

**Efficacy of *Nimbaamrutadieranda tail Nitya virechan*
in the management of *Vatarakta*- A Case study.**

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Abstract:

In today's busy world, lifestyle of human being is changing rapidly in every aspect and results in various types of disorders and one of them is *Vatarakta*. Due to continuous faulty lifestyle accumulation of morbid elements occurs in the body and on long standing manifest as severe or uncontrollable diseases. In the past two centuries common people have been increasingly diagnosed with *Vatarakta*. *VataRakta* is the disorder where *sandhi shool* (pain) is predominant symptom which disturbs day-today life of the patients. *Vata-rakta* is an illness where both *Vata* and *Rakta* are afflicted by distinct etiological factors. *VataRakta* is also known as- *Khudaroga*, *Vata-balasa*, *Vatashra* & *Adhya vata*. The chief complaint of the patient is severe joint pain with onset at *Hasta*, *Pada*, *Mulagata sandhi* and then migrates to other joints in a way similar to *Akhuvisha*. The treatment of *Vatarakta* is well explained in *Ayurveda* including *Shaman Shodhan* and *Rasayan karma* where *Virechana karma* not only eliminates the vitiated *pitta dosha*, it also removes the *sanchitamala* from the *raktadhatu*. Thus, normal state of

raktadhatu is achieved which in turn removes the *aavarana* of *kupitavata*. As per *Aacharya Vagbhata Nimbaamrutadi eranda tail Nitya virechana* is one among the line of treatment advocated to treat *kupitavata*, *shaman* of *kupitavata* and *sanchita mala*.

Keyword: *Vatarakta*, *Nitya virechan*, *Akhuvisha*, *Shaman*, *Shodhan*, *Nimbaamrutadi eranda taila*.

Introduction:

Vatarakta is one of the unique disorders among *Vatavyadhi* compared to other *Vatavyadhis*. *Rakta dhatu* represents blood and associated metabolism. It signifies that association of *Vata* disorder along with vitiated *Pitta dosa* and *Rakta dhatu*. [1] The word *Vatarakta* is made up of two words *Vata* and *Rakta*. [2] *Vata* is the chief without which any disease may take place, the *Rakta* is also a very important, [3] The originating factor (root) of the body and it (body) is sustained by the *Rakta* and as such *Rakta* should be protected carefully; in fact,

blood is life, If it gets afflicted, leads too many disorders.

In *Vatarakta Vata Dosha* and the *Dushya Rakta* are vitiated simultaneously. *Sushruta* described this condition under *Vatavyadhi*, [4] while *Charak* and *Vagbhata* assign a separate chapter to this disease.

Nirukthi

The nomenclature of diseases can be done in many ways, since the innumerable diseases can be differentiated on the bases of vitiated *Doshas*, manifested symptoms of involved *Dushyas* & the causative factor acting in cumulative manner. So the disease can be named after any of the above factors. So far as *Vata Rakta* concerned, as the term itself denotes – *Vata & Rakta* which are predominant pathological factors acting in diseases process however, it can have the following derivations. [5]

Adhya Vata - The disease which affects the people with comfort & royalty & secondly as it is difficult to cure.

Kudha Vata-The disease which is most commonly seen in *Kudha Desha* i.e. near the ankle or in smaller joints
According to *Shabda Kalpa Druma* - *Kudha Shabdha* is also named as *Khanja* (lameness).

Vata Balasa-

The disease manifested after provoking *kapha*.
Other synonyms are *Adya Maruta*, *Adya Pavana*.

Virechana is the popular *chikitsa* among *shodhana chikitsa*, which gives satisfactory results in chronic diseases. In the line of treatment of *vatarakta*, *Malasanchaya* is the main cause for the manifestation of disease *vatarakta*. *Nirharana* of *sanchita mala* is the main

line of treatment advocated in *vatarakta*. *Vatarakta* is a disease characterised by *raktadusti*. *Raktadhatu* is the *aashrayastana* for *pittadosha* and *virechana* is the specific *shodhana karma* to treat *pittaja* and *raktajavikaras*. [6]

Virechana karma not only eliminates the vitiated *pitta dosha*, it also removes the *sanchitamala* from the *raktadhatu*. Thus, normal state of *raktadhatu* is achieved which in turn removes the *aavarana* of *kupitavata*. [7]

As *mruduvirechana* is one among the line of treatment advocated to treat *kupitavata*, *shaman* of *kupitavata* and *sanchita mala nirharana* are achieved by excretion.

Aims and Objects:

- To evaluate the efficacy of *Nimbaamrutadi tail* in the management of *Vatarakta*
- To evaluate the effect of *Nitya virechan* in the management of *Vatarakta*

Materials and Methods

Plan for the study-

After analysis *Vyadhi* and *rugna Awastha* planned for the treatment

Nimbamrutatadi eranda tail nitya virechan for 7 days.

Dose- *Janaghnya snehapaan matra* as per *Sharangdhar Samhita -Dwiarshiki* i.e 20ml

Anupaan – Koshnajala [8]

NIMBAAMRUTAADI ERANDA TAILAM

निम्बामृतावृषपटोलनिदिग्धिकानांभागान्पृथक्दश
पलान्विपचेद्धटेऽपाम् |
अष्टांशशेषितरसेनपुनश्चतेनप्रस्थंघृतस्यविपचे
त्पिचुभागकल्कैः ॥५८॥

पाठाविडङ्गसुरदारुगजोपकुल्याद्विक्षारनागरनि
शामिशिचव्यकुष्ठैः । तेजोवतीमरिचवत्सकदीप्यका
ग्निरुहिण्यरुष्करवचाकणमूलयुक्तैः ॥५९॥

मज्जिष्ठयाऽतिविषयाविषयायवान्यासंशुद्धगुग्गु
लुपलैरपिपञ्चसङ्ख्यैः । तत्सेवितंविधमतिप्रबलंसं
मीरंसन्ध्यस्थिमज्जगतमप्यथकुष्ठमीदृक् ॥६०॥

नाडीत्रणार्बुदभगन्दरगण्डमालाजवर्ध्वसर्वगदगुल्म
गुदोत्थमेहान् ।

यक्ष्मारुचिश्चसनपीनसकासशोफहृत्पाण्डुरोगमद
विद्रधिवातरक्तम् ॥६१॥ [9]

Place of study :- OPD of Dept. of
Panchakarma Ayurvedic Hospital
Aurangabad Maharashtra.

Case Report:-

Patient name(Rugna naam)- XYZ

Vaya-30yrs

Linga-female

Jati-Hindu

Niwas- N-4 CIDCO, Aurangabad

Vayvasay-Government servant

Shikshan-Graduate

Vaivahikstithi- Married

Ritu-Vasant

Desh- Sadharan

Vartaman lakshanani
Avadhi

1. Dakshin hasta anguli sthani
vedana,

2. Dakshin janu sandhi vedana :
2years
3. Sthoth over dakshin anguli
Pradesh, manibadh sandhi 1
and ½ year, max from
6 months
4. Sparshaasahatva over dakshin
hasta sandhi and janu: 2 months

Vartamaan vyadhi vruttant-

A female patient aged 32years,
N/K/C/O HTN/DM/Thyroid . Patient
was apparently well 2 yrs ago, when she
gradually developed above lakshanas ,at
that time she had approached to
allopathic treatment got temporary relief,
the vyadi lakshanas aggravated in june
2019 so, she took once again allopathic
treatment got temporary relief, since 15
days all above lakshanas get worsen thus
she approaches our Ayurved rugnalaya
for further treatment.

Purvauttapanna vyadhi vruttant-

Chikengunea – 15 yrs ago

Typhoid – 10 yrs ago

Amlapitta – 3years ago

Purvauttapanna vyadhi chikitsa-

Patient took allopathic treatment for all
above vyadhis.

Kularutta –

Matrukula - Mother k/c/o Amlapitta and
Hypertension, grandmother k/c/o
Sandhigatvata

Pitrukula - Father k/c/o Amlapitta

Swakula- Husband K/c/o Nasaroga

Rugna paricharya –

Vegetarian diet

Vyayam – Not performing

Wake up- 6 am

Tea -7.30am

Breakfast – 8 am

Lunch – 1.30 pm

Tea and snacks – 5.30pm

Dinner – 9 to 10 pm

Every Sunday outside food and
diwaswap for 2hrs

Amla and katu ras priti

Menstrual history:-

LMP- 20 days back

M/H -3-4 days

30 days

Vrikut hetu-

Aahar-

- Tea 3-4 cups /day with biscuits,
- *Paryusheet aahar sevan* twice in a week
- weekly once Sprouts
- Idli,Dosa weekly once
- H/o pickle sevan
- H/o dadhi sevan
- H/o Green chilli
- *Patrashak* weekly thrice
- *Jalasevan* 2 liter /day

Vihar-

- H/o *Aadhyashan*
- H/o *ratrijagran*

Manas-

- *Atichinta*
- *Arati*

Rogi Parikshan

Ashtavidhaparikshana

a. *Nadi* (pulse) -78/min.

b. *Mala* (stool) - *prakrut/day*

c. *Mutra* (urine) - *prakrut* 3-4 times /day

d. *Jeehva* (tounge) - *saam*.

e. *Shabda* (speech) -*Spashta*

f. *Sparsha* (skin) - *sandhipradeshishoth, ushnasparsha*

g. *Druka* (eyes) - Normal.

h. *Akruti-Madhyama*.

i. *Bala- Madhyama*.

j.*Agni* - *Kshudhamandya*.

k.*Nidra -Prakrut*

l. *Raktadaaba* (B.P) -110/80 mm/Hg.

m.*Udar -mrudu, ushna sparsha*

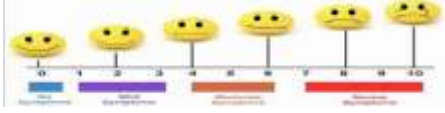
Counselling:

As patient was psychologically upset, hence proper counselling was done. She was made aware of the signs and symptoms clearly. Patient was made confident that her condition is treatable.

Diagnostic criteria: Patient with classical sign and symptom of *Vatarakta*.

Subjective Parameters:

Signs and symptoms of the patient are assessed after each follow up and results are drawn after the last follow up.[10]

Sr. no.	Parameter	Observation	Scale
1	<i>Sandhishool</i> (VAS Scale) 0:No Pain during walking 1:Mild Pain during Walking (1-3 score) 2:Moderate Pain during Walking(4-7 score) 3:Severe Pain during Walking (8-10 score)		
2	<i>Sparshaasahtava</i>	No <i>sparshaasahatva</i>	0

		Mild: (deep touch causes <i>sparshaasahatva</i>)	1
		Moderate: (little touch causes <i>sparshaasahatva</i>)	2
		Severe: (little touch causes <i>sparshaasahatva</i>)	3
3	<i>Sandhishoth</i>	No swelling	0
		Swelling but not apparent	1
		Swelling obvious on lesser than 2 joints	2
		Swelling obvious on greater than 2 joints	3

Apathya*Diwaswap**Adhyashan**Amla ras**Lavan ras*

Fermented food like idli, dosa, biscuits

*Abhishandi aahar**Atichintan***Pathya***Purana Shuk dhanya***Assessment of subjective criteria**

Moong daal

Desi cow milk

Fruits vegetables

*Sunthi**Ushnodaak sevan***Observation and Result**

Assessment of the signs and symptoms of the patient was done during each follow up and results are as follows.

Sr. no.	Criteria	Grade Before Treatment	Grade After Treatment	Grade After follow up
1	<i>Sandhishool</i>	3	2	1
2	<i>Sparshaasahatva</i>	3	2	0
3	<i>Sandhishoth</i>	3	2	0

In this study after assessment of subjective parameter *sandhishool* was 3 on 1st day i.e before treatment after treatment and proper analysis it was 2 after 7 days, After follow up it was 1. *Sparshaasahatva* and *sandhishoth* both were 3 on 1st day, after treatment on 7th day it was 2 and after follow up on 14th day it was 0.

Assessment of objective criteria

Sr. no.	Criteria	Before treatment	After Treatment	After follow up
1.	ESR	30	15	10
2.	Sr. URIC ACID	7.2	5.8	4.2

In this study after assessment of objective parameter ESR on 1st day it was 30, after treatment on 7th day it was

15, after follow up on 14th day it came down 10. Serum uric acid was 7.2 on 1st day before treatment, after treatment on 14th day it found 5.8 and after follow up it shown 4.2.

Discussion:

A case of middle age woman presenting with the symptoms of *Vatarakta* treatment was planned after proper assessment of *bala*, *agni* and *koshtha* etc. The *sanchitmala avastha* was found with *bahudosha awastha* so, *Nityavirechan* was decided as *vatarakta* is a *vyadhi* where *Vata* and *Rakta* is dominant, *Pitta* is having *ashrayaashrayi sambandh* with *rakta Dhatu*. *Virechan* is the procedure to bring out *sanchit mala* from *srotas* where *Nimbamrutadieranda tail* played important role in *vatarakta*. *Nimbamrutaadi eranda tail* contain so many potent drug like *Eranda* where it has property like *shukshma*, *ushna*, *vyavyayi* and *vikasi vatakaptha* pacifying property. *Guduchi*, *Manjishta* are potential drugs for breaking *samprapti* of *vatarakta* as its acting directly on *rakta dhatu*. Patient got relief in symptoms like *Sandhishool*, *Sandhishoth* and *Sapshaasatwa* after *Nitya Virechan* for 7 days. Difference found in objective parameters too.

Conclusion:

Based on the *lakshanas* of the patient diagnosed it *Vatarakta*. *Virechana* therapy is one which expels *pitta dosha* from body and also if *pitta* is in association with *kapha dosha*. It is best measure for *pitta* expulsion. In *Sushruta Samhita*, it is mentioned that for rejuvenation purpose, initially purification should be done which shows essentiality of purification. In *Charak Samhita* as it is based on medicine, details of drugs are more elaborately

given in comparison to *Sushruta Samhita*. But in *Ashtanga sangraha* good numbers of drugs are available like *Charak*. One of them is *Nimbaamrutaadi eranda tailam*. By keeping the ideology of *ayurveda* in the diet principles and focusing on *Nitya virechan* with *Nimbaamrutaadi eranda tailam* found effective. The desire effect can be achieved in *vatarakta*.

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