Role of Dashmool Taila Janubasti in Janu Sandhigat Vata
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Abstract:
Due to sedentary lifestyle and lack of exercise osteo-arthritis i.e sandhigat vata is common in productive age group Sandhigata vata is a common vata predominant disorder. It begins asymptotically in 2nd & 3rd decade. 90% of all people have radiographic features in the weight bearing joints mainly the knee joint by the age of 40. In Sandhigata vata mostly janusandhi and some other major joints i.e. hip, knee, shoulder etc. are involved. Out of these janu sandhi is commonly involved since it is weight bearing joint and improper habit of standing and walking. Janu Sandhigata vata is caused by 2 factors i.e. a)Avarana janya and b)Dhatu kshaya janya. In this trial dhatukshaya janya Sandhigata vata was taken ,which is also known as nirupstambhit janu Sandhigata vata i.e osteoarthritis). To overcome this problem patients take regularly take NSAIDS, analgesic drugs and steroids to relieve the pain, but do not achieve good health. As there is no cure or ideal conservative management for this disease, this study definitely have good clinical results over the modern medicine.

KEYWORDS - Nirupstambhit janu Sandhigata vata, janu basti, Dashmool oil,

Introduction:
Acharya Charak has described bahiparimarjan chikista for various diseases. Janu basti (external oleation) is the one type of bahiparimarjan chikista .To prove its efficacy on januSandhigata vata 6 patients were selected with classical symptoms of janu Sandhigata vata from Kaya-
chikitsa OPD of K.D.M.G.S Ayurvedic Medical College, Chalisgaon. Two course of Dashmool tail janubasti was planned, 1st course for 7 days after a gap of 1 week again 2 7 days. Assessment of result was done on the subjective and objective parameters. Significant changes were observed in subjective & objective parameters. Subjective parameters included (5) i.e. (1) Vatapurnadrutisparsha. (2) shotha (3) shool. (4) Akunchana prasarana janya vedana Acharya Charak has mentioned common treatment for vatavyadh i.e. repeated use of snehan & swedana, Basti & mrudu virechan, (1) while acharya Sushrut has mentioned the treatment for Sandhigata vata clearly as snehana, upanaha, agnikarma, bandhana & unmardana. (2) Acharya Vagbhat has also mentioned snehan, swedan and mr du samshodhan in vataj vyadh Role of janu basti in janu Sandhigata vata is based on Bahiparimarjan chikista advocated by acharya Charak (Ch. su.11/55).

AIMS & OBJECTIVES:
Aims: To study the management of nirupastambhit janu Sandhigata vata with Dashmool taila janu basti.
Objectives: 1. To study the efficacy of Dashmool taila janu basti in janu Sandhigata vata. 2. To study the action of janu basti in janu Sandhigata vata.

MATERIAL & METHOD 1) Selection of patients: Patients were selected randomly with symptoms of janu Sandhigata vata irrespective of their age, religion, & sex etc. Patients were then subjected to detailed clinical history on the basis of specially prepared case proforma. Inclusion criteria: 1. Patients with pratyatmak lakshana of nirupastambhit janu Sandhigata vata were selected. 2. Age between 40 to 70 yrs were included. Exclusion criteria: 1. patients suffering from diseases like amavata, vatarakta & kroshtukshirsha were excluded 2. patients with condition like AID’S, tuberculosis, uncontrolled diabetes mellitus, uncontrolled hypertension and pregnancy were excluded. 3. patients with secondary osteoarthritis of diseases such as rheumatoid arthritis, malignancy & trauma were excluded.

Material: Collection of following materials are required for the smooth execution of the procedure. masha (black gram flour) 500gm Dashmool oil 300ml Fiber yantra (ring), cotton one small bundle.

METHOD (janu basti procedure): First masha pishti was prepared by
Adding adequate quantity of water to the black gram flour. Patient was asked to sit erect and extend the lower limb on the table comfortably. The affected knee was exposed properly. Then the fiber mantra (janubasti yantra) was placed over the janu sandhi. The gap between ring and patient’s skin was properly sealed with black gram paste. It prevents the leakage of medicine retained in the cavity. The height of the janubasti yantra was 4 angula. The bowel containing Dashmool oil was heated indirectly by keeping over hot water. Then gently heated luke warm oil was poured slowly and carefully on the janusandhi along the side of the bastiyantra. The heat of the oil was sufficient enough (45°C) to be tolerated by the patient. The level of oil was 2 angula above the highest point inside the cavity. As time passes the oil gets cooled and it is replaced with the heated oil every 5 minutes so that the constant temperature was maintained throughout the procedure. This procedure was carried out for 35 minutes. After the specified time Dashmool oil was removed from the basti yantra and then basti yantra was removed. After removing the dravya and basti yantra massage was done in circular motion for 5 min. covering the whole aspect of knee joint.

CRITERIA OF ASSESSMENT:


OBJECTIVE PARAMETERS: 1) X-ray of knee joint 2) Womac grading.

GRADATION CHART FOR SUBJECTIVE PARAMETERS:

Vatapoornadrutisparsha (crepitation)
1. No crepitus - 0
2. Palpable crepitus - 1
3. Audible crepitus - 2
4. Always audible crepitus - 3

Shotha (swelling) in joint
1. No swelling - 0
2. Slight swelling - 1
3. Moderate swelling - 2
4. Severe swelling - 3

Shoola (pain)
1. No shoola – 0
2. Mild shoola – 1
3. Moderate shoola – 2

Akunchan prasaranjanya vedana
1. No pain-0
2. Pain without winching of face-1
3. Pain with winching of face-2

SUBJECTIVE PARAMETERS:

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>MEAN BT</th>
<th>MEAN AT</th>
<th>% RELIEF</th>
<th>S.D</th>
<th>S. E.</th>
<th>T VALUE</th>
<th>P VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>VATA PORNA DRUTISPARSHA</td>
<td>2.33</td>
<td>1.17</td>
<td>50</td>
<td>0.408</td>
<td>0.17</td>
<td>7</td>
<td>0.0009</td>
</tr>
<tr>
<td>SHOTH</td>
<td>1.5</td>
<td>0.17</td>
<td>89</td>
<td>0.816</td>
<td>0.33</td>
<td>4</td>
<td>0.0103</td>
</tr>
<tr>
<td>AKUNCHAN PRASARANJNYA VEDANA</td>
<td>2.17</td>
<td>1.17</td>
<td>46</td>
<td>0.632</td>
<td>0.26</td>
<td>3.873</td>
<td>0.0117</td>
</tr>
<tr>
<td>SHOOL</td>
<td>2.5</td>
<td>1</td>
<td>60</td>
<td>0.5477</td>
<td>0.22</td>
<td>6.708</td>
<td>0.0001</td>
</tr>
</tbody>
</table>

Statistical analysis: On the basis of subjective parameters (symptoms) & objective parameters (womac grading) statistical analysis was done by Wilcoxon signed rank test method and following results were obtained.
OBJECTIVE PARAMETER

<table>
<thead>
<tr>
<th>MEAN BT</th>
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<th>% RELIEF</th>
<th>S.D</th>
<th>S.E.</th>
<th>T VALUE</th>
<th>P VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>52.67</td>
<td>29.5</td>
<td>44</td>
<td>0.7527</td>
<td>0.31</td>
<td>75.38</td>
<td>0.0313</td>
</tr>
</tbody>
</table>

Using the Wilcoxon Signed rank test, the p-value is 0.0313 and hence we can say that the treatment was effective for the objective parameters. Also using the “paired t test”, we get \( p < 0.0001(t \text{ cal} = 75.3879) \) which is highly significant and hence the treatment is said to be effective.

RESULT

It was observed that the Dashmool taila janu basti was very much beneficial to reduce the intensity of vataporna drutisparsha, shoth, shula, prasaran, akunchan vedana. The effect was long lasting after followup also. The Womac scale showed marked improvement after the treatment. Amongst the 6 patient with the Dashmool taila janubasti 4patient got excellent relief & 2 got moderate relief statistically. No significant changes were observed in X ray finding.

DISCUSSION & CONCLUSIONS

Sandhigata vata is described as a vatavyadhi in all samhitas & sangrahagranthas. Various aharaja, viharaja, manasika, & other vataprakopaka Nidan are mentioned in detail which causes vatavyadhi. Sandhigata vata specially occurs in vriddha avastha in which dhatukshaya takes place which leads to vata prakopa. Vata & asthi have ashraya ashrayi sambandha. That means vata is situated in asthi. In vriddha avastha increased vata diminishes the sneha from its asthi dhatu by its opposite qualities to sneha. Due to diminution of sneha, kha vaigunya(
rikta srotas) occurs in asthi which is responsible for the cause of Sandhigata vata in the weight bearing joints especially in janusandhi causing januSandhigata vata. Janu basti is kind of bahya snehan and swedan procedure. Snehan mainly acts against ruksha guna caused by vata and Swedan mainly act against sheeeta guna. It also reduces Stambha and Gauravta. Dashmool has Vatashamak and Vedanasthapan property. (6) Shoolaa (pain) was subsided due to shaman of vata which is prime reason for shoolaa. Joint stiffness is reduced by ushna veerya of Dashmool and warmth produced during the procedure. Thus reduced in pain and stiffness improves the gait of patient. Janu basti with Dashmool taila has Snigdha property that would have lead to the reduction in crepitus which is caused due to Ruksha guna of Vata. Acharya Charak has advocated use of Dashmool in vataj vyadhi as follows (7)Dashmool tail is used in vataj vyadhi for massage & puran, here in janu basti this oil is used as puran (retention of oil). In Dashmool tail janu basti oil is absorbed through skin & produce an action according to the properties of Dashmool(8). Dashmool has vedana sthapana, shothahar & rasayan properties. This helps in vata shaman and nourishes dhatu due to its brimhan property. Because of shoolahara and shothahara effects of Dashmool tail upashaya occurs. JanuSandhigata vata being a vataj vyadhi with dhatukshaya as its resultant, Snehan would be an ideal line of treatment. Janu basti may act as Snehan and Swedan, since in this disease vata is predominant so as degeneration. Kshaya of snehadi guna is seen. Snehan helps in bringing back the sthanik kapha dosha to normalcy due to its similarities in its gunas. As Bahi-parimarjan Chikitsa Dashmool taila janu basti has shown significant results but to check the reoccurrence of the symptoms Antah parimarjan chikitsa should be added.

REFERENCE
1. CHARAK – SAMHITA Vol. 2 Chikitsasthan Author Bramanand Tripathi Ref. ch. Sm. Chik.sthan 28, pg.no.954
2. Sushruta samhita Chikitsa sthan By Anant Ram Sharma CHAUHKHAMBA SUBHARATI (Su chi 4/8) Pg no 205.
3. Ashtang Hridaya Sutrasthan By P.G .Athawale (A.H Su 13/1-3)
4. CHARAK SAMHITA Vol. 1 Sutrasthan Author Pt. Kashinath
Shastri Chakhambha Bharati pg.no.239 (Ch.su.11/55)  
5. CHARAK – SAMHITA Vol. 2 Chikitsasthan Author Bramanand Tripathi Ref. ch. Sm. Chik.sthan 28/37 Pg no 942  
6. Aushadhi Sangraha By DR VAMAN GANESH DESAI, Rajesh Publication Part 2 pg no 105  
7. CHARAK – SAMHITA Vol. 2 Chikitsasthan Author Bramanand Tripathi Ref. ch. Sm. Chik.sthan 28/134 Pg no 963  

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