

REVIEWER'S REPORT

Manuscript No.: IJAR-54363

Date: 15/10/2025

Title: "Management of Grahani Dosh Using Kalpit Piccha Basti and Lajjalu Churna - A Case Study"

Recommendation:

- Accept as it is
- ✓ Accept after minor revision.....
- Accept after major revision
- Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality	✓			
Techn. Quality		✓		
Clarity		✓		
Significance		✓		

Reviewer Name: Dr. S. K. Nath

Date: 16/10/2025

Reviewer's Comment for Publication:

Reviewer's Comment / Report

Strengths:

- Novel Approach:** The study explores the integration of Ayurvedic therapies, particularly Kalpit Piccha Basti and Lajjalu Churna, in managing Grahani Dosh, which paralleling Ulcerative Colitis (a form of IBD). The focus on holistic, traditional treatment modalities offers valuable insights into alternative management strategies.
- Well-Documented Case Details:** The report provides thorough patient profiling, including clinical presentation, investigations, and follow-up data, facilitating clarity and reproducibility.
- Outcome Data:** Quantitative data illustrate significant improvements reduction in bowel frequency, resolution of mucus and blood in stool, weight gain, and score reduction that support the efficacy of the interventions.
- Integration of Ayurvedic Concepts with Modern Disease:** Drawing parallels between Grahani Dosh and IBD highlights interdisciplinary relevance, potentially encouraging further research.

Weaknesses:

- Limited Sample Size:** As a single case report, the findings lack generalizability. Larger, controlled studies are necessary to substantiate these preliminary results.
- Lack of Control Group:** Without a comparison group or control, attributing improvements solely to the interventions is challenging. Placebo effects or natural disease course are not accounted for.
- Insufficient Methodological Details:** The description of the treatment protocol, such as the preparation method of Kalpit Piccha Basti and the precise dosing schedule, could be elaborated to enhance reproducibility.
- Absence of Long-term Follow-up:** The report mentions improvements up to 60 days but lacks information on the long-term sustainability of the treatment outcomes.
- Language and Grammatical Errors:** Several typographical and grammatical issues are present, which hamper clarity (e.g., inconsistent formatting, typographical mistakes like "LajjaluChurna" instead of "Lajjalu Churna," missing spaces, and punctuation errors). For instance, "Grahani" vs. "Grahani" are used inconsistently.
- References:** The references are limited and not uniformly formatted. Some are incomplete or lack proper citation details, which diminishes the scholarly rigor.
- Figures and Tables:** While tables are included, some are poorly formatted or incomplete (e.g., Table No. 3). Visual aids like flowcharts or images of the formulations could strengthen the presentation.

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Conclusion:

This case report offers promising preliminary evidence supporting the use of Ayurvedic therapies like Kalpit Piccha Basti and Lajjalu Churna in managing Grahani Dosh/Ulcusative Colitis. However, the limitations inherent to a single case study mean that further research with larger samples and controlled methodologies is necessary to validate these findings. The integration of traditional concepts with modern investigative parameters is commendable and relevant but requires refinement for academic publication.

Recommendations for Revision:

- Language and Formatting:** Carefully proofread the manuscript to correct grammatical errors, ensure consistent terminology, proper spacing, and punctuation. For example, standardize spellings like "Lajjalu Churna."
- Methodological Clarity:** Elaborate on the preparation and administration of Kalpit Piccha Basti, including specific instructions, components, and procedural details to facilitate reproducibility.
- Expand on Follow-Up:** Include information on longer-term outcomes, potential relapses, or companion therapies for comprehensive understanding.
- References:** Complete and properly format all references. Incorporate recent and peer-reviewed studies if available to strengthen the contextual background.
- Figures and Diagrams:** Incorporate visual aids or flowcharts depicting treatment procedures, formulations, or outcome assessments.
- Discuss Limitations:** Acknowledge the limitations of the case study explicitly and suggest directions for future research.