"A Clinical Study of *Pippalyadi gana kashaya*'efficacy in *Amavata* (R.A)"

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ABSTRACT:

Amavata is among the most common health complaints in medical practice specially In females and most prevalent of all musculoskeletal disorders. Recent studies have shown that womern are three times more affected that men from amavata (RA). It is the most common form of chronic inflammation affecting approximately 1% of adult population. In this modern era of improper lifestyle and unstable diet pattern, it is the most neglected part of life where one gives least importance to the timing, duration and quality of dietary habit and pattern. Mandagni plays an important role in causing ama formation and it is sensitive to disturbances due to many internal and external influences like diet and enviormental factors. In modern science, amavata is correlated with Rheumatoid Arthritis (RA). it is a chronic autoimmune inflammatory systemic disease. Modern DMARDs, Steroids are immune depressent due to its patients have hazardous withdrawal effects.

Keywords: *Amavata*, *Ama*, *Mandagni*, Rhumatoid Arthritis.

Sanjeevani Darshan

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How to cite article:

Byomesh Upadhyay, Aruna Ojha, A Clinical Study of Pippalyadi gana kashaya'efficacy in Amavata (R.A)

Sanjeevani Darshan- National Journal of Ayurveda & Yoga 2023;1(2): 22-28:

http://doi.org/10.55552/SDNJAY.2023.1203

INTRODUCTION

Amavata is among the most common health complaints in medical practice specially In females and most prevalent of all musculoskeletal disorders. Recent studies have shown that womern are three times more affected that men from amavata (RA). It is the most common form of chronic inflammation affecting approximately 1% of adult population. In India as per calculations almost 10 lakh people suffer from this type of arthritis.

In this modern era of improper lifestyle and unstable diet pattern, it is the most neglected part of life where one gives least importance to the timing, duration and quality of dietary habit and pattern. Mandagni plays an important role in causing ama formation and it is sensitive to disturbances due to many internal and external influences like diet and enviormental factors. In modern science, amavata is correlated with Rheumatoid Arthritis (RA).it is a chronic autoimmune inflammatory systemic disease. Modern DMARDs, Steroids are immunodepressent due to its patients have hazardous withdrawal effects.

Objective of the study: To clinically evaluate the effect of Pippalyadi gana kashaya in patients of Amavata (RA).

Information of the patient:-

A 53 year old female patient presented to the outpatient department of shri khudad dungaji government ayurveda hospital at Raipur with a history of pain and swelling on the B/L knee,wrist & ankle joint also pain and mild swelling in PIP & MCP Joint followed by morning stiffness,constipation,lethargy,increased of appetite since 15-20 years.

OPD:- 50403 START OF MEDICINE DATE:-20/06/2023

Name:-xxx Age:- 53, Sex -Female, Address:-Pandari,Raipur C.G

Religion:- Hindu, Education:- High School

Marital Status:-Un- married, Socio – economic status:-Middle Class

Occupation:-Housemaker, Habitation:-Urban

GENERAL EXAMINATION:-

B.P	110/70 mmhg	P/R	78/min
Height	5.4 feet	Weight	73 kg

Ashtavidha pariksha:-

Nadi (Pulse)- VP, Mutra (Urine)- prakruta, Mala (Stool)-Sama/Malbaddhata/pugent

smell, Jivha (Tounge)-Clear, Shabda (voice)-Prakrit

Sparsh (Skin)-Ruksha, Drika (Eye)-Samanya, Akriti (General Apearance) - Sthula

Dashvidha pariksha:-

Prakriti-VK, Vikriti- Dosha-VPK, Dushya-rasa,rakta,asthi, Sara-Avara, Samhanana-Pravara, Pramana-Madhyama, Satmya-Madhyama, Satva-Madhyama, Ahara Shakti-Avara

Vyayam Shakti – Avara, Vaya-Madhyam.

Any medications: - Previously NSAIDs, some ayurvedic therapies like chincha vasti, sinhanad guggulu, rasna saptaka kwatha etc.

Family history:-No

Clinical findings:-

Subjective parameters:-

COMPLAINT	Before treatment			After treatment				
Sandhishoola								
(Pain)								
	Joint	Righ	Left	Duration		Joint	Right	Left
		t				PIP	A	A
	PIP	P	P	15 yrs		MCP	A	A
	MCP	P	P	15 yrs		WRIST	A	A
Sa	WRIST	P	P	15 yrs		ELBOW	A	A
94	ELBOW	P	P	138 4		SHOULDER	A	A
Inter	SHOULD	P	Purr	3 yrs	Ay	KNEE da 8	Mild	Mild
	ER						Present	Present
	KNEE	P	P	10 yrs		ANKLE	Mild	Mild
	ANKLE	P	P	10 yrs			Present	Present
	Bilateral/Polyarthritis,pain increase gradually,Burning type of pain and pain is going worse by cold weather. VAS scale – 6				is	VAS scale – 2		

(Swelling) Joint DIP PIP MCP WRIST ELBOW SHOULDER KNEE ANKLE ANKLE Sandhigraha (Stiffness) Morning stiffness the day after 2 h ssociate complaints - Loss of a - Utsahaha - Gaurava	Right P P 19 29 41 29 ss 30-35	P P 18.5 28 41.5 28.5	Joint Right Left DIP
PIP MCP WRIST ELBOW SHOULDER KNEE ANKLE ANKLE Sandhigraha (Stiffness) Morning stiffness the day after 2 h ssociate complaints - Loss of a - Utsahaha	P P 19 29 41 29	P 18.5 28 41.5 28.5	DIP A A PIP A A MCP A A WRIST 18 18 ELBOW 28 28 SHOULDER KNEE 40 40
MCP WRIST ELBOW SHOULDER KNEE ANKLE Sandhigraha (Stiffness) Morning stiffness the day after 2 h ssociate complaints - Loss of a - Utsahaha	P 19 29 41 29	P 18.5 28 41.5 28.5	MCP A A WRIST 18 18 ELBOW 28 28 SHOULDER KNEE 40 40
WRIST ELBOW SHOULDER KNEE ANKLE Sandhigraha (Stiffness) Morning stiffnest the day after 2 h ssociate complaints - Loss of a - Utsahaha	19 29 41 29	18.5 28 41.5 28.5	WRIST 18 18 ELBOW 28 28 SHOULDER KNEE 40 40
ELBOW SHOULDER KNEE ANKLE Sandhigraha (Stiffness) Morning stiffness the day after 2 h ssociate complaints - Loss of a - Utsahaha	29 41 29	28 41.5 28.5	ELBOW 28 28 SHOULDER KNEE 40 40
SHOULDER KNEE ANKLE Sandhigraha (Stiffness) Morning stiffness the day after 2 h ssociate complaints - Loss of a - Utsahaha	41 29	41.5	SHOULDER KNEE 40 40
Sandhigraha (Stiffness) Morning stiffness the day after 2 h	29	28.5	KNEE 40 40
Sandhigraha (Stiffness) Morning stiffness the day after 2 h	29	28.5	
Sandhigraha Morning stiffnes the day after 2 h ssociate complaints - Loss of a - Utsahaha			ANKLE 29 28
(Stiffness) the day after 2 h ssociate complaints - Loss of a - Utsahaha	ss 30-35	' • ,	
ssociate complaints - Loss of a - Utsahaha		minutes	t of Morning stiffness – 10 minutes
- Utsahaha	ours it is	s reduce.	
- Mild jwa - Bahumu - Nidra vij - Agngam - Alasya	ani ta, ara trata paryaya		- Normal appetite - Utsaha improved - Laghuta - Mild jwara absent - Bahumutrata – mild present - Nidra samyaka - Agngamarda – absent - Alasya – absent - Increased Satva,Bala,Courage,Vyayam shakti.

CLINICAL RESEARCH

Kwatha of Pippalyadi gana kashaya :- 50 ml tid at 6 AM,1PM & 6 PM empty stomach.

Duration of Treatment :-90 days.

Method of preparation administration of Pippalyadi gana Kashaya:-

15 grams of tha pippalyadi gana Kashaya, 600-700 ml of jala was taken in a bowl and heated on mandagni. ardhansa paka was obtained and confirmed.

INTERVENTION

Patients were administered with Hariataki churna 5 grams before sleep at night for 7 days with leukworm water and Chitrakadi vati 250 mg BD after meal. After that Pippalyadi gana Kashaya for 3 months before meal three times in a day.

Ingredient of Pippalyadi Gana Kashaya:-

पिप्पलीपिप्पलीमूलचाव्यचित्रकश्रृंगबेरहस्तिपिप्पलीहरेणुकैलाजमोदेन्द्रयवपाठाजीरकसर्षपमहा निम्बफलहिंगूभार्गीमधुरसाऽतिविषावचाविडंगानि कटुरोहिणी चेति II

पिप्पल्यादि कफहर:प्रतिश्यायानिलारुचि:निहान्यदीपनो गुल्मशुलघ्न च आमपाचन:11

(सुश्रुत सूत्र स्थान 38/22)

Objective parameters:-

Investigation	Before trial	After trial
Hb%	10.7 gm%	10.4 gm%
ESR	162 mm/hr	60 mm/hr
RA factor	173.2 IU/ml	90.0 IU/ml
CRP	20.6 mg/dl	22.2 mg/dl
DAS criteria (DAS 28)	6.5	4.69
ACR/EULAR criteria	Positive	Positive
Aam pariksha	8 (Moderate)	4 (Mild)
Agni Assesment	Mandagni	Samagni
Weight	73 kg	71 kg
BMI	27.62 kg/m2	26.4 kg/m2
BMR	1396.74 K/Cal	1309 K/Cal
Temp.	99.F	Normal

DISCUSION

The statistically significant relief was observed in cardinal symptoms of Amavata (RA) in the patient. This proves that the drug are effective in alleviating the cardinal symptoms of RA. The drug are having Vata pacifying properties due to their Ushna (digestive and metabolism stimulating) and Tikshna (penetrating) properties. It would have acted on vitiated Vata and helped to relieve in pain of the affected joints. Stiffness and tenderness are produced due to the presence of Ama.the drug have Agnidipana (enhance digestive power) and Srotoshodhaka (remove obstruction of the micro channels) properties, which stimulates digestion and checks, further Ama formation. Due to this relief was observed in the symptoms of body ache, loss of appetite, laziness, heaviness of body, feverish sensation and numbness in the extrimities. Pain in joints is the result of Vata vitiation. The drug is having Vata pacifying properties due to their Ushna and Tikshna properties and thus relieved this symptom.

CONCLUSION

As per the Ayurveda in chronic stage of disease Agni Bala (digestive capacity) of the patients and Vyadikshamatva (immunity) of the patients are reduced. Hence, it was difficult to achieve better result with short duration of therapy in such cases. Most of the ingredients of Pippalyadi gana Kashaya have analgesic and anti-inflammatory actions, and hence, statistically significant improvement was observed in symptoms of Amavata (RA) and associated complaints, especially in those cases of Amavata (RA) who had less chronicity of the disease. Hence, it can be concluded that Pippalyadi gana kashaya is effective drugs to manage acute and moderate cases of Amavata (RA).

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Source of Support : None Declared

Conflict of Interest: Nil

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International Journal of Ayurveda & Yoga