



Case Study

## MANAGEMENT OF AMAVATA THROUGH VAITARANA BASTI W.S.R TO RHEUMATOID ARTHRITIS

Murshida Banu<sup>1\*</sup>, Waheeda Banu<sup>2</sup>

\*1PG Scholar, <sup>2</sup>HOD & Professor, Dept. of PG studies in Kayachikitsa, Karnataka Ayurveda Medical College & Hospital, Mangalore, Karnataka, India.

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### ABSTRACT

Amavata is one of the crippling disease- causing serious agonizing painful conditions. Some of the symptoms of Amavata can correlated with Rheumatoid arthritis. Rheumatoid arthritis is a common form of inflammatory arthritis, occurring throughout the world and in all ethnic groups. The prevalence of RA is approximately 0.8-1.0% in Europe and South Asia, with a female to male ratio 3:1. Acharya Chakradatta mentioned treatment modalities for Amavata are Langhana, Swedana, Tikta, Deepana, Katu Dravya, purgatives, intake of Sneha and Application of enemas. Teekshna basthi such as Vaitarana basti is indicated in the treatment of Amavata since it possesses qualities like Amapachana, Srotoshodhana and Vatakaphahara. It has Vata kapha pacifying properties and helps in removing Avarana of Vata by Kapha. By using this Chikitsa Siddanta a case of Amavata was successfully treated and marked improvement was observed in signs and symptoms after treatment. Here a case report on Amavata has been discussed along with its effective management with Vaitarana Basti.

### INTRODUCTION

In present era people are busy in their lifestyle and getting success. The food habits and seasonal regimen of human being has modified a lot. Amavata is one of the crippling disease-causing serious agonizing painful conditions. It is not only a disorder of locomotor system but is a systemic disease. It is a disease of Rasavahasrotas. The person who is taking incompatible food, unsuitable body movements, Mandagni, greedy food intake, vigorous exercises immediately after consuming oily or fatty food, the consumed Ahara becomes Ama in the body<sup>[1]</sup>. In which pathogenic constituents are mainly Ama and Vata. Vitiated Vata circulates the Ama all over the body through Dhamanies takes the shelter in Sleshma sthana especially in joints producing symptoms such as stiffness, swelling and tenderness in the small joints and big joints, making a person lame. It becomes incurable when it involves all the joints, severe pain

resembling that of scorpion sting<sup>[2]</sup>. Samanya lakshanas of Amavata are Angamarda (body ache), Aruchi (anorexia), Trsna (thirst), Alasya (laziness), Gaurava (heaviness), Jwara, Apaka (indigestion), Angasunam (swelling of the body parts)<sup>[3]</sup>. The signs and symptoms of "Rheumatoid arthritis' found in modern medicine mimic the condition of Amavata mentioned in Ayurveda. Rheumatoid arthritis is a common form of inflammatory arthritis, occurring throughout the world and in all ethnic groups. The prevalence of RA is approximately 0.8%-1.0% in Europe and south Asia, with a female to male ratio of 3:1. It is a chronic disease characterized by a clinical course of exacerbations and remissions. RA is a complex disease with both genetic and environmental components. Remission may occur during pregnancy and sometimes RA first presents post-partum. The typical presentation is with pain, joint swelling and stiffness affecting the small joints of hands, feet and wrists in a symmetrical fashion. Large joint involvement, systemic symptoms and extra articular features may also occur. Sometimes RA has an acute onset, with severe early morning stiffness, polyarthritis and pitting oedema. This occurs more commonly in old age<sup>[4]</sup>. Madhavakara was the first who described the symptoms of Amavata in Mahava Nidana where as the line of treatment of

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*Amavata* was first explained by Acharya Chakradatta. It is a disease of *Madhyama Rogamarga* hence it is considered to be *Krichrasadhya* or *Yapya*.

*Basti* is a specialty treatment of Ayurveda, considered among *Panchakarma* therapies. This treatment method has both preventive and curative perspectives. *Basti* treatments balance and nurture *Vata dosha*, but also effective in correcting the vitiated *Pitta, Kapha, Rakta, Samsarga, Sannipataja doshas*. *Basti* is considered as *Ardha chikitsa* in Ayurveda<sup>[5]</sup>. Acharya Chakradatta has mentioned *Vaitarana basti* in *Niruha adhikara*<sup>[6]</sup> and *Vangasena* mentioned it under *Basthi adhikara*.<sup>[7]</sup>

*Vaitarana basti* is a form of *Niruha basthi* which has a unique formulation and specific indications. *Vaitarana* or *Vaitarani* river, as mentioned in *Garuda purana* lies between the earth and infernal *Naraka*, the realm of *Yama*, Hindu god of death and is believed to purify one's sins<sup>[8]</sup>.

Properties of ingredient used in *Vaitarana basti*- *Saindhava lavana* helps to dissolve and expel *Doshas* from the intestines and it is *Tridosahara*. *Chincha* acts as *Vata pitta shamaka* and *Deepana* property. *Guda* have properties like *Vata kapha shamaka*. *Gomutra* is told as *Amrita* in Ayurveda, acts as *Vatakaphashamaka, Agni Deepana* and *Shoolahara*.

**Case Report**

A 48year female patient, homemaker by occupation presented pain and swelling in both knee joint since 8 months, pain and stiffness in both wrist joint and interphalangeal joints and loss of appetite since 1 month and severe early morning stiffness which lasts for more than 60 min since 3 months. The patient had sleeplessness due to intense pain. She was unable to sit straight or walk due to pain. No history of systemic disorder. No relevant personal history. In spite of regular modern medication for the past few years patient had no relief, however, in view of increased pain, she came to Kayachikitsa OPD at Karnataka Ayurveda Medical College, Mangalore.

**Other Complaints:** No any associated complaint seen

**History of Present Illness:** Patient was normal before 8 months and then gradually she developed above

**Local Examination**

symptoms due to heavy physical work. So, for better treatment she came to KAMCH.

**Family History:** No significant family history

**Past History:** No significant past illness.

**Clinical Findings**

**Table 1: Showing personal history examination**

Appetite	Poor appetite
Sleep	Disturbed due to pain
Diet	Mixed
Bowel	Regular
Micturation	D/N- 6-2 times
Addiction	Not specific
Menstrual History	Menopausal

**Table 2: Showing general physical examination**

General condition	Moderate
Blood pressure	110/60mmhg
Pulse rate	86/min
Respiratory rate	18/min
Tongue	Coated
Temperature	97°F
Nourishment and Built	Well Built
Lymph nodes	Absent
Pallor	Absent
Icterus	Absent
Cyanosis	Absent
Clubbing	Absent

**Table 3: Showing Astavidha Pariksha**

<i>Nadi</i>	<i>Vata</i>
<i>Mala</i>	Regular, once/day
<i>Mutra</i>	Normal, 5-6 times/day, 2 times/ night
<i>Jihwa</i>	<i>Liptata</i>
<i>Shabda</i>	<i>Prakrita</i>
<i>Sparsha</i>	<i>Ushna Sparsha</i> in B/L knee joint
<i>Drik</i>	<i>Prakrita</i>
<i>Aakriti</i>	<i>Madhyama</i>

**Table 4: Showing local examination**

Inspection	Upper limb	Lower limb
Joint involved	Wrist joints	B/L knee joint
Movement	B/L restricted (wrist joints)	B/L restricted (knee joints)
Symmetry	Symmetrical	Symmetrical
Swelling	Not present	Present in B/L knee joint
Deformity	Not present	Not present
Redness	Not present	Not present

<b>Palpation</b>		
Temperature	Not raised	Raised in B/L Knee joints
Joint crepitus	Not present	Present in B/L knee joints
Nodules	Not present	Not present

### Differential Diagnosis

*Amavata* (Rheumatoid arthritis), *Sandhivata* (Osteo arthritis), *Vatarakta* (Gout).

### Investigations Done

CBC  
ESR  
CRP  
RA test  
S.Uric Acid

### Diagnosis

*Amavata* is diagnosed on the basis of signs and symptoms explained in the classics of Ayurveda and

criteria fixed by the American Rheumatology Association (ARA).

### Treatment Plan of the Study

The selected patient was given *Vaitarana basti* along with *Brihat saindhavadi taila anuvasana basti* in the format of *Yoga bastis* shown in table 6, followed by *Shamanaushadhi* shown in table 5.

*Niruha basti- Vaitarana basti* 340ml.

*Anuvasana basti- Brihat saindhavadi taila* 40ml.

**Table 5: Showing *Shamanaushadhi* (After the course of treatment)**

	Drug	Dosage
1	<i>Vatari Guggulu</i>	2-0-2/AF ( for 15 days)
2	<i>Amavatari Rasa</i>	1-0-1 /BF ( for 15 days)

**Table 6: Showing *Basti* schedule**

Day-1	Day-2	Day-3	Day-4	Day-5	Day-6	Day-7	Day-8
AB	NB	AB	NB	AB	AB	NB	AB

AB-*Anuvasana Basti*

NB- *Niruha Basti*

### Plan of the Study

**Table 7: Showing *Anuvasana Basti Karma***

	<i>Basti dravya</i>	Dosage	Retention
1 <sup>st</sup>	<i>Brihatsaindhavadi taila</i>	40ml	6 hrs
2 <sup>nd</sup>	<i>Brihatsaindhavadi taila</i>	40ml	6 hrs
3 <sup>rd</sup>	<i>Brihatsaindhavadi taila</i>	40ml	6.5 hrs
4 <sup>th</sup>	<i>Brihatsaindhavadi taila</i>	40ml	5 hrs
5 <sup>th</sup>	<i>Brihatsaindhavadi taila</i>	40ml	6 hrs

### *Vaitarana Basti* Preparation

**Table 8: Showing ingredients to prepare *Vaitarana Basti***

<i>Saindhava Lavana</i>	6 gms
<i>Chincha Kalka</i>	30 gms
<i>Guda Paaka</i>	60ml
<i>Bruhat Saindhava Taila</i>	40ml
<i>Gomutra arka</i> diluted with water	200ml

**Purva Karma**

*Sthanika Abhyanga* to *Udara pradasha*.

*Nadi Sweda*

**Pradhana Karma**

Patient was advised to take *Laghu Ahara* and *Sthanika sweda* was done to *Udara pradasha*. Patient was asked to lie down on the *Panchakarma Droni* in *Vama parshwa* (left lateral position with right leg fixed), asked to deep breath and *Sukoshna Basti Dravya* was administered slowly with the help of *Basti Yantra* fitted with soft rubber tube. Extreme care was taken to avoid *Basti vyapat*.

**Paschat Karma**

Patient was asked to lie down in supine position after administration of *Basti Dravya* and pass bowel on developing urge. The time of administration, the time of retention, *Pratyagamana kala* was

recorded. No specific complications were observed during and after *Basti Dravya prayoga*.

**Shamanaushadhi**

1. *Vatari guggulu*- 2-0-2 AF (for 15 days)
2. *Amavatari rasa* 1-0-1 BF (for 15 days)

**Pathya-Apathya During Treatment**

**Aaharaja Pathya:** *Yava, Kulattha, Raktashali, Punarnava, Ardraka, Rasona, Jangala mamsa, Ushna jala.*

**Viharaja Pathya:** Sunlight exposure for at least 15 minutes in a day. *Pranayama, Yoga, meditation.*

**Aharaja Apathya:** Sweets, fast food, uncooked food, salty, spicy, oily food, fish, cold water, curd, jaggery, milk, cold beverages, ice creams.

**Viharaja Apathya:** *Diwaswapna, Vegadharana, exposure to cold, wind.*

**Assessment Criteria****Table 9: Grading of Sandhishoola**

	Severity of Pain	Grade
1	No pain	0
2	Mild pain	1
3	Moderate, but no difficulty in moving	2
4	More difficulty in moving parts of body	3

**Table 10: Grading of Sandhishotha**

	Severity of Swelling	Grade
1	No swelling	0
2	Slight swelling	1
3	Moderate swelling	2
4	Severe swelling	3

**Table 11: Grading of Sparshaasahitva**

	Severity of tenderness	Grade
1	No tenderness	0
2	Subjective experience of tenderness	1
3	Wincing of face on pressure	2
4	Wincing of face and withdrawal of the affected part on pressure	3

**OBSERVATION AND RESULTS****Table 12: Assessment of Sandhishoola**

Left		Right	
<b>Knee joint</b>		<b>Knee joint</b>	
BT - 3	AT-0	BT-2	AT-1
<b>Wrist joint</b>		<b>Wrist joint</b>	
BT-3	AT-0	BT-2	AT-1

**Table 13: Assessment of Sandhishotha**

Left		Right	
<b>Knee joint</b>		<b>Knee joint</b>	
BT-2	AT-0	BT-3	AT-1
<b>Wrist joint</b>		<b>Wrist joint</b>	
BT-0	AT-0	BT-0	AT-0

**Table 14: Assessment of Sparshaasahishnuta**

Left		Right	
<b>Knee joint</b>		<b>Knee joint</b>	
BT-2	AT-0	BT-2	AT-0
<b>Wrist joint</b>			
BT-2	AT-0	BT-2	AT-0

## Investigations

**Table 15: Showing laboratory values before and after treatment**

Investigations	BT	AT
Hb%	11.2gm%	12gm%
Neutrophils	84%	65%
Lymphocytes	40%	23%
Monocytes	2%	1%
Eosinophils	5%	5%
Total platelet count	2.37 Lakhs/cumm	2.78 Lakhs/cumm
ESR	50mm/hr	18mm/hr
RA Test	Positive	Negative
CRP	9.58 mg/L	2 mg/L
Uric acid	4.0mg/dl	3.0mg/dl

## DISCUSSION

*Vaitarana basti* one of the most effective treatments in treating *Amavata*. We get reference of *Vaitarana basti* in various text books like Chakradatta, Vrinda Madhava, Vangasena. The term *Amavata* is formed by the union of two words, *Ama* and *Vata*, and these two play a crucial role in the pathogenesis of the disease. Chakradatta was the first, who explains the *Chikitsa siddhanta* for *Amavata*. Which are *Langhana*, *Swedana*, *Tikta*, *Deepana*, *Virechana*, *Snehapana* and *Basti*.

### Probable Mode of Action *Vaitarana Basti*

Majority of the drugs are having *Vata-Kapha Shamaka* action. Owing to this property, antagonism to *Kapha* and *Ama* the *Basti* help in significant improvement in sign and symptom of disease. The *Tikshna Guna* of *Vasti* helps in overcoming the *Srotodushti* resulting due to '*Sanga*'.

Acharya Charaka says, *Basti* is the main treatment for *Vata*, and *Vata* is responsible for *Doshas* spreading to other *Sthana*. He also says that as *Bhaskara* (sun) pulls out the *Bhusara* (moisture) from earth, *Basti* pulls out *Doshas* from sole of foot to head, and brings to *Pakvashaya*.

### CONCLUSION

*Basti* is considered as main treatment for diseases caused by *Vata Dosha*. *Amavata* is mainly *Vata kaphaja Vyadhi* where in *Vata* and *Kapha Dosha* is predominantly vitiated along with the formation of *Ama* due to *Mandagni* and other causative factors. Thus, the treatment selected should be having the capacity to correct vitiated *Vata*, *Kapha* and *Ama*. *Vaitarana Basti* helps in this case. *Vaitarana Basti* is a type of *Teekshna Basti*, which helps in correcting vitiated *Vata*, *Kapha* and *Ama*. Thus, helps in treating the disease *Amavata*

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**\*Address for correspondence**

**Dr. Murshida banu**

PG Scholar,

Dept of PG studies in Kayachikitsa,  
 Karnataka Ayurveda Medical  
 College & Hospital, Mangalore,  
 Karnataka, India.

Email: [dr.banumak@gmail.com](mailto:dr.banumak@gmail.com)

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