

EVALUATE THE EFFICACY OF AN AYURVEDIC TREATMENT REGIME ON CHRONIC KIDNEY DISEASE (CKD) PATIENT

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ABSTRACT

Chronic kidney disease (CKD) is a disease in which the renal mass is getting destruct progressively with irreversible sclerosis and loss of nephrons over a period of months to years, depending on the underlying etiology. Frothy urine, burning sensation during micturition and oliguria or anuria are the most prominent urinary symptoms of a CKD patient. The study was carried out to assess the therapeutic effect of an ayurvedic treatment line which was used to treat a CKD patient attended to ayurvedic CKD clinic, Madawachchiya. The patient was a 62 years old female, with a history of hypertension for eight years, presented with the symptoms like frothy urine, oliguria, itchiness of the body, backache, pain in both knee joints, loss of appetite and flatulence for nearly more than one and half years. She was diagnosed as a CKD patient by nephrology unit, Anuradhapura, Sri Lanka. Allopathic treatments were discontinued by her choice due to none improvement of the clinical symptoms. Patient was treated with a specific ayurvedic treatment line with external and internal treatments in which ama pachana, shodhana, virechana, muthrakaraka and shaman chikithsa were included. The symptoms were recorded according to a standard grading system. Investigations (serum creatine, GFR, UFR and USS) were done and blood pressure was recorded in regular intervals. The symptoms and the serum levels of creatinine were gradually decreased after 9 months of treatments, simultaneously GFR is markedly increased. Blood pressure levels were also remained within normal range during the time. It was observed that this treatment regimen was effective for this individual in lowering Serum Creatinine, increasing GFR and normalizing blood pressure.

Key words: CKD, Ayurvedic treatments, Serum Creatinine, GFR

Case Report

The study describes the clinical im-

provement and how the selected parameters of blood and urine had

changed of a patient with CKD, undergone only with Ayurvedic treatments. This study is carried out to assess the therapeutic effect of an ayurvedic treatment line, which was used to treat a CKD patient attended to ayurvedic CKD clinic, Madawachchiya. The patient was a 62 years old, female patient with the history of hypertension for eight years, presented with the symptoms like frothy urine, decreased frequency of urine (oliguria), itchiness of the body, fatigue, backache, pain in both knee joints, loss of appetite and flatulence for nearly more than one and half years. After considering the results of medical investigations such as Serum Creatinine, GFR, UFR, and Ultra Sound Scan, she was diagnosed as a CKD patient by nephrology unit, Anuradhapura, Sri Lanka in 10 May 2014. The patient has no family history of CKD. Five months of allopathic medical treatments were discontinued by herself due to non-improvement of her clinical symptoms. She found her getting more and more difficult with symptoms and decided to try Ayurvedic treatments. She attended to Medawachchiya clinic on December 2014. After careful observation of her doshic condition and clinical features, it could observe that her *Vata* and *Pitta* doshas

were prominent. In her medical reports, the Serum Creatinine was 2.47mg/dl, GFR was 21.1ml/min/1.73m² and urine protein was (++) . The blood pressure was recorded as 120/70mmHg. After thorough examination, the Ayurvedic treatment line was planned on the basis of Ayurvedic theories such as *amapachana*, *shodhana* and *shamana*. As there is no clear information mentioned in Ayurveda texts, about CKD or its etiopathogenesis or its symptoms, the fundamentals of *Mutra krichcha*/ *Mutra Ghata* and *Prameha* were basically concerned when planning the treatment regime. Internal and external treatments were included in the treatment line. Herbal powders, guggulu and kalka with different anupanas were used as internal treatments and herbal oils, paste applications (*paththu*), herbal balls for fomentation (*pinda*) used as external treatments. Instructions regarding the food and behaviors were given to the patient and strictly advised to have medicine in correct time and correct dose. She was observed once in every two weeks at the beginning and once a month in later periods. The symptoms were recorded according to a standard grading system once in 3 months' time. Serum Creatinine and GFR were investigated once in two

months, UFR once a month and USS at the beginning and after 9 months. She was told to record her blood pressure once in 2 weeks' time.

Results and Discussion

The results before and after treatments were observed as follows. After 2 weeks of the initial treatments, she found some comfort with the treat-

ments and decided to continue it. The most prominent clinical symptoms of CKD patients, such as backache, fatigue, Pain in knee joints, itchinness, loss of appetite, flatulence, frothy urine and oliguria were considered and graded. Clinical improvement of the symptoms like Backache, Fatigue and Pain in Knee Joints

Table 1: Grading system used to assess the symptoms like Backache, Fatigue and Pain in knee joints

Grades	
0	Not at all
1	Mild but not disturb to day to day activities
2	Little disturb to day today activities
3	Disturb to day to day activities
4	Very difficult to do daily activities

Fig :1

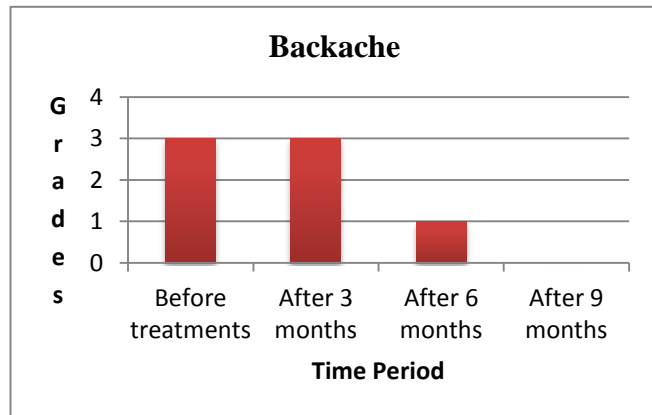


Fig : 2

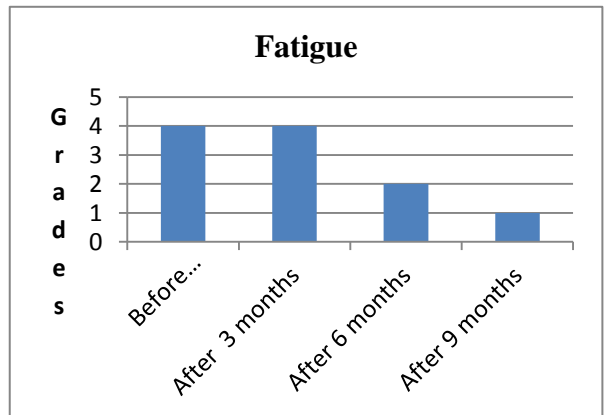
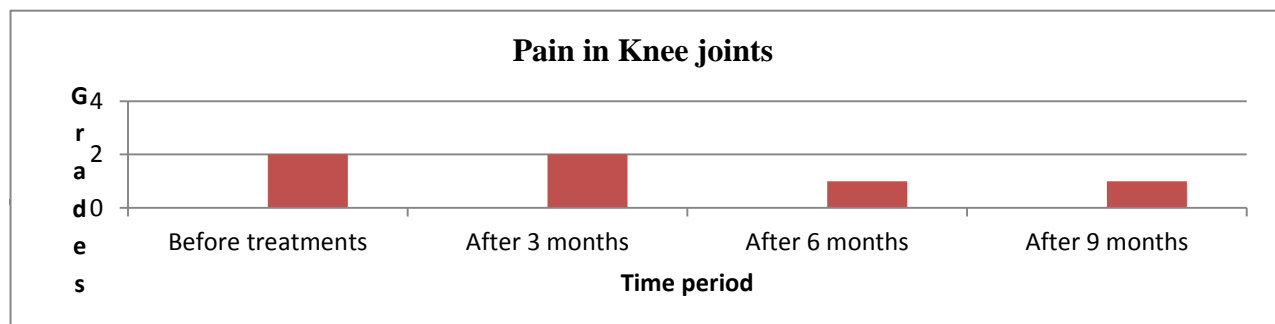
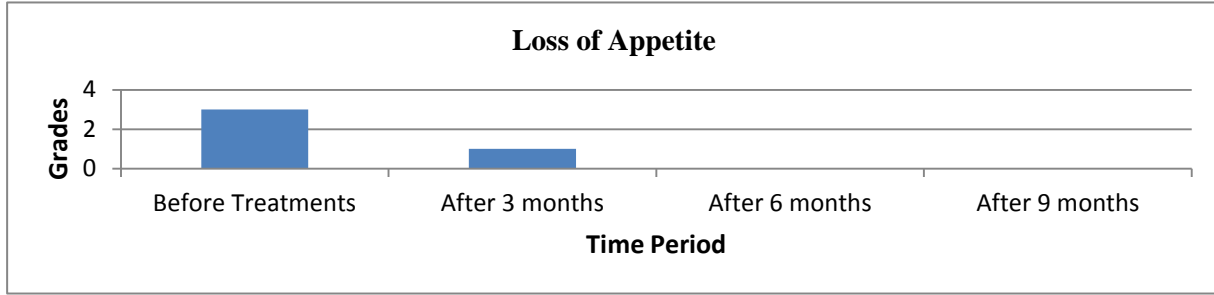


Fig: 3



Before starting the treatments, the patient’s backache was graded as Grade 3 which disturbed her day today activities severely. After 6 months of treatments it



was gradually reduced to Grade 1 and at the end of the treatments she was back to normal as she could continue her day today activities without any back pain. The symptoms of fatigue and pain in knee joints were also reduced gradually, but not back to normal (Grade 0).

Clinical improvement of the symptoms like Itchiness, Loss of Appetite and Flatulence

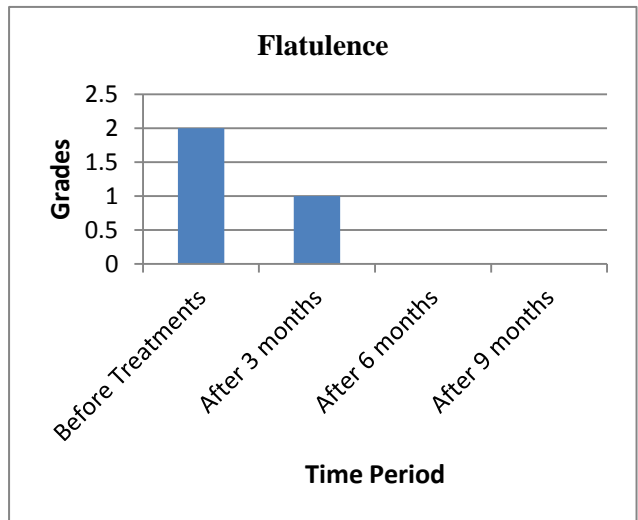
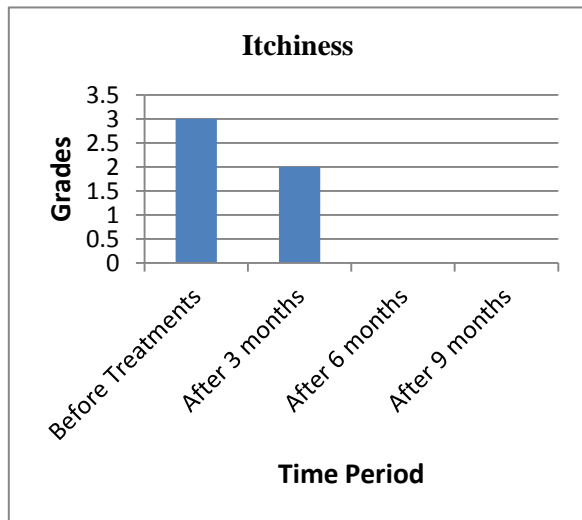
Table 2: Grading system used to assess the symptoms like Itchiness, Loss of Appetite and Flatulence before and after treatments

Grade	
0	None
1	Rarely
2	Intermittent
3	Always

Fig : 4

Fig : 5

Fig : 6



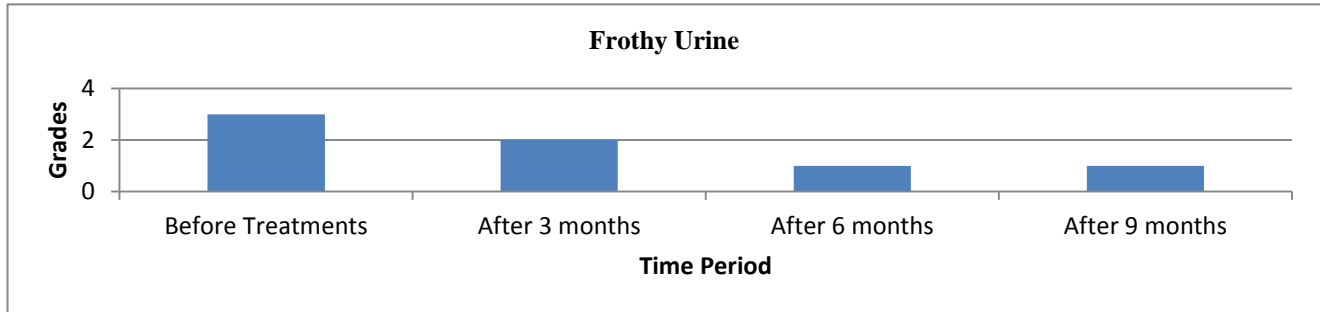
Before starting treatments, itchiness was always presented with the patient. At the end of six months, itching was reduced completely. After 3 months of treatments, she could eat as earlier and her appetite was increased. flatulence disappeared gradually with treatments within a period of 5 months.

Clinical improvement of the symptom-Frothy Urine

Table 3: Grading system used to assess the symptoms of Frothy Urine

Grades	
0	None
1	Mild
2	Moderate
3	Severe

Fig : 7



Severe frothy urine could be observed before starting the treatments and it was graded as Grade 3 according to the grading system. It was gradually decreased up to grade 1 during the first 6 months of the treatment plan and remains at the same grade at the end of the treatments.

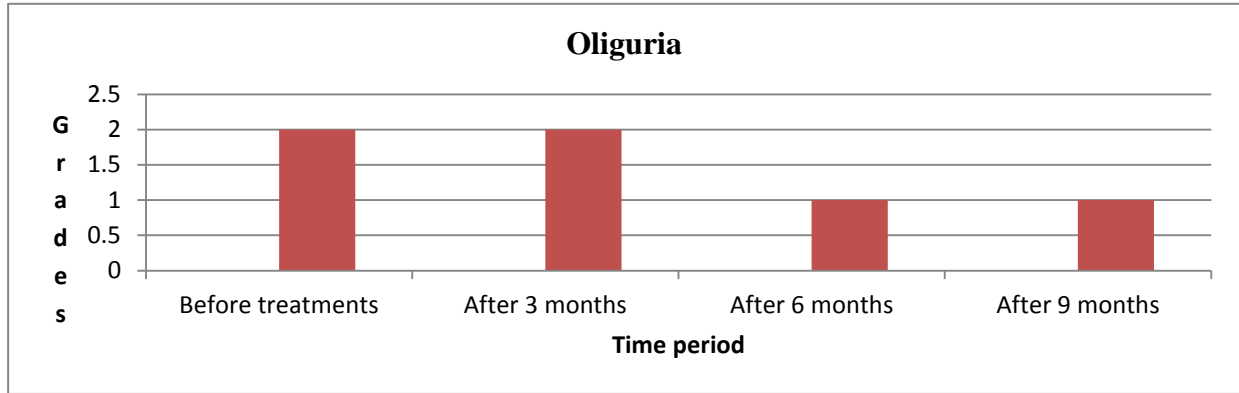
Clinical Improvement of the symptom-Oliguria

Table 4: Grading system used to assess the symptom of Oliguria

Grades	
0	Normal (400ml or more than 400 ml per day)
1	Mild (300 ml to 400ml per day)
2	Moderate (100ml to 300 ml per day)
3	Severe (Below 100ml per day)

- 0. Normal (frequency - 8 or more than 8 times per day)
- 1. Mild (frequency – 5 to 7 times per day)
- 2. Moderate (frequency – 2 to 4 times per day)
- 3. severe (frequency- 1 or 0 times per day)

Fig : 8



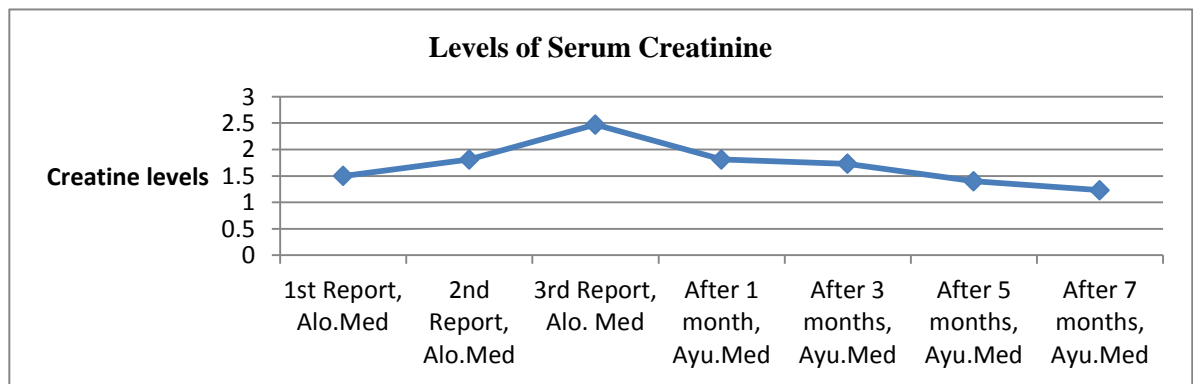
She was comfortable in micturition at the end of nine months and urine output was also increased up to 5 to 7 times per day as it was in the range of 2 to 4 times per day earlier. When considering the above mentioned results of clinical symptoms, it was observed that she was clinically improving during the treatments.

Changes of Bio Chemical Parameters

During the allopathic treatments, there were fluctuations in Serum Creatinine levels, but during Ayurveda treatments, there was a gradual decrease in

the levels of Serum Creatinine during the nine months of treatment regime, simultaneously GFR was markedly increased. Urine albumin was recorded as (++) at the beginning of the treatment. At the end of 7th month, her Serum Creatinine was reduced from 2.47 to 21.1 mg/dl , GFR was increased up to 47.02 from 21.1ml/min/1.73m² and protein urea showed a mild progress from (++) to (+). The patient’s blood pressure levels were also remained within normal range during the time.

Fig : 9



The treatment showed a good progress on the particular patient. On arrival she was in stage 4 and after normalizing her investigations, she was reversed to stage 3 by increasing GFR up to 47.02 from 21.1ml/min/1.73m². The USS showed mild dilatation of Right kidney from 7.6 cm to 8.5 cm, while Left kidney showing mild shrinkage from 8.3cm to 8 cm. She is still under observation and follow up studies are being carried out advising her to have her normal meals and behaviors. She has become a normally working house wife by eliminating her attitude “CKD” patient.

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