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RESEARCH ARTICLE

AYURVEDIC MANAGEMENT OF CHRONIC LIVER DISEASE: A CASE STUDY

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Abstract

Chronic liver disease (CLD) is a progressive hepatic disorder characterized by hepatocellular injury, inflammation, fibrosis, and metabolic dysfunction, leading to systemic complications and impaired liver function. In Ayurveda, CLD can be correlated with Yakṛit Vikara, Kamala, and Udara Roga, where vitiation of Pitta Doṣha, impaired Agni, and Srotas obstruction play a key role in disease pathogenesis. This case study reports the clinical and biochemical outcomes of Ayurvedic management in a 44-year-old male diagnosed with Chronic Liver Disease who presented to Jeena Sikho Lifecare Limited Hospital, Jaipur, Rajasthan, with complaints of generalized weakness(Daurbalya) body pain (Sarira Sula), nausea (Hrillasa), vomiting (Chardi), adominal bloating (Adhmana), and generalized itching (Kandu). The patient underwent Ayurvedic therapeutic interventions along with dietary and lifestyle modifications. Post-treatment evaluation demonstrated marked symptomatic relief and improvement in hepatic biochemical parameters Serum SGOT levels reduced from 54 U/L to 35.81 U/L, SGPT from 52 U/L to 40.62 U/L, and C-reactive protein (CRP) from 8.0 mg/L to 3.01 mg/L, indicating improved hepatocellular function and reduced systemic inflammation. IgE levels showed minimal change (198 IU/mL to 195 IU/mL). The findings suggest that Ayurvedic interventions may have a beneficial role in improving clinical symptoms and liver function parameters in Chronic Liver Disease. However, larger controlled clinical studies are warranted to validate these findings and establish evidence-based integrative treatment protocols.

Introduction:-

Chronic liver disease (CLD) is a progressive deterioration of liver function due to sustained inflammation, fibrosis, and cirrhosis, resulting in life-threatening complications such as portal hypertension, hepatic encephalopathy, and hepatocellular carcinoma.[1] Chronic hepatitis B and C infections, excessive alcohol use, non-alcoholic fatty liver

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disease (NAFLD), autoimmune liver diseases, and metabolic abnormalities are among the main causes of CLD, albeit the exact causes vary throughout the world.[2] Pharmacological treatments, lifestyle changes, and, in more severe situations, liver transplantation are all part of the traditional care of CLD. But even with medical advances, these therapies frequently have drawbacks such as side effects, exorbitant prices, and restricted availability.[3] The ancient medical system known as Ayurveda provides a comprehensive and all-natural method of treating CLD, emphasizing cleansing and dietary control. Ayurveda views liver disorders under the general heading of "Yakrit Vikara," according to which liver malfunction results from an imbalance in the three doshas of Vata, Pitta, and Kapha.[4] Pitta dosha aggravation is thought to be a major cause of hepatic problems, resulting in the liver becoming overheated and inflamed. Many liver illnesses are described in Ayurvedic writings including the Charaka Samhita and Sushruta Samhita.

These include Kamala (jaundice), Pandu (liver dysfunction associated with anemia), and Kumbha Kamala (advanced liver disease resembling cirrhosis).[5] Dietary changes and detoxification treatments like Panchakarma are used in Ayurvedic medicine to calm inflamed doshas, restore liver function, and enhance general health. Bhumyamalaki (Phyllanthus niruri), one of the most popular Ayurvedic formulations for liver illness, is beneficial against hepatitis and liver cirrhosis due to its hepatoprotective, anti-inflammatory, and antiviral qualities.[6] Phyllanthus species have strong antiviral properties against the hepatitis B virus and greatly protect the liver by lowering oxidative stress and raising hepatic enzyme levels. Additionally, herbs like Guduchi (Tinospora cordifolia), Kalmegh (Andrographis paniculata), and Kutki (Picrorhiza kurroa) are frequently suggested due to their immune-modulating, anti-inflammatory, and antioxidant qualities, which support tissue regeneration and liver detoxification.[7] In Ayurveda, detoxification treatments like Basti (medicated enema) and Virechana (therapeutic purgation) are used to remove accumulated toxins from the liver and gastrointestinal tract, which lowers inflammation and restores normal hepatic function. According to clinical data, these Panchakarma treatments considerably raise the quality of life for CLD patients overall, lower hepatic fibrosis, and improve liver function metrics.[8]

Samprapti Ghataka of Chronic Liver Disease in Ayurveda[9]

Dosha – Vata Pradhana Tridosha

Dushya Affected Body Tissues – Rasa (plasma/lymph), Rakta (blood), Mamsa (muscle), Asthi (bone)

Srotas (Body Channels) – Annavaha, Raktavaha, Rasavaha, Asthivaha,

Srotodushti lakshana (Signs of Channel Vitiation) – Vimargagamana (movement in abnormal pathways)

Vyadhi Marga (Pathway of Disease Manifestation) – Madhyama Roga Marga (Intermediate Disease Pathway)

Agni (Digestive Fire) – Agnimandya (weak digestion in stomach)

Ama (Toxins from Improper Digestion) – Sama (associated with ama)

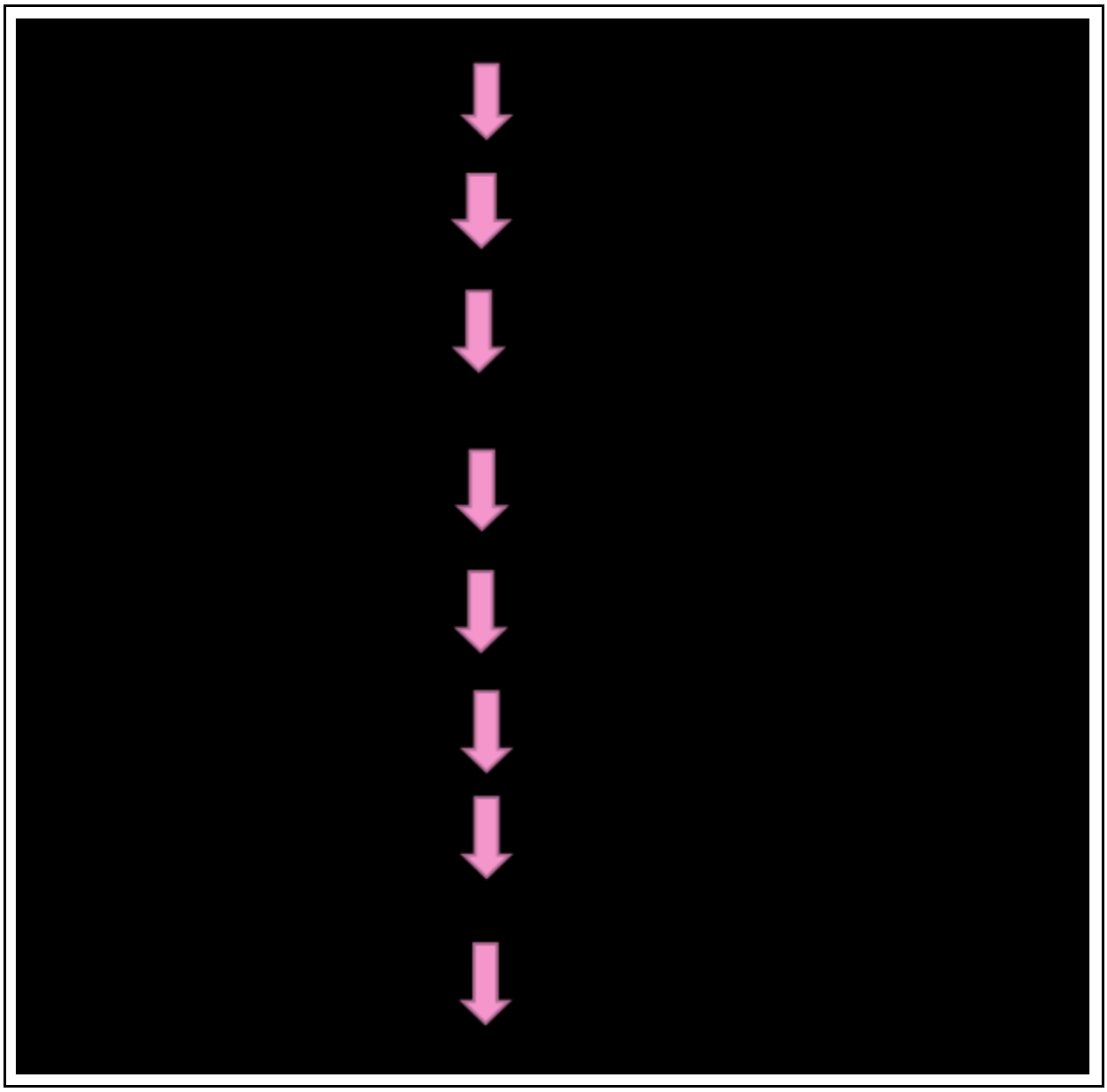


Figure 1: Samprapti of Chronic Liver Disease

Case Report:-

A 44-year-old male with a known case of Chronic Liver Disease visited Jeena sikho lifecare hospital, Jaipur, Rajasthan. The patient suffered from generalized weakness (Daurbalya), general body aches (SarIra Sula / Aṅga Mardana), nausea (Chardi Purvarupa / Hrillasa), vomiting (Chardi), gas and bloating (Adhmana / Anaha), and itching over the whole body (Kandu).

Table 1: Vitals during the initial examination on the first day (27/10/24) of the visit

Parameters	**Findings**
Blood Pressure	110/94 mmHg
Pulse Rate	76/min
Weight	90kg

Table 2: Asthvidha Pariksha on the first-day visit of the patient

Parameters	Findings
Nadi (Pulse)	Vatapittaj
Mala (Stool)	Abadha (Normal)
Mutra (Urine)	Ishatpeeta (Normal)
Jiwha (Tongue)	Saam (Coated)
Shabda (Speech)	Spashta (Clear)
Sparsha (Touch)	Anushna Sheeta (Moderate temperature)
Drika (Eyesight)	Avikrit (Normal)
Akriti (Appearance)	Madhyam (Moderate)

Interventions:-

Treatment Plan[10]

I. Diet Plan: The dietary guidelines provided by Jeena Sikho Lifecare Limited Hospital include the following key recommendations:

Foods to be avoided:

1. Avoid eating after 8 PM.
2. A solid food consume a small bite, chew 32 times.
3. Do not consume wheat, refined food, milk, milk products, coffee and tea, and packed food.

Hydration:

1. During water intake, take a sip and drink slowly to ensure the amount of water intake each time.
2. Drink about 1 liter of alkaline water 3 to 4 times throughout the day.
3. Include herbal tea, Coconut water, and turmeric-infused water as part of your daily routine.

Millet Intake:

1. Incorporate five types of millet into your diet: Foxtail (Setaria italica), Barnyard (Echinochloa esculenta), Little (Panicum sumatrense), Kodo (Paspalum scrobiculatum), and Browntop (Urochloa ramose).
2. Use only steel cookware for preparing the millet. Cook the millets only using mustard oil.

Meal Timing and Structure:

1. Early Morning (5:45 AM): Herbal tea, curry leaves (1 leaf- 1 min/5 leaves-5 min), raw ginger, and turmeric. Breakfast (9:00-10:00 AM): The patient will have steamed fruits (Seasonal), steamed sprouts (according to the season), and a fermented millet shake (4-5 types).
2. Morning Snacks (11:00 AM): The patient will be given red juice (150 ml) and soaked almonds.
3. Lunch (12:30 PM - 2:00 PM): The patient will receive Plate 1 and Plate 2. Plate 1 will include a steamed salad, while Plate 1 will include a millet recipe.
4. Evening Snacks (4:00 – 4:20 PM): Green juice (100-150 ml) along with 4-5 almonds.
5. Dinner (6:15-7:30 PM): The patient will be served a steamed salad, chutney, and soup, as Plate 1, along with millet khichdi as Plate 2.

Fasting:

1. One-day fasting was advised.

Special Instructions:

1. Express gratitude to the divine before consuming food or drinks.
2. Sit in Vajrasana (a yoga posture) after each meal.
3. 10-minute slow walk after every meal.

Diet Types:

1. The diet comprises low salt solid, semi-solid, and smoothie options.

2. Suggested foods include herbal tea, red juice, green juice, a variety of steamed fruits, fermented millet shakes, soaked almonds, and steamed salads.

The DIP Diet includes:

● Breakfast: Seasonal fruits weighing (weight × 10) grams, where "weight" refers to the patient's body weight in kilograms.

● Lunch includes two plate systems: Plate 1: Salad weighing

● Plate 2: Weighing millet-based dishes.

● Dinner: The same as lunch, with Plate 1 consisting of Salad (weight × 5 grams) and Plate 2 consisting of millet-based dishes.

Lifestyle Recommendations:

1. Include meditation for relaxation.
2. Practice barefoot brisk walking for 30 minutes.
3. Yoga practice (Pranayama) is advised.
4. Ensure 6-8 hours of quality sleep each night. Adhere to a structured daily routine.

Shaman Chikitsa:-

Based on the clinical evaluation, a detailed and patient-specific medication protocol was devised, as outlined in Table 3.

Table 3: Medicines advised during the treatment

Medicine advised on 27/10/24	Follow-up Medicine (19/01/25)
Liver Tonic 10ml BD (Adhobhakta with sama matra koshna jala) (After meal with equal amount of lukewarm water)	**I. CHARMAROG HAR VATI** 1 TAB BD (ADHOBHAKTA WITH KOSHNA JALA)
LIV Balance Capsule 1 Caps. BD (Adhobhakta with koshna jala)	**LIV Balance Capsule** 1 Cap. BD (Adhobhakta with koshna jala)
Divya Shakti Powder Half a teaspoon HS (Nishikala with koshna jala) (At bed time)	**Yakrit Tonic** 10ml BD (Adhobhakta with sama matra koshna jala)
Blood Purifier Syrup 10ml BD (Adhobhakta with sama matra koshna jala)	**Immune Power BLK** 10ml BD (Adhobhakta with sama matra koshna jala)
Dr. Sukoon Tablet 1 Tablet BD (Adhobhakta with koshna jala)	**Puroderm-G syrup** 10ml BD (Adhobhakta with sama matra koshna jala)
Amalpitt Nashak Capsule 1 Cap. BD (Adhobhakta with koshna jala)	**Amalpitt Nashak Capsule** 1 Cap. BD (Adhobhakta with koshna jala)
II. CHARMAROG HAR VATI 1 CAP. BD (ADHOBHAKTA WITH KOSHNA JALA)	**III. LAKSHMI VILAS RAS TABLET** 1 TAB BD (ADHOBHAKTA WITH KOSHNA JALA) IV.
Samavati Capsule 1 Cap. BD (Adhobhakta with koshna jala)	**Samavati Capsule** 1 Cap. BD (Adhobhakta with koshna jala)
Arogya Vati 1 Tab. BD (Adhobhakta with koshna jala)	**Vat Har Ras Vati** 1 Tablet BD (Adhobhakta with koshna jala)

Table 4: Medications Administered During Treatment

Medicine Name	Ingredients	Therapeutic Effects
Liver Tonic	**Drakshasava, Jirkadhyaristha, Punarnavaristha, Rohitkaristha, Mustakaristha**	Supports Yakrit (Liver) and Annavaha Srotas helps manage Agnimandya (loss of appetite), Yakrit Vriddhi (hepatomegaly), and Yakrit Vikara
LIV Balance Capsule	**Bhumi Amla** (Phyllanthus niruri), **Punarnava** (Boerhavia diffusa), **Makoy** (Solanum nigrum), **Mandur bhasam, Giloy** (Tinospora cordifolia), **Haritaki** (Terminalia chebula), **Bhringraj** (Eclipta prostrata), **Kasani** (Cichorium intybus), **Dhania** (Coriandrum sativum)	Supports Yakrit Vikara, Enhances Agni, Aids in Yakrit Vriddhi, Manages Medo Dushti, and Supports Rasa and Rakta Dhatu Shuddhi
Divya Shakti Powder	**Trikatu** (Piper nigrum (Kali Mirch), Piper longum (Pippali), and dried Zingiber officinale (Saunth)**, Triphala** (Haritaki (Terminalia chebula)**,** Bibhitaki (Terminalia bellirica) and Bhumi Amalaki (Phyllanthus niruri), **Nagarmotha** (Cyperus rotundus), **Vay Vidang** (Embelia ribes), **Chhoti Elaichi** (Elettaria cardamomum), **Tej Patta** (Cinnamomum tamala), **Laung** (Syzygium aromaticum), **Nishoth** (Operculina turpethum), **Sendha Namak, Dhania** (Coriandrum sativum), **Pippali Moola** (Piper longum root), **Jeera** (Cuminum cyminum), **Nagkesar** (Mesua ferrea), **Amarvati** (Achyranthes aspera), **Anardana** (Punica granatum), **Badi Elaichi** (Amomum subulatum), **Hing** (Ferula assafoetida), **Kachnar** (Bauhinia variegata), **Ajmod** (Trachyspermum ammi), **Sazzikhar** (alkaline ash)**, Pushkarmool** (Inula racemosa), **Mishri** (Saccharum officinarum)	It improves digestive function and metabolism of the body through its deepan-pachan properties. Helps in body detoxification via virechan (purgation).
Blood Purifier Syrup	**Khair chaal** (Acacia catechu), **Devdaru** (Cedrus deodara), **Haldi** (Curcuma longa), **Haritaki** (Terminalia chebula), **Bibhitaki** (Terminalia bellirica), **Amla** (Phyllanthus emblica), **Dashmool, Dhamasa** (Fagonia Arabica), **Sariva** (Hemidesmus indicus), **Amba haldi** (Curcuma amada), **Kutki** (Picrorhiza kurrooa), **Chiraita** (Swertia chirayita), **Rasont** (Berberis aristata), **Satyanashi** (Argemone mexicana), **Madhu** (Madhuca indica), **Shaker**	Helps in Kushta Roga (Skin Disorders), Reduces Yuvan Pidika (Acne), Relieves Kandu (Itching) & Sitapitta (Rashes), Soothes Sensitive Skin, Aids in Krimi Roga (Intestinal Worm Infestation), and Supports the Management of Kushtha (Leprosy).

Dr. Sukoon Tablet	**Apamarga** (Achyranthes aspera), **Shatavari** (Asparagus racemosus), **Ashwagandha** (Withania somnifera), **Brahmi** (Bacopa monnieri), **Vacha** (Acorus salamus), **Shankh-Pushpi** (Convolvulus pluricaulis)	Promotes Medhya Rasayana (Cognitive Rejuvenation), Enhances Brain Cell Regeneration,
V. CHARMAROG HAR VATI	**Amla** (Phyllanthus emblica), **Haritaki** (Terminalia chebula), **Bibhitaki** (Terminalia bellirica), **Giloy** (Tinospora cordifolia), **Sonth** (Zingiber officinale, dried ginger), **Guggul** (Commiphora wightii), **Pippali moola** (Piper longum), **Nisoth** (Operculina turpethum), **Danti** (Baliospermum montanum)	Promotes Vrana Ropana, Acts as a Rakta Shodhaka, Aids in Vidradhi Shamana, Reduces Shotha, and Helps in Vatarakta & Uric Acid Regulation.
Samavati Capsule	**Gokhru** (Tribulus terrestris), **Shatavari** (Asparagus racemosus), **Kaunch** (Mucuna pruriens), **Bhumi Amla** (Phyllanthus niruri), **Shunthi** (Zingiber officinale dried ginger), **Jaiphal** (Myristica fragrans), **Ashwagandha** (Withania somnifera), **Vidarikand** (Pueraria tuberose), **Beej band lal** (Sida cordifolia), **Akarkara** (Anacyclus pyrethrum), **Talmakhana** (Asteracantha longifolia), **Musli** (Chlorophytum borivilianum), **Swarn makshik, Shilajeet** (Asphaltum punjabicum)	Supports Yakrit Vikara, Aids in Ajirna & Deepana-Pachana, Relieves Vibandha, Acts as a Vyadhikshamatva Vardhaka, and Helps in Aruchi
Arogya Vati	**Kajan, Loh Bhasma, Abhrak bhasma, Tamra bhasma, Bhumi Amla** (Phyllanthus niruri), **Haritaki** (Terminalia chebula), **Bibhitaki** (Terminalia bellirica), **Chitrak, Katuka, Nimbu Patra**	Promotes Cell Rejuvenation (Oja Vardhaka), Acts as a Rasayana (Rejuvenative Therapy), and Strengthens the Immune System
Yakrit Tonic	**Lal Punarnava** (Boerhavia diffusa), **Safed Punarnava** (Boerhavia diffusa; different variety), **Bala** (Sida cordifolia), **Atibala** (Abutilon indicum), **Patha** (Cissampelos pareira), **Guduchi** (Tinospora cordifolia), **Chitrak** (Plumbago zeylanica), **Kakoli** (Roscoea procera), **Vasa** (Adhatoda vasica), **Nagarmotha** (Cyperus rotundus), **Ajwain** (Trachyspermum ammi), **Shunthi** (Zingiber officinale dried), **Kali Mirch** (Piper nigrum), **Lavaṅga** (Syzygium aromaticum), **Methi** (Trigonella foenum-graecum), **White Jeera** (likely Cuminum cyminum), **Roheda Chhal** (could refer to Tecomella undulata bark), Dalchini (Cinnamomum verum), **Tejpatta** (Cinnamomum tamala), **Badi Elaichi** (Amomum subulatum), **Choti Elaichi** (Elettaria cardamomum), **Jaiphal** (Myristica fragrans nutmeg), **Nagkesar** (Mesua ferrea), **Kankol** (Piper cubeba), **Mulethi** (Glycyrrhiza glabra), **Shekel** (unidentified, could require clarification), **Mahua** (Madhuca longifolia)	The formulation supports digestive health (AgnidIpana–Pachana), enhances energy and vitality (Balyakara, Rasayana), and promotes liver detoxification (Yakṛit Sodhana, Doṣha Shamana)

Immune Power BLK	**Giloy** (Tinospora cordifolia), **NagKesar** (Mesua ferrea), **Dashmool, Babool** (Acacia nilotica), **Dhatura** (Datura stramonium), **Vasa** (Justicia adhatoda), **Jaiphal** (Myristica fragrans), **Mulethi** (Glycyrrhiza glabra), **Lavaṅga** (Syzygium aromaticum), **Choti Kateri** (Solanum xanthocarpum), **Kankol** (Piper cubeba), **Talispatr** (Abies webbiana), **Badi Elaichi** (Amomum subulatum), **Madhu** (honey), **Dalchini** (Cinnamomum cassia), **Tejpatr** (Cinnamomum tamala), **Mahua** (Madhuca indica), **Kali Mirch** (Piper nigrum), and **Shaker**	The formulation enhances immunity (Vyadhi Kṣamatva Vardhaka), supports liver and kidney health (Yakṛit–Vrikka Saṃrakṣaṇa), exhibits potential anti-cancer activity (Arbuda Hara), and reduces weakness (Balyakara).
Puroderm-G syrup	**Neem chaal** (Azadirachta indica), **Manjistha** (Rubia cordifolia), **Guduchi** (Tinospora cordifolia), **Sariva** (Hemidesmus indicus), **Khadir** (Acacia catechu), **Chopchini** (Smilax chini), **Babchi** (Psoralea corylifolia)	It helps in Rakta Shodhana (blood purification) and relieves Vibandha (constipation).
Amlpit Nashak Capsule	**Mulethi** (Glycyrrhiza glabra), **Pudina** (Mentha spicata), **Hing** (Ferula northex), **Chiraita** (Plumbago zeylancia), **Jiraka (**Cuminum cyminum), **Vidanga** (Embelia ribes), **Ajwain** (Trachyspermum ammi), **Marich** (Piper nigrum), **Pippali moola** (Piper longum), **Shunti** (Zingiber officinale), **Amalaki** (Phyllanthus emblica), **Vibhitaki** (Terminalia bellerica), **Haritaki** (Terminalia chebula)	Alleviates Amlapitta (acidity) and Hrit Shula (burning sensation)**,** while enhancing Agni (digestion)**.**
VI. LAKSHMI VILAS RAS NARDIYE TABLET VII.	**Kajjali, Abhrak Bhasma, Camphor** (Cinnamomum camphora), **Jaiphal** (Myristica fragrans), **Dhatura** (Datura stramonium), and **Bhang Patta** (Cannabis sativa).	Helps in managing conditions like Arsha (Piles) and Bhagandara (Fistula) by reducing symptoms of Shoola (Pain) and Shotha (Swelling).
Vat Har Ras Vati Tablet	**Shudh Gandhak, Ras Sindoor, Kant Loh Bhasma, Vang Bhasma, Naag Bhasma, Abhrak Bhasma, Tambra Bhasma**, **Sonth** (Zingiber officinale), **Marich** (Piper nigrum), and **Pippali moola** (Piper longum).	Helps boost metabolism, supports healthy digestion, and enhances bone strength.

Results:-

The comparison table shows that all presenting symptoms, including Daurbalya, SharIra Shula, Hrillasa, Chardi, Adhmana, and Kandu, were present before treatment and showed marked improvement or complete relief after Ayurvedic intervention. This indicates the effectiveness of the therapeutic regimen in alleviating systemic and gastrointestinal symptoms and improving the patient's overall clinical condition.

Table 5: Before and After Treatment Assessment of the Patient

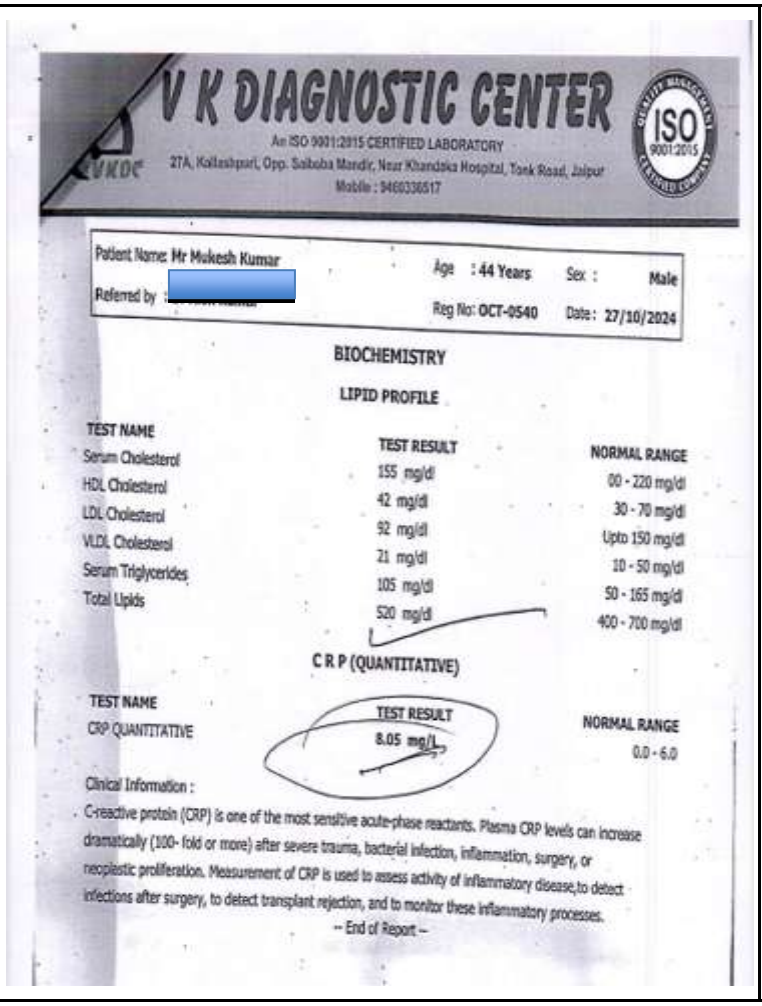
Before Treatment	After Treatment
General weakness (Daurbalya)[11]	Relief
Itching(6°) (SarIra Sula / Aṅga Mardana)[12]	Relief
Body Ache (5/10) (Chardi Purvarupa / Hrillasa)[13]	Relief (0/10)

Gas bloating (Adhmana / Anaha)[14]	Relief
Vomiting (Chardi)[15]	Relief

Biochemical parameters before and after treatment are compared in the table, which demonstrates improvements following the intervention. After treatment, hemoglobin levels are not mentioned. Improved liver function is shown by the decreases in the liver enzymes SGOT and SGPT, which went from 54 U/L to 35.81 U/L and 52 U/L to 40.62 U/L, respectively. The inflammatory marker CRP (C-reactive protein) has dropped dramatically from 8.0 mg/L to 3.01 mg/L, indicating less systemic inflammation. From 198 IU/mL to 195 IU/mL, IgE levels have decreased, suggesting no change in the immune or allergic response.

Table 6: Comparison of Pre and Post-Treatment

Parameters	**Findings**	
Date	**27/10/24**	**19/1/25**
SGOT	54U/L	35.81 U/L
SGPT	52U/L	40.62 U/L
CRP Quantitative	8.0mg/L	3.01mg/L
IgE	198 IU/mL	195 IU/mL


V K DIAGNOSTIC CENTER
An ISO 9001:2015 CERTIFIED LABORATORY
27A, Kailashpuri, Opp. Saibaba Mandir, Near Khandaka Hospital, Tonk Road, Jaipur
Mobile : 9460336517

Patient Name: Mr Mukesh Kumar Age : 44 Years Sex : Male
Referred by : [redacted] Reg No: OCT-0540 Date: 27/10/2024

BIOCHEMISTRY

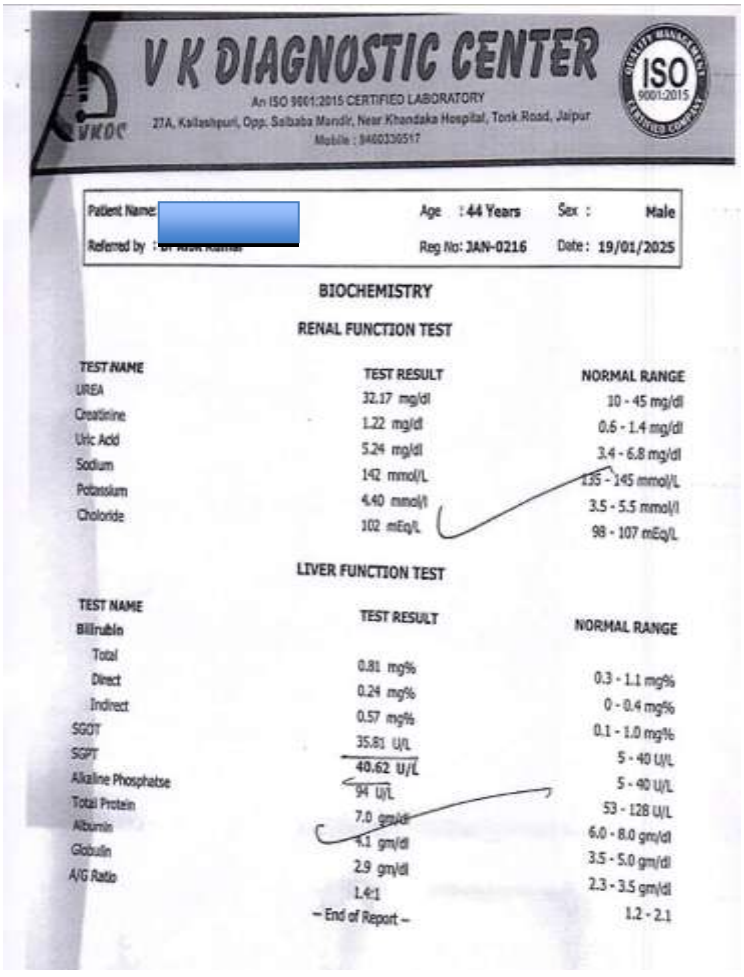
LIPID PROFILE

TEST NAME	TEST RESULT	NORMAL RANGE
Serum Cholesterol	155 mg/dl	00 - 220 mg/dl
HDL Cholesterol	42 mg/dl	30 - 70 mg/dl
LDL Cholesterol	92 mg/dl	Upto 150 mg/dl
VLDL Cholesterol	21 mg/dl	10 - 50 mg/dl
Serum Triglycerides	105 mg/dl	50 - 165 mg/dl
Total Lipids	520 mg/dl	400 - 700 mg/dl

C R P (QUANTITATIVE)

TEST NAME	TEST RESULT	NORMAL RANGE
CRP QUANTITATIVE	8.05 mg/L	0.0 - 6.0

Clinical Information :
C-reactive protein (CRP) is one of the most sensitive acute-phase reactants. Plasma CRP levels can increase dramatically (100- fold or more) after severe trauma, bacterial infection, inflammation, surgery, or neoplastic proliferation. Measurement of CRP is used to assess activity of inflammatory disease,to detect infections after surgery, to detect transplant rejection, and to monitor these inflammatory processes.
-- End of Report --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An ISO 9001:2015 CERTIFIED LABORATORY
27A, Kailashpuri, Opp. Saibaba Mandir, Near Khandaka Hospital, Tonk Road, Jaipur
Mobile : 9460336517

Patient Name: [redacted] Age : 44 Years Sex : Male
Referred by : [redacted] Reg No: JAN-0216 Date: 19/01/2025

BIOCHEMISTRY

RENAL FUNCTION TEST

TEST NAME	TEST RESULT	NORMAL RANGE
UREA	32.17 mg/dl	10 - 45 mg/dl
Creatinine	1.22 mg/dl	0.6 - 1.4 mg/dl
Uric Acid	5.24 mg/dl	3.4 - 6.8 mg/dl
Sodium	142 mmol/L	135 - 145 mmol/L
Potassium	4.40 mmol/l	3.5 - 5.5 mmol/l
Choloride	102 mEq/L	98 - 107 mEq/L

LIVER FUNCTION TEST

TEST NAME	TEST RESULT	NORMAL RANGE
Bilirubin		
Total	0.81 mg%	0.3 - 1.1 mg%
Direct	0.24 mg%	0 - 0.4 mg%
Indirect	0.57 mg%	0.1 - 1.0 mg%
SGOT	35.81 U/L	5 - 40 U/L
SGPT	40.62 U/L	5 - 40 U/L
Alkaline Phosphatse	94 U/L	53 - 128 U/L
Total Protein	7.0 gm/dl	6.0 - 8.0 gm/dl
Albumin	4.1 gm/dl	3.5 - 5.0 gm/dl
Globulin	2.9 gm/dl	2.3 - 3.5 gm/dl
A/G Ratio	1.4:1	1.2 - 2.1

-- End of Report --

Discussion:-

A 44-year-old male diagnosed with Chronic Liver Disease presented to Jeena Sikho Lifecare Limited Hospital, Jaipur, Rajasthan, with multiple systemic and gastrointestinal complaints. At baseline assessment, the patient exhibited generalized weakness (Daurbalya), generalized body pain (SharIra Shula / Aṅga Mardana), nausea (Hrillasa), vomiting (Chardi), abdominal bloating and flatulence (Adhmana / Anaha), and generalized pruritus (Kandu). These clinical manifestations indicate systemic metabolic impairment, hepatic dysfunction, and Doṣhic imbalance, predominantly involving Vata and Pitta Doṣhas, which are commonly observed in chronic hepatic disorders.

Nidana (Etiological Factors) of Yakṛit Vikara (Chronic Liver Disease):-

The Nidana of Yakṛit Vikara includes excessive intake of alcohol, fatty and fried foods, incompatible diet (Viruddha Ahara), irregular eating habits, and chronic exposure to toxins and drugs, which lead to Pitta and Vata Doṣha vitiation. Psychological stress, sedentary lifestyle, and metabolic disorders such as obesity and diabetes further contribute to Agnimandya and Ama formation.[16] These factors result in Raktavaha and Yakṛit Srotas Duṣhṭi, ultimately leading to chronic hepatic dysfunction and systemic manifestations.

Samprapti (Pathogenesis) of Yakṛit Vikara (Chronic Liver Disease):-

The Samprapti of Yakṛit Vikara involves vitiation of Pitta and Vata Doṣhas due to improper dietary habits, alcohol intake, metabolic disturbances, and chronic toxin exposure, leading to impairment of Raktavaha and Yakṛit Srotas. Vitiated Pitta causes hepatocellular inflammation and Rakta Duṣhṭi, while aggravated Vata results in Dhatu Kṣhaya and functional degeneration of hepatic tissue.[17] Progressive Srotorodha (channel obstruction) and Ama accumulation further impair Agni, leading to systemic manifestations such as Daurbalya, Adhmana, Chardi, and Kandu. This Doṣha–Duṣhya Sammurchana ultimately culminates in chronic hepatic dysfunction resembling Chronic Liver Disease in modern medicine.[18]

Diet and Lifestyle Recommendations (Ahara–Vihara) in Yakṛit Vikara:-

In Yakṛit Vikara, a Pitta-pacifying and Agni-enhancing diet is recommended, including light, easily digestible foods such as old rice, wheat, green gram (Mudga), bottle gourd, ridge gourd, bitter vegetables, and cow's ghee. Alcohol, oily, spicy, sour, fried, and processed foods should be strictly avoided as they aggravate Pitta and impair hepatic function. Lifestyle measures include adherence to Dinacharya, avoidance of night (Ratri Jagaraṇa) and daytime sleep (Divasvapna), regular mild exercise, and stress management through Praṇayama and meditation.[19,20] These measures help in Doṣha balance, Agni restoration, and prevention of disease progression.

Treatment Result:-

The comparative assessment revealed that all presenting clinical symptoms, including Daurbalya, SharIra Shula, Hrillasa, Chardi, Adhmana, and Kandu, were evident before treatment and showed marked improvement or complete resolution following Ayurvedic intervention. This indicates the effectiveness of the therapeutic regimen in alleviating systemic and gastrointestinal manifestations and improving the patient's overall clinical status. Biochemical parameters before and after treatment demonstrated notable improvements in hepatic and inflammatory markers. Liver function tests showed a reduction in serum SGOT and SGPT levels from 54 U/L to 35.81 U/L and from 52 U/L to 40.62 U/L, respectively, indicating improved hepatocellular function. Additionally, the inflammatory marker C-reactive protein (CRP) significantly decreased from 8.0 mg/L to 3.01 mg/L, reflecting a reduction in systemic inflammation. IgE levels showed a marginal decrease from 198 IU/mL to 195 IU/mL, suggesting minimal change in allergic or immunological status. Overall, these findings suggest that Ayurvedic intervention contributed to clinical and biochemical improvement in the patient with Chronic Liver Disease.

Need For Further Research:-

1. **Efficacy and Clinical Validation** – Conducting large-scale clinical trials to establish the effectiveness of Ayurvedic treatments for chronic liver diseases.
2. **Standardization and Safety** – Ensuring quality control, proper dosage, and safety profiling of Ayurvedic formulations to prevent hepatotoxicity.
3. **Mechanism of Action** – Investigating the biochemical and molecular effects of Ayurvedic herbs in liver regeneration and disease management.
4. **Integration with Modern Medicine** – Exploring Ayurveda can complement conventional treatments for improved liver health outcomes.

Conclusion:-

This case study highlights the potential role of Ayurvedic intervention in the management of Chronic Liver Disease. A 44-year-old male with Chronic Liver Disease treated at Jeena Sikho Lifecare Limited Hospital, Jaipur, Rajasthan, presented with multiple systemic and gastrointestinal complaints, including Daurbalya, SharIra Shula, Hrillasa, Chardi, Adhmana, and Kandu, indicating significant hepatic and metabolic dysfunction. Following the implementation of Ayurvedic treatment protocols along with dietary and lifestyle modifications, the patient demonstrated marked clinical and biochemical improvement. Liver function parameters showed a significant reduction in SGOT from 54 U/L to 35.81 U/L and SGPT from 52 U/L to 40.62 U/L, indicating improved hepatocellular function. The inflammatory marker CRP decreased from 8.0 mg/L to 3.01 mg/L, suggesting reduced systemic inflammation. Although IgE levels showed minimal change (198 IU/mL to 195 IU/mL), symptomatic relief was observed in all major clinical complaints, reflecting improved metabolic and systemic health. These findings suggest that Ayurvedic treatment, through Doṣha pacification, Agni restoration, and Srotas cleansing, may contribute to symptomatic relief and improvement in liver function. However, larger clinical studies and controlled trials are required to validate these observations and establish standardized integrative treatment protocols for Chronic Liver Disease.

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