



Case Study

EFFECTIVE MANAGEMENT OF GOUT WITH KOKILAKSHA NIRUHA BASTI

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ABSTRACT

Gouty arthritis is a form of inflammatory arthritis characterized by sudden and severe pain, redness, and swelling in the joints. It happens when too much uric acid builds up in the blood, forming sharp crystals in and around joints. These crystals usually affect the big toe, ankles, knees, wrists, and elbows. In Ayurveda, gouty arthritis closely resembles a disorder called *Vatarakta* in which the *Vata dosha* becomes aggravated and combines with vitiated *Rakta*, leading to disturbances in the joints and surrounding tissues. A 24-year-old male patient presented to the OPD with chief complaints of acute pain and swelling in the right ankle joint for the past 6 months, along with elevated serum uric acid levels. He was treated with *Panchakarma* therapy, including *Udwartana*, *Parisheka*, and *Kokilaksha Kashaya Niruha Basti* for 14 days. These therapies have shown significant effectiveness in reducing joint pain and swelling, as well as lowering serum uric acid levels. By addressing both the symptoms and the underlying causes, these Ayurvedic treatments offer a holistic approach to managing gout. Their combined action not only alleviates discomfort but also promotes long-term relief, making them valuable interventions in the effective treatment of gout.

INTRODUCTION

Gout is one of the most common causes of chronic inflammatory arthritis, characterized by monosodium urate (MSU) monohydrate crystals deposition in the tissues. It is characterized biochemically by extracellular fluid urate saturation, which is reflected by hyperuricemia in the blood, with plasma or serum urate concentrations exceeding 6.8 mg/dL. It is triggered by the deposition of MSU crystals, the end product of human purine metabolism, in joints, soft tissues, and bones[1]. Excessive build-up of uric acid in the body is caused by impaired metabolism or decreased kidney function. Contributing factors include a diet high in purine-rich foods, hypertension medications, alcohol consumption, obesity, and a family history of metabolic issues[2]. This condition may manifest in many forms, including acute gout flare (acute arthritis), chronic gouty

arthritis (chronic arthritis), tophaceous gout (formation of tophi), renal functional impairment, and urolithiasis[1].

Globally, gout prevalence has been reported to range from 1–4%, with an incidence of 0.1–0.3%. The condition is notably more common in men than in women, with a male-to-female ratio ranging from 3:1 to 10:1. Both the incidence and prevalence of gout rise with age, reaching a prevalence of 11–13% and an incidence of 0.4% among individuals over 80 years old[3].

Signs and symptoms of gout include nodules under the skin known as tophi, redness and swelling of the joints, joint pain, and warmth around the affected area. These manifestations indicate that gout is a metabolic, vascular, and joint-related condition, these symptoms of gouty arthritis fall under a broad spectrum of disease known as *Vatarakta*[4].

Vatarakta is a painful disorder marked by intense pain, tenderness, inflammation, and a burning sensation in the affected joints. It is extensively described in *Brihatrayi* and other *Samhitas*, with various synonyms such as *Khuddavata*, *Vatabalasa*, and *Aadya Vata*[5]. Aggravated *Vata* becomes obstructed by vitiated *Rakta*, leading to further

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aggravation of the *Vata Dosha*. It has two forms: *Uttana* and *Gambhira*. *Uttana Vatarakta* affects the *Twak* (skin) and *Mamsa Dhatu* (muscle tissue), while *Gambhira* primarily impacts the *Asthi* (bones) and *Majja Dhatu* (bone marrow and deeper tissues) [6]. In the present study, an attempt has been made to evaluate the efficacy of *Kokilaksha Kashaya*, administered in the form of *Basti*, in reducing uric acid levels in gouty arthritis.

Case Report

Chief complaints

Pain in right ankle joint since 5 months

Associated complaints

Swelling in right ankle joint since 5 months

History of present illness

A male patient of 24 years was diagnosed with Hypothyroidism at the age of 14 years. Five months ago, he developed sudden-onset of pain in his right

Personal History: Shown in table 1.

ankle joint, which was excruciating in type, moderate in intensity, and continuous in nature. The pain was associated with diffuse swelling around the joint and a locally raised temperature, worsening at night. The pain gradually increased and affected his ability to walk. As the symptoms did not subside with medication, he visited the OPD of Panchakarma at Government Ayurveda Medical College, Bengaluru, for further management.

Past History

H/O Smoking – 3 cigarettes/day since 5 years

No H/O Fall / Injury that interfere with the pain

Medical history-

K/C/O Hypothyroidism since 10 years

Family history

The subject's parents had a history of consanguineous marriage.

Subject's grandfather had bronchial asthma

Table 1: Personal history

Name: xyz	Bowel: Regular
Age: 24 years	Appetite: Reduced
Marital status: Unmarried	Habits: Smoking – 3 cigarettes/day
Occupation: Auto driver	Height: 5.5feet
Diet: Mixed	Weight: 86kg

General Examinations

Pulse - 62/min

Weight – 86kg

BP - 120/80 mmhg

Height – 168 cm

RS - 20/min, bilaterally symmetrical

BMI – 30.1kg/m²

CVS - 74/min, S1, S2 heard

Table 2: Ashtasthana pareeksha

<i>Nadi</i>	<i>Prakruta</i> , 62bpm
<i>Mutra</i>	<i>Prakruta</i> - 3-4 times/day 1-2 times/night
<i>Mala</i>	<i>Prakruta</i> - 1 time/day
<i>Jihwa</i>	<i>Alipta</i>
<i>Shabda</i>	<i>Prakruta</i>
<i>Sparsha</i>	<i>Sheetha sparsha</i>
<i>Drik</i>	<i>Prakruta</i>
<i>Akriti</i>	<i>Sthoola</i>

Table 3: Dashavidha pareeksha

<i>Prakriti: Kapha pitta</i>	<i>Satmya: Madhura katu rasa</i>
<i>Vikriti: Vata, Rakta</i>	<i>Ahara shakti: Madhyama</i>
<i>Sara: Madhyama</i>	<i>Vyayama shakti: Madhyama</i>
<i>Samhanana: Madhyama</i>	<i>Vaya: Madhyama (24 years)</i>
<i>Satva: Madhyama</i>	<i>Pramana: Ht- 168cm Wt- 86kg</i>

Systemic Examination

Central nervous system: Higher mental functions intact, no abnormality detected

Cardiovascular system: S1 S2 heard, no abnormality detected

Respiratory system: NVBS heard, no abnormality detected

Gastrointestinal system: P/A- soft, non-tender

Musculoskeletal system

Gait- Antalgic

Curvature of spine- Normal

Table 4: Right Ankle joint examination

Inspection	Palpation	Range of movements
Discoloration – Absent	Tenderness- Present (++)	Inversion - possible with pain
Scar marks – Absent	Warmth- Present	Eversion - possible with pain
Redness – Absent	Swelling – Present	
Skin – Shiny	Effusion – Absent	
Deformity/Extra growth - Absent		

Investigations

Serum Uric acid – 13.8 mg/dl

ESR – 26mm/hr

CRP – 1.41 mg/L

RA – Negative

Table 5: Samprapti ghataka

<i>Dosha</i>	<i>Vata Pitta</i>	<i>Udbhavasthana</i>	<i>Pakvashaya</i>
<i>Dushya</i>	<i>Rasa, Rakta, Asthi, Sandhi</i>	<i>Sancharasthana</i>	<i>Adhoshaka</i>
<i>Agni</i>	<i>Jatharagni, Dhatvagni</i>	<i>Vyaktasthana</i>	<i>Gulpha sandhi</i>
<i>Agnidushti</i>	<i>Mandagni</i>	<i>Adhistana</i>	<i>Sandhi</i>
<i>Srotas</i>	<i>Rasavaha Raktavaha, Asthivaha,</i>	<i>Rogamarga</i>	<i>Madhyama</i>
<i>Srotodushti</i>	<i>Sanga</i>	<i>Sadhyasadhyata</i>	<i>Krichrasadhya</i>

Roga Pareeksha

Nidana – Vidahikara vihara (smoking), Virudhahara, Atiyana

Poorvaroopam – Shoola in Gulpha sandhi

Roopa - Karmahaani, Shoola, Shotha and Vedana in Gulpha sandhi

Upashaya – None

Anupashaya – None

Samprapti

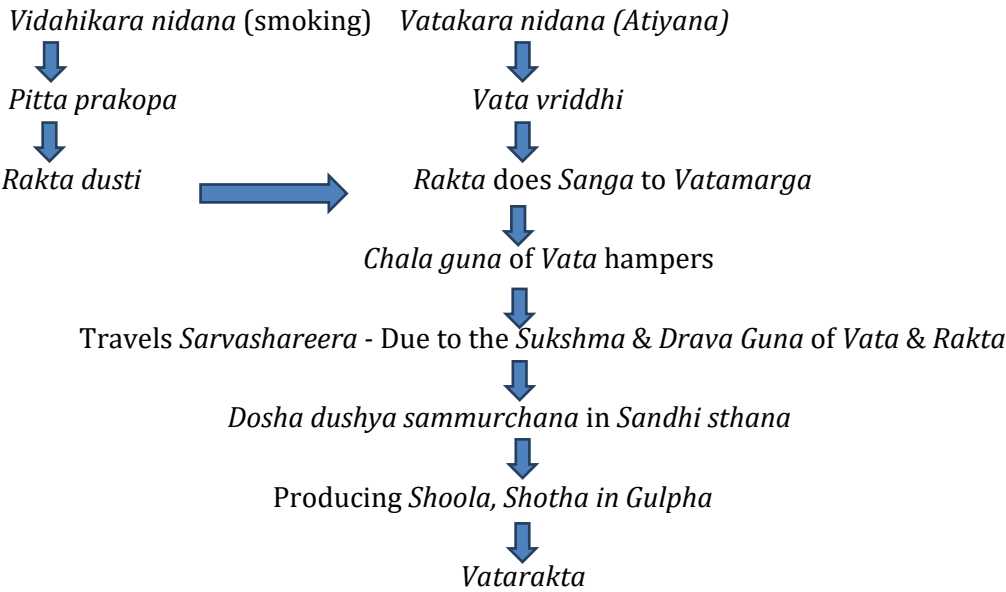


Table 6: Treatment protocol adopted

1. *Adhoshaka Dashamoola Qwatha + Mahamanjistadi Qwatha Pariseka* – for 7 days
2. *Urdwashaka Udwartana* – for 7 days
3. *Kokilaksha kashaya basti* – Yoga pattern – 5 days

Table 7: Contents of Kokilaksha kashaya basti

Kokilaksha kashaya basti	
<i>Makshika</i>	60ml
<i>Saindhava</i>	10gm
<i>Balaguduchyadi taila</i>	60ml
<i>Kalka- Shatapushpa</i>	20gms
<i>Kokilaksha Kashaya</i>	100ml
<i>Ushnajala</i>	200ml

Anuvasana basti – *Balaguduchyadi taila* – 60 ml

Table 8: Basti schedule

26/09	27/09	28/09	29/09	30/09
	NB	NB	NB	
AB	AB	AB	AB	AB

NB – *Niruha basti*

AB – *Anuvasana basti*

Table 9: Results

Date	Treatment	Results
17/09/24 – 24/09/24	<i>Urdwa shaka Udwartana</i>	Heaviness reduced by 50%
17/09/24 – 24/09/24	<i>Adhoshaka Dashamoola + Mahamanjistadi Qwatha parisheka</i>	<ul style="list-style-type: none"> • Pain in right ankle reduced by 30% • Swelling in right ankle reduced by 40%
25/09/24	<i>Koshta Shodhana with Gandarvahastadi taila</i> – 30ml in empty stomach	
26/09/24 – 30/9/24	<ul style="list-style-type: none"> • <i>Sarvanga abhyanga with Kanaka taila</i> 	<ul style="list-style-type: none"> • Pain and swelling in right ankle joint

	f/b <i>Bashpa sweda</i> <ul style="list-style-type: none"> • <i>Kokilaksha Kashaya basti</i> – 500ml (3 days) • <i>Anuvasana basti</i> with <i>Balaguduchyadi taila</i>– 60ml (5 days) 	reduced by 80% <ul style="list-style-type: none"> • Able to walk without any difficulty
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Table 10: Assessment criteria

Criteria	Before treatment (16/09/24)	After treatment (30/09/24)
Pain (Tenderness)	++	Absent
Swelling	Present	Absent
Sr. Uric acid	13.8 mg/dl	9.3 mg/dl
CRP	1.41 mg/L	0.9 mg/L

DISCUSSION

Discussion on *Vyadhi*

Gout is a hyperuricemic metabolic condition, typically manifested by episodic inflammatory arthritis with disabling pain, among middle-aged to elderly men and postmenopausal women. It stems from an increased body pool of urate due to chronic hyperuricemia, leading to super saturation and crystal formation and deposition of MSU within the joints and connective tissue^[7]. The early signs of gout are sudden, recurring flare-ups, usually affecting just one joint at first. Over time, more joints can be involved. These flares often start at night or early morning, causing the joint to become warm, red, tender, and very swollen. Triggers of gout flares include purine-rich food, alcohol, diuretic use, local trauma etc. Diagnosis is made when serum uric acid levels are greater than 6.85mg/dL. Despite its increasing incidence worldwide, modern medical treatments for gout focus primarily on symptomatic relief and uric acid level management through medications such as NSAIDs, corticosteroids, or urate-lowering drugs. However, these treatments often fall short in providing a comprehensive and sustainable cure, leaving patients vulnerable to recurring episodes and potential side effects.

In *Vatarakta*, both *Vata* and *Rakta* become aggravated and are vitiated by their causative factors, leading to *Vata* being obstructed by the vitiated *Rakta*. Due to the *Drava*, *Chala* and *Sukshma guna* of *Vata* and *Rakta*, they move throughout the body. As they circulate through the blood vessels, they become obstructed in the joints, further aggravating the condition and causing morbid matter to accumulate there^[8].

The patient's main symptoms were severe joint pain in the right ankle (*Gulpha sandhi*), along with swelling, burning sensation, and tenderness to touch, indicating a predominance of *Vata* and *Pitta*. Therefore, *Basti* treatment with *Kokilaksha Kashaya*

was planned, as it disrupts the disease process by balancing *Vata* and *Pitta*.

Discussion on *Chikitsa*

Parisheka – Initially to reduce the *Shotha* and *shoola*, *Adoshaka Dashamoola qwatha*^[9] *Parisheka* was planned. The substances used have *Ushna*, *Teekshna* and *Laghu guna*, which help regulate *Kapha*, alleviate *Vata*, and reduce *Shotha*. *Swedana* does *Stambhaghna*, *Gauravaghna*, *Sheetaghna* and *Sweda janana*. *Ushna guna* cleanses the channels (*Srotoshuddhi*), aids *Amapachana*, and relieves *Stambha* (stiffness).

Udwartana^[10] – As the patient was *Sthoola* (obese) and presented with symptoms such as heaviness, *Udwartana* was recommended to reduce the sense of *Gouravata* (heaviness) and assist in weight loss.

Basti – Since the disease is predominantly of *Vata-Pitta*, *Kokilaksha Kashaya*^[11] was selected as the main medicinal ingredient for *Niruha Basti* because it is a *Vyadhi Pratyanka Dravya*.

- *Kokilaksha Kashaya* contains ingredients like *Krishna*, *Kokilaksha*, and *Amrita*, each of which plays an important role in treatment. *Kokilaksha*, in particular, is known to balance *Vata* and *Pitta*, does *Anulomaka*, reduce swelling (*Shothahara*), and act as a diuretic (*Mutrala*).
- In the preparation, *Madhu* (honey) and *Balguduchyadi Taila* are used in equal proportions. *Madhu* has a *Lekhana* (scraping effect) on the vitiated *Doshas*, helping to clear them, while the *Sneha* aids in *Vatanulomana* and nourishes the body (*Brihmana*).
- The *Vata-Pitta* pacifying properties of *Kokilaksha Basti* help to eliminate toxins and reduce the inflammatory process in the body. Thereby reducing the pain, swelling and stiffness of the joint.
- Additionally, this particular *Basti* helps to restore the qualities of *Kapha*- such as *Snigda*, *Slakshna*,

Pichila, and *Mrutsna*. By doing so, it nourishes and strengthens all the body tissues (*Dhatus*), promoting overall healing and balance.

- Studies have proven that the drug *Kokilaksha* has anti-inflammatory, antioxidant, diuretic, and analgesic properties^[12].

CONCLUSION

Gouty arthritis is a prevalent condition characterized by the accumulation of uric acid crystals in the joints, leading to intense pain, inflammation, and swelling. Ayurveda offers a holistic approach to managing gout through therapies like *Panchakarma*, particularly *Basti*. Among these, *Kokilaksha Kashaya Basti* has proven to be highly effective in treating *Vatarakta*, especially when the condition is dominated by *Vata-Pitta lakshanas* such as severe joint pain, swelling, and warmth.

Kokilaksha is known for its anti-inflammatory, diuretic, and uric acid-lowering properties. When administered through the rectal route in the form of *Kashaya Basti*, it directly reaches the colon, which is considered the seat of *Vata dosha*. This localized administration allows for better absorption and enhanced therapeutic action, specifically targeting *Vata* and *Pitta doshas*. This study has shown that *Kokilaksha Kashaya Basti* significantly reduces serum uric acid levels, which is the primary factor in the manifestation of gout. By lowering uric acid, this therapy not only alleviates the painful symptoms but also helps prevent future flare-ups.

Thus, Ayurvedic therapies like *Kokilaksha Kashaya Basti* provide a natural, effective, and holistic alternative for managing gouty arthritis, addressing both the symptoms and the underlying imbalances that contribute to the disease.

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