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CASE STUDY

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A Multimodal Ayurveda management of *Amavata* (Rheumatoid arthritis): A Case Study

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ABSTRACT

Amavata (Rheumatoid arthritis) is a painful, systemic disease involving multiple joints. The chief elements are Ama and Vata which concurrently affect the joints and causes stiffness of the joints. The clinical features of Amavata resembles closely with Rheumatoid arthritis. The condition is managed by DMARDs (Disease Modifying Anti-rheumatic drugs) and corticosteroids, but still remains a challenging problem to the medical field as it doesn't completely cure the disease. Ayurveda has a given a detailed description regarding the management of Amavata which includes Langhana (Fasting), Swedana (Sudation), Deepana (appetizing) with Tikta (bitter)— Katu (spicy) Rasa, Virechana (Therapeutic purgation) & Vaitaran Basti (enema).

A case of Amavata management by combined interventions included internal medications with Sinhnad Guggulu, Vishtinduk Vati, Rasnadi chruna with Sameerpannag rasa & Guduchi Ghanvati. Externally with Valuka Sweda, Nadi Sweda and Virechana (Therapeutic purgation) with Moorchita ErandaTaila & Vaitaran Basti. Investigations showed CRP & ASO positive &RA- Positive. Ayurveda treatment was given to this patient for 21 days. After 21 days of treatment CRP, ASO& RA were negative and symptoms were reduced.

KEYWORDS

Amavata, Rheumatoid Arthritis, Langhana, Swedana, Virechana Basti.



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INTRODUCTION

Pain is an agonizing indication experienced by human beings including distress sometimes. The chief constituents are *Ama* and *Vata* which simultaneously affect the joints and causes stiffness of joint. Based on the clinical presentation, RA (Rheumatoid Arthritis) shows more resemblance with Amayata.

Acharya Madhavkara has given a detailed description regarding the Nidana (Cause), Samprapti (Pathogenesis) and clinical features of *Amavata*¹. Having Viruddhaahar in excessive quantity or daily basis with lack of exercises etc. causes vitiation of Vata- Kapha dosha eventually leads to Mandagni (Weak digestive fire) that hampers the digestion and metabolism in the body. As a result, transformation of Rasa Dhatu (Metabolic end product) becomes impaired in Amashaya (Gastrointestinal tract) where it is called Ama (Metabolic toxin). Vitiated Vata displaces Ama which has an inclination towards Sandhi (Joints) and produces symptoms like *Angamarda* (Malaise), Aruchi (Anorexia), Trishna (thirst), Alasya (Tirdness), Gaurava (Heaviness), Apaka (Indigestion), Sandhishotha (Swelling of joint), SanadhiStambha (Stiffness), SandhiShoola (Joint pain).

The clinical features of *Amavata* resembles closely with R.A which is believed to have a prevalence range of approximately 0.75 % in India with a female to male ratio of 3:1. Management of Rheumatoid Arthritis includes use of analgesics, steroids for the pain management which are having several adverse reactions and drug dependency.

The treatment principles of Amavata includes removing Ama through Strotoshodhana (purifying body channels) by procedures like Langhana (Fasting), Swedana (steam), Agnivardhana (improving digestive fire) by adopting Deepan-Pachan drugs which are Tikta (bitter) Katu (spicy) Rasa predominant and alleviating Vata by Virechana (purgation) and Basti.

MATERIALS AND METHODS

CASE REPORT: A 28 year old female patient was admitted in Female KC ward. She was referred from orthopaedic department Dr.D.Y.Patil Medical College with history of Rheumatoid Arthritis since 8 years. She presented with the following complaints.

- Multiple joint pain and stiffness, generalised weakness, loss of appetite, constipation, cramps since 8 years.
- Gradual onset of bilateral pain and stiffness in MCP (Metacarpal-phalangeal



joint), wrist joint, elbow joints, ankle joints and knee joints since 8 years. Mild swelling in both wrist and ankle joints.

• H/O Hyper gonadotropic amenorrhea.

On examination she displayed restriction of movement in her wrist joint and ankle joint due to pain. Her blood investigation showed ASO titre and CRP were positive &RA titre was positive.

PERSONAL HISTORY

• Diet: Mixed diet, prefers spicy

Appetite: Irregular

• Bowel: Constipated often

Bladder: NormalSleep: Disturbed

ASHTAVIDHA PARIKSHA (GENERAL EXAMINATION)

• Nadi (Pulse): Vata, Pitta, 78/min

• Mootra (Urine): Normal

• *Mala* (Stool): Constipated

• Jihwa (Tongue): Sama (Coated)

• Shabda: Normal

• *Sparsha* (Touch): Normal but warmth over wrist and ankle joint

• Drik (Eyes): Normal

• Akriti (Built): Krushata (Thin) 45kg

• Blood Pressure: 110/70 mm of hg

• Respiratory Rate: 16/min

• Cardiovascular system- S1 S2 normal

• P/A: Mild tender at umbilical region

• Pallor: Mild

INVESTIGATION (ON ADMISSION)

• *C Reactive protein*: Positive

• *ESR*: 40mm/hr

• ASO titre: Positive

• R.A. Factor (Qualitative): Positive

DIAGNOSIS

• *Amavata* (Rheumatoid Arthritis)

MANAGEMENT

Principles of management

• Laghvashan (light diet)

• Dipan (digestion), Pachan (carminative)

by Tikta (Bitter)+Katu (spicy)Rasa

• Ruksha Swedan (dry steam)

• Virechan (purgation) & Basti (enema)

Chikitsa

• Vata – Kapha Shaman (Palliative)

Chikitsa

> CHIKITSA SUTRA OF AMAVATA

लड्घनंस्वेदनंतिक्तंदीपनानिकटूनिच। विरेचनंस्नेहपानंबस्त्यश्चाममारुते॥ सैन्धवाद्येनानुवास्यक्षारबस्तिःप्रशस्यते॥ रुक्षःस्वेदोविघातव्योबालुकापोटलैस्तथा। उपनाहाश्चकर्तव्यास्तेडपिस्नेहविवर्जिताः॥

 $(Yogratnakar)^2$

As mentionedin above *chikitsa sutra*, *Langhan*is said to be the first line ofmanagement for *Aamvata*. This will help for *Agnidipan* and *Aampachana*. As in this patient, it is found that, the patient's *bala* was *hina*, hence we planned to give her *Laghvashana* first.



1) Laghvashan with Mudga Yusha

Dose: 200ml

Duration: 3 days (when she felt hungry)

Anupan: Koshna Jala (luke warm water)

After 3 days, when symptoms of successful *Laghvashan* (light diet) therapy were observed on patient, *Laghvashan* (light diet) was stopped. Following symptoms presented after *Laghvashan* (light diet).

• Proper excretion of flatus, urine and faeces.

• Lightness of the body.

• Feeling of purity in heart.

• Appreciation of taste for food, hunger, thirst and contentment.

ORAL AYURVEDA MEDICINE (SHAMAN CHIKITSA)

1) Simhnada Guggulu³

Dose: 250mg

Time: Morning 7am & Evening 7pm

(empty stomach)

Anupana: Lukewarm Water

2) Vishtinduk Vati⁴

Dose: 125mg

Time: Morning 7am & Evening 7pm

(empty stomach)

Anupana: Lukewarm Water

3) RasnadiChurna

Rasna

Haritaki

each 3 gm

Devdar

Guduchi

Bala each 3gm

Erandamula

Yashtimadhu

Shatavari

+

Samirpannag Rasa – 75mg

Preparation of Decoction

Take each 25 gmChurna + 3 cup water reduced by boiling to 1 cup = filter it.

Dose: 40 ml twice in a day

Time: Morning 7am & evening 7pm (empty stomach)

4) Guduchi Ghanvati⁵

Dose: 250mg

Time: Morning 7am & Evening 7pm

(empty stomach)

Anupana: Lukewarm Water

PURIFICATION THERAPY (SHODHANA CHIKITSA)

1) Sarvanga Sweda (Whole body fomentation): Baluka Sweda for 21 days.

• Site- All multiple joints

2) Mrudu Virechana (Mild Therapeutic purgation): Eranda taila (Castor oil) for 3 days in vardhman matra⁶ was prescribed to patient. And as mentioned in table no.1, number of vegas had been observed.

Table 1 No. of daily Virechanavega

Days	Dose	No. of vegas	
1 st day	10ml	1 vega	
2 nd day	20ml	3 vega	
3 rd day	30ml	3 vega	
4 th day	40ml	4 vega	

3) BASTI KARMA: Vaitran Basti was given for 16 days. Contents of Vaitran Basti



are Guda (jaggery), Saindhav lavana (rock salt), TilaTaila (sesame oil), Amleeka (tamarind) & Gomutra (cow's urine)⁷

4) AGNI KARMA: when pain was aggravated.

Site: Ankle joint, wrist joint & knee joint.

CRITERIA FOR ASSESSMENT

- SUBJECTIVE CRITERIA⁸
 - 1) Joint pain & stiffness
 - 2) Generalised weakness
 - 3) Anorexia

- 4) Constipation
- 5) Cramps
- 6) Tiredness without exertion
- 7) Swelling
- OBJECTIVE CRITERIA9
 - 1) CRP
 - 2) ASO Titre
 - 3) RA Factor

OBSERVATION AND RESULTS

1) SUBJECTIVE CRITERIA

 Table 2 Assessment subjective criteria

Follow ups	1stday (Before treatment)	21stday(After treatment)
Multiple joints	Severe pain with more difficulty in	Mild pain of bearable nature.
pain	moving the joints & requires strong	
	analgesics.	
Stiffness	≥8 hours	30mins
Generalised	Continuous feel weakness which	No weakness
weakness	obstructs routine work.	
Anorexia	Craving for food only after long	Normal Craving for food
	intervals	
Constipation	Strain and hard stools	Normal
Tiredness without	Never able to start the work and	No tiredness
exertion	always like rest	
Swelling	≥ 30% increased circumstance of the	No swelling
	affected joints	

As mentioned in table.2, the above mentioned symptoms relief were observed before taking the treatment and after treatment.

1) OBJECTIVE CRITERIA:

Table 3 Assessment objective criteria

	J		
Investigation	1 st day	21st day	
C reactive protein	n Positive	Negative	
ASO titre	Positive	Negative	
ESR	40mm/hr	35mm/hr	
RA factor	Positive	Negative	
Table no.3	shows the	changes	in

investigation like C reactive protein, ASO

titre, ESR and RA factor before and after taking the treatment.

DISCUSSION:

Ama & Vata are the main culprits in causing the disease Amavata. Hence, the main purpose of treatment is to reduce Ama by Amapachan followed by Vatashaman measures.

Mode of action of drugs:



Oral Ayurveda medicine (Shaman chikitsa):

- Langhan (fasting) means the food which gives lightness to the body. Langhan (fasting) is the first line of management explained for Amavata which leads to Agnidipan & digest Ama.
- Use of *Tikta* (bitter) & *Katu* (spicy) *Rasa Dravya* for *Deepan* (digestion) *Pachan* (carminative), *Guduchi Ghanvati*, which are very useful for *Ama Pachan* (carminative) & *Agni Deepan* (digestion).
- Simhnada Guggulu have Katu (spicy), Tikta (bitter) Rasa, Laghu (light), Ruksha (dry) Guna, Ushnavirya (hot potency), Katu (spicy) Vipaka, Vedanasthapana (painkiller) Amapachak, Strotoshodhaka (purifying body channels) properties which helps in the breaking the pathogenesis of Amavata.
- Sameerpannag rasa mainly works on Vata-Kaphaj conditions & it is Uttam Bala Aushadha (powerful medicine). So, in this patient as the strength of the disease was strong, we had prescribed her Sameerpannag rasa 75mg + Rasnadi Churna twice a day for 15 days.
- Vishtinduk Vati contains a single ingredient i.e., purified Kuchala. Being Tikta (bitter) -Katu (spicy) Rasa, having Ushna Virya (hot potency),Katu (spicy) Vipaka & Laghu (light), Ruksha (dry),

Tikshna (penetrating) *Guna* it reduces *Kapha* & pacifies *Vata* & does *Amapachan*. It also reduces stiffness of joints.

PURIFICATION THERAPY (SHODHANA THERAPY):

- After attainting Niramavastha in patient, Virechan (purgation) with Eranda Taila was given to the patient for 3 days in Vardhaman Matra (Ascending dose). Eranda Taila is Kaphavata Shamak and Ushna (hot) Virya. It acts as Dipana (digestion) & Strotoshodhana (purifying body channels). It is mentioned as best Vatahara.
- Vaitrana Basti was given to the patient for 16 days. Chakradatta has appreciated the role of Vaitrana basti in the treatment of Amavata.

The ingredients of *Vaitrana Basti* (enema) have *Deepan* (digestion), *Pachana* (carminative), *Usha* (hot) *Virya*, *Madhur* (sweet) – *Amla* (sour) – *Lavana* (salt) *Rasa*, *Teekshna* (penetrating) & *Lekhana Gunas*. These *Gunas* helps to alleviate *Ama* & *Vata* in the body.

• As *Rookshan* and *Langhan* have similar qualities, it was done in the form of *Valuka sweda*, it helped in the *Shoshan* (absorption) of *Ama* situated in the *Sleshmasthana* (joints), thus pacifies symptoms like *stambha* (stiffness), & *shoola* (pain) suffered by patient.



CONCLUSION

The results obtained in the patient after the treatment was encouraging. The treatments employed were purely based on the principles of *Ayurveda* and was found to be very effective. The condition of the patient improved remarkably. Multimodal *Ayurveda* approach helped in restoring the quality of life of this patient. Thus *Panchkarma* procedures along with internal medicines showed encouraging result in this case of RA.



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