CASE REPORT

Anti-diarrheal Role of Dhanyapanchaka Kwatha in Abdominal manifestation in Covid-19 case –A Single Case Study

Minal S. Vaidya, ^{1*}Parulkar Geeta Deodatt, ²Pravin Gopinath Jagtap³

¹PhD scholar. ² Professor Department of Kayachikitsa. R. A. Podar Ayurved Medical College Worli Mumbai. ³ Assistant Professor Department of Kayachikitsa. Y.M.T Ayurvedic Medical College, Kharghar. Navi Mumbai

ABSTRACT:

Background: The Ayurvedic clinical framework of COVID-19 is a pre-requisite for developing standalone and integrated treatment approaches. At present, Ayurvedic clinicians do not have access in the management of COVID-19 patients in private clinical settings. In these circumstances, the attempt was made only to treat abdominal manifestation in Covid-19 positive case with routine treatment protocol by ICMR. A single case of Covid 19 selected from CCC Hospital and *Dhanyapanchak Kwatha* along with Tab. Hydroxychloroquine. Tab. Vitamin C and Tab. Zincovit (As per ICMR protocol for Covid19) advice for patient. The promising outcome observed in case study with respect to symptoms.

Keywords: Covid19, *Dhanyapanchaka Kwatha*, Tab. HCQ, Tab. Zincovit.

INTRODUCTION:

The coronavirus disease 2019 (COVID-19) pandemic, caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), presents an ongoing global threat. Common clinical features reported in early confirmed infections included fever, cough, and myalgias or fatigue¹. As testing capacity and case numbers have increased worldwide, however, gastrointestinal (GI) symptoms, such as di-

arrhea, nausea, vomiting, abdominal pain, and loss of appetite, have been increasingly recognized²⁻⁴. Although lung injury is most common, liver injury of uncertain origin has been observed in patients with COVID-19, with increased frequency in severe cases⁵

SARS-CoV-2 is thought to gain access to cells via surface expression of angiotensin-converting enzyme 2 (ACE2)⁶. Thus, tissues with high levels of ACE2 expression are as-

Access the article online

Quick Response Code

www.thehealerjournal.org

DOI: 10.51649/healer.21

*Corresponding Author:

Dr Minal S. Vaidya

PhD scholar. Department of Kayachikitsa. R. A. Podar Ayurved Medical College Worli Mumbai.

E-mail: drminalsvaidya@gmail.com

Submitted: 14.11.2020

Received: 20.01.2021

Revised: 21.01.2021

Accepted: 26.01.2021

sumed to be susceptible to direct infection. ACE2 surface expression is most abundant in lung alveolar epithelial cells, enterocytes of the small intestine, and the vascular endothelium. The large amount of ACE2 surface expression in the GI tract and, to a lesser extent, in the biliary epithelium has been offered as a possible explanation for GI symptoms and liver injury. In addition, SARS-CoV-2 has been identified in stool samples of a substantial proportion of infected patients⁷. Several reports have evaluated chest imaging findings in patients with COVID-19, leading to a greater understanding of pathogenesis in the lung. Despite the widening recognition of abdominal manifestations, to our knowledge, corresponding abdominal imaging findings have not yet been reported. Imaging findings may increase the understanding of abdominal phenomena in SARS-CoV-2 infection.² Further, radiologists should be aware of abdominal imaging findings in patients with COVID-19. The purpose of this study is to treat abdominal Manifestation in Covid 19 positive case

Case Details:

Patient information

The patient aged 68 years is Retired Govt. servant, in Navi Mumbai. He is well built, with a height of 5.6" and weighing 78kg.

Present medical history

Patient on the first day of fever contacted Kayachikitsa (Medicine)OPD in Ayurvedic Hospital in Navi Mumbai for a consultation and started on Ayurvedic medication for his complaints. He was admitted in hospital, on the suspicion of the possibility of a COVID-19 infection. Presenting symptoms were fever associated with body pain, loss of taste, abdominal pain, Nausea, anorexia, and loose motion. Fever lasted for two days. Fever is understood well in Ayurveda, and COVID-19 being one such, the patient management was started as per Ayurvedic understanding of Sannipataj Jwara.

Past Medical History: Nil

Details of the symptoms, number of days it lasted, tests performed and medicines recommended are given below in Table 1.

Table 1: Course of the disease:

Date/Day	Symptoms	Grade	Test	Treatment
18/09/2020 1 st Day	Fever	3	NA	<ul style="list-style-type: none"> I V Fluids RL 1 point DNS 1 Point 6 hrly <ul style="list-style-type: none"> Dhanyapanchak kwatha⁸ 40ml BD After Food
	Body ache	3		
	Loss of taste	3		
	Abdominal Pain	2		
	Nausea	3		
	Loose Motion	3		
19/09/2020 2 nd Day	Fever	3	RT-PCR:+ve Sr.LDH:1149.98 CRP:99.1mg/dl WBCs:12600 LFT:WNL RFT:WNL Sr.Electolyte:WNL Urine R/M:WNL	<ul style="list-style-type: none"> I V Fluids RL 1 point DNS 1 Point 6 hrly <ul style="list-style-type: none"> Tab.HCQ 400mg BD Tab. Vit C 1OD Tab. Zincovit 1 OD Tab. Dolo 650 1 BD Dhanyapanchak kwatha⁸ 40ml BD After Food
	Body ache	2		
	Loss of taste	2		
	Abdominal Pain	1		
	Nausea	1		
	Loose Motion	2		

20/09/2020 3 rd Day	Fever	1		<ul style="list-style-type: none"> I V Fluids RL 1 point DNS 1 Point 6 hrly <ul style="list-style-type: none"> Tab. HCQ 400mg BD Tab. Vit C 1 OD Tab. Zincovit 1 OD Tab. Dolo 650 1 BD Dhanyapanchakkwatha 40ml BD After Food
	Body ache	1		
	Loss of taste	1		
	Abdominal Pain	1		
	Nausea	0		
	Lose Motion	1		
21/09/2020 4 th Day	Fever	0		<ul style="list-style-type: none"> I V Fluids RL 1 point DNS 1 Point 6 hrly <ul style="list-style-type: none"> Tab. HCQ 400 mg BD Tab. VitC 1 OD Tab. Zincovit 1 OD Tab. Dolo 650 1 BD Dhanyapanchakkwatha 40ml BD After Food
	Body ache	0		
	Loss of taste	0		
	Abdominal Pain	0		
	Nausea	0		
	Lose Motion	0		

Out Come: From 5th day onwards patient was completely asymptomatic.

After 10day of institutional Quarantine patient was send for 7days Home quarantine as per ICMR guideline.

After 17 days Of Quarantine: Sr. LDH level & CRP level come down to normal value i.e. 90U/L and 3.2mg/dl respectively

Gradation for Symptoms:

Symptom	Grade 0	Grade 1	Grade 2	Grade 3
Fever	37 to 38°C	38.1–39°C	39.1–40°C	40.1–41.1°C
Body ache	No Pain	Mild pain can be tolerate	Intermittent pain relieve by medication	Severe pain can't relieve by medication
Lose of Taste	Normal Taste	Mild decrease in taste	Intermittent loss in taste	Severe loss in taste
Abdominal Pain	No abdominal pain	Sometimes / rarely abdominal pain.	Intermittent crampy lower abdominal pain which is relieved by passage of flatus or stool.	Continuous abdominal pain which is not relieved by passage of flatus or stool
Nausea	No nausea Slight nausea	Slight nausea but can eat normal diet.	Feels vomiting sensation on the on sight of food of patient liking	Nauseating feeling at thought of food& smell.
Lose Motion	Consistency of stool is semi solid	2-3 times per day lose motion	3-6 times per day lose motions	More than 6 times per day lose motions

DISCUSSION:**Limitations**

Since this is a single case study, it calls for a larger sample to be studied, before we can develop a standard protocol for the treatment of COVID-19. The physical distance between the patient and doctor made it difficult to examine and observe the patient directly.

Strengths

It is noticed that the patient's condition did not deteriorate. So it can be presumed that the management of COVID-19 with the given Ayurvedic medicines arrested the progress of the disease to a more serious state. Despite the patient having only Abdominal Manifestations and fever

Mode of action:

As per ICMR guideline for covid-19 treatment protocol Tab. HCQ. Tab. Zincovit & Tab. Vit. C was advised for patient and only *Dhanyapanchak Kwatha* was given for abdominal manifestations like diarrhea, nausea, etc. The ingredients like Dhanyaka (*Coriandrum sativum*), Naga-ra (*Zingiber officinale*), Musta (*Cyperus rotundus*), Balaka & Bilva (*Aegle marmelos*) with equal quantity known as *Dhanyapanchak Kwatha*. *Dhanyapanchak Kwatha* also offers beneficial effects in diarrhea, study prove that *Dhanyapanchak Kwatha* reduces frequency of stool and improve consistency of stool. Ingredients of *Dhanyapanchak Kwatha* are; Dhanyaka, Shunthi, Musta, Netrabala & Bilva. These contents possess Agni vardhak, Vatakaphahara and Grahi property. Formulation control Aama & Dushti of Apadhatu. It also pacifies Vata and Kapha. Formulation also possesses Deepan, Pachan and Grahi properties. As mention above, SARS-CoV-2 is thought to gain access to cells via surface expression of angiotensin-converting enzyme 2 (ACE2). Thus, tissues with high levels of ACE2 expression are assumed to be susceptible to direct infection. The large amount of ACE2 surface expression in the GI tract and, to a lesser extent, in the biliary epithelium has been offered as a possible explanation for GI symptoms. This scenario can be correlated with Aamaj Type of Atisar. The *Dhanyapanchak Kwatha* possesses the properties like Deepan, Pachan and Grahi which helps reducing frequency of stool and improve consistency of stool.

RESULTS:

As stated, above *Dhanyapanchak Kwatha* is only concern about abdominal Manifestations in Covid-19. The Symptomatic reliefs observed in patient after 4th day of treatment i.e. Nausea subside on 3rd Day Abdominal Pain, Anorexia, and loose Motion subside on 4th Day.

CONCLUSION:

Dhanyapanchak Kwatha shows effectiveness in Abdominal Manifestation in Covid-19 case. Ayurvedic Treatment may prevent the deterioration of the disease into a more critical condition; further study can be done with larger sample size.

ACKNOWLEDGEMENTS: Not Applicable

CONFLICT OF INTEREST: Author declares that there is no conflict of interest.

SOURCE OF SUPPORT: None

REFERENCE:

1. Huang C, Wang Y, Li X, et al. Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China. *Lancet* 2020;395(10223):497–506. [Published correction appears in *Lancet* 2020;395(10223):496.].
2. Luo S, Zhang X, Xu H. Don't overlook digestive symptoms in patients with 2019 novel coronavirus disease (COVID-19). *Clin Gastroenterol Hepatol* 2020;18(7):1636–1637.
3. Cholanteril G, Podboy A, Aivaliotis VI, et al. High prevalence of concurrent gastrointestinal manifestations in patients with SARS-CoV2: early experience from California. *Gastroenterology* doi:10.1053/j.gastro.2020.04.008. Published online April 10, 2020. Accessed April 17, 2020.
4. Cheung KS, Hung IF, Chan PP, et al. Gastrointestinal manifestations of SARS-CoV-2 infection and virus load in fecal samples from the Hong Kong cohort and systematic review and meta-analysis. *Gastroenterology* doi:10.1053/j.gastro.2020.03.065. Published online April 3, 2020. Accessed April 17, 2020.
5. Zhang C, Shi L, Wang FS. Liver injury in COVID-19: management and challenges. *Lancet Gastroenterol Hepatol* 2020;5(5):428–430.

6. Hoffmann M, Kleine-Weber H, Schroeder S, et al. SARS-CoV-2 cell entry depends on ACE2 and TM-PRSS2 and is blocked by a clinically proven protease inhibitor. Cell 2020;181(2):271–280.e8.
7. Han C, Duan C, Zhang S, et al. Digestive symptoms in COVID-19 patients with mild disease severity: clinical presentation, stool viral RNA testing, and outcomes. Am J Gastroenterol doi:10.14309/ajg.664. Published online April 15, 2020. Accessed April 17, 2020.
8. Vaidya Gangadhar Sathe, Sharandhar Samhita Raghuvanshi Prakashan Dadar publication year 2004; Madhyam Khand page number 97.

How to cite this article:

Vaidya MS, Deodatt PG, Jagtap PG, Anti-diarrheal Role of Dhanyapanchaka Kwatha in Abdominal manifestation in Covid-19 case –A Single Case Study, The Healer Journal, 2021;2(1):136-140.