

Constipation and its Management according to Ayurveda

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Abstract - Clearing of bowels is a step towards good health. There is a feeling of being uncomfortable and routine work is hampered when the bowels of a person are not cleared. Constipation is one of the most common gastrointestinal complaints all over the world resulting in over two million reported cases annually. The prevalence of constipation around the globe is about 10% whereas in India it is about 14% higher than the world average.

Generally, a person is considered to be constipated when bowel movements result in the passage of small amounts of hard and dry stool, usually fewer than three times a week. WHO reports that more than 80% of the world's population specially in developing in develops countries dependent on herbal medicine.

Constipation can be broadly classified into two types: a) Casual or temporary b) Chronic or habitual. Ayurveda describes in Charaka samhita and Sharangdhara Samhita various herbs and their preparations for restoring normal evacuation of GI tract. These include – Vatanulomaka (Carminative), Sramsana (Laxative), Bhedana (Purgative) and Rechana (Cathartics). The present communication deals with the management of constipation with its Ayurvedic perspectives and mode of action of Ayurvedic and modern aspects.

Keywords - Constipation, Anulomana, Sramsana, Bhedana, Rechana, Purgatives

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INTRODUCTION¹

Constipation is a common complaint; the word constipation carries a different meaning for different individuals. Constipation has been used to describe infrequent defecation, straining with defecation, the passage of firm or small-volume faeces, painful defecation, and a sense of incomplete evacuation or lack of urge for defecation. If not treated or if treatment is delayed, it can lead to further problems such as fissures, fistulas, piles, lack of appetite and indigestion. Though the disease of constipation has not been discussed separately in Ayurvedic texts, Constipation is mentioned in Ayurvedic texts by the name of Vibandha meaning obstructing or binding of stool.

NIRUKTI OF VIBANDH / ANAHA- 2

According to "Amarkosha" Vibandh is a synonym of Anaha.

आनाहस्तु विबंधः स्यात् आनेति || आनाहनम् |

'णह बन्धने' घञ् (3/3/18) || 1||

वि+ णह बन्धने + घञ् = विबन्ध

DEFINITION OF ANAHA-3, 4

When the vitiated Vata (Apana) in the body (Pakvasaya) becomes accumulated in the region of a person's belly (Kuksi) and moves neither upwards nor downwards, then this condition is termed Anaha. According to Susruta, Anaha means, Aama (undigested food) or Shakrt (faeces) gradually accumulating inside the alimentary canal and obstructed from going out by the aggravated vata and not coming out in their routs (upward for Aama and downward for Pureesh); this is known as 'Anaha'.

SYNONYMS OF ANAHA-

Vibandh, Malavarodh, Kabja, Koshtabaddhata,

Baddhakoshathata,

Pureeshavarodh, vitasang.

TYPES OF ANAHA- 5

Susruta has mentioned two types of Anaha based on its cause or Udbhavasthana

1- Amaja Anaha

2- Pureeshja Anaha

1- Amaja Anaha-

In Anaha produced by Aama (undigested food) there will be thirst, running in the nose, burning sensation in the head, pain and heaviness in the stomach, nausea and obstruction to belching. We can compare pyloric obstruction to Amaja Anaha.

2- Pureeshaja Anaha-

Stiffness (loss of movement) of the waist and back, non-elimination of faeces and urine, pain in the abdomen, fainting, faecal vomiting, dyspnoea and also symptoms of Alasaka, will be present in Aanaha caused by faeces. We can compare intestinal obstruction to Pureeshaja Anaha.

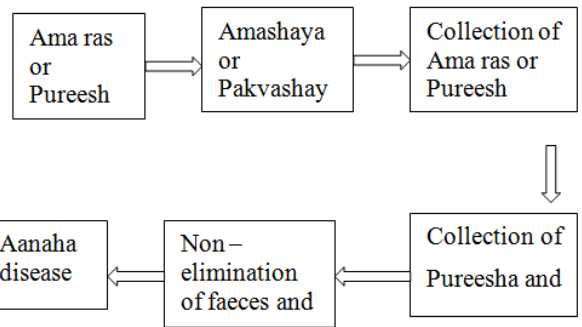
ETIOLOGICAL FACTOR OF VIBANDH- 6

(A)- Psychological Factor-As depression, anxiety, mental stress

(B)- Physical factor-

- 1- Dietary factors, lack of roughage, abuse of laxatives
- 2- Lack of water intake
- 3- Ruksha, Vishtambhi, Guru, Kashaya rasa pradhana foods
- 4- Inhibits the urge for stool
- 5- Excessive use of tea or coffee
- 6- Uses of narcotics
- 6- Lack of exercise
- 7- Irregular timing of lunch or dinner
- 8- Due to pregnancy

SAMPRAPTI- 7



SAMPRAPTI GHATAKAS- 8

Factor	Pureeshaj Anaha	Amaja Anaha
Dosha	Apana Vayu	Aama(Shleshama)
Dushya	Pureesh	Apakva anna ras
Adhishthana	Pakvashaya	Aamashaya
Srotasa	Purishvaha	Annavaha
Sadhyasadhyata	Sadhaya	Sadhaya

ACCORDING TO MODERN- 9

By observing the signs and symptoms of Anaha Vyadhi, to a maximum extent. Anaha can be correlated with modern disease constipation.

Causes of constipation-

(1) Gastrointestinal disorder

Dietary-

Lack of fibre or fluid intake

Motility

Slow-transi, Irritable bowel syndrome, Chronic intestinal pseudo-obstruction

Structural

Colonic carcinoma, Diverticular disease, Hirschsprung's disease

Defecation

Obstructed defecation, Anorectal disease (corn's, fissures, haemorrhoids)s

(2) Non-gastrointestinal disorder

Drugs Opiates, Anti-Cholinergics, Iron supplements Calcium antagonists, Aluminium-containing antacids

Neurological

Multiple sclerosis, Cerebrovascular accident, Spinal cord lesion, Parkinsonism

Metabolic/endocrine

Diabetes mellitus, Hypothyroidism Hypercalcaemia,
Pregnancy, Depression

TYPES OF CONSTIPATION

(A) Depending upon the severity

(i) Simple constipation

This is constipation due to an inadequate diet and lifestyle; there is no underlying organic disease and the condition responds to improvement in diet or the use of bulking agents.

(ii) Severe Idiopathic constipation

An occasional patient, usually a young woman, will fail to respond to a high-residue diet, indeed this may exacerbate symptoms. These are a reduction in propulsive motor activity in the colon together with inappropriate contraction of the pelvic floor muscles on straining. The condition usually begins in childhood or adolescence and is resistant to all treatments. The diagnosis is made on the history and confirmed by motility studies. Treatment is difficult; saline laxatives may help but subtotal colectomy may become necessary in some patients.

(B) Types of constipation based on colon state

(i) Constipation atonic

Constipation due to weakness of muscles of the colon and rectum

(ii) Constipation obstructive

Constipation due to an obstruction in the intestinal wall

(iii) Constipation Spastic

Due to excessive tonicity of the intestinal wall.

SYMPTOMS OF CONSTIPATION- 10, 11

- 1- Loss of appetite
- 2- Anorexia and indigestion
- 3- Headache
- 4- Flatulence
- 5- Pain in the abdomen and discomfort
- 6- ≤ 3 bowel motions per week.

7- Straining $\geq 25\%$ of the time.

8- Incomplete evacuation $\geq 25\%$ of the time.

9- Hard or lumpy stool $\geq 25\%$ of the time.

COMPLICATION OF CONSTIPATION- 12

- 1- Faecal impaction
- 2- Faecal incontinence
- 3- Stercoral ulcers in rectum/colon
- 4- Acquired megacolon/mega rectum
- 5- Haemorrhoids
- 6- Chronic abdominal pain
- 7- Sigmoid volvulus

TREATMENT PRINCIPLES OF CONSTIPATION- 13

(a) Sansamana treatment-

There are several herbs which are classically mentioned in the text to relieve *Vibandha*. These herbs act as laxatives and help in easy evacuation of the bowel - *Madhuyashti* (*Glycyrrhiza glabra*), *Abhaya* (*Terminalia chebula*), *Aragvadha* (*Cassia fistula*), *Eranda* (*Ricinus communis*), *Trivrit* (*Ipomoea turpethum*), *Jaypal* (*Croton tiglium*), *Amalaki* (*Embelica officinalis*), *Isabgol*, *Senna*, *Panch lavana* and *Rosebuds*.

Some formulations for constipation -

Panchasakar churna, *Avipattikar churna*, *Vaishvanar churna*, *Triphala churna*, *Ichha bedi rasa*, *Abhayarishta*, *Eranda taila*, *Phalavarti*.

Remove the obstruction of *Apanavayu* and *Amaj vikara*. *Deepan-Pachan* and *Vatanulomana dravya* should be used.

(b) Sanshodhana treatment-

- 1- *Snehana*, *Abhyanga* and *Swedana*
- 2- Administration of *virechana*, and *Anuvasana basti*.
- 3- Application of *Phala varti*.

(c) Treatment in Yoga science-14

- 1- *Kapala bhati*- 15-20 minute
- 2- *Vajrasana*- 5minute

- 3- Uttanapadasana- 3-5 time
- 4- Pavanmuktasana-3-5 time
- 5- Padangushth-nasasparshasana-3-5 time
- 6-Mandukasana- 3-5 time
- 7- Savasana- 10 minute
- 8- yoga Mudra- 3-minute

PATHYA & APATHY

Pathaya	Apathaya
Ahara- Jau Ka Daliya, Moonga Ki Dal, PuranaShali Munnakka, Green Vegetable, Pappaya, Carrot, Reddish,Lauki, Adequate Fluid And Fibre Intake	Ahara- Guru, vishtmbhi, Ruksha Ahara, Maida, Udada Banna, White rice , Fast food, Junk food, Oily and spicy, foods.
Vihara-Regular exercises, Walking.	Vihara- Inhibits urges, laziness, late-night slipping

CLASSIFICATION OF RECHAKA DRUGS- 16, 17

There are several drugs in Ayurveda that either single or in combination use laxatives or purgatives.

There are two types of virechana drugs-

(A)- Based on 'level' of sodhana- 3 types (Ch. Su. 25/40) page 168

- a- Sukha virechana- (light laxative)-Exp.-Trivrit
- b- Mridu virechana- (mild laxative)- Exp.- Aragvadhya
- c- Tikshna virechana- (strong purgative) - Exp. - Snuhikshira

(B)- Based on mode of action- 4 types (Sharangdhar purva khand 4/4-7)

- a- Anulomana b- Sramsana
- c- Bhedana d- Rechana

a- Anulomana (Aperients)- Drugs which expel out flatus and faeces after proper digestion and thus remove the obstruction are known as Anulomana. Exp. - Hharitaki

b- Sramsana (Laxatives)- Drugs which expel the faeces and other wastes with or without proper digestion are 'Sramsana'.

Exp. - Aragvadhya

c- Bhedana (Purgatives)- Drugs which break up The faecal mass and expel it out forcibly are known as 'Bhedana'.

Exp. - Kutaki

d- Rechana (Cathartics) - Drugs which make the faeces watery and expel out forcibly either formed or not formed into a mass are 'Rechana'.

Exp.- Trivrat

MODE OF ACTION OF RECHAKA DRUGS- 18

These are drugs that promote evacuation of the bowels. A distinction of sometimes made according to the intensity of action.

- (a) Laxative or aperients - milder action, elimination of soft but formed stools.
- (b) Purgatives or cathartic - stronger action resulting in more fluid evacuation.

Mechanism of action-

All purgatives increase the water content of feces by:

- (a) A hydrophilic or osmotic action, retaining water and electrolytes in the Intestinal lumen.
- (b) Acting on intestinal mucosa to decrease net absorption of water and electrolyte; intestinal transit is enhanced indirectly by the fluid bulk.
- (c) Increasing propulsive activity as primary action - allowing less time for absorption of salt and water as a secondary effect.

However, certain purgatives do increase motility through an action on the myenteric plexuses.

CLASSIFICATION OF PURGATIVE

Class	Agents	Doses	Mechanism of action	side effects
1-Bulk forming	1-Wheat bran, 2- Ispaghula	4-6 gm orally	Increase stool bulk	Obstruction if taken without water
2-Stool softener	Liquid paraffin	a mixture of colonic contents to soften the faecal mass		risk of lipid pneumonia
3-Stimulant purgative	1-senna 2- castor oil	5-15ml (children), 15-25ml (adults)	Its acts on the myenteric plexus. Ricinoleic acid stimulates intestinal secretion and increase motility	cramps in abdomen Nutrient malabsorption
4-Osmotic purgative	1- Magnesium scitrate 2- Magnesium sulphate	10-20gm orally 10-30gm orally	osmotic effect to increase intraluminal water contain	Magnesium toxicity

USES OF LAXATIVES OR PURGATIVES- 19

Anulomana	Mradurechana	Sukha virechana	Teekshna virechana
Mradu koshthi, Apanvayuvaigunyanaya vikar, Aruchi, Deepana, Ajeerana, Agnimandha, Udavarta, Vamana, Atopa, Adhmana, Parinamashool	Madhyama koshthi, Koshthgat rukshata, Kamala, Vibandh, Pandu	Kroorkoshthi, jeema Anaha, Jeema Vibandh, Kamala, Amavata, Vatarakta, Swasa-Kasa, Udararoga, Arsha	Kroorkoshthi, paittika roga, yakrata vikara, Jeema Vibanah, Jalodara, Amavata, ,Kramiroga
Dravya- Haritaki, Hingu, Saufa, podina	Amalataasa, Anjeer, Esabgol	Trivrata, sannaya, Amalataasa, swamakshiri, Kaladana	Snuhiksheer, Kutaki, Danti, Jayapal, Arka, Lavana

CONCLUSION

Laxatives, even herbal laxatives, should be used with caution. Other natural remedies should be tried first. The gentlest remedies for constipation include increased movement and exercise, certain yoga

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