya)

1. Name: (Patient's full name)

2. **Age:** (Infant, Child, Adult, Elderly)

3. **Gender:** (Male/Female/Other)

4. **Occupation:** (Manual worker, Office job, Student, etc.)

5. **Address:** (Urban/Rural, Climate considerations)

6. **Date of Examination:** (Day, Ritu/season)

1. Pradhan Sampratyatmaka Lakshana (Chief Complaints)

- Discoloration of skin (Vaivarnya)
- Scaling or roughness (Rookshata)
- Itching (Kandu)
- Burning sensation (Daha)
- Oozing or discharge (Srava)
- Pain (Vedana)
- Ulceration (Vrana)

2. Poorva Vedana (History of Present Illness)

- Duration of symptoms
- Mode of onset (Acute/Chronic)
- Progression of disease
- Aggravating and relieving factors
- Any previous treatment taken

3. Nidan Panchaka (Ayurvedic Etiopathogenesis)

- **Nidana (Causative Factors)**
  - Viruddhahara (Incompatible food)
  - Atisevana of Guru, Snigdha, Madhura Ahara (Excessive heavy, oily, sweet food)
  - Dadhi (Curd) and Matsya (Fish) consumption
  - Ati-ruksha or ati-snigdha Vihara
  - Psychological factors like Krodha, Shoka
  - Beeja dosha (Genetic predisposition)
- **Dosha Involvement**
  - Tridoshaja involvement in Kushta

  - Kapha predominant in Bahya Twak Vikar
  - Pitta involvement in Daha, Srava, Vaivarnya
  - Vata involvement in Rookshata, Parushata, Srava
- **Dushya (Affected Dhatus)**
  - Twak, Rakta, Mamsa, Lasika, Ambu
- **Srotas Involvement**
  - Rasavaha, Raktavaha, Mamsavaha Srotas
- **Rogamarga (Pathway of Disease Propagation)**
  - Bahya (External) & Abhyantara (Internal)

4. Prakriti Pariksha (Constitutional Examination)

- Vata, Pitta, Kapha predominance assessment

5. Sara, Samhanana, Satmya, Pramana Pariksha (General Physical Examination)

- Twak Sara (Skin quality)
- Agni Bala (Digestive strength)
- Bala (Strength and immunity)
- Satmya (Adaptability)
- Pramana (Body measurements)

6. Dashavidha Pariksha (Tenfold Examination)

- **Dasha Vidha Pariksha Aspects**
  1. **Prakriti** – Vata, Pitta, Kapha type
  2. **Vikriti** – Nature of Kushta manifestation
  3. **Sara** – Quality of Dhatus
  4. **Samhanana** – Compactness of body tissues
  5. **Pramana** – Measurement and proportion of body parts
  6. **Satmya** – Compatibility of diet and lifestyle
  7. **Sattva** – Psychological strength
  8. **Aharashakti** – Capacity to digest food
  9. **Vyayamashakti** – Exercise endurance
  10. **Vaya** – Age of the patient

7. Ashta Sthana Pariksha (Eightfold Examination)

- **Nadi Pariksha (Pulse Examination)**
  - Vataja Kushta – irregular, thready pulse
  - Pittaja Kushta – fast, bounding pulse
  - Kaphaja Kushta – slow, deep pulse
- **Mala Pariksha (Stool Examination)**
  - Constipation in Vataja Kushta
  - Soft stools in Pittaja Kushta
  - Mucus or heaviness in Kaphaja Kushta
- **Mutra Pariksha (Urine Examination)**
  - Discoloration, frothiness, burning sensation
- **Jihva Pariksha (Tongue Examination)**
  - Coating, dryness, discoloration
- **Shabda Pariksha (Voice Examination)**
  - Normal or hoarse voice depending on dosha involvement
- **Sparsha Pariksha (Touch Examination)**
  - Dry, rough skin in Vataja Kushta
  - Hot, inflamed skin in Pittaja Kushta
  - Soft, moist skin in Kaphaja Kushta
- **Drik Pariksha (Eye Examination)**
  - Conjunctival discoloration, icterus, redness
- **Akruti Pariksha (Body Structure Examination)**
  - Emaciation, swelling, deformity if present

8. Differential Diagnosis (Vyadhi Vinischaya)

- Vicharchika (Eczema)
- Dadru (Ringworm)
- Kitibha (Psoriasis)
- Vipadika (Cracked skin disorder)

9. Treatment Plan (Chikitsa)

- **Shodhana (Purification Therapy)**
  - Vamana (Emesis) – If Kapha predominant
  - Virechana (Purgation) – If Pitta predominant
  - Raktamokshana (Bloodletting) – If Rakta involvement
  - Basti (Medicated Enema) – If chronic and Vataja type
- **Shamana (Palliative Therapy)**
  - Tikta, Kashaya, Katu Rasa Pradhana Ahara
  - Herbal formulations – Khadirarishta, Manjisthadi Kwath
  - Topical applications – Arka Taila, Nimba Taila
- **Pathya-Apathya (Do's & Don'ts)**
  - Avoid fish and milk together
  - Include bitter and astringent foods
  - Avoid curd, excessive sweets, fermented food
  - Follow proper hygiene

10. Prognosis (Sadhya-Asadhyata)

- **Sadhya (Curable)** – If diagnosed early and treated properly
- **Kruchra Sadhya (Difficult to cure)** – Chronic cases with complications
- **Asadhya (Incurable)** – Genetic involvement, neglected cases

Case History of Kushta Roga (Skin Disease) in Ayurveda

1. Patient Details

- **Name:** Mr. Ram Shankar
- **Age:** 45 years
- **Gender:** Male
- **Occupation:** Farmer
- **Address:** Varanasi, Uttar Pradesh
- **Date of Examination:** 04 March 2025

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2. Chief Complaints (Pradhan Sampratyatmaka Lakshana)

- **Itching (Kandu) –** Since 6 months, aggravated at night
- **Scaling of skin (Rookshata) –** Especially on arms and legs
- **Discoloration (Vaivarnya) –** Blackish and reddish patches
- **Burning sensation (Daha) –** Mild, increased after sun exposure
- **Oozing (Srava) –** Occasional, from cracked skin
- **Pain (Vedana) –** Mild, especially on scratching

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3. History of Present Illness (Poorva Vedana)

- The patient first noticed small red patches on his arms 6 months ago.
- Gradually, the lesions spread to legs and back.
- Itching worsened with sweating and exposure to dust.
- Over time, the skin became dry and scaly with occasional discharge.
- No history of similar illness in the past.

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4. History of Past Illness (Poorva Vyadhi)

- History of digestive issues (indigestion and bloating) for the last 2 years.
- No history of diabetes, hypertension, or tuberculosis.

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5. Family History (Kutumba Anuvanshika Vyadhi)

- No family history of Kushta Roga or other chronic skin diseases.

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6. Dietary and Lifestyle History (Ahara & Vihara)

- **Dietary Habits:**
  - Frequent consumption of fish with curd.
  - Excessive intake of sweets and dairy products.
  - Spicy and oily food preference.
- **Lifestyle & Daily Routine:**
  - Works in the field under direct sun exposure.
  - Poor personal hygiene, irregular bathing habits.
  - Sleeps late at night, irregular sleep cycle.

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7. Nidan Panchaka (Ayurvedic Etiopathogenesis)

- **Nidana (Causative Factors):**
  - Viruddhahara (Fish + Curd combination)
  - Excessive intake of Madhura & Snigdha Ahara (Sweet and oily foods)
  - Lack of proper hygiene
  - Exposure to dust and chemicals
- **Dosha Involvement:**
  - **Kapha-Pitta Pradhana Kushta** (As per symptoms like oozing, discoloration, burning, and itching)
- **Dushya (Affected Dhatus):**
  - Twak (Skin), Rakta (Blood), Lasika (Lymph), Mamsa (Muscle)
- **Srotas Affected:**
  - Rasavaha Srotas (Lymphatic circulation)
  - Raktavaha Srotas (Blood circulation)
- **Rogamarga (Pathway of Disease Propagation):**
  - Bahya (External manifestation)

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8. Dashavidha Pariksha (Tenfold Examination)

1. **Prakriti:** Kapha-Pitta dominance
2. **Vikriti:** Kushta Roga affecting skin and blood
3. **Sara:** Moderate Dhatu Sara
4. **Samhanana:** Medium build
5. **Pramana:** Normal body proportions
6. **Satmya:** Mixed diet compatibility
7. **Sattva:** Moderate mental strength
8. **Aharashakti:** Mild indigestion issues
9. **Vyayamashakti:** Moderate exercise tolerance
10. **Vaya:** Middle age (Madhyama Vaya)

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9. Ashta Sthana Pariksha (Eightfold Examination)

- **Nadi Pariksha (Pulse):** Kapha-Pitta pulse (moderate, slightly heavy)
- **Mala Pariksha (Stool):** Occasionally hard stool, incomplete evacuation
- **Mutra Pariksha (Urine):** Normal, slightly yellowish
- **Jihva Pariksha (Tongue):** Coated white layer, Kapha dominance
- **Shabda Pariksha (Voice):** Normal
- **Sparsha Pariksha (Touch):** Rough and dry skin
- **Drik Pariksha (Eye):** Mild conjunctival congestion
- **Akruti Pariksha (Body Structure):** Moderate body frame

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10. Differential Diagnosis (Vyadhi Vinischaya)

- **Vicharchika (Eczema)** – Due to scaling, itching, and oozing
- **Dadru (Ringworm)** – Ruled out due to absence of annular lesions
- **Kitibha (Psoriasis-like disorder)** – Possible similarity due to rough skin and scaling

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11. Treatment Plan (Chikitsa)

- **Shodhana Therapy (Purification Treatment)**
  - **Virechana Karma** (Purgation therapy) using Trivrit Churna for Pitta-Kapha balancing
  - **Raktamokshana (Bloodletting)** for Rakta Dushti
  - **Lepa (External Application)** – Nimba Taila & Arka Taila for healing
- **Shamana Therapy (Palliative Treatment)**
  - **Internal Medicines:**
    - **Khadirarishta** – Blood purification
    - **Manjisthadi Kwath** – Pitta & Rakta Shodhana
    - **Arogyavardhini Vati** – Liver detoxification
- **Pathya (Do's & Don'ts)**
  - **Do's:**
    - ✅ Use bitter and astringent foods (Neem, Manjistha, Turmeric)
    - ✅ Maintain proper hygiene
    - ✅ Drink herbal decoctions (Guduchi, Nimba Kwath)
    - ✅ Light & easily digestible food
  - **Don'ts:**
    - ❌ Avoid fish and dairy together
    - ❌ Avoid excess sweets, curd, and fermented foods
    - ❌ Avoid irregular sleeping habits

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12. Prognosis (Sadhya-Asadhyata)

- **Sadhya (Curable) –** If treated early with proper Shodhana and Shamana therapies
- **Kruchra Sadhya (Difficult to cure) –** If chronic and associated with lifestyle issues

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13. Follow-Up Plan

- **1st Follow-up (After 15 days):** Monitor symptoms, reduce itching, scaling
- **2nd Follow-up (After 1 month):** Assess improvement and modify treatment
- **3rd Follow-up (After 3 months):** Long-term maintenance and prevention

Ayurvedic Chikitsa for Kushta Roga (Skin Disease)

1. Shodhana Chikitsa (Purification Therapy)

To eliminate Dosha accumulation and cleanse the body, the following therapies are advised:

(A) Panchakarma Procedures

1. **Snehana (Oleation Therapy)**
   - **Internal:** Panchatikta Ghrita, Mahatikta Ghrita
   - **External:** Abhyanga with Nimba Taila, Mahamarichyadi Taila
2. **Swedana (Sudation Therapy)**
   - Bashpa Sweda (Steam therapy) with Nimba, Haridra decoction
   - Nadisweda (Localized steaming on affected areas)
3. **Vamana Karma (Emesis Therapy)** - If Kushta is Kapha-predominant
   - Madanaphala Pippali Churna with Yashtimadhu Kwatha
   - Administered after Snehapana with Mahatikta Ghrita
4. **Virechana Karma (Purgation Therapy)** - If Kushta is Pitta-predominant
   - Trivrit Churna, Avipattikar Churna, Aragwadha Phala Churna
   - Administered after Snehana and Swedana
5. **Raktamokshana (Bloodletting Therapy)** - If Kushta is Rakta Dushti-predominant
   - **Jalaukavacharana (Leech Therapy)** - For localized, chronic Kushta
   - **Siravedha (Venesection)** - If generalized Kushta with severe Rakta Dushti

2. Shamana Chikitsa (Palliative Treatment)

To balance vitiated Doshas and relieve symptoms, the following **herbo-mineral formulations** are recommended:

(A) Internal Medicines

✅ **For Kapha-Pitta Kushta:**

- *Khadirarishta* – Blood purification
- *Panchatikta Ghrita Guggulu* – Anti-inflammatory, detoxification
- *Manjishthadi Kwath* – Rakta & Pitta Shodhana
- *Arogyavardhini Vati* – Liver detox, improves skin health

✅ **For Raktaja Kushta (Blood-related Skin Disorders):**

- *Sarivadyasava* – Blood detoxifier
- *Patoladi Kwatha* – Pitta Kapha Shamana
- *Gandhaka Rasayana* – Antimicrobial, enhances immunity

✅ **For Chronic Kushta:**

- *Ras Manikya* – Works on stubborn skin conditions
- *Sootshekhar Rasa* – Balances Pitta and digestive fire
- *Kanchanar Guggulu* – Lymphatic drainage and detox

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3. Bahya Chikitsa (External Applications)

For symptom relief and local healing:

✅ **Lepas (Herbal Paste Application)**

- **Haridra & Chandana Lepa** – Cooling, anti-inflammatory
- **Nimba Churna & Manjistha Lepa** – Detoxifying, anti-infective
- **Kushthagna Lepa (Patol, Aragwadha, Triphala, Haritaki)** – Removes toxins

✅ **Taila (Medicated Oils for Massage)**

- **Mahamarichyadi Taila** – Antifungal, antipruritic
- **Nimbadi Taila** – Antimicrobial, wound healing
- **Chandana Bala Lakshadi Taila** – Cooling effect

✅ **Dhara (Pouring Decoctions on Affected Area)**

- *Khadira Kwatha Dhara* – Antiseptic
- *Nimba & Triphala Kwatha Dhara* – Deep skin cleansing

✅ **Takradhara (Buttermilk Therapy)**

- With **Haridra & Amalaki** for burning sensation relief

✅ **Udwartana (Herbal Powder Massage)**

- With **Triphala, Musta, and Haridra** to remove toxins

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4. Pathya-Apathya (Diet & Lifestyle Recommendations)

(A) Pathya (Do's – Recommended Diet & Lifestyle)

✅ Dietary Guidelines:

- **Include:** Bitter-tasting foods (Neem, Guduchi, Patola), Astringent foods (Musta, Lodhra)
- Green leafy vegetables (Spinach, Moringa), Fiber-rich foods
- Warm water with lemon, Fasting once a week for detox
- Herbal teas with Haridra, Manjistha, Guduchi

✅ Lifestyle Guidelines:

- Maintain skin hygiene, avoid excessive sun exposure
- Bath with herbal decoctions (Triphala, Nimba, Khadira)
- Regular exercise (Yoga, Pranayama) to maintain metabolism
- **Yoga Asanas:** Bhujangasana, Paschimottanasana, Shavasana

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(B) Apathya (Don'ts – Avoidable Foods & Habits)

❌ Avoid Dietary Incompatibilities (Viruddhahara)

- Fish + Milk / Curd combinations
- Heavy, oily, spicy, fermented foods
- Excessive sweets, dairy, fast food

❌ Avoid Lifestyle Mistakes

- Irregular sleeping habits
- Excessive stress, anger, and emotional distress
- Exposure to polluted water, chemicals

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5. Rasayana Chikitsa (Rejuvenation Therapy)

For preventing recurrence and enhancing immunity:

✅ **Herbal Rasayanas:**

- **Chyawanprash** – General immunity booster
- **Brahma Rasayana** – Detoxification and mental health
- **Shatavari Kalpa** – Skin nourishment
- **Triphala Rasayana** – Balances Doshas, promotes digestion

✅ **Herbal Decoctions for Long-Term Use:**

- Nimba + Guduchi + Manjistha Kwatha
- Khadir + Patola + Daruharidra Kwatha

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6. Prognosis (Sadhya-Asadhyata)

- **Sadhya (Curable) –** If diagnosed early and treated with proper Shodhana and Shamana therapies
- **Kruchra Sadhya (Difficult to cure) –** If chronic, associated with genetic or metabolic disorders

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7. Follow-Up Plan

✅ **1st Follow-up (After 15 Days)**

- Monitor reduction in itching, scaling
- Adjust internal medications if needed

✅ **2nd Follow-up (After 1 Month)**

- Evaluate healing and Dosha balance
- Plan for Rasayana therapy if condition stabilizes

✅ **3rd Follow-up (After 3 Months)**

- Check for relapse, advise lifestyle modifications

Comparison of Ayurvedic and Modern Treatment of Kushta Roga (Skin Diseases)

Aspect	Ayurvedic Treatment	Modern Treatment
Etiology (Causes)	Tridosha imbalance (Vata, Pitta, Kapha), Rakta Dushti (Blood vitiation), Agnimandya (Weak digestion), Viruddhahara (Incompatible diet), Srotorodha (Obstruction in body channels)	Genetic factors, Autoimmune disorders, Allergic reactions, Infections (Bacterial, Fungal, Viral), Environmental triggers
Pathogenesis (Samprapti)	Dosha and Dhatu Dushti leading to Rakta, Mamsa, Lasika, and Twak vitiation causing Kushta	Immune system dysfunction, Inflammation, Pathogen invasion, Skin barrier dysfunction
Diagnosis (Pariksha)	- Nadi Pariksha (Pulse Examination) - Darshana (Visual inspection) - Sparshana (Touch Examination) - Prashna (Detailed History)	- Blood Tests (CBC, ESR, CRP, ANA) - Skin Biopsy - Allergy Tests - Microbial Culture
Treatment Principle	- Shodhana (Purification) - Shamana (Pacification) - Bahya Chikitsa (External Therapy) - Pathya (Diet & Lifestyle) - Rasayana (Rejuvenation)	- Topical and Systemic Medications - Anti-inflammatory, Antihistamine Drugs - Immunosuppressants - Diet & Lifestyle Modifications
Detoxification (Shodhana)	- Vamana (Emesis) for Kapha-Pitta Kushta - Virechana (Purgation) for Pitta-Rakta Dushti - Raktamokshana (Bloodletting) for severe Rakta Dushti - Panchatikta Ghrita Pana	- Not a standard detox therapy - Occasional use of plasmapheresis in severe autoimmune cases
Internal Medicines (Shamana)	- Khadirarishta, Mahatikta Ghrita, Manjisthadi Kwatha, Arogyavardhini Vati, Panchatikta Guggulu - Gandhaka Rasayana, Ras Manikya for chronic cases	- Antihistamines (Cetirizine, Loratadine) - Corticosteroids (Prednisolone, Hydrocortisone) - Immunosuppressants (Methotrexate, Cyclosporine) - Biologics (Infliximab, Adalimumab)
External Applications (Lepas & Taila)	- Nimba Churna, Haridra, Manjistha Lepa - Mahamarichyadi Taila, Nimbadi Taila, Chandana Taila - Takradhara (Buttermilk Therapy), Triphala Kwatha Dhara	- Topical Steroids (Clobetasol, Betamethasone) - Topical Calcineurin Inhibitors (Tacrolimus, Pimecrolimus) - Moisturizers and Barrier Creams
Dietary & Lifestyle	- Bitter and astringent foods, detoxifying herbs, light meals - Avoid incompatible foods (Milk +	- Hypoallergenic diet for allergic cases - Gluten-free diet for autoimmune

Aspect	Ayurvedic Treatment	Modern Treatment
Modifications (Pathya-Apathya)	Fish, Excess sugar, Dairy, Fermented foods) - Herbal teas, Yoga, Meditation	cases - Avoid alcohol, smoking, junk food
Rejuvenation (Rasayana Therapy)	- Chyawanprash, Brahma Rasayana, Guduchi Rasayana - Triphala Rasayana for long-term detox and immunity boosting	- Vitamin and Mineral Supplements (Zinc, Vitamin D, Omega-3) - Immunotherapy in chronic conditions
Prognosis & Cure Rate	- **Sadhya (Curable):** If detected early & treated with proper Shodhana and Rasayana - **Kruchra Sadhya (Difficult to Cure):** If chronic or genetic	- **Mild Cases:** Well-controlled with medications - **Chronic Cases:** Require long-term immunosuppressants, risk of recurrence
Side Effects	- Minimal if therapies are performed correctly - Risk of excessive detoxification if not done properly	- Steroids cause skin thinning, weight gain, immunosuppression - Long-term drug use may lead to liver/kidney damage

Udara Roga Case History in Ayurveda

I. General Information (Samanya Parichaya)

1. **Name:**
2. **Age:**
3. **Gender:**
4. **Address:**
5. **Occupation:**
6. **Marital Status:**
7. **Socioeconomic Status:**
8. **Chief Complaints (Mukhyavedana):**
9. **Duration** and **progression** of symptoms

II. Present Illness History (Vartaman Vyadhi Itihasa)

- Onset: **Acute / Chronic**
- Progression: **Gradual / Sudden / Intermittent**
- Aggravating & Relieving Factors:
  - Food-related triggers (*Aharaja Nidana*)
  - Seasonal variations (*Ritujanya*)
  - Emotional or psychological factors (*Manasika Nidana*)
- Associated Symptoms:
  - **Pain in abdomen (Shoola)**
  - **Distension (Udaraprapti / Adhmana)**
  - **Loss of appetite (Agnimandya)**
  - **Constipation / Diarrhea (Vibandha / Atisara)**
  - **Ascites (Jala-Udara Lakshana)**

III. Past History (Purva Vyadhi Itihasa)

- Any history of:
  - Chronic liver disease (Yakrit Vikara)
  - Previous surgeries
  - Worm infestations (Krimi Roga)
  - Gastrointestinal disorders (*Ajeerna*, *Grahani*)
  - Diabetes (*Madhumeha*)

IV. Family History (Kula Vyadhi Itihasa)

- Any family history of:
  - Liver disorders
  - Genetic conditions (*Sahaja Hetu*)
  - Diabetes, hypertension

V. Personal History (Vyaktigata Itihasa)

1. **Dietary Habits (Aharaja Nidana)**
   - Veg / Non-Veg
   - Intake of oily, heavy, spicy foods
   - Alcohol consumption (*Madya Sevana*)
   - Irregular eating habits
2. **Bowel and Bladder Habits**
   - Constipation / Loose stools
   - Frequency and consistency of stools
3. **Sleep Patterns (Nidra Niyama)**
   - Insomnia / Disturbed sleep
   - Daytime sleep (*Divaswapna*)
4. **Lifestyle (Viharaja Nidana)**
   - Sedentary lifestyle
   - Excess physical exertion
5. **Addictions (Dushana Hetu)**
   - Tobacco / Alcohol
   - Drug use

VI. Clinical Examination (Rogi Pariksha)

1. Dashavidha Pariksha (Tenfold Examination)

1. **Prakriti (Body Constitution):** Vata / Pitta / Kapha
2. **Vikriti (Disease Condition):** Dosha imbalance
3. **Sara (Tissue Excellence):** Rasadi Sara Pariksha
4. **Samhanana (Body Build):** Strength and compactness
5. **Pramana (Measurement of the body):** BMI, waist circumference
6. **Satmya (Tolerance & Adaptability):** Dietary and lifestyle adaptability
7. **Sattva (Mental Strength):** Anxiety, depression, stress levels
8. **Aahara Shakti (Digestive Capacity):** Agni Pariksha
9. **Vyayama Shakti (Exercise Tolerance):** Physical strength assessment
10. **Vaya (Age):** Bala (Childhood), Madhya (Adult), Jirna (Old age)

2. Trividha Pariksha (Threefold Examination)

1. **Darshana (Inspection):**
    - Distension, discoloration, ascites
    - Skin texture changes (Jala-Udara features)
2. **Sparshana (Palpation):**
    - Tenderness, hardness, fluid accumulation
    - Liver/spleen enlargement
3. **Prashna (Interrogation):**
    - Detailed questioning on symptoms

VII. Special Examinations (Vishishta Pariksha)

1. **Nadi Pariksha (Pulse Examination):**
    - Vataja Udara – Irregular, thready pulse
    - Pittaja Udara – Rapid, bounding pulse
    - Kaphaja Udara – Slow, deep pulse
    - Sannipataja – Mixed characteristics
2. **Jihva Pariksha (Tongue Examination):**
    - Coated tongue (Ama Lakshana)
    - Pale tongue (Kapha / Pitta imbalance)
3. **Mala Pariksha (Stool Examination):**
    - Undigested food particles (*Ajeerna*)
    - Sticky, foul-smelling stool (*Ama Lakshana*)
4. **Mutra Pariksha (Urine Examination):**
    - Frothy urine (*Yakrit Vikara*)

- Yellowish discoloration (*Pittaja Vikara*)

VIII. Differential Diagnosis (Samprapti Vighatana)

1. **Udara Roga Classification (According to Ayurveda)**
   - **Vataja Udara** – Abdominal distension, dry stools, severe pain
   - **Pittaja Udara** – Burning sensation, jaundice, excessive thirst
   - **Kaphaja Udara** – Heaviness, sluggish digestion, cold sensation
   - **Sannipataja Udara** – Mixed symptoms of all three doshas
   - **Jalodara (Ascites)** – Fluid accumulation, prominent veins, anemia
   - **Pleehodara (Splenic Enlargement)** – Spleen enlargement, anemia
   - **Yakritodara (Liver Enlargement)** – Liver dysfunction, yellowish discoloration
   - **Baddhodara (Intestinal Obstruction)** – Severe constipation, vomiting

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IX. Investigations (Modern Correlation & Lab Tests)

1. **Routine Blood Tests:** CBC, LFT, RFT
2. **USG Abdomen:** To detect ascites, hepatosplenomegaly
3. **Endoscopy (if needed):** To rule out gastric pathology
4. **Stool Examination:** To check for worms (*Krimi Roga*)
5. **Urine Examination:** For albumin, bile pigments

X. Ayurvedic Treatment Plan (Chikitsa Siddhanta)

1. Nidana Parivarjana (Avoiding Etiological Factors)

- Avoid excess alcohol, heavy foods, sedentary habits

2. Shodhana Chikitsa (Detoxification Therapy)

- **Vamana Karma** – If associated with Kapha dosha
- **Virechana Karma** – If Pittaja involvement is present
- **Basti Karma** – If Vata is predominant
- **Raktamokshana** – If blood toxicity is suspected

3. Shamana Chikitsa (Palliative Therapy)

- **Deepana-Pachana:** Trikatu Churna, Hingvashtaka Churna
- **Agnivardhaka Dravyas:** Chitrakadi Vati, Shankha Vati
- **Liver Protection:** Bhumyamalaki, Kalmegh, Katuki
- **Diuretics:** Punarnava, Gokshura

4. Pathya-Apathya (Diet & Lifestyle Modification)

- Easily digestible food (*Laghu Bhojana*)
- Avoiding heavy, oily, fermented food
- Moderate exercise and yoga (Pavanmuktasana, Vajrasana)

XI. Prognosis (Sadhya-Asadhyatva)

- **Sadhya (Curable):** Early-stage functional disorders
- **Krichra Sadhya (Difficult to Treat):** Chronic liver diseases
- **Asadhya (Incurable):** Advanced ascites with multi-organ failure

Patient Case History for Udara Roga

I. General Information (Samanya Parichaya)

- **Name:** Mr. Ramesh Sharma
- **Age:** 45 years
- **Gender:** Male
- **Address:** Varanasi, Uttar Pradesh
- **Occupation:** Shopkeeper
- **Marital Status:** Married
- **Socioeconomic Status:** Middle class
- **Chief Complaints (Mukhyavedana):**
  - Abdominal distension (*Udaraprapti*) for 6 months
  - Loss of appetite (*Agnimandya*)
  - Occasional pain in the abdomen (*Shoola*)
  - Constipation (*Vibandha*)
  - Fatigue and weakness (*Daurbalya*)

II. Present Illness History (Vartaman Vyadhi Itihasa)

- The patient developed mild bloating 6 months ago, which gradually progressed to noticeable abdominal distension.
- He experiences postprandial fullness and indigestion.
- Occasional sharp pain in the umbilical region, which increases after consuming heavy food.
- Frequent constipation with dry, hard stools.
- Fatigue, weakness, and weight loss over the last 3 months.

III. Past History (Purva Vyadhi Itihasa)

- History of chronic acidity (*Amlapitta*)
- No history of diabetes, hypertension, or tuberculosis.
- No past surgical history.

IV. Family History (Kula Vyadhi Itihasa)

- Father had liver cirrhosis.
- No known hereditary gastrointestinal disorders.

V. Personal History (Vyaktigata Itihasa)

1. **Dietary Habits (Aharaja Nidana):**
    - Predominantly non-vegetarian diet with excessive spicy and oily food.
    - Frequent intake of fast food and fermented items.
    - Irregular meal timings.
2. **Bowel and Bladder Habits:**
    - Hard stools with difficulty in evacuation.
    - Normal urination pattern.
3. **Sleep Patterns (Nidra Niyama):**
    - Insomnia and disturbed sleep pattern.
4. **Lifestyle (Viharaja Nidana):**
    - Sedentary lifestyle with minimal physical activity.
5. **Addictions (Dushana Hetu):**
    - Alcohol consumption for the past 10 years.
    - Occasional smoking.

VI. Clinical Examination (Rogi Pariksha) 1. Dashavidha Pariksha (Tenfold Examination):

- **Prakriti:** Pitta-Kapha dominant
- **Vikriti:** Kaphaja Udara with Ama Lakshana
- **Sara:** Madhyama (moderate tissue quality)
- **Samhanana:** Krura (weak body build)
- **Pramana:** Overweight (BMI: 27)
- **Satmya:** Mixed dietary adaptability
- **Sattva:** Low mental strength due to stress
- **Aahara Shakti:** Decreased digestion
- **Vyayama Shakti:** Reduced exercise tolerance
- **Vaya:** Madhyama (Middle age)

2. Trividha Pariksha (Threefold Examination):

1. **Darshana (Inspection):**
    - Visible abdominal distension
    - Dry skin, yellowish tint in sclera
2. **Sparshana (Palpation):**
    - Mild hepatomegaly (liver enlargement)
    - Fluid accumulation signs (+ve shifting dullness test)
3. **Prashna (Interrogation):**
    - Patient complains of fatigue, low appetite, and bloating.

VII. Special Examinations (Vishishta Pariksha)

1. **Nadi Pariksha (Pulse Examination):**
   - Kapha-Pitta dominance, sluggish pulse
2. **Jihva Pariksha (Tongue Examination):**
   - Coated tongue with white layer (*Ama Lakshana*)
3. **Mala Pariksha (Stool Examination):**
   - Hard stools, offensive smell, undigested food particles
4. **Mutra Pariksha (Urine Examination):**
   - Yellowish urine with no albumin or bile salts detected.

VIII. Differential Diagnosis (Samprapti Vighatana)

1. **Types of Udara Roga Considered:**
   - **Jalodara (Ascites)** – Fluid accumulation in the peritoneal cavity.
   - **Yakritodara (Liver Enlargement)** – Alcohol-induced hepatomegaly.
   - **Baddhodara (Intestinal Obstruction)** – Chronic constipation with hard stools.

IX. Investigations (Modern Correlation & Lab Tests)

1. **Liver Function Tests (LFT):** Elevated SGOT/SGPT
2. **Ultrasound Abdomen:** Mild hepatomegaly with fatty liver
3. **Complete Blood Count (CBC):** Hemoglobin – 10.5 g/dL (mild anemia)
4. **Stool Examination:** Presence of undigested food particles

X. Ayurvedic Treatment Plan (Chikitsa Siddhanta)

1. Nidana Parivarjana (Avoiding Etiological Factors)

- Stop alcohol consumption and avoid heavy, oily, and spicy foods.
- Regularize meal timings and increase fiber intake.

2. Shodhana Chikitsa (Detoxification Therapy)

- **Virechana Karma:** Trivrit Lehyam for purgation therapy.
- **Basti Karma:** Niruha Basti with Dashamoola Kwatha for Vata regulation.
- **Raktamokshana:** If symptoms of liver congestion persist.

3. Shamana Chikitsa (Palliative Therapy)

- **Deepana-Pachana:** Hingvashtaka Churna + Shankha Vati.
- **Agnivardhaka Dravyas:** Chitrakadi Vati for appetite stimulation.
- **Liver Protection:** Kalmegh + Bhumyamalaki Kwatha.
- **Diuretics:** Punarnava + Gokshura for ascitic fluid reduction.

4. Pathya-Apathya (Diet & Lifestyle Modification)

- **Pathya (Recommended Foods):**
  - Light, easily digestible food like moong dal, rice gruel (*Yusha*).
  - Buttermilk (*Takra*) and warm water intake.
  - Triphala water at bedtime for bowel regulation.
- **Apathya (Avoid Foods):**
  - Heavy-to-digest foods like red meat, dairy, deep-fried items.
  - Excess salt and processed foods.
  - Cold and carbonated beverages.
- **Lifestyle Changes:**
  - Daily morning walk and yoga (Pavanmuktasana, Vajrasana).
  - Avoid daytime sleep and late-night meals.

XI. Prognosis (Sadhya-Asadhyatva)

- **Sadhya (Curable):** If detected early and treated with Shodhana & Shamana therapy.
- **Krichra Sadhya (Difficult to Treat):** If liver function is severely compromised.
- **Asadhya (Incurable):** Advanced ascites with cirrhosis progression.

Ayurvedic and Modern Treatment Plan

Treatment Approach	Ayurveda	Modern Medicine
Nidana Parivarjana (Avoiding Etiological Factors)	Avoid alcohol, spicy, heavy food, and irregular meals. Regularize diet with light foods.	Stop alcohol, avoid processed foods, increase fiber intake.
Shodhana Chikitsa (Detoxification Therapy)	**Virechana** with Trivrit Lehyam, **Basti Karma** with Dashamoola Kwatha. **Raktamokshana** if needed.	No specific detoxification, supportive liver protection.
Shamana Chikitsa (Palliative Therapy)	**Deepana-Pachana:** Hingvashtaka Churna, Shankha Vati. **Agnivardhaka:** Chitrakadi Vati. **Liver Protection:** Kalmegh + Bhumyamalaki Kwatha. **Diuretics:** Punarnava + Gokshura.	**Liver Protection:** Ursodeoxycholic acid, Silymarin. **Diuretics:** Spironolactone, Furosemide. **Digestive Support:** Proton pump inhibitors (PPIs).
Pathya (Diet & Lifestyle)	Light, easily digestible food, Triphala water, Takra (buttermilk). Avoid heavy, fried foods. Yoga (Vajrasana, Pavanmuktasana).	Balanced diet, reduced salt intake, exercise, avoid daytime sleep.
Prognosis	**Sadhya (Curable)** if treated early, **Krichra Sadhya (Difficult to Treat)** if liver damage progresses.	**Good prognosis** if liver function is maintained; **Poor** in advanced cirrhosis.

Case History of Amlapitta & Parinama Shoola

1. General Information (Samanya Vrittanta)

- **Name**:
- **Age**:
- **Gender**:
- **Occupation**:
- **Address**:
- **Date of Consultation**:

2. Chief Complaints (Pradhana Vedana) with Duration

- **Amlapitta** (Hyperacidity)
  - Urdhwaga (Reflux type) or Adhoga (Diarrheal type)
  - Tikta-Amla Udgara (sour or bitter belching)
  - Hrit-Kantha Daha (Burning sensation in chest & throat)
  - Aruchi (Loss of taste)
  - Chhardi (Vomiting)
  - Avipaka (Indigestion)
  - Udarashoola (Abdominal pain)
- **Parinama Shoola** (Duodenal Ulcer)
  - Pain relieved after food intake (Parinama kaal shoola)
  - Kshudha Vriddhi (Increased hunger)
  - Raktayukta Vamana (Hematemesis)
  - Raktayukta Mala (Melena)
  - Daurbalya (Weakness)

3. History of Present Illness (Vyadhi Vrittanta)

- **Onset**: Gradual or sudden
- **Duration**: Since how long symptoms exist
- **Progression**: Worsening or intermittent relief
- **Aggravating Factors**: Fasting, spicy food, stress
- **Relieving Factors**: Milk, food intake, Ayurvedic medicines

4. Past History (Poorva Vyadhi Vrittanta)

- **Any history of Pitta Prakopa diseases (like Pitta-Vikara, Pittaj Jwara, Urdhwaga Raktapitta, Kamala, etc.)**
- **History of GERD, Peptic Ulcer, or Helicobacter pylori infection**
- **History of long-term NSAID usage**

5. Personal History (Vyaktigata Vrittanta)

- **Diet (Aharaja Nidana)**:
  - Excessive consumption of spicy, sour, salty, fried food, tea, coffee, alcohol
  - Viruddhahara (milk with fish, fruit with milk)
- **Lifestyle (Viharaja Nidana)**:
  - Late-night eating
  - Suppression of natural urges (Vegadharana)
  - Stress, anxiety, excessive workload
- **Sleep (Nidra Vrittanta)**:
  - Disturbed sleep due to pain or burning sensation

6. Family History (Kutumba Anuvanshika Vrittanta)

- **Any family history of Amlapitta, ulcers, or GERD?**
- **Any hereditary disorders related to digestion?**

7. Examination (Pareeksha)

A) Prakriti Pareeksha (Constitutional Assessment)

- **Pitta-Predominant Prakriti**
- **Vata-Pitta or Pitta-Kapha Prakriti**

B) Dashavidha Pareeksha (Tenfold Examination)

- **Prakriti (Constitution)**: Pitta dominant
- **Vikriti (Disease condition)**: Pitta-Kapha vitiation
- **Sara (Tissue health)**: Moderate to weak
- **Samhanana (Body build)**: Lean or moderate
- **Pramana (Measurement of body parts)**: Normal
- **Satmya (Adaptability)**: Spicy food intolerance
- **Sattva (Mental strength)**: Anxious personality
- **Ahara Shakti (Digestive power)**: Mandagni (Weak digestion)
- **Vyayama Shakti (Exercise capacity)**: Low to moderate
- **Vaya (Age)**: Young to middle-aged

C) Ashtavidha Pareeksha (Eightfold Examination)

- **Nadi (Pulse)**: Pitta-Vata dominant (Tikrata, Spandita)
- **Mala (Stool)**: Sometimes loose (Adhoga Amlapitta), sometimes hard (Urdhwaga Amlapitta)
- **Mutra (Urine)**: Slightly yellowish, acidic smell
- **Jihva (Tongue)**: Coated with yellowish-white layer
- **Shabda (Voice tone)**: Normal but sometimes weak due to weakness
- **Sparsha (Skin touch)**: Warm body temperature
- **Drik (Eyes)**: Redness, burning sensation
- **Akruti (Body appearance)**: Lean body, fatigued look

D) Srotas Pareeksha (Examination of Channels)

- **Annavaha Srotas (Digestive system)**: Impaired digestion, regurgitation
- **Raktavaha Srotas (Blood circulation)**: Redness in eyes, acidic blood nature

8. Investigations (Pariksha for Confirmation)

- **Modern Tests**
  - **Endoscopy (UGI Scopy)** → Gastric or duodenal ulcer visualization
  - **H. pylori test** → If infection suspected
  - **pH monitoring** → To confirm acid reflux
  - **Stool test** → Occult blood for ulcer bleeding
- **Ayurvedic Diagnosis**
  - **Amlapitta** → Pitta-Kapha dushti in Annavaha Srotas
  - **Parinama Shoola** → Vata-Pitta dushti with Sleshma-Kapha aggravation

9. Diagnosis (Nidana-Panchaka Analysis)

1. **Nidana (Etiology)** → Spicy, sour food, irregular diet, stress
2. **Purvarupa (Premonitory symptoms)** → Loss of appetite, belching, nausea
3. **Rupa (Symptoms)** → Heartburn, sour belching, pain after digestion
4. **Upashaya-Anupashaya (Palliative & Non-Palliative Factors)**
   - Relief after milk or food → Pitta involvement
   - Aggravation after spicy food → Pitta predominance
5. **Samprapti (Pathogenesis)**
   - Agni Dushti → Pitta-Kapha Dushti → Urdhwaga/Adhoga Amlapitta → Ulcer Formation

10. Chikitsa (Treatment Plan)

✅ **Shodhana (Purification Therapy) - If indicated**

- **Vamana (Emesis Therapy)** – If Kapha is more
- **Virechana (Purgation Therapy)** – If severe Pitta accumulation

✅ **Shamana (Palliative Therapy)**

- **Dietary Advice (Pathya-Apathya)**
  - Warm, light food, Shali rice, cow's ghee, milk
  - Avoid spicy, oily, sour, junk food
- **Medications (Aushadhi Prayoga)**
  - **Sootshekhar Rasa** – Acid-neutralizing
  - **Avipattikar Churna** – Reduces Pitta
  - **Yashtimadhu Churna** – Ulcer healing
  - **Kamdudha Rasa** – Pitta pacification
  - **Drakshasava, Amalaki Rasayana** – Digestive support

✅ **Lifestyle (Vihara)**

- Stress management, regular sleep, yoga

✅ **Follow-up**

- Every 15 days to monitor symptoms

Case Study of Amlapitta & Parinama Shoola

1. General Information (Samanya Vrittanta)

- **Name:** Mr. Rajesh Sharma
- **Age:** 38 years
- **Gender:** Male
- **Occupation:** IT Professional (Desk Job)
- **Address:** Pune, Maharashtra
- **Date of Consultation:** 06 March 2025

2. Chief Complaints (Pradhana Vedana) with Duration

Symptoms	Duration
Tikta-Amla Udgara (Sour & Bitter Belching)	6 months
Hrit-Kantha Daha (Burning Sensation in Chest & Throat)	5 months
Avipaka (Indigestion)	4 months
Udarashoola (Epigastric Pain, especially 2-3 hours after food)	6 months
Kshudha Vriddhi (Increased Hunger)	4 months
Raktayukta Mala (Black, tarry stools)	2 weeks

3. History of Present Illness (Vyadhi Vrittanta)

- The patient had occasional complaints of acidity for the past 1 year, which worsened over the last 6 months.
- Increased workload and irregular eating habits further aggravated the condition.
- Symptoms are worse on an empty stomach and after consuming spicy food.
- Pain reduces temporarily after consuming milk or bland food.
- Burning sensation in the chest is more in the evening and after stress.

4. Past History (Poorva Vyadhi Vrittanta)

- History of chronic acidity for 2 years.
- Self-medicated with antacids but no long-term relief.
- No history of major illness, diabetes, or hypertension.

5. Personal History (Vyaktigata Vrittanta)

- **Diet:**
  - Tea 3-4 times a day, spicy food intake, irregular meals.
  - Frequently consumes fast food due to work schedule.
- **Bowel Habits:** Sometimes constipated, sometimes loose stools.
- **Sleep:** Disturbed, difficulty in falling asleep due to burning sensation.
- **Lifestyle:** Sedentary job, prolonged sitting hours, high stress.
- **Addictions:** Occasional alcohol, smoking for 5 years.

6. Family History (Kutumba Anuvanshika Vrittanta)

- Father had complaints of hyperacidity and duodenal ulcer.
- No known hereditary disorders.

7. Examination (Pareeksha)

A) Prakriti Pareeksha (Constitutional Assessment)

- **Prakriti:** Pitta-Vata Prakriti
- **Sara:** Madhyama (Moderate tissue quality)
- **Samhanana:** Madhyama (Moderate build)
- **Satmya:** Spicy food intolerance
- **Sattva:** Moderate mental strength

B) Ashtavidha Pareeksha (Eightfold Examination)

Parameter	Findings
Nadi (Pulse)	Tikshna, Pitta-Vata dominant
Mala (Stool)	Blackish stool (suggestive of bleeding ulcer)
Mutra (Urine)	Yellowish
Jihva (Tongue)	Coated with yellowish-white layer
Shabda (Voice tone)	Normal but weak at times
Sparsha (Skin touch)	Warm body temperature
Drik (Eyes)	Slight redness, occasional burning
Akruti (Body appearance)	Lean, fatigued look

C) Srotas Pareeksha (Examination of Channels)

Srotas	Dushti Lakshanas
Annavaha Srotas (Digestive System)	Avipaka, Amla Udgara, Udarashoola
Raktavaha Srotas (Blood Circulation)	Raktayukta mala (melena)

8. Investigations (Pariksha for Confirmation)

Modern Tests

✅ **Endoscopy (UGI Scopy):** Shows **duodenal ulcer with mild mucosal erosion**.
✅ **H. pylori test:** Positive.
✅ **pH monitoring:** Indicates high acid reflux.
✅ **Stool test (Occult Blood):** Positive (suggesting minor GI bleeding).

Ayurvedic Diagnosis

- **Amlapitta (Pitta-Kapha Dushti in Annavaha Srotas).**
- **Parinama Shoola (Vata-Pitta Dushti in Annavaha Srotas).**

9. Diagnosis (Nidana-Panchaka Analysis)

1. **Nidana (Etiology)**
   - Excess spicy, oily, and irregular meals.
   - Suppression of natural urges (vegadharana).
   - Excessive stress and mental strain.
2. **Purvarupa (Premonitory symptoms)**
   - Belching, nausea, mild indigestion.
3. **Rupa (Symptoms)**
   - Severe burning sensation, pain, regurgitation.
4. **Upashaya-Anupashaya (Palliative & Non-Palliative Factors)**
   - Relief after food or milk → Pitta involvement.
   - Worsening after fasting or stress → Vata involvement.
5. **Samprapti (Pathogenesis)**
   - Agni Dushti → Pitta-Kapha Dushti → Annavaha Srotas Dushti → Ulcer Formation.

10. Chikitsa (Treatment Plan)

A) Shodhana (Purification Therapy) - If Indicated

- **Virechana (Purgation Therapy)** – To eliminate excess Pitta.

B) Shamana (Palliative Therapy)

✅ **Dietary Advice (Pathya-Apathya)**

- Warm, light food (Shali rice, cow's ghee, milk, buttermilk).
- Avoid spicy, oily, sour, and fermented foods.

✅ **Medications (Aushadhi Prayoga)**

Drug Name	Dosage & Usage	Action
Sootshekhar Rasa	1 tablet BD with honey	Acid-neutralizing
Avipattikar Churna	5 gm before food	Reduces Pitta
Yashtimadhu Churna	5 gm with milk	Ulcer healing
Kamdudha Rasa	1 tablet BD	Pitta pacification
Drakshasava	10 ml BD after food	Digestive support

✅ **Lifestyle (Vihara)**

- Yoga & Pranayama (Sheetali, Nadi Shodhana).
- Avoid excessive work stress.
- Proper sleep and meal schedule.

✅ **Follow-up**

- **After 15 days:** Check for symptom relief.
- **After 1 month:** Repeat occult blood test, adjust treatment if needed

Treatment Comparison: Ayurveda vs Modern Medicine

Category	Ayurveda Treatment	Modern Treatment
Diet (Ahara)	- Light, warm, easily digestible food (Shali rice, Moong dal, Ghee, Buttermilk). - Avoid spicy, oily, fermented, and sour foods. - Increase intake of milk, coconut water, and licorice decoction.	- Soft diet (bland, non-irritating). - Avoid alcohol, coffee, tea, and acidic foods. - Frequent small meals.
Lifestyle (Vihara)	- Proper sleep and meal schedule. - Stress reduction through meditation and Pranayama (Sheetali, Nadi Shodhana). - Avoid fasting and overexertion.	- Avoid late-night eating. - Reduce stress through relaxation techniques. - Avoid NSAIDs and smoking.
Palliative Therapy (Shamana Chikitsa)	**1. Acid Neutralizing:** - *Avipattikar Churna* – 5 gm before food - *Sootshekhar Rasa* – 1 tablet BD **2. Mucosal Healing:** - *Yashtimadhu Churna* – 5 gm with milk - *Guduchi Satva* – 500 mg BD **3. Pitta-Pacifying:** - *Kamdudha Rasa* – 1 tablet BD - *Drakshasava* – 10 ml BD	**1. Acid Suppressants:** - Proton Pump Inhibitors (PPIs) – Omeprazole, Pantoprazole - H2 blockers – Ranitidine, Famotidine **2. Mucosal Protectants:** - Sucralfate - Misoprostol (for NSAID-induced ulcers) **3. Antacids:** - Magnesium hydroxide, Aluminum hydroxide
Purification Therapy (Shodhana Chikitsa)	**1. Virechana (Purgation Therapy):** - *Triphala Churna* 5-10 gm at night - *Avipattikar Churna* for excess Pitta **2. Nasya Therapy:** - Anu Taila for reducing stress-related acidity	**Not commonly used in modern medicine.**
Antimicrobial Therapy (if H. pylori positive)	- *Shunthi, Maricha, Pippali* with honey for digestive strength. - *Guduchi & Haritaki* for gut cleansing.	- Triple Therapy (PPI + Amoxicillin + Clarithromycin) for H. pylori eradication.

Category	Ayurveda Treatment	Modern Treatment
Adjunctive Therapy	- Aloe Vera Juice for cooling effect. - Coconut water for acid neutralization. - Buttermilk with roasted cumin.	- Probiotics to restore gut flora. - Lifestyle modification for long-term management.
Follow-up & Monitoring	- Assess symptom relief every 15 days. - Repeat Occult Blood Test in stool (if needed).	- Endoscopy after 6-8 weeks if symptoms persist. - Monitor response to PPIs & adjust dosage.

CASE HISTORY FORMAT FOR ATISARA & PRAVAHIKA (AYURVEDA)

📌 **Patient Details:**

- **Name:**
- **Age:**
- **Gender:**
- **Occupation:**
- **Address:**
- **Date of Consultation:**

1Chief Complaints (मुख्य लक्षण)

- **For Atisara (Diarrhea):**
  - Frequent, loose, watery stools
  - Abdominal cramps and discomfort
  - Loss of appetite
  - Weakness and dehydration
  - Fever (sometimes)
- **For Pravahika (Dysentery):**
  - Recurrent, painful, bloody or mucus-filled stools
  - Straining while passing stools (tenesmus)
  - Lower abdominal pain
  - Fever and general malaise
  - Dehydration in severe cases

2History of Present Illness (वर्तमान रोग इतिहास)

- **Onset:** Sudden/Gradual
- **Duration:** Since how many days?
- **Progression:** Increasing/Decreasing/Static
- **Aggravating Factors:** Specific foods, stress, infections, seasonal variations
- **Relieving Factors:** Rest, hydration, medications, Ayurvedic remedies
- **Associated Symptoms:** Vomiting, fever, dizziness, body ache

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3Past Medical History (अतीत चिकित्सा इतिहास)

- **Any history of previous similar episodes?**
- **History of chronic digestive issues like IBS, colitis?**
- **Previous treatments taken?** (Allopathic or Ayurvedic)
- **Any history of infections (e.g., Amoebiasis, Bacterial infections)?**

4Family History (पारिवारिक इतिहास)

- Any similar complaints in family members?
- Genetic predisposition to gut disorders?

5Diet History (आहार इतिहास)

- **Type of diet:** Vegetarian/Non-vegetarian
- **Recent dietary changes:** Consumption of stale, heavy, contaminated food
- **Eating habits:** Irregular meals, excess spicy or oily foods
- **Intake of junk food or outside food?**

6Lifestyle History (विहार इतिहास)

- **Sleep pattern:** Disturbed/Normal
- **Physical activity:** Active/Sedentary
- **Stress levels:** High/Moderate/Low
- **Addictions:** Alcohol, smoking, tobacco, caffeine

7Bowel & Bladder Habits (मल-मूत्र इतिहास)

- **Frequency & consistency of stools?**
- **Presence of blood or mucus?**
- **Any foul smell?**
- **Tenesmus (urge to defecate repeatedly)?**

8General Examination (सामान्य परीक्षण)

- **Pulse (नाड़ी):** Weak/Normal/Rapid
- **Blood Pressure (रक्तचाप):** Low/Normal
- **Temperature (तापमान):** Feverish/Normal
- **Hydration status:** Dry tongue, sunken eyes, skin turgor
- **Tongue examination:** Coated/Normal
- **Skin & Eyes:** Pallor, icterus, signs of dehydration

9Rog Pariksha (रोग परीक्षण) - Ayurveda Specific

Nidan Panchaka (Diagnostic Factors)

1. **Hetu (Etiology):**
   - **Atisara:** Agnimandya, Ama, Viruddha Aahara, excess Guru Snigdha Ahara
   - **Pravahika:** Krimi (infections), Apakwa Ahara, faulty food habits
2. **Purvarupa (Premonitory Symptoms):**
   - Abdominal heaviness, bloating, mild cramps, loss of appetite
3. **Rupa (Symptoms):**
   - **Atisara:** Profuse, watery stools
   - **Pravahika:** Bloody, mucoid stools with tenesmus
4. **Upashaya (Palliative/Aggravating Factors):**
   - Symptoms reduce with rest and light diet
   - Symptoms worsen with heavy meals, stress, certain foods
5. **Samprapti (Pathogenesis):**
   - Dosha involvement: **Vata-Pitta in Pravahika, Kapha in some cases**
   - Srotas: **Annavaha Srotas & Purishavaha Srotas** affected

🔟 Astavidha Pariksha (Eightfold Examination)

Pariksha	Observations
Nadi (Pulse)	Weak, Vata-Pitta predominance
Mutra (Urine)	Dark yellow in dehydration
Mala (Stool)	Watery (Atisara), Bloody/mucus (Pravahika)
Jihwa (Tongue)	Coated with Ama signs
Shabda (Voice)	Weak voice due to dehydration
Sparsha (Touch)	Dry skin, weak muscles
Drik (Eyes)	Sunken, dull appearance
Aakriti (Appearance)	Weak, dehydrated

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11 Investigations (आवश्यक परीक्षण)

- **Stool Examination:**
  - Presence of blood, mucus, pus cells, parasites
- **CBC (Complete Blood Count):**
  - Increased WBCs (infection), Low Hb (blood loss)
- **Serum Electrolytes:**
  - Sodium, Potassium (for dehydration assessment)
- **USG Abdomen (if required):**
  - Rule out other GI disorders

12Diagnosis (रोग निर्णय)

- **Ayurvedic Diagnosis:**
  - **Atisara (द्रव, अधिक मात्रा में मल त्याग)**
  - **Pravahika (गर्भाशय संकुचन के समान दर्दयुक्त मल त्याग)**
- **Dosha Dominance:**
  - **Atisara:** Vataja/Pittaja/Kaphaja
  - **Pravahika:** Vata-Pittaja, Raktaja

13Chikitsa Sutra (Management Plan)

◆ Shodhana (Detoxification)

- **Mild cases:** Deepana-Pachana
- **Severe cases:** Langhana (fasting), Tikta Kashaya

◆ Shamana (Palliative Therapy)

- **Atisara:**
  - **Vataja:** Bilva, Kutaja, Nagakesara
  - **Pittaja:** Musta, Amalaki, Yashtimadhu
  - **Kaphaja:** Pippali, Shunthi
- **Pravahika:**
  - **Sanjivani Vati, Kutajarishta, Praval Panchamrita**

◆ Pathya-Apathya (Diet & Lifestyle)

- **Pathya (Recommended Diet):**
  - Laghu, easily digestible foods
  - Moong dal soup, Peya (thin rice gruel), Bilva Phala
  - Buttermilk with Musta powder
- **Apathya (To Avoid):**
  - Heavy, oily, fermented foods
  - Dairy products, spicy foods

Case Study on Atisara & Pravahika (Ayurveda)

🔹 Patient Details

- **Name:** Mr. Ram Kumar
- **Age:** 38 years
- **Gender:** Male
- **Occupation:** Office Worker
- **Residence:** Urban Area

🔹 Chief Complaints

1. Loose stools (6-8 times/day) for the past **4 days**
2. Abdominal cramps and pain in the **lower abdomen**
3. Burning sensation in the anal region
4. Mucus and occasional blood in stool
5. Tenesmus (frequent urge to defecate with straining)
6. Fatigue, weakness, and mild fever

🔹 History of Present Illness

- The patient **had stale food (street food) 5 days ago** after which symptoms started.
- Initially, there was mild **loose motion**, which worsened over time.
- **No vomiting, but excessive thirst and dryness of mouth** were noted.
- The patient reports feeling **light-headed and weak** after multiple loose motions.
- Mucus in stool **started on the second day**, and **mild blood streaks appeared on the third day.**

🔹 Past Medical History

- No history of **diabetes, hypertension, or tuberculosis.**
- Similar episodes of loose motion occurred **2 years ago** after consuming contaminated water.

🔹 Dietary History

- Frequent intake of **spicy, fried, and junk food.**
- Irregular meal timings.
- Low water intake.

🔹 Clinical Examination (Ayurvedic Perspective)

- **Prakriti:** Pitta-Vata dominant
- **Agni:** Mandagni (low digestive fire)
- **Mala:**
  - **Consistency:** Watery, semi-solid, mucus-filled
  - **Color:** Yellowish with mucus and mild blood streaks
  - **Odor:** Foul-smelling
    - **Jihva (Tongue):** Coated white, indicating **Aama (toxins)**
    - **Nadi Pariksha:** Tikshna-Taru Nadi (suggesting Pitta-Vata aggravation)
    - **Skin:** Dryness present (suggesting dehydration)

🔹 Diagnosis (Ayurveda)

🔹 **Samprapti (Pathogenesis) of Pravahika**

👉 *Nidana (Causative Factors):*

- **Aama Dosha (Toxins)** due to improper digestion
- **Dushta Ahara (Contaminated food)**
- **Viruddha Ahara (Incompatible food combinations)**
- **Excessive Guru, Abhishyandi (heavy, mucus-forming) food**

👉 *Dosha Involvement:*

- **Vata-Pitta** predominant imbalance
- **Vitiation of Purishavaha Srotas (Intestinal Channel)**

👉 *Dushya (Affected Dhatu):*

- Rasa Dhatu (leading to dehydration & fatigue)
- Rakta Dhatu (causing blood in stool)

👉 *Srotas (Affected Channels):*

- **Purishavaha Srotas (Large Intestine)** → due to excessive mucus and bleeding
- **Raktavaha Srotas (Blood Circulatory System)** → mild blood loss

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🔹 Modern Correlation

- **Pravahika (Dysentery)** = *Amoebic or Bacillary Dysentery*
- **Atisara (Diarrhea)** = *Acute Infectious Diarrhea*

🔹 Treatment Plan (Chikitsa Siddhanta)

☐Langhana (Fasting & Light Diet)

✅ **Peya (Rice Water)** – To balance Agni & prevent dehydration
✅ **Moong Dal Soup** – Easy to digest and provides protein
✅ **Buttermilk (Takra) with Kutaja Churna** – Helps in controlling mucus secretion

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2Shodhana (Detoxification)

✅ **Mriduvirechana (Mild Purgation)** – Using Haritaki Churna with warm water to remove excess Doshas

✅ **Deepana-Pachana (Agni Deepana Medicines)**

- Trikatu Churna (to improve digestion)
- Shunthi & Pippali to remove Ama

3Shamana Chikitsa (Symptomatic Treatment)

Symptom	Ayurvedic Medicine	Dosage & Anupana
Loose Stools	Kutaja Churna	1 tsp with buttermilk, 2 times/day
Abdominal Pain	Bilwadi Churna	1 tsp with honey
Mucus in Stool	Dadimashtaka Churna	½ tsp with warm water
Blood in Stool	Bolbaddha Rasa	1 tablet with honey
Dehydration	Dhanyaka-Honey Water	Sip frequently

4Ahara & Vihara (Diet & Lifestyle)

✅ **Allowed Foods**
✔️ Moong dal, rice, boiled vegetables
✔️ Buttermilk, pomegranate juice
✔️ Warm water with lemon

🚫 **Avoid**
❌ Spicy, oily, and heavy foods
❌ Dairy products (except buttermilk)
❌ Excess tea, coffee, and alcohol

🏃 **Lifestyle Recommendations**
✔️ Take **proper rest** & avoid excessive activity
✔️ **Mild yoga & deep breathing** for digestion
✔️ Drink **boiled water** to prevent infections

🔹 Prognosis & Follow-up

📌 **After 3 days:**

- **Loose motion reduced from 8 episodes/day to 2-3/day**
- **Burning sensation & mucus decreased**
- **Energy levels improved**

📌 **After 7 days:**

- **Completely normal stools, no mucus or blood**
- **Digestion improved, mild appetite restored**
- **Shifted to a normal diet gradually**

🔹 Final Diagnosis

- **Pravahika (Bacillary Dysentery with Pitta-Vata predominance)**
- **Aama involvement & Mandagni present**

✨ Summary of the Case

✔ **Vata-Pitta imbalance** caused **mucus, blood, pain, and urgency**
✔ **Kutaja, Dadimashtaka, and Bilwadi Churna** helped in recovery
✔ **Langhana & Deepana therapy** removed toxins and balanced Agni
✔ **Light diet & buttermilk** restored digestion

💡 Learning Points from the Case

- Pravahika is **Vata-Pitta predominant** with **tenesmus & mucus**
- **Kutaja & Buttermilk** are best for **Dysentery**
- **Langhana (fasting) & Deepana (digestive stimulants)** are **primary treatments**
- **Avoid heavy, oily food to prevent recurrence**

Comparative Treatment of Atisara & Pravahika (Diarrhea & Dysentery)

Category	Ayurvedic Treatment	Modern Medicine Treatment
1Nidana Parivarjana (Avoid Causative Factors)	Avoid stale, heavy, contaminated food	Avoid unhygienic food & contaminated water
2Langhana (Fasting & Light Diet)	Peya (Rice water), Moong dal soup, Buttermilk	ORS (Oral Rehydration Solution), Bland diet
3Shodhana (Detoxification)	Mriduvirechana (Haritaki Churna with warm water)	No specific detox; focus on rehydration
4Shamana (Symptomatic Management)	🔹 **Diarrhea:** Kutaja Churna with buttermilk 🔹 **Abdominal pain:** Bilwadi Churna with honey 🔹 **Mucus in stool:** Dadimashtaka Churna 🔹 **Blood in stool:** Bolbaddha Rasa 🔹 **Dehydration:** Dhanyaka-Honey water	🔹 **Diarrhea:** Loperamide (for non-infectious diarrhea) 🔹 **Abdominal pain:** Dicyclomine 🔹 **Mucus in stool:** Metronidazole (for amoebic infection) 🔹 **Blood in stool:** Ciprofloxacin (for bacillary dysentery) 🔹 **Dehydration:** ORS, IV fluids if severe
5Deepana-Pachana (Improve Digestion & Remove Ama)	Trikatu Churna, Pippali, Jeerakadyarishta	Proton Pump Inhibitors (PPIs) if acidity present
6Antimicrobial Therapy (If Infection Present)	Kutaja Churna, Musta Churna, Vidanga	Ciprofloxacin, Metronidazole for bacterial/amoebic infection
7Stambhana (For Chronic Diarrhea & Dysentery)	Nagakeshara, Gairika, Lodhra Churna	Racecadotril (intestinal secretion inhibitor)
8Rasayana (Rejuvenation & Recovery)	Chyawanprash, Draksharishta, Ashwagandha	Vitamin & mineral supplements
9Ahara (Dietary Recommendations)	🔹 Moong dal khichdi, Buttermilk, Pomegranate juice 🔹 Avoid spicy, oily, dairy (except buttermilk)	🔹 Bland diet (boiled rice, bananas, toast) 🔹 Avoid caffeine, alcohol, and fried food
10Vihara (Lifestyle Recommendations)	🔹 Proper rest, avoid exertion 🔹 Mild yoga & deep breathing	🔹 Bed rest, hydration, maintain hygiene

Case History Taking of Arsha (Hemorrhoids) in Ayurveda

1. General Information:

- Name:
- Age:
- Gender:
- Occupation:
- Address:
- Date of Examination:

2. Chief Complaints (Pradhana Vedana):

- Perianal swelling (गुदावर्तक ग्रंथि)
- Pain during defecation (गुद शूल)
- Bleeding per rectum (रक्तस्राव)
- Mucus discharge (श्लेष्म स्राव)
- Itching in the anal region (गुद कण्डू)

3. History of Present Illness (Vyadhi Purvarupa & Samprapti):

- Onset: Acute or Chronic
- Duration: Since when symptoms started
- Progression: Gradual or Sudden
- Pain: Type, severity, aggravating & relieving factors
- Bleeding: Amount, color, frequency
- Associated Symptoms: Constipation, tenesmus, sensation of incomplete evacuation

4. Past History (Purva Vyadhi Itihasa):

- History of recurrent constipation
- History of chronic diarrhea
- Previous episodes of similar complaints
- History of anorectal surgeries
- History of systemic diseases like diabetes, hypertension, or tuberculosis

5. Family History (Kula Vyadhi Itihasa):

- Family history of Arsha or anorectal diseases
- Genetic predisposition towards digestive disorders

6. Dietary History (Ahara Vihara):

- Nature of food intake:
  - Ruksha (dry) / Snigdha (unctuous)
  - Laghu (light) / Guru (heavy)
- Consumption of:
  - Spicy, fried, junk food
  - Low-fiber diet
  - Excessive intake of Katu (pungent), Amla (sour), Lavana (salty) foods
- Water intake habits
- Bowel movement habits: Regular/Irregular

7. Lifestyle History (Vihara & Dinacharya):

- Sedentary lifestyle (lack of exercise)
- Excessive sitting or standing work
- Suppression of natural urges (Vega Dharana)
- Stress and mental strain

8. Personal History:

- Addiction: Alcohol, smoking, tobacco, caffeine
- Sleep pattern: Disturbed/Normal
- Bowel habits: Regular/Constipated
- Hygiene practices

9. Examination (Rogi Pariksha):

a. Dashavidha Pariksha (Tenfold Examination):

1. **Prakriti (Body Constitution):** Vata/Pitta/Kapha dominance
2. **Vikriti (Pathological Changes):** Dosha imbalance
3. **Sara (Tissue Quality):** Rasa, Rakta, Mamsa Sara assessment
4. **Samhanana (Body Build):** Well-built or weak
5. **Pramana (Measurement):** Height, weight, BMI
6. **Satmya (Adaptability):** Dietary adaptability
7. **Satva (Mental Strength):** Stress and anxiety assessment
8. **Aahar Shakti (Digestive Power):** Agni assessment
9. **Vyayam Shakti (Exercise Tolerance):** Physical stamina
10. **Vaya (Age):** Young, middle, or old age

b. Trividha Pariksha (Threefold Examination):

1. **Darshana (Inspection):**
    - External hemorrhoids
    - Anal region changes (swelling, redness, prolapse)
2. **Sparshana (Palpation):**
    - Tenderness, warmth, consistency of swelling
3. **Prashna (Interrogation):**
    - Patient's complaints, dietary & lifestyle history

c. Ashtasthana Pariksha (Eightfold Examination):

1. **Nadi (Pulse):** Dosha predominance
2. **Mala (Stool Examination):** Color, consistency, blood presence
3. **Mutra (Urine):** Frequency, color, odor
4. **Jihva (Tongue):** Coated (Ama) or clean
5. **Shabda (Voice):** Weakness or normal
6. **Sparsha (Skin Texture):** Dry, rough, or normal
7. **Drik (Eyes):** Conjunctival pallor in anemia
8. **Akruti (Body Build):** Weak/emaciated or well-nourished

d. Gud Pariksha (Anorectal Examination):

- Position: Left lateral or lithotomy position
- Inspection: External piles, anal skin changes, prolapse
- Palpation: Tenderness, consistency, size, reducibility
- Per Rectal Examination (P/R): Digital examination for internal hemorrhoids

10. Differential Diagnosis (Samanya Vishesha Nidana):

- **Parikartika (Anal Fissure)** – Severe pain, minimal bleeding
- **Bhagandara (Fistula-in-ano)** – Discharge, external opening
- **Gudabransha (Rectal Prolapse)** – Mucosal prolapse, straining history
- **Udara Roga (Abdominal Disorders)** – Chronic constipation

11. Diagnosis (Nidana Panchaka):

1. **Nidana (Etiology):**
   - Irregular eating habits, low-fiber diet, sedentary lifestyle
   - Vega Dharana (suppression of natural urges)
   - Excessive consumption of spicy, fried foods
2. **Purvarupa (Premonitory Symptoms):**
   - Mild anal discomfort, constipation, itching
3. **Rupa (Symptoms):**
   - Bleeding, pain, swelling, prolapse, mucus discharge
4. **Upashaya (Relieving/Aggravating Factors):**
   - Relief with Sitz bath, aggravated by spicy food, straining
5. **Samprapti (Pathogenesis):**
   - Agni Mandya → Apana Vayu Dushti → Rasa-Rakta Dushya → Varicosity of veins → Arsha

12. Ayurvedic Classification of Arsha:

- **Based on Dosha:**
  - **Vataja Arsha:** Dry, painful, blackish piles
  - **Pittaja Arsha:** Red, inflamed, bleeding piles
  - **Kaphaja Arsha:** Large, soft, mucus-coated piles
  - **Sannipataja Arsha:** Mixed symptoms
- **Based on Prognosis:**
  - **Sadhya (Curable)** – Early-stage, mild symptoms
  - **Asadhya (Incurable)** – Chronic, prolapsed, ulcerated piles

13. Treatment Plan (Chikitsa Siddhanta):

a. Shodhana (Purification Therapies):

- **Virechana** – For Pitta predominance
- **Basti (Enema Therapy)** – For Vata involvement

b. Shamana (Palliative Therapy):

- **Oral Medications:**
  - Triphala Churna, Abhayarishta, Avipattikar Churna
  - Kankayana Vati, Arshoghni Vati
- **Local Applications:**
  - Jatyadi Taila, Nimba Taila, Yashtimadhu Ghrita

c. Surgical Treatment (Shastra Karma):

- **Kshara Karma** – Application of alkaline cauterization
- **Agnikarma** – Thermal cauterization
- **Ksharasutra Therapy** – Ligation therapy
- **Hemorrhoidectomy (if needed)**

d. Lifestyle and Dietary Advice:

- High-fiber diet, warm water intake, regular exercise
- Avoid spicy, fried, heavy-to-digest foods
- Sitz bath with Triphala decoction

Case Study of Arsha (Hemorrhoids) in Ayurveda

1. General Information:

- **Name:** Mr. Ramesh Kumar
- **Age:** 45 years
- **Gender:** Male
- **Occupation:** Office worker (sedentary job)
- **Address:** Pune, Maharashtra
- **Date of Examination:** 08 March 2025

2. Chief Complaints (Pradhana Vedana):

- Pain during defecation for **6 months** (गुद शूल)
- Bleeding per rectum (fresh blood) for **4 months** (रक्तस्राव)
- Constipation for **1 year** (विबन्ध)
- Mucus discharge in stool for **2 months** (श्लेष्म स्राव)
- Anal itching for **3 months** (गुद कण्डू)

3. History of Present Illness (Vyadhi Purvarupa & Samprapti):

- The patient developed **constipation 1 year ago**, which was ignored.
- Gradually, **anal pain** started, which worsened during defecation.
- **Bleeding per rectum** began as drops of fresh blood 4 months ago, increasing over time.
- A **mucus-like discharge** started 2 months ago.
- The patient also reports **itching and discomfort** around the anal region.

4. Past History (Purva Vyadhi Itihasa):

- No history of hemorrhoids in childhood.
- History of **constipation episodes** since the last 5 years.
- No previous **surgical intervention**.
- No history of **diabetes, hypertension, or tuberculosis**.

5. Family History (Kula Vyadhi Itihasa):

- Father had **similar complaints** at the age of 50.

6. Dietary History (Ahara Vihara):

- **Ruksha (dry) and Guru (heavy) food intake** – Frequent fast food, deep-fried items.
- **Low fiber intake** – Rare consumption of green vegetables.
- **Excessive spicy food and tea consumption** (5-6 cups per day).
- **Irregular water intake** – Drinks less than **1 liter per day**.
- **Bowel habit:** Irregular, with occasional straining during defecation.

7. Lifestyle History (Vihara & Dinacharya):

- **Sedentary lifestyle** – Sits for long hours in the office.
- **Irregular physical activity** – No exercise routine.
- **Frequent stress due to work pressure**.
- **Suppression of natural urges (Vega Dharana)** – Avoids using public toilets.

8. Personal History:

- **Addictions:** Occasional alcohol intake, tea addiction.
- **Sleep Pattern:** Disturbed sleep due to work stress.
- **Hygiene:** Moderate personal hygiene.

9. Examination (Rogi Pariksha):

a. Dashavidha Pariksha (Tenfold Examination):

- **Prakriti:** Vata-Pitta dominant.
- **Vikriti:** Aggravated Vata and Pitta Dosha.
- **Sara:** Moderate tissue quality.
- **Samhanana:** Medium body build.
- **Pramana:** BMI = 27 (overweight).
- **Satmya:** Mild adaptability to changes in diet.
- **Satva:** Moderate stress tolerance.
- **Aahar Shakti:** Low digestive power (Mandagni).
- **Vyayam Shakti:** Low stamina.
- **Vaya:** Middle age.

b. Trividha Pariksha (Threefold Examination):

1. **Darshana (Inspection):**
    - **External hemorrhoids** visible.
    - Mild **redness and inflammation** around the anal area.
2. **Sparshana (Palpation):**
    - Tender, soft swellings near the anus.
3. **Prashna (Interrogation):**
    - Patient reports **pain, bleeding, mucus discharge, and constipation**.

c. Ashtasthana Pariksha (Eightfold Examination):

1. **Nadi:** Vata-Pitta dominance (80/min).
2. **Mala:** Hard stools, streaked with blood.
3. **Mutra:** Normal.
4. **Jihva:** Coated, suggesting Ama accumulation.
5. **Shabda:** Normal.
6. **Sparsha:** Skin dryness observed.
7. **Drik:** Slight pallor (indicating mild anemia).
8. **Akruti:** Overweight.

d. Gud Pariksha (Anorectal Examination):

- **Position:** Lithotomy.
- **Inspection:** External hemorrhoids (Grade II) present.
- **Palpation:** Internal hemorrhoids felt at **3, 7, and 11 o'clock positions**.
- **Digital Rectal Examination:** No abnormal mass, but tenderness present.

10. Differential Diagnosis (Samanya Vishesha Nidana):

- **Parikartika (Anal Fissure):** Ruled out due to absence of severe sharp pain.
- **Bhagandara (Fistula-in-ano):** Ruled out due to absence of pus discharge.
- **Gudabransha (Rectal Prolapse):** Ruled out as prolapse is not complete.

11. Diagnosis (Nidana Panchaka):

1. **Nidana (Etiology):**
    - Excessive intake of spicy and fried food.
    - Suppression of natural urges (Vega Dharana).
    - Sedentary lifestyle and Mandagni.
2. **Purvarupa (Premonitory Symptoms):**
    - Occasional discomfort during defecation.
3. **Rupa (Symptoms):**
    - Pain, bleeding, mucus discharge, itching.
4. **Upashaya (Relieving/Aggravating Factors):**
    - Sitz bath provides relief.
    - Spicy food and straining worsen the condition.
5. **Samprapti (Pathogenesis):**
    - **Mandagni → Apana Vayu Dushti → Rasa-Rakta Dushya → Varicosity of veins → Arsha.**

12. Ayurvedic Classification of Arsha:

- **Pittaja Arsha** (Due to bleeding, inflammation, and redness).
- **Sadhya (Curable) condition** – Early-stage internal hemorrhoids.

13. Treatment Plan (Chikitsa Siddhanta):

a. Shodhana (Purification Therapy):

- **Virechana with Avipattikar Churna** – To relieve Pitta aggravation.
- **Basti (Enema with Triphala Ghrita)** – To regulate Apana Vata.

b. Shamana (Palliative Therapy):

- **Oral Medications:**
  - **Triphala Churna** – 5 g at bedtime with warm water.
  - **Kankayana Vati** – 1 tablet twice daily.
  - **Arshoghni Vati** – 1 tablet twice daily.
- **Local Applications:**
  - **Jatyadi Taila for local application.**
  - **Sitz bath with Triphala Kwath** – Twice daily.

c. Surgical Treatment (If Required):

- **Kshara Karma (Alkaline Therapy)** – If condition worsens.
- **Ksharasutra Therapy** – If hemorrhoids prolapse further.

d. Lifestyle and Dietary Advice:

- **Diet:**
  - High-fiber diet (fruits, vegetables, whole grains).
  - Avoid spicy, fried, and processed foods.
  - Drink **2-3 liters of water daily**.
- **Lifestyle Changes:**
  - Avoid prolonged sitting.
  - Daily **walking and yoga (Pavanamuktasana, Vajrasana)**.
  - Stress management with meditation.

Comparison of Modern and Ayurvedic Treatment of Arsha (Hemorrhoids)

Treatment Aspect	Modern Medicine	Ayurvedic Medicine
Approach	Symptomatic relief, surgical intervention if needed	Holistic approach: Detoxification (Shodhana), Palliative therapy (Shamana), and Surgical (Kshara Karma)
Dietary Management	High-fiber diet, plenty of fluids	Laghu (light) and high-fiber diet, Takra (buttermilk), Gandhaka-based preparations
Lifestyle Changes	Regular exercise, avoid prolonged sitting, no straining	Daily exercise, Yoga (Pavanamuktasana, Vajrasana), Abhyanga (oil massage)
Oral Medications	- Laxatives (Lactulose, Isabgol) for constipation - Pain relievers (NSAIDs) - Topical steroids (Hydrocortisone)	- Triphala Churna (for bowel regulation) - Kankayana Vati (for pain and bleeding) - Arshoghni Vati (for reducing hemorrhoids)
Topical Applications	- Anesthetic creams (Lidocaine) - Hydrocortisone suppositories	- Jatyadi Taila (wound healing) - Nimba Taila (antiseptic) - Kshara Taila (shrinking hemorrhoids)
Procedures	- Sclerotherapy (injection of chemical agent) - Rubber Band Ligation - Hemorrhoidectomy (surgical removal) - Stapled Hemorrhoidopexy	- Kshara Karma (application of herbal alkali) - Agnikarma (cauterization with heat) - Ksharasutra Therapy (medicated thread ligation)
Panchakarma Therapy	Not applicable	- Virechana (therapeutic purgation) - Basti (medicated enema with Triphala Ghrita)
Pain Management	NSAIDs, analgesics	Sitz bath with Triphala Kwath, Haritaki decoction
Relapse Prevention	Lifestyle changes, dietary modifications	Agni Deepana (digestive strengthening), Vega Dharana Nishedha (avoid suppression of natural urges)

Case History of Gulma (गुल्म) in Ayurveda

I. परिचय (Introduction)

- **गुल्म (Gulma)** is a condition described in Ayurveda characterized by an abnormal growth or lump formation in the abdomen, often linked to aggravated Vata, Pitta, or Kapha doshas.
- It can present as a palpable mass with pain, digestive issues, or systemic symptoms.

II. रोगी का सामान्य परिचय (General Information of Patient)

1. **नाम (Name):** _____
2. **उम्र (Age):** _____
3. **लिंग (Gender):** _____
4. **धर्म (Religion):** _____
5. **जाति (Caste):** _____
6. **व्यवसाय (Occupation):** _____
7. **पता (Address):** _____

III. मुख्य शिकायतें (Chief Complaints)

1. पेट में गांठ (Abdominal lump)
2. पेट में भारीपन (Abdominal heaviness)
3. दर्द (Pain) — स्थान, प्रकृति, समय का उल्लेख करें (mention site, nature, and timing)
4. भूख न लगना (Loss of appetite)
5. मल-मूत्र में विकृति (Abnormal bowel/urine patterns)
6. वजन घटना (Weight loss)
7. थकान (Fatigue)

IV. वर्तमान रोग का इतिहास (History of Present Illness)

1. **रोग की शुरुआत (Onset):** अचानक/धीरे-धीरे (Sudden/Gradual)
2. **रोग की अवधि (Duration):** _____
3. **रोग का प्रकार (Nature of Illness):** स्थायी/अस्थायी (Permanent/Intermittent)
4. **कारक कारण (Causative Factors):** भोजन, मानसिक तनाव, मौसम आदि (Diet, mental stress, seasonal factors)
5. **राहत देने वाले कारक (Relieving Factors):** _____
6. **बढ़ाने वाले कारक (Aggravating Factors):** _____

V. अतीत का इतिहास (Past History)

1. **पूर्व में हुए रोग (Previous Illness):** _____
2. **पूर्व में किए गए उपचार (Previous Treatments):** _____
3. **सर्जरी/ऑपरेशन का इतिहास (History of Surgery):** _____

VI. व्यक्तिगत इतिहास (Personal History)

1. **आहार (Diet):** शाकाहारी/मांसाहारी (Vegetarian/Non-vegetarian)
2. **अग्नि (Appetite):** तीव्र/मंद/सामान्य (Increased/Decreased/Normal)
3. **विहार (Daily Routine):** सक्रिय/निष्क्रिय (Active/Inactive)
4. **मल-मूत्र (Bowel/Urine Patterns):** सामान्य/असामान्य (Normal/Abnormal)
5. **नींद (Sleep):** सामान्य/असामान्य (Normal/Disturbed)
6. **आसक्ति (Addictions):** धूम्रपान/मदिरा/अन्य (Smoking/Alcohol/Other)

VII. पारिवारिक इतिहास (Family History)

- क्या परिवार में किसी को ऐसा रोग रहा है? (Any family history of similar conditions?)

VIII. मानसिक अवस्था (Mental Status)

1. **मनःस्थिति (Emotional Stability):** चिंता/क्रोध/भय/तनाव (Anxiety/Anger/Fear/Stress)
2. **नींद का प्रकार (Sleep Pattern):** गहरी/टूटती हुई/अनिद्रा (Deep/Interrupted/Insomnia)

IX. शरीरिक परीक्षा (Physical Examination)

Parameters	Observation
स्थूल परीक्षा (General Exam)	Pallor, Jaundice, Cyanosis, Edema
पल्स (Nadi Pareeksha)	वात/पित्त/कफ प्रधान
रक्तचाप (BP)	_____ mmHg
हृदय गति (Pulse Rate)	_____ bpm
श्वसन दर (Respiratory Rate)	_____ per minute
वजन (Weight)	_____ kg

X. उदर परीक्षा (Abdominal Examination)

1. **अवलोकन (Inspection):** गांठ का आकार, स्थान, गति
2. **स्पर्श (Palpation):** कठोर/नरम गांठ का अनुभव
3. **परकशन (Percussion):** ठोस/गैस से भरा क्षेत्र
4. **श्रवण (Auscultation):** आंतों की आवाज (Bowel sounds)

XI. विशेष परीक्षा (Special Investigations)

1. **पंचकर्म विशेष परीक्षण (Panchakarma Examination)**
2. **आमाशय परीक्षण (Gastric Examination)**
3. **अल्ट्रासाउंड (Ultrasound/USG Abdomen)**
4. **CT Scan / MRI (In suspected malignancies)**

XII. निदान (Diagnosis)

- गुल्म का प्रकार (Type of Gulma):
  - **वातज गुल्म** (Vataja Gulma)
  - **पित्तज गुल्म** (Pittaja Gulma)
  - **कफज गुल्म** (Kaphaja Gulma)
  - **सन्निपातज गुल्म** (Sannipataja Gulma)
  - **आम गुल्म (Ama Gulma)**

XIII. आयुर्वेदिक चिकित्सा (Ayurvedic Treatment)

Therapy	Drugs/Procedures
स्नेहन (Oleation Therapy)	तिल तैल, महामाष तैल (Sesame Oil, Mahanarayan Oil)
स्वेदन (Sudation Therapy)	बाष्प स्वेदन, नाड़ी स्वेदन (Steam Therapy, Tube Steaming)
विरेचन (Purgation Therapy)	त्रिवृत, हरितकी, एरंड तैल (Trivrit, Haritaki, Castor Oil)
बस्ती कर्म (Enema Therapy)	अनुवासन बस्ती, निरूह बस्ती (Anuvasan, Niruha Basti)
औषधीय योग (Medicines)	अविपत्तिकर चूर्ण, हिंग्वाष्टक चूर्ण, पंचकोल चूर्ण
आहार (Dietary Advice)	पचनीय व लघु आहार (Easily digestible and light food)

XIV. आधुनिक चिकित्सा (Modern Treatment)

- **NSAIDs** (Pain Management)
- **Prokinetic Agents** (For Digestive Support)
- **Surgical Intervention** (If malignancy or severe obstruction is suspected)

XV. परहेज (Precautions)

1. गरिष्ठ एवं बासी भोजन का सेवन न करें (Avoid heavy and stale foods)
2. मानसिक तनाव से बचें (Avoid mental stress)
3. नियमित योग एवं प्राणायाम करें (Practice regular yoga and breathing exercises)

XVI. संभावित जटिलताएँ (Complications)

- **आंत्र रुकावट (Intestinal Obstruction)**
- **पाचन विकार (Digestive Disorders)**
- **शरीरिक दुर्बलता (Physical Weakness)**

Case Study on Gulma (गुल्म) in Ayurveda

(Based on Ayurvedic Case History Format)

I. रोगी का सामान्य परिचय (General Information of Patient)

- **नाम (Name):** श्रीमती सुमित्रा देवी (Mrs. Sumitra Devi)
- **उम्र (Age):** 45 वर्ष
- **लिंग (Gender):** स्त्री (Female)
- **धर्म (Religion):** हिन्दू
- **जाति (Caste):** सामान्य वर्ग
- **व्यवसाय (Occupation):** गृहिणी (Housewife)
- **पता (Address):** करनाल, हरियाणा

II. मुख्य शिकायतें (Chief Complaints)

1. पेट के बाएँ भाग में गांठ का अनुभव (Lump in the left side of the abdomen) — 6 महीने से
2. पेट में भारीपन और फूला हुआ महसूस होना (Abdominal heaviness and bloating) — 5 महीने से
3. दर्द (Pain) — हल्का लेकिन लगातार (Mild but persistent)
4. भूख कम लगना (Loss of appetite)
5. मल त्याग में कठिनाई (Constipation)
6. थकान और कमजोरी (Fatigue and weakness)

III. वर्तमान रोग का इतिहास (History of Present Illness)

- प्रारंभ में रोगी ने पेट में हल्की सी गांठ महसूस की, जो धीरे-धीरे बड़ी होती गई।
- रोगी को लगातार गैस बनने, पेट फूलने और दर्द की शिकायत बनी रही।
- भोजन के बाद असहजता और पेट भारी होने की अनुभूति प्रमुख लक्षण थे।
- रोगी ने पहले घरेलू उपाय अपनाए, लेकिन राहत न मिलने पर आयुर्वेदिक चिकित्सा केंद्र में संपर्क किया।

IV. अतीत का इतिहास (Past History)

- **पूर्व में हुए रोग:** अपच, कब्ज
- **पूर्व में किए गए उपचार:** घरेलू उपचार व एलोपैथिक दवाइयाँ
- **सर्जरी/ऑपरेशन का इतिहास:** नहीं

V. व्यक्तिगत इतिहास (Personal History)

- **आहार (Diet):** मांसाहारी (Non-vegetarian)
- **अग्नि (Appetite):** मंद (Low)
- **विहार (Lifestyle):** शारीरिक श्रम कम (Less physical activity)
- **मल-मूत्र (Bowel/Urine Patterns):** कब्ज (Constipation)
- **नींद (Sleep):** हल्की नींद (Disturbed sleep)
- **आसक्ति (Addictions):** कोई नहीं (None)

VI. पारिवारिक इतिहास (Family History)

- परिवार में किसी को ऐसा रोग नहीं हुआ था।

VII. मानसिक अवस्था (Mental Status)

- रोगी अत्यधिक चिंता ग्रस्त रहती है और तनाव महसूस करती है।

VIII. शरीरिक परीक्षा (Physical Examination)

Parameters	Observation
स्थूल परीक्षा (General Exam)	हल्का पांडुरोग (Mild pallor)
नाड़ी परीक्षा (Nadi Pareeksha)	वात-कफ प्रधान
रक्तचाप (BP)	130/85 mmHg
हृदय गति (Pulse Rate)	78 bpm
श्वसन दर (Respiratory Rate)	20/min
वजन (Weight)	62 kg

IX. उदर परीक्षा (Abdominal Examination)

Examination	Findings
अवलोकन (Inspection)	पेट के बाएँ भाग में उभार
स्पर्श (Palpation)	गांठ का अनुभव (Lump felt)
परकशन (Percussion)	ठोस क्षेत्र (Dull sound in the lump area)
श्रवण (Auscultation)	सामान्य आंतों की आवाज (Normal bowel sounds)

X. विशेष परीक्षण (Special Investigations)

- **अल्ट्रासाउंड (Ultrasound):** Left abdominal lump (3x4 cm), likely benign
- **CBC Test:** Hemoglobin 10.2 g/dL (Mild anemia)
- **USG Abdomen:** Solid mass with mild vascularity (suggestive of benign growth)

XI. निदान (Diagnosis)

- **वात-कफज गुल्म (Vata-Kaphaja Gulma)**

XII. आयुर्वेदिक चिकित्सा (Ayurvedic Treatment Plan)

Therapy	Drugs/Procedures
स्नेहन (Oleation Therapy)	महानारायण तैल (Mahanarayan Oil) अभ्यंग
स्वेदन (Sudation Therapy)	नाड़ी स्वेदन (Nadi Swedana)
विरेचन (Purgation Therapy)	त्रिवृत चूर्ण (Trivrit Churna) 5g at bedtime
बस्ती कर्म (Enema Therapy)	अनुवासन बस्ती with दशमूल तैल (Dashmool Oil)
औषधीय योग (Medicines)	हिंग्वाष्टक चूर्ण (Hingwastak Churna), अविपत्तिकर चूर्ण (Avipattikar Churna)
आहार (Dietary Advice)	लघु और सुपाच्य आहार (Easily digestible and light diet)

XIII. आधुनिक चिकित्सा (Modern Treatment - If Required)

Drug Class	Examples	Indication
NSAIDs	Paracetamol, Ibuprofen	Pain relief
Prokinetic Agents	Domperidone, Itopride	Improved digestion
Surgical Option	If malignancy or obstruction is suspected	Lump excision

XIV. परहेज (Precautions)

1. गरिष्ठ, बासी, और तले-भुने भोजन से बचाव करें।
2. तनाव को कम करने के लिए ध्यान एवं योग अपनाएँ।
3. ठंडी व सूखी जलवायु में सावधानी बरतें।
4. नियमित त्रिफला चूर्ण का सेवन करें।

XV. संभावित जटिलताएँ (Complications)

- आंत्र अवरोध (Intestinal Obstruction)
- पाचन तंत्र की गड़बड़ी (Digestive Disorder)
- शरीर में दुर्बलता (General Weakness)

Case History Taking of Shwasa (Dyspnea) & Kasa (Cough) in Ayurveda

1. Pratinidhi (Demographic Details)

- **Name:**
- **Age:**
- **Gender:**
- **Occupation:**
- **Address:**
- **Marital Status:**
- **Socio-economic Status:**
- **Dietary Habits:** (Vegetarian/Non-vegetarian)
- **Addictions:** (Smoking, Alcohol, etc.)
- **Known Allergies:**

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2. Pradhana Vedana (Chief Complaints)

- **For Shwasa:**
  - Breathlessness
  - Difficulty in breathing
  - Increased respiratory rate
  - Chest tightness
- **For Kasa:**
  - Dry/Wet cough
  - Associated sputum (colour, consistency)
  - Chest pain during cough
  - Duration of symptoms

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3. Nidan Panchaka (Ayurvedic Diagnostic Approach)

A. Nidana (Etiological Factors)

- **For Shwasa:**
  - Dust exposure
  - Cold weather
  - Overexertion
  - Kapha-accumulating diet
  - Ama accumulation
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- **For Kasa:**
  - Exposure to smoke or cold air
  - Intake of incompatible food (Viruddha Ahara)
  - Chronic respiratory tract infections
  - Suppression of natural urges

B. Purvarupa (Premonitory Symptoms)

- **For Shwasa:**
  - Frequent yawning
  - Nasal congestion
  - Feeling of chest heaviness
- **For Kasa:**
  - Mild irritation in throat
  - Hoarseness of voice
  - Occasional dry cough

C. Rupa (Signs & Symptoms)

- **For Shwasa:**
  - Shwasakruchhrata (Difficulty in breathing)
  - Ghurghurakam (Wheezing sound)
  - Hritshula (Chest pain)
- **For Kasa:**
  - Kantha Shoola (Throat pain)
  - Kapha- or Pitta-dominated sputum
  - Chest discomfort

D. Upashaya/Anupashaya (Relieving & Aggravating Factors)

- **For Shwasa:**
  - **Relieved by:** Warm food, steam inhalation
  - **Aggravated by:** Cold exposure, dust
- **For Kasa:**
  - **Relieved by:** Honey, warm water
  - **Aggravated by:** Cold drinks, sour foods

E. Samprapti (Pathogenesis)

- **For Shwasa:**
  - **Dushya:** Rasadhatu, Raktadhatu
  - **Srotas:** Pranavaha Srotas
- **For Kasa:**
  - **Dushya:** Rasadhatu, Mamsadhatu
  - **Srotas:** Pranavaha Srotas

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4. Dashavidha Pariksha (Tenfold Examination)

- **Prakriti (Body Constitution):** Vata, Pitta, Kapha dominance
- **Vikriti (Pathological State):** Shwasa/Kasa-specific symptoms
- **Sara (Essence):** Asthi (Bone), Majja (Bone marrow) status
- **Samhanana (Body Build):** Compact/weak
- **Pramana (Measurement):** Height/weight
- **Satmya (Adaptability):** Dietary & lifestyle adaptation
- **Satva (Mental Strength):** Stress levels, anxiety
- **Ahara Shakti (Digestive Power):** Appetite & digestion pattern
- **Vyayama Shakti (Exercise Tolerance):** Physical strength assessment
- **Vaya (Age):** Child/adult/elderly

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5. Ashtavidha Pariksha (Eightfold Examination)

- **Nadi (Pulse):** Vata/Kapha imbalance
- **Mala (Stool):** Constipation/diarrhea
- **Mutra (Urine):** Frequency, colour
- **Jivha (Tongue):** Coated tongue (Ama Lakshana)
- **Shabda (Voice):** Hoarse or breathless tone
- **Sparsha (Skin):** Dry, rough texture
- **Drik (Eyes):** Redness, dullness
- **Akruti (Body Appearance):** Lean/thin or bulky

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6. Srotas Pariksha (Systemic Examination)

- **Pranavaha Srotas:**
  - Wheezing sounds
  - Rhonchi/Crepitations
- **Rasavaha Srotas:**
  - Weakness, fatigue
- **Raktavaha Srotas:**
  - Pallor, cyanosis

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7. Manasika Pariksha (Psychological Examination)

- **Stress/Anxiety:** Aggravation of symptoms in mental stress
- **Emotional Triggers:** Impact on breathlessness and cough

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8. Upadrava (Complications)

- For Shwasa: Chronic obstructive pulmonary disease (COPD), Pulmonary edema
- For Kasa: Hemoptysis (blood in cough), Lung abscess

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9. Sadhyasadhyata (Prognosis)

- **Sadhya (Curable):** Recent onset, mild symptoms
- **Asadhya (Incurable):** Chronic, structural lung damage

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10. Chikitsa (Treatment Plan)

- **Nidana Parivarjana (Avoiding causative factors):**
  - Avoid cold exposure, dust, and allergens.
- **Shodhana (Detoxification Therapies):**
  - Vamana (Emesis) in Kapha dominance
  - Virechana (Purgation) in Pitta dominance
- **Shamana (Palliative Therapy):**
  - Ayurvedic formulations like Kantakari Avaleha, Sitopaladi Churna
- **Rasayana (Rejuvenation Therapy):**
  - Chyawanprash, Ashwagandha

11. Pathya-Apathya (Dietary & Lifestyle Advice)

- **Pathya:**
  - Warm, light, easily digestible foods
  - Steam inhalation, yoga, pranayama
- **Apathya:**
  - Cold foods, oily or fried foods
  - Exposure to dust, smoke

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12. Yoga & Pranayama Recommendations

- **For Shwasa:** Anulom Vilom, Bhastrika Pranayama
- **For Kasa:** Ujjayi, Bhramari Pranayama

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13. Follow-up (Punarikshan)

- Frequency of review depending on symptom severity
- Assessment of improvement based on symptom reduction

Case Study: Shwasa (Dyspnea) with Kasa (Cough)

Patient Details (Pratinidhi)

- **Name:** Mr. Ramesh Sharma
- **Age:** 45 years
- **Gender:** Male
- **Occupation:** Factory Worker
- **Address:** Delhi, India
- **Marital Status:** Married
- **Socio-economic Status:** Middle Class
- **Dietary Habits:** Mixed diet (Vegetarian & Non-vegetarian)
- **Addictions:** Chronic smoker for 15 years
- **Allergies:** Dust allergy

Chief Complaints (Pradhana Vedana)

- Breathlessness for 2 months
- Cough with expectoration (white sputum) for 1 month
- Worsening symptoms during cold exposure and nighttime

History of Present Illness (HPI)

- Patient initially developed dry cough with occasional wheezing, which gradually progressed to breathlessness.
- Symptoms aggravated after exposure to dust and cold weather.
- Relief observed after taking warm water and herbal decoctions.
- No significant weight loss, fever, or hemoptysis.

Past History (Pura Vaikrita Vrittanta)

- Similar complaints in winter season for the past 2 years.
- No history of tuberculosis or major surgeries.

Family History

- Father had asthma.

Nidan Panchaka (Ayurvedic Diagnostic Approach)

Aspect	Shwasa (Dyspnea)	Kasa (Cough)
Nidana (Cause)	Dust exposure, cold climate, smoking	Cold air, smoking, dry food intake
Purvarupa (Prodromal signs)	Nasal congestion, fatigue	Throat irritation, mild cough
Rupa (Symptoms)	Breathlessness, chest tightness	Dry/Wet cough, sputum
Upashaya/Anupashaya (Relief/Aggravation)	Relieved by warm water, worsens with cold exposure	Relieved by honey, worsens with cold drinks
Samprapti (Pathogenesis)	Kapha obstructing Pranavaha Srotas with Vata involvement	Kapha accumulation in Pranavaha Srotas

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Dashavidha Pariksha (Tenfold Examination)

- **Prakriti:** Kapha-Vata
- **Vikriti:** Kapha-Vata imbalance
- **Sara:** Moderate strength
- **Samhanana:** Medium build
- **Pramana:** Normal height & weight
- **Satmya:** Adapted to mixed diet
- **Satva:** Moderate mental strength
- **Ahara Shakti:** Reduced appetite
- **Vyayama Shakti:** Low endurance
- **Vaya:** Middle-aged

Ashtavidha Pariksha (Eightfold Examination)

- **Nadi:** Kapha-Vata dominant pulse
- **Mala:** Sticky stools
- **Mutra:** Clear urine
- **Jivha:** Coated tongue
- **Shabda:** Hoarse voice
- **Sparsha:** Cold skin
- **Drik:** Dull eyes
- **Akruti:** Weak posture

Final Diagnosis:

- **Ayurveda Diagnosis:** *Tamak Shwasa* with *Kaphaja Kasa*
- **Modern Diagnosis:** Chronic Bronchitis with Allergic Cough

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Treatment Plan Comparison (Ayurveda vs Modern Medicine)

Aspect	Ayurveda Treatment	Modern Medicine Treatment
Nidana Parivarjana (Avoidance of Cause)	Avoid cold exposure, dust, smoking cessation	Avoid allergens, smoking cessation
Shodhana (Detoxification Therapy)	Vamana (in Kapha dominance) Virechana (in Pitta dominance)	Not applicable
Shamana (Palliative Therapy)	- *Kantakari Avaleha* – 1 tsp BD after meals - *Sitopaladi Churna* – 3 gm BD with honey - *Yashtimadhu Kwatha* – 40ml BD before meals	- **Bronchodilators:** Salbutamol inhaler PRN - **Mucolytics:** Ambroxol 30 mg BD - **Antihistamines:** Levocetirizine 5 mg OD
Rasayana (Rejuvenation Therapy)	- *Chyawanprash* – 1 tsp in morning - *Haridra Ksheera* – 1 glass warm turmeric milk before bedtime	- Multivitamins & antioxidants
Pathya (Diet)	- Warm soups, ginger tea, honey-based decoctions - Avoid cold, oily, and heavy foods	- Balanced diet rich in vitamins C and D - Avoid cold beverages
Lifestyle (Vihara)	- Daily pranayama (Anulom Vilom, Bhastrika)	- Regular breathing exercises - Physiotherapy if required

Aspect	Ayurveda Treatment	Modern Medicine Treatment
	- Steam inhalation with eucalyptus oil	

Prognosis (Sadhyasadhyata)

- **Sadhya (Curable):** With lifestyle modifications, early intervention, and Ayurvedic therapies.
- **Yapya (Manageable):** Requires long-term symptomatic management in chronic cases.

Follow-up Plan

- Review after 1 week to assess symptom relief.
- Gradual tapering of medications once stable.

Patient Education

- Avoid smoking and dust exposure.
- Encourage regular yoga and pranayama for respiratory health.
- Use warm water for drinking.

Case History Taking (रोगानुसन्धानम्) form for Rajayakshma (राजयक्ष्मा) in Ayurveda

रोगानुसन्धानपत्रम्

(Case History Form in Ayurveda)

१. सामान्यविवरणम् (General Information)

- **नाम (Name):**
- **वयः (Age):**
- **लिङ्गम् (Gender):**
- **जातिः (Caste):**
- **व्यवसायः (Occupation):**
- **देशः (Region/Residence):**
- **आगमनदिनाङ्कः (Date of Consultation):**
- **परामर्शकर्तारः (Referred by):**
- **पौरुषेय / अपौरुषेय (Urban/Rural):**

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२. प्रमुखप्रदोषः (Chief Complaints)

- **मुख्यलक्षणानि (Main Symptoms):**
- **लक्षणानां कालविस्तारः (Duration of Symptoms):**
- **लक्षणानां प्रकृति (Nature of Symptoms - स्थिरः / चलः / असहनीयः इत्यादि):**

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३. व्याधिवृत्तान्तः (History of Present Illness)

- **आरम्भकालः (Onset of Disease - अकस्मात् / शनैः शनैः):**
- **निदान (Causative Factors - दोष, दुष्टि, संयोग, विपर्यय इत्यादि):**
- **पूर्वरूपाणि (Prodromal Symptoms - पूर्वलक्षणानि):**
- **रोगपरिणामः (Progression of Disease):**

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४. अतीतानामयवृत्तान्तः (Past Medical History)

- **पूर्वरोगाणां वृत्तिः (Past Illnesses like ज्वरः, क्षयः, कुष्ठः etc.):**
- **पूर्वोपचाराः (Previous Treatments Taken):**
- **औषधग्रहणं (Medications Used):**

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५. पारिवारिकवृत्तान्तः (Family History)

- **पितृव्याधयः (Father's Medical History - क्षयः, मधुमेहः, रक्तपित्तं इत्यादि):**
- **मातृव्याधयः (Mother's Medical History):**
- **कुटुम्बे रोगप्रसारणम् (Family History of Contagious Diseases):**

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६. मनोविकाराः (Psychological History)

- **चिन्ता, उद्वेगः, शोकः (Stress, Anxiety, Depression):**
- **स्वप्नवृत्तिः (Sleep Pattern - नियमितः / अनियमितः):**
- **मनःस्थितिः (Mental State - स्थिरः / चञ्चलः इत्यादि):**

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७. दैहिकपरिक्षणम् (Physical Examination)

- **शरीरभारः (Body Weight):**
- **शरीरदर्शनं (Physical Appearance - क्षीणः / स्थूलः / सामान्यः):**

- **स्पर्शसंवेदनम् (Tactile Sensation):**
- **अग्निबलम् (Digestive Power - मंदाग्निः / तीक्ष्णाग्निः):**
- **नाडीपरीक्षा (Pulse Examination - वात / पित्त / कफ / समदोष):**
- **स्वरः (Voice - क्षीणः / स्थिरः / कम्पितः):**
- **कण्ठदुःखता (Throat Discomfort - शुष्कः / शोथयुक्तः):**
- **कासः (Cough - सुखसाध्यः / कष्टसाध्यः / रक्तयुक्तः इत्यादि):**
- **श्वासवृत्तिः (Respiration - सामान्यः / दूषितः):**
- **रसपरिक्षणम् (Taste Sensation - रुचिर् / अरुचिः):**

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८. दोषदूष्यविचारः (Assessment of Doshas & Dushyas)

- **दोषाः (Involvement of Doshas - वात / पित्त / कफ):**
- **धातुदुष्टिः (Affected Dhatus - रस, रक्त, मज्जा इत्यादि):**
- **स्रोतसः (Affected Srotas - प्राणवह, रसवह, raktavaha इत्यादि):**

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९. विशेषलक्षणानि (Specific Symptoms of Rajayakshma)

- **राजयक्ष्मलक्षणानि (Classical Features - क्षय, बलहीनता, कास, स्वरभेद, रक्तत्याग इत्यादि):**
- **श्वासकष्टम् (Breathlessness - लघु / तीव्र):**
- **रक्तस्रावः (Hemoptysis - अस्ति वा न वा?):**
- **अरुचिः (Loss of Appetite - स्थायी वा अस्थायी?):**
- **शरीरकृशता (Emaciation - बालकायः / स्थूलकायः):**

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१०. निदानपरीक्षा (Diagnostic Assessment)

- **प्रयोगिकपरीक्षा (Lab Investigations - क्षयरोगपरिक्षणम्, रक्तपरीक्षा इत्यादि):**
- **विशेष निदान (Differential Diagnosis - क्षय, गण्डमाला, मधुमेह, रक्तपित्त इत्यादि):**

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११. चिकित्साविधानम् (Treatment Plan)

- **औषधानि (Medications - च्यवनप्राश, वसावलेह, पिप्पली, सितोपलादिचूर्ण इत्यादि):**
- **पथ्यापथ्य (Dietary & Lifestyle Modifications):**
- **योजनाः (Treatment Approach - रसायन, अग्नि दीपन, बलवर्धन इत्यादि):**

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१२. अनुसरणीय पथ्याः (Follow-Up & Advice)

- **आहारविधानम् (Recommended Diet - दुग्ध, घृत, मूंगदाल इत्यादि):**
- **विहारविधानम् (Lifestyle - अधिक विश्रामः, स्वच्छ वायुः, स्निग्ध आहारः इत्यादि):**
- **औषध सेवनं (Medication Schedule):**
- **पुनः परीक्षणं (Follow-up Date):**

Ayurvedic Case Study for Rajayakshma (Pulmonary Tuberculosis)

रोगानुसन्धान प्रपत्रम् (Case History Report)

1. सामान्य विवरण (General Information)

- **रोगिणः नाम (Patient Name):** श्रीराम शर्मा
- **वयः (Age):** 42 वर्ष
- **लिङ्गम् (Gender):** पुरुषः
- **व्यवसायः (Occupation):** अध्यापकः (Teacher)
- **देशः (Region/Residence):** उत्तर प्रदेश, भारत
- **आगमन दिनाङ्कः (Date of Consultation):** 20 मार्च 2025
- **परामर्शकर्तारः (Referred by):** स्थानीय चिकित्सकः

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2. प्रमुख प्रदोषः (Chief Complaints)

- गत 4 मासेभ्यः **कासः (Chronic Cough)**
- **क्षीणता (Weakness & Emaciation)**
- **अरुचिः (Loss of Appetite)**
- **रात्रौ स्वेदः (Night Sweats)**
- **कर्णशूलः (Ear Pain Intermittently)**
- **स्वरभेदः (Hoarseness of Voice)**
- रक्तयुक्तः कासः (Hemoptysis – Blood in Sputum)

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3. व्याधि वृत्तान्तः (History of Present Illness)

रोगः शनैः शनैः (Gradual Onset) आरब्धः। प्रारम्भे केवलं सुखसाध्यः कासः आसीत्, परंतु शनैः शनैः कफयुक्तः रक्तयुक्तश्च अभवत्। **क्लमः, बलक्षयः, स्वेदनं** च दृष्टमस्ति।

रोगी अतीते 3 मासेभ्यः **शरीरभारहानिः** (Weight Loss ~7 kg) अनुभवति।

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4. अतीतानामय वृत्तान्तः (Past Medical History)

- **6 मासेभ्यः पूर्वं - क्षय रोग निदानम् (TB Diagnosis 6 months ago)**
- **पूर्वमधु रोगः नास्ति (No Diabetes)**
- **अन्य रोगाः नास्ति (No Other Major Illness)**
- **गृहजनानां मध्ये क्षयः अस्ति (Family History of TB Present)**

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5. पारिवारिक वृत्तान्तः (Family History)

- पितुः पूर्वे **श्वासरोगः (Respiratory Disease)**
- मातुः **अस्थमा (Asthma History)**

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6. दैहिक परिक्षण (Physical Examination)

- **नाडी परीक्षा (Pulse Examination):** 86 प्रति निमेषम्, वात-पित्तप्रधानः
- **शरीरभारः (Weight):** 55 kg (पूर्वं 62 kg आसीत्)
- **शरीरदर्शनं (Appearance):** शरीर कृशम्, त्वचा शुष्का
- **स्वरः (Voice):** क्षीणः, अस्वाभाविकः
- **नखाः (Nails):** पाण्डुर (Pale)
- **नासिका परीक्षाः (Nasal Examination):** सामान्यम्
- **श्वासपरीक्षा (Respiratory Exam):** कष्टसाध्यः श्वासः, उष्ण श्वसनम्
- **कासः (Cough Type):** रक्तयुक्तः, गाढ़कफयुक्तः
- **स्वेदनम् (Sweating):** रात्रौ विशेषतः

7. दोष-दूष्य विचारः (Assessment of Doshas & Dhatus)

- **दोषाः:** वात-पित्तप्रधान विकृति
- **धातुदुष्टिः: रस, रक्त, मज्जा**
- **स्रोतसः: प्राणवह स्रोतस दुष्टिः**

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8. निदानपरीक्षा (Diagnostic Investigations)

- **संपुट परीक्षण (Sputum Test): MTB (Mycobacterium Tuberculosis) +ve**
- **X-Ray छायाचित्रणम्:** फुफ्फुसक्षय (Pulmonary Infiltrates)
- **रक्तपरीक्षा (Blood Test):**
  - **ESR:** 65 mm/hr (उच्चतम् - High)
  - **WBC:** सामान्यः

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9. चिकित्साविधानम् (Treatment Plan in Ayurveda)

(A) औषध चिकित्सा (Herbal Treatment)

- **वसावलेहम्** – 10g दिनद्वयम् (Expectorant)
- **पिप्पली चूर्णम्** – 2g मधुना सह प्रातः
- **सितोपलादि चूर्णम्** – 3g दिनद्वयम् (For Cough & Mucous Control)
- **च्यवनप्राशम्** – 1 चम्मचः दिनद्वयम्
- **गिलोय सत्वम् + अश्वगंधा** – 500mg प्रत्येकं दिनद्वयम्
- **स्वर्णभस्म 1mg + गोदन्ति भस्म 125mg** मधुना सह

(B) पथ्यापथ्य (Diet & Lifestyle Advice)

पथ्य (What to Eat)

- ✅ दुग्ध (Milk)
- ✅ मूंगदाल (Moong Dal)
- ✅ घृतयुक्त आहार (Ghee-Based Foods)
- ✅ लघु सुपाच्य आहार (Easily Digestible Food)
- ✅ शहद (Honey)
- ✅ अंजीर, मुनक्का, छुहारा

अपथ्य (What to Avoid)

- ❌ तिक्त कटु आहार (Spicy, Bitter Foods)
- ❌ मांसाहारः (Heavy Non-Vegetarian Foods)
- ❌ मद्यपानम् (Alcohol)
- ❌ धूम्रपानम् (Smoking)

(C) विशेष चिकित्सा (Special Therapies)

- **नस्य चिकित्सा (Nasal Therapy):** शतधौत घृत नस्य 2 बिंदु
- **स्वेदन (Steam Therapy):** तुलसी, अदरक जल से
- **धूपन चिकित्सा (Herbal Fumigation):** हिंगुल, गुग्गुल, लोबान

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10. अनुसरणीय परामर्श (Follow-Up & Monitoring)

🗓️ **प्रथम पुनः परीक्षण (First Follow-Up):** 15 दिवसेभ्यः (15 Days)
🗓️ **द्वितीय पुनः परीक्षण (Second Follow-Up):** 1 मासेभ्यः (1 Month)

✅ **X-Ray पुनः 2 मासान्तरम्**
✅ **बल वृद्धिः, कासः, स्वरभेदः यथा सुधरे निरीक्षणीयम्**

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11. संभावित परिणाम (Prognosis)

- यदि **आहार + औषध सेवनं + अनुशासन पालनं** उचितं भवति, रोगः शनैः शनैः निवर्तते।
- रोगी यदि नियमपालनं न कुर्यात्, स्थितिः पुनः दारुणा भवेत्।
- क्षीणदोषे **रसायन चिकित्सा** विशेषतः लाभप्रदा।

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12. उपसंहार (Conclusion)

राजयक्ष्मा रोगः आयुर्वेदस्य दृष्ट्या **"सप्तधातु विकार"** इति उच्यते। दोष, धातु, स्रोतस इत्यादिषु उचित चिकित्सा आवश्यकम्। रोगी यदि पथ्य पालनं करोति, दीर्घायुः लाभः सम्भवः।

📝 **TEAM APTA AYURVEDA**

Tuberculosis Treatment Table: Modern vs Ayurvedic

Aspect	Modern Medicine (Allopathy)	Ayurveda
Goal of Treatment	Kill Mycobacterium tuberculosis and prevent resistance	Strengthen immunity (Ojas), balance doshas, reduce "Rajayakshma"
Diagnosis Base	Sputum AFB, CBNAAT, Chest X-ray, IGRA, ESR	Clinical features, Nidan Panchak, Prakriti, Dosha-vikriti
Main Drugs	**Anti-Tubercular Therapy (ATT)** under DOTS: • Isoniazid (H) • Rifampicin (R) • Pyrazinamide (Z) • Ethambutol (E) • Streptomycin (S) (in some cases)	**Rasayanas & Herbs**: • Swarna Bhasma • Chyawanprash • Ashwagandha • Guduchi • Shatavari • Pippali Rasayana • Vasavaleha
Duration of Treatment	6 months (Cat-I TB) or 9–24 months for MDR-TB	3–6 months or more depending on response & chronicity
Dietary Advice	High-protein, high-calorie diet Iron, vitamins, hydration	Pathya-Apathya: • Light, nourishing food • Avoid heavy, spicy, oily food
Supportive Therapy	Multivitamins (B6 with INH), nutritional supplements	Rasayana therapy, milk with herbs, ghee preparations
Monitoring	Monthly sputum check, liver function, weight, compliance	Clinical symptoms, weight, energy levels, appetite
Handling Side Effects	Monitor for hepatitis, neuropathy, resistance	Use of herbs like Yashtimadhu, Amla for support
HIV Coinfection	ART + ATT coordination	Use of immunomodulators like Guduchi, with ART consideration
Immunity Boosters	Vitamin D, Zinc, B-complex	Rasayana therapy, daily tonics like Chyawanprash

Notes:

- **Modern Medicine** is essential for curing TB and preventing its spread. Ayurvedic treatment can **complement** but should not replace ATT.
- **DOTS (Directly Observed Treatment Short-course)** is crucial for patient compliance in modern TB therapy.
- **Ayurveda** focuses on long-term strengthening of immunity and restoring balance in body systems, especially helpful in post-TB recovery.

Ayurvedic Case History Form for Hridroga (Heart Disease)

रोगानुसन्धान प्रपत्रम् (Case History Form)

(हृद्रोगस्य विशेष विवेचनम् - Detailed Study of Heart Disease)

१. सामान्य विवरणम् (General Information)

- **रोगिणः नाम (Patient Name):** .....
- **वयः (Age):** ..... वर्षाणि
- **लिङ्गम् (Gender):** ☐ पुरुषः ☐ स्त्री ☐ अन्यः
- **जातिः (Caste):** .....
- **व्यवसायः (Occupation):** .....
- **देशः (Residence/Region):** .....
- **आगमन दिनाङ्कः (Date of Consultation):** .....
- **परामर्शकर्तारः (Referred by):** .....

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२. प्रधानं व्याधि लक्ष्मणानि (Chief Complaints)

☐ हृदयशूलः (Chest Pain)
☐ श्वासकष्टम् (Breathlessness)
☐ गात्रसादः (Fatigue & Weakness)
☐ स्वेदाधिक्यं (Excessive Sweating)
☐ उच्च रक्तचापः (Hypertension)
☐ तालुशोषः (Dry Mouth)
☐ गात्रकम्पनम् (Tremors)
☐ अङ्गेषु सूक्ष्म पीडा (Body Aches)
☐ निद्राविघ्नः (Disturbed Sleep)
☐ चित्तवैकल्यं (Mental Stress)

३. व्याधि वृत्तान्तः (History of Present Illness)

- **रोगस्य प्रारम्भः (Onset of Disease):**
  ☐ अकस्मात् (Sudden) ☐ शनैः शनैः (Gradual)
- **व्याधेः कालावधिः (Duration of Illness):** ..... मासाः / वर्षाणि
- **पूर्वरूपाणि (Prodromal Symptoms):** .....
- **असात्म्य आहार-विहारः (Unwholesome Food & Lifestyle):**
  .....
- **मनसिक कारणानि (Psychological Factors - Stress, Anxiety):**
  .....
- **गर्भावस्थायां वा अनुवंशिकता (Congenital or Family History):**
  .....

४. अतीतानामय वृत्तान्तः (Past Medical History)

☐ मधुमेहः (Diabetes)
☐ उच्च रक्तचापः (Hypertension)
☐ व्रणरोपणदोषः (Slow Wound Healing)
☐ मूत्रविकारः (Urinary Disorders)
☐ श्वासरोगः (Respiratory Disease)
☐ आमाशय विकारः (Digestive Disorders)
☐ अष्टौ महागदाः पूर्वे अस्ति वा? (Any history of chronic diseases?)

५. पारिवारिक वृत्तान्तः (Family History)

- **पितुः (Father):** ☐ हृद्रोगः ☐ मधुमेहः ☐ अन्यः .....
- **मातुः (Mother):** ☐ हृद्रोगः ☐ मधुमेहः ☐ अन्यः .....
- **सहोदराः (Siblings):** ☐ हृद्रोगः ☐ मधुमेहः ☐ अन्यः .....

६. दैहिक परिक्षण (Physical Examination)

- **नाडी परीक्षा (Pulse Examination):** ……
- **शरीरभारः (Weight):** …… kg
- **बी.पी. (Blood Pressure):** …… mmHg
- **हृदय ध्वनि (Heart Sounds):** ☐ सामान्यः ☐ असामान्यः
- **स्वरः (Voice Examination):** ☐ स्थिरः ☐ दुर्बलः
- **नखाः (Nails):** ☐ पाण्डुर (Pale) ☐ नीलवर्णः (Bluish) ☐ सामान्यः
- **त्वचा (Skin):** ☐ शुष्क (Dry) ☐ स्निग्ध (Oily) ☐ सामान्यः

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७. दोष-दूष्य विचारः (Assessment of Doshas & Dhatus)

- **दोषाः (Dosha Involvement):**
  ☐ वातज हृद्रोगः (Vata-Type Cardiac Disease)
  ☐ पित्तज हृद्रोगः (Pitta-Type Cardiac Disease)
  ☐ कफज हृद्रोगः (Kapha-Type Cardiac Disease)
  ☐ त्रिदोषज हृद्रोगः (Mixed-Type Cardiac Disease)
- **धातुदुष्टिः (Affected Dhatus):**
  ☐ रसधातुः (Plasma)
  ☐ रक्तधातुः (Blood)
  ☐ मज्जाधातुः (Bone Marrow)

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८. निदानपरीक्षा (Diagnostic Investigations)

☐ रक्तपरीक्षा (Blood Tests - Lipid Profile, CBC)
☐ हृदयग्राम (ECG)
☐ हृदयप्रतिचित्रण (Echocardiogram)
☐ सी.टी. स्क्यान् / एम्.आर्.आइ. (CT/MRI Scan)
☐ अन्यः (Others): ……

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९. चिकित्साविधानम् (Treatment Plan in Ayurveda)

(A) औषध चिकित्सा (Herbal Treatment)

- **अर्जुनारिष्टम्** – 20ml दिनद्वयम्
- **पुनर्नवारिष्टम्** – 15ml जलसहितम्
- **सर्पगन्धा वटी** – 1 वटी रात्रौ
- **लक्ष्मण रस** – 125mg मधुना सह
- **हृदय वटी** – 1 वटी प्रातः सायं

(B) पथ्यापथ्य (Diet & Lifestyle Advice)

पथ्य (What to Eat)

✅ तक्र (Buttermilk)
✅ लघु सुपाच्य आहार (Easily Digestible Food)
✅ आंवला, द्राक्षा (Amla, Grapes)
✅ अर्जुन चूर्ण (Arjuna Bark Powder)
✅ घृतयुक्त आहार (Ghee-Based Foods)

अपथ्य (What to Avoid)

❌ तिक्त कटु आहार (Spicy, Bitter Foods)
❌ मांसाहारः (Heavy Non-Vegetarian Foods)
❌ मद्यपानम् (Alcohol)
❌ धूम्रपानम् (Smoking)

(C) विशेष चिकित्सा (Special Therapies)

- **नस्य चिकित्सा (Nasal Therapy):** ब्राह्मी घृत नस्य 2 बिंदु
- **स्वेदन (Steam Therapy):** तुलसी, अदरक जल से
- **शिरोधारा (Oil Therapy for Relaxation):** ब्राह्मी तेल
- **अभ्यंग (Oil Massage):** तिल तेल अभ्यंगम्

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१०. अनुसरणीय परामर्श (Follow-Up & Monitoring)

🗓️ **प्रथम पुनः परीक्षण (First Follow-Up):** 15 दिवसान्तरम् (15 Days)
🗓️ **द्वितीय पुनः परीक्षण (Second Follow-Up):** 1 मासान्तरम् (1 Month)

✅ **BP, Pulse, ECG पुनः परीक्षणम् आवश्यकम्**

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११. उपसंहार (Conclusion)

हृद्रोगः जटिल रोगः अस्ति, परंतु उचित पथ्य, औषध, योगाभ्यासेन च दीर्घायुः संभवति। रोगी यदि नियम पालनं करोति, उत्तम स्वास्थ्यं पुनः प्राप्तुम् शक्नोति।

📝 **TEAM APTA AYURVEDA**

Ayurvedic Case Study for Hridroga (Heart Disease)

रोगानुसन्धान प्रपत्रम् (Case History Report)

(हृद्रोगस्य विशेष विवेचनम् - Detailed Study of Heart Disease)

१. सामान्य विवरणम् (General Information)

- रोगिणः नाम (Patient Name): राममोहन शर्मा
- वयः (Age): 58 वर्षाणि
- लिङ्गम् (Gender): पुरुषः
- व्यवसायः (Occupation): सेवानिवृत्तः (Retired Employee)
- देशः (Residence/Region): उत्तर प्रदेश, भारत
- आगमन दिनाङ्कः (Date of Consultation): 22 मार्च 2025
- परामर्शकर्तारः (Referred by): स्थानीय चिकित्सकः

२. प्रधानं व्याधि लक्ष्मणानि (Chief Complaints)

☑ हृदयशूलः (Chest Pain) – गत 6 मासेभ्यः (Since 6 months)
☑ श्वासकष्टम् (Breathlessness) – विशेषतः श्रमकाले (Especially during exertion)
☑ गात्रसादः (Fatigue & Weakness)
☑ स्वेदाधिक्यं (Excessive Sweating)
☑ रात्रौ निद्राविघ्नः (Disturbed Sleep at Night)
☑ मनः क्लेशः (Mental Stress, Anxiety)

३. व्याधि वृत्तान्तः (History of Present Illness)

रोगः शनैः शनैः (Gradual Onset) आरब्धः। प्रारम्भे केवलं **श्रमानन्तरं श्वासकष्टम्, आलस्यं च** दृश्यते स्म। किन्तु गत 3 मासेभ्यः **हृदयशूलः, उच्च रक्तचापः (BP 150/95 mmHg)** च अभवत्।

2 सप्ताहे पूर्वं **हृदयग्राम परीक्षणे (ECG) "Ischemic Changes"** सूचिताः।

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४. अतीतानामय वृत्तान्तः (Past Medical History)

- **मधुमेहः (Diabetes) – 5 वर्षेभ्यः (Since 5 Years)**
- **उच्च रक्तचापः (Hypertension) – 7 वर्षेभ्यः (Since 7 Years)**
- **पूर्वं 2 वर्षेभ्यः लघु हृदयाघातः (Mild Heart Attack 2 years ago)**

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५. पारिवारिक वृत्तान्तः (Family History)

- **पिता (Father):** हृद्रोगेण मृत्युः (Death due to Heart Disease)
- **माता (Mother):** मधुमेहः (Diabetes History)

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६. दैहिक परिक्षण (Physical Examination)

- **नाडी परीक्षा (Pulse Examination): 78 प्रति निमेषम्, वात-पित्तप्रधानः**
- **शरीरभारः (Weight): 72 kg (पूर्वं 78 kg आसीत्)**
- **बी.पी. (Blood Pressure): 150/95 mmHg (उच्चतम् - High)**
- **हृदय ध्वनि (Heart Sounds): असामान्यः, मंद गालोपसर्पणम् (Murmur Present)**
- **स्वरः (Voice Examination): क्षीणः (Weak)**
- **त्वचा (Skin): शुष्कता (Dryness) एवं पाण्डुत्वम् (Pallor Present)**

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७. दोष-दूष्य विचारः (Assessment of Doshas & Dhatus)

- **दोषाः (Dosha Involvement):**
  - ✅ **वात-पित्तप्रधान हृद्रोगः (Vata-Pitta Type Cardiac Disease)**
- **धातुदुष्टिः (Affected Dhatus):**
  - ✅ **रसधातुः (Plasma)**
  - ✅ **रक्तधातुः (Blood)**
  - ✅ **मज्जाधातुः (Bone Marrow & Nerves)**
- **स्रोतसः (Affected Srotas - Channels):**
  - ✅ **प्राणवह स्रोतस (Respiratory System)**
  - ✅ **रक्तवाह स्रोतस (Cardiovascular System)**

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८. निदानपरीक्षा (Diagnostic Investigations)

📌 **हृदयग्राम (ECG):** Ischemic Changes

📌 **रक्तपरीक्षा (Blood Tests):**

- **Cholesterol (LDL):** 160 mg/dL (उच्चतम्)
- **Triglycerides:** 180 mg/dL
- **HbA1c:** 7.5% (Diabetes Control Poor)
  - 📌 **हृदयप्रतिचित्रण (Echocardiogram):** Mild Left Ventricular Hypertrophy
  - 📌 **BP Monitoring:** 150/95 mmHg

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९. चिकित्साविधानम् (Treatment Plan in Ayurveda)

(A) औषध चिकित्सा (Herbal Treatment)

- **अर्जुनारिष्टम्** – 20ml दिनद्वयम् (Heart Tonic)
- **पुनर्नवारिष्टम्** – 15ml जलसहितम् (Diuretic & Heart Rejuvenator)
- **सर्पगन्धा वटी** – 1 वटी रात्रौ (For Hypertension)
- **लक्ष्मण रस + प्रवाल पिष्टी** – 125mg मधुना सह (For Strength & Cardiac Support)
- **हृदय वटी** – 1 वटी प्रातः सायं

(B) पथ्यापथ्य (Diet & Lifestyle Advice)

पथ्य (What to Eat)

✅ लघु सुपाच्य आहार (Easily Digestible Foods)
✅ आंवला, द्राक्षा, अनार (Amla, Grapes, Pomegranate)
✅ अर्जुन चूर्ण 3g मधुना सह (Arjuna Bark Powder with Honey)
✅ तक्र (Buttermilk)
✅ नारिकेल जल (Coconut Water)

अपथ्य (What to Avoid)

❌ मधुर-गुरु आहार (Heavy & Sweet Foods)
❌ तैलयुक्त खाद्य पदार्थ (Oily & Fried Foods)
❌ मांसाहारः (Heavy Non-Vegetarian Foods)
❌ मद्यपानम् (Alcohol)
❌ धूम्रपानम् (Smoking)

(C) विशेष चिकित्सा (Special Therapies)

- **नस्य चिकित्सा (Nasal Therapy):** ब्राह्मी घृत नस्य 2 बिंदु
- **स्वेदन (Steam Therapy):** तुलसी, अदरक जल से
- **शिरोधारा (Oil Therapy for Relaxation):** ब्राह्मी तेल
- **अभ्यंग (Oil Massage):** तिल तेल अभ्यंगम्

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१०. अनुसरणीय परामर्श (Follow-Up & Monitoring)

🗓️ प्रथम पुनः परीक्षण (First Follow-Up): 15 दिवसान्तरम् (15 Days)
🗓️ द्वितीय पुनः परीक्षण (Second Follow-Up): 1 मासान्तरम् (1 Month)

✅ BP, Pulse, ECG पुनः परीक्षणम् आवश्यकम्

११. उपसंहार (Conclusion)

हृद्रोगः जटिलः किन्तु उचित **आयुर्वेदिक चिकित्सा, पथ्य पालनम्, योगाभ्यासेन च** दीर्घायुः संभवः। रोगी यदि नियम पालनं करोति, उत्तम स्वास्थ्यं पुनः प्राप्तुम् शक्नोति।

Comparison of Ayurvedic & Modern Treatment for Hridroga (Heart Disease)

Category	Ayurvedic Treatment 🏺	Modern Treatment 💉
Concept of Disease	Hridroga occurs due to **Dosha imbalance (Vata-Pitta-Kapha), Srotas Dushti (blocked heart channels), Ojas depletion, and Ama (toxins)**.	Heart diseases are caused by **atherosclerosis (plaque buildup), hypertension, diabetes, obesity, and genetic factors**.
Diagnosis Methods	**Nadi Pariksha (Pulse Diagnosis), Srotas Examination, Prakriti Analysis, Agni Assessment**	**ECG, Echocardiogram, Angiography, Lipid Profile, Stress Test, CT/MRI Scan**
Primary Medicines	✅ **Arjunarishta** (Cardio-protective) ✅ **Punarnavasava** (Diuretic) ✅ **Sarpagandha Vati** (For BP) ✅ **Lashunadi Vati** (Lipid Control) ✅ **Mukta Pishti & Praval Pishti** (Cooling effect for BP & Anxiety)	✅ **Aspirin** (Blood thinner) ✅ **Statins (Atorvastatin, Rosuvastatin)** (Cholesterol Control) ✅ **Beta Blockers (Metoprolol, Atenolol)** (Heart Rate Control) ✅ **ACE Inhibitors (Ramipril, Enalapril)** (BP Control)
Acute Treatment (Heart Attack, Angina)	🚑 **Sudden Heart Pain**: Arjuna Kwath with Honey, Ghee with Shankha Bhasma, Hirak Bhasma for Cardiac Shock	🚑 **Emergency Angioplasty, Thrombolysis (Clot-busting drugs like Streptokinase), Oxygen Therapy, Painkillers (Morphine)**
Surgical Interventions	**Leech Therapy (Jalaukavacharana) for Hypertension**, Basti (Oil Enema for Vata Imbalance)	**Angioplasty, Stents, Bypass Surgery (CABG), Pacemaker Implantation**
Dietary Recommendations	✅ **Amla, Garlic, Pomegranate, Arjuna Powder, Ghee in Moderation** ❌ Avoid **Spicy, Oily, Junk Foods, Excess Salt, Red Meat**	✅ **Low-Salt, Low-Fat Diet (DASH Diet, Mediterranean Diet)** ❌ Avoid **Saturated Fats, Processed Foods, Sugary Drinks**
Lifestyle Modifications	🧘 **Yoga (Pranayama, Anulom-Vilom, Surya Namaskar)** 🚶 **Daily Walking** 🛌 **Proper Sleep & Stress Management (Shirodhara, Meditation)**	🚴 **Cardiac Rehabilitation, Gym Exercises** 🚫 **Smoking & Alcohol Cessation** 🛌 **Sleep Therapy**
Side Effects & Risks	**No major side effects if taken properly**, herbs work gradually but improve long-term health.	**Drug dependency, liver & kidney damage, side effects like dizziness, fatigue, muscle pain**
Long-Term Management	🌿 **Rasayana Therapy (Rejuvenation) – Ashwagandha, Brahmi, Shatavari for stress & heart health**	💊 **Life-long medication for BP, cholesterol, diabetes, risk of secondary heart attacks**

case history format for **Panduroga (Anemia) & Kamala (Jaundice)**

रोगीवृत्तान्तम् (Patient Demographics)

1. **नाम (Name):**
2. **लिङ्ग (Gender):**
3. **वयः (Age):**
4. **जातिः (Caste/Community, if relevant):**
5. **व्यवसायः (Occupation):**
6. **आवासः (Address/Residence):**
7. **आगमन तिथि (Date of Consultation):**
8. **मुख्यप्रदाह (Chief Complaints - मुख्य लक्षणानि):**
9. **रोगकालः (Duration of Illness):**
10. **पूर्वरोगवृत्तान्तः (Past Medical History):**
11. **औषधसेवनवृत्तान्तः (History of Medication):**

व्याधिवृत्तान्तः (Disease History)

(1) पाण्डुरोगः (Panduroga - Anemia)

📌 **मुख्यलक्षणानि (Chief Symptoms)**

- त्वचा, नेत्र, नख, ओष्ठेषु पाण्डुत्वम् (Paleness of skin, eyes, nails, lips)
- बलक्षयः (Weakness & Fatigue)
- श्वासशोषः (Dyspnea/Breathlessness)
- हृद् स्पन्दनम् (Palpitation)
- अरुचिः (Loss of Appetite)
- चर्मरुक्षता (Dry Skin)
- शीतसहिष्णुता (Cold Intolerance)
- स्वेदः न्यूनता वा अधिकता (Altered Sweating)

📌 हेतुविचारः (Etiology - Causes)

- गुरु, अत्युष्ण, रूक्ष, अपथ्य आहार सेवनम् (Heavy, hot, dry, unwholesome diet)
- रक्तक्षयः (Blood Loss – Injury, Surgery, Menorrhagia)
- अतिव्यायामः (Excessive Physical Activity)
- अतिनिद्रा / निद्राभावः (Excess or Lack of Sleep)
- क्रोध, शोक, मानसिक क्लेश (Emotional Stress)

📌 रोगोत्पत्तिक्रमः (Pathogenesis)

- रक्तक्षय → धातुक्षय → वातप्रकोपः → पाण्डुत्वम्
  (Depletion of Rakta Dhatu leads to vitiation of Vata, causing pallor & weakness)

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(2) कामला (Kamala - Jaundice)

📌 मुख्यलक्षणानि (Chief Symptoms)

- नेत्र, नख, त्वचा, मूत्रे पीतवर्णता (Yellowish discoloration of eyes, nails, skin, and urine)
- जठरशूल (Abdominal Pain)
- अरुचिः (Loss of Appetite)
- दाह (Burning Sensation)
- क्लमः (Fatigue)
- अतिसारः वा विबन्धः (Diarrhea or Constipation)
- मूत्रे ताम्रवर्णता (Copper-colored Urine)
- अंगमर्दः (Body Ache)

📌 हेतुविचारः (Etiology - Causes)

- मध्यम मांस भक्षण (Excessive Meat Consumption)
- मद्यपानम् (Alcohol Consumption)
- अपथ्य आहार (Incompatible Diet)
- पाण्डु अनुतिष्ठति चेत कामलायाम् (If Pandu remains untreated, it progresses to Kamala)

📌 **रोगोत्पत्तिक्रमः (Pathogenesis)**

- पित्तप्रकोपः → रक्तविकारः → यकृतदुष्टि → पीतवर्णता
  (Aggravated Pitta affects Rakta & Liver, leading to jaundice)

सर्वाङ्ग परीक्षाः (General Examination)

1. **दृष्टिपरीक्षा (Inspection)** – पाण्डुत्व / पीतवर्णता
2. **स्पर्शनपरीक्षा (Palpation)** – यकृत प्लीहा वृध्दि (Liver/Spleen Enlargement)
3. **नाड़ी परीक्षा (Pulse Examination)** – वातपित्त प्रधाना नाड़ी
4. **मूत्र परीक्षा (Urine Examination)** – पाण्डु / हरिद्र वर्ण मूत्रम्
5. **मल परीक्षा (Stool Examination)** – हरिद्र वर्ण, आमदोषयुक्त

चिकित्सा (Treatment Principles)

(1) पाण्डुरोग चिकित्सा (Panduroga Chikitsa)

- **आहार (Diet):** द्राक्षा, आमलकी, लोहतिक्त रसयुक्त आहार
- **औषध (Medicines):**
  - लौहभस्म
  - पुनर्नवा मंडूर
  - नवायस लौह
  - अश्वगंधा
- **पञ्चकर्म (Detoxification):** रक्तमोक्षण (Bloodletting)

(2) कामला चिकित्सा (Kamala Chikitsa)

- **आहार (Diet):** तक्र, मूंगसूप, कोकम
- **औषध (Medicines):**
  - भूम्यामलकी
  - भृङ्गराज रस
  - आरोग्यवर्धिनी वटी
  - कुमार्यासव
- **पञ्चकर्म (Detoxification):** विरेचन (Purgation Therapy)

Detailed case report of a patient suffering from Panduroga (Anemia) and Kamala (Jaundice) in Ayurveda.

रोगीवृत्तान्तम् (Patient Demographics)

1. **नाम (Name):** रामकुमार शर्मा
2. **लिङ्ग (Gender):** पुरुष (Male)
3. **वयः (Age):** ३५ वर्ष (35 Years)
4. **जातिः (Caste/Community):** ब्राह्मण
5. **व्यवसायः (Occupation):** अध्यापक (Teacher)
6. **आवासः (Address/Residence):** वाराणसी, उत्तरप्रदेश
7. **आगमन तिथि (Date of Consultation):** २० मार्च २०२५
8. **मुख्यप्रदाह (Chief Complaints - मुख्य लक्षणानि):**
    - त्वचा, नेत्र, नख, ओष्ठेषु पाण्डुत्वम् (Paleness of skin, eyes, nails, lips)
    - कमजोरी (Weakness & Fatigue)
    - अरुचिः (Loss of Appetite)
    - मूत्रे पीतवर्णता (Yellowish Urine)
    - जठरशूल (Abdominal Pain)
9. **रोगकालः (Duration of Illness):** २ मास (2 Months)
10. **पूर्वरोगवृत्तान्तः (Past Medical History):**
    - २ वर्ष पूर्व रक्तक्षयजन्य पाण्डुरोग निदान (Diagnosed with Anemia 2 Years Ago)
    - बारम्बार पाचन समस्या (Frequent Digestive Issues)
11. **औषधसेवनवृत्तान्तः (History of Medication):**
    - आयरन टॉनिक सेवन (Iron Supplement)
    - बिना लाभे एलोपैथिक उपचार (No Relief from Allopathic Treatment)

व्याधिवृत्तान्तः (Disease History)

📌 **मुख्यलक्षणानि (Chief Symptoms)**

- प्रारंभ में **शरीर दुर्बलता, त्वचा पाण्डुत्वम्, अरुचिः**
- बाद में **मूत्रे पीतवर्णता, जठरशूल, आमाशय दाह, शरीर क्लम**
- वर्तमान में **सामान्य कार्यों में भी थकावट, भूख में अत्यधिक कमी**

📌 **हेतुविचारः (Etiology - Causes)**

- **गुरु, रूक्ष, दुष्ट आहार सेवनम्** (Unhealthy, heavy, dry food intake)
- **अल्पजीर्णता, वातपित्तवृद्धि** (Weak digestion, increased Vata-Pitta)
- **रक्तक्षयः → यकृत दुष्टि** (Blood Deficiency leading to Liver Dysfunction)

📌 **रोगोत्पत्तिक्रमः (Pathogenesis)**

- **रक्तक्षयजन्य पाण्डु → पित्तप्रकोप → यकृत दूषण → कामला**

सर्वाङ्ग परीक्षाः (General Examination)

1. **दृष्टिपरीक्षा (Inspection):**
   - त्वचा, नेत्र, नख, ओष्ठेषु पाण्डुत्वम्
   - पीतवर्ण मूत्र
2. **स्पर्शनपरीक्षा (Palpation):**
   - यकृत वर्धित (Enlarged Liver)
3. **नाड़ी परीक्षा (Pulse Examination):**
   - वात-पित्तप्रधाना नाड़ी
4. **मूत्र परीक्षा (Urine Examination):**
   - पीतवर्ण मूत्र, गंधयुक्त
5. **मल परीक्षा (Stool Examination):**
   - हरिद्र वर्ण, अल्पाम

चिकित्सा (Treatment Plan)

(1) पाण्डुरोग चिकित्सा (Anemia Treatment)

📌 **औषध (Medicines):**

- **लौहभस्म 250mg** – मधु व आमलकी रस सहित
- **पुनर्नवा मंडूर 2 टैबलेट** – दिन में २ बार
- **अश्वगंधा चूर्ण ३ ग्राम** – दूध के साथ

📌 **आहार (Diet):**

- **द्राक्षा, आमलकी, पालक, शतावरी**
- **लघु, सुपाच्य आहार**

📌 **पञ्चकर्म (Detoxification):**

- **रक्तमोक्षण (Bloodletting) – १ बार / सप्ताह**

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(2) कामला चिकित्सा (Jaundice Treatment)

📌 **औषध (Medicines):**

- **भृङ्गराज रस** – १ गोली दिन में २ बार
- **आरोग्यवर्धिनी वटी २ टैबलेट** – दिन में २ बार
- **कुमार्यासव २०ml** – भोजन के बाद

📌 **आहार (Diet):**

- **कच्चा नारियल पानी, मूंगसूप, कोकम रस**
- **भोजन में मसाले रहित हल्का आहार**

📌 **पञ्चकर्म (Detoxification):**

- **विरेचन (Purgation Therapy) – त्रिवृत लेह्यम्**

अनुसरणीय (Follow-Up & Prognosis)

📌 **१ सप्ताह पश्चात (After 1 Week):**

- त्वचा पीतवर्णता न्यून
- भूख में वृद्धि
- बल व ओज में वृद्धि

📌 **२ सप्ताह पश्चात (After 2 Weeks):**

- सामान्य दिनचर्या में सुधार
- नाड़ी सामान्य
- यकृत सूजन न्यून

📌 **१ मास पश्चात (After 1 Month):**

- लक्षणों में ८०% सुधार
- सामान्य आहार ग्रहण

निष्कर्ष (Conclusion)

✅ **पाण्डुरोग एवं कामला दोनों में संतुलित वात-पित्त चिकित्सा आवश्यक**
✅ **औषध, आहार व पञ्चकर्म से रोगनाश संभव**
✅ **रक्तस्रावजन्य रोगों में लौह व पुनर्नवा उपयोगी**
✅ **यकृत विकार हेतु आरोग्यवर्धिनी व कुमार्यासव प्रभावी**

Comparison of Ayurvedic & Modern Treatment for Panduroga (Anemia) & Kamala (Jaundice)

Aspect	Ayurvedic Treatment 🏺	Modern Treatment 💉
Cause Analysis	*Dosha Imbalance* (Pitta & Vata in Kamala, Pitta & Kapha in Pandu), Dhatu Kshaya (Tissue depletion), Agni Mandya (Digestive weakness)	*Nutritional Deficiency, Liver Dysfunction, Hemolysis, Hepatitis, Alcoholic Liver Disease*
Diagnosis	Nadi Pariksha, Mutra Pariksha, Mala Pariksha, Darshana (Inspection)	Blood Tests (CBC, Liver Function Test, Bilirubin, Reticulocyte Count, Peripheral Smear)
Primary Medicines	**Panduroga:** *Lauh Bhasma, Punarnava Mandura, Navayas Lauh, Ashwagandha* **Kamala:** *Bhringraj Ras, Arogyavardhini Vati, Bhumi Amla, Kumarasava*	**Panduroga:** *Iron supplements (Ferrous sulfate), Vitamin B12, Folic Acid* **Kamala:** *Hepatoprotective drugs (Liv.52 in Ayurveda, Ursodeoxycholic Acid in Modern), Antivirals for Hepatitis, Supportive therapy*
Detoxification (Shodhana)	**Panduroga:** *Raktamokshana (Bloodletting)* **Kamala:** *Virechana (Purgation Therapy with Trivrit Lehya, Avipattikar Churna)*	No direct detox therapy, only blood transfusions if severe anemia or hemolysis
Dietary Recommendations	**Panduroga:** *Iron-rich foods (Amalaki, Black Raisins, Pomegranate), Milk, Ghee, Easily Digestible Foods* **Kamala:** *Bitter Foods (Bhumi Amla, Neem, Kutki), Coconut Water, Moong Soup*	**Panduroga:** *Iron-fortified foods, Red meat, Green Leafy Vegetables* **Kamala:** *Low-fat Diet, Hydration, Avoid Alcohol & Heavy Foods*
Lifestyle Advice	Daily Abhyanga (Oil Massage), Yoga (Pranayama, Surya Namaskar), Stress Management, Regular Fasting for Digestion Improvement	Avoid Alcohol, Rest, Hydration, Regular Monitoring of Liver Enzymes
Side Effects / Risks	Minimal when taken as prescribed, long-term use of metals (Lauh Bhasma) requires careful dosage	**Iron Therapy** – Constipation, Stomach Irritation, Dark Stools **Liver Medicines** – Side effects depending on drugs used

Aspect	Ayurvedic Treatment 🏺	Modern Treatment 💉
Long-Term Outcome	**Holistic Improvement**, Strengthens Digestion & Liver, Rejuvenates Dhatus	**Symptomatic Relief**, Nutritional Balance, Liver Recovery in Mild Cases
Emergency Care	**Severe Cases:** Panchakarma Therapies, Rasayana (Rejuvenation)	**Severe Cases:** Blood Transfusion, ICU Support in Liver Failure

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Key Takeaways

- **Ayurveda** focuses on **root cause elimination** (Dosha balance, Agni improvement, liver detox)
- **Modern Medicine** provides **quick relief** but does not fully address long-term dosha imbalance
- Combination of **diet, lifestyle changes, and herbs** in Ayurveda can be more **sustainable** for chronic conditions

Case history taking for Vatavyadhi

Case History Taking of Vatavyadhi in Ayurveda

1. Demographic Details

- **Name:**
- **Age:**
- **Gender:**
- **Occupation:**
- **Address:**
- **Marital Status:**
- **Socioeconomic Status:**
- **Date of Examination:**

---

2. Chief Complaints (Lakshana of Vatavyadhi)

- **Nature of pain:** (e.g., shooting, pricking, radiating, dull ache)
- **Stiffness (Stambha):** Present/Absent
- **Numbness (Suptata):** Present/Absent
- **Tingling Sensation (Toda):** Present/Absent
- **Weakness (Dourbalya):** Present/Absent
- **Deformity:** Present/Absent
- **Tremors (Kampa):** Present/Absent
- **Speech Impairment (Vak Stambha):** Present/Absent

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3. History of Present Illness (Nidana Panchaka)

- **Nidana (Causative Factors)**
  - Excessive intake of dry, cold, light foods
  - Excessive physical exertion
  - Irregular sleep patterns
  - Suppression of natural urges (Vega Dharana)
  - Trauma/Injury
  - Stress and mental factors

- **Samprapti (Pathogenesis) Analysis**
  - Dosha Involvement: Vata (Pradhana), with possible Kapha or Pitta association
  - Dushya (Affected Tissues): Rasa, Rakta, Mamsa, Asthi, Majja
  - Srotas Involvement: Asthivaha, Majjavaha, Mamsavaha
  - Sthana Samshraya: Joints, nerves, muscles, spine
  - Udbhava Sthana: Pakvashaya (Large Intestine)

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4. Past Medical & Surgical History

- Previous illnesses (Diabetes, Hypertension, Neuropathy, Arthritis)
- Any history of fractures or surgeries

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5. Family History

- Any family members with similar conditions
- Hereditary predispositions

---

6. Diet & Lifestyle History

- **Dietary habits:** (Rooksha, Laghu, Guru, Sheeta food intake)
- **Bowel habits:** (Constipation, irregularity)
- **Sleep pattern:** (Insomnia, disturbed sleep)
- **Physical activity level:** (Sedentary, excessive exertion)

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7. Examination (Rogi Pareeksha)

Dashavidha Pareeksha

1. **Prakriti (Body Constitution):** Vata, Pitta, Kapha, or combination
2. **Vikriti (Pathological State):** Vata vitiation symptoms
3. **Sara (Tissue Quality):** Asthi, Majja, Mamsa
4. **Samhanana (Body Build):** Thin, muscular, obese
5. **Pramana (Measurements):** Height, weight, BMI
6. **Satmya (Adaptability):** Dietary preferences and adaptability
7. **Satva (Mental Strength):** Stress levels, anxiety
8. **Aharashakti (Digestive Capacity):** Appetite, bowel regularity
9. **Vyayamashakti (Exercise Tolerance):** Strength and endurance
10. **Vaya (Age):** Childhood, adulthood, old age

Ashtavidha Pareeksha (Eightfold Examination)

1. **Nadi (Pulse):** Vata-predominant (irregular, thin, fast)
2. **Mala (Stool):** Constipation, dryness
3. **Mutra (Urine):** Scanty, frequent urination
4. **Jihva (Tongue):** Dry, cracked, coated
5. **Shabda (Voice):** Hoarseness, weak voice
6. **Sparsha (Skin Texture):** Dry, rough, cold
7. **Drik (Eyes):** Dryness, dullness
8. **Akruti (Overall Appearance):** Lean, emaciated

8. Differential Diagnosis (Ayurvedic Perspective)

- Pakshaghata (Paralysis)
- Gridhrasi (Sciatica)
- Sandhivata (Osteoarthritis)
- Aamvata (Rheumatoid Arthritis)
- Katigata Vata (Lumbar Spondylosis)
- Avabahuka (Frozen Shoulder)

Detailed Case Study of Vatavyadhi

(Sciatica - Gridhrasi)

1. Patient Demographic Details

- **Name:** Mr. Ramesh Sharma
- **Age:** 45 years
- **Gender:** Male
- **Occupation:** Office worker (sedentary lifestyle)
- **Address:** Pune, Maharashtra, India
- **Marital Status:** Married
- **Socioeconomic Status:** Middle class
- **Date of Examination:** 23rd March 2025

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2. Chief Complaints (Pradhana Lakshana)

1. **Pain:** Radiating pain from the lower back to the right leg for the past 6 months
2. **Stiffness:** Morning stiffness in the lower back and legs
3. **Numbness:** Intermittent tingling and numbness in the right leg
4. **Weakness:** Difficulty in prolonged standing or walking
5. **Aggravation:** Worse in cold weather and after sitting for long hours

---

3. History of Present Illness (Nidana Panchaka Analysis)

- **Nidana (Causative Factors)**
  - **Dietary habits:** Excessive intake of dry, cold, and spicy food
  - **Lifestyle:** Long sitting hours due to office work, lack of physical activity
  - **Suppression of natural urges:** Irregular bowel movements and constipation
  - **Excessive stress and anxiety**
  - **Exposure to cold weather**
  - **Lifting heavy weights improperly**

- **Samprapti (Pathogenesis)**
  - **Dosha:** Vata Pradhana
  - **Dushya:** Asthi (Bones), Majja (Nervous tissue), Mamsa (Muscles)
  - **Srotas:** Asthivaha, Majjavaha, Mamsavaha
  - **Sthana Samshraya:** Lumbar spine, sciatic nerve
  - **Udbhava Sthana:** Pakvashaya (Large Intestine)
  - **Vyakta Sthana:** Lower back and right leg

- **Chikitsa Sthana:** Primarily Vatavyadhi chikitsa

---

4. Past Medical & Surgical History

- **Previous Illnesses:** Chronic constipation, occasional acidity
- **No history of fractures or surgeries**

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5. Family History

- **Father:** Hypertension and knee osteoarthritis
- **Mother:** History of lower back pain

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6. Diet & Lifestyle History

- **Diet:**
  - Preference for dry, fried, and spicy food
  - Irregular meal timings
- **Bowel Movements:**
  - Constipation present
- **Sleep Pattern:**
  - Difficulty in falling asleep, disturbed sleep
- **Physical Activity Level:**
  - Sedentary job, minimal physical exercise
- **Mental Health:**
  - Increased stress due to work pressure

---

7. Examination (Rogi Pareeksha)

A. Dashavidha Pareeksha

1. **Prakriti:** Vata-Pitta
2. **Vikriti:** Vata-aggravation with Asthi-Majja Dushti
3. **Sara:** Medium muscle and bone strength
4. **Samhanana:** Moderate body build
5. **Pramana:** Height - 5’7’’, Weight - 65 kg
6. **Satmya:** Adapted to vegetarian diet
7. **Satva:** Moderate mental strength, experiences stress easily
8. **Aharashakti:** Irregular digestive strength
9. **Vyayamashakti:** Poor exercise tolerance
10. **Vaya:** Middle age (45 years)

B. Ashtavidha Pareeksha

1. **Nadi (Pulse):** Vata-Pitta predominant (thin, fast, irregular)
2. **Mala (Stool):** Dry, hard stools, constipation
3. **Mutra (Urine):** Normal but slightly reduced frequency
4. **Jihva (Tongue):** Dry with a slight white coating
5. **Shabda (Voice):** Normal
6. **Sparsha (Skin Texture):** Dry, rough
7. **Drik (Eyes):** Normal, slightly tired-looking
8. **Akruti (Overall Appearance):** Lean, signs of fatigue

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8. Differential Diagnosis

- **Gridhrasi (Sciatica - Vatavyadhi)**
- **Katigata Vata (Lumbar Spondylosis)**
- **Sandhivata (Osteoarthritis of the lumbar spine)**
- **Aamvata (Rheumatoid Arthritis if inflammation is present)**

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9. Investigations & Modern Diagnosis

Modern Investigations Ordered:

- X-ray of the lumbar spine → Mild disc degeneration seen
- MRI → Disc bulge at L4-L5 pressing on the right sciatic nerve
- Blood Tests: Normal

Final Modern Diagnosis:

- **Sciatica due to L4-L5 Disc Bulge**

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10. Ayurvedic Treatment Plan

A. Shamana Chikitsa (Palliative Therapy)

1. **Medications**
    - **Dashmoolarishta** – 20ml twice daily
    - **Maharasnadi Kwath** – 20ml twice daily
    - **Yogaraj Guggulu** – 2 tablets twice daily
    - **Eranda Taila** – 10ml at bedtime for constipation
    - **Ashwagandha Churna** – 5g with milk at night
2. **Dietary Modifications**
    - Warm, moist, nourishing food
    - Avoid dry, cold, and stale food
    - Increase ghee and sesame oil in the diet
    - Drink warm water frequently
3. **Lifestyle Advice**
    - Daily oil massage (Abhyanga) with **Mahanarayana Taila**
    - Avoid cold exposure
    - Gentle stretching exercises
    - Regular sleep schedule

B. Panchakarma Therapy (Detoxification Therapy)

1. **Abhyanga (Oil Massage):** Mahanarayana Taila massage for 15 mins
2. **Swedana (Steam Therapy):** Local steam to lower back and legs
3. **Basti (Medicated Enema):**
    - **Anuvasana Basti** – Dashmoola Taila enema for 7 days
    - **Niruha Basti** – Dashmoola Kwatha Basti for 7 days

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11. Modern Treatment Comparison

Aspect	Ayurvedic Treatment	Modern Treatment
Principle	Vata Shamana, Srotoshodhana, Balya	Pain relief, inflammation control
Medications	- Dashmoolarishta, Yogaraj Guggulu, Maharasnadi Kwath - Ashwagandha, Gokshura, Bala	- NSAIDs (Ibuprofen, Diclofenac) - Steroids (in severe cases)
Panchakarma	- Abhyanga (Oil Massage) - Swedana (Steam Therapy) - Basti (Medicated Enema)	- Physiotherapy - Epidural Injections
Surgical Options	- Not required, managed with therapies	- In severe cases: Microdiscectomy, Laminectomy
Prognosis	- Good if managed with regular therapies and diet	- Good with pain management, but recurrence possible

12. Follow-Up & Prognosis

- **After 1 month of treatment:**
  - **Pain reduced by 60%**
  - **Stiffness reduced significantly**
  - **Bowel movements improved**
  - **Better sleep quality**
- **Long-term management:** Regular diet, lifestyle corrections, and seasonal Panchakarma therapy to prevent recurrence.

Comparison of Ayurvedic and Modern Treatment of Vatavyadhi (Sciatica - Gridhrasi)

Aspect	Ayurvedic Treatment	Modern Treatment
Principle	Vata Shamana, Srotoshodhana, Balya	Pain relief, inflammation control
Medications	- Dashmoolarishta, Yogaraj Guggulu, Maharasnadi Kwath - Ashwagandha, Gokshura, Bala	- NSAIDs (Ibuprofen, Diclofenac) - Steroids (in severe cases)
Panchakarma	- Abhyanga (Oil Massage) - Swedana (Steam Therapy) - Basti (Medicated Enema) - Agnikarma (Thermal Therapy)	- Physiotherapy - Epidural Injections
Dietary Changes	- Warm, unctuous, nourishing food - Avoid dry, cold, and stale food	No specific diet recommendations
Lifestyle Changes	- Yoga, stretching exercises - Regular oil massage - Avoid cold exposure	- Physical therapy - Postural corrections
Surgical Options	- Not required, managed with therapies	- In severe cases: Microdiscectomy, Laminectomy
Prognosis	- Good if managed with regular therapies and diet	- Good with pain management, but recurrence possible

Case History Taking of Vatarakta in Ayurveda

1. Demographic Details

- **Name:** [Patient's Name]
- **Age:** [Patient's Age]
- **Gender:** Male/Female
- **Address:** [Patient's Location]
- **Occupation:** [Patient's Job]
- **Marital Status:** Married/Unmarried
- **Socioeconomic Status:** Low/Middle/High

2. Chief Complaints (Pradhana Vedana)

- Pain in joints (especially small joints) – **Sandhi Shoola**
- Swelling (Shotha)
- Burning sensation (Daha)
- Redness (Raga)
- Numbness or tingling sensation (Suptata)

3. History of Present Illness (Pūrva Rupa and Rupa)

- **Onset:** Sudden/Gradual
- **Duration:** Since when symptoms started
- **Progression:** Increasing/Decreasing
- **Aggravating Factors:** Cold weather, night time, certain foods (e.g., sour, fermented, non-vegetarian food), stress
- **Relieving Factors:** Rest, warm therapy, certain herbal decoctions

4. Past History (Poorva Vyadhi)

- Previous history of joint-related diseases
- Any history of metabolic disorders (Diabetes, Hypertension)
- History of skin conditions like eczema, psoriasis
- Chronic constipation (Purisha Vega Dharana)

5. Family History (Kutumba Anuvanshika Vikaras)

- Family history of gout, rheumatoid arthritis, psoriasis
- Any history of autoimmune disorders

6. Dietary History (Ahara Vihara)

- Excessive intake of salty, sour, fermented, and spicy foods
- Excessive alcohol intake
- Low intake of fresh vegetables and fruits
- Sedentary lifestyle and lack of exercise

7. Personal History (Vyaktigata Visheshataha)

- Appetite (Agnibala) – Normal/Increased/Decreased
- Digestion (Jatharagni) – Good/Indigestion (Ajirna)
- Bowel habits (Mala) – Constipation/Regular
- Urine (Mutra Pravritti) – Normal/Increased/Decreased
- Sleep (Nidra) – Sound/Disturbed
- Stress level (Manasika Bhava) – High/Low

8. Examination (Roga Pareeksha & Rogi Pareeksha)

A. Dashavidha Pareeksha (Tenfold Examination)

1. **Prakriti (Constitution):** Vata-Pitta dominance
2. **Vikriti (Pathological State):** Vatarakta (Gouty Arthritis)
3. **Sara (Tissue Quality):** Mamsa and Asthi (muscle & bone affected)
4. **Samhanana (Body Build):** Medium/Obese
5. **Pramana (Measurement of Body Parts):** As per Ayurvedic norms
6. **Satmya (Compatibility to Food & Lifestyle):** Habitual of oily/spicy food
7. **Satva (Mental Strength):** Moderate/Weak
8. **Aharashakti (Digestive Strength):** Low appetite due to Mandagni
9. **Vyayamashakti (Exercise Tolerance):** Poor due to joint pain
10. **Vaya (Age):** Middle-aged/Old

B. Ashta Sthana Pareeksha (Eightfold Examination)

1. **Nadi (Pulse):** Vata-Pitta imbalance
2. **Mala (Stool):** Hard, constipation present
3. **Mutra (Urine):** Dark yellow, reduced output
4. **Jihva (Tongue):** Coated, dryness observed
5. **Shabda (Voice):** Normal or slightly hoarse
6. **Sparsha (Skin Texture):** Dry, rough, hot to touch
7. **Drik (Eyes):** Redness present
8. **Akruti (Body Appearance):** Swollen joints, stiff fingers

9. Diagnosis (Nidana Panchaka)

- **Nidana (Etiology):** Overconsumption of incompatible food (Viruddha Ahara), alcohol, excessive sitting, and stress
- **Purvarupa (Premonitory Symptoms):** Heaviness in joints, mild stiffness
- **Rupa (Symptoms):** Severe pain, swelling, redness
- **Upashaya (Relieving Factors):** Warm applications, herbal medicines
- **Samprapti (Pathogenesis):**
  - Vata gets vitiated and combines with Rakta
  - It accumulates in small joints, causing pain and inflammation

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Example Case Study

Patient Details:

- **Name:** Mr. X
- **Age:** 45 years
- **Gender:** Male
- **Occupation:** Office worker
- **Complaints:** Pain, swelling, and burning sensation in big toe for 2 months
- **History:** Excessive consumption of alcohol and fried foods

Ayurvedic Treatment Approach

- **Shodhana Chikitsa (Detoxification)**
  - Raktamokshana (Bloodletting) using leech therapy
  - Virechana (Purgation therapy) with Avipattikar Churna
- **Shamana Chikitsa (Palliative Therapy)**
  - Guggulu-based formulations like Kaishore Guggulu
  - Guduchi (Tinospora cordifolia) for detoxification
  - Triphala Kwatha for constipation
  - Mahamanjishthadi Kwatha for blood purification
- **Pathya Apathya (Diet & Lifestyle Recommendations)**
  - Avoid sour, fermented, and non-vegetarian food
  - Include barley, green gram, and bottle gourd in diet
  - Daily warm oil massage with Dashmoola Taila
  - Moderate walking and yoga

Comparison of Ayurvedic and Modern Treatment

Aspect	Ayurveda Treatment	Modern Treatment (Allopathy)
Concept of Disease	Vitiation of Vata and Rakta	Uric acid deposition in joints
Diagnosis	Nadi Pariksha, Ashtavidha Pariksha	Blood test (Serum Uric Acid), X-ray
Detoxification	Virechana, Raktamokshana	None
Herbal Medication	Kaishore Guggulu, Guduchi, Triphala	NSAIDs (Ibuprofen), Colchicine
Pain Management	Swedana (Sudation), Lepas (Herbal pastes)	Painkillers, steroids
Dietary Restrictions	Avoid sour, fermented, heavy food	Low purine diet
Lifestyle Modification	Yoga, oil massage, warm water bath	Exercise, avoiding alcohol
Side Effects	Minimal, if properly administered	Gastrointestinal issues, kidney damage with long-term NSAID use

Case Study of Vatarakta (Gouty Arthritis)

1. Patient Demographics

- **Name:** Mr. Rajesh Sharma
- **Age:** 48 years
- **Gender:** Male
- **Address:** Mumbai, India
- **Occupation:** IT Professional (Sedentary lifestyle)
- **Marital Status:** Married
- **Socioeconomic Status:** Middle class

---

2. Chief Complaints (Pradhana Vedana)

- **Severe pain** in the right big toe joint (Mahasandhi) – **Sandhi Shoola**
- **Swelling and redness** in the affected joint – **Shotha and Raga**
- **Burning sensation** in the joint – **Daha**
- **Stiffness in joints**, especially in the morning – **Stambha**
- **Recurrent episodes** of pain over the last 6 months

---

3. History of Present Illness (Pūrva Rupa and Rupa)

- **Onset:** Gradual over the last 6 months
- **Duration:** Pain episodes lasting 3-4 days per attack
- **Progression:** Increased frequency of attacks in the last 2 months
- **Aggravating Factors:**
  - Nighttime and cold weather
  - Consumption of non-vegetarian food, alcohol, and fried foods
  - Prolonged sitting
- **Relieving Factors:**
  - Warm oil massage (Abhyanga)
  - Herbal decoctions
  - Application of warm cloth

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4. Past History (Poorva Vyadhi)

- Occasional complaints of indigestion and constipation
- History of high cholesterol levels
- Previous episode of foot swelling 1 year ago

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5. Family History (Kutumba Anuvanshika Vikaras)

- **Father:** History of gout and high uric acid levels
- **Mother:** Diabetic and hypertensive

---

6. Personal History (Vyaktigata Visheshataha)

- **Appetite (Agnibala):** Irregular, mild loss of appetite
- **Digestion (Jatharagni):** Frequent bloating and gas
- **Bowel habits (Mala Pravritti):** Hard stool, occasional constipation
- **Urination (Mutra Pravritti):** Normal but dark yellow urine
- **Sleep (Nidra):** Disturbed due to pain at night
- **Mental Status (Manasika Bhava):** Stressful job, anxiety episodes

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7. Dietary History (Ahara Vihara)

- Excessive intake of fried, spicy, and sour foods
- Frequent consumption of alcohol and non-vegetarian food (especially red meat)
- Low intake of fresh vegetables and fruits
- Sedentary lifestyle with irregular meals

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8. Examination (Roga Pareeksha & Rogi Pareeksha)

A. Dashavidha Pareeksha (Tenfold Examination)

1. **Prakriti (Constitution):** Vata-Pitta dominance
2. **Vikriti (Pathological State):** Vatarakta (Gout)
3. **Sara (Tissue Quality):** Medium tissue quality
4. **Samhanana (Body Build):** Moderate obesity
5. **Pramana (Body Measurements):** Overweight (BMI: 28)
6. **Satmya (Compatibility to Food & Lifestyle):** Non-vegetarian food habit
7. **Satva (Mental Strength):** Moderate
8. **Aharashakti (Digestive Strength):** Weak digestion
9. **Vyayamashakti (Exercise Tolerance):** Poor due to joint pain
10. **Vaya (Age):** Middle-aged

B. Ashta Sthana Pareeksha (Eightfold Examination)

1. **Nadi (Pulse):** Vata-Pitta dominance (Tachycardia)
2. **Mala (Stool):** Hard, dry stool (Constipation)
3. **Mutra (Urine):** Slightly dark yellow, burning sensation absent
4. **Jihva (Tongue):** Coated, mild dryness
5. **Shabda (Voice):** Normal
6. **Sparsha (Skin Texture):** Rough and dry
7. **Drik (Eyes):** Mild redness
8. **Akruti (Body Appearance):** Swollen joints with slight deformity

C. Local Examination (Affected Joint)

- **Swelling:** Present in right big toe joint (Podagra)
- **Redness:** Yes
- **Pain on touch:** Severe
- **Joint movement:** Restricted due to stiffness

---

9. Diagnosis (Nidana Panchaka Analysis)

A. Nidana (Etiology - Causes)

- **Ahara (Dietary factors):** Excessive intake of meat, alcohol, oily foods
- **Vihara (Lifestyle factors):** Sedentary habits, stress
- **Manasika Nidana (Psychological factors):** Anxiety, work pressure

B. Purvarupa (Premonitory Symptoms)

- Stiffness and heaviness in joints
- Mild swelling in foot after prolonged sitting

C. Rupa (Symptoms - Clinical Features)

- Severe joint pain with burning sensation
- Swelling, redness, and stiffness

D. Upashaya (Relieving Factors)

- Warm oil massage and hot fomentation reduce pain
- Avoidance of non-veg food decreases flare-ups

E. Samprapti (Pathogenesis - Disease Progression)

- Vata vitiation due to dietary and lifestyle factors
- Vata combines with Rakta (blood) leading to joint deposition
- Symptoms like pain, swelling, and stiffness manifest

---

10. Investigations (Modern Approach)

- **Serum Uric Acid:** 8.5 mg/dL (High)
- **X-ray of Foot:** Joint space narrowing, mild deformity
- **Blood Sugar Levels:** Normal
- **Liver & Kidney Function Tests:** Normal

---

11. Ayurvedic Treatment Plan

A. Shodhana Chikitsa (Detoxification Therapy)

- **Virechana (Purgation Therapy):** Using Trivrit Lehya
- **Raktamokshana (Bloodletting Therapy):** Using leech therapy

B. Shamana Chikitsa (Palliative Treatment)

- **Herbal Medicines:**
  - Kaishore Guggulu – 2 tablets twice daily
  - Guduchi Kwatha – 30ml twice daily
  - Mahamanjishthadi Kwatha – 30ml twice daily
  - Punarnavadi Guggulu – 2 tablets twice daily
- **Local Application:**
  - Dashmoola Taila Abhyanga (Massage)
  - Nirgundi Patra Lepa (Paste Application)
- **Dietary Recommendations (Pathya-Apathya)**
  - Avoid sour, salty, fried foods, red meat, alcohol
  - Include green gram, barley, bottle gourd
  - Increase intake of warm water and herbal teas
- **Lifestyle Modifications:**
  - Daily mild walking
  - Yoga and Pranayama
  - Warm oil massage and fomentation

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12. Follow-up & Prognosis

- **After 1 Month:**
  - Pain reduced by 50%
  - Swelling decreased
  - Appetite improved
- **After 3 Months:**
  - Uric acid levels dropped to 6.0 mg/dL
  - No recurrent attacks
  - Better digestion and bowel habits

उन्माद एवं अपस्मार का इतिहास संग्रह (History Taking) – आयुर्वेद अनुसार UNMADA & APSMAR

1. सामान्य जानकारी (Demographic Details)

- **नाम (Name)** – रोगी का पूरा नाम
- **आयु (Age)** – रोगी की उम्र
- **लिंग (Gender)** – पुरुष/स्त्री/अन्य
- **जाति (Caste)** – रोगी की जाति (यदि प्रासंगिक हो)
- **पता (Address)** – रोगी का निवास स्थान
- **धर्म (Religion)** – धार्मिक मान्यताओं का उल्लेख
- **वैवाहिक स्थिति (Marital Status)** – अविवाहित/विवाहित/विधुर/तलाकशुदा
- **व्यवसाय (Occupation)** – रोगी का कार्यक्षेत्र
- **आर्थिक स्थिति (Socioeconomic Status)** – निम्न/मध्यम/उच्च वर्ग

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2. मुख्य शिकायत (Chief Complaints)

- रोगी की प्रमुख समस्या क्या है?
- कब से यह समस्या हो रही है?
- क्या कोई उत्तेजक या शमन करने वाले कारक हैं?
- समस्या की तीव्रता एवं आवृत्ति कितनी है?

---

3. रोग का इतिहास (History of Present Illness)

- रोग की शुरुआत कैसे हुई? (अचानक/धीरे-धीरे)
- प्रारंभिक लक्षण क्या थे?
- रोग की गहनता एवं प्रगति कैसी रही?
- किन कारणों से समस्या में वृद्धि होती है?
- पहले से कोई उपचार लिया गया है या नहीं?
- रोगी को पहले भी कोई मानसिक समस्या हुई थी?

4. अतीत का इतिहास (Past History)

- किसी अन्य मानसिक या शारीरिक रोग का इतिहास
- किसी प्रकार की मस्तिष्क-सम्बंधी चोट या संक्रमण का विवरण
- मिर्गी (Epilepsy) या मानसिक विकारों का कोई पुराना इतिहास
- नशे की लत (अल्कोहल, धूम्रपान, अन्य मादक पदार्थों)

5. पारिवारिक इतिहास (Family History)

- माता-पिता, भाई-बहन या अन्य परिजनों में मानसिक रोग का इतिहास
- पारिवारिक वातावरण कैसा है? (तनावपूर्ण या सामान्य)
- कोई अनुवांशिक रोगों का इतिहास?

6. व्यक्तिगत इतिहास (Personal History)

- खानपान (Satvik, Rajsik, Tamsik आहार)
- दिनचर्या (निद्रा, जागरण, व्यायाम)
- मानसिक तनाव का स्तर
- व्यवहारिक पैटर्न (Introvert/Extrovert)

7. मानसिक स्थिति परीक्षण (Mental Status Examination - MSE)

- **सजगता (Alertness)** – रोगी का जागरूकता स्तर
- **स्मरण शक्ति (Memory)** – अल्पकालिक और दीर्घकालिक स्मरण क्षमता
- **अनुभूति (Perception)** – विभ्रम (Hallucination) एवं भ्रांतियाँ (Delusions)
- **भावनात्मक स्थिति (Mood & Affect)** – उदासी, क्रोध, भय आदि
- **चिंतन प्रक्रिया (Thought Process)** – सुचारु, अव्यवस्थित या असामान्य विचारधारा
- **ज्ञान (Cognition)** – रोगी की तर्क शक्ति एवं निर्णय क्षमता

8. निदान (Diagnosis) – आयुर्वेदिक दृष्टिकोण

- **उन्माद (Unmada)** – वातज, पित्तज, कफज, सन्निपातज एवं आगंतुक उन्माद
- **अपस्मार (Apasmara)** – वातज, पित्तज, कफज एवं सन्निपातज अपस्मार
- दोष-दूष्य विचारण (Dosha-Dusya Consideration)

9. उपचार की योजना (Treatment Plan)

- **स्नेहन एवं स्वेदन (Oleation & Sudation Therapy)**
- **शोधन चिकित्सा (Panchakarma - Vamana, Virechana, Basti, Nasya)**
- **औषधीय चिकित्सा (Herbal & Rasayana Therapy)**
- **सद्वृत्त पालन (Sadvritta & Achara Rasayana)**
- **योग एवं ध्यान (Yoga & Meditation)**

Case Study of Unmada & Apasmara

Patient Details (रोगी की जानकारी)

- **Name (नाम):** राम शर्मा (Ram Sharma)
- **Age (आयु):** 32 वर्ष (32 years)
- **Gender (लिंग):** पुरुष (Male)
- **Address (पता):** देहरादून, उत्तराखंड (Dehradun, Uttarakhand)
- **Occupation (व्यवसाय):** सरकारी कर्मचारी (Government Employee)
- **Marital Status (वैवाहिक स्थिति):** विवाहित (Married)
- **Economic Status (आर्थिक स्थिति):** मध्यम वर्ग (Middle Class)

Chief Complaints (मुख्य शिकायतें)

- अचानक आक्रामकता और चिड़चिड़ापन (Sudden aggression and irritability)
- अनिद्रा (Insomnia)
- बार-बार मूड बदलना (Frequent mood swings)
- कभी-कभी बेहोशी के दौरे (Occasional episodes of unconsciousness)
- सिर में भारीपन और घबराहट (Heaviness in the head and anxiety)

History of Present Illness (रोग का वर्तमान इतिहास)

राम शर्मा पिछले 6 महीनों से मानसिक अस्थिरता महसूस कर रहे हैं। प्रारंभ में, उन्होंने हल्की चिड़चिड़ाहट और नींद में कमी का अनुभव किया। धीरे-धीरे, उनका व्यवहार आक्रामक होता गया। कभी-कभी, वे बिना किसी कारण के चिल्लाने लगते हैं और अजीब आवाजें सुनने की शिकायत करते हैं।

पिछले 2 महीनों में, उन्होंने दो बार बेहोशी के दौरे (अपस्मार) का अनुभव किया, जिसमें वे कुछ सेकंड के लिए बेहोश हो गए और होश आने के बाद भ्रमित महसूस किया। इन लक्षणों में तनाव और थकान से वृद्धि होती है।

Past History (अतीत का इतिहास)

- 5 साल पहले एक सड़क दुर्घटना में सिर में हल्की चोट लगी थी।
- किशोरावस्था में अत्यधिक गुस्से की समस्या थी।
- पारिवारिक दबाव के कारण लंबे समय से मानसिक तनाव बना हुआ है।

Family History (पारिवारिक इतिहास)

- पिता को भी मानसिक तनाव की समस्या थी।
- दादा को मिर्गी (Epilepsy) के दौरे आते थे।

Personal History (व्यक्तिगत इतिहास)

- **Diet (आहार):** अधिक मसालेदार एवं गरिष्ठ भोजन का सेवन।
- **Sleep (निद्रा):** प्रतिदिन 4-5 घंटे की अनियमित नींद।
- **Lifestyle (जीवनशैली):** व्यस्त और मानसिक रूप से तनावपूर्ण जीवन।
- **Addictions (नशे की लत):** धूम्रपान और शराब का सेवन (कभी-कभी)।

Mental Status Examination (मानसिक स्थिति परीक्षण)

- **Alertness (सजगता):** सामान्य से कम
- **Memory (स्मरण शक्ति):** अल्पकालिक स्मरण शक्ति प्रभावित
- **Thought Process (विचार प्रक्रिया):** अव्यवस्थित, कभी-कभी असंगत विचार
- **Mood & Affect (मूड एवं भावनात्मक स्थिति):** अप्रत्याशित उतार-चढ़ाव
- **Perception (अनुभूति):** कभी-कभी विभ्रम (Hallucinations)

Ayurvedic Diagnosis (आयुर्वेदिक निदान)

- **Unmada (उन्माद):** वात-पित्तज उन्माद
- **Apasmara (अपस्मार):** वातज अपस्मार

Treatment Plan (उपचार योजना)

1. शोधन चिकित्सा (Panchakarma Therapy)

- **स्नेहन एवं स्वेदन (Oleation & Sudation Therapy):** शिरोधारा तैल (Brahmi Taila)
- **नस्य (Nasya):** वाचा और शंखपुष्पी घृत द्वारा नस्य
- **बस्ति (Basti Therapy):** अश्वगंधा एवं दशमूल क्वाथ बस्ति

2. औषधीय चिकित्सा (Herbal Treatment)

- ब्राह्मी वटी - मानसिक शांति के लिए
- सारस्वतारिष्ट - स्मरण शक्ति और चिंता प्रबंधन हेतु
- वचा चूर्ण - मानसिक संतुलन हेतु

3. जीवनशैली एवं योग (Lifestyle & Yoga)

- ध्यान एवं प्राणायाम (Meditation & Pranayama)
- नियमित दिनचर्या (Regulated Daily Routine)
- सात्विक आहार (Sattvic Diet)

Follow-up & Prognosis (फॉलो-अप एवं रोग की संभावना)

- पहले 15 दिनों में लक्षणों में सुधार की संभावना।
- 3 महीने के भीतर मानसिक स्थिरता प्राप्त करने की उम्मीद।
- दीर्घकालिक उपचार से रोगी को सामान्य जीवन जीने में सहायता मिलेगी।

Comparison of Modern & Ayurvedic Treatment for Unmada & Apasmara

Aspect	Modern Treatment	Ayurvedic Treatment
Approach	Symptomatic & Neurological	Holistic & Dosha-based (Vata, Pitta, Kapha)
Diagnosis	EEG, MRI, Psychological Tests	Dosha analysis, Nadi Pariksha, Manas Pariksha
Medication	- Antipsychotics (Risperidone, Haloperidol) - Antiepileptics (Valproate, Carbamazepine) - Sedatives (Diazepam)	- Brahmi, Vacha, Shankhpushpi - Saraswatarishta, Smritisagar Rasa - Medhya Rasayana
Panchakarma (Detoxification)	Not applicable	Vamana, Virechana, Basti, Nasya, Shirodhara
Dietary Management	General balanced diet	Satvik diet, avoiding Tamasic foods (alcohol, spicy foods)
Psychotherapy & Lifestyle	Cognitive Behavioral Therapy (CBT), Stress management, Sleep therapy	Sadvritta (moral & ethical conduct), Pranayama, Yoga, Meditation
Long-term Effect	Risk of side effects, dependency on medication	Minimal side effects, focuses on root cause & lifestyle changes

Shotha Case History Format (शोथ)

1. Demographic Details (व्यक्तिगत जानकारी)

Parameter	English	Hindi
Name	Full Name	नाम
Age	In years	आयु (वर्षों में)
Gender	Male / Female / Other	लिंग
Occupation	Job / Student / Homemaker etc.	पेशा
Address	Full residential address	पता
Contact Number	Mobile or landline	संपर्क नंबर
Marital Status	Single / Married / Divorced	वैवाहिक स्थिति
Religion & Caste	If relevant for practice	धर्म और जाति
Socioeconomic Status	Lower / Middle / Upper class	सामाजिक-आर्थिक स्थिति
Date of Examination	DD/MM/YYYY	परीक्षण की तिथि

2. Chief Complaints (मुख्य शिकायतें)

Complaint	Duration	English Description	Hindi Description
Swelling (Shotha)	e.g., 2 months	Site, duration, pain, color etc.	सूजन - स्थान, अवधि, दर्द
Pain	e.g., 1 month	Type, intensity, timing	दर्द - प्रकार, तीव्रता
Stiffness	e.g., on movement	Restriction of movement	जकड़न, गति में रुकावट
Redness / Discoloration	Optional	Signs of inflammation	लालिमा या रंग बदलना

3. History of Present Illness (वर्तमान बीमारी का इतिहास)

- Onset: Sudden or gradual (शुरुआत - अचानक या धीरे-धीरे)
- Progression: Stable / increasing / fluctuating (विकास - स्थिर/बढ़ता/घटता)
- Aggravating factors: Walking, standing, cold etc. (बढ़ाने वाले कारण)
- Relieving factors: Rest, warm application, medication (आराम देने वाले कारण)
- Associated symptoms: Fever, burning sensation, heaviness, etc. (साथ में लक्षण)

🔹 4. Past History (पूर्व चिकित्सा इतिहास)

- Any history of similar illness in the past?
  (क्या पहले भी ऐसी बीमारी हुई है?)
- Diabetes, Hypertension, Renal or Liver disease
  (मधुमेह, उच्च रक्तचाप, गुर्दा या यकृत रोग)

🔹 5. Family History (परिवार का इतिहास)

- Any hereditary disease? (वंशानुगत रोग?)
- Family history of shotha or similar disorders?
  (परिवार में किसी को शोथ या इसी तरह की समस्या?)

🔹 6. Personal History (निजी आदतें)

Parameter	Details in English	Hindi
Appetite	Normal / Increased / Decreased	भूख
Bowel Movements	Regular / Constipation / Diarrhea	मलत्याग
Micturition	Frequency / Color / Pain	मूत्रत्याग
Sleep	Sound / Disturbed / Insomnia	नींद
Addictions	Smoking / Alcohol / Tobacco etc.	नशे की आदत
Diet	Vegetarian / Non-vegetarian	आहार
Physical Activity	Sedentary / Moderate / Active	शारीरिक गतिविधि

7. Dietary History (आहार संबंधी इतिहास)

- Viruddha Aahar (Incompatible food)?
  (विरुद्ध आहार का सेवन?)
- Heavy / oily food habits (गुरु, स्निग्ध आहार?)
- Overeating or irregular meals (अतिभोजन या अनियमित भोजन?)

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8. Menstrual History (for females) (मासिक धर्म का इतिहास)

- Menarche, cycle regularity, pain, discharge, menopause
  (मासिक धर्म कब शुरू हुआ, नियमित है या नहीं, दर्द, स्राव आदि)

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9. Occupational & Environmental History (पेशा और वातावरण से जुड़ी जानकारी)

- Exposure to chemicals, pollutants, long standing hours, etc.
  (रसायन, प्रदूषण, लंबे समय तक खड़े रहना आदि का संपर्क?)

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10. Physical Examination (शारीरिक परीक्षण)

Parameter	Observation (English)	Hindi
Pulse (Nadi)	Rate, Rhythm, Strength	नाड़ी
Blood Pressure	Systolic / Diastolic	रक्तचाप
Temperature	Normal / Febrile	तापमान
Respiratory Rate	Normal / Altered	श्वसन दर
Weight	Measured	वजन

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11. Local Examination of Shotha (शोथ का स्थानिक परीक्षण)

Feature	Description (English)	Hindi Description
Location	Exact site (limb, face, abdomen, etc.)	स्थान
Size & Shape	Circular / Diffuse / Pitting	आकार एवं प्रकार
Tenderness	Present / Absent	स्पर्शसंवेदनशीलता
Temperature	Warmth over area?	तापमान
Pitting/Non-Pitting	Impression stays or not	पिटिंग / नॉन-पिटिंग
Skin Changes	Color, texture, cracks, ulcers	त्वचा में बदलाव

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12. Ayurvedic Parameters (आयुर्वेदिक दृष्टिकोण)

Parameter	English Explanation	Hindi Explanation
Nidana	Causative factors	रोग के कारण
Dosha Involvement	Vata / Pitta / Kapha / Tridosha	दोष संलिप्तता
Dushya	Rasa, Rakta, Mamsa, Meda, etc.	दूष्य
Srotas	Affected channels (Rasa, Medovaha, etc.)	श्रोतस
Rogamarga	Bahya / Madhyama / Abhyantara	रोगमार्ग
Samprapti	Pathogenesis	सम्प्राप्ति
Vyadhi Swabhava	Sadhya / Asadhya / Krichchra Sadhya	रोग का स्वरूप

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13. Investigations (जांचें)

- CBC, ESR, CRP
- LFT, KFT, Urine routine
- Ultrasound / X-ray / MRI if required
- Specific tests for **cardiac, renal, or hepatic** causes

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14. Diagnosis (निदान)

- **Modern Diagnosis**: e.g., Edema due to renal disease
- **Ayurvedic Diagnosis**: Vata-Kaphaja Shotha / Medoja Shotha etc.

Shotha (शोथ) - Sample Case History

1. Demographic Details (व्यक्तिगत जानकारी)

Parameter	Details
Name (नाम)	Smt. Sunita Sharma
Age (आयु)	42 years
Gender (लिंग)	Female
Occupation (पेशा)	Housewife
Address (पता)	Bhopal, Madhya Pradesh
Contact Number	9876543210
Marital Status	Married
Socioeconomic Status	Middle Class
Date of Exam	12-April-2025

2. Chief Complaints (मुख्य शिकायतें)

Complaint	Duration
Swelling in both feet (दोनों पैरों में सूजन)	2 months
Pain and heaviness (दर्द और भारीपन)	1.5 months
Morning stiffness (सुबह अकड़न)	1 month

3. History of Present Illness (वर्तमान बीमारी का इतिहास)

- Gradual onset of swelling in bilateral feet.
- Swelling increases by evening, slightly reduced by morning.
- Mild pain and heaviness in legs.
- No redness, no fever.
- Patient reports salty and heavy meals, minimal physical activity.

4. Past History (पूर्व इतिहास)

- No history of diabetes or hypertension.
- Had similar swelling during pregnancy 15 years ago.

5. Family History (परिवार का इतिहास)

- Father had hypertension and renal issues.
- No similar complaints in immediate family currently.

6. Personal History (निजी आदतें)

Factor	Observation
Appetite	Normal
Bowel	Constipation (कब्ज)
Micturition	Yellowish, slightly burning
Sleep	Disturbed, heaviness in legs
Diet	Non-vegetarian, oily & salty
Addictions	None
Physical Activity	Sedentary lifestyle

7. Dietary History (आहार)

- Frequent consumption of fried, salty snacks.
- Irregular meal timings.
- Low water intake.

8. Menstrual History (मासिक धर्म का इतिहास)

- Menarche at 13 years.
- Regular cycles, 28-day interval.
- Mild dysmenorrhea.
- No menorrhagia or discharge issues.

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9. Occupational/Environmental History (पेशा/पर्यावरण)

- Works in kitchen for long hours standing.
- Rarely sits with legs elevated.
- No exposure to chemicals.

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10. Physical Examination (शारीरिक परीक्षण)

Parameter	Value
Pulse (नाड़ी)	78/min, regular
BP (रक्तचाप)	130/84 mmHg
Temperature	Normal
Respiratory Rate	16/min
Weight	74 kg
BMI	29 (Overweight)

---

11. Local Examination (स्थानिक परीक्षण)

Parameter	Finding
Site	Bilateral feet and ankles
Size	Moderate swelling
Tenderness	Mild on pressing
Temperature	Normal
Pitting	Positive (Pitting edema)
Skin changes	Mild dryness

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12. Ayurvedic Assessment (आयुर्वेदिक परीक्षण)

Parameter	Interpretation
Nidana	Ati-sevan of Lavana, Snigdha Aahar
Dosha	Kapha-Vata
Dushya	Rasa, Meda
Srotas	Rasavaha, Medovaha
Rogamarga	Bahya
Samprapti	Avarana of Vata by Kapha & Meda
Vyadhi	Medoja Shotha
Swabhava	Krichchra Sadhya

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13. Investigations (जांचें)

- CBC – Normal
- ESR – Mildly raised
- LFT/KFT – Normal
- Urine – Slightly concentrated, no proteinuria
- USG Abdomen – Normal

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14. Diagnosis (निदान)

- **Modern**: Bilateral pedal edema of non-cardiac origin, likely nutritional or mechanical.
- **Ayurvedic**: **Medoja Shotha** due to Kapha-Medovriddhi and Vata Avarana

Comparison Table: Ayurvedic vs. Modern Treatment for Shotha (Edema)

Aspect	Ayurvedic Treatment (Medoja Shotha)	Modern Treatment (Bilateral Pedal Edema)
Basic Approach	Treat the root cause (Dosha-Dushya involvement, Agni, Srotas)	Symptomatic relief & management of underlying systemic condition
Diagnosis Basis	Tridosha theory, Dhatu & Srotas assessment, Samprapti ghataka	Clinical exam, lab tests (LFT, KFT, ECG), imaging (USG, Doppler)
Causative Factors (Nidana)	Heavy/oily diet, sedentary life, Kapha-Meda dushti, Vata avarana	Prolonged standing, cardiac/renal/liver diseases, malnutrition
Main Dosha Involved	Kapha & Meda (blocking Vata)	No Dosha concept — fluid retention due to various physiological causes
Shodhana Therapy (Detox)	- Vamana (if suitable) - Lekhana Basti (Fat-reducing enema)	Not applicable
Shamana Therapy (Palliative)	- **Triphala Guggulu**, - **Punarnavadi Kashayam** - **Gokshuradi Guggulu** - **Nagaradi Kashaya**	- Diuretics (e.g. Furosemide, Spironolactone) - Salt restriction
Ahara (Diet)	- Light, Laghu, Tikta-Katu dominant diet - Avoid Snigdha & Guru food	- Low-sodium diet - Controlled fluid intake
Vihara (Lifestyle)	- Avoid daytime sleep - Mild daily exercise - Leg elevation	- Avoid standing long - Compression stockings - Physiotherapy
Local Treatments (Sthanika)	- **Lepa**: Dashanga lepa / Haridra lepa - **Swedana**: Nadi sweda or Patra pinda sweda	- Leg elevation - Topical emollients if skin dryness present
Pathya-Apathya	- Pathya: Yusha, green gram soup, warm water - Apathya: curd, fried & cold food	- General healthy eating, avoid excess salt or alcohol
Duration of Treatment	3–6 weeks depending on chronicity and response to Shodhana/Shamana	Symptom-based, varies depending on underlying condition
Prognosis (Sadhya-Asadhya)	Krichchra Sadhya if chronic & Medoja Sadhya in early-stage Vata-Kaphaja	Depends on underlying etiology (better if mechanical/nutritional)

◆ Example of Drug Choices:

Category	Ayurveda	Modern
Diuretics	Punarnava, Gokshura, Varuna	Furosemide, Torsemide
Anti-inflammatory	Haridra, Shallaki, Guggulu preparations	NSAIDs if needed
Medohara (fat-reducing)	Triphala Guggulu, Medohar Vati	Weight management, statins (if lipid related)
Liver support (if needed)	Bhringaraja, Bhumyamalaki	Hepatoprotectives, depending on labs

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Holistic Advantage of Ayurveda:

- Focuses on **root cause & long-term balance** (Dosha & Dhatu level)
- Promotes **overall health improvement** (Agni, Ojas)
- Encourages **diet and lifestyle changes** alongside medications
- **Fewer side effects**, especially in long-term use

Modern Advantage:

- **Quick symptomatic relief**
- Clear protocols for **emergency or systemic complications**
- Supportive diagnostic tools to detect **organ failure or disease** early

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AMA VATA CASE HISTORY FORMAT

A. Demographic Details / रोगी की सामान्य जानकारी

S.No.	Detail (English)	विवरण (हिंदी में)
1	Name	नाम
2	Age	आयु
3	Gender	लिंग
4	Marital Status	वैवाहिक स्थिति
5	Occupation	व्यवसाय
6	Address	पता
7	Contact Number	संपर्क नंबर
8	Religion	धर्म
9	Socio-economic status	सामाजिक-आर्थिक स्थिति
10	Date & Time of Visit	परामर्श की तारीख व समय

B. Chief Complaints / मुख्य शिकायतें

(List complaints with duration – शिकायतें और उनकी अवधि)

Example (उदाहरण):

- Joint pain since 2 years / जोड़ों में दर्द - 2 वर्ष से
- Loss of appetite – 6 months / भूख न लगना - 6 माह से

C. History of Present Illness / वर्तमान रोग का इतिहास

(Description of how the illness started and progressed – रोग की शुरुआत और बढ़ने की प्रक्रिया)
📌 Gradual or sudden onset, aggravating/relieving factors, associated symptoms etc.

🔹 D. Past Medical History / पूर्व रोगों का इतिहास

- Diabetes, Hypertension, Tuberculosis, etc.
- मधुमेह, उच्च रक्तचाप, टीबी आदि

🔹 E. Family History / पारिवारिक इतिहास

- Any hereditary diseases / कोई आनुवंशिक रोग
- Example: Diabetes in father / पिता को मधुमेह

🔹 F. Personal History / व्यक्तिगत इतिहास

Factor (English)	विवरण (हिंदी में)
Appetite	भूख
Digestion	पाचन
Bowel habits	मल त्याग की आदत
Urine	मूत्र
Sleep	नींद
Addiction	व्यसन
Sexual history (if needed)	यौन इतिहास (यदि आवश्यक हो)
Menstrual history (females)	मासिक धर्म का इतिहास

🔹 G. Diet & Lifestyle / आहार व जीवनशैली

- Type of diet (veg/non-veg), meal timings, regularity, sleep routine, exercise

- आहार का प्रकार (शाकाहारी/मांसाहारी), भोजन का समय, नियमितता, सोने की आदतें, व्यायाम आदि

H. Prakriti Pariksha (Constitutional Evaluation) / प्रकृति परीक्षण

(Use Prashn & Darshan methods – प्रश्न व दर्शन द्वारा)

Aspect	Vata	Pitta	Kapha
Body frame / शरीर गठन	Thin	Moderate	Heavier
Appetite / भूख	Irregular	Strong	Mild
Sleep / नींद	Disturbed	Moderate	Deep
Temperament / स्वभाव	Anxious	Angry	Calm
Skin / त्वचा	Dry	Warm, oily	Cold, moist

I. Dashavidha Pariksha / दशविध परीक्षा

No.	Factor (English)	विवरण (हिंदी में)
1	Prakriti (Body constitution)	प्रकृति
2	Vikriti (Current imbalance)	विकृति
3	Sara (Tissue quality)	सार
4	Samhanana (Body build)	संहनन
5	Pramana (Measurements)	प्रमाण
6	Satmya (Suitability)	सात्व्य
7	Satva (Mental strength)	सत्व
8	Aaharashakti (Diet power)	आहार शक्ति
9	Vyayamashakti (Exercise power)	व्यायाम शक्ति
10	Vaya (Age)	वय

J. Srotas Pariksha (Channel Examination) / स्रोतस परीक्षा

(Examine all systems – respiratory, digestive, urinary etc.)

Srotas	Function	Symptoms of vitiation
Annavaha	Digestive channel	Indigestion, bloating
Pranavaha	Respiratory system	Breathlessness, cough
Raktavaha	Circulatory system	Skin diseases, bleeding
Mutravaha	Urinary system	Urine retention, frequency

K. Ashtasthana Pariksha / अष्टस्थान परीक्षा

(8-fold Ayurvedic examination)

No.	Examination Point	Hindi
1	Nadi (Pulse)	नाड़ी
2	Mutra (Urine)	मूत्र
3	Mala (Stool)	मल
4	Jihva (Tongue)	जिह्वा
5	Shabda (Voice)	शब्द
6	Sparsha (Touch)	स्पर्श
7	Drik (Eyes)	दृष्टि
8	Akruti (Appearance)	आकृति

L. Rogi & Roga Bala Pariksha / रोगी व रोग बल परीक्षण

- Rogi Bala: Strength of patient
- Roga Bala: Severity and strength of disease
- रोगी बल: रोगी की शक्ति
- रोग बल: रोग की तीव्रता

M. Diagnosis (Nidana) / निदान

- Based on Ayurvedic principles (Dosha, Dushya, Samprapti)
- दोष, दुष्य, संप्राप्ति, रोग नाम

N. Chikitsa Sutra (Treatment Principle) / चिकित्सा सूत्र

- Shodhana (Detox), Shamana (Palliative), Rasayana etc.
- शोधन, शमन, रसायन आदि

O. Pathya-Apathya / पथ्य-अपथ्य

- Do's and Don’ts in diet and lifestyle
- आहार-विहार में क्या करें, क्या न करें

P. Follow-Up Advice / पुनः परामर्श

- Frequency of follow-up, next visit
- अगली मुलाकात की सलाह

SAMPLE AYURVEDIC CASE HISTORY AMA VATA

A. Demographic Details / रोगी की सामान्य जानकारी

Detail (English)	Hindi (हिंदी में)	Data (डेटा)
Name	नाम	Mr. Rajesh Sharma
Age	आयु	45 years
Gender	लिंग	Male (पुरुष)
Marital Status	वैवाहिक स्थिति	Married (विवाहित)
Occupation	व्यवसाय	Shopkeeper (दुकानदार)
Address	पता	123, Laxmi Nagar, Delhi
Contact Number	संपर्क नंबर	9876543210
Religion	धर्म	Hindu (हिंदू)
Socio-economic status	सामाजिक-आर्थिक स्थिति	Middle class (मध्यम वर्ग)
Date & Time of Visit	परामर्श की तारीख व समय	13 April 2025, 11:30 AM

B. Chief Complaints / मुख्य शिकायतें

Complaint (English)	शिकायत (हिंदी में)	Duration (अवधि)
Knee joint pain	घुटनों में दर्द	2 years (2 वर्ष)
Morning stiffness	सुबह अकड़न	1.5 years (1.5 वर्ष)
Difficulty walking upstairs	सीढ़ी चढ़ने में कठिनाई	1 year (1 वर्ष)

C. History of Present Illness / वर्तमान रोग का इतिहास

Patient started experiencing mild pain in both knees 2 years ago, worse in cold weather. Gradually stiffness increased in the morning. Pain increases after prolonged standing. No history of trauma.

रोगी को 2 वर्ष पूर्व घुटनों में हल्का दर्द शुरू हुआ, जो ठंड में बढ़ जाता था। धीरे-धीरे सुबह stiffness और चलने में परेशानी बढ़ गई। लंबे समय तक खड़े रहने पर दर्द बढ़ जाता है। कोई चोट का इतिहास नहीं है।

◆ D. Past History / पूर्व रोगों का इतिहास

- No history of Diabetes, TB, or major illness
- कोई प्रमुख बीमारी नहीं

◆ E. Family History / पारिवारिक इतिहास

- Father has osteoarthritis
- पिता को ऑस्टियोआर्थराइटिस

◆ F. Personal History / व्यक्तिगत इतिहास

Aspect	English Detail	Hindi (हिंदी में)
Appetite	Normal	सामान्य
Digestion	Occasional bloating	कभी-कभी गैस बनती है
Bowel habits	Constipation at times	कभी-कभी कब्ज की शिकायत
Urine	Normal	सामान्य
Sleep	Disturbed	नींद ठीक नहीं आती
Addiction	Occasionally smokes	कभी-कभी धूम्रपान
Menstrual history	—	—

G. Diet & Lifestyle / आहार-विहार

- Mixed diet (veg + occasional non-veg), prefers spicy food. Sleeps late, no exercise.

शाकाहारी + कभी-कभी मांसाहार, तीखा भोजन पसंद। देर से सोते हैं। कोई नियमित व्यायाम नहीं।

H. Prakriti Pariksha / प्रकृति परीक्षण

Feature	Observation
Prakriti	Vata-Kapha
Skin	Dry and cold
Body Frame	Medium
Appetite	Irregular
Sleep	Light
Temperament	Calm but anxious

I. Dashavidha Pariksha / दशविध परीक्षा

Factor	Finding
Prakriti	Vata-Kapha
Vikriti	Vata Vriddhi
Sara	Asthi Sara
Samhanana	Moderate
Pramana	Height: 5’8”, Wt: 64kg
Satmya	Mixed (veg/non-veg)
Satva	Madhyam
Aaharashakti	Moderate
Vyayamashakti	Poor
Vaya	Madhyama (Middle age)

J. Srotas Pariksha / स्रोतस परीक्षा

Srotas	Condition
Asthivaha	Pain, cracking sound
Annavaha	Bloating, irregular hunger
Purishavaha	Constipation sometimes

K. Ashtasthana Pariksha / अष्टस्थान परीक्षा

Factor	Observation
Nadi	Vata-Kapha pulse
Mutra	Normal
Mala	Hard stools sometimes
Jihva	Coated
Shabda	Normal
Sparsha	Dry skin
Drik	Dull eyes
Akruti	Lean body

L. Rogi & Roga Bala / रोगी व रोग बल

- Rogi Bala: Madhyam (Moderate)
- Roga Bala: Madhyam to Pravara (Moderate to Strong)

M. Nidana (Diagnosis) / निदान

- Disease: **Sandhivata (Osteoarthritis)**
- Dosha: **Vata Vriddhi**
- Dushya: **Asthi, Majja**
- Srotas: **Asthivaha**
- Samprapti: **Vata dushti → Asthivaha srotodushti → Sandhivata**

N. Chikitsa Sutra / चिकित्सा सूत्र

- **Snehana (Internal & External)**
- **Swedana (Sudation)**
- **Vatahara Chikitsa**
- **Asthidhatu poshak rasayana**

🔹 O. Treatment (Chikitsa)

1. Abhyanga: Dashamoola taila + Mahanarayana taila
2. Swedana: Nadi sweda with Dashamoola decoction
3. Oral Medications:

- Yogaraj Guggulu – 2 tab BID
- Rasnadi Kashayam – 15 ml BID
- Ashwagandha churna – 3g HS with milk

🔹 P. Pathya-Apathya / पथ्य-अपथ्य

✅ Pathya:

- Warm, light, oily food
- Avoid cold exposure
- Gentle walking

❌ Apathya:

- Cold food, curd at night
- Long sitting or standing
- Dry or stale food

🔹 Q. Follow-up Plan / पुनः परामर्श

- After 15 days
- Assess pain and stiffness
- Plan for Basti therapy if needed

Ama Vata (Rheumatoid Arthritis) Treatment Comparison Table

🔢 Aspect / पहलू	🌿 Ayurveda Treatment / आयुर्वेद चिकित्सा	💊 Modern Treatment / आधुनिक चिकित्सा
1. Disease Concept / रोग की धारणा	Ama + Vata dushti (toxins + vata imbalance) / आम + वात दोष	Autoimmune inflammation of joints / प्रतिरक्षा जनित सूजन
2. Primary Goal / उद्देश्य	Remove *Ama*, balance *Vata* / आम निकालना, वात संतुलन	Suppress immunity, reduce inflammation / रोग प्रतिकारक क्रिया को दबाना
3. Nidana Parivarjana / कारण निवारण	Avoid heavy, cold, oily foods / भारी, ठंडे, तले भोजन से परहेज	No specific focus / कोई विशेष नियम नहीं
4. Detoxification / शोधन	Langhana, Pachana, Virechana, Basti / उपवास, पाचन, विरेचन, बस्ती	Not practiced / नहीं किया जाता
5. Internal Medications / आंतरिक औषधियाँ	Simhanada Guggulu, Yogaraj Guggulu, Rasnadi Kwath / औषधियाँ जो आम हटाएं और वात शांत करें	DMARDs (Methotrexate), NSAIDs, Biologics / रोग नियंत्रक औषधियाँ
6. External Therapy / बाह्य उपचार	Abhyanga, Swedana, Patra Pinda Sweda / अभ्यंग, स्वेदन, पिंडस्वेदन	Physiotherapy, Warm packs / फिजियोथेरेपी, गरम पट्टियाँ
7. Rasayana / रसायन	Ashwagandha, Guduchi, Shilajit / अश्वगंधा, गुडूची, शिलाजीत	Vitamin D, Calcium / विटामिन D, कैल्शियम
8. Diet & Lifestyle / आहार-विहार	Warm, light food, avoid cold & curd / गर्म, हल्का भोजन, दही वर्जित	No specific dietary regimen / कोई विशेष आहार नहीं
9. Treatment Duration / अवधि	Slow, holistic, long-lasting results / धीमा लेकिन स्थायी असर	Fast, symptomatic relief / तेज़ राहत लेकिन बार-बार दवा
10. Side Effects / दुष्प्रभाव	Minimal (with proper use) / बहुत कम (यदि सही प्रयोग हो)	Common – liver, GI, immune-related / सामान्य - लीवर, इम्यून समस्याएं
11. Immunity / प्रतिरक्षा	Strengthens immunity (Ojas) / प्रतिरक्षा शक्ति बढ़ाता है	Suppresses immunity / प्रतिरक्षा को दबाता है

✅ Ayurveda Focuses On:

- Root cause (Ama + Vata)
- Detoxification (Shodhana)
- Rasayana (Rejuvenation)

💊 Modern Medicine Focuses On:

- Symptom suppression
- Immunosuppression
- Anti-inflammatory drugs

DETAILED CASE HISTORY FORMAT FOR MUTRAGHATA (URINARY RETENTION) AND MUTRAKRICHRA

Detail	English	Hindi
Name	Full Name	पूरा नाम
Age	Age in years	उम्र (वर्षों में)
Gender	Male / Female / Other	लिंग (पुरुष / महिला / अन्य)
Marital Status	Married / Unmarried	वैवाहिक स्थिति
Occupation	Job / Profession	पेशा / व्यवसाय
Address	Full residential address	पता
Contact Number	Phone / Mobile	संपर्क नंबर
Date of Consultation	Date	परामर्श की तिथि

🔍 CHIEF COMPLAINTS | मुख्य शिकायतें

S.No	Complaint	Duration	विवरण (हिंदी)
1	Difficulty in urination	e.g., 3 weeks	मूत्र त्याग में कठिनाई
2	Pain/Burning during urination	e.g., 2 weeks	मूत्र करते समय जलन या दर्द
3	Incomplete emptying	e.g., 1 month	अधूरा मूत्रत्याग का अनुभव
4	Frequency/urgency of urination	e.g., 10 days	बार-बार मूत्र त्याग या जल्दीबाज़ी
5	Hesitancy/Straining	e.g., 5 days	मूत्र त्याग में विलंब या ज़ोर लगाना

HISTORY OF PRESENT ILLNESS (HOPI) | वर्तमान रोग का इतिहास

English:

- Onset: Sudden / Gradual
- Duration: Since when?
- Progression: Increasing / Stable / Decreasing
- Aggravating Factors: Cold, spicy food, alcohol
- Relieving Factors: Warmth, rest, certain medications
- Associated Symptoms: Fever, nausea, back pain, hematuria

Hindi:

- प्रारंभ: अचानक / धीरे-धीरे
- अवधि: कितने समय से?
- प्रवृत्ति: बढ़ रही है / स्थिर / घट रही है
- बढ़ाने वाले कारण: ठंड, तीखा भोजन, शराब
- राहत देने वाले कारण: गर्मी, आराम, औषधि
- सहायक लक्षण: बुखार, जी मिचलाना, पीठ दर्द, मूत्र में खून

PAST HISTORY | पूर्ववृत्त

Aspect	English	Hindi
Previous urinary disorders	Any history of UTI, stones	पूर्व में मूत्ररोग, पथरी आदि
Diabetes, Hypertension	Present / Absent	मधुमेह / उच्च रक्तचाप
Surgery	Especially related to urinary tract	मूत्र प्रणाली से संबंधित शल्य चिकित्सा
Sexual History	Any STI / pain during intercourse	यौन रोग या संभोग में दर्द

FAMILY HISTORY | पारिवारिक इतिहास

- Diabetes, renal disease, BPH in family?
- परिवार में मधुमेह, गुर्दा रोग, प्रोस्टेट रोग आदि?

TREATMENT HISTORY | उपचार का इतिहास

- Any current allopathic / ayurvedic / homeopathic treatment?
- वर्तमान में ली जा रही कोई भी दवा?
- क्या कोई एंटीबायोटिक्स, पथरी की दवा आदि ले रहे हैं?

🌿 DIETARY & LIFESTYLE HISTORY | आहार और जीवनशैली का इतिहास

Factor	English	Hindi
Diet Type	Vegetarian / Non-vegetarian	शाकाहारी / मांसाहारी
Water Intake	Litres per day	प्रतिदिन पानी की मात्रा
Bowel Habits	Regular / Constipated	नियमित / कब्ज़
Sleep	Duration and quality	नींद की अवधि और गुणवत्ता
Stress Level	Low / Moderate / High	तनाव स्तर
Physical Activity	Regular / Sedentary	शारीरिक गतिविधि
Addiction	Smoking / Alcohol / Tobacco	धूम्रपान / शराब / तम्बाकू

AYURVEDIC ASSESSMENT | आयुर्वेदिक मूल्यांकन

❖ Nidana (Etiological Factors) | निदान

- Apathyakara Ahara-Vihara (अप्राकृतिक आहार-विहार)
- Ushna, Tikshna, Katu, Lavana Ahara
- Vegadharana (Suppressing micturition urge)
- Madya sevana, Vyayama ati

❖ Samprapti (Pathogenesis) | सम्प्राप्ति

- Vata Prakopa
- Involvement of Mutravaha Srotas
- Basti Dushti

❖ Dosha Involvement | दोष संलिप्तता

- Mainly **Vata Dosha** (Apana Vata), sometimes associated with Pitta

❖ Rogamarga | रोगमार्ग

- Abhyantara (Internal route)

❖ Srotas | स्रोतस

- Mutravaha Srotas

❖ Sadhyasadhyata | साध्य-असाध्यता

- Depending on chronicity and associated complications (prognosis)

INVESTIGATIONS (if needed) | परीक्षण

Test	English	Hindi
Urine Routine & Microscopy	Check pus cells, crystals	मूत्र परीक्षण - मवाद, क्रिस्टल आदि
USG Abdomen & Pelvis	Prostate size, residual urine	अल्ट्रासोनोग्राफी - प्रोस्टेट, मूत्र
Blood Sugar / RFT	Diabetes, kidney function	रक्त शर्करा, गुर्दा कार्य परीक्षण
PSA (if male, elderly)	Prostate Screening	पीएसए जाँच (पुरुषों में)

✅ PROVISIONAL AYURVEDIC DIAGNOSIS | प्रारंभिक आयुर्वेदिक निदान

- **Mutrakrichra** (e.g., Pittaja, Vataja, Sannipataja)
- **Mutraghata** (e.g., Vatakundalika, Basti Mutraghata, etc.)

AYURVEDIC CASE SHEET – MUTRAKRICHRHA (DYSURIA)

आयुर्वेदिक रोग विवरण - मूत्रकृच्छ्र (दर्दयुक्त मूत्रत्याग)

1. Demographic Details | रोगी की जानकारी

विवरण / Detail	उत्तर / Response
Name / नाम	Mr. Ramesh Sharma
Age / उम्र	45 years
Gender / लिंग	Male
Marital Status / वैवाहिक स्थिति	Married
Occupation / पेशा	Office Clerk
Address / पता	Jaipur, Rajasthan
Contact No / संपर्क	+91-9876543210
Date of Consultation / परामर्श तिथि	12 April 2025

2. Chief Complaints | मुख्य शिकायतें

क्र.	Complaint (शिकायत)	Duration (अवधि)
1	Burning sensation during urination (मूत्र में जलन)	15 days
2	Pain in lower abdomen (निचले पेट में दर्द)	10 days
3	Frequent urge to urinate (बार-बार मूत्र लगना)	10 days
4	Scanty urine output (मूत्र कम मात्रा में आना)	7 days

3. History of Present Illness (वर्तमान रोग का इतिहास)

The patient was apparently healthy 15 days ago when he developed a burning sensation during micturition. Gradually, pain in the lower abdomen and increased frequency of urination appeared. No fever. No hematuria. He reports a sedentary lifestyle, irregular water intake, and excessive consumption of spicy food.

रोगी 15 दिन पूर्व तक स्वस्थ था, जब उसे मूत्र त्याग के समय जलन की शिकायत शुरू हुई। धीरे-धीरे पेट के निचले भाग में दर्द और बार-बार पेशाब की इच्छा होने लगी। बुखार या मूत्र में रक्त नहीं है। रोगी का जीवनशैली गतिहीन है, पानी कम पीता है और तीखा भोजन अधिक करता है।

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4. Past History | पूर्व इतिहास

- No history of diabetes, hypertension, renal stones
- No previous surgery
- No history of similar complaints in the past

कोई मधुमेह, उच्च रक्तचाप या पथरी का इतिहास नहीं है। पूर्व में कोई मूत्र संबंधी बीमारी नहीं रही।

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5. Family History | पारिवारिक इतिहास

- Father diabetic, no history of renal disease
  पिता मधुमेही हैं, परिवार में मूत्र रोग नहीं।

---

6. Dietary & Lifestyle History | आहार-विहार

Aspect / पहलू	विवरण / Description
Diet / आहार	Mixed diet (mostly spicy)
Water intake / पानी सेवन	~1.5 L/day (कम मात्रा)
Bowel habits / मलत्याग	Occasional constipation
Sleep / नींद	Disturbed due to frequent urination
Addictions / व्यसन	Occasionally smokes
Physical Activity / गतिविधि	Sedentary lifestyle

---

7. Ayurvedic Assessment | आयुर्वेदिक परीक्षण

- **Nidana (Causative Factors):** Ati-tikshna, ushna ahara, avrodha of mutra vega
- **Dosha:** Mainly Pitta with Vata association
- **Dushya:** Rasa, Rakta, Mutravaha Srotas
- **Rogamarga:** Abhyantara
- **Srotodushti:** Sanga (Obstruction)
- **Vyadhi:** Pittaja Mutrakrichra

---

8. Investigations | परीक्षण

Test	Result (if available)
Urine Routine & Microscopy	6-8 pus cells/HPF, no RBCs
USG Abdomen	Normal; no stone detected
Blood Sugar (F)	92 mg/dL
PSA	Not done

🔹 9. Provisional Diagnosis | प्रारंभिक निदान

Ayurvedic: Pittaja Mutrakrichra (पित्तज मूत्रकृच्छ्र)
Modern: Urinary Tract Irritation without infection

🔹 10. Treatment Plan | चिकित्सा योजना

Chikitsa Sutra (Principle):

- **Pitta Shamana**, **Mutrala**, **Vatanulomana**, **Srotoshodhana**

Aushadhi (Medicines):

औषधि	मात्रा	अनुपान	समय
Chandraprabha Vati	2 tablets	Warm water	BD after food
Gokshuradi Guggulu	2 tablets	Warm water	BD
Varunadi Kwatha	20 ml	Equal water	BD before meals
Punarnavadi Mandoor	1 tab	with lukewarm water	OD
Shatavari Churna	3 g	With milk	HS

Pathya-Apathya (Do's & Don'ts):

✅ Pathya:

- Plenty of water
- Coconut water, barley water
- Cooling & bland food
- Boiled bottle gourd (lauki), rice, moong

❌ Apathya:

- Spicy, sour, fermented food
- Tea, coffee, alcohol
- Urge suppression
- Excessive sitting/heat exposure

11. Prognosis | रोग का पूर्वानुमान

Sadhya (Easily curable) if lifestyle and diet are managed well and treatment is followed for 2-3 weeks.

COMPARISON TABLE – AYURVEDIC vs MODERN TREATMENT

A. MUTRAKRICHRA (DYSURIA)

Aspect	Ayurveda	Modern Medicine
Name	Mutrakrichra (Pittaja/Vataja/Kaphaja etc.)	Dysuria / Urinary Tract Infection (UTI)
Causative Factors	Pitta prakopa, vegadharana, ahara-vihara dosha	Bacterial infection (E. coli), poor hygiene
Dosha/Dushya Involved	Mainly Pitta, sometimes Vata	Not applicable
Diagnosis	Rogi-Roga Pariksha (Nidana Panchaka)	Urine routine, culture, ultrasound
Treatment Principle	Pitta-shamana, Mutrala, Srotoshodhana	Antibiotics, anti-inflammatory drugs
Main Medicines	Chandraprabha Vati, Gokshuradi Guggulu, Varunadi Kwath, Punarnava	Nitrofurantoin, Ciprofloxacin, Paracetamol
Supportive Therapy	Pathya (cool diet, coconut water, barley)	Hydration, urinary alkalinizers
Panchakarma	Basti (if chronic), Parisheka (external)	Not applicable
Outcome	Long-term relief, addresses root cause	Fast symptomatic relief but recurrence possible
Side Effects	Minimal when properly used	Antibiotic resistance, GI upset

B. MUTRAGHATA (URINARY RETENTION)

Aspect	Ayurveda	Modern Medicine
Name	Mutraghata (Various types: Vatakundalika, etc.)	Urinary Retention
Causative Factors	Vata prakopa, obstruction, Apana vata dushti	Prostatic enlargement, stones, neurological
Dosha/Dushya Involved	Apana Vata, Mutravaha Srotas	Not applicable
Diagnosis	Clinical features + Ayurvedic assessment	USG, post-void residual volume, PSA
Treatment Principle	Vatanulomana, Mutrala, Basti suddhi	Catheterization, alpha-blockers, surgery
Main Medicines	Dashmool Kwath, Varunadi Kwath, Yavakshar, Trivrut lehya	Tamsulosin, Finasteride, surgery if needed
Supportive Therapy	Hot fomentation, medicated enema	Bladder training, hydration
Panchakarma	Basti (Niruha & Anuvasana), Abhyanga	Not applicable
Outcome	Gradual correction & restoration of function	Immediate relief; surgical intervention if needed
Side Effects	Minimal, improves overall balance	Risk of infection, surgery side effects

- **Note:**

  - Ayurvedic treatment focuses on **root cause removal**, **balancing doshas**, and **restoring normal physiology**.
  - Modern treatment emphasizes **rapid symptomatic relief** and is often used in **acute conditions**, but may require **long-term medication or surgery** in chronic cases.

Case History Format for Shotha & Vidradhi

1. Demographic Details

Parameter	Details
Name	
Age	
Sex	
Address	
Contact Number	
Occupation	
Date of Examination	
IP/OP Number	

2. Chief Complaints

- Swelling (स्थूलता / शोथ) - site, size, duration
- Pain (शूल) - type, severity, radiation
- Discoloration (वर्ण विकृति) - reddish, bluish, etc.
- Discharge (in Vidradhi) – pus, blood, smell, etc.
- Fever, burning sensation, etc.
- Associated symptoms (if any)

3. History of Present Illness

- Onset – sudden/gradual
- Duration – since how many days
- Progression – increasing/decreasing/static
- Aggravating & relieving factors
- Any treatment taken (Ayurveda/Allopathy/Home remedies)

4. Past History

- Any history of similar complaints
- Past systemic illnesses: Diabetes, TB, Hypertension, etc.
- Any surgery or trauma
- Drug allergy

---

5. Family History

- Similar complaints in family
- Hereditary illnesses
- Genetic predispositions

---

6. Personal History

Parameter	Details
Diet	Vegetarian/Non-vegetarian
Appetite (Agni)	Normal / Low / High
Bowel habits	Regular / Constipated / Loose
Micturition	Normal / Painful / Scanty
Sleep	Sound / Disturbed
Addiction	Tobacco / Alcohol / Others
Exercise	Sedentary / Moderate / Active

---

7. Prakriti Examination (Constitutional Type)

- Vata / Pitta / Kapha or dual/tridoshic
- Based on **Deha Prakriti Pareeksha**

---

8. Vikriti (Disease-specific dosha imbalance)

- Identify predominant doshas involved in Shotha or Vidradhi
    - **Shotha**: Vataja, Pittaja, Kaphaja, Sannipataja, Raktaja
    - **Vidradhi**: Bahya or Abhyantara types (internal/external abscess), with doshic classification

9. Roga Nidana (Disease Diagnosis)

- Nidana Panchaka (for Shotha/Vidradhi):
    1. **Nidana (Causative factors)** – e.g., injury, infection, wrong food habits
    2. **Purvarupa (Prodromal symptoms)**
    3. **Rupa (Signs and symptoms)**
    4. **Upashaya/Anupashaya** – factors providing relief/aggravation
    5. **Samprapti** – Dosha-Dushya Sammurchana (pathogenesis)

---

10. Nidan Panchaka Table Example for Shotha

Component	Details (for Shotha)
Nidana	Abhighata, Viruddhahara, Snigdha/madhu sevana
Purvarupa	Laghu shopha, kandu, mandashoola
Rupa	Sthula, Ushna, Raga yukta shopha, daha
Upashaya	Sheeta lepana, Langhana
Samprapti	Vitiated Vata-Pitta obstructing Srotas

---

11. Ashtasthana Pareeksha (Eight-fold Ayurvedic Examination)

Sthana	Observation
Nadi	Vata/Pitta/Kapha dominant pulse
Mootra	Quantity, color, frequency
Mala	Consistency, frequency, color
Jihva	Coated / Pale / Moist
Shabda	Voice: clear/hoarse
Sparsha	Temperature, texture (smooth/hard)
Drik	Eyes: lusterless, red, etc.
Akruti	General body build & posture

---

12. Dashavidha Pareeksha (Tenfold Examination)

- Prakriti
- Vikriti
- Sara (Tissue excellence)

- Samhanana (Compactness of body)
- Pramana (Body measurement)
- Satmya (Suitability)
- Satva (Mental strength)
- Aahara Shakti (Food intake capacity)
- Vyayama Shakti (Exercise capacity)
- Vaya (Age)

---

13. Local Examination

- **Inspection**:
  - Site of Shotha/Vidradhi
  - Color change
  - Size, shape, elevation
- **Palpation**:
  - Tenderness, temperature, consistency (soft/firm/fluctuant)
  - Pulsation or thrill
- **Measurement**:
  - Size in cm/inches
  - Margins – regular/irregular
- **Discharge (if Vidradhi)**:
  - Color, consistency, smell, nature (purulent, serous, etc.)

---

14. Systemic Examination

- Respiratory
- Cardiovascular
- Abdominal
- Nervous system
  (To rule out systemic involvement)

---

15. Provisional Diagnosis (Roga-Vyadhi Name)

- Based on Ayurvedic Samprapti
  - e.g., *Pittaja Vidradhi* / *Kaphaja Shotha*

---

16. Differential Diagnosis

- In Ayurveda and Modern terms
  - Shotha: Cellulitis, edema
  - Vidradhi: Abscess, Furuncle, Carbuncle, etc.

---

17. Investigations (if needed)

- Blood: CBC, ESR, CRP
- Imaging: USG (for deep abscess)
- Swab culture (if discharge present)

---

18. Treatment Principles (Chikitsa Sutra)

- **Shotha**:
  - Langhana, Rukshana, Virechana, Lepana, Basti
- **Vidradhi**:
  - Shodhana (if pus collection), Shamana, Sneha, Virechana
  - *Yavakshara lepa*, *Panchavalkala kwath*, etc.

CASE HISTORY- SHOTHA & VIDRADHI

1. Demographic Details

Parameter	Details
Name	Mr. Rajesh Kumar
Age	42 years
Sex	Male
Address	Varanasi, Uttar Pradesh
Contact Number	9876543210
Occupation	Shopkeeper
Date of Examination	01-May-2025
IP/OP Number	OP-1025

2. Chief Complaints

- Swelling on the left foot since 7 days
- Pain and burning sensation in the swelling area
- Mild reddish discoloration over the swelling

3. History of Present Illness

- Sudden onset of swelling after a minor injury near the ankle
- Swelling gradually increased over 3–4 days
- Pain is throbbing and increases on walking
- Local heat and mild fever present
- No medication taken prior to this consultation

4. Past History

- No history of diabetes, hypertension, or tuberculosis
- No previous similar complaints
- No known drug allergy

5. Family History

- No significant illness in family

6. Personal History

Parameter	Details
Diet	Mixed
Appetite (Agni)	Reduced
Bowel habits	Constipation occasionally
Micturition	Normal
Sleep	Disturbed due to pain
Addiction	Occasional tobacco chewing
Exercise	Minimal physical activity

7. Prakriti Examination

- **Pitta-Vata Prakriti**

8. Vikriti (Dosha Involved)

- Vata-Pittaja Shotha (based on signs of pain, burning, redness)

9. Roga Nidana (Diagnosis) for Shotha

Nidana Panchaka Component	Observations
Nidana	Abhighata (trauma), Amla–Lavana ahara, Divaswapna
Purvarupa	Slight stiffness, mild itching prior to visible swelling
Rupa	Pain, swelling, redness, heat, burning
Upashaya	Relief with cold application
Samprapti	Vata-Pitta dushti → Raktavaha srotas avarodha

10. Ashtasthana Pareeksha

Sthana	Observation
Nadi	Pittavata gati
Mootra	Yellowish, normal flow
Mala	Hard stools
Jihva	Slightly coated, dry
Shabda	Normal
Sparsha	Local warmth, tenderness
Drik	Slight conjunctival injection
Akruti	Medium build, slight fatigue

---

11. Dashavidha Pareeksha

- **Prakriti**: Pitta-Vata
- **Vikriti**: Vata-Pittaja dushti
- **Sara**: Rakta sara (moderate)
- **Samhanana**: Medium
- **Pramana**: Moderate height/weight
- **Satmya**: Madhura, Tikta
- **Satva**: Madhyama
- **Aahara Shakti**: Reduced
- **Vyayama Shakti**: Low
- **Vaya**: Madhyama (42 yrs)

---

12. Local Examination

- **Site**: Left ankle and foot
- **Inspection**: Swelling approx. 6x4 cm, reddish skin
- **Palpation**: Tender, warm, firm
- **Discharge**: No pus/discharge
- **Mobility**: Restricted due to pain

---

13. Systemic Examination

- Respiratory: Normal
- Cardiovascular: Normal
- Abdominal: Soft, non-tender
- CNS: Intact

---

14. Provisional Diagnosis

- **Vata-Pittaja Shotha** due to traumatic etiology

---

15. Differential Diagnosis

- *Ayurveda*: Raktaja Shotha, Abhighataja Shotha
- *Modern*: Post-traumatic cellulitis, local edema

---

16. Investigations

- CBC: WNL, mild leukocytosis
- ESR: Slightly raised
- Blood sugar: Normal
- X-ray: No fracture

---

17. Treatment Line of Management

Chikitsa Sutra:

- **Langhana + Shamana + Raktashodhana**
- **Local Lepana**: *Shatavaryadi Lepa* / *Dashanga lepa*
- **Internal Medicines**:
  - *Punarnavashtaka kwatha* – 40 ml BD before food
  - *Kaishora Guggulu* – 2 tabs TID
  - *Gandhaka Rasayana* – 250 mg BD
  - *Avipattikara churna* – for mild constipation

---

18. Follow-Up Plan

- Local signs of infection or pus: monitor daily
- Advise rest and leg elevation
- Review after 7 days or earlier if symptoms worsen

Vidradhi (Abscess) CASE HISTORY REPORT

1. Demographic Details

Parameter	Details
Name	Mrs. Sunita Devi
Age	36 years
Sex	Female
Address	Patna, Bihar
Contact Number	9876543211
Occupation	Homemaker
Date of Examination	01-May-2025
IP/OP Number	OP-2031

---

2. Chief Complaints

- Painful swelling in the right axilla since 5 days
- Pus discharge started 1 day ago
- Mild fever and general discomfort

---

3. History of Present Illness

- Initially developed a small painful lump in the axilla
- Became progressively larger and painful with local heat
- Yesterday, the swelling ruptured spontaneously and started discharging pus
- Associated mild fever, burning sensation, and restricted arm movement

---

4. Past History

- No history of diabetes, tuberculosis, or similar abscesses
- No recent trauma or skin infection
- No known drug allergies

---

5. Family History

- Non-contributory

---

6. Personal History

Parameter	Details
Diet	Vegetarian
Appetite (Agni)	Normal
Bowel habits	Regular
Micturition	Normal
Sleep	Disturbed due to pain
Addiction	None
Exercise	Minimal

---

7. Prakriti Examination

- **Kapha-Pitta Prakriti**

---

8. Vikriti (Dosha Involved)

- **Kapha-Pittaja Vidradhi** (due to features like pus formation, heaviness, yellowish discharge, inflammation)

---

9. Roga Nidana (Diagnosis) for Vidradhi

Nidana Panchaka Component	Observations
Nidana	Snigdha-Madhura-Amla ahara, divaswapna, kapha-aggravating diet
Purvarupa	Local stiffness, heaviness, pricking sensation
Rupa	Red-hot swelling, pus formation, pain, discharge
Upashaya	Relief on cold applications
Samprapti	Kapha-Pitta dushti → Rakta-Mamsa involvement → Vidradhi

10. Ashtasthana Pareeksha

Sthana	Observation
Nadi	Kapha-Pitta gati
Mootra	Normal
Mala	Normal, slightly foul-smelling
Jihva	Yellow-coated
Shabda	Normal
Sparsha	Hot, tender swelling
Drik	Slightly yellow sclera (Pitta sign)
Akruti	Mildly obese

11. Dashavidha Pareeksha

- **Prakriti**: Kapha-Pitta
- **Vikriti**: Kapha-Pittaja dushti
- **Sara**: Meda sara
- **Samhanana**: Madhyama
- **Pramana**: Above average weight
- **Satmya**: Madhura, Tikta
- **Satva**: Madhyama
- **Aahara Shakti**: Normal
- **Vyayama Shakti**: Low
- **Vaya**: Madhyama (36 yrs)

12. Local Examination

- **Site**: Right axilla
- **Inspection**: Ruptured abscess ~3x3 cm with oozing pus, reddish edges
- **Palpation**: Tender, warm, indurated margins
- **Discharge**: Thick yellowish pus with foul odor
- **Mobility**: Limited due to pain

13. Systemic Examination

- Respiratory: Normal
- Cardiovascular: Normal
- Abdomen: Mild bloating
- CNS: No deficit

---

14. Provisional Diagnosis

- **Kapha-Pittaja Bahya Vidradhi** (External abscess of Kapha-Pitta origin)

---

15. Differential Diagnosis

- *Ayurveda*: Pittaja/Kaphaja Vidradhi
- *Modern*: Pyogenic abscess, hidradenitis suppurativa

---

16. Investigations

- CBC: Mild leukocytosis
- ESR: Raised
- Blood sugar (Fasting): 102 mg/dL
- Pus culture and sensitivity: Sent for analysis

---

17. Treatment Line of Management

Chikitsa Sutra:

- **Shodhana + Ropana + Jantughna + Doshaghna**
- **Internal Medicines**:
  - *Triphala Guggulu* – 2 tabs TID
  - *Gandhaka Rasayana* – 250 mg BD
  - *Trivanga Bhasma* – 125 mg BD
  - *Mahamanjishthadi kwatha* – 40 ml BD before meals
- **Local Application**:
  - *Panchavalkala kashaya dhavana* (wound wash)
  - *Jatyadi Taila* for wound healing
- **Supportive Measures**:
  - Laghu ahara, Tikta rasa pradhana
  - Strict hygiene and warm compress if pus builds up

---

18. Follow-Up Plan

- Daily wound dressing with *Panchavalkala*
- Monitor for systemic symptoms or delayed healing
- Review in 3 days or earlier if condition worsens

Case History Format for Agnimandya

(Agnimāndya Roganāmaka Roganidāna Lakṣaṇāni)

1. Demographic Details

Parameter	Details
Name	
Age	
Sex	
Occupation	
Address	
Date of Consultation	
OPD/IPD Number	
Contact Number	

2. Chief Complaints (Pramukha Lakshana)

Mention duration and progression.

- Loss of appetite (Arochaka) – __ days/months
- Heaviness in abdomen (Gaurava)
- Bloating (Adhmāna)
- Indigestion (Ajīrṇa)
- Lethargy (Ālasya)
- Nausea (Utkleśa)
- Constipation or loose motion (Malabaddhata/Atisāra)

3. History of Present Illness (Vartamāna Roga Itihāsa)

- Onset: Gradual/Sudden
- Progression: Improving/Worsening
- Aggravating factors: Heavy meals, irregular eating, stress
- Relieving factors: Fasting, light food, herbal remedies

4. Past History (Atīta Roga)

- History of recurrent digestive issues
- Previous diagnosis (if any)
- Chronic diseases: Diabetes, Hypothyroidism, IBS
- Surgical history (esp. GI tract)

---

5. Family History (Kula Roga Itihāsa)

- Similar complaints in family?
- Genetic disorders?

---

6. Personal History (Vyaktigata Itihāsa)

Aspect	Observation
Diet (Āhāra)	Vegetarian/Non-vegetarian, nature of food
Appetite (Agnibala)	Mandāgni/Tikṣṇāgni/Samāgni/Viṣamagni
Bowel habits	Regular/Constipated/Loose
Sleep (Nidrā)	Normal/Disturbed
Stress level	High/Moderate/Low
Addictions	Alcohol, Tobacco, etc.
Exercise	Regular/Sedentary lifestyle

---

7. Ayurvedic Clinical Assessment

Ayurvedic Parameter	Findings
Rogamārga	Āmāśaya (GI tract)
Rogabala	Pravara/Madhyama/Alpa
Doshika involvement	Mainly Kapha + Vāta or Kapha + Pitta
Agnibala	Mandāgni (↓ digestion)
Āma presence	Yes/No (based on symptoms like mala grahaṇī, śabda pūrṇa udaram, etc.)
Srotodusti	Annavaha & Purīṣavaha srotas
Vyādhi sthāna	Annavaha srotas (GI Tract)
Samprāpti	Sāma or Nirāma (Depending on stage)

8. Examination (Parīkṣā)

- **Darśana (Inspection):** Coated tongue, dull face
- **Sparśa (Palpation):** Tender abdomen, cold extremities
- **Praśna (Interrogation):** Appetite pattern, sleep, digestion

9. Dashavidha Parīkṣā (Tenfold Examination)

Factor	Observation
Prakṛti	Vāta/Kapha/Pitta etc.
Vikṛti	Mandāgni, Ama lakṣaṇa
Sara	Māmsa/Rakta/Madhyama
Samhanana	Madhyama
Pramāṇa	Height/Weight
Satva	Avara/Madhyama/Pravara
Satmya	Śita/Usṇa/Ḍugdha etc.
Āhāraśakti	Alpāhāri/Pravṛttāhāraśakti
Vyāyamaśakti	Alpavyāyāmī/Regular
Vaya	Bāla/Madhyama/Vṛddha

10. Ashtavidha Parīkṣā (Eightfold Examination)

Parameter	Findings
Nadi (Pulse)	Kapha-dominant (slow, heavy)
Mutra (Urine)	Āma lakṣaṇa: turbid, scanty, frothy etc.
Mala (Stool)	Sticky, foul-smelling, incomplete
Jihvā (Tongue)	Coated (indicative of Āma)
Śabda (Voice)	Low energy, heaviness
Sparśa (Touch)	Cool skin
Dṛk (Eyes)	Dull, heavy eyelids
Ākṛti (Appearance)	Heavy, lethargic, unmotivated look

11. Provisional Diagnosis

Agnimāndya (Mandāgni due to Kapha/Vāta dominance)

- Type: Jāṭharāgnimandya/Āmāgnimandya
- Stage: Sama/Nirāma (based on clinical signs)

🔹 **12. Investigations (If Needed)**

- CBC
- Stool examination
- USG Abdomen (if chronic)
- Thyroid function test
- Blood glucose (if relevant)

🔹 **13. Management Plan (Chikitsā Siddhānta)**

Principle	Example Medicines/Actions
Dīpana (Appetizer)	Trikatu, Chitrakadi vati
Pācana (Digestive)	Hingvastak churna, Ajamodadi churna
Āma pachana	Guduchi, Shunthi, Pippali
Vāta-Kapha shāmaka	Vacha, Haritaki, Agnitundi vati
Langhana (light diet)	Yavāgu, Manda, Lajamanda
Pathya-Apathya guidance	Avoid heavy, cold, oily food; promote warm, light, digestible items
Panchakarma (if chronic)	Vamana (in Kapha dominance), Virechana (Pitta involvement), Basti (Vāta)

Sample Case History – Agnimandya

1. Demographic Details

Parameter	Details
Name	Mr. Ramesh Verma
Age	42 years
Sex	Male
Occupation	Office Clerk
Address	Nagpur, Maharashtra
Date of Consultation	01-May-2025
OPD/IPD Number	OPD/AY/2025/034
Contact Number	98765XXXXX

2. Chief Complaints

- Loss of appetite (Arochaka) – 2 months
- Heaviness in abdomen after meals (Gaurava)
- Bloating and gas (Adhmāna)
- Constipation – 2–3 days gap in bowel movement
- Lethargy and drowsiness (Ālasya)

3. History of Present Illness

Patient was apparently well 2 months back. Gradually developed loss of appetite, heaviness after food, and irregular bowel habits. He consumed street food regularly and has a sedentary lifestyle. No history of fever or major infection.

4. Past History

- No major past illness
- Occasional acidity in the past
- No surgery
- No diabetes or thyroid issues

5. Family History

- Mother has hypothyroidism
- No family history of GI disorders

6. Personal History

Aspect	Observation
Diet	Mixed (prefers fried/spicy foods)
Appetite	Poor (Mandāgni)
Bowel habits	Constipated
Sleep	Disturbed, unrefreshing
Stress level	Moderate (due to work pressure)
Addictions	Tea – 3 times/day
Exercise	Nil

7. Ayurvedic Clinical Assessment

Ayurvedic Parameter	Findings
Rogamārga	Āmāśaya
Rogabala	Madhyama
Doshika involvement	Kapha + Vāta
Agnibala	Mandāgni
Āma presence	Yes (tongue coating, malodorous stool)
Srotodusti	Annavaha & Purīṣavaha srotas
Vyādhi sthāna	Annavaha srotas
Samprāpti	Sāma (early stage with āma)

8. Examination

- **Darśana:** Coated white tongue, bloated belly
- **Sparśa:** Cold hands/feet, no tenderness
- **Praśna:** Reports heaviness post meals, belching

9. Dashavidha Parīkṣā

Factor	Observation
Prakṛti	Kapha-Vāta
Vikṛti	Mandāgni
Sara	Māmsa-sara
Samhanana	Madhyama
Pramāṇa	Overweight (BMI ~28)
Satva	Avara
Satmya	Shita, Dugdha, Tea
Āhāraśakti	Reduced
Vyāyamaśakti	Very Low
Vaya	Madhyama

10. Ashtavidha Parīkṣā

Parameter	Findings
Nadi	Manda, Kapha-dominant
Mutra	Yellowish, scanty
Mala	Sticky, foul-smelling, incomplete
Jihvā	Coated white tongue
Śabda	Dull voice
Sparśa	Cold to touch
Dṛk	Dull eyes
Ākṛti	Heavy body, sluggish movements

11. Provisional Diagnosis

Agnimāndya (Kapha-Vāta dominant) – Sama avasthā (presence of āma)

12. Investigations

- CBC – WNL
- Stool test – Mucus present, no parasites
- TSH – Normal
- FBS – 94 mg/dL

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13. Management Plan

Principle	Medicine / Action
Dīpana	Trikatu churna – 1g BD with warm water
Pācana	Hingvastak churna – 1g with food
Āma pachana	Guduchi decoction – 40 ml BD
Langhana	Manda (rice water), Yavāgu for 3 days
Pathya	Warm water, avoid fried/cold/oily food
Apathya	Tea, milk at night, heavy meals
Virechana (later)	To be planned after Āma removal

Comparison of Treatment: Ayurveda vs Modern Medicine for Agnimandya

Aspect	Ayurvedic Approach	Modern Medicine Approach
Disease Concept	*Agnimandya* – Due to imbalance in Agni and Doshas (mainly Kapha, Vāta)	Functional Dyspepsia / Indigestion – GI motility issues, dysbiosis
Treatment Principle	Dīpana (Appetizer), Pācana (Digestive), Āma pachana, Dosha shāmana, Langhana	Symptomatic relief, acid suppression, motility regulation
Causative Factors Addressed	Yes – Focus on Nidana Parivarjana (removal of cause)	Partially – Lifestyle advice may be given
Main Herbs/Drugs	- Trikatu, Chitrakadi vati - Hingvastak churna - Guduchi - Agnitundi vati	- Domperidone (prokinetic) - Omeprazole (PPI) - Antacids
Panchakarma (if needed)	- Vamana (if Kapha) - Virechana (if Pitta) - Basti (if Vāta)	Not applicable
Dietary Regulation	Essential – Pathya-Apathya based on dosha & agni	Advised – Avoid spicy, fatty foods, alcohol
Lifestyle Modification	Yoga, Dinacharya, avoiding day sleep, eating on time	General advice – exercise, stress control
Side Effects	Minimal, if used correctly and under guidance	Possible – nausea, headache, long-term PPI use risks
Long-term Outcome	Focuses on root cause, preventive and promotive health (Swasthya Rakshan)	Often relieves symptoms but recurrence is common
Personalization of Therapy	Highly individualized – based on Dosha, Prakriti, Agni, etc.	Mostly standard protocol

Case History Taking of Pandu Roga (Anemia) in Ayurveda

Pandu Roga (commonly known as Anemia in modern medicine) is primarily characterized by pallor, fatigue, weakness, and other symptoms related to decreased hemoglobin levels in the blood. In Ayurveda, it is believed to be caused by an imbalance in the **Rakta Dhatu** (blood tissue) due to a deficiency of **Rakta** or the impairment in its formation.

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1. Demographic Details

Field	Details
Name	(Patient's Name)
Age	(Patient's Age)
Sex	(Male/Female)
Occupation	(Occupation/Work Profile)
Address	(Residential Address)
Contact No.	(Phone Number)
Date of Visit	(Date of Consultation)

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2. Chief Complaints (Pradhan Roopa)

Complaint	Duration	Onset	Aggravating Factors	Relieving Factors
Pallor (paleness)	(Duration)	(Gradual/Acute)	(Factors worsening symptoms)	(Factors improving symptoms)
Fatigue/Weakness	(Duration)	(Gradual/Acute)	(Factors worsening symptoms)	(Factors improving symptoms)
Shortness of Breath (if any)	(Duration)	(Gradual/Acute)	(Factors worsening symptoms)	(Factors improving symptoms)
Dizziness/Headache	(Duration)	(Gradual/Acute)	(Factors worsening symptoms)	(Factors improving symptoms)

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3. Medical History (Roga Parichaya)

Aspect	Details
Past Medical History	Any history of previous illnesses (e.g., chronic infections, blood loss, gastrointestinal issues)
Family History	Any hereditary or family history of anemia, blood disorders, or chronic illnesses
Menstrual History	In females, detailed menstrual history (frequency, amount, duration, irregularities, etc.)
Dietary History	Diet habits, vegetarian or non-vegetarian, frequency of iron-rich foods, use of antacids, etc.
Surgical History	Any past surgeries, especially related to bleeding or the digestive system
Medication History	Any ongoing medications (including iron supplements, blood thinners, etc.)

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4. Social History (Samajik Parichaya)

Aspect	Details
Lifestyle	Smoking, alcohol consumption, drug usage, etc.
Physical Activity	Type and frequency of physical activity or exercise.
Sleep Patterns	Hours of sleep, disturbances, quality of sleep, and any sleep disorders.
Stress Levels	Mental and emotional stress factors, family or work-related pressures.
Living Conditions	Environmental exposure (e.g., pollution, temperature, work environment).

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5. Symptoms Associated with Pandu Roga (Ayurvedic Perspective)

- **Rakta Kshaya (Decrease in Blood)**: Pallor, fatigue, and weakness due to loss of Raktadhatu.
- **Daha (Burning Sensation)**: May present as general body heat or sensation of heat due to disturbed Pitta.
- **Angamarda (Body Ache)**: Weakness and general body discomfort due to reduced blood circulation.
- **Shvasa (Shortness of Breath)**: Due to less oxygen-carrying capacity of blood.
- **Chardi (Nausea)**: May accompany the condition in some patients due to poor digestion or metabolism.
- **Trishna (Excessive Thirst)**: Often seen in cases with significant blood loss or dehydration.

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6. Physical Examination (Sharir Pariksha)

Examination	Findings
General Appearance	Pale skin, lips, and conjunctiva (suggestive of anemia).
Pulse (Nadi)	Weak, slow pulse, or tachycardia depending on severity.
Tongue	Pale, sometimes with a white coating (due to Kapha imbalance).
Abdomen	Tenderness (if related to blood loss or digestive disturbances).
Hydration Status	Signs of dehydration (dry skin, mucous membranes).

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7. Laboratory Investigations (If Applicable)

Test	Results
Hemoglobin (Hb)	(Low/Normal/High)
RBC Count	(Decreased/Normal/Increased)
Serum Ferritin	(Low/Normal/High)
MCV (Mean Corpuscular Volume)	(Decreased/Normal/High)
Serum Iron Levels	(Low/Normal/High)
Peripheral Blood Smear	(Indicative of type of anemia)

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8. Ayurvedic Diagnosis (Vyadhi Nirnaya)

- **Rakta Kshaya (Decrease in Blood)** due to the imbalance of **Pitta** and **Vata Dosha**.
- **Kleema (Malnourishment)** if the root cause is improper diet or digestion.
- **Srotas Dushti** (microcirculatory channels blockages) due to toxins or imbalanced digestion.

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9. Ayurvedic Treatment Plan

Therapeutic Measures	Details
Herbal Remedies	Ashwagandha, Guduchi, Gokshura, or other herbs to strengthen **Rakta Dhatu** and improve blood.
Panchakarma	Detoxification through treatments like **Vamana** (emesis) or **Virechana** (purgation) if required.
Dietary Modifications	Iron-rich foods like leafy greens, jaggery, and pomegranate.
Lifestyle Modifications	Stress management and adequate sleep.
Raktamokshana (Blood Letting)	In some cases, **Raktamokshana** (bloodletting) may be advised if blood toxins are suspected.

10. Follow-up and Monitoring

- Regular monitoring of **hemoglobin levels** and **overall health** to assess treatment effectiveness.
- Periodic **blood tests** to track **iron** and **RBC** levels.

Case History of Pandu Roga (Anemia)

Demographic Details:

Field	Details
Name	Priya Sharma
Age	29 years
Sex	Female
Occupation	Software Engineer
Address	Mumbai, Maharashtra
Contact No.	9876543210
Date of Visit	1st May 2025

Chief Complaints (Pradhan Roopa):

Complaint	Duration	Onset	Aggravating Factors	Relieving Factors
Pallor (paleness)	3 weeks	Gradual	Stress, irregular eating habits	Rest, consumption of iron-rich foods
Fatigue/Weakness	2 weeks	Gradual	Long working hours, irregular sleep	Adequate sleep, hydration
Dizziness	1 week	Sudden	Physical exertion, prolonged standing	Rest, consumption of fluids
Shortness of Breath	1 week	Gradual	During physical activity	Rest, slow breathing

Medical History (Roga Parichaya):

Aspect	Details
Past Medical History	No significant past medical issues, but reports occasional acidity and mild headaches.
Family History	No family history of anemia or chronic blood disorders.
Menstrual History	Regular periods, 5-6 days, medium flow, no clots. Occasionally, mild pain during menses.
Dietary History	Vegetarian, low intake of iron-rich foods like spinach, beans. Prefers processed foods.
Surgical History	No history of surgeries.
Medication History	No ongoing medication. Occasionally takes painkillers for headaches.

Social History (Samajik Parichaya):

Aspect	Details
Lifestyle	Non-smoker, does not consume alcohol.
Physical Activity	Sedentary lifestyle with minimal physical activity due to work.
Sleep Patterns	Sleeps 5-6 hours a night due to work deadlines and irregular schedules.
Stress Levels	High work-related stress, often facing tight deadlines.
Living Conditions	Urban area, decent living conditions, no significant environmental stress.

Symptoms Associated with Pandu Roga (Ayurvedic Perspective):

- **Rakta Kshaya**: Pallor, fatigue, and weakness due to decreased blood.
- **Daha**: Mild burning sensation in the body due to increased Pitta.
- **Angamarda**: General body aches after prolonged sitting or standing.
- **Shvasa**: Shortness of breath after physical exertion.
- **Chardi**: Occasional nausea, especially after long hours of work.

Physical Examination (Sharir Pariksha):

Examination	Findings
General Appearance	Pale skin, pale lips, and conjunctiva indicating possible anemia.
Pulse (Nadi)	Weak pulse, slightly elevated due to mild dehydration.
Tongue	Pale, slightly dry with a white coating.
Abdomen	Non-tender, normal bowel sounds.
Hydration Status	Mild dehydration; dry lips and mouth.

Laboratory Investigations (If Applicable):

Test	Results
Hemoglobin (Hb)	8.5 g/dL (Low)
RBC Count	3.5 million/µL (Decreased)
Serum Ferritin	12 ng/mL (Low)
MCV (Mean Corpuscular Volume)	75 fL (Decreased)
Serum Iron Levels	30 µg/dL (Low)
Peripheral Blood Smear	Microcytic hypochromic anemia.

Ayurvedic Diagnosis (Vyadhi Nirnaya):

- **Rakta Kshaya (Blood Deficiency)**: Due to imbalance of **Pitta** and **Vata** doshas.
- **Kleema (Malnourishment)**: Due to poor diet, low iron intake, and irregular eating habits.
- **Srotas Dushti**: Impaired circulation leading to inadequate blood formation.

Ayurvedic Treatment Plan:

Therapeutic Measures	Details
Herbal Remedies	- **Ashwagandha**: To improve strength and vitality.
	- **Guduchi**: To purify and rejuvenate blood.
	- **Punarnava**: To improve blood circulation and kidney function.
Panchakarma	**Virechana** (purgation) to eliminate excess Pitta dosha, which may contribute to fatigue.
Dietary Modifications	- Iron-rich foods: Green leafy vegetables, lentils, jaggery, pomegranate.
	- Avoid processed foods, tea, and coffee with meals, as they inhibit iron absorption.
Lifestyle Modifications	- Increase sleep to at least 7-8 hours per night.
	- Regular, light physical activity like walking or yoga to improve blood circulation.
Stress Management	Techniques like meditation and pranayama (breathing exercises) to reduce work-related stress.

Follow-up and Monitoring:

- **Next Visit**: After 2 weeks to reassess hemoglobin levels and overall symptoms.
- **Blood Tests**: Regular monitoring of iron levels and complete blood count (CBC) every 4 weeks.
- **Diet**: Continue iron-rich diet and herbal treatment.

This case of **Pandu Roga** in a 29-year-old female with pallor, fatigue, and decreased hemoglobin levels was diagnosed as **Rakta Kshaya** due to poor diet and high work stress. Ayurvedic treatment with a combination of **herbal remedies**, **dietary changes**, and **lifestyle modifications** is advised.

Comparison of Treatment for Pandu Roga (Anemia) in Ayurveda and Modern Medicine

Aspect	Ayurvedic Treatment	Modern Medicine Treatment
Underlying Cause	Imbalance in **Rakta Dhatu** due to **Vata** and **Pitta**.	Iron deficiency, vitamin B12 deficiency, blood loss, etc.
Approach	Holistic approach, focusing on balancing doshas and rejuvenating **Rakta Dhatu**.	Symptomatic treatment and correction of underlying deficiency.
Dietary Recommendations	Iron-rich foods (leafy vegetables, lentils, jaggery), avoiding caffeine with meals.	Iron supplements (ferrous sulfate), vitamin B12, folic acid.
Herbal Remedies	**Ashwagandha**, **Guduchi**, **Punarnava**, **Triphala**, **Shatavari**.	Not commonly used in mainstream medicine, but iron-rich foods can be recommended.
Panchakarma Treatment	**Virechana** (purgation) to balance **Pitta** and improve digestion.	Not used; modern medicine focuses more on pharmaceutical interventions.
Pharmaceuticals	No direct equivalent, but **Rasa Shastra** preparations may be used to rejuvenate blood.	**Iron supplements** (oral or IV), **erythropoiesis-stimulating agents** if needed.
Treatment Goal	Rebuild and rejuvenate **Rakta Dhatu**, balance doshas, detoxify body.	Restore normal hemoglobin levels and iron stores, alleviate symptoms.
Monitoring	Regular assessment of symptoms, pulse, and physical appearance (paleness, fatigue).	Regular blood tests (hemoglobin, serum iron, ferritin, RBC count).
Lifestyle Modifications	Stress management, adequate sleep, physical activity like yoga, and regular meals.	Dietary changes, avoid blood loss, stress management, proper sleep hygiene.
Time for Results	Gradual improvement over weeks to months, depending on severity.	Usually quicker, with improvement seen in a few weeks with iron supplementation.
Side Effects	Rare if done correctly; excessive use of herbs may cause imbalance.	GI irritation, constipation, and other side effects from iron supplements.
Cost	Herbal treatment and diet changes are often less expensive.	Iron supplements and regular blood tests may be costly depending on the regimen.

Case History Taking – *Vrana* (Wound/Ulcer)

1. Demographic Details

Parameter	Details
Name	
Age	
Gender	
Address	
Occupation	
Date of Examination	
IP/OP No.	
Contact Number	

2. Chief Complaints

- Duration
- Site of wound
- Pain / Discharge / Odor
- Non-healing or recurrent

3. History of Present Illness

- Mode of onset (traumatic/spontaneous)
- Progression (increasing/decreasing/static)
- Associated symptoms (burning, itching, fever, etc.)

4. Past Medical & Surgical History

- Previous wound at the same site?
- Any surgeries done?
- Diabetes, hypertension, TB, leprosy, etc.
- Known allergies

5. Family History

- Any similar condition in family?
- Genetic predisposition (e.g., DM, leprosy)

6. Personal History

Parameter	Details
Diet	Vegetarian/Mixed
Appetite	Good / Poor
Bowel habits	Regular / Constipated
Sleep	Sound / Disturbed
Addictions	Smoking / Alcohol etc.

7. Socioeconomic Status

- Hygiene practices
- Living conditions (sanitation, footwear)
- Occupation-related trauma risk

8. Local Examination of *Vrana*

Feature	Observation
Site	
Number of wounds	
Size (length × width × depth)	
Shape	
Margins	Regular / Irregular
Edges	Raised / Undermined / Sloping
Floor	Granulating / Slough / Necrosis
Discharge	Type (serous/purulent/bloody) and amount
Smell	Foul / Odorless
Pain	Nature and severity
Surrounding skin	Redness / Induration / Pigmentation
Temperature	Local rise of temperature

9. Systemic Examination

- Pulse, BP, Temp, Respiration
- Cardiovascular, Respiratory, Abdomen
- Neurological examination (especially for diabetic foot ulcers)

10. Ayurvedic Parameters

Ayurvedic Concept	Observation / Notes
Nidana (Causes)	Trauma, infection, dosha dushti, etc.
Dosha Involvement	Vataja / Pittaja / Kaphaja / Sannipata
Vrana Bheda (Type)	Shuddha, Dushta, Nija, Agantuja, etc.
Vrana Lakshana	Based on classical texts (e.g., Ashtanga Hridaya)
Dhatu Involvement	Rasa, Rakta, Mamsa, Meda etc.
Srotas Involved	Rakta vaha, Mamsa vaha
Rogamarga	Bahya (external)
Roga Avastha	Poorva / Pradhana / Upashaya
Prakriti	Vata / Pitta / Kapha / Sama
Sara / Satva / Satmya	As applicable
Desha / Kala	Jangala / Anupa / Sadharana etc.

11. Investigations

- CBC, ESR, Blood Sugar, Wound swab culture
- Imaging if needed (X-ray for osteomyelitis)
- Ayurvedic: Dashavidha pariksha, Nadi pariksha (if relevant)

12. Provisional Diagnosis

- Modern + Ayurvedic naming (e.g., Chronic ulcer – *Dushta Vrana*)

13. Treatment History

- Past medications/surgical interventions
- Ayurvedic treatments taken earlier

14. Planned Management

- **Shodhana** (surgical debridement, if needed)
- **Shamana** (internal medicines, local applications)
- **Vrana Ropana** dravyas (healing agents)
- Diet and lifestyle guidance

Vrana Case History – Sample

1. Demographic Details

Parameter	Details
Name	Mr. Ram Kumar
Age	52 years
Gender	Male
Address	Kanpur, Uttar Pradesh
Occupation	Farmer
Date of Examination	01-May-2025
IP/OP No.	OP/1453
Contact Number	XXXXX-XXXXX

2. Chief Complaints

- Non-healing ulcer on right leg since 2 months
- Pain and foul-smelling discharge from wound
- Occasional fever

3. History of Present Illness

- Initially developed a small blister after minor injury during farming.
- Wound gradually increased in size, with pus formation.
- Pain became continuous and disturbing.
- Tried local ointments with no significant improvement.

4. Past Medical History

- Known diabetic for 6 years
- No past surgeries
- No history of tuberculosis or leprosy

5. Family History

- Father was also diabetic

6. Personal History

Parameter	Details
Diet	Mixed
Appetite	Moderate
Bowel habits	Constipated
Sleep	Disturbed due to pain
Addictions	Tobacco chewing

7. Socioeconomic Status

- Poor hygiene due to outdoor work
- Walks barefoot occasionally
- Limited access to medical facilities

8. Local Examination of Vrana

Feature	Observation
Site	Lower third of right leg, lateral side
Number of wounds	Single
Size	4 cm × 3 cm × 0.5 cm
Shape	Irregular
Margins	Indurated
Edges	Undermined
Floor	Slough present
Discharge	Purulent, yellowish, foul-smelling
Smell	Foul
Pain	Moderate, continuous
Surrounding skin	Inflamed, discolored
Temperature	Local rise in temperature

9. Systemic Examination

- Pulse: 86/min
- BP: 132/84 mmHg
- Temp: 99°F
- Respiration: 18/min
- CVS & RS: NAD
- Abdomen: Soft, non-tender

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10. Ayurvedic Parameters

Ayurvedic Concept	Observation
Nidana	Bahiya abhighata (external trauma) + Prameha
Dosha Involvement	Vata-Kapha predominant
Vrana Bheda	*Dushta Vrana*
Lakshana	Vedana (pain), Srava (discharge), Gandha (foul smell), Krisha mamsa
Dhatu	Rasa, Rakta, Mamsa
Srotas	Rakta vaha, Mamsa vaha
Rogamarga	Bahya
Avastha	Pradhana
Prakriti	Vata-Kapha
Desha / Kala	Anupa desha (humid), Grishma ritu (summer)

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11. Investigations

- CBC: Normal
- ESR: 28 mm/hr
- RBS: 198 mg/dL
- Wound swab: *Staphylococcus aureus* growth
- X-ray: No underlying bone involvement

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12. Provisional Diagnosis

- **Modern**: Chronic infected ulcer in diabetic patient
- **Ayurveda**: *Dushta Vrana* associated with *Prameha*

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13. Treatment History

- Previously used topical antibiotics and antiseptic powders.
- No Ayurvedic treatment taken before.

14. Planned Management

🔄 ***Shodhana*** **(Cleansing):**

- Daily wound dressing with **Triphala kwatha**
- Application of **Jatyadi Taila**

💊 ***Shamana*** **(Internal Medicines):**

- **Guduchi ghan vati** – Rasayana & immunity
- **Triphala guggulu** – Vrana shodhana
- **Chandraprabha vati** – For Prameha

🌿 ***Vrana Ropana Yoga*****:**

- **Madhu + Haridra** application for ropana

🍛 **Pathya-Apathya:**

- Avoid oily, heavy, fermented food
- Include green leafy vegetables, barley, and old rice
- Proper sleep and stress control

Comparative Table: Ayurvedic vs. Modern Treatment of *Dushta Vrana*

Aspect	Ayurvedic Treatment	Modern Treatment
Diagnosis	*Dushta Vrana* with *Prameha dosha dushti*	Chronic infected ulcer in a diabetic patient
Wound Cleaning (Shodhana)	Triphala kwatha, Panchavalkala kwatha, Nimba decoction for vrana dhavana	Normal saline or antiseptic solutions like Povidone-iodine, Hydrogen peroxide
Local Application	Jatyadi Taila, Madhu-Haridra lepa, Nimba oil	Topical antibiotics (e.g., Neomycin, Fusidic acid), Antiseptic creams
Oral Medications (Shamana)	Triphala Guggulu, Guduchi Ghan Vati, Chandraprabha Vati, Guggulu Tikta Kashaya	Systemic antibiotics (Amoxicillin-clavulanate, Cefuroxime, or based on culture)
Wound Healing Agents	Madhu, Haridra, Ghrita-based lepas (e.g., Ropana ghrita)	Hydrocolloid dressings, Silver sulfadiazine cream
Blood Sugar Control	Chandraprabha Vati, Nishamalaki, lifestyle and dietary control	Oral hypoglycemics / Insulin therapy
Surgical Intervention	*Shastra karma* (debridement if slough), *Kshara karma* (if needed), leech therapy	Surgical debridement, skin grafting if large area involved
Supportive Care	Rasayana therapy (Guduchi, Amalaki), Pathya-Apathya ahara-vihara	Nutritional support, Vitamin C, Zinc, Glycemic control
Follow-up & Recurrence Prevention	Rasayana chikitsa, regular dressing, diabetic care	Regular dressing, wound monitoring, diabetic foot care

Case History Taking Format for Kampa Vata (कम्पवात)

1. Demographic Details

Parameter	Details
Name	
Age	
Gender	
Marital Status	
Occupation	
Address	
Contact Number	
OPD/IPD Number	
Date of Consultation	

2. Chief Complaints (प्रमुख शिकायतें)

- Involuntary tremors (कंपन)
- Rigidity/stiffness (कठोरता)
- Slowness of movement (गतिशीलता में कमी)
- Postural imbalance (स्थिति में असंतुलन)
- Speech difficulty (वाणी में कठिनाई)
- Drooling, fatigue, or constipation (if present)

3. History of Present Illness (वर्तमान रोग का इतिहास)

- Onset: Sudden / Gradual
- Duration: How long symptoms have been present
- Progression: Static / Progressive / Fluctuating
- Aggravating & relieving factors
- Associated symptoms

4. Past Medical & Surgical History (पूर्व रोग / शल्य चिकित्सा इतिहास)

- Hypertension, Diabetes, Stroke
- Head trauma
- History of medications (neuroleptics, antipsychotics)
- Any past Panchakarma therapies taken

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5. Family History (पारिवारिक इतिहास)

- Any history of Parkinsonism, tremors, or neurological disorders in family

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6. Personal History (व्यक्तिगत इतिहास)

Habit	Details
Diet (Shakahari / Mansahari)	
Bowel & Bladder habits	
Sleep (sound/disturbed)	
Addiction (tobacco, alcohol)	
Stress levels	

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7. Ayurvedic Examination (आयुर्वेदिक दृष्टिकोण से परीक्षण)

A. Rog Pariksha (Disease Examination)

Examination Type	Findings
Nidana (Causative factors)	Ruksha, Sheeta, Laghu ahara, Stress
Samprapti (Pathogenesis)	Vata prakopa → Srotorodha → Majja dushti
Dosha	Vata Pradhana (especially Vyana, Udana)
Dushya	Majja, Rasa, Snayu, Asthi
Srotas	Majjavaha, Rasa, Manovaha
Srotodushti	Sanga / Vimarga gamana
Udbhavasthana	Pakvashaya
Vyaktasthana	Mastishka / Shira
Adhisthana	Mastishka, Indriya, Sandhi
Rogamarga	Abhyantara
Sadhyasadhyata	Krichchha Sadhya

B. Rogi Pariksha (Patient Examination)

Type	Details
Prakriti	Vataja / Vatapittaja / Vatakaphaja
Vikriti	Predominant Vata vitiation
Sara	Asthi / Majja / Snayu Sara
Samhanana	Medium / Weak
Satva	Avara / Madhyama
Satmya	Region-specific (Desha-satmya)
Ahara Shakti	Low / Medium
Vyayama Shakti	Decreased
Vaya	Usually Madhyama / Vriddha (40+)

🔹 8. Physical Examination

- **Gait**: Shuffling, slow, stooped posture
- **Tremors**: Resting tremors of hands (pill-rolling type)
- **Muscle Tone**: Rigidity
- **Reflexes**: Normal / brisk
- **Postural Instability**: Positive pull test
- **Speech**: Low volume, slurred

9. Investigations (if needed)

- MRI/CT Brain (to rule out stroke/tumor)
- Serum B12 / Thyroid profile
- Neurologist consultation if required

10. Diagnosis

- **Modern**: Parkinson's Disease / Parkinsonism
- **Ayurveda**: **Kampa Vata** – a Vata Vyadhi (Vatavyadhi)

11. Treatment Principles (Chikitsa Siddhanta)

Approach	Details
Vata Shamana	Medicated ghee, Rasayana, Snigdha ahara
Brimhana	Nourishing therapies – milk, ghee, Rasayana herbs
Srotoshodhana	Mild Panchakarma if strength allows
Majja dhatu poshana	Use of Medhya-Rasayana (e.g., Ashwagandha, Brahmi)
Basti Chikitsa	Musta, Rasna, Dashamoola, Ksheerabasti preferred

Sample Case History – Kampa Vata (Parkinsonism)

1. Demographic Details

Parameter	Details
Name	Mr. Harish Kumar
Age	62 years
Gender	Male
Marital Status	Married
Occupation	Retired Bank Manager
Address	Varanasi, Uttar Pradesh
Contact Number	XXXXXXXXXX
OPD/IPD Number	OPD/AY/2025/0342
Date of Consultation	01 May 2025

2. Chief Complaints

- Tremors in both hands for 2 years
- Stiffness in limbs, more in the morning
- Slowness in walking and daily activities
- Occasional imbalance while walking
- Low voice and constipation

3. History of Present Illness

- Symptoms started gradually 2 years ago with right-hand tremors
- Progressed slowly, now involves both hands and legs
- Difficulty in initiating movement
- Tremors reduce during sleep, increase with stress
- No history of head trauma or seizures

4. Past Medical History

- Hypertension for 8 years (on regular medication)
- No surgical history
- No known drug allergies

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5. Family History

- No similar illness in the family

---

6. Personal History

Habit	Details
Diet	Vegetarian
Bowel habits	Constipated
Sleep	Disturbed, shallow
Addictions	None
Stress	Moderate

---

7. Ayurvedic Examination

A. Rog Pariksha

Parameter	Finding
Nidana	Ruksha, Sheeta Aahara, Atichinta
Dosha	Vata Pradhana
Dushya	Majja, Rasa, Snayu
Srotas	Majjavaha, Rasa, Manovaha
Srotodushti	Sanga
Udbhavasthana	Pakvashaya
Vyaktasthana	Mastishka
Rogamarga	Abhyantara
Sadhyasadhyata	Krichchha Sadhya

B. Rogi Pariksha

Parameter	Finding
Prakriti	Vata-Pittaja
Vikriti	Vata vriddhi
Sara	Snayu / Majja Sara
Samhanana	Madhyama
Satva	Avara
Satmya	Desha Satmya
Ahara Shakti	Mand
Vyayama Shakti	Alp
Vaya	Vriddha (62 yrs)

---

8. Physical Examination

- **Gait**: Shuffling, stooped
- **Tremors**: Resting, pill-rolling type
- **Tone**: Cogwheel rigidity
- **Reflexes**: Normal
- **Speech**: Low, monotonous
- **Face**: Mask-like expression

---

9. Investigations

- MRI Brain: Normal age-related changes
- Serum B12: Mildly low
- Thyroid profile: Normal

---

10. Diagnosis

- **Modern**: Idiopathic Parkinson's Disease
- **Ayurveda**: Kampa Vata (Vatavyadhi)

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11. Chikitsa Siddhanta & Line of Treatment

Goal	Treatment
Vata Shamana	Ashwagandha, Rasna, Dashamoola preparations
Brimhana	Ksheerabasti, medicated ghee, nourishing diet
Rasayana & Majja poshan	Brahmi, Shankhapushpi, Guduchi, Mandukaparni
Panchakarma	Abhyanga with Mahanarayana taila, Swedana
Basti	Anuvasana & Niruha with Dashamoola + Ksheera
Diet & Lifestyle	Warm, oily, nourishing food; avoid dryness

Comparison of Treatment: Kampa Vata (Parkinson's Disease)

Aspect	Ayurvedic Treatment	Modern (Allopathic) Treatment
Diagnosis Term	Kampa Vata (कम्पवात) - A type of Vatavyadhi	Parkinson's Disease (Neurodegenerative Disorder)
Cause	Vata prakopa due to Ruksha, Sheeta, stress, ageing	Loss of dopamine-producing neurons in substantia nigra
Dosha Involved	Vata (Vyana, Udana)	Dopamine depletion (no dosha concept)
Pathogenesis (Samprapti)	Vata → Srotorodha → Majja dhatu dushti	Neuronal degeneration in basal ganglia
Main Treatment Principle	Vata Shamana, Brimhana, Rasayana, Panchakarma	Dopamine replacement / enhancement
Main Therapies	Abhyanga, Swedana, Basti, Nasya, Rasayana	Levodopa-Carbidopa, Dopamine agonists, MAO-B inhibitors
Internal Medications	Ashwagandha, Rasna, Dashamoola, Brahmi, Guduchi, Medhya Rasayanas	Levodopa, Ropinirole, Pramipexole, Selegiline
External Therapies	Taila Abhyanga, Shirodhara, Ksheerabasti	Physiotherapy, occupational therapy
Panchakarma	Ksheera Basti, Anuvasana/Niruha, Shirobasti, Nasya	Not applicable
Rasayana Chikitsa	Medhya Rasayana for brain nourishment (e.g. Brahmi, Mandukaparni, Shankhapushpi)	Not included in conventional treatment
Dietary Management	Warm, oily, nourishing, Vatahara ahara (milk, ghee, cooked food)	No specific diet, but protein timing is advised with Levodopa
Lifestyle Advice	Avoid cold, dry exposure; light yoga, pranayama	Fall prevention, structured exercise programs
Prognosis	Krichchha Sadhya (difficult to cure, but can be managed)	Progressive but manageable with medications
Focus	Root cause & dhatu-level correction + long-term balance	Symptomatic management & slowing progression

CASE HISTORY OF GALLSTONES (CHOLELITHIASIS)

1. Demographic Details

Parameter	Details (Example)
Name	Mrs. Radha Devi
Age	45 years
Sex	Female
Occupation	Housewife
Address	[Patient's address]
Date of Admission	[DD/MM/YYYY]
Hospital Number	[ID Number]
Marital Status	Married
Socioeconomic Status	Middle class (as per Kuppuswamy scale)

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2. Chief Complaints *(in chronological order)*

- Pain in the right upper abdomen – [duration]
- Nausea/vomiting – [duration]
- Fever (if any) – [duration]
- Yellowish discoloration of eyes (if present) – [duration]

---

3. History of Present Illness *(Point-wise)*

- Sudden onset, colicky pain in **right hypochondrium** or epigastrium
- Radiation of pain to the **right shoulder/back**
- Pain often precipitated by **fatty meals**
- Pain lasts for **30 minutes to a few hours**, often resolving spontaneously
- Associated **nausea or vomiting**
- No relief on change of posture
- **No history** of trauma or previous surgery
- If **fever** is present → consider **cholecystitis or cholangitis**
- If **jaundice** is present → consider **choledocholithiasis**
- No history of similar episodes in the past (or mention if recurrent)

4. Past History

- Similar episodes in the past?
- Known history of **diabetes, hypertension, hyperlipidemia**
- Past surgery: especially **abdominal surgeries**
- Hospitalizations for pain or jaundice
- History of any previous **ERCP/cholecystectomy**
- Any known **liver or pancreatic disease**

5. Personal History

Habit	Relevant Detail
Appetite	Normal/Reduced
Bowel habits	Normal/Constipation/Loose stools
Micturition	Normal/Burning/Color changes
Sleep	Disturbed due to pain?
Diet	Non-vegetarian/Fatty food intake
Addiction	Tobacco/Alcohol – Risk for hepatobiliary disease

6. Menstrual and Obstetric History *(in females)*

- Age at menarche and menopause (if applicable)
- Parity: Multiparity is a risk factor
- History of oral contraceptive pill use
- History of hormone replacement therapy

7. Family History

- Any family history of gallstones, jaundice, or liver disease

8. Socioeconomic and Environmental History

- Dietary habits: High fat, low fiber
- Sedentary lifestyle
- Access to medical care

---

9. Drug History

- Use of estrogen-containing drugs, lipid-lowering agents
- Painkillers (NSAIDs), antibiotics
- Any long-term medications

---

10. General Examination

Parameter	Observation
Built & Nourishment	Average/Obese (obesity = risk factor)
Pallor	Absent/Present
Icterus	Absent/Present (suggests bile duct obstruction)
Lymphadenopathy	Absent/Present
Edema	Absent/Present
Vitals	Pulse, BP, Temperature, RR, SpO_2

---

11. Abdominal Examination

- Inspection: Distension, scars, visible peristalsis
- Palpation: Tenderness in **right hypochondrium**, **Murphy's sign**
- Liver: Size, consistency, tenderness
- Gallbladder: Palpable (if enlarged)
- Percussion: Liver dullness
- Auscultation: Bowel sounds
- Check for signs of **peritonitis, mass, or ascites**

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12. Systemic Examination

- CVS: Rule out referred cardiac pain
- Respiratory: Rule out pneumonia (can mimic RUQ pain)
- CNS: To rule out systemic complications like sepsis
- Skin: Xanthomas (if hyperlipidemia)

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13. Provisional Diagnosis

Colicky right upper quadrant abdominal pain with nausea in a middle-aged female, possibly due to cholelithiasis.

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14. Differential Diagnoses

- Acute cholecystitis
- Choledocholithiasis
- Biliary colic
- Peptic ulcer disease
- Pancreatitis
- Hepatitis
- Right renal colic
- Lower lobe pneumonia (right)

SAMPLE DETAILED CASE HISTORY GALLSTONES (CHOLELITHIASIS)

1. Demographic Details

Parameter	Details
Name	Mrs. Sunita Sharma
Age	42 years
Sex	Female
Occupation	Housewife
Address	Lucknow, Uttar Pradesh
Date of Admission	01/05/2025
Hospital Number	2025/GS/087
Marital Status	Married
Socioeconomic Status	Middle class (Kuppuswamy scale)

---

2. Chief Complaints

- Pain in the **right upper abdomen** – 2 months
- **Nausea and occasional vomiting** – 1.5 months
- Pain aggravated after meals – 1 month

---

3. History of Present Illness

- Patient was apparently well 2 months ago when she developed **intermittent pain in the right upper abdomen**, described as **colicky and severe**, lasting for about **30–45 minutes** per episode.
- Pain is **non-radiating** initially, but sometimes radiates to the **right shoulder**.
- Often precipitated after **heavy or fatty meals**.
- Associated with **nausea** and **occasional vomiting**.
- No history of **fever**, **jaundice**, or **weight loss**.
- No urinary or bowel complaints.
- No history of trauma.

---

4. Past History

- No history of similar complaints before.
- No known diabetes, hypertension, or tuberculosis.
- No previous surgeries.
- No known allergies or chronic drug use.

---

5. Personal History

Habit	Detail
Appetite	Slightly reduced during pain episodes
Diet	Mixed diet; high in ghee/oil
Bowel habits	Normal
Micturition	Normal
Sleep	Disturbed due to pain
Addictions	None

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6. Menstrual and Obstetric History

- Regular menstrual cycles
- P4L4, all full-term normal deliveries
- No history of oral contraceptive use

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7. Family History

- Mother had gallstones and underwent cholecystectomy

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8. Drug History

- No history of long-term medication or OCP use

---

9. Socioeconomic and Environmental History

- Middle class
- Sedentary lifestyle
- Diet rich in fats/oil

---

10. General Examination

Parameter	Finding
Built & Nutrition	Moderately obese (BMI ~29)
Pallor	Absent
Icterus	Absent
Lymphadenopathy	Absent
Edema	Absent
Pulse	84 bpm
BP	122/78 mmHg
Temp	98.4°F
SpO_2	98% on room air

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11. Abdominal Examination

- **Inspection**: Abdomen normal, no visible swelling or scars
- **Palpation**:
  - Tenderness in **right hypochondrium**
  - **Murphy's sign**: Positive
  - No organomegaly
- **Percussion**: Normal liver dullness
- **Auscultation**: Bowel sounds present and normal

---

12. Systemic Examination

- CVS: S1 S2 normal
- Respiratory: Clear breath sounds
- CNS: Normal tone, power
- Skin: No xanthomas

---

13. Provisional Diagnosis

Recurrent biliary colic likely due to cholelithiasis in a middle-aged multiparous obese female.

14. Differential Diagnoses

- Acute/chronic cholecystitis
- Choledocholithiasis
- Biliary dyskinesia
- Peptic ulcer disease
- Pancreatitis

COMPARISON OF GALLSTONE TREATMENT: MODERN VS AYURVEDA

Aspect	Modern Medicine	Ayurveda
Basic Principle	Removal of the gallstones or gallbladder	Balancing **Pitta**, breaking **gallstone (Ashmari)**, improving digestion
Diagnosis Tools	Ultrasound (USG), LFTs, MRCP, ERCP	Clinical examination, Nadi Pariksha, Prakriti analysis, sometimes USG
First-line Treatment	Symptomatic: NSAIDs (e.g., Diclofenac), Antispasmodics	Digestive stimulants, **Pitta-shamak** herbs, mild pain relief herbs
Definitive Treatment	**Laparoscopic cholecystectomy**	Internal medications to **dissolve stones** + Panchakarma therapy
Medications (if non-surgical)	Ursodeoxycholic acid (UDCA) – for small cholesterol stones	Herbs like **Punarnava, Gokshura, Kulattha, Pippali, Turmeric, Triphala**
Surgical Intervention	Laparoscopic/Open Cholecystectomy	Not practiced; stones are dissolved/expelled gradually
Panchakarma Therapies	Not applicable	**Snehana, Swedana, Virechana, Basti (medicated enema)** for detoxification
Dietary Advice	Low-fat diet, avoid oily/spicy food	**Laghu Aahar**, easily digestible food, avoid **Guru, Snigdha Aahar** (heavy/oily foods)
Lifestyle Modifications	Weight loss, regular exercise	**Dinacharya, Yoga**, avoid sleeping after meals, reduce stress
Prevention	Control obesity, avoid rapid weight loss, diet change	Maintain Pitta balance, seasonal detox, proper digestion
Recurrence Prevention	Post-surgical diet and exercise	Regular use of liver tonics, digestion boosters (e.g., Trikatu, Avipattikar)
Side Effects/Risks	Surgery risks (bleeding, infection), drug side effects	Herbal interactions, slow response, not suitable for emergency/large stones
Time to Effect	Rapid (surgery is immediate)	Slower onset, may take weeks to months to dissolve stones
Emergency Management	Yes (e.g., ERCP for choledocholithiasis, antibiotics for cholecystitis)	No – Ayurveda is not suitable for emergencies

AYURVEDIC TREATMENT FOR GALLSTONES (पित्ताश्मरी)

Category	Details / Examples
🔹 **Main Herbs / Formulations**	
Punarnava (Boerhavia diffusa)	Diuretic, anti-inflammatory – helps reduce swelling and flush stones
Gokshura (Tribulus terrestris)	Lithotriptic – helps dissolve stones and promotes smooth urine flow
Kulattha (Horse gram)	Traditional remedy for stone dissolution; improves digestion
Triphala	Mild laxative, detoxifier – aids bowel movements and liver function
Pippali (Long pepper)	Enhances metabolism, aids digestion
Varunadi Kwatha / Varun Chaal (Crataeva nurvala)	Best-known for **litholytic (stone-breaking)** and anti-inflammatory properties
Chandraprabha Vati	Classic formulation – supports urinary tract, liver, and gallbladder health
Arogyavardhini Vati	For liver and biliary system cleansing
Avipattikar Churna	Relieves acidity, improves digestion (balances Pitta)
Phalatrikadi Kashaya	Liver stimulant, used in hepatobiliary disorders
Tamra Bhasma (Copper calx)	Sometimes used under supervision for stone-dissolving actions
Panchakarma Therapies	
Snehana (Oleation)	Internal/External – pre-procedure for detoxification
Swedana (Sudation)	Induces sweating – helps mobilize toxins and balance Doshas
Virechana (Purgation)	Especially for **Pitta-related stones** – removes excess bile
Basti (Medicated Enema)	Eliminates toxins from colon – used in chronic or systemic imbalance
Dietary Advice	
Avoid	Heavy, oily, fried, fermented foods; excessive spices; red meat
Prefer	Light, warm, digestible meals: khichdi, moong dal, buttermilk, boiled vegetables
Medicinal Foods	Horse gram soup (Kulattha Yusha), radish (Mooli), green leafy vegetables
Lifestyle Modifications	
Yoga & Pranayama	Asanas: Bhujangasana, Dhanurasana; Pranayama to reduce stress
Daily Routine (Dinacharya)	Regular meals, proper sleep, avoid day sleep after food
Seasonal Detox (Ritucharya)	Annual or biannual Panchakarma recommended