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ROLE OF MANASIKA BHABA IN GRAHANI AND UPASAYATMAKA EFFECT OF MUSTAKADI CHURNA AND BRAHMI W.S.R TO IBS

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ABSTRACT

Background: *Grahani Roga is a chronic gastrointestinal disorder described in Ayurveda as a consequence of Agnidushti (impaired digestive fire), leading to Ama formation and dysfunction of Grahani. Clinically, it resembles Irritable Bowel Syndrome (IBS), a functional bowel disorder associated with altered bowel habits and psychological stress. Manasika Bhavas such as Chinta, Shoka, Bhaya, and Krodha play a significant role in disturbing Agni and gut function.*

Objectives:
To evaluate the role of Manasika Bhavas in the etiopathogenesis of Grahani Roga (IBS) and to assess the therapeutic efficacy of Mustakadi Churna and Brahmi Vati in its management.

Materials and Methods*: An open-label randomized clinical trial was conducted on 30 patients diagnosed with Grahani (IBS) as per classical features and Rome IV criteria. Patients aged 18–50 years were administered Mustakadi Churna (4 g twice daily before food with honey) and Brahmi Vati (500 mg, 2 tablets after food) for 30 days. Assessment was based on subjective parameters (bowel habits, abdominal pain, anorexia, bloating, udgara) and Manasika parameters (Chinta, Shoka, Bhaya, Krodha, Avasada, Udvega), along with objective investigations. Statistical analysis was performed using Wilcoxon signed-ranktest.*

Results: *Statistically significant improvement ($p<0.05$) was observed in major gastrointestinal symptoms with an average improvement of 67.38%. Significant relief was also noted in psychological parameters such as Chinta (60.34%), Krodha (66.67%), and Udvega (66.67%). Overall, 20% patients showed marked improvement, 73.33% moderate improvement, and 6.67% mild improvement. No adverse effects were reported during the study.*

Conclusion: *The study suggests that Grahani is a psychosomatic disorder involving Agnidushti and gut–brain axis imbalance. Combined therapy with Mustakadi Churna and Brahmi Vati effectively improves digestive function and mental well-being, providing a safe, holistic, and cost-effective approach in the management of Grahani (IBS).*

KEYWORDS: *Grahani , IBS, Agni, Mustakadi Churn, Gut-brain axis*

INTRODUCTION

Ayurveda is an ancient applied science with continuous practice that emphasizes holistic health by maintaining balance among body, mind, soul, and senses. It focuses on disease prevention and health promotion using natural substances, gaining importance in the modern era due to limitations and side effects of synthetic drugs. Lifestyle changes such as irregular diet, fast food consumption, sedentary habits, and mental stress have contributed to digestive disorders. According to Ayurvedic classics, Grahani Roga[1] originates from impaired Agni (Mandagni), leading to improper digestion and symptoms such as abdominal pain, distension, anorexia, indigestion, and irregular bowel movements[2+]. Ancient Acharyas described Grahani as Agni Adhisthana, and its disturbance is considered the root cause of many diseases.

The clinical features of Grahani closely resemble Irritable Bowel Syndrome (IBS), a common gastrointestinal disorder affecting nearly 15% of the global population, often associated with psychological factors like anxiety and stress. Ayurveda explains Grahani as primarily caused by Vata derangement, especially Apanavayu, along with involvement of other Doshas and Manasika Bhavas such as fear, anger, and grief, which disturb Agni and digestion. Considering the limitations of conventional treatment, alternative Ayurvedic therapies are increasingly explored. This study aims to evaluate the role of Manasika Bhavas in Grahani Roga and IBS and assess the

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therapeutic efficacy of Mustakadi Churna and Brahmi Vati in its management.

AIMS AND OBJECTIVES

- To establish the role of *Manasika Bhaba* in the pathogenesis of *Grahani.*
- To establish the correlation between *Grahani* and IBS.
- To assess the efficacy of *Mustakadi Churna and Brahmi Vati* as a therapy of *Grahani*

REVIEW OF LITERATURE

In Ayurveda, Grahani is described as the seat of Agni (digestive fire) and plays a central role in digestion and absorption. Classical texts including Charaka, Sushruta, and Vagbhata describe Grahani as located between Amashaya (stomach) and Pakwashaya (large intestine), corresponding functionally to the duodenum and small intestine. It is identified with Pitta Dhara Kala and acts as Agni Adhisthana, responsible for receiving, retaining, digesting, and regulating the passage of food. The integrity of Grahani depends upon the strength of Agni[3]; impairment of Agni leads to Grahani Dosha and subsequently Grahani Roga.

The process of digestion (Pachana) involves Avasthapaka (Madhura, Amla, and Katu stages) followed by Vipaka[4], regulated by Jatharagni, Doshas, and supportive factors such as Ushma, Vayu, Kleda, Sneha, and Kala. Mandagni (hypofunction of Agni) is the primary cause of Grahani Roga, leading to improper digestion, Ama formation, and gastrointestinal dysfunction**.**

Grahani Roga is a major gastrointestinal disorder in Ayurveda caused primarily by Agnidushti, especially Mandagni (impaired digestive fire), which leads to improper digestion and Ama formation. Grahani and Agni have an Ashraya–Ashrita relationship, and impairment of Agni results in functional and structural derangement of Grahani. The main etiological factors include faulty dietary habits such as Vishamashana, Viruddhashana, and Atibhojana, improper lifestyle practices like Diwaswapna, Ratrijagarana, Vega Vidharana, and psychological factors such as fear, anger, and stress.

According to Acharya Charaka and Sushruta, Grahani Roga develops through stages of Agni Dushti, Apachana, Ama formation, and Grahani Dosha, eventually progressing to Grahani Roga. Clinically, it presents with symptoms such as indigestion, anorexia, thirst, abdominal pain, burning sensation, and irregular bowel habits[5]. Grahani Roga is classified into four types: Vataja, Pittaja, Kaphaja, and Sannipataja[6]. The disease involves vitiation of Doshas, especially Samana Vayu, Pachaka Pitta, and Kledaka Kapha, affecting Annavaha and Purishavaha Srotas. Thus, Grahani Roga represents a chronic condition resulting from impaired digestion and altered gastrointestinal function.

Irritable Bowel Syndrome (IBS)[7] is a functional gastrointestinal disorder characterized by recurrent abdominal pain and altered bowel habits (constipation, diarrhea, or mixed pattern) in the absence of structural or biochemical abnormalities. It is also known as spastic colon or mucous colitis.

The exact etiology is unknown; however, proposed mechanisms include altered gastrointestinal motility, visceral hypersensitivity, post-infectious changes, neurotransmitter imbalance (especially serotonin), gut-brain axis dysregulation, psychosocial stress, dietary factors, and genetic predisposition.

Pathogenesis involves abnormal motility, enhanced pain perception, serotonin dysregulation, and stress-mediated corticotropin-releasing hormone activity. Diagnosis is symptom-based using Rome IV criteria.[7]

Management includes dietary modification[8] (fiber regulation, low-FODMAP diet), lifestyle changes, stress reduction, probiotics, and pharmacological therapy tailored to IBS subtype (IBS-C, IBS-D, or mixed)[9]. Though non-life-threatening, IBS significantly affects quality of life.

In the present study, two formulations Mustakadi Churna and Brahmi Vati were selected for clinical evaluation. Raw drugs were authenticated by experts and prepared under GMP guidelines. Mustakadi Churna contains[10] Mustaka (*Cyperus rotundus*), [11]Ativisha (*Aconitum heterophyllum*), Bilva[12] (*Aegle marmelos*), and Indrayava (*Holarrhena antidysenterica*)[13]. These drugs possess Deepana, Pachana, Grahi, and Sangrahaka properties, useful in Atisara and Grahani. Brahmi Vati, prepared from *Bacopa monnieri*, is a Medhya Rasayana with neuroprotective, anxiolytic, and adaptogenic properties. Both formulations target Agnidushti, Ama formation, and gut–brain axis imbalance.

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MATERIALS AND METHODS

Study Design

This was an open label, randomized clinical trial conducted on 30 patients diagnosed with *Grahani*(IBS). Patients were randomly selected from the OPD and IPD of Govt. Ayurvedic College & Hospital, Balangir and Saradeswari Govt. Ayurvedic Hospital, Balangir, Odisha. Written informed consent was obtained from all participants prior to enrolment.

Selection of Patients

A special proforma was prepared for screening, including detailed history taking, physical examination, subjective and objective parameters, and relevant pathological investigations. Patients fulfilling the diagnostic criteria for *Grahani Roga and IBS* were included.

Inclusion Criteria

1.The patients between the age group of 18-50 years, irrespective of sex.
2. Patient having classical sign and symptoms of Grahani
3.Patients who fulfil the diagnostic criteria of IBS, mentioned in Rome IV criteria.

Exclusion Criteria

1. Patients having age group of <18 years and >50 years

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2.Patients with disorder like Peptic ulcer, Carcinoma of colon, Crohn's disease, Colon polyp, Ulcerative colitis.
3. History of frequent hematemesis and melena.4. Pregnant and Lactating mother
5. Patients suffering from multiple organ disease.
6. Patients with Unmada, Apasmara , Alzheimer's disease etc.

Grouping and Treatment -30 patients were given Mustakadi Churna twice daily in empty stomach and Brahmi Vati after food internally for 30 days.

Group Comparisons
BT VS AT……. Effectiveness of treatment was assessed
(BT-Before Treatment, AT-After Treatment)

Selection and Preparation of Drug
All the ingredients of Mustakadi Churna – Musta, Ativisha, Indrayava, Bilwamajja were collected in dry format and Churna was prepared in the mini pharmacy. *Brahmi* was identified and authenticated by experts of the Department of Dravyaguna, approved by DRC and IEC, Govt. Ayurvedic College & Hospital, Balangir, and Sambalpur University. After drying churna and Vati was prepared in the departmental mini-pharmacy following Good Manufacturing Practice (GMP) under the supervision of the H.O.D., Department of Rasa Shastra & Bhaiṣajya Kalpana. A sample was sent to Quality Control Laboratories, Sambalpur University for analytical verification.

Mustakadi Churna-
- Dose: 4 gm before food (morning and night)
- *Anupāna*: Honey
- Duration: 30 days

Brahmi Vati-
- Dose- 2tab of 500mg
- Anupana- Water
- Duration- 30 days

Assessment Criteria
Subjective Parameters
1. Ati- Vaddha and Ati- Sristamala
2. Udara Shoola (Abdominal Pain)
3. Aruchi (Anorexia)
4. Adhmana (Abdominal Bloating)
5. Louhaamagandhi Tiktamla Udgara
6. Manashika Parameters- Chinta, Shoka ,Bhaya, Krodha, Avasada, Udvega

Objective Parameters
- Investigations- TLC, ESR, Hb%

Scoring Method
Severity was graded on a scale of 0–3 for each parameter and assessed on 15th and 30th day of treatment.

Observation and Result
The subjective and objective parameters were observed during clinical Study. The percentage of improvement were also observed and assessed after clinical trial. After observation of subjective and objective parameters, the statistical analysis of parameters, were assessed by the help of statistical method.

Observation on sharirika Bhaba-

Parameter (Subjective)	% Effect
Atisrusta-Ativaddha mala	62.67
Udara Shoola(Anorexia)	74.47
Aruchi(Anorexia)	60.32
Adhmana(Abdominal Bloating)	65.38
Louhaamagandhi Tiktaamla Udgara	74.07
Average % Effect	67.38

Sharirika Bhaba		Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
Atisrusta-Ativaddha mala	BT	2.50	2.00	0.57	0.10	-4.916	0.0000009	62.67	Sig
	AT	0.93	1.00	0.58	0.11				
Udara Shoola	BT	1.57	1.00	0.77	0.14	-4.882	0.0000011	74.47	Sig
	AT	0.40	0.00	0.50	0.09				
Aruchi	BT	2.10	2.00	0.71	0.13	-4.428	0.0000095	60.32	Sig
	AT	0.83	1.00	0.53	0.10				
Adhmana	BT	1.73	2.00	1.17	0.21	-4.326	0.0000152	65.38	Sig
	AT	0.60	1.00	0.56	0.10				
Louhaamagandhi Tiktaamla Udgara	BT	0.90	1.00	0.80	0.15	-4.264	0.0000201	74.07	Sig
	AT	0.23	0.00	0.43	0.08				

Percentage effect of Manashika Bhaba

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Observation on Manshika Bhava:

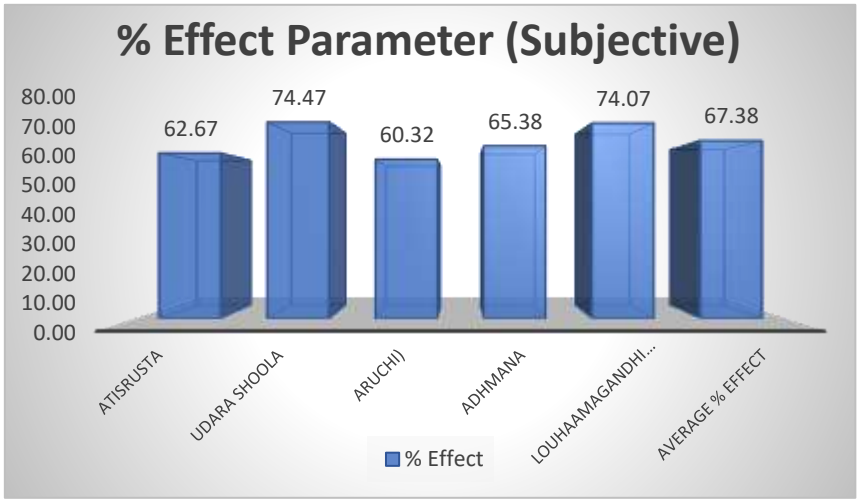
Manashika Bhaba		Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
Chinta	BT	1.93	2.00	1.26	0.23	-4.215	0.0000250	60.34	Sig
	AT	0.77	1.00	0.57	0.10				
Shoka	BT	0.47	0.00	0.86	0.16	-2.333	0.0196307	50.00	Sig
	AT	0.23	0.00	0.50	0.09				
Bhaya	BT	0.03	0.00	0.18	0.03	-1.000	0.3173105	100.00	NS
	AT	0.00	0.00	0.00	0.00				
Krodha	BT	0.50	0.00	1.04	0.19	-2.271	0.0231409	66.67	Sig
	AT	0.17	0.00	0.38	0.07				
Avasadha	BT	0.20	0.00	0.66	0.12	-1.633	0.1024704	66.67	NS
	AT	0.07	0.00	0.25	0.05				
Udvega	BT	1.00	1.00	0.98	0.18	-3.753	0.0001751	66.67	Sig

Percentage effect of Manashika Bhaba

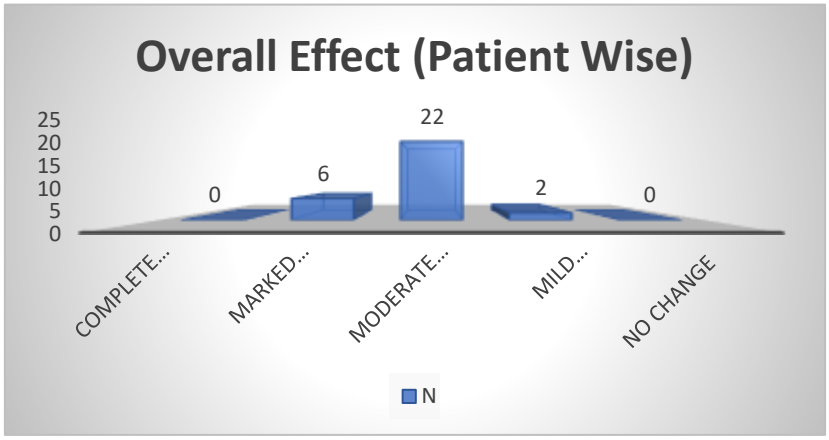
Parameter (Manashika Bhaba)	% Effect
Chinta	**60.34%**
Shoka	**50%**
Bhaya	**100 %**
Krodha	**66.67%**
Avaseda	**66.67%**
Udvega	**66.67%**

Percentage Effect

Parameter (Subjective)- Percentage effect of Subjective parameters



Overall Effect (Patient Wise)-.



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Overall Effect (Patient Wise)	Overall Effect	
	N	%
Complete Relief	0	0.00%
Marked Improvement	6	20.00%
Moderate Improvement	22	73.33%
Mild Improvement	2	6.67%
No Change	0	0.00%
TOTAL	30	100.00%

DISCUSSION

Grahani is considered the seat of Agni and plays a vital role in digestion, absorption, and assimilation of food. Impairment of Agni (Mandagni) leads to improper digestion and formation of Ama, resulting in Grahani Roga. This condition presents with symptoms such as alternate constipation and diarrhea (Muhurbaddha Muhurdrava Mala), abdominal pain (Udarashoola), bloating (Adhmana), anorexia (Arochaka), and weakness (Klama). These manifestations indicate functional disturbance of the gastrointestinal tract due to Agnidushti. The clinical features of Grahani closely resemble Irritable Bowel Syndrome (IBS), a functional gastrointestinal disorder characterized by altered bowel habits and abdominal discomfort without structural abnormalities. IBS involves gut motility disturbance, visceral hypersensitivity, and gut–brain axis imbalance. Similarly, in Grahani Roga, Mandagni, Ama formation, and Vata Dosha aggravation play a major role. Thus, Grahani can be correlated with IBS based on similarity in symptoms and pathogenesis.

Role of Diet, Lifestyle, and Psychological Factors-

Improper dietary habits such as irregular meal timing, intake of junk and spicy food, and sedentary lifestyle contribute to impairment of Agni. Mental factors such as stress, anxiety, fear, and emotional disturbances also affect digestion and lead to Grahani. In the present study, most patients had irregular diet, disturbed sleep, and stress, indicating the important role of Ahara, Vihara, and Manasika Bhava in disease manifestation.

Role of Agni and Ama in Pathogenesis-

Agni plays a central role in maintaining digestive health. Mandagni leads to formation of Ama, which obstructs body channels and causes Dosha imbalance, especially Vata aggravation. This results in irregular bowel habits, abdominal discomfort, and improper digestion. Therefore, correction of Agni and elimination of Ama is the main principle in the management of Grahani Roga.

Effect of Trial Drugs-

The trial drugs, Mustakadi Churna and Brahmi Vati, showed significant therapeutic effect in the management of Grahani Roga due to their action on both digestive and psychological components of the disease. Mustakadi Churna possesses Deepana (enhances digestive fire), Pachana (digests Ama), and Grahi (improves absorption and controls loose stools) properties. These actions help in correcting Mandagni, reducing Ama formation, and restoring normal digestive and absorptive functions. As a result, symptoms such as Muhurdrava Mala, Muhurbaddha Mala, Udarashoola, Adhmana, and Arochaka were significantly reduced. The Grahi property also helps in regulating bowel frequency and improving stool consistency.

Brahmi Vati acts primarily on the Manasika Bhava and nervous system due to its Medhya (nootropic), Manasbalya (mind-strengthening), and anxiolytic properties. It helps in reducing stress, anxiety, and emotional disturbances, which are important contributing factors in the pathogenesis of Grahani and IBS. By calming the mind and regulating the gut–brain axis, Brahmi Vati indirectly improves Agni and digestive function.

The combined administration of Mustakadi Churna and Brahmi Vati provided a synergistic effect by correcting Agnidushti, balancing aggravated Doshas (especially Vata), improving mental stability, and restoring normal gastrointestinal function. This dual action on both Shariirika and Manasika factors resulted in overall improvement in symptoms and quality of life of patients.

Overall Therapeutic Response-

The clinical study showed statistically significant improvement in major symptoms such as abdominal pain, bloating, altered bowel habits, and anorexia. Most patients showed moderate improvement, while some showed marked improvement. The improvement may be attributed to the Deepana, Pachana, Grahi, and Medhya properties of the trial drugs, which act on both digestive and psychological aspects of the disease.

Gut–Brain Axis Perspective-

Modern science explains IBS as a disorder of gut–brain interaction influenced by stress and psychological factors. Ayurveda also recognizes the role of Manasika Bhava such as Chinta, Bhaya, and Shoka in disturbing Agni and causing Grahani. Thus, both Ayurveda and modern medicine acknowledge the psychosomatic nature of the disease.

CONCLUSION

Grahani Roga is primarily caused by Agnidushti and Dosha imbalance, influenced by improper diet, lifestyle, and Manasika Bhavas such as Chinta, Bhaya, Shoka, and Krodha, which disturb Agni and impair digestive function. Proper management through Nidana Parivarjana, correction of Agni, and improvement of mental health plays a key role in treatment and prevention.

Mustakadi Churna, having Deepana, Pachana, Grahi, and Dosha-shamaka properties, effectively improves digestion, reduces Ama, and regulates bowel habits. Brahmi Vati supports mental stability and helps in reducing psychological stress, thereby improving gut–brain axis balance. The combined

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therapy showed significant clinical improvement, with most patients demonstrating moderate to marked relief in symptoms of Grahani Roga (IBS). 6(20%) patients demonstrated marked improvement, 22(73.33%) showed moderately improved,, while 2(6.67%) patients had achieved excellent mild improvement.

The study confirms that Grahani is a psychosomatic disorder involving both Sharirika and Manasika factors. The combined use of Mustakadi Churna and Brahmi Vati provides a safe, cost-effective, and holistic approach by improving Agni, regulating bowel function, and enhancing mental well-being. Adoption of proper Ahara, Vihara, and lifestyle practices is essential for prevention and long-term management. No adverse effects were observed during the study, indicating the safety and therapeutic potential of the intervention.

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RESEARCH PROFORMA

POST GRADUATE DEPARTMENT OF ROGA NIDANA EVAM VIKRITI VIGYANA
GOVT. AYURVEDIC COLLEGE & HOSPITAL, BALANGIR

TITLE OF TOPIC

"ROLE OF MANASHIKA BHABA IN GRAHANI ROGA AND UPASAYATMAKA EFFECT OF MUSTAKADI CHURNA AND BRAHMI VATI W.S.R IBS"

RESEARCH SCHOLAR
Dr.Archana padhi

GUIDE
Dr. Utkalini Nayak
CO-GUIDE
Dr. Manoranjan Sahu

1. PARTICULARS OF PATIENT

Casesheet No. ☐ Date of Registration ☐

Central registration No. ☐ OPD No. ☐ IPD No. ☐

Date of discharge/closure/dropout ☐ Group ☐

Name of the Patient.....

C/O, D/O.....

Address-.....

Mobile No.....

Age ☐

Sex:- Male ☐ Female ☐

Religion ☐

Marital Status:- Married ☐ Unmarried ☐ Widow ☐

Nationality ☐

Educational Status:-Illiterate ☐ Literate ☐

Occupation ☐

Socio-economical status-Below Poverty Line ☐ Middle class ☐ Upper class ☐

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2. PRADHAN VEDANA (CHIEF COMPLAINTS WITH DURATION)

	YES	NO	DURATION
1. Atisrusta Mala(Diarrhoea) (SAT-D.382)	☐	☐	☐
2. Atibaddha Mala (Constipation) (SAT-D.361)	☐	☐	☐
3. Udara Shoola(Abdominal Pain) (SAT-D.1594)	☐	☐	☐
4. Aruchi (Anorexia) (SAT-D.3623)	☐	☐	☐
5. Sunapadakara (Odema of feets and hands) (SAT-D.7838)	☐	☐	☐
6. Krusata (Weight Loss) (SAT-D.2388)	☐	☐	☐
7.Adhmana (Abdominal Bloating) (SAT-D.347)	☐	☐	☐
8. Lohaamagandhi Tiktamla Udgara (SAT-D.6768) (SAT-D.3590)	☐	☐	☐

3. HISTORY OF PRESENT ILLNESS

Onset from-

Type of onset- Gradual ☐ Sudden ☐ Insidious ☐

Types of diseases- Acute(15 to 30 days) ☐ Chronic(More than 30 days) ☐

Severity- Mild ☐ Moderate ☐ Severe ☐

4. HISTORY OF PAST ILLNESS-

5. TREATMENT HISTORY-

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6. FAMILYHISTORY-

7. PERSONAL HISTORY-

Type of diet- Vegetarian ☐ Mixed ☐

Quantity of Diet- Poor ☐ Medium ☐ Adequate ☐

Addiction- Tea ☐ Coffee ☐ Smoking ☐ Tobacco ☐ Alcohol ☐

Sleep- Sound ☐ Disturbed ☐

Urination – Normal ☐ Less ☐ More ☐

Bowel Habit- Normal ☐ Abnormal ☐

Vyayama- Regular ☐ Irregular ☐ Occasional: ☐

8. Menstrual History

Menstrual phase- Regular : ☐ Irregular: ☐ Menopause: ☐

9. Physical examination-

Pulse (Per minute)- Respiration rate- Heart rate-

Temperature- BP (mmHg)-

Weight:

Pallor- Cyanosis- Lymphadenopathy-

Icterus- Oedema-

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10.SYSTEMICEXAMINATION:-	Normal	Abnormal
Cardiovascular system	☐	☐
If abnormal, details.....		
Central Nervous system	☐	☐
If abnormal, details.....		
Respiratory system	☐	☐
If abnormal, details.....		
Digestive system	☐	☐
If abnormal, details.....		
Urogenital system	☐	☐
If abnormal, details.....		
Locomotor system	☐	☐
If abnormal, details.....		

11.SROTASPARIKSHYA:-	Prakrita	Vikrita
1. PranavahaSrotas-	☐	☐
2. UdakavahaSrotas-	☐	☐
3. AnnavahaSrotas-	☐	☐
4. RasavahaSrotas	☐	☐
5. RaktavahaSrotas-	☐	☐
6. MamsavahaSrotas-	☐	☐
7. MedavahaSrotas-	☐	☐
8. AsthivahaSrotas-	☐	☐
9. MajjavahaSrotas-	☐	☐
10. Sukra/ArtavavahaSrotas-	☐	☐
11. PurishavahaSrotas-	☐	☐
12.MutravahaSrotas-	☐	☐

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13. SwedavahaSrotas- ☐ ☐

14.ManovahaSrotas- ☐ ☐

12.DASAVIDHA PARIKSHYA

- Prakriti (Body constituents):- V / P / K / VK / PK / VPK
- Vikriti (Abnormality):- Balabanavyadhi /Madhyamabalavyadhi / Alpabalavyadhi
- Sara (Tissue Vitality):- Sarvasara /Madhyamasara / Alpasara
- Samhanana (compactness of body):- Pravara/ Mdhyama /Avara
- Pramana (Body measurement):- Samasarira / Madhyamasarira / Hina sarira
- Satwa (mental state):- Pravara / Madhyama / Avara
- Satmya (adaptability):-pravara/ Madhyama / Avara
- Aharashakti (Digestive power):-Pravara/ Madhyama / Avara
- Vyayamashakti (Detemination of strength):- Uttama/ Madhyama /Avara
- Vaya (Age):- Balya / Madhyama/ Jirna

13 . ASTHAVIDHA PARIKSHYA:-

- **Nadi:**- V /P /K / VP / VK / PK /VPK
- **Mutra:**- Varna- Prakrita/ Vikrita
  Matra- Alpa / Madhyama /Adhika
- **Mala:**- Sama / Nirama
- **Jihwa:**-Varna- Prakrita /Vikrita
  Swaroop-Lipta/ Alipta Sushka/ Ardra
- **Shabda:**- Spastha / Aspastha
- **Sparsha:**- Ruksha /Snigdha/ Ushna / Sheeta
- **Drik:**- Prakrita /Vikrita
- **Akriti:**- Krisha/ Sthula

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14. INVESTIGATION-

Blood-

DC	N.....E.....B.....L.....M.....
TLC	
ESR	
Hb%	

15. DIFFERENTIAL DIAGNOSIS:-

16. DIAGNOSIS:-

Signature of Scholar

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PROFORMA FOR ASSESSMENT

Case sheet no:- [ ]

Name of the Patient-.....

Age:- [ ] Sex:- Male [ ] Female [ ]

Date of assessment- [ ]

GRADING- (Subjective Parameters)

ILLNESS	SEVERITY	GRADE	BT	AT
Atibaddha Mala (Constipation)	Severe constipation	3		
	Moderate constipation	2		
	Mild constipation	1		
	No constipation	0		
Atisrista Mala (Diarrhea)	Severe Diarrhea	3		
	Moderate Diarrhea	2		
	Mild Diarrhea	1		
	Occasionally seen	0		
Udara Shoola (Abdominal Pain)	Severe pain (Sharp)	3		
	Mild to moderate pain	2		
	Occasionally pain	1		
	No pain	0		
Aruchi (Anorexia)	Severe Anorexia	3		
	Moderate Anorexia	2		
	Mild Anorexia	1		
	No Anorexia	0		
Sunapadakara (Oedema in hands and feet)	Severe Odema	3		
	Mild to moderate Odema	2		
	Occasionally Seen	1		
	No Odem	0		
Krusata (weight Loss)	Severe Weighy loss	3		
	Gradual Weight Loss	2		
	Mild Weight Loss	1		
	No weight loss	0		

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Adhmana (Abdominal Bloating)	Severe Bloating through out the day	3		
	Mild to moderate Bloating	2		
	Bloating after food intake	1		
	No Bloating	0		
Tiktamla Udgara	Throught out the day	3		
	Soon after ingestion of food	2		
	Occasionally seen	1		
	Not Present	0		

ASSESSMENT OF MANASHIKA BHABA-

MANASIKA BHAVA	PRESENT	ABSENT	BEFORE TREATMENT	AFTER TREATMENT
Chinta				
shoka				
Bhaya				
Krodha				
Avasada				
Udvega				

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Pathological investigation (Objective Parameters)-

TLC	>13500/Cu mm	3		
	12000-13500/Cu mm	2		
	10500-12000/Cu mm	1		
	4500-10500/Cu mm	0		
ESR	>30 mm/hr	3		
	21-30 mm/hr	2		
	11-20 mm/hr	1		
	<10 mm/hr	0		

Hb%	6 – 7.4 gm%	3		
	7.4-8.5 gm%	2		
	8.5-10 gm%	1		
	>10 gm%	0		

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ASSESSMENT

SUBJECTIVE PARAMETERS

Subjective Parameters	Grade on 0th day	Grade on 15th Day	Grade on 30th Day
Atisrusta Mala			
Atibaddha Mala			
Weight Loss			
Sunapadakara			
Lohaamagandhi Tiktamla Udgara			
Abdominal Pain			
Adhmana			
Arochaka			

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OBJECTIVE PARAMETER-

Objective parameter	Grade on 0th day	Grade on 15th day	Grade on 30th day
TLC			
ESR			
Hb%			

ASSESSMENT RESULT

Finally all over result is calculated by taking all parameters

SUBJECTIVE PARAMETERS	BEFORE TREATMENT	AFTER TREATMENT	% OF IMPROVEMENT
Atibaddha Mala			
Atisrusta Mala			
Abdominal pain			
Adhmana			
Arochaka			
Sunapadakara			
Loha amagandhitiktamla udgara			
Weight Loss			
Puti Mala Pravritti			

Objective Parameters	Before Treatment	After Treatment
TLC		
ESR		
Hb%		

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RESULT:-

IMPROVEMENT IN PERCENTAGE	RESPONSE OF THE DRUG
0% - 25%	Unsatisfactory
26% - 50%	Mild improvement
51% - 75%	Moderate improvement
76% - 100%	Marked improvement

OVERALL RESPONSE OF THE TREATMENT:-

Poor/Unsatisfactory ☐ **Mild** ☐ **Moderate** ☐ **Marked** ☐

Signature of Scholar **Signature of co-guide** **Signature of guide**

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CONSENT FORM

I .....have been informed to my satisfaction, by the attending physician, for the purpose of the clinical trial and the nature of drug treatment and follow-up, including the laboratory investigations to be performed for monitoring and safeguard of my body function.

I am giving my free consent to be included myself as a subject in the ***"ROLE OF MANASHIKA BHABA IN GRAHANI ROGA AND UPASAYATMAKA EFFECT OF MUSTAKADI CHURNA AND BRAHMI VATI W.S.R IBS".***

I am also aware of my right to opt out of the trial at any time during the course of trial.

Date.....

Name of the patient

Signature or thumb impression