INTRODUCTION

As we know, Ulcerative colitis is a form of colitis, a disease of the colon (large intestine), that includes characteristic ulcers, or open sores. The major symptoms of UC are diarrhea, rectal bleeding, tenesmus, passage of mucus and crampy abdominal pain. Ulcerative colitis is an intermittent disease, with periods of exacerbated symptoms, and periods that are relatively symptom-free. Till date in Modern medicine there is no satisfactory treatment is available but according to Ayurveda we can treat this by considering Raktatisara. As in Raktatisara symptoms are quietly similar to UC i.e. blood mixed with stool, foul smelling, pain in abdomen, burning sensation in the rectum and excessive thirst. So, we can treat UC patient on the line of Raktatisara.

CASE REPORT

A 24 years old Hindu unmarried male patient residing in Jaipur, present in Outdoor wing of Arogyashala, National Institute of Ayurveda, Jaipur on 23rd June 2012 with chief complaint of Bleeding per rectum after defecation and mild burning sensation during defecation since 10days. There is no any H/o mass prolapse per rectum and constipation. On examination of patient vitals were within normal limit.

Sleeping pattern was normal, appetite was mild diminished, altered bowel habit i.e. 2-3 frequency per day with soft consistency of stool and mucus at the end of defecation.

On examination of per rectum by proctoscopy findings were sphincter tone normal, Rectal mucosa congested, inflamed with very small areas of ulcerations of mucus membranes seen.

So, patient was advised for examination of stool for Macroscopic, Microscopic, Occult blood. The results for this tests were-stool for ova/cyst/bacteria was absent and occult blood was positive. Hb% was 15gm/dl.

At that time patient prescribed some Ayurvedic oral medicines but he didn’t have any relief in previous symptoms. So again on 13rd July he advised Colonoscopy and the findings were seen up to Hepatic flexure, distal 20cm area of rectum shows lots of Vascular pattern, Multiple areas of superfi-
cial ulcerations present, No friability, No contact bleeding and interpretations were query mark for infective colitis or ulcerative colitis and at that time Colonic Biopsy taken for further confirmation. Diagnosis on Histopathologic report was Chronic Active Colitis on 16th July.

At that time treatment plan was changed with oral medicines, Picchabasti^3^ started for 15 days. The content of Picchabasti were not as per Texts. We used contents – Shalmali^4^ (stem bark 10-15), Mocharasa^5^, Yasti-madhu^6^, Lodhra^7^, Nagkesar^8^ and Kutaja^9^ churna with milk. This basti was given after meal in Anuvasana form i.e. 70 to 80 ml.

After starting Picchabasti symptoms were relieved from 4th day. There was complete relief from the previous symptoms. After 15 days of Picchabasti course again stool examination was done in that results were stool negative for ova/cyst/bacteria and also negative for Occult blood. Patient till date is symptoms free and continuing oral medicines.

**DISCUSSION**

Here we using *Ayurvedic* medicines along with Picchabasti. Picchabasti in this case was not used textual but modified accordingly for convenience purpose. As in Ulcerative Colitis there is inflammatory condition along with rectal bleeding, diarrhea and ulcers. In Picchabasti drugs used are Shalmali which is snigdha and pichhila so, it protects ulcer from irritations and giving ulcer sufficient time to heal by forming protecting layer over the colonic surface. Mocharasa, Lodhra and Nagakeshara having Kashayarasa and shita virya which is Stambhaka, Grahi, Shothahara property so helpful to stop diarrhea and rectal bleeding. Yastimadhu having Vranashodhara property so it promotes healing of ulcers. In this way, contents of Picchabasti synergistically acts and helps in cure of UC. There is no side effects seen during whole course of treatment.

**CONCLUSION**

So from above discussion it can be concluded that, *Ayurvedic* treatment is very successful in the management of Ulcerative Colitis. This is safe, cost effective and having no side effects. It is easily adoptable in routine practice.

**REFERENCES**


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