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Ayurvedic Management of Amavata (Rheumatoid Arthritis) - A Single Case Study.

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ABSTRACT: Rheumatoid arthritis (RA) is a chronic autoimmune disorder characterized by inflammatory arthritis and extra-articular involvement. Clinically, it resembles to Amavata. Amavata is one among the most prevalent disease in the present era clamming the maximum loss of human power. It is a chronic, progressive and crippling disorder caused due to generation of ama and its association with vitiated vata dosha and deposition in shleshma sthana (joints). It poses a challenge for the physician owing to its chronicity, morbidity and complications. The main moto RA management is to get pain relief, prevention of joint damage and functional loss. Acharya yogaratankar Acharaya chakrapani described the treatment of Amavata in which they mentioned the use of Langhana, swedana, tikta, katu, Deepana drugs, Virechana and Basti.

Keywords:

Amavata, Deepan, vaitran basti, langhana, swedan, virechana

Introduction:

Ayurveda has its concept like dosh, dushya, mala, agni etc. Ama is one of the basic and important concepts which take the major role to produce a variety of diseases. The term Ama means raw or undigested material which cause due to agnimandya. Amavata is the most common endogenous disease which is produced due to frequently formation of *Ama* in human body .*Amavata* is a disease in which Ama with vitiated accumulate sleshma Vata Dosha (1), which stimulates rheumatoid sthana. arthritis in modern parlance. The prevalence of rheumatoid arthritis in India in person has been mentioned to differ from 0.5 to 3.8% in women and from 0.15 to 1.35% in men . (2) Whenever that *Ama* gets localized in the body tissue or joints, it can lead to production of pain, stiffness, swelling, tenderness, etc., in the related joints.[5] The diseases was first explained in detail in manner by Acharaya Madhavkara in Madhava nidan during 7th century AD. The features of Amavata are much identical to RA, an autoimmune disorder which causes chronic inflammatory and symmetrical polyarthritis. (3) In present era changing life style, intake of fast food, lack of exercise etc. when Ama combines with vitiated vata dosha in sleshmasthana⁽⁷⁾ Amayata resembles leads to with rheumatoid arthritis .Here the Rasavaha strotas is primarily involved .Because of this, the pain spreads from one joint to another joint very quickly. The diseses has classical symptoms like sandhi shota, shola, sparshaasahatwa and Gatrastabdhata. In samhitas, according to Dosha and vyadhi avastha the Bala. Shodhan and shaman chikitsa is described for the Amavata. Chakrapaniduta has described the principles and line of treatment for Amavata. Langhana (fasting), Swedana (sudation), use of drug of Tikta (bitter) and Katu (pungent) Rasa, Deepana (stimulating hunger), Virechana (purgation therapy), Basti (enema) are beneficial in the management of Amavata.

CASE REPORT

Place of study: Laxmanrao kalaspurkar Ayurvedic Rugnalaya, Yavtmal

Case Report:

A 40yr male patient with OPD no 504204 and IPD no 2028 was admitted in male kayachikitsa ward, with complaints of sarvanga sandhishoola, shotha, sakashta chakraman, jwaranubhuti, Aruchi, Agnimandya, manibandh shool, parvasandi shool since 4months.

History of Present Illness:

The patient was normal 4 months back since the patient have been suffering from sarvanga sandhishoola, shotha, sakashta chakraman, jwaranubhuti, Aruchi, manibandh shool, parvasandi shool. For this patient took allopathy treatment but got temporary relief, then he

decided to take Ayurvedic treatment. So patient visited to L.K. Hospital for further management.

Past History: No H/O Diabetes, Hypertension or any chronic diseases.

Personal History: No any Addiction

Family History: No any family history of Rheumatoid Arthritis.

Rugna pariksha:

• Nadi:80/min

• Mala: Asaymak

• Mutra:Samayak

• Jivha:Saam

• Shabda:spashta

• Sparsha:samsitoshan

Druk: Spashta

• Aakruti:Krush

• Nidra:Samayak

• Bp :110/70 mm Hg

Temp: 99.2⁰ F

Assessment Criteria

1) Grading of Sandhishoola (pain)

Sr.no	Severity of pain	Grade
1	No pain	0
2	Mild pain	1
3	Moderate but no	2
	difficulty in	
	moving	
4	Much difficulty	3
	in moving the	
	body parts	

2) Grading of Sandishotha (swelling)

Sr.	Severity Of swelling	Grade
no.		
1	No swelling	0
2	Slight swelling	1
3	Moderate swelling	2
4	Severe swelling	3

3) Gradation of Sakashta Chankraman (Walking time)

Sr.no	Walking Time (for 25	Grade
	feet in number of	
	seconds)	
1	15-20 sec	0
2	21-30 sec	1
3	31-40 sec	2
4	>40 sec	3

SAMPRAPTI

Nidana(Dadhi sev an, divaswap, vishamashan, Bhojnouprant ati shram(SANCHAY)

Agnimandhya (SANCHAY)

Ama(PRAKOP)

Samavata(PRAKOP)

Sleshma sthana(PRASAR)

Dhamni Pravesh(PRASAR)

Shlesmak kaph, Pachak pitta

Saman and Vyan vayu (PRASAR AVASTHA)

Rasavaha Strotas & Shleshma Sthan Dushti (STHANSAMSHRAYA)

Daurbalya, Sandhi shola, Sandhi stabdhata, Aruchi, Agnimandya(VYAKTI)



SAMPRAPTI GHATAKA

- Dosha vata-vyan, saman, Pitta-pachak, Kaph-sleshma
- Dushya- Dhatu-rasa, meda, mjja Upadhatu-sira, snayu Malapureesha
- Agni-jatharangi and Dhatvaagni
- Agnidushti-Mandagni
- Srotas- Annavaha, Rasavaha, Asthivaha
- Srotodusti-Sanga
- Udbhavsthana-Amashaya
- Sancharstahna-Annavaha Srotas,
 Dhamini, Kaphasthana
 - Adhistana-Kaphastana like Sandhi, Amshaya
 - Vyaktasthana- Kaphasthana i.e. Sandhi, Amashaya, Uras etc

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- Svabhava-Kastasadhya
- Rogamarg-Madhyama

Treatment plan:1)Shaman chikitsa (Abhyantar medicine)

Sr.no	Medicine	Dose	Anupana
1	Amvatri Ras	250 mg 2 Tab BD	Koshnajal
2	Simhanad Guggul	500mg 1Tab BD	Koshnajal
3	Combination of	Each 1 gm churna taotal	Koshnajal
	Trikatu+ +guduchi	2 gm BD	
4	Mahavatvidhvansa Ras	250mg 1 Tab BD	Koshnajal
5	Rasnasapatak kwath	20 ml BD	Koshnajal
6	Gandharva Haritaki churna	3 gm HS	Koshnajal

2) Shodhan Chikitsa:

Panchkarma Management

Snehana & Swedan

snehana	Mahavishgarbh tail
Rooksha sweda	Valukapotti sweda

Yog Basti – 8 days

Anuvasn basti	Saindavadi tail 60ml			
Vaitarana basti	Sr.no.	Ingredients	In pala	In gm/ml
	1	saindhavlavana	1 karsha	12 gms
	2	Guddha	1/2pal	25 grams
	3	Amlika	1 pal	50 grams
	4	snehah	2 pal	100 ml
	5	Gomutra	1 kudava	200ml
		total		387ml

Observation and Result: Assessment According to Gradations-

Sr.no	Assessment Criteria	ВТ	AT
1	Sandhishoola	3	1
2	Sandhishotha	2	0
3	Sakashtachakraman	3	0

INVESTIGATION

Investigation	BT	AT
НВ	11.5 gm %	11.8 gm %
TLC	6, 980 /cmm	6, 020/cmm
PLT COUNT	3, 41, 000/cmm	3, 35, 000/cmm
ESR	35mm/1hr	15 mm/1hr
RA TEST	Positive(Titre :16)	Negative (Titre:08)

Discussion:

Chakradatta was the first, who described the chikitsa Siddhant for Amavata. Amavata is one of most common joint disorder. It is an autoimmune, chronic, degenerative diseases of the connective tissue mainly involving the joint Amavata is mainly caused by viation of Vata Dosha and Formation of

Ama. Mandagni is the root cause of Ama production and treatment requires digestion of Ama which occupied whole body. It includes Langhana, Swedana, drug having Tikta, Katu Rasa and Deepan action, Vaitrana basti.

Mode of action of drugs-

1)Langhana is the 1st line of treatment in Amavata which helps in digestion of Ama

.langhan means not complete fasting, but intake of light food .

2)Aushadi chikitsa: (6)Simhanada guggul is the drug of choice in amvata (RA) due to capacity to improve digestive fire and improves strength of joints. It has *Deepan*, *Ama panchan*, *Shoolghna*, *Shothanga* and *Amavathar* properties.

Amavatri ras, it is a drug of choice in Amavata to reduce the Ama and blanced the viated Vata dosha.

Rasnasaptak Kwath: It contains *Rasna*, *Amruta*, *Aragvadha*, *Devdaru*, *Trikantaka*, *Eranda*, *Punarnava*, *Shunti*. It act as *shoolaghana* (analgesic), *vata* – *kapha shamak*, immunomodulator, anti – inflammatory, carminative, appetizer.

Mahavatvidhawansa ras: It acts as an excellent anti inflammatory and analgesic medicine and to promote strength of bones and joints.

Gandharv haritki: Contains of this medicine errand tail, balharitki, sunthi, sandhav, and savarchal lavan. It has Purgative and Laxative action. It removes toxins from body.

3)Swedan: Rukshaswedan has been advocated in the from Valukapottali which induces sweating and relieves Stambh, Gaurav and Sheeta.

4)Yog Basti:

Anuvasan Basti: Basically, it has Deepan panchan drugs such shunti, shatapushpa, saindhav, maricha, pipali etc. It causes Amapachan. It also contains Vedanasthapan & shothahara dravyas such as Rasna, Erand mul, Renuka beeja, mulethi.It causes Nourishment & cures diseases caused by aggravated vata. Acharya chakradata has also mentioned the use of saindhavadi taila. Basti in Amavata while describing chikitsa sutra.

Vaitarna Basti: According to its pathophysiology, one should treat the morbid doshas involve in are *Kapha* and *vata* simultaneously. Here treatment

modality called Vaitrana basti described by Chakradatta in Amavata shows the desired result. It brings that doshs from shakha to Koshata and removes them out of the body via anal route. Vaitarana basti by its laghu, ruksha, ushna and tikshna guna reaches the pakwashava. which is the main sthan of vata dosha and destroys it. From there it reaches the entire body and destroy the doshas accumulated in the body. Sneha dravya present in basti, by its sukshma guna enters into strotas to reach the grahani. it acts on samana vayu.So, Here. Vaitarana basti performs the function of Apana anuloomana and hence increases the *jatharagni*⁽⁷⁾

CONCLUSION:

Amavata is one of the challenging disorder of joints . Ama and Vata have the properties on opposite pole of each other and involvement of uthanadhatu (RASA) and gambheradhatu (ASTHI) makes the treatment more complicated so there is necessity of a systematic treatment protocol purely based on the principles of Ayurveda. Panchakarma procedures will help in checking autoimmune mobility and elimination of Bahudoshavastha. This case study showing that *Shodhan* and Shaman Chikitsa is a better modality of treatment for treating Amavata for relieving symptoms and as well as correction in biochemical parameters.

REFFERENCES:

- 1. Agnivesa, Charaka Samhita, Acharya Jadavji Trikamji, Choukambha Publication, Varanasi, 2001; 705.
- 2. Prevalence of Rhematoid arthritis https://www.researchgate.net>, 1488.
- 3. Boon NA, Colledge NR, Walker BR, Hunter JA. Musculoskeletal

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- disorders. Davidson's Principles and Practice of Medicine. 20th ed., Ch. 25. Edinburgh: Churchill Livingstone-Elsevier, 2006; 1101-4.
- 4. Sharma P.V. Cakradatta of Cakrapani, English translation, Chapter 25, Amavatachikitsa, Chaukhamba Sanskrit Sansthan, Varanasi, 2nd Ed.1998, P.227
- 5. Tripathi B, editor. Madhav Nidana of Madhavkar, Vol. 1, Ch. 25, Ver. 6. Reprint ed. Varanasi: Chaukhabha Sanskrit Sanshtan, 2006; 572.
- 6. Chakradutta with Ratnaprabha commentary edited by Priyavat

Swami Jayaram das Sharma, Prakashana Jaipur, Reprint 2000, Amavata chi.25/1 pg no.423 and Bhaishajya Ratnavali, Edited with Siddhiprada Hindi Commentary Siddhinandan Mishra, Published bv Chaukhambha Surbharati Prakashana, 29/13 Varanasi, Edition, 2007; 198 55.7. Kaushik Jyoti, Kumar Ajay, Role of Vaitarana Basti in the Management of Amavat w. s. r. to Rheumatoid Arthritis – A case study. International Research Journal of Ayurveda and Yoga, Vol. 4(12), 67-73, December 2021'[

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