



Ayurvedic aspect of Vrikka Vikar w.s.r. to Chronic Kidney Disorder- A Review

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ABSTRACT: With change in lifestyle, one suffers with lifestyle disorders. These lifestyle disorders can be a leading cause to many diseases which can further lead to organ failure and a life time of supportive measures to be needed. Vrikka Vikar w.r.t. CKD is observed to have a significant rise in its prevalence. Diabetes plays an important role in its occurrence as it accounts for urological symptoms.

KEYWORDS: Vrikka Vikar, Chronic Kidney Disease, Ayurved

INTRODUCTION

Kidneys, referred as Vrikka in Ayurved plays an important role in bodily functions which includes Maintaining overall fluid balance; Regulating and filtering minerals from blood; Filtering waste materials from food, medications and toxic substances. When these functions are hampered which may be due to anatomical, physiological or pathological aetiology it causes disruptions in body's routinely functions. CKD falls under urogenital system as per modern and under Mutravaha Srotas according to Ayurved. [1]

The acute conditions are somewhat manageable but the chronic conditions are incurable. According to Ayurved Vrikka Vikar are either Yapya or Asadhya.[2] In recent survey studies it is seen that there is an increased prevalence of kidney disorders. The patients are often observed to have a history of Chronic Kidney Disorder (CKD). CKD now impacts 13.24% of adults in India, with its prevalence increasing from 11.12% between 2011 and 2017 to 16.38% between 2018 and 2023 among individuals aged 15 years and above. [3] Thus, there have been a significant rise in the cases of CKD. The cases observed now are usually the teens and middle-aged individuals.

The aetiology of the disorder is very important to be known and well understood. The factors influencing/favouring this should be ruled out and proper observation should be kept on the patient. Ayurved treatment modalities that are mentioned in Samhitas gives detailed condition wise treatment protocol if ever affected from the disease and also the Pathya- Apathya as prevention for recurrence. In India, diabetes and hypertension today account for 40–60% cases of CKD. Therefore, CKD can be a complication to already existing disease. [3]

The diseased condition of Vrikka is known as Vrikka Vikar. The Panchanidan of the disease can be understood as follows: [4]

Nidan (aetiology) [5]

Table 1: Aetiology according to Ayurved and Modern science

AYURVED				MODERN		
Aharaj	Viharaj	Nidan arthkari vyadhi	Others	Susceptible factors	Initiation factors	Risk factors
Tikshna – Ausadha – Rajika Suranadik Yuktam, ruksha madya prasanga, anupa Matsya, adhyashana, ajeernasan	Excessive exposure to cold, ati vyayam, to ride on fast moving animals like horse etc daily or frequently	Chronic diseases like masurika, visuchika, amavata, jwar	Vegadharana and indulging in activity, mutra vega dharan, ksheen purush, person suffering with injury to the organs of Mutravaha Srota	Advanced age, low income or education, racial or ethnic minority status, reduced kidney mass, low birth weight, family history of CKD	Diabetes Mellitus, hypertention, glomerulonephritis	Age>65 yrs, obesity, smoking, CVD, hyperlipidaemia, gout, renal calculi, SLE, prostatic hypertrophy, family history, etc.

Samprapti [6]

Hetu Sevan

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Aharaj Nidan, Viharaj Nidan, Nidanarthakari Vyadhi, Santarpan And Aptarpan Hetu, Ajirna Avastha

↓

Agni Dushti

↓

Dosha Vitiation

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Saman Vayu, Pachak Pitta, Ranjak Pitta Shaman

Kledaka Kafa Prakopa

↓

Vyana Vayu Sanchaya In Vrikka And Mutrasaya

↓

Sthan Sanshraya Of Prakupita Dosha

↓

Srotodushti Of Raktavaha, Medavaha, Mamsavaha, Mutravaha, Svedavaha, Srotas

↓

Apana Vayu Vitiation

↓

Vrikka Vikar

Samprapti Ghatak: [7]

1. **Dosha:** Vatapradhan Tridosha
2. **Dushya:** Rasa, Rakta, Abaddha Meda
3. **Srotas:** Rasa, Rakta, Mamssa, Meda, Asthi, Majja, Shukra, Mutra, Sveda, Pran, Anna, Udaka, Oja
4. **Srotodushti:** Sanga
5. **Agni:** Dhatwagni/ Mandagni
6. **Adhishthana:** Vrikka, Vasti, Sarva Sharir
7. **Swabhava:** Chirkari
8. **Sadhya- Asadhya:** Yapyra, Asadhya

Purvaroopaa [8]

1. Nidranasa
2. Vahnimandya
3. Netrasooha
4. Asyapadasooha
5. Nadistabdha
6. Vega mukta
7. Ushmata
8. Roukshya

Rupa (Sign and symptoms) [9]

AYURVED	MODERN
<ol style="list-style-type: none"> 1. Chhardi 2. Sooha 3. Vedana 4. Sarvesh angeshvaddha 5. Shirshashoolam 6. Jwara 7. Raktahrashat panduvarnatvam 8. Asye swedabhavah 9. Twacharaukshyagnimandye 10. Peeda katyam cha udare vrikka deshe 11. Nadi noonam vegayukta 12. Mutram shashwad vindurupena cha ushnam peedayuktam vrikka roge sravedvai 13. Tivra lakshanam vrikka yugme jatu syad eva ashmari yogato api 14. Shishnasyagre jayate cha atipeeda 15. Mutram raktanavitam syat kadachit 16. Shaitopyetam panipadam 17. Dahashchalpo mutra kale dhvajagre 18. Karyashaithilya hetorghorae swe sweir lakshanair lakshyamanah 19. Pleehno Hridayakritsambhavo 	<ol style="list-style-type: none"> 1. Uremic Symptoms: <ul style="list-style-type: none"> • Symptoms such as fatigue, weakness, shortness of breath, mental confusion, nausea, vomiting, bleeding, and anorexia are generally absent in stages 1 and 2, • minimal during stages 3 and 4, and • common in stage 5 CKD. Patients with stage 5 CKD may also experience itching, cold intolerance, weight gain, and peripheral neuropathies. 2. Polyuria and Nocturia 3. Proteinuria 4. Haematuria 5. Hypertension and fluid overload 6. Anaemia 7. Bone Disease (Renal Osteodystrophy) <ul style="list-style-type: none"> - Secondary hyperparathyroidism - Osteomalacia (reduced mineralization) - Mixed renal osteodystrophy - Adynamic bone disease

<p>anurvrikkagrastasyeti pradishtam 20. Nadah Karne 21. Netraroga 22. Dhvajottha bhanga 23. Shakha gauravam cha api 24. Murchha 25. Amse grivayam cha murdhni prapida moha linganyevam</p>	<p>chinha</p>
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Progression of CKD [10, 11]

CKD generally progress in 5 stages:

Table 2: Progression of CKD

Stages	Characteristics	Symptoms
Stage 1 & 2	Decreased parenchymal disease, GFR, polycystic renal disease, glomerulonephritis, parenchymal and vascular diseases.	<ol style="list-style-type: none"> 1. Generally asymptomatic with well- preserved GFR. 2. Symptoms may arise from underlying diseases such as edema in nephritic syndrome or hypertension in polycystic kidney disease and 3. Glomerulonephritis.
Stage 3 & 4	Further decline in GFR, anaemia, calcium and phosphorus imbalances, abnormal mineral-regulating hormones (e.g., calcitriol, PTH), and disruptions in sodium, potassium, water, and acid-base homeostasis.	<ol style="list-style-type: none"> 1. Easy fatigability, 2. decreased appetite, 3. malnutrition, and 4. more evident complications in virtually all organ systems.
Stage 5	Severe decline in GFR leading to toxin accumulation, marked disturbance in daily activities, well-being, nutritional status, and water and electrolyte homeostasis.	Uremic syndrome; fatal without renal replacement therapy

Upadrava [11]

1. Murchha
2. Kasa
3. Phuphusabhitthau
4. Shvayathu
5. Uras toya
6. Salilodara
7. Mootravisha Sankramanam

Kidney Disease Markers [9, 11, 12]

1. Albuminuria: Albumin excretion rate (AER) ≥ 30 mg/24 hours or albumin-to-creatinine ratio (ACR) ≥ 3 mg/mmol.
2. Urine sediment abnormalities.
3. Electrolyte and other abnormalities: Due to tubular disorders.
4. Abnormalities detected by histology.
5. Structural abnormalities: Detected by imaging.
6. History of kidney transplantation.

Treatment protocol according to Ayurved [11,13]

1. Raktamokshan
2. Virechan and Swedana
3. Specific drug administration such as Mutrala drugs, Rakta samsodhana drugs, Dhatupusti drugs, Agnibalavardhana drugs.
4. Parad and Parad Yoga Prayog is contraindicated in the treatment of Vrikka Vikar since it is a heavy metal and might cause further complications.
5. Sneha Basti
6. Shaman Aushadh such as Sarvatobhadra Vati and Maheswara Vati.

Pathya- Apathya [14]

Pathya	Apathya
Purana Shali, Yava Kshara, Yava anna, Tikshna and ushna padartha, Takra, Godugdha, Dadhi, Jangal Mamsa, Mamsa rasa, Mudga yusha, Sita, Supakwa kushmanda, Patola, Ardraka, Gokshura, Ghrita kumari, Puga, Kharjuraka, Narikela phala, Taladruma, Haritaki, Trapusa, Laghu Ela, Sitala peya, Sitala annapana, Nadeya jala, Karpura.	Madyapana, Shrama, Maithuna, Gajabaji yana, Viruddha ahara vihara sevana, Vishamasana, Tambula, Matsya, Lavanadraka taila bhrista, Pinyaka, Hingu, Tila, Sarshapa, Vegavarodha, Masha, Karira, Ati tikshna, Vidahi, Ruksha, Amla padartha sevana.

DISCUSSION

With increasing prevalence of the disease, it is important to understand the disease in ayurved aspect and set up a proper correlation with the modern aspect of the disease. The sign and symptoms seen are mostly due to pre-existing disease. A proper correlation of the symptoms should be set. These symptoms are to be analysed properly to understand the condition of the disease and set up a prognosis and stage of the disease and person's condition. This will become handy while treating the person. Proper history taking is also essential as of how many treatments the person has undergone and what are the scopes left for the work of medication.

Proper routinely investigations should be performed to record the evidence for improvement through the treatment. Or if any of the complications have occurred. It is the primary to collect all the data and bring in about a proper line of treatment for better results. Proper Pathya- Apathya should also be followed as supportive management of the disease. [15]

CONCLUSION

To know a disease, know the lifestyle of the patient. It provides with necessary clues and missing pieces that patient might have skipped unknowingly or knowingly. Lifestyle disorders generally convert into kidney related diseases and affect daily urogenital physiological functions.

Diagnosis is the main tool. Correct and early diagnosis can help set a good prognosis even if the disease is Yapya or Asadhya. Rather than treating diseases through symptoms one should align themselves treating through the basics of Ayurved i.e. dosha, dhatu and mala considerations.

Therefore, proper line of treatment can be set through the parameters mentioned. Also, patient should also be willing to commit to follow the regimens throughout the treatment duration.

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