



Case Study

## A COMPREHENSIVE AYURVEDIC MANAGEMENT OF AMAVATA

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### ABSTRACT


Amavata is an *Ama pradoshaja vikara*, caused by *Agnimandya*, which leads to accumulation of *Ama* in *Shleshmasthan* and *Prakopa* of *Vata dosha*, resulting in pain, stiffness and swelling of joints, which closely resembles the chronic inflammatory autoimmune disorder called Rheumatoid arthritis. Prevalence of rheumatoid arthritis is approximately 0.8% worldwide and 0.5-0.75% in India. Materials and Methods: A 44 years female presented with pain in multiple joints associated with swelling and stiffness since 2 years was diagnosed as *Amavata*. The patient was treated with *Kottamachukkadi lepa*, *Dashamoola kashaya* and *Dhanyamla Kayaseka*, *Vaitarana basti* followed by *Guduchyadi kashaya basti* along with *Rasayana* and oral medications. Results: There was a significant improvement in overall symptoms. Conclusion: Contemporary medicine offers DMARDS and steroid medications for very long time as it is Auto immune condition. Whereas on other hand *Panchakarma* therapies can target on root cause of the *Vyadhi* and provide more promising results.

### INTRODUCTION

Rheumatoid arthritis is a chronic, systemic inflammatory polyarthritis that primarily affects small diarthrodial joints of hands and feet in symmetrical pattern<sup>[1]</sup>. The etiology is unknown. But genetic and environmental factor plays important role in pathogenesis of disease. Pathological changes mediated by autoantibodies, produces synovitis which is caused by secretion of cytokines, predominantly CD 4+ T cells, this will further leads to cartilage damage and bone erosions that badly disturbs joint integrity. Bilateral, peripheral symmetrical joint involvement with early morning stiffness is the characteristic feature of RA. Prevalence of Rheumatoid arthritis is approximately 0.8% worldwide and 0.5-0.75% in India<sup>[2]</sup>. *Amavata* and rheumatoid arthritis share the same pathophysiology and symptoms, hence the condition can be effectively managed by using *Amavata* line of treatment.

*Agnimandya* is the cause for all disease. *Amavata* is the one such disease, where *Agni dusti* plays vital role in the *Samprapti* of the *Vyadhi*. Due to *Nidana sevana* i.e., *Viruddhahara* mainly *Samyoga viruddha* and *Viruddha cheshta*, who have *Mandagni* and do not indulge in physical activity, indulging in physical exercise immediately after eating oily foods, *Ama* and *Vata* get aggravated simultaneously and get lodged in *Trika sandhi* and make the body stiff. When the *Ama* is generated due *Jataragni mandya*, it will produce symptoms like pain and heaviness of the body, anorexia fever, indigestion etc. In later stage, due *Dhatwagni mandya*, the *Ama* will causes painful swelling in joints of hands, legs, ankle, sacrum, knees and thighs<sup>[3]</sup>. And later it will lead to contraction of the body.

Contemporary medicine includes NSAIDs, steroids, and disease modifying anti-rheumatic drugs (DMARDS) for long term uses and have severe side effects. *Langhana*, *Swedana*, *Deepana*, *Virechana*, *Snehana* and *Basti* is the line of treatment mentioned for *Amavata* by *Acharya Chakradatt*<sup>[4]</sup>. *Vaitarana basti* is the specific *Basti* mentioned by *Acharya Chakradatt*. In the present study, *Chikithsa sutra* of *Amavata* which have been mentioned by *Acharyas* are applied to prove the efficacy of Ayurveda treatment in the management of rheumatoid arthritis.

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**Case Report**

**Pradhana vedana vruttanta**

Pain in multiple joints associated with swelling and stiffness.

**Adyatana vyadhi vruttanta**

A female patient aged 44 years visited the OPD of *Panchakarma*, Government Ayurveda Medical College, Bangalore, Karnataka, India. She was presented with chief complaints of pain in multiple joints associated with swelling and stiffness which lasts more than 2 hrs. Patient was diagnosed with

Rheumatoid arthritis with RA factor 114.60IU/ml and CRP 52.8mg/dl. She has undergone allopathic treatment and has been taking steroids for more than three months, but did not get any relief from her symptoms. For further management, she visited the OPD of *Panchakarma*, Government Ayurveda Medical College, Bangalore.

**Poorva vyadhi vruttanta:** Nothing significant

**Koutumbika vruttanta:** Nothing significant

**Vayaktika vruttanata:** Shown in table no. 01

**Table 1: Showing subject's personal history**

Name: xyz	Bowel: Constipated
Age: 44 years	Appetite: Reduced
Marital status: Married	Menstrual history: Regular
Occupation: House wife	Height: 162cm
Diet: Mixed	Weight: 65kg

**Table 2: Showing Ashta sthana pareeksha**

<i>Nadi</i>	<i>Manda</i>
<i>Mala</i>	<i>Baddha</i>
<i>Mutra</i>	<i>Atimutrata with Avilata</i>
<i>Jihwa</i>	<i>Lipta</i>
<i>Shabda</i>	<i>Prakruta</i>
<i>Sparsha</i>	<i>Prakruta</i>
<i>Drik</i>	<i>Prakruta</i>
<i>Akriti</i>	<i>Madhyama</i>

**Table 3: Showing Dashavidha pareeksha**

<i>Prakriti: Kapha vata</i>	<i>Satyma: Madhura amla katu rasa</i>
<i>Vikriti: Kapha vata pradhana tridosha</i>	<i>Ahara shakthi: Avara</i>
<i>Sara: Rakta asthi majja alpa</i>	<i>Vyayama shakthi: Avara</i>
<i>Samhanana: Madhyama</i>	<i>Vaya: Madhyama (44 years )</i>
<i>Satva: Madhyama</i>	<i>Pramana: Ht: 162cms Wt: 65kg BMI: 24.8</i>

**Systemic examination**

Cardio vascular system: S1 S2 heard, no abnormality detected.

Respiratory system: NVBS heard, no abnormality detected.

Gastro intestinal system: P/A: Soft, non-tender

**Table 4: Showing Musculo skeletal system**

	B/L knee joints	B/L ankle joints	Small joints of hands
Swelling	Present	Present	Present
Deformity	Absent	Absent	Absent
Tenderness	Present	Present	Present
Temperature	Warmth	Warmth	Normal
Range of movement	Restricted	Painful	Restricted

**Table 5: Showing 2010 ACR/EULAR classification criteria for RA**

<b>1. Joint distribution (0-5)</b> >10 joints	<b>Score</b> 5
<b>2. Serology (0-3)</b> High RA factor (114.60IU/mL)	3
<b>3. Symptoms duration (0-1)</b> >6weeks	1
<b>4. Acute phase reactants</b> Normal ESR	0

Total score ->6 defines RA

**Table 6: Showing Nidana panchaka**

<i>Nidana</i>	<i>Aharaja: Snigdha, Abhishyandi atisevana, Aiti sheeta aahar sevana (fridge items)</i> <i>Viharaja: Divaswapna after taking food</i>
<i>Purvaroop</i>	<i>Agnimandya</i>
<i>Roopa</i>	<i>Anga gourava, Shoola shotha and Stabdtha in multiple joints.</i>
<i>Upashaya</i>	Summer season, afternoon hours, immersing joints in hot water
<i>Anupashaya</i>	Winter season, coldwater

**Table 7: Showing Samprapti ghataka**

<i>Dosha</i>	<i>Vata pradhana tridosha</i>	<i>Udbhavasthan</i>	<i>Amashaya</i>
<i>Dushya</i>	<i>Rasa, Asthi, Majja</i>	<i>Sancharasthana</i>	<i>Sarvashareera</i>
<i>Agni</i>	<i>Jataragni, Dhatwagni</i>	<i>Vyaktasthana</i>	<i>Sandhi</i>
<i>Agnidushti</i>	<i>Mandagni</i>	<i>Adhishtana</i>	<i>Sandhi</i>
<i>Srotas</i>	<i>Rasavaha, Asthivaha, Majjavaha</i>	<i>Rogamarga</i>	<i>Madhyama</i>
<i>Srotodusti</i>	<i>Sanga</i>	<i>Sadhyasadhyata</i>	<i>Kricchrasadhya</i>

**Table 8: Showing Treatment protocol adopted**

<p><b>Panchakarma</b></p> <ol style="list-style-type: none"> <li>1. Kottamachukkadi lepa for 7 days.</li> <li>2. Dashamoola kashaya and Dhanyamla kayaseka for 14 days.</li> <li>3. Vaitarana basti and Guduchyadi kashaya basti for 7 days administered in modified pattern.</li> <li>4. Pippali vardhamana rasayana for 10 days.</li> </ol>	<p><b>Shamana yogas</b></p> <ol style="list-style-type: none"> <li>1. Amrutottara kashaya 10ml -0-10ml B/F</li> <li>2. Tab Shaddharana 1-0-1 A/F</li> <li>3. Sudarshana Ghana vati 1-0-1 A/F</li> </ol>
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**Table 9: Showing the contents of Vaitarana basti and Guduchyad kashaya basti**

<b>Vaitarana basti</b>		<b>Guduchyadi kashaya basti</b>	
<i>Amlika</i>	50gms	<i>Makshika</i>	60ml
<i>Guda paka</i>	25gms	<i>Saindhava</i>	10gms
<i>Saindhava</i>	10gms	<i>Yastimadhu taila</i>	60ml
<i>Bruhatsaindhavadi taila</i>	60ml	<i>Shatapushpa kalka</i>	20gms
<i>Triphala kashaya</i>	200ml	<i>Guduchyadi kashaya</i>	300ml
<i>Gomutra</i>	100ml		

**Table 10: Showing Modified Basti pattern**

	<b>Day 1</b>	<b>Day 2</b>	<b>Day 3</b>	<b>Day 4</b>	<b>Day 5</b>	<b>Day 6</b>	<b>Day 7</b>
<i>Niruha basti</i>	<i>Vaitarana basti</i>	<i>Vaitarana basti</i>	<i>Vaitarana basti</i>	<i>Guduchyadi kashaya basti</i>	<i>Guduchyadi kashaya basti</i>	<i>Guduchyadi kashaya basti</i>	
<i>Anuvasana basti</i>				<i>Anuvasana basti with Bruhat saindhavadi taila 50ml</i>	<i>Anuvasana basti with Bruhat saindhavadi taila 50 ml</i>	<i>Anuvasana basti with Bruhat saindhavadi taila 50ml</i>	<i>Anuvasana basti with Bruhat saindhavadi taila 50ml</i>

**Administration of Vardhamana pippali rasayana**

Vardhamana pippali rasayana is a treatment protocol, where oral intake of Pippali is advised in the increasing dosage in empty stomach along with 250ml of Mudga yusha in the morning.

**Table 11: Showing Details of the Pippali dosage**

Days	1	2	3	4	5	6	7	8	9	10
Dose	1	2	3	4	5	5	4	3	2	1

**Assessment**

The results were assessed on the basis of clinical signs and symptoms mentioned in Ayurvedic classics as well as 2010 ACR/EULAR classification criteria for RA

**Table 12: Scoring of the symptoms**

Grade	Sandhi shotha	Sandhi shoola	Sandhi Stabdata
0	No swelling	No pain	No stiffness
1	Visible swelling But no loss of joint contour	Mild pain with slight difficulty in flexion and extension	5mins to 30mins
2	swelling with Loss of normal joint contour	Moderate pain with much difficulty in flexion and extension	30mins to 1 hr
3	Frank cystic swelling of joint	Severe pain with restricted movements	1hr to 2hrs
4	----	----	More than 2 hours

**OBSERVATIONS AND RESULTS****Table 13: Showing Treatment plan**

Days	Treatment	Observations
D1-D7	Kottamachukkadi lepa to B/L Knee	Pain and swelling in B/L knee reduced by 30%
D1-D14	Dashamoola kashaya + Dhanyamla kayaseka	Pain, swelling, stiffness in multiple joints reduced by 60%. Range of movements: restricted
D14-D21	No treatment done because patient C/O nausea, loss of appetite and bloating abdomen	Symptoms slightly aggravated.
D21-D27	Vaitarana basti followed by Guduchyadi kashaya basti was done in modified pattern.	Marked reduction in pain, swelling, stiffness. Absence of pain during night time. Heaviness of the body reduced.
D27-D36	Vardhamana pippali rasayana in modified form.	90% relief from overall symptoms.

**Table 14: Showing Overall assessment**

Assessment criteria	Before treatment	After treatment
Sandhi shoola	Grade 3	Grade 1
Sandhi shotha	Grade 1	Grade 0
Sandhi stabdathata	Grade 4	Grade 1
RA factor	114.60IU/ml	61.0IU/ml
CRP	52.8mg/dl	5.3mg/dl
EULAR score	10	8

**DISCUSSION**

As Amavata is an Amapradoshaja vikara, correcting the Agni dusti is the prime most treatment. Langhana, Swedana, Deepana, Virechana, Snehana and Basti is the line of treatment mentioned for Amavata.

**Kottamachukkadi lepa**

In the present case, patient mainly C/O pain and swelling in bilateral knee joints, so initially Kottamchukadi lepa was applied to both knees. Kottamachukkadi is mainly indicated in Vataja vyadhi<sup>[5]</sup>. The ingredients used in this Lepa acts as

*Vatakaphahara, Lekhana, Shothahara and Shoolahara* action. Thus helps in relieving pain and swelling of joints.

#### **Kayaseka with Dashamoola kashaya and Dhanyaml**

*Swedana* is the main line of treatment for *Vatakaphaja vyadhi*. *Swedana* helps in relieving heaviness, stiffness, coldness. *Kayaseka* is the *Bahiparimarjana chikithsa*, defined as *Parishodhana*, which means cleaning of the body.

*Dhanyamla* being *Amla pradhana dravya*, helps to pacify *Vata* and *Kapha dosha*. It acts as *Prenana*, *Deepana* and useful in all *Vataroga*

*Dashamoola kashaya* is an *Ama pachaka* and a *Tridoshahara*<sup>[6]</sup>. It aids in *Gourava* and *Sthambahara* action.

#### **Basti**

**Vaitarana basti:** *Chakradatta* described *Vaitarana basti* in *Niruhaadhikara* with its special indication in *Amavata*<sup>[7]</sup>. *Guda, Saindhava, Brihatsaindhavadi taila, Chinchha* and *Gomutra* are the contents of *Vaitarana basti*, which possess *Vatakaphara* and *Agnivardhana* properties. Thus helps in digestion of *Ama* and removal of *Shrotorodha*.

**Guduchyadi kashaya basti:** *Amavata* in later stage will convert to *Vatarakta*. *Guduchi* is the main drug of choice in *Vatarakta Chikithsa*. *Guduchyadi kashaya* is indicated in *Pittashleshmaja jwara*<sup>[8]</sup> where *Ama* is the main culprit. It helps in *Amapachana* and *Agnivardhana*, thereby helps in reducing pain and swelling.

#### **CONCLUSION**

Rheumatoid arthritis is a autoimmune condition, which requires medications for long term and have severe adverse effects. *Amavata* line of treatment can be adopted in treating RA. In *Amavata* due to *Mandagni, Amarasa* will form from improper digestion of *Annarasa*. So to improve the *Jataragni, Amrutottara kashaya* and *Shaddharana* tablet was given till improvement of appetite. Initially to reduce

the pain and swelling of multiple joints, *Kayaseka* with *Dashammola kashaya* and *Dhanyamla* was adopted as *Lakshanika chikithsa*. Later for *Samprapti vighatana, Vaitarana* and *Guduchyadi basti* was administered. In the present case, there was a remarkable improvement seen in overall symptoms.

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