

AYURLINE

e-ISSN: 2456-4435 April-June 2021 Vol. 05th Issue:2nd

International Journal of Research in Indian Medicine

"A comparative study of *Asitakadi Churna* and *Alambusadi Chuna* in the management of *Amavata*."

Priyanka Suresh Kandikattiwar, B.A.M.S, MD (*Kayachikitsa*) *Author Correspondence: <u>kandikattiwarp@gmail.com</u>

ABSTRACT: -

Amavata is one of the challenging diseases for the physicians due to its chronic nature. difficulty. complications. Amavata is the prime disease which makes the person unfit for an independent life. In this study, Asitakadi Churna and Alambusadi *chuna* are considered, as both the drugs Vata-Kaphahara and possess Amapachak properties. Here attempt is made to compare the efficacy of Asitakadi Churna and Alambusadi chuna in Amavata with the title "A Comparative study of Asitakadi Churna and Alambusadi chuna in the management of Amavata" AIM & **OBJECTIVE:** - To compare effect of Alabushadi churna and Asitakadi churna in Amavata. MATERIALS AND METHODS - The patients were selected from the OPD and IPD of concern institution. 60 patients of Amavata were randomly selected and divided into two groups of 30 patients each, and subjected to clinical trial. Group- A patients were treated with Asitakadi Churna and Group-B patients were treated with Alambusadi chuna. The signs and symptoms were recorded

on the preformed designed for the study and assessment was done on subjective and objective criteria and results were analyzed statistically. RESULT - In the present study, it is concluded that both Group A and Group B showed significance in decreasing shool. Shoth, gourava, and jadya. Asitakadi Churna is equally effective as Alambusadi chuna in on Amavata. an **CONCLUSION** – The treatments were found to be statistically significant in reducing the signs and symptoms of the disease.

> **KEYWODS**: - Amavata, Asitakadi Churna, Almbushadi Churna.

INTRODUCTION:-

In principle, *Vata* being predominant among the *Tridoshas*, has the potential to cause more serious and long term diseases. In classical texts most of the dietary habits (*Virrudhahara*), social structure, life style, and environment have been changing. Occurrence of *Amavata* is also one of the outcomes of these modifications lead to the vitiation of *Vayu* and *Ama* producing *Amavata*. Based on the signs and symptoms, this Amavata can be compared with Rheumatoid arthritis. In the context of Amvata Chikitsa, Bhavprakash Samhita has indicated the drug *"Asitakadi Churna*". Though it contains in very high quantity which is having the properties like tikta-katu rasa, laghu-ruksha-ushna guna & ushna veerya, it acts as a Kapha-Pitta Shamaka, Virechaka, and Deepana, Amapachan Pachana. and Sroto shodhana. There is no research work till now done by using "Asitakadi Churna" for the treatment of Amavata. Hence, special emphasis should be put in to searching for standard and suitable drugs for Amavata. For this study Asitakadi Churna and Alambusadi Churna is selected for management of Amavata, it is easily available also there is no side effects were seen in this study.

AIM AND OBJECTIVE:- To Study of Alambushadi churna and Asitakadi churna in management of Amavata. ARCH To compare effect of Alambushadi Churna and Asitakadi Churna in Amavata

MATERIAL AND METHOD

- Type of Study: Randomized, Comparative, active Controlled, Single blind Clinical Study
- Location of Study: OPD and IPD of concern institution.
- Duration of Study: 28 days for each Patients
- Follow up Study: Every 7th day
- Study of Population: Total 60 Patient of *Amavat* a showing classical symptom of the disease were selected and divided in to two groups. I.e. Group A and Group B Each group has 30 patients.
- Sample size estimation: Sample Size was determine considering E.S.R. as main outcome measure following a assuming were made from study by Thote (2015)¹

Formulation of Drug: - Content of *Alambushadi Churna*

Sr. No.	Contents	Part	Proportion	
1	Alambusha	Panchang	1 Part	
2	Gokshur	Phal, Mula	2 Part	
3	Trifala	Phal	3 Part	
4	Shunthi	Mula	4 Part	
5	Guduchi	Kanda	5 Part	
6	Shyama (shyama trivruta)	Mula	15 Part	

Content of Asitakadi Churna

Sr. No.	Content of Asitakadi Churna	Part	Proportion
1	Asitaka (vishanukranta)	Mula, beej	1Part
2	Magadhika(pimpali)	Phal, Mula	1Part
3	Guduchi	Kanda	1Part
4	Shyama (shyama trivruta)	Mula	1Part
5	Varahi(varahikanda)	Kanda	1Part
6	Gajkarn(Erand)	Mula	1Part

7	Shunthi	Mula	1Part

Method of Administration of Drugs:

Subjects	Trial drug	Control drug
Drug	Asitakadi churn	Alambushadi Churna
Route	Oral	Oral
Dose	1Karsh ²	1Karsh(approximetaly10gm)
	(approximetaly10gm)	5gm BD
	5gm BD	
Kala	Before meal ³	Before meal
Anupan	Lukewarm water	Lukewarm water
Duration	28 days	28 days
Follow up	7 th ,14 th ,21 st ,28 th	7 th ,14 th ,21 st ,28 th

Inclusive Criteria

- 1. Age: 18 to 60 Year
- 2. Patient suffering from sign and symptoms of *Amavata* mentioned in *madhavnidan*.
 - *Gaurava*(heaviness)
 - *Sandhishool*(Joint pain)
 - Sandhishotha(Joint swelling)
 - *Jadya* (Morning stiffness)

Exclusive Criteria:

1. Pregnant women and lactating

mother.

- 2. Patient having joint deformities due to the *Amavata*.
- 3. Having cardiac disease, pulmonary TB, HIV, Hepatitis Bor any infectious disease.

Criteria for assessment:-

Subjective criteria: Symptoms and Signs copying holof patients were noted and assess by various parameter.

1) Sandhishoth (Swelling)

Severity	Grade
No Swelling	0
Swelling not covering the bony prominence	1
Swelling covering bony prominence	2
Swelling covering above the bony prominence with positive	3
Fluctuation	

2) Sandhishool (Joint pain)

Severity	Grade
No SandhiShoola (joint pain)	0
Sandhishool(joint pain) of low Intensity Causing no Disturbance in	1
routine work	
Sandhishool (joint pain) hampering daily routine work.	2
Sandhishool (joint pain) causing definite interruption in routine work.	3

3) Jadya (Morning stiffness)

Severity	Grade
No morning Stiffness	0
Morning stiffness lasting >1/2 hr. But <1hr.	1
Morning stiffness lasting >1hr. But <3hr	2
Morning stiffness lasting more than 3 hrs.	3

4) Gaurava (Heaviness)

Severity	Grade
No feeling of Heaviness in body.	0
Occasional heaviness in body but can do usual work.	1
Continuous heaviness which hamper usual work.	2
Unable to do any work due to heaviness	3

Objective criteria: E.S.R. recorded before and after completion of treatment.

- 0-0 to 20 mm/hr
- 1- 21mm/hr to 35 mm/hr
- 2-36 mm/hr 50 mm/hr
- 3->50mm/hr

Statistical Analysis

Data analysis included both Description and Inferential statistics.

Descriptive statistics were used to summarize quantitative variables with mean and standard deviation while frequency and percentages were used to summarize categorical (qualitative) variables. Inferential statistics mainly included Chi-square test and t-test for assessing significance of difference in outcomes expressed as proportions or means in two groups (e.g. Experimental versus Control).

Significance of within-the-group differences in means between before treatment and after treatment was assessed by paired t-test.

Between-the-group differences in mean CH change from baseline in two groups were to test.

A p-value <0.05 was considered statistically significant for all comparisons.

RESULTS AND OBSERVATION: Comparison of *Sandhishoth* in two different groups.

	Sandhishoth 0				Sandhishoth28			
	Gr	oup 1	Group 2		Group 1		Group 2	
	No.	%	No.	%	No.	%	No.	%
0	0	0	0	0	1	3.33	0	0
1	1	3.33	0	0	1	3.33	0	0
2	15	50	14	46.7	15	50	19	63.3
3	14	46.67	16	53.3	13	43.33	11	36.7
Total	30	100	30	100	30	100	30	100
p value		0.558				0.4	51	

	Sandhishool 0				Sandhishool 28			
	Group 1		Group 2		Group 1		Group 2	
	No.	%	No.	%	No.	%	No.	%
0	0	0	0	0	0	0	0	0
1	2	6.67	0	0	2	6.67	0	0
2	21	70	21	70	22	73.33	21	70
3	7	23.33	9	30	6	20	9	30
Total	30	100	30	100	30	100	30	100
p value	0.325			•	0.269			

Comparison Sandhishool in two different group

Comparison of Jadya in two different groups

	Jadya 0				Jadya	28	28			
	Group 1		Group 2		Group 1		Group	p 2		
	No.	%	No.	%	No.	%	No.	%		
0	0	0.00	0	0.00	0	0.00	0	0.00		
1	1	3.3	0	0.00	2	6.7	0	0.00		
2	12	40.0	12	40.0	20	66.7	14	46.7		
3	17	56.7	18	60.0	8	26.7	16	53.3		
Total	30	100	30	100 🥖	30	100	30	100		
p value	0.598	•		0.057						

Comparison of Gaurava in two different groups

	Gaurava 0		A	COPYING HOUSE	Gaura	Gaurava 28		
	Group 1		Group	Group 2		Group 1		p 2
	No.	%	No.	%	No.	%	No.	%
0	18	60	11	36.7	20	66.7	11	36.7
1	11	36.7	11	36.7	9	30	11	36.7
2	1	3.3	8	26.7	1	3.3	8	26.7
3	0	0	0	0	0	0	0	0
Total	30	100	30	100	30	100	30	100
p value	0.028				0.016			

ESR:- Group 1(Trial group):- the mean \pm SD of before treatment was 2.4 \pm 0.49 and after treatment it was reduce to 1.16 \pm 0.37. The test was significant as p< 0.0001.

Group 1(Trial group):- the mean \pm SD of before treatment was 2.76 \pm 0.43 and after treatment it was reduce to 1.56 \pm 0.5. The test was significant as p< 0.0001. Between the group difference is 0.3915. Test was not significant as p>0.005

Mean ESR (mm/hr)difference in two groups			
Variable	Group 1	Group 2	

	Mean	SD	Mean	SD
ESR BT	2.4	0.49	2.76	0.43
ESR AT	1.16	0.37	1.56	0.5
p value	0.0001		0.0001	

Mean comparison of ESR (mm/hr) -within the group and between the group differences- difference in two groups

	Group 1		Group 2				
Variable	Mea n	SD	Mea n	SD	Between difference (Unpaired t -	the -test)	group
ESR (BT)	2.4	0.4 9	2.76	0.4 3			
ESR (AT)	1.16	0.3 7	1.56	0.5			
Within the group							
difference	1.23		1.2		0.03		
p value (paired t test)	0.0001		0.0001	-	0.3915		

DISCUSSION: Mode of action of the drug based on Rasa Panchaka and Doshaghnata of the ingredients

Rasa:

All the ingredients of the formulation are Tikta, Katu in rasa. By virtue of its Tikta, Katu pradhana rasa, the trial drug Kaphahara, Amapachaka and Karshaka.

Guna:

The ingredients of formulation are Ruksha and Teekshna in nature predominantly. By virtue of Ruksha and predominance, gunas Teekshna the formulation is Kaphahara, Amahara and Karshaka.

Veerya:

The formulation is highly Ushna, as all the ingredients in both drugs are Ushna in Veerya. Thus drug is Kapha-Vatahara, Amapachaka and Karshaka.

Vipaka: the ingredients of the both drug are Katu and Tikta in Vipaka, whereas Shunthi is Madhura. Predominant Katu vipaka of the combination adds to the Amapachana, Agni deepana and Kaphahara karma that is discussed

CONCLUSION:-

Asitakadi Churna is as effective as Alambushadi Churna in the management of Amavata.

As the study was included over a small period, a similar study performed over a longer period and Larger Sample Size would have produced much sharper and more accurate results.

REFERENCES:-

- 1. Ajay S Thote And Shrikant G Deshmukh: То Evaluate the Efficacy of Pathyadi Churna In Amavat, IAMJ: Volume 3; Issue 3; March-2015, 740-745.
- 1. Sharangdhar, Sharangdhar samhita prathamkhanda ,Tatvadipikavyakhya hindi tika ,

Prathamadhyay, 1/47,Edited by Pandit durgaadat Shastri, Babu bejnaath Prasad bukselar banarasa 1949 Pg.14-15 2. 3.Sharangdhar, Sharangdhar	Tatvadipikavyakhya hindi tika, Prathamadhyay, 1/47,Edited by Pandit durgaadat Shastri, Babu bejnaath Prasad bukselar banarasa 1949 Pg.14-15				
samhita, prathamkhanda,					
Conflict of Do Interest: Non <u>https://doi.org/10.524</u>	OI Source of funding: Nil				
Cite this article:					
Priyanka Suresh Kandikattiwar (2021), "A comparative study of Asitakadi Churna and Alambusadi Chuna in the management of Amavata."					
Ayurline: International Journal of Research In Indian Medicine 2021; 5(2):01-07					



Prathamadhyay , 1/47, Edited by