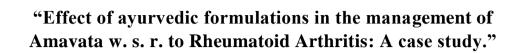
January 2020 | Vol. 04<sup>th</sup>| Iss International Journal of Research in Indian Medicine



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Abstract:

Amavata (rheumatoid arthritis) is auto immune Disorder. It is chronic inflammatory, destructive and deforming symmetrical poly-arthritis associated with systemic involvement. Now a days it is a common problem due to changed lifestyle, food habits and lack of physical activities.

In this Ancient literature amavata (rheumatoid arthritis) described in detail along with cause, symptoms, history, complication and management. Amavata is term derives from the word as Ama and vata. Ama is a type of metabolic toxin; it is an essential factor in development of pathology. Mandagni( low digestive fire) produce Ama in the body, when ama get associated with vitiated vata and starts circulating in the body occupies in sleshma sthana (asthi sandhi) results in painful disease amavata. Amavata is one of the challenging disease for the physicians due to its chronicity, incurability,

complications and morbidity. The clinical presentation of Amavata closely mimics with the special variety of Rheumatalogical disorders called Rheumatoid Arthritis.

**Keywords:** *amavata*, *rheumatoid arthritis*, *basti*.

# Introduction:

According to the nature of disease it is essential to work on such therapy which detoxified the Amavisha and Vatahara properties. As per chikitsa sutra; firstly langhana and agnideepana by katu tikta chikitsa rasa is basic principles classics mentioned in for the management of root cause i.e. ama and vitiated vata. In modern medical science amavata has symptomatic treatment only, which can cause recurrence of disease. Ayurved text treatment of amavata and some ayurved formulation are also useful. It is one attempt to manage and treat amavata with some Ayurvedic formulation which gives effective result.

1

Pathology in bone and joints: Pain originates predominantly from the joint capsule, which is abundantly supplied with pain fibers and is markedly sensitive to stretching or distension. Joint swelling results from accumulation of synovial fluid, hypertrophy of synovioum and thickening of joint capsule. The inflamed joint is usually held in flexion to maximize joint volume and minimize distention of the capsule later.

# \* A Case report:-

A 30 yrs old female patient came to OPD of Kaychikitsa department of L.K. Ayurvedic Hospital, yavatmal with chief complaints of-

- 1. Manyastambh (stiffness of neck)
- 2. Brama(vertigo)
- 3. Katishoola ( lumber pain and stiffness )
- 4. Prushthshoola (Back ache )
- 5. Jwarapravrutti (continuous low grade fever)
- 6. Daurbalya (weakness)
- 7. Aagnimandya (anorexia)
- 8. Aruchi (loss of appetite)

Patient having above complaints since 2 yrs

#### ✤ Past history

No past history

• N/H/O - HTN and DM

No any H/O Major illness.

#### History of personal illness:-

The patients was normal before 20 years ago. since then

patient has been suffering from left ankle joint pain first and then left wrist joint, elbow joint and then knee joint with morning stiffness.

For ayurvedic treatment patient came to our Hospital L.K. Ayurvedic Hospital yavatmal in OPD of kaychikitsa Department, we admitted patient in IPD Section for further treatment.

# Rugna parikshana:-

01. Nadi (pulse): 66/min

02. Mala (Stool): Samyak

- 03. Mutra (Urine): Samyak
- 04. Jivha (tongue): saam (coated)
- 05. Shabdh (speech): Spashta
- 06. Sparsha :samashitoshna
- 07. Druka (eyes): shwetabh,(pallor)No icterus
- 08. Akriti :Madhyama
- 09. Bala : Madhyama
- 10. Raktadab (Bp):110/70 mmhg
- 11. Weight: 44kg
- 12. Temperature :96.8 f
- 13. Nidra (sleep):prakrut

# **\*** Investigation:

Hb: 8.5% TLC: 6,230/cumm Platlet count : 5.33 lack/cumm DLC: P-69%, L-22%, E-03%, M-06%, B-00% ESR:57mm/hr BSR: 110.0mg/dl RA test :- positive (Titer-128) CRP test:-positive (titer-9.6) ASO test :- Negative (titer- 200)

#### **\*** Method:

01. A case study

**02. center of study**: Post Graduate Department of kayachikitsa L.K.Ayurved Hospital, Yavatmal ; affiliated to D.M.M. Ayurved College Yavatmal.

# Material: Showing Material of case study:

Table no 01.				
Sr. no.	Dravya	Dose	Duration	Anupan
01	Sinhanad guggul	2 tab	Twice a day	Warm water
02	Aamvatari rasa	1 tab	Twice a day	Warm water
03	Agnitundi vati	250 mg	Twice a day	Warm water
04	Aarogyavardhini vati	250mg	Twice a day	Warm water
05	Dashmul churna	Each 1	Twice a day	Warm water
	Rasna churna	gm		
	Guduchi churna			
	Punarnava churna.			
06	Guduchi Dashmul kwath	15 ml	Twice a day	
07	Swadishta virechan churna	3gm	Hs	Warm water
08	Dashanga leep	LA		

# Shodhan Chikitsa

Sr. no.	procedure	Dose	Duration	Drug
01	Matra basti	60 ml/day	7days	Bruhat
				Saindhvadi Tail
02	Langhan	Taking Warm		
		water		
03	Swedana	LA	Once a day	Valuka pottali
04	Yog basti		Once a day-7	
	(matra/Kshar)		days	
	alternate days			

# Table no 2

# \* Mode of action of formulation used in Chikitsa

Sr. no.	Dravya /Karma	Mode of action/ <u>Use</u>	
01	Sinhanad guggul	Aamshodhana, shothahar, vedanasthapan.	
02	Aamvatari rasa	Aampachak, deepana, pachana vedana	
		shamana	
03	Agnitundi vati	Agnideepana	
04	Aarogyavardhini vati	ogyavardhini vati Agnideepana ,sarvrognashan,	
05	Dashmul churna Balance vata, support joint, bal		
	Rasna churna	Kapha	
	Guduchi churna,		
	Punarnava churna.		
06	Guduchi Dashmoola	Balance Tridosha	
	Kwath		
07	Swadishtya virechan	Mruduvirechak, Vatanulomak, appetizer	
	Churna		

08	Mahavishgarbh Tail	Pain Reliver ,decrease Swelling	
09	Swedana (Valuka Pottali)	Ruksha sweda, for pain reliving and decrease	
		swelling.	
10	Langhan	Aampachan	
11	Basti Karma	For vata dosha balancing Aampachnarth Aamyukta vata Nirhanarth. *Basti Dravya absorb through Mucosal capillary – goes micro and Macro cellular level disturb pathogenic process i.e.Aam dosha nashan Normalizes Strotasa and Agni Aam expelled out with basti Dravya start normal body physiology.	

# **\*** Table no. 3

**\*** Showing changes in investigation before and after treatment

Sho (ing changes in in congretion service and arear treatment				
Test	Before treatment	After treatment		
Hb%	8.5 gm%	10.5 gm%		
TLC	6,230/cumm	7,420/cumm		
ESR	57mm/hr	38mm/hr		
Platelet count	5.33 lack/cumm	5.17 lack/cumm		
CRP test	Positive (titer-9.6Iu/ml)	Positive (titer 6.2)		
RA Test	positive (Titer-128)	Negative (titer-68)		
Aso test	Negative	Negative		

The patient had improving during hospital stay and the symptoms decreased gradually.

# Discussion:-01) Hetu:

**1.Viruddha Aahar** (Incompatible food)

The food that provokes the dushas but does not expel them out of the body is called viruddha ahara.(ex-mixing of milk with fish in a diet) viruddha ahar plays important role in causing ama.

**2.Viruddha cheshta** (Improper physical activity)

The physical activity performed without following the procedure is called virudha

chestha.(ex-physical exercise when an individual is already suffering from ajeerna)

3. **Mandagni** (Decreased digestive power)

Amavata is produced due to mandagni.

4.Nischalata (Lack of physical activity)

Lack of physical activity or sedentary life style is the main cause of accumulation of ama in the body.

5.snigndham bhuktavato vyayaamam

Performing physical exercise soon after intake of heavy food causes ama in the body. **Concept of ama:-**The main cause in formation of ama is mandagni or kayagni dourbalyata i.e. low digestive power. In other words it can be explained that there will be disturbance in the secretion of digestive juice and enzyme which makes the intestinal movement sluggish, such an environment is favorable for fermentation in intestine and gives way to form the ama. Thus formed ama has qualities similar to that of visha(toxin).

# 02. Samprapti of amavata:-

As discussed earlier whenever the function of agni is disturbed in the body ama is produced. This produced ama is slimy in nature ,such ama get together with dushti vata/prakopit vata and circulates all over the body through shira and dhamani and get lodged in kaphasthana i.e. sandhi because shleshak kapha is located in sandhi and amvata is developed.

- Sanchaya: when a person exposed to etiological factors they causes dushti of agni, dosh prakopa and dushya dourbalya.
- Prakopa: due to dushti of agni mandagni occurs which causes formation of ama (vidagdhatva) and with help of vitiated vayu it goes to prasaravastha.
- Prasaravastha: samavata goes to dhamani (rasavahastrotasa).
- Sthanasanshraya: kupit vata and kapha with help of dushya gets sthanasanshraya in rasavaha strotasa, sleshmasthana and trikasandhi.
- Vyakti: symptoms of amavata are seen .

## **03. Samprapti Ghatak:**

**Dosha:** Vata pradhan tridosh

**Dushya:** Rasadi dhatu, asthigata snayu, sira

Agni: jatharagni:rasadhatwagni

**Strotas:**Rasavaha ,asthivaha, Majjavaha, purishvaha

Udbhava sthana: Amashaya

Adhishthan: Asthi, Sandhi

Vyaktisthan: Asthi, Sandhi

# **Conclusion:**

On the basis of Above Discussion it can be conclude that Ayurvedic formulation basti karma can give Significant Effect on disease like Amavata (rheumatoid arthritis).

Amavata(rheumatoid In arthritis mainly Vata, Kapha dosha & Aama is Vitiated we Use sinhanad guggul, amvatari rasa, agnitundi vati, arogyavardhini vati. guduchi Dashmool Kwath ,Valuka Pottali Sweda. Laghan for Aampachan and Decrease Strotorodh by Bruhat Saindhvadi Tail Matra basti,kshara basti. Its help for Vatashaman & Aampachan, Support Joints.

Shows good Result in Amavata(rheumatoid arthritis).

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*Cite this article:* 

"Effect of ayurvedic formulations in the management of Amavata w. s. r. to Rheumatoid Arthritis: A case study." Kajal Neralwar, Sanjay Pawade

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Ayurline: International Journal of Research In Indian Medicine 2020; 4 (1): 1 - 6