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TITLE: AN AYURVEDIC APPROACH TOWARDS HEPATITIS B : A SINGLE CASE STUDY

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AN AYURVEDIC APPROACH TOWARDS HEPATITIS B :

A SINGLE CASE STUDY

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The hepatitis B virus (HBV) is a double-stranded DNA virus belonging to the family of hepadnaviruses, which include duck hepatitis virus, woodchuck hepatitis virus, and ground squirrel hepatitis virus.

Hepatitis B virus infection is a global public health problem. It is estimated that there are more than 300 million HBV carriers in the world, of who approximately 5, 00,000 die annually from HBV-related liver disease.

The spectrum of the symptomatology of hepatitis B disease varies from subclinical hepatitis to icteric hepatitis to fulminant, acute, and sub acute hepatitis during the acute phase, and from an asymptomatic chronic infection state to chronic hepatitis, cirrhosis, and hepatocellular carcinoma (HCC) during the chronic phase.

Methods:

In current study a single male patient of 28 yrs of age presenting with symptoms of Anannabhilasha, Hrillasa, udarshula (pain in right upper quadrant) since 1 month and on examination there was hepatomegaly 3 fingers. The patient was asked to do the required tests which revealed with HBsAg and HbeAg positive and remarkably high HBV DNA reports. The patient was treated with Ayurvedic medicines for a period of 4 months initially and the investigations like HBeAg and HBV DNA were repeated after a lapse of 6 months.

Result : The patient has shown remarkable improvement in all the signs and symptoms and the repeated investigations showed anti-HbeAg and HBV DNA was less than the previous reports. According to Ayurveda it can be closely correlated to Dusta Shonitjanya Yakrut Vikruti. Thus the result of the treatment was very much encouraging and there were no side effects during the therapy.

Conclusion: This line of treatment provided a good clinical improvement in a patient with Hepatitis – B.

Key words: HbeAg, HbsAg, HBV DNA, Dusta ShonitjanyaYakrut Vikruti

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INTRODUCTION

Hepatitis B is a disease of global importance .It is an infectious illness of the liver caused by the hepatitis B virus (HBV) that affects apes, including

humans. It was originally known as "serum hepatitis" The virus is transmitted by exposure to infectious blood or body fluids such as semen and vaginal fluids, while viral DNA has been detected in the saliva, tears, and urine of chronic carriers. Above 1/3rd of the patients of acute Hepatitis 2/3rd of the patients of chronic liver diseases and Hepatocellular carcinoma in India is due to HBV infection. Most of the patients do not show any symptoms and are unaware of their status as Hepatitis B. Unfortunately; these healthy people who are carriers can infect others without knowing it.

In modern science there are licensed vaccinations for viral hepatitis but still we can find appreciable higher incidence and prevalence of these diseases.

HBsAg is a highly infective viral disease. Hence much more research should be done to deal with this disease .If there is no answer to this in modern science we should widen our spectrum and should go through other pathies .Thus some of the *Ayurvedic* formulation proved to be useful in HbsAg .So this article contains discussion on the mode of action of those formulations.

CASE STUDY

A 28 year old male patient from Chirner Tal- Panvel ,Dist-Raigad.Maharashtra

came in OPD no. 1 of Y.M.T. Ayurvedic College Kharghar ,Navi Mumbai having complaints of *Anannabhilasha*, *Hrillasa*, *udarshula* (pain in rt upper quadrant) since 1 month and on examination there was hepatomegaly 3 finger. Patient was not having any past medical history or any addictions. Weight of the patient was 48 kg. Blood pressure, Pulse and other vitals were normal. Investigation reports revealed elevated levels of Liver enzymes, HBsAg and HBeAg were Positive. Quantitative analysis of HBV-DNA showed 1, 86,640 copies/ml

The following treatment was started for 7 days

1. *Avipattikar churna* 1tsf HS with warm water
2. *Arogyavardhini Vati* 500 mg BD(before food)
3. *Bhumyamalkyadi Kwath* 30ml BD (before food)

The patient visited the OPD regularly after 7 days, 15 days and the same medications were continued. After 1 month patient visited the OPD with complaints of nausea and vomiting and then the following medication was added.

4. *Suvarna suthshekhar rasa* 250 mg BD with warm water (before food)

DICUSSION

The presence of HBeAg (Hepatitis B e Antigen) indicates infected stage means that virus can be passed to others .If the antigen persists in the blood for more than 3 months chronic liver disease is probable .Measurement of HBeAg may also be used to monitor the effectiveness of the HBV treatment since successful treatment should lead to presence of anti HbeAg with no HBeAg in the blood as it is in this stage hepatitis B virus cannot infect others.

Let's have a look upon research work done on few of herbal drugs used in the above formulations:

1. *Bhumyamalaki*: It is a safe lipotropic drug and its primary action has been proved on liver, exhibits antiviral action on hepatitis B, showed an inhibition of DNA polymerase of Hepatitis B and viral agglutination activity.^{1, 2,3,4,5}

2. *Bhrungaraj*: Alcoholic extract of the plant shows effect on experimental liver damage and wedelolactone and demethylwedelolactone exhibit antihepatotoxic activity .^{6,7}

3. *Guduchi*: The hepatoprotective effect of extract has been studied in carbon tetrachloride induced liver damage; it has been proved effective in prevention of

fibrosis and in stimulating regeneration in hepatic tissue .^{8,9}

4. *Kutaki*: Alcoholic extracts of plant Kutkin and Picroside II posses Hepatoprotective activity .¹⁰

5. *Sharapunkha*: Plant shows Hepatoprotective action against carbon tetrachloride¹¹

6. *Kirattikta*: Extracts and many chemical constituent of plants have exhibited antihepatotoxic activity in animal.¹²

Bhumyamalaki is a *Yakrut rasayana* and it has an antiviral activity. It not only detoxifies the liver, but also nourishes the liver. It is a safe lipotropic drug. *Bhrungaraj* has an hepatoprotective activity .*Guduchi*, *Sharapunkha*, *Kirattikta*, *haridra* due to its *ushna tiksna* properties it acts as *deepan pachan* and *yakruta uttejaka dravya*. *Arogyavardhini vati* was used for *malasahodhan* and *raktadushti* .*Avipattikar churna* acts as *saam pitta virechak*, *Agni deepan* and *pittashamak*.

Suvarna-suthshekhar Rasa can be considered as *vyadhi pratyani chikitsa*. As the patient had developed debility and anorexia (*agnimandya*). The ingredients

present like *Chaturjaat* acts as *agnideepak* and *Suvarna* acts as *balya*.

CONCLUSION

The investigations done after 6 months showed good improvement. Reports are as follows –

Viral load by HBV –DNA (QUANTITATIVE) < 50 HBV DNA copies /ml. Normal range is

50- 10000000 HBV DNA copies/ ml. This report suggests the continued effect of the treatment given. Patient's weight is now about 68 kgs after 6 months.

Possible mechanism of action is possibly by combined effect of each of these drugs

.This study is a step in the series of development in the field of Ayurveda to find satisfactory solution in treatment of *Dushta Shonitjanya Yakrut Vikruti* i.e. Hepatitis B which pose strong challenge .

A scientific approach is needed to evaluate and to establish efficacy of this combination. For this specific targeted study have to be further carried out.

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