IRRITABLE BOWEL SYNDROME - AN AYURVEDIC PERSPECTIVE

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INTRODUCTION

IBS has been described as far back as the 19th century. At that time it was known by other names like mucus colitis, spastic colon, spastic bowel and irritable colon syndrome. IBS is most common of the functional gastrointestinal disorder characterized by altered bowel habits and abdominal pain in the absence of detectable structural abnormalities.¹ IBS is most common of the functional GIT disorder which together account for half of the outpatient attendance at gastroenterological clinics. Till date no clear diagnostic markers exist for IBS. The alteration of bowel habit may be in the form of altered stool frequency (Diarrhoea or constipation) or altered soft stool (thin, firm, soft and hard stool). Symptoms that are commonly associated with IBS include passage of mucus, sense of incomplete evacuation of bowel, relief of pain after defecation and abdominal bloating. IBS is also associated with number of extra intestinal disorder like fibro myalgia, sexual dysfunctions, urinary symptoms and certain psychiatric disorder. According to Ayurveda IBS is a disease which manifest mainly due to the im-

ABSTRACT

IBS continues to be a major health hazard affecting the productive age group worldwide. IBS is most common of the functional GIT disorder which together account for half of the outpatient attendance at gastroenterological clinics. Till date no clear diagnostic markers and treatment exist for IBS. The cause of IBS remains a mystery and its treatment continues to be a real challenge. It is frustrating condition for the patient because of poor quality of life and equally frustrating for the physician. Ayurveda has the strong theoretical backup in the genesis of IBS. In Ayurveda IBS can be considered as Agnimandjayanya Vikara. The functional dependency between normal Vata Dosha and Agni is altered in IBS. The role of Dhatus and concerned Srotas i.e Purishavahasrotas is also considerable. Purishvahasrotas does majority of function with the help of Apana Vayu. So the Dusti lies at Apana Vayu & Samana Vayu level. The Mansik Bhavas which hamper Agni and Rasavahasrotas, Ahara Viharas which causes Vatakopa are the main causative factor of IBS. The principal of treatment can be taken as the treatment of Ajirna, Atisara and Grahiniroga. It can be controlled by managing diet, lifestyle and stress.

Keywords: Agni, Dosha, Srotas, Grahini, IBS
proper Agni & Dosadusti. The functional dependency between normal Vata Dosha and Agni is altered in IBS. The role of Dhatus and concerned Srotas i.e Purishavahasrotas is also considerable. Purishvahasrotas does majority of function with the help of Apana Vayu. So the Dusti lies at Apana Vayu & Samana Vayu level. The Mansik Bhavas which hamper Agni and Rasavahasrotas, Ahara Viharas which causes Vatakopa are the main causative factor of IBS.

MATERIAL & METHODS:
IBS is a chronic disorder of gastrointestinal function that is characterized by recurrent abdominal pain and altered bowel habits in the absence of detectable organic disease. The cause of IBS remains a mystery and its treatment continues to be a real challenge. It is frustrating condition for the patient because of poor quality of life and equally frustrating for the physician. Rather than attributing IBS to one specific cause, it is more appropriate to consider IBS as caused by combination of many factors. This has been called a Biophysical model of IBS. It is multifactorial condition in which GI motor and sensory dysfunction and psychological traits may contribute in combination with a series of environmental factors such as acute GI infection and food intolerance and there may be a background of genetic predisposition. IBS is considering as a disorder of young people with most new cases presenting before age 45. Women are diagnosed with IBS two to three times as often as men and make up 80% of the population with severe IBS. In most of clinical condition, IBS is found to be aggravated by a variety of exogenous and endogenous factors. Triggers for IBS can range from gas or pressure on intestine to certain food, medication or emotions. Changes in life style and reasonable amount of stress have proven role in most of the intestinal pathologies. Clinical features are:-

1. Abdominal pain: - pain is felt in left/ right iliac fossa or hypogastrium. The pain may be continuous, colicky, diffused or localized. Rarely the pain may be severe. Abdominal pain is generally relieved by defecation and provoked by food. Pain is usually associated with constipation.

2. Painless intermittent diarrhoea: - it is characterize by passage of several loose watery stool when constipated, stools are hard, pellet like accompanied by mucus.

3. Bloating of abdomen

4. Alternate constipation and diarrhoea.

5. Nausea, anorexia, tiredness, tenderness of abdomen.

The Rome criteria have been shown to be both sensitive and specific for the diagnosis of IBS and can be used in clinical practice. At least three months in the preceding 12 months of abdominal pain or discomfort that has two of the following three features

1. Relieved with defecation

2. Associated with a change in frequency of stool

3. Associated with change in form of stool.

Patient above fifty should have a screening colonoscopy. Patient below 40 with strong family history of colorectal cancer should also undergo a colonoscopy. Small bowel or colonic mucosal biopsies may be indicated in patient with loose watery stool. Other routine examination is CBC, Blood chemistry, ESR & TSH. Ayurvedic Rogapariksha is basically done by Nidanapanchaka starting from the contact with etiological factors till the manifestation of the complication of the disease. Nidanapanchaka of the concerned
disease is to be studied properly. By analysing the etiological factor mentioned in modern medicine it can be concluded that Mansikbhavas which hamper Agni and Rasavahasrotas, Ahara viharas, which cause or trigger Vatakopa in Pakvasaya are the principal nidanas of IBS. Nature of diet is very important in the aetiopathogenesis of IBS. Nature of diet is very important in the etiopathogenesis of IBS. Especially Viruddhaaharas and Vistambhiaharas may have strong roles in IBS.

DISCUSSION

IBS is primarily a disorder of motility of the entire digestive tract causing abdominal pain, bloating, Diarrhoea and constipation. In this disorder the digestive tract is especially sensitive to a host of stimuli, stress, diet, drugs, hormones or minor irritants. Classical Ayurveda mentions the clinical condition Grahiniroga, wherein the symptoms of major varieties of IBS can be accommodated. Physiologically Grahani is defined as the seat of Agni and is so named because of holding up the food for successive stages of digestion. When Grahini is deranged / disturbed due to weak Agni or due to the malfunctioning of the local controlling factor broadly termed Apana vayu, it releases the ingested material frequently even in unripe condition. With varying degree of the involvement of Agni and Samana vayu clinical symptoms also vary among diarrhea, constipation, abdominal pain, bloating headache and fatigue. Since IBS is disease which involes Agni, Purishvaha srotas and Vatadosha, the sampapriti are as follows:-

Dosa :- Sannipatapa ( Vathadhikya), Dusya :- Rasa 
Agni :- Jatharagni
Srotodusti :- Atipravritti/ Sanga ,

Srotas:- Purishvahasrotas, Uthavasthana :- Pakvasaya.
Samana and apana vayu mainly involved in IBS. The movements and the absorption are mainly undertaken by these vatadoshas. IBS is mainly a functional motility disorder. The chala, laghu gunas of vata and sara, drava gunas of pitta are involved in Atisara phase of IBS. In case of Vibandha phase of IBS ruksha and sita gunas are mainly involved. Th role of Pitta doshas in IBS is also considerable because the main site of Pitta is Pachyamanasaya where Pittadharakala and Grahani are situated. The principal of treatment can be taken as the treatment of Ajirna Atisara and Grahiniroga. Langhana, Dipana and Pachana drugs are given in the initial stage. It can be controlled by managing diet, lifestyle and stress. The treatment plan under the following domains

1) Agnidipana 2) Vatanulomana & 3) Manonukulata:

Dipana, pachana : astachurna, hinguvachadi churna, dipakyadichurna
Ajirna, atisara, sula: mustakaranjadi kashay, vilwadi gulika, dadimaastak churna kalaskadikwatha
Vibandha avastha: kaidaryadi kashay, patu pancakadi gulika, bhuktanjari gulika
Amlodagara, daha: mahatiktak kashay, trantyadi kashay

Other medicines found effective are indukanta ghrita, vidaryadi ghrita, mahatik takaghrita.

Chronic IBS patient may develop the symptoms of depression. In such condition, physician should take care to relieve depression. Kalyanakakashay. Kalyanaka ghrita, sarasvatarista. Manasmitravatak can be given stress relieving factors like yoga, meditation, are useful. Harsana, Asvasana like treatment mentioned in charaksamhita can be
CONCLUSION

IBS continues to be a major health hazard affecting the productive age group worldwide. Ayurveda has the strong theoretical backup in the genesis of IBS. In Ayurveda IBS can be considered as Agnimandyaajanya vikara. The major Dosha involved in its etiology is Vata Dosha together with association of Pitta and Kapha Dosha. The Srotodusti involve in it is Atipravritti and Sanga type. The dusyas are rasa. The srotas involve are purishavahasrotas. The principal of treatment can be taken of Atisara, Ajirna, Grahani. The treatment module may be modified according to the predominant symptoms. Patient should be advised to follow appropriate food regimen for the utmost care of health. Together with it psychic factor are involved so appropriate counseling has to done and Manaprasadakara treatment has to be given.

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