



Case Study

CLINICAL EFFICACY OF JALAUKAVACHARANA ON UTTANA VATARAKTA: A CASE STUDY

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KEYWORDS: *Vatarkta, Gout, Chikitsa, Raktamokshana.*

ABSTRACT

As described in Ayurveda there is simultaneous vitiation of *Vata* and *Rakta* along with *Rasa, Rakta, Mamsa, Meda* and *Asthi Dhatu dushti* in *Vatarakta vyadhi*. *Vatarakta* is correlated with gout in modern medical sciences. Gout is the true crystal deposition disease characterized by pain and swelling of 1st metatarso phalengial joint initially followed by other joints with an abnormal elevation of urate levels in the body either due to overproduction or under secretion or both. *Chikitsa* of *Vatarakta* includes *Shaman* (internal medicines), *Virechana* (purgation), *Basti* (enema), and *Raktamokshana* (bloodletting) as per Ayurvedic texts. **Main clinical findings:** In this study pt with acute gouty arthritis was correlated with *Uttana Vatarakta*, with symptoms like swollen lt. great toe, hot, red shiny, and extremely painful small joint. **Diagnosis:** As per *Samprapti* of *Uttana vatarakta, Mrudu* and *Drava Guna* of *Pitta Dosha* are vitiated to form *Mrudu Shopha* over the big toe. So as symptoms presented in this case study. **Intervention:** According to *Sushrutacharya Jalaukavacharan* is applicable to *Mrudu Shopha*. So, in the present study *Jalaukavacharan* was done on *Shopha* along with *shaman Aushadhis* like *Kaishore Guggulu, Guduchyadi Kashaya, Kokilaksha Kwatha* given internally to the patient. **Outcome and conclusion:** It has been observed that above treatment relieved the symptoms like localised *Shopha, Raktavaivarnya, Shool* and *Daha*.

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INTRODUCTION

When a person takes excessive food and exposes to lifestyle activities which aggregates *Vata* and also is used to long distance rides, the *Vata* gets aggravated by its own causes. On the other hands *Rakta* gets vitiated by consumption of *Lavana, Amla, Katu Kshara ras dravyas*. The vitiated *Rakta* quickly blocks the passage of *Vayu* and interferes with its smooth movements. The *Vata* whose passage is blocked by *Rakta* further undergoes vitiation and further contaminates *Rakta*. The *Rakta dhatu* vitiated by *Vayu* later burns the whole blood in the body. This *Dosha Dushya snanga* leaves its place and gravitates towards foot. This vicious amalgamation of *Vata* and *Rakta* is called *Vatarakta*. *Vatarakta* [1] is also known as *Khuda roga Vata Balasa, Vatarsha* and *Adhya vata* [2]. *Vatarakta* is correlated with gout in modern medical sciences. Gout is the true crystal deposit in disease characterized by pain and swelling of 1st metatarso phalengial joint initially

followed by other joints with an abnormal elevation of urate level in the body either due to over production or under excretion or sometimes both. The symptoms first manifested in small joints of foot. Later it gradually spreads towards the upper portion of the body causing pain and numbness, itching etc. in all the joint of hands and foot. In the present case study, patient presented with acute gouty arthritis with an acute attack which started at night. The patients great toe was swollen, hot, red, shiny and extremely painful. Ankle joint was also swollen and pt had morning stiffness and difficulty during walking^[3]. The symptoms were correlated with *Uttana Vatarakta*.

In Ayurveda a detailed description of *Vatarakta Chikitsa* is discussed in all text along with line of treatment being *Shodhana, Shaman* and *Bahya Chikitsa*. Many therapeutic modalities and different preparations are mentioned by our

ancient Acharyas^[4]. The study was undertaken to clinically evaluate effect of *Jalaukavacharan* along with other Ayurvedic medicines.

AIMS AND OBJECTIVES

- 1) To study the combined effect of *Jalaukavacharan* and other Ayurvedic medication on *Vatarakt*.
- 2) To study the effect of Shaman *Chikitsa* on *Vatarakta*.

MATERIALS AND METHODS

Place of Study

IPD of department of Kayachikitsa, Shri KR Pandav Ayurvedic College and Hospital Bahadura, Nagpur.

Case Report

A 45 yr old female patient who was normal before 10 days came in OPD with complaints of Lt. big toe swelling since 6-7 days
Redness and tenderness since 6-7 days
Difficulty in walking since 6-7 days
Angushtha mula pradeshi *Arakta Vaivarnya* since 6 days.

Angushths mula pradeshi *Shula Daha Shotha* (acute gouty arthritis).

Clinical findings

Patient had no such previous history of gouty arthritis.

k/c/o Systemic hypertension since 6-7 yrs with tab stamlo on oral medication on and off (irregular).

H/O operated fibroadenoma before 3 yrs.

Operated ovarian cyst before 18 yrs

Pts vitals were within normal limits. *Ashtavidha Pariksha*, *Dashavidha Pariksha* was normal. Her personal *Ahar vihar* was normal. She mostly took *Vata* and *Pitta prakopak ahar* with no any addiction. Bowel habits, micturation, appetite, sleep, were normal. Systemic examination was within normal limits.

Lab Investigation

Blood investigation--- normal

Radiograph of Lt. foot -normal

Sr. uric acid levels---24/8/17—5.8 mg/dl

According to patients complaints and all over examination diagnosed as per Ayurvedic point of view as *Uttana Vatarakta*.

Samprapti ghatak

- **Dosha-Vata** (*Vyana*), **Pitta** (*Pachak, Ranjak*), **Khapha** (*Shleshaka*)
- **Dushya-Rasa**, **Rakta**
- **Strotas-** *Rasa Vaha, Rakta Vaha, Anna Vaha*
- **Agni-Madhyam**
- **Strotodushti Prakara-Sanga**
- **Rogmarga** -*Madhyam (Sandhi Pradesh)*

Table 1: Treatment Plan

Sr. no.	Treatment/ method	Drug used /material	Dose	anupana
1.	<i>Amapachana</i>	<i>Amapachaka Vati</i>	250mg BID	With luke warm water before food for 3 days
2.	<i>Shaman Aushadhi</i>	<i>Kaishore Guggulu</i>	250mg BID	With luke warm water After food
		<i>Aguduchyadi Kashaya</i>	15ml BID	With luke warm water After food
		<i>Kokilaksha sadhit</i> freshly prepared <i>Kwatha</i>	15ml BID	After food
3.	<i>Raktamokshana</i>	With <i>Jalauka</i> done every Alternate day at the tophii site.		
4.	<i>Pathya</i>	<i>Karavellaka</i> , ginger, <i>Methika</i> , <i>Patola</i> , <i>Kushmanda</i> . Low fator fat free dairy products Drink plenty of fluids, particularly water.		
5.	<i>Apathya</i>	Avoid <i>Masha</i> , <i>Kuluththa</i> , <i>Bringal</i> , <i>Dadhi</i> , <i>Ikshu</i> . Sleep during day time, expose to heat, excessive alcohol and meat.		

Lab Investigation: serum uric acid level before and after the treatment was investigation.

- **Vyakti Sthana**—*Vama Angushtha Mula Sandhi*
- **Bhed**—*Uttana*
- **Sadhya-Sadhyata**—*Sukha Sadhya*

- **Awastha—Nava Vastha**

Treatment Plan

As swelling above the lt. big toe was *Mrudu shopha* we decided to do *Raktamokshana* with *Jalauka*, along with *Shaman aushadhis* [5].

Assessment Criteria: The state of the disease *Vatarakta* is determined by adopting the standard methods of scoring for subjective, objective and investigative criteria before and after the treatment.

Table 2: Subjective Parameters

	Parameters	Findings	scoring
1	<i>Sandhishoola</i>	None	0
		Mild	1
		Moderate	2
		Severe	3
2	<i>Sandhigraha</i>	None	0
		Mild	1
		Moderate	2
		Severe	3
3	<i>Sandhishotha</i>	None	0
		Mild	1
		Moderate	2
		Severe	3
4	<i>Vaivarnya</i>	None	0
		Mild	1
		Moderate	2
		Severe	3
5	<i>Daha</i>	None	0
		Mild	1
		Moderate	2
		Severe	3
6	<i>Sparshasahatva</i>	None	0
		Mild	1
		Moderate	2
		Severe	3

OBSERVATION AND RESULTS

Assessment according to subjective parameters was done before and after the treatment was done and results are as follows.

The table shows that there is significant 75% to 100% relief in all signs and symptoms of *Vatarakta* which means the selected management is effective in acute gouty arthritis.

Lab Investigation

Serum uric acid level - 5.8 mg/dl (Date: 24/08/2017)

Serum uric acid level - 4.3 mg/dl (Date: 14/09/2017)

Table 3: Before and After Treatment Assessment

Sr. No.	Sign and Symptom	Before Treatment	After Treatment
1	<i>Sandhi shoola</i>	3	1
2	<i>Sandhigraha</i>	3	1
3	<i>Sandhi shotha</i>	3	0
4	<i>Vaivarnya</i>	3	0
5	<i>Daha</i>	1	0
6	<i>Sparshasahatva</i>	2	0

DISCUSSION

Obstruction in the *Raktavaha Strotasas* causing hindrance to the normal movements of *Vata dosha* is the root pathology behind the manifestation of the illness *Vatarakta*. Here the objective of the entire treatment is to eliminate the *Margavrana*. In this situation one has to go for *Apatarpan*. *Kaishor Guggulu* and *Guduchyadi Kashaya* are classical preparation of *Bhaishajya Ratnavali* and are indicated in *Vatarakta Chikitsa* [6], the combination and properties of the drugs in both the preparation shows efficiency of the *Yogas* in clearing *Margavarana*. In both preparations *Guggulu*, *Guduchi* and *Triphala* are the chief ingredients.

Guduchi and *Kokilaksha* both act as *Vyadhipratyanik dravyas*. The *Rookashana* property of the drugs like *Danti*, *Triphala*, *Vidanga*, and *Guggulu* are believed to act on abnormally accumulated *Kapha Dosha* and *Medo Dhatu*. *Tikna* and *Ushna* drugs like *Pippali*, *Shunthi*, *Marich* and so on are present in *Kaishor Guggulu* and *Guduchyadi Kashaya* are stated to have positive action of *Strotovishodhana* [7].

In this acute gouty arthritis similar to *Uttana Vatarakta Mrudu* and *Drava guna* of *Pitta dosha* are vitiated which is responsible for *Mrudu shopha* over the big toe. According to *Sushrut acharya Raktamokshana* with the help of *Jalauka* is applicable to *Mrudu shopha*. Similarly there is *Pitta raktanubandhi vata prakopa* also called as *Avaranajanya vataprakopa*, *Jalauka vacharana* is indicated.

In this patient *Jalaukavacharana* was done on every alternate day which relieved the symptoms like localized *Shopha*, *Raktavaivarnya*, *Shoola* and *Daha*.

CONCLUSION

Hence it can be concluded that *Jalaukavacharana* done on toffii site along with *Shaman aushadhis* like *Kaishor Guggulu*, *Guduchyadi*

Kshaya, *Kokilaksha sadhit* freshly prepared *Kwatha* is effective in the treatment of acute gouty arthritis.

As this is the single case study the same intervention can be used in larger population to see the efficacy of the above said combination therapy.

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