



IJAPC

Volume 11 Issue 2,
2019

www.ijapc.com

2350-0204

GREENTREE GROUP PUBLISHERS



“A Clinical Study to Evaluate the Efficacy of *Vamana Karma* with *Kalingadi Yoga* in *Amavata* w.s.r Rheumatoid Arthritis”

Rohini Roopanna Naik^{1*} and Niranjan Rao²

^{1,2}Department of PG Studies in Panchakarma, Shree Dharmasthala Manjunatheshwar College of Ayurveda Udupi, Karnataka, India

ABSTRACT

Amavata is a disease caused due to the vitiation or aggravation of *Vata* associated with *Ama*. Vitiated *Vata* circulates the *Ama* all over the body through *Dhamanis*, takes shelter in the *Kapha Sthana* (*Amashaya*, *Sandhi*, etc.) producing symptoms such as stiffness, swelling etc. in the joints, making a person lame. *Shodhana* therapies are unique therapies of *Ayurveda*, where *Doshas* are the fundamental cause for the disease, are expelled out of the body. Rheumatoid Arthritis has lot of similarities with *Amavata*. *Vamana* is best in *Kaphaja Dosh*, *Pitta Samsrusta Kapha* and in *Sleshmasthanagata Dosh*. In *Amavata*, *Sandhi* is affected, which is a *Kapha Sthana*. *Langhana* is mentioned as a line of treatment for *Amavata*, *Vamana* is considered as *shodhana* variety of *Langhana* according to *Acharya Caraka*.

In this study, 20 patients diagnosed with *Amavata* were selected and subjected for *Vamana Karma* with *Kalingadi Yoga*. Prior to that, *Deepana* and *Pachana* was done followed by *Snehapana* with *Shunti Dhanyaka Ghrita*. The outcome showed significant result.

KEYWORDS

Amavata, *Rheumatoid Arthritis*, *Vamana Karma*, *Kalingadi Yoga*



Greentree Group Publishers

Received 29/08/19 Accepted 02/09/19 Published 10/09/19



INTRODUCTION

Amavata is a disease in which *Ama* with vitiated *Vata Dosha*¹ accumulates *Sleshma Sthana*, which stimulates Rheumatoid Arthritis in modern parlance. *Ama* is a maldigested product, which is not homogeneous to the body. Whenever *Ama* gets localized in the body joints or tissues, it leads to pain, stiffness, swelling, tenderness etc.

Rheumatoid arthritis is widely prevalent throughout the world. The overall worldwide prevalence is 0.8% and steadily increases to 5% in women over the age of 70. Rheumatoid arthritis is 2-3 times more common in women compared to men. In India, the prevalence has been estimated to be 0.7%.

Amavata is a *Vyadhi* where *Kapha Vata* are predominantly involved. Its *Udbhava Sthana* is *Amashaya* and *Vyakta Sthana* is *Sandhi*. *Vamana* is considered as best treatment for *Kapha dosha*, its associated condition and in *Kapha Sthanagata Dosha*. In *Amavata* mainly *Kapha Sthana* like *Sandhi* is affected. *Langhana* is considered as the prime line of treatment for *Amavata*. *Vamana* is considered under *Shodhana* variety of *Langhana* by Charaka². So here, an attempt is made to evaluate the efficacy of *Vamana Karma* in *Amavata* with

Kalingadi Yoga which is specifically mentioned to be *Kapharoga Hara*.

MATERIALS AND METHODS

Ethical Committee Approval No. 03_A009_77114

Source of data:

Minimum of 20 patients suffering from *Amavata* were taken from IPD/OPD of S.D.M Ayurveda Hospital, Udupi.

Method of collection of data:

It is an open clinical study with pre test and post test design to assess the efficacy of *Vamana Karma* with *kalingadi Yoga* in the management of *Amavata*. A detailed proforma was prepared considering the points pertaining to history, signs, symptoms and examinations as mentioned in the *Ayurvedic* classics and allied sciences to confirm diagnosis and patients were evaluated accordingly.

Interventions:

PoorvaKarma –

1. *Deepana* and *Pachana* with *Shunti Qwatha*³ 20ml thrice a day was administered till the occurrence of *Nirama Lakshanas* and it was done for a minimum of 3days and maximum for 7days

2. *Snehapana*

*Shunti Dhanyaka Ghrita*⁴ was given to all the patients. Initial dose was 25ml (*Hrisiyasi matra*) with *Ushnodaka* as



Anupana in early morning, after the digestion of meal of previous night. *Arohana Snehapana* was given till the appearance of *Samyak Snigdha Lakshanas*.

Vamana Purvadina:

Swedana:

Patients were subjected for *Dashmoola Qwatha Bashpa Sweda*⁵ without *Abhyanga* on previous day of *Vamana* and on day of *Vamana* till *Samyak Swinna Lakshanas* were seen

Bhojana Vyavasta:

On the previous day of *Vamana*, *Kaphothkleshkara* is advised such as curd, *Ksheera*, *Matsya*, *Masha* etc.

3. On the day of *Vamana:*

Patients are advised to pass his/her urges and are kept in empty stomach then *Bashpa Sweda* is done followed by *Snana*. After *Snana*, patient is made to sit on the *Vamana* chair and allowed to rest for 5mins to accustom to the atmosphere. Systemic examinations are done and vital data is recorded.

Pradhana Karma

Akanthapana:

For *Akanthapana*, Milk was administered.

Administration of *Vamana* Yoga:

*Kalingadi Yoga*⁶ which is in *Kashaya* form was administered and told to consume as early as possible. Then if *Vegas* started the time is recorded then after waiting for few minutes, it was followed by *Yastimadhu*

Phanta. The amount of drug administered, time and *Vegas* were recorded simultaneously. Signs were observed carefully and patient was asked to inform in case of presence of any symptoms.

Vamanopaga Dravyas

The process of *vamana* is continued with *Vamanopaga Dravyas* like *Yastimadhu*, *Ushnodaka* or *Lavanodaka* till the *Samyak Vamita Lakshanas* are observed. Meanwhile *Vegas*, amount of *Vamanopaga* drug administered and time is recorded. Massage over back and sides of vertebral column was done in upward direction, forehead was held with hand for supporting the neck, gentle pressure was given to abdomen region by the attender. In case of absence of *Vegas*, *Kamala Nala* or rubber catheter is used to trigger the *Vegas*.

Paschat Karma

Vitals were examined and weight was recorded. Gargling with hot water was advised and told to wash his mouth, hands. Patient was told to rest for few minutes.

Dhumapana:

Haridra Churna was used for *Dhumapana*.

*Samsarjana Krama*⁷

Depending upon the *shuddhi lakshanas* i.e. *Pravara*, *Madhyama* or *Avara*, *Peyadi Samsrajana Krama* was advised for 3-7days.



Assessment was done using RA Factor and CRP. Calculations of these parameters was done before and after treatment.

RESULTS AND DISCUSSION

Table 1 Effect on RA factor

Parameter	Negative ranks			Positive ranks			Ties	Total	Z value	P value	Inference
	N	MR	SR	N	MR	SR					
BT-AT	4	2.50	10.00	0	.00	.00	16	20	-1.890	.059	NS

When results are compared before treatment and after treatment for variable RA factor, with Wilcoxon signed rank test

Table 2 Effect on CRP

Parameter	Negative ranks			Positive ranks			Ties	Total	Z value	P value	Inference
	N	MR	SR	N	MR	SR					
BT-AT	5	4.00	20.00	1	1.00	1.00	14	20	-2.014	.044	S

When results are compared before treatment and after treatment for variable CRP, with Wilcoxon signed rank test shows significant result with Z value -2.014, P value .044

The study revealed that there was no significant result found in RA factor but CRP showed significant result. Overall result showed significant result on the signs and symptoms of *Amavata*.

- On an average, *Samyak Snigdha Lakshana* was observed on the 4th day.
- All patients attained *Samyak Snigdha Lakshana* like *Vatanulomana*, *Deeptagni*, *Snigdha Varcha* etc.
- Mean total 311.25ml *Ghrita* was required to attain *Samyak Snigdha Lakshana*.
- Average time for initiation of 1st *Vega* was 9mins.

All the 20 patients selected for the study were subjected for *Vamana Karma* and there were no drop outs.

Effects on RA Factor

shows no significant result with Z value - 1.890, P value .059

Effect on CRP

- Average time taken for completion of *Vamana* was 61.1mins
- The drugs which were chosen for the study such as *Shunti Qwatha*, *Shunti Dhanyaka Ghrita*, *Kalingadi Yoga* etc have shown more effect in *Naveena Amavata* than in *Pravrida* or *Purana Amavata*.
- The outcome of the result of treatment was enhanced by the synergistic effects of *Dravyas* used during different steps of treatment thus acting against the disease effectively.
- There was maximum remission of the symptoms like Pain, swelling, tenderness, stiffness, redness, movements of joints, grip strength, foot pressure etc was observed.
- *Vamana karma* is found to be very effective in treating *Amavata* patients when



performed after the proper examination of patient.

- Thus, *Samprapti Vighatana* of *Amavata* was achieved by methodically planned *Vamana Karma* and patients got satisfying result after the course of the treatment.

After obtaining the about results, during *Kaphothklista* state, instead of going for *Upavasa* etc. *Vamana* will yield maximum benefits in the patients. Further other *Shodhanas* like *Virechana*, *Basti* if employed at appropriate time and condition of the patients may cure the disease completely.

Probable mode of action

Vamana drugs are having properties like *Ushna*, *Tikshna*, *Sukshma*, *Vyavayi* and *Vikasi* and they are *Agni* and *Vayu Mahabhoota* predominant but *Urdhwabhaga Hara Prabhava* is its main action. *Dravya* due to its *veerya* reaches *Hridaya* and *Dhamanis* then reaches to *Sthula* and *Sukshma Srotas*. *Vyavayi Guna* helps in movement of drugs and quick absorption. *Vikasiguna* helps in breaking, *Dosha* and *Dushya*. *Vishyandhana* is caused by *Ushna Guna*. *Tikshna Guna* does *Chedhana* of *Doshas*. *Sukshma Guna* helps to reach *sukshma Srotas*. As *Vamana Dravyas* are having predominance of *Agni* and *Vayu Mahabhuta*, which are having qualities like *Laghuta* and tendency to move upwards thus help in bringing

Vamana effect. *Vamana* action is achieved by *Prabhava* of the drug.

CONCLUSION

In this clinical study, the results obtained after *Vamana Karma* with *Kalingadi Yoga* is statistically significant. The result showed changes in the signs and symptoms of *Amavata*.

The functional assessments like foot pressure test, grip test and general function test have shown improvement after treatment. Thus it can be concluded that, *Vamana karma* with *Kalingadi Yoga* has very effective in *Amavata*.



REFERENCES

1. Agnivesa, Charaka Samhita, Acharya Jadavji Trikamji, Choukambha publication 2001 Varanasi. Pp 738, Page no: 705
2. Agnivesa, Charaka Samhita, Acharya Jadavji Trikamji, Choukambha publication 2001 Varanasi. Pp 738
3. Bhaishajya Ratnavali Of Kaviraj Sree Govindas Sen With Siddoprada Hinidi Commentary, Prof. Siddinandan Mishra, Chowkambha Surabharati Prakashana. Varanasi, Reprint Edition 2009, Pp-11196, page no-666
4. Bhavamishra, Bhavaprakasha, English commentary by Dr Bulusu Sitaram, edition 2010, Varanasi Chowkambha Orientalia, Vol 2, Pp 770, page no 320.
5. 181. Acharya Trikamji Yadavji Ayurvedadipika of Cakrapanidatta on Caraka Samhita of Caraka, Sutra Sthana, chapter 4, verse-16, Varanasi, Choukhamba Surbharati Prakashan. Pg no 34
6. Vaidya Sodhala, Gadanigraha, Vidyotini Hindi commentary of Indradev Tripathi, Edited by Gangasahay Pandey, 3rd edition, 1999, Varanasi: Chowkambha Sanskrit Samsthana, Vol 3, pp 805, Page No.759
7. Agnivesa, Charaka Samhita, Acharya Jadavji Trikamji, Choukambha publication 2001 Varanasi. Pp 738.