

The role of *Sarvang sundar rasa* Orally and *Mahamash tail* locally in the management of *Amavata* w.s.r. to *Rheumatoid Arthritis* –A case study.

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Abstract:

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. *Mandgni* (low digestive fire) produce *Ama* in the body , when *ama* get associated with vitiated *vata* and starts circulating in the body accupies in *sleshma sthana* (*asthi sandhi*) results in painful disease *Amavata*.

Madhavakara (900 AD) has identified first time the disease *Amavata* as seprate entity and described the disease in detail. *madhavakara* describes etio-pathology of *amavata* that the person with weak digestion (*mandagni*) if he is possesses a secondary life (*nishchalasya*) or if he indulges into *viruddha ahara*

and *vihara* e.g., excessive exercise after taking heavy and fatty food, *ama* is produced and *vata* gets vitiated. This *ama* provokes by *vata* (*vayuna preritah*), circulates in the body especially towards *shleshma sthanas*. The resultant of cardinal symptoms of *amavata* are painful swelling of the

joints (*sarujamshotham*)of hands, feet, ankle, knee, hip, spinal column , and stiffness (*jadyata*), fever (*jwara*) , loss of appetite (*aruchi*), indigestion (*apaka*), constipation (*vibandhata*), gurgling (*antrakujanam*) etc. This impairs the day to day functions of a person. In spite of presence of NSAID, DMRD , steroids etc, the rheumatology remains refractory to treatment But Ayurvedic drug

which are therapeutically safe and effectiveness.

Keywords: *Amavata*, *Sarvang sundar rasa*, *Mahamash tail*, RA.

Introduction

Amavata is one of the challenging diseases for the physicians due to its chronicity, incurability, complications and morbidity. the clinical presentation of *Amavata* closely mimics with the special variety of *Rheumatological* disorders

आमवात सामान्यलक्षण

अङ्गमर्दोअरुचिस्तृष्णाहयालस्यंगौरवं
ज्वरः।

अपाकःशूनताअङ्गानाम्आमवातस्यल
क्षणम्॥

मा.नि. २५/०६

In *Ayurveda* there are various drugs formulation mentioned in *samhita* which show significant effect on *Amavata*.

Sarvang sundar rasa and *Mahamash Taila* is described in the ayurvedic classical text *Sarvang sundar rasa in Rasendra sar sangraha Vireka adhikar* and *Mahamash tail in Vangasena Vatavyadhi Adhyay*. Describing the properties of oil and *rasakalpa*. combination of in these drug are very effective *vedanasthapaka*, *vatashamaka* and

Amapachana properties will help to disrupt the *samprapti vighatana* of *Amavata*.

Sarvang sundar rasa and *Mahamash Taila* is use in case of *Amavata* was successfully treated Marked improvement was observed in sign and symptoms after treatment .No any complications found during treatment.

AIM :

To evaluate the effect of *Sarvang sundar rasa* orally and *Mahamash Tail* locally in the management of *Amavata* for 45 days.

OBJECTIVE:

To study the effect of *Sarvang sundar rasa* orally and *Mahamash Tail* locally in the management of *Amavata*.

Method:- A case report

A 50 yr male pt.came to opd of *kayachikitsa* department of L K Ayurved Hospital yavatmal with **chief c/o**

1. *Sarvang Sandhi shoola* (Pain like scorpion bite) since 05 yrs.
2. *Jwaranubhuti* (fever) since 08 days
3. *Sandhishoth* (swelling), since 05yrs
4. *Sandhistabdhata* (Morning stiffness) since 05 yrs
5. *Aruchi* (anorexia), on and off
6. *Agnimandya* (loss of Appetite) since 05 yrs
7. *Sparshasahatwa* (tenderness)

8. *Koshthabaddhata*

(Constipation), on off

Pt. having above complaints since 05 yr

Past history:- No H/O DM/HTN/ Any major illness.

History of present illness :- pt. is normal before 05 yrs ago then pt. has been suffered from above symptoms. Pt. was treated by local doctor many times but after stop medication pt. symptoms was aggravated then pt. came to L.K.Ayurved Hospital yavatmal for ayurvedic treatment and management.

Rugna parikshan:-

- *Nadi:-*80/min

- *Mal: Asamyak*
- *Mutra: samyak*
- *Jivha: alpa saam*
- *Shabda : prakrut*
- *Sparsha : prakrut*
- *Druk : prakrut*
- *Aakruti:-Madhyam*
- *Nidra:- prakrut*
- *BP:-* 110/70 mmHg
- *Temp:-* Afebrile

Material and methods**Method:-****1) A Case Study****2) Centre:** P.G Dep. Of kayachikitsa

L.K Ayurved hospital yavatmal affiliated to D.M.M Ayurved college yavatmal.

**Table no.1****Showing material of case study**

Sr. no	Dravya	Dose	Duration	Anupan
1	<i>Sarvang Sundar rasa</i>	125-250 mg	Twice a Day	Lukewarm water
2	<i>Mahamash Tail</i>	Locally	Twice a Day	-

OBSERVATION:

Sr. no.	symptoms	Before treatment	After 15 days of treatment	After 45 days of treatment
1.	<i>Sandhi shoola</i>	+++++	+++	+
2.	<i>Sandhishoth</i>	+++++	+++	+
3.	<i>Sandhistabdhata</i>	+++	+	+
4.	<i>Sparshasahatwa</i>	++	+	—
5.	<i>Agnimandya</i>	+++	—	

6.	<i>Aruchi</i>	+++	++	—
7.	<i>Jwara</i>	++	—	—
8	<i>Koshthabaddhata</i>	++	—	—

	Before T/t	After T/t
RA Factor	64	32
CRP	1.2	1.2
ESR	55 mm/hr	24mm/hr

DISCUSSION-

Hetu:

Table No. 01

<i>Nidana</i>	<i>Ha .s</i>	<i>Ma .ni</i>	<i>v.s</i>	<i>Bh. Sa</i>	<i>Y.r</i>
<i>Virrudha ahara</i>	-	+	+	+	+
<i>Virrudha cheshta</i>	-	+	+	+	+
<i>Mandagni</i>	-	+	+	+	+
<i>Snigdha -bhuktwato - hyaannam-vyayam</i>	-	+	+	+	+
<i>Guru ahara</i>	+	-	-	-	-
<i>Kanda shaka sevana</i>	+	-	-	-	-
<i>Vyavayina</i>	+	-	-	-	-

SAMPRAPTI GHATAKAS

1. *Dosha - kapha-vata
pradhana tridosha*
2. *Dhatu - Rasa,mamsa, asthi*
3. *Agni - Pachakagni, rasa,
mamsa, asthi dhatvagni*
4. *Ama - Pachakagni and
dhatavagnimandya janya
ama*
5. *Strotas - Annavaha,
rasavaha, mamsavaha,
asthivaha*
6. *Strotodusti - Sanga*

7. *Udbhavasthana-Amashaya,
pakwashaya*
8. *Rogamarga- Madhyama*
9. *Sancharasthana- Rasavaha
strotas*
10. *Adhisthana - Sandhi
and sarva shareera*
11. *Vyaktasthana-
Sarvashareera particularly
in sandhis*
12. *Vyadhiswabhava -
Chirakari*

RESULT-

With *Sarvang sundar rasa* and *Mahamsh tail* locally symptoms of *Amavata* decreases within 45 days the image before and after treatment supports the statement mentioned.

Before treatment



After treatment



The drug formulation- 1. *Sarvangsundarrasa* (*RasendrasaarsangrahaVirechanaA dhikar*)

2. *Mahamash Tail* (*Chikitsasar sangrah Vangasen samhita*)

Aamvat is a disease mainly caused by *apakva ahaarras* i.e. *aam* & *vitiated vaat*. All the contents in the *Sarvang sundar rasa* & *Mahamsh tail* are *ushna gunatmak*, *laghu*, *ruksha* & *katu viryatmak*

that creates *vaat shaman pitta rechan* and *katu virya* causes *aam pachan*.

Mahamash tail has contents that are *aampachak*, *shothahar*, *jwarghna ushna virya* & *katu vipakatmak* that absorbs well and causes anti-inflammatory action locally.

Shotha is caused by *aam* in *amavata* & most of the contents in both the drugs are *aampachak*. That relieves the *ama* & reduces *shoth*. Supportive action of same contents of the drug helps to reduce *ama*.

Sarvang sundar ras has most of the *vishadravyas* that contains properties of *vyavayi* & *vikasi guna* that *guna* causes fast absorption of the drug that cause *strotogamitva* of drug & causes *strotoshodhan* action & relieves the *aam* from *strotasas*.

All the contents have *kaphavaatshamak* effect & mainly the cause of *shoth* is *kaph* & *vaatanubandh* hence these drugs are very effective in *Amavata*

CONCLUSION: *Sarvang sundar rasa* orally and *Mahamash Tail* locally is effective on *Amavata* without any side effect.

REFERENCE:

1. Charak Samhit Chikitsa Sthan Acharya Chaukhamba 2003 vidyadhar Shukla Sanskrit Prakshan Delhi Adhyay 12,15

2. Sharangadhar Samhita Dr. Shilaja Shrivastav Purvakhand Adhyay 7 Chaukhamba Sanskrit Prakashan 2011
3. Charak Samhita Agnivesh Chaukhamba 5th 2001chakrapani Tika Sanskrit Sansthan
4. Shushrut Prof.RK Srikanth Chaukhamba 2nd 2005 Samhita English Murty Oriantelias Translation Varanasi
5. Charak Samhita RK Sharma Chaukhamba Reprintwith English Sanskrit 2010 Translation Prakashan Delhi
6. Ashtang Kaviraj Atridev Chaukhamba Reprint, Hrudayam Gupta Prakashan Delhi 2011
7. Madhav Nidan Sudarshan Chaukhamba 7th Edition Adhyay 25.
8. Chikitsasarsangrahvangasen Samhita Aacharya Shastri, Vatavyadhi.
9. Rasendrasarsangrah:Indradev Tripathi Chaukhamba Oriyantalia Varanasi Delhi.
10. Bhaishjya Ratnavali Rajeshwardatta Shastri Chaukhamba 2017 Sanskrit Bhavan Adhyay 29.

Conflict of Interest: Non

DOI:

<https://doi.org/10.52482/ayurline.v5i03.562>

Source of funding: Nil

Cite this article:

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Ayurline: International Journal of Research In Indian Medicine 2021; 5(4):01-06