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Research Article

DEMOGRAPHIC DISTRIBUTION OF THE DISEASE GRAHANI (MAL ABSORPTION SYNDROME) AND ITS EVALUATION BASED UPON ETIO-PATHOLOGICAL SIGNIFICANCE

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ABSTRACT
Ayurveda has its own philosophy and its unique approach. It has given good definition for health and disease "Vikaro dosha vaishamyam, dosha samyam arogata" i.e., Tridosha if get vitiated alone or together results in disease. So, Ayurveda suggests the physician to keep in equilibrium of these tridosha through medicines as well as wholesome diet and habits.
The disease 'Grahani' is the effect of improper diet and habits. Now- a-days altered life style also has much impact on this patho-physiology.The seasonal effects, education level,economical status also have significant role over the illness. Based upon the aetiological factors varied symptomatology is also observed and is evident from the survey work. This paper discusses these details in this write up.
KEY WORDS: Grahani, demographic distribution, Ahaarajanya nidana , Viharaja nidana, Manaska nidana, chroncity

INTRODUCTION

Ayurvedic system of medicine emphasizes much with regards to the influence of diet and habits in the manifestation of every disease[1]. Even though the influence of season and the nature of the individual (prakriti) have immediate effect in some of the illnesses, their direct effect is observed in some of the diseases caused by the lifestyle disorders.

Grahani vis –a-vis Mal absorption syndrome[2] is a disease usually caused due to the improper food habits.Much other relative factors are also observed in recent days.The influence of professional schedules,economic impact, mind set up are also have indirect influence over its patho-physiology in this illness[3].

Aims And Objectives

To know the demographic distribution of the disease Grahani and to evaluate the aetio-pathological significance in this illness.

MATERIALS AND METHODS

Selection of patients

Patients attending OPD and IPD of Alva's Ayurvedic Medical College Hospital, Moodbidri fulfilling the criteria of diagnosis of Grahani roga were registered, irrespective of age, sex, religion etc based on simple random sampling technique.

Criteria of diagnosis

Patients having signs and symptoms of Grahani roga as described in Ayurvedic texts[4] were selected for the study.

Detailed history was taken and physical examination was done on the basis of special proforma, incorporating all signs and symptoms of the disease.

Investigations

Routine hematological, urine and stool examination was carried out in all the patients to exclude any other pathology as well as to assess the condition of the patients.

Wherever required, the patients were subjected for biochemical investigations like RBS, Serum cholesterol, SGOT, SGPT etc.

Diet and Restrictions

Patients were advised to avoid the causative factors according to Ayurveda.

Treatment groups

Selected patients will be divided into three groups.

Group A- Patients treated with cow's buttermilk.

Group B- Patients treated with Takrarishta (classical ref. Cha. Chi. 15/120-121)

Group C- Patients treated with modified Takrarishta (Cha. Chi. 15/120-121, added with Dhataki).

Dose- duration and anupana

Group A- Cow's buttermilk, in the dose of 15ml is administered, after food, twice a day (morning and night) for a period of 21 days

Group B- Takrarishta (classical) administered in the dose of 15ml, with equal quantity of water, after food, twice a day (morning and night) for a period of 21 days

Group C- Takrarishta (Dhataki pushpa added) administered in the dose of 15ml, with equal quantity of water, after food, twice a day (morning and night) for a period of 21 days

Grahani roga- criteria of assessment

The effect of therapy was assessed on the basis of relief in signs and symptoms of *Grahani* and improvement in laboratory investigations. Here stress is given to the improvement of *Agni* and the main cardinal symptom- Muhurbaddha Muhurdravata of mala.

(A) Main symptoms of *Grahani* that were considered include *Muhurbaddha* Muhurdrava Malapravritti, Sashleshma Malapravrtti, Ajirna- Sama- Sanna- Jirna- Pakwa Mala Visarga, also the symptoms like Arochaka, Asyavairasya, Amagandhi Udgara, Amlodgara, Adhmana, Udarashula, Daha, Shiroruk, Asthiparvaruk, Tamaka and Balakshaya. These symptoms were graded on their severity for better feasibility of statistical analysis:

(1)No Symptoms – 0
(2) Symptoms with mild severity – 1
(3) Moderately severe symptoms – 2
(4) Symptoms with high severity – 3

(B)Agni was assessed on the basis of its two aspects viz.
(a)Abhyavaharana Shakti
(b)Jarana Shakti

Both were given gradation as follows-

(a)Abhyavaharana Shakti:

4 -No interest in food at all
3- Eats very less quantity of food
2 -Satisfied with slightly less quantity of normal food intake (or hospital diet)
1 -Hunger is promptly relieved with the consumption of normal routine diet

0 -Feels hungry even after the consumption of normal routine quantity of diet

(b)Jarana Shakti:

4 -Does not feel hungry even after 24 hrs of food intake

3 -Feels hungry only after 24 hours of food intake

2 -Feels hungry only in second Annakala after food

1 -Feels proper appetite in next Annakala itself (normal Jarana Shakti)

0 -Feels hungry even before next Annakala.

Here quantity of food consumed was also considered.

Improvement in body weight was also considered.

Patient was asked to observe Sama and Nirama Lakshanas of Pureesha by observing.

Sticking or non sticky of stool to squatting pan.

Sinking or floating of stools in water, odor etc.

Activity of drugs against intestinal parasites, on the basis of stool examination before and after treatment was considered.

In qualitative assessments, absence was considered as grade-0, presence as grade-1 and any negative result as grade - -1

Improvement in hematological and biochemical parameter like Haemoglobin, ESR, Total Erythrocyte count, and Total leukocyte count, Total protein etc. was also considered as supportive criteria.

OVERALL ASSESSMENT

Total effect of therapy was assessed as follows:

Complete remission: 100% relief in signs and symptoms.

Markedly improved: more than 75% relief in signs and symptoms.

Moderately improved: 50% - 75% relief in signs and symptoms.

No improvement – less than 25% relief in signs and symptoms.

Statistical analysis

To analyze the demographic distribution statistically, mean and percentage are taken out of the available data.

RESULTS AND OBSERVATIONS

Total 110 patients were registered for this study, from which 20 patients were dropped out.

The results so obtained were assessed and analyzed statistically mainly on the recorded scores of signs and symptoms and also before- during and after treatment. The observations made during the course of study were presented in the Tables from01-33.

DISCUSSION

Table 1 and 2 : Grahani in relation to age and sex.

It was observed from the study that maximum number of patients belong to the age group 40-50 years (34.55%) followed by the age group of 30-40 years (30.91%). This may be because of the excess of stress and strain involved in this particular age group. Secondly, indulgence in Apathya ahara is very common in this age, would have shown maximum incidence in this age range. The incidence was more in males (70.91%) than in females (29.09%). Excess outdoor works and improper food habits in male, may be the precipitating factor for such an incidence.

Table 3: Grahani in relation to religion.

The table shows that maximum 89.09 % patients were the followers of Hindu religion. This entry is based upon the type of patients attending the hospital and Hindu dominated population of Moodbidri and surroundings. So, it cannot be concluded that Hindus are more prone to Grahani.

Table 4: Grahani in relation with Marital Status

Table shows that 75.45% patients were married. Even though, it is difficult to say that marital status has any relation with this disease. Probably, as in the age group of 30-50 years maximum are married, same would have simulated here.

Table 5 : Grahani and occupation wise distribution.

From the table it is evident that maximum incidence was found in professionals (40.91%) followed by second highest incidence in business people (28.18%). Probably, the stressful life, irregular and unwholesome food habits in these occupations would have increased the incidence of Grahani.

Table 6 : Grahani and Education wise distribution.

Maximum 54.55% patients fall in Graduation level of educated group. This may be suggestive of the types of patients who are commonly attending the OPD of our hospital. Secondly, it may be the reason of progressive education level in this locality. It is too difficult to build up the relation between this particular education status with the disease.

Table 7 : Grahani and Residential area.

The table shows that maximum number of patients was living in rural area (56.36%) followed by 33.64% incidence in the patients of sub-urban.

This may be because of the distribution of patients in the nearby villages and places. It will be immature if any conclusion is drawn on the basis of this criterion.

Table 8 : Grahani and Socio-economic status.

From the table it is known that maximum 77.27% patients were of middle class. Inspite of this, from this data it is too difficult to say that the affliction of Grahani is more in middle class people; it is suggestive of economical status of this locality rather the connection of the class with the disease.

Table 9 : Grahani and Diet.

The table shows that maximum 63.64% patients were taking mixed diet and 36.36% were taking vegetarian diet. As in case of people who take mixed diet, they consume more of spicy foods, this may contribute to the disease. But, it is difficult to explain the rationality of this food habit in relation to the disease; it is more suggestive of the diet habit in the locality of Moodbidri.

Maximum patients (73.64%) were taking Aniyamita ahara, which is a causative factor for aggravation of *Vata*. Again, maximum 39.09% patients were used to take excess food stuff beyond their capacity which may be leading to further vitiation of *Agni* and hence Dosha in their site.

Maximum of 51.82% patients were accustomed to Madhura ahara, in the surveyed patients; even though *Madhura satmyata* is quite obvious among all people, this is also a causative factor for the disease. Maximum number of patients was used to take *Guru* (52.73%), Snigdha (35.45%) and Sheeta (34.55%) ahara. This is again a contributory factor in aggravation of *Ama* and hence the disease.

Table 10 : Grahani and Addiction.

The table shows that, maximum 73.64% patients were addicted to Tobacco chewing, followed by the incidence of 67.27% of taking tea. One can think of the contribution of these two addiction subjects in the manifestation of the disease as both corrode the intestinal mucosa and leading into the disturbed bowel habits.

Similarly, considerable incidence of smoking (57.27%) and drinking coffee (44.55%) was also reported. These, once again signify the provocative factors of the disease.

Table 11 : Grahani and Appetite.

Maximum 69.09% patients had poor appetite followed by moderate appetite by 25.45% patients. The former condition gives clue of cause for vitiation of Dosha in its initial levels.

Table 12 : Grahani and Bowel habit.

Table shows that maximum 51.82% patients had 3-4 times per day bowel habit followed by next highest incidence of 4-6 times per day bowel habit in 20.91% patients. This gives clue of disturbed bowel habit and hence disturbance of routine activities by the disease.

One can assume the 'Muhurbaddhata' and 'Muhurdravata' also by such increased number of bowel habits.

Table 13 : *Grahani* and Micturition.

The table shows that maximum 64.55% patients were having micturition 4-6 times per day followed by 2-3 times per day

micturation in 18.18% patients. This may be suggestive of non-affliction of Mutravaha srotas in Grahani.

Table 14 : Grahani and Perspiration.

From the table it is evident that maximum 87.27% patients were reported of Alpasweda pravritti. Probably, outgoing of excess amount of water (drava) during malapravritti, may be the reason for this.

Table 15 : Grahani and Koshta.

The table shows that 51.82% patients had Madhyama Koshta. About 28.18% were reported to be of Krura Koshta. It may be prejudicious if it is announced as the incidence of Grahani is more in Madhyama Koshta individuals; it may merely suggestive of distribution of patients in small number of samples. Further, by an survey work in large population may yield better and more pertinent result.

Table 16 : Grahani and Sleep.

Table shows that 46.36% patients were having good sleep; whereas 31.82% patients complained of disturbed sleep.

Here, good sleep is suggestive less severe incidence in near about half of the patients. Further, disturbed sleep in considerable number of patients denotes the severe kind of illness in those patients.

Table 17 : Grahani and Exercise.

Table shows that maximum 74.55% patients were having moderate exercise. It means that the role of exercise is very minimum in the manifestation of this disease.

Table 18 : Grahani and Emotional make up.

From the table it is apparent that maximum patients were having one or other type of unpleasure of mind. 46.36% patients were reported of tension followed with a report of anxiety by 38.18% patients. 37.27% patients were reported with irritation of mind.

Thus, all the above said emotional makeups are the reasons for vitiation of Vata which appears quite true with reference to the disease Grahani.

Table 19 : Grahani and Prakriti.

Table shows that maximum 28.18% patients were of Vata-Pitta prakriti followed by 24.55% incidence in Vata-Kapha prakriti. This may be suggestive of more of the incidence of the disease Grahani in these prakriti individuals.

Table 20 to 23: Grahani and Sara, Samhanana, Pramana and Satmya wise distribution.

From the tables it is known that maximum patients in each of the above criteria were belonging to Madhyama group. Though this is not a contributing factor, this may be just suggestive of distribution of the type of individuals' make up.

Table 24: Grahani and Ahara Shakti wise distribution.

The table shows that maximum 61.82% patients had Avara Abhyavaharana Shakti as well as Avara Jarana Shakti in 57.27% individuals.

This is suggestive of the persisting long term disturbed digestive fire and lesser intake capacity of food, which is the key factor for vitiation of Dosha and Agni, in this disease.

Table 25: Grahani and Vyayama Shakti.

From the table it is known that maximum 38.18% patients were having Alpa Vyayama Shakti followed by Aniyamita Vyayama in 25.45% patients. As lessened exercise is also one of the reasons for the indigestion it can be said that same is found true in the surveyed patients here.

Table 26 : Grahani and Age.

Table confirms that the occurrence of the disease is more in Madhyama age (84.55%); probably, excess stress, strain and irregular food habits in this age group would have precipitated this disease.

Table 27 : Grahani and Satva.

The table shows that maximum 59.09% patients were of Madhyama Satva. This cannot be interpreted that the disease incidence is more in this group; but, it is only representation of the emotional makeup of the locality.

Table 28 : Grahani and Past history.

From the table it is known that 20.91% patients were hypertensive; this may be considered as the supportive factor for the disease.

Second highest incidence was found with the history of anaemia. Probably, longstanding Grahani roga would have precipitated this history.

Other complaints like diabetes mellitus, liver disorders, psychological disorders and pyrexia of unknown origin even though not in significant percentage, suggestive of the distribution of such patients in this disease as well as in this particular locality.

Table 29 : Grahani and Family history.

70.90% patients had no positive family history; it is evident that the disease may not be a hereditary one. But, even family history may contribute in some percentage of the population as the incidences were reported from Matru Kula (13.64%) and Pitru Kula (11.82%).

Table 30 : Grahani and Chronicity.

From the table, it is known that a varied range of percentage of chronicity will be there in the incidences. Maximum 35.45% patients had the chronicity of 3 – 4 yr duration. Further 23.64% incidence was found with the chronicity of 2-3 yr followed by 21.91% occurrence with the chronicity of 1-2yr.

This is suggestive of the chronic nature of the illness. This substantiates the factor that. Atisara if not treated in time, results in Grahani; Grahani, a disease of Chirakari nature also well appreciated by this matter.

Table 31 : Grahani and Aharajanya Nidana.

From the table it is known that maximum 51.82% patients were taking Ajeerna Ahara (Guru Bhojana) followed by Ati Ahara in 45.45% patients. In maximum patients, during the survey work, it was known that patients were taking excess food inspite of their lessened digestive fire and tastelessness, so as to increase the body weight, as gradual weight loss was complained by themselves. 34.55% patients were taking Ahita Ahara as they were having tastelessness of the mouth. In quite a number of patients, it was known that they were taking Chiwda, Curry items, fried item or baked foods during their food so as to have taste.

Sheeta Ahara was found in 33.69% patients followed by 31.82% incidence of both Sandushta bhojana and Vishama Ahara.

Other Aharaja nidanas even though reported, the incidence was in less than 25% patients. Thus all these factors substantiate the Nidanas told in the classical literatures.

Table 32 : *Grahani* and *Viharajanya Nidana.*

Table shows that maximum 33.64% patients were of Vega vidharana nature. Diwaswapna (11.82%) and Bhuktamatrasyashayana (10.91%) were also found in significant number of patients. Hence, the nidanas found in the present study do substantiate the classical mentioning.

Table 33 : Grahani and Manasika Nidana.

From the table, it is evident that the findings are substantiative of the classical literatures as the Vata Prakopaka Manasika nidanas are observed markedly in higher percentage of incidences like Chinta (56.36%), Udwega (52.73%) and Bhaya (45.45%). Other Manasika Bhavas like Klama (21.82%) and Shoka (20.91%) were also found in marked number of patients.

Here from the table 31, 32 and 33 together, it is found that Manasika Nidanas as well as Aharajanya Nidanas are the key factors for the manifestation of the disease.

Table 34 : Cardinal symptoms of Grahani and their occurrence –

The table reveals that among the cardinal symptoms of Grahani told in the classical texts, Pureeshabheda was found in all the patients (100%). Next highest, 85.45% patients were known to having the complaint of Adhmana. 77.27% patients were complaining with the symptom of Praseka. As much as 71.82% patients were complained

of Asyavairasya. Atidravamalapravritti was observed in 66.36% of surveyed patients. More than half of the patients (54.54%) were having Udarashoola. 42.73% patients had Trishna followed by Hrillasa in 35.45% patients. Jwara (30.00%) and Daha (27.27%) were also complained in quite a number of patients. Other classical symptoms like Anaha, Jihwalaulya and Tamaka were found in less than 25% cases.

CONCLUSION

The study revealed that the incidence was more (34.55%) in the age group of 40-50 years and males (70.91%) were the more sufferers. Interestingly, disease was found more in professionals (40.91%). Irregular intake of food (73.64%) was also evident from the study.

Maximum incidences of Tobacco chewing (73.64%) and reduced appetite (69.09%) are also revealed by the study in large number of patients. More than half of the patients (51.82%) had 3-4 times per day bowel habit.

It is apparent from the study that maximum (46.36%) patients were having one or other type of unpleasure of mind, where tension, anxiety and irritation of the mind were common complaints.

70.90% patients were no positive family history and hence it is evident that the disease may not be a hereditary one.

Classical nidanas were found out with higher incidence of Ajirna (51.82%) and Atiahara (45.45%) inspite of their reduced appetite, so as to combat the loss of weight.

Pureeshabheda and Muhurbaddhamuhurdrava malapravritti was the cardinal symptoms present in 100% of the cases of the study.

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Table No. 01 Age wise distribution of 110 patients of Grahani

Age group (in years)	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
< 20	2	3	2	07	6.36
20-30	4	7	5	16	14.55
30-40	14	10	10	34	30.91
40-50	19	11	8	38	34.55
50-60	1	2	5	08	7.27
60-70	2	1	3	06	5.45
> 70	0	1	0	01	0.91

Table No. 02 Sex wise distribution of 110 patients of Grahani

Sex	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Male	29	25	24	78	70.91
Female	13	10	9	32	29.09

Table No. 03 Religion wise distribution of 110 patients of Grahani

Religion	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Hindu	37	32	29	98	89.09
Muslims	2	1	2	05	4.55
Christian	3	2	2	07	6.36

Table No. 04 Marital status wise distribution of 110 patients of Grahani

Marital status	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Unmarried	14	06	07	27	24.55
Married	28	29	26	83	75.45

Table No. 05 Occupation wise distribution of 110 patients of Grahani

Occupation	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Student	2	3	2	07	6.36
Household	11	4	3	18	16.36
Labourers	3	3	3	09	8.18
Business	13	12	6	31	28.18
Professionals	16	11	18	45	40.91

Table No. 06 Education wise distributions of 110 patients of Grahani

Education	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Uneducated	02	01	02	05	4.55
Primary	04	02	02	08	7.27
Secondary	10	08	08	26	23.64
Graduates	23	20	17	60	54.55
Post Graduates	03	04	04	11	10.00

Table No. 07 Residential wise distributions of 110 patients of Grahani

Habitat	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Rural	23	19	20	62	56.36
Sub - Urban	16	12	09	37	33.64
Urban	03	04	04	11	10.00

Table No. 08 Socio-economic status wise distributions of 110 patients of Grahani

Socio-economic status	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Poor	04	03	06	13	11.82
Middle class	33	28	24	85	77.27
Upper middle class	03	03	01	07	6.36
Rich	02	01	02	05	4.55

Table No. 09 Diet wise distribution of 110 patients of Grahani

Diet	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Niramisha	13	13	14	40	36.36
Mishra	29	22	19	70	63.64
Niyamita	6	12	11	29	26.36
Aniyamita	36	23	22	81	73.64
Alpa	19	12	09	40	36.36
Madhyama	10	07	10	27	24.55
Adhika	13	16	14	43	39.09
Madhura	28	17	12	57	51.82
Amla	11	07	10	28	25.45
Lavana	14	05	07	26	23.64
Tikta	03	00	00	03	2.73
Katu	11	13	11	35	31.82
Kashaya	02	02	01	05	4.55
Ruksha	10	08	08	26	23.64
Laghu	06	09	09	24	21.82
Shita	14	13	11	38	34.55
Snigdha	14	12	13	39	35.45
Ushna	08	16	11	35	31.82
Guru	20	21	17	58	52.73

Table No. 10 Addiction wise distribution of 110 patients of Grahani

Addiction	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Coffee	20	12	17	49	44.55
Tea	21	23	30	74	67.27
Pan	06	11	13	30	27.27
Tobacco	22	22	37	81	73.64
Smoking	28	16	19	63	57.27
Alcohol	03	02	03	08	3.64
Anxiolytic Drugs	01	02	01	04	3.64

Table No. 11. Appetite wise distribution of 110 patients of Grahani

State of Appetite	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Poor	31	22	23	76	69.09
Moderate	09	12	07	28	25.45
Good	02	01	03	06	5.45

Table No. 12 Bowel habit wise distribution of 110 patients of Grahani

Number of times	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
1-2 times/day	12	04	06	22	20.00
3-4 times/day	19	23	15	57	51.82
5-6 times/day	08	06	09	23	20.91
> 6 times/day	03	02	03	08	7.27

Table No. 13 Micturation wise distribution of 110 patients of Grahani

Micturation	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
2-3 times/day	09	04	07	20	18.18
4-6 times/day	28	25	18	71	64.55
7-10 times/day	02	04	06	12	10.91
>10 times/day	03	02	02	07	6.36

Table No. 14 Perspiration wise distribution of 110 patients of Grahani

Perspiration	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Alpa	34	31	31	96	87.27
Madhyama	06	03	02	11	10.00
Adhika	01	01	00	02	1.82
Atyadhika	01	00	00	01	0.91

Table No. 15 Koshta wise distribution of 110 patients of Grahani

Koshta	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Mridu Koshta	14	08	09	31	28.18
MadhyaKoshta	21	18	18	57	51.82
Krura Koshta	07	09	06	22	20.00

Table No. 16 Sleep wise distribution of 110 patients of Grahani

Sleep	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Good	22	10	19	51	46.36
Less	07	06	07	20	18.18
Disturbed	12	16	07	35	31.82
More	00	02	00	02	1.82
Day sleep	01	01	00	02	1.82

Table No. 17 Exercise wise distribution of 110 patients of Grahani

Exercise	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Sedentary	06	03	02	11	10.00
Less	03	01	03	07	6.36
Moderate	30	28	24	82	74.55
Excess	03	03	04	10	9.09

Table No. 18 Emotional make up wise distribution of 110 patients of Grahani

Emotional make up	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Anxiety	16	14	12	42	38.18
Tension	23	13	17	51	46.36
Depression	06	01	03	10	9.09
Irritation	16	11	14	41	37.27
Anger	17	10	13	40	36.37
Jealousy	03	02	02	07	6.36
Fear	04	03	06	13	11.82
Jovial	03	02	00	05	4.55

Table No. 19 Prakriti wise distribution of 110 patients of Grahani

Prakriti	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Vata	07	04	06	17	15.45
Pitta	03	02	04	09	8.18
Kapha	03	05	09	17	15.45
Vata-Pitta	14	11	06	31	28.18
Vata-Kapha	12	10	05	27	24.55
Pitta-Kapha	02	02	01	05	4.55
Sannipataja	01	01	02	04	3.64

Table No. 20 Sara wise distribution of 110 patients of Grahani

Sara	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Pravara	10	08	12	30	27.27
Madhyama	26	18	14	58	52.73
Avara	06	09	07	22	20.00

Table No. 21 Samhanana wise distribution of 110 patients of Grahani

Samhanana	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Pravara	11	10	07	28	25.45
Madhyama	28	21	19	68	61.82
Avara	03	04	07	14	12.73

Table No. 22 Pramana wise distribution of 110 patients of Grahani

Samhanana	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Pravara	11	10	12	33	30.00
Madhyama	23	19	18	60	54.55
Avara	08	06	03	17	15.45

Table No. 23 Satmya wise distribution of 110 patients of Grahani

Satmya	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Pravara	10	07	11	28	25.45
Madhyama	28	17	20	65	59.09
Avara	04	11	02	17	15.45

Table No. 24 Aharashakti wise distribution of 110 patients of Grahani

Abhyavarana Shakti	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Pravara	05	04	02	11	10.00
Madhyama	08	12	11	31	28.18
Avara	29	19	20	68	61.82
Jaranashakti Pravara	02	05	01	08	7.27
Madhyama	16	12	11	39	35.45
Avara	24	18	21	63	57.27

Table No. 25 Vyayama Shakti wise distribution of 110 patients of Grahani

Vyayama Shakti	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Samyak	04	03	01	08	7.27
Alpa	13	15	14	42	38.18
Ati	07	03	06	16	14.55
Niyamita	07	05	04	16	14.55
Aniyamita	11	09	08	28	25.45

Table No. 26 Age wise distribution of 110 patients of Grahani

Age	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Bala	03	04	03	10	9.09
Madhya	37	29	27	93	84.55
Vriddha	02	02	03	07	6.36

Table No. 27 Satwa wise distribution of 110 patients of Grahani

Satwa	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Pravara	04	03	03	10	9.09
Madhyama	24	21	20	65	59.09
Avara	14	11	10	35	31.82

Table No. 28 Past history wise distribution of 110 patients of Grahani

Past history	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Hypertension	10	06	07	23	20.91
Diabetes mellitus	03	02	02	07	6.36
Liver disorders	03	00	01	04	3.64
Psychological disorders	01	01	00	02	1.82
Pyrexia of unknown origin	02	03	00	05	4.55
Anemia	06	08	06	20	18.18

Table No. 29 Family historywise distribution of 110 patients of Grahani

Family history	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Matru kula	06	04	05	15	13.64
Pitru kula	05	06	02	13	11.82
Both	01	01	02	04	3.64
Not contributory	30	24	24	78	70.90

Table No. 30 Chronicity wise distribution of 110 patients of Grahani

Chronicity	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
< 1 year	04	01	03	08	7.27
1 to 2 years	06	07	10	23	20.91
2 to 3 years	09	11	06	26	23.64
3 to 4 years	16	11	12	39	35.45
4 to 5 years	06	03	01	10	9.09
>5 years	01	02	01	04	3.64

Table No. 31 Aharajanya nidana wise distribution of 110 patients of Grahani

Ahara	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Alpahara	04	09	07	20	18.18
Atyahara	21	16	13	50	45.45
Ajirnahara	27	13	17	57	51.82
Vishamahara	12	12	11	35	31.82
Asatmya bhojana	10	03	01	14	12.73
Guru ahara	06	03	03	12	10.91
Sheeta ahara	10	14	13	37	33.64
Atisnigdha ahara	07	13	08	28	25.45
Atimadhura	12	11	07	30	27.27
Atyamla	01	03	03	07	6.36
Ati drava	07	03	03	13	11.82
Pishta gudopa bhojana	08	06	05	19	17.27
Sandushta bhojana	10	14	11	35	31.82
Viruddha	12	10	03	25	22.73
Ahita	13	11	14	38	34.55

Table No. 32 Viharaja nidana wise distribution of 110 patients of Grahani

Vihara	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Vyayama varjya	03	03	04	10	9.09
Divaashayana	03	04	06	13	11.82
Bhuktamatrasya swapna	04	03	05	12	10.91
Vega vidharana	10	13	14	37	33.64
Atiyana	01	03	00	04	3.64
Desha vaishamya	04	02	01	07	6.36
Kala vaishamya	02	02	01	05	4.55
Ritu vaishamya	04	03	02	09	8.18
Vyadhikarshana	01	00	02	03	2.73

Table No. 33 Manasika nidana wise distributions of 110 patients of Grahani

Manasika Nidana	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Klama	11	06	07	24	21.82
Bhaya	20	18	12	50	45.45
Udvega	21	20	17	58	52.73
Aghata	03	02	00	05	4.55
Chinta	26	16	20	62	56.36
Shoka	10	04	09	23	20.91
Krodha	01	01	03	05	4.55

Table No. 34 Cardinal symptoms found in 110 patients of Grahani

Cardinal Symptoms	No. of patients			Total (110)	Percentage
	GROUP A (42)	GROUP B (35)	GROUP C (33)		
Prasaka	30	28	27	85	77.27
Hridaya	10	16	13	39	35.45
Adhmana	37	30	27	94	85.45
Udarashoola	20	22	18	60	54.54
Anaha	07	13	06	26	23.64
Aavarasamya	29	26	24	79	71.82
Jihvalalya	05	09	05	19	17.27
Trishna	16	19	12	47	42.73
Daha	12	11	07	30	27.27
Tamaka	06	07	05	18	16.36
Jvara	10	12	11	33	30.00
Purishabheda	42	35	33	110	100.00
Atidravasamlap ravritti	24	23	26	73	66.36