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"AYURVEDIC APPROACH OF VATARKTA W.S.R. TO GOUT : A REVIEW"

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ABSTRACT:

Ayurvedic thought holds that diet is the foundation of both the body and disease. Whereas a healthy diet builds the body, diseases are caused by the opposite. In India, the fast food culture, hectic lifestyle, and rapid modernisation that are common in cities are also encroaching on rural areas. Because of their altered dietary and living habits, people nowadays are vulnerable to a variety of diseases. Among these metabolic disorders is vatarakta.Stiffness, joint swelling, and pain are among the symptoms of Vatarakta, a chronic illness marked by joint and systemic pain. Both Vata dosha and Rakta dhatu are vitiated in this disease; vitiated Rakta obstructs aggravated Vata, which causes more imbalance and aggravates Vata dosha. According to contemporary science, it shares signs and symptoms with gout. A condition of purine metabolism, gouty arthritis is an inflammatory reaction to the crystals of monosodium urea monohydrate (MSUM) that develop as a result of hyperuricaemia.

Aims & Objectives: Aim of article to provide information about Vatrakta w.s.r. Gout.

Materials & Methods : Ayurvedic Samhitas ,modern literature , journals , various websites , review articles have been analyzed for study .

Conclusion: This paper presents a comprehensive review of Vatarakta from both Ayurvedic and modern medical perspectives.

KEY WORDS:- Vatrakta, Vata, Rakta, Dhatu

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INTRODUCTION

WHO defines health as “a state of complete physical, mental & social well-being and not merely the absence of disease or infirmity”. The health of an individual solely depends on his diet and lifestyle. Ayurveda is more than a medical science; it is a culture or lifestyle, and one should adopt its applied aspects for one's well-being.(1)

The health of an individual relies on the harmony between Atma, Indriya, and Mana. Maintaining the balance of Doshas (Doshasamya), Agni (Agnisamya), and Dhatus (Dhatusamya) is also essential for sustaining normal health. Joint-related illnesses impact a significant portion of the global population, and such health concerns have risen in recent times due to an unbalanced lifestyle. Vatarakta is one example of a joint disorder.(2)

The word 'Vatrakta' is made up of two words, 'vata' and 'rakta'.(3) Vatarakta is a painful condition. The condition develops suddenly and reoccurs after treatment. When aggravated Vata is obstructed by aggravated Rakta, this obstructed Vata again vitiates the Rakta. This pathological state is known as Vatashonitam or Vatarakta. VataRakta is also known as Khudaroga, Vata-balasa, Vatashra & Adhyavata.(4)

Acharya Sushruta mentioned that this disease can start from Pada Moola (feet), and sometimes it can also start from Kara Moola (hands).(5)

Gout is a crystal deposition disease marked by pain and swelling in the first metatarsophalangeal joint, which is often followed by involvement of other joints. This condition is associated with elevated levels of urate in the body, which can result from excessive production, insufficient excretion, or a combination of both. It can also be defined as the pathological reaction of the joint or periarticular tissues to the presence of non-sodium urate monohydrate crystals; clinically, this may present as inflammatory arthritis, bursitis, tenosynovitis, cellulitis or as nodular tophaceous crystal deposits.(6)

In contemporary medicine, the treatment options include NSAIDs, colchicine, and glucocorticoids; however, these do not alter the progression of the disease and often come with adverse effects. Ayurveda provides an extensive discussion on the treatment of Vatarakta in all its texts, outlining the therapeutic approach, which includes Shodhana, Shaman, and Bahyachikitsa. Many therapeutic modalities and different preparations are mentioned by our ancient Acharyas for Shamana, Shodhana (7) and the Bahyachikitsa.(8)

INCIDENCE

Incidence of gouty arthritis is 0.2-2.5 per 1000. Overall prevalence is 2-26 per 1000. (9) Gout is rare in children and premenopausal women in India. Out of the affected population, males

are more common, while females of postmenopausal age are at more risk.

AIMS AND OBJECTIVES

To review the existing literature in Ayurvedic texts and its relationship with contemporary studies on gout.

To analyse Vatarakta in relation to gout.

To evaluate the impact of diet and lifestyle on the prevention of Vatarakta.

MATERIALS AND METHODS

The foundational and conceptual materials were gathered from Ayurvedic classics, including Bruhattrayi and Laghutrayi, along with their available commentaries, research papers, and journal articles.

NIDAN (CAUSATIVE FACTOR)

The causes of Vatarakta can be broadly categorized into the following etiological factors.

1. Aharaja
2. Viharaja
3. Mansik

Aharaja Nidana[10]

Consuming large amounts of foods and beverages having Lavana, Amla and Katu rasa or Snigdha, Ushna, Klinna, Ruksha, Ushna, Vidahi and Ksara in quality.

Overindulgence in salty, sour, spicy, greasy, hot, and raw foods.

Eating the flesh of animals found in aquatic environments and marshy areas.

Overindulgence in Kulatha (Macrotyloma uniflorum), Masha (Vigna mungo), Nishpavshaak (Dichous lablab), Pinyak (Sesamum Indicum), leafy greens, and sugarcane (Saccharum).

Excessive consumption of curd, Aranala (kanji), Sauvirak, Sukta (vinegar), Takra (buttermilk), alcoholic beverages, and wine.

Viharajanidana:[11]

Intense anger, Divaswapan, Ratrijagran, Abhighata, Ashuddhi, Achankramanasilata.

Traveling on elephants, horses, and camels.

Overindulgent swimming, excessive sexual activities.

Mansiknidana:

Akrodha, Acinta and Harshanityatva

Agantuja Nidana:

External or outside elements that lead to illness encompass physical injuries (Abhighata), wounds, contact with hazardous substances, environmental pollutants, and pathogens. Such external factors disrupt the body's harmony, resulting in imbalances among the doshas. Changes in the environment and seasons can also serve as Agantuja factors by intensifying dosha imbalances.

SAMPRAPTI

The concept of Samprapti encompasses the complete journey of disease development, beginning with the initial interaction between a causative factor and the body and culminating in the appearance of disease symptoms. It illustrates the sequence a disease undergoes, which includes the disturbance of Doshas (biological humours) and the route through which the disease advances. This idea is akin to the contemporary medical term pathogenesis.

Nidana Sevana i.e. Sevana of Vata & Rakta Prakopa Ahara and Anya Hetus

↓

Sukshamatva and Saratva of Vayu with Dravatva and Saratva of Rakta

↓

Vitiation & Dushti of Vata & Rakta

↓

Prasara of Dosha (Circulates over the body via Sira-marga)

↓

Obstruction of the path of Vata by Dushita Rakta

↓

Mutual obstruction of path by each other

↓

Sthana Samshraya (Sandhi Sthana specifically Kara-Pada Angula sandhi) Vitiated Vata and Rakta stagnated at Sandhi and thereafter the vitiated Vata and Rakta along with Pitta etc. produce different type of Vedana

↓

Purvaroopa:[12]

Purvarup a	**Chara ka Samhit a (C.S.)**	**Sushru ta Samhit a (S.S.)**	**Ashtan ga Hriday a (A.H.)**	**Ashtan ga Sangra ha (A.S.)**	**Madha va Nidana (M.N.)**	**Bhava Prakas ha (B.P.)**	**Yogaratnak ara (Y.R.)**
Atisweda	+	-	+	+	+	+	+
Asweda	+	-	+	+	+	+	+
Karhnyata	+	-	-	-	+	+	+
Sparshgnat a	+	-	-	-	+	+	+
Ksate Ati Ruk	+	-	-	-	+	+	+
Sandhi shaithilya	+	+	+	+	+	+	+
Alasya	+	-	-	-	+	+	+
Sadana	+	-	+	+	+	+	+
Pidakodga ma	+	-	-	-	+	+	+
Nistoda	+	+	+	+	+	+	+
Spurana	+	-	+	+	+	+	+
Bheda	+	-	+	+	+	+	+
Gourava	+	+	+	+	+	+	+
Supti	+	+	+	+	+	+	+
Kandu	+	-	+	+	+	+	+

Sandhi Ruk	+	-	-	-	+	+	+
Vaivarnya	+	+	+	+	+	+	+
Mandalotpatti	-	+	+	+	+	+	+
Sheetalata	-	+	-	-	-	-	-
Osha	-	+	-	-	-	-	-
Daha	-	+	+	+	+	+	+
Shopha	-	+	-	-	-	-	-
Twak Parushya	-	+	-	-	-	-	-
Sira Dhamani Spandana	-	+	-	-	-	-	-
Sakti Dourbalya	-	+	-	-	-	-	-
Ati Slakshna Sparsha	-	-	+	+	+	+	+
Khara Sparsha	-	-	+	+	+	+	+
Shrama	-	-	+	+	+	+	+
Vrana Adika Sula	-	-	+	+	+	-	-

TYPES OF VATARAKTA:

1. Raktadhika Vatarakta
2. Vatadhika Vatarakta

3. Pittadhika Vatarakta

4. Kaphadhika Vatarakta

Two types of Vatarakta are explained by Acharya Charak

1. Uttana Vatarakta
2. Gambhira Vatarakta

S. N	**Types of vatarakta**	**C.S**	***S S***	***AH***	***AS***	***MN***	***HS***	***Bh.P***	***YR***
A	According to site of Origin-								
1.	UttanaVatarakta	+	-	+	+	+	-	-	-
2.	GambhiraVatarakta	+	-	+	+	+	-	-	-
3.	UbhayashritaVatarakta	+	-	-	-	+	-	-	-
B	Acc. To Dosha-								
1.	VatajaVatarakta	+	+	+	+	+	-	+	+
2.	PittajaVatarakta	+	+	+	+	+	-	+	+
3.	KaphajaVatarakta	+	+	+	+	+	-	+	+
4.	Vata-PittajaVatarakta	+	+	+	+	+	-	+	+
5.	Pitta- KaphajaVatarakta	+	+	+	+	+	-	+	+
6.	Vata-KaphajaVatarakta	+	+	+	+	+	-	+	+
7.	RaktajaVatarakta	+	+	+	+	+	-	+	+
8.	Sannipataja Vatarakta	+	+	+	+	+	-	+	+

UTTANA VATARAKTA

This is the external manifestation of Vatarakta, where the signs mainly show on the skin. The impacted region exhibits discolouration that may appear blackish, red, or coppery brown. Common sensations include itching, a burning feeling, stretching, and sharp pain. Other symptoms can involve twitching and tightening of the skin around the joints that are affected.

GAMBHIRA VATARAKTA

This more profound variation of Vatarakta impacts internal tissues like bones and bone marrow, leading to significant internal symptoms. It is characterised by pronounced swelling, rigidity, firmness, and intense pain deep within the joints. The skin may display a dark or coppery hue, accompanied by burning, sharp pain, twitching, and inflammation. Other

symptoms might involve gastrointestinal discomfort.

SAMANYA LAKSHANA[13]

S. No.	*Rupa*	*CS*	*SS*	*AS*	*AH*	*MN*	*HS*	*BP*	*YR*
A-I	**On the basis of affected site uttana vatarakta**								
	Kandu	+	-	+	+	+	-	-	-
	Daha	+	-	+	+	+	-	-	-
	Ruka (Pain)	+	-	-	-	+	-	-	-
	Ayama	+	-	+	+	+	-	-	-
	Toda (Pricking pain)	+	-	+	+	-	-	-	-
	Sphurana	+	-	+	+	-	-	-	-
	Akunchana	+	-	-	-	-	-	-	-
	Anvita	+	-	-	-	-	-	-	-
	Vivarnata	+	-	+	+	+	-	-	-
	TamraTvaka	+	-	+	+	+	-	-	-
	Osha	-	-	+	+	-	-	-	-
2.	**Gambhira vatarakta**								
	Svathu	+	-	+	+	+	-	-	-
	Stabdhata (Stiffness)	+	-	-	-	-	-	-	-
	Arti (Pain)	+	-	-	-	+	-	-	-
	Tamratwak vivarnata	+	-	-	-	+	-	-	-
	Shyavata	+	-	-	-	+	-	-	-
	Daha	+	-	+	+	+	-	-	-
	Toda	+	-	-	-	+	-	-	-
	Sphurana	+	-	-	-	+	-	-	-
	Paka	+	-	+	+	+	-	-	-
	Granthi	-	-	+	+	-	-	-	-
	Chhedanvat Peeda in Sandhi, Asthi	-	-	+	+	+	-	-	-
	Khanjata	-	-	+	+	+	-	-	-
	Pangulya	-	-	+	+	+	-	-	-
B.	**According to dosha predominance**								
1.	**Vataja vatarakta**								
	Ayama (Mainly in sira)	+	-	-	-	-	-	+	+
	Shoola	+	+	+	+	+	+	+	+
	Sphurana	+	-	+	+	+	+	+	+
	Toda (Pricking pain)	+	+	+	+	+	+	+	+

	Shotha of Shyava /bluish colour	+	-	+	+	-	+	+	+
	Change in colour of Shotha and vridhhi or hani	-	+	+	+	+	-	+	+
	Ruksha	+	-	+	+	+	-	+	+
	AnguliDhamni Sandhi sankocha	+	-	+	+	+	-	+	+
	Angagraha (Stiffness in body)	+	-	+	+	+	-	+	+
	ShitaDvesha	+	-	+	+	+	-	+	+
	Kunchana	+	-	-	-	-	-	-	-
	Stambhana	+	-	+	+	+	-	+	+
	Vepathuavinas	-	-	+	+	+	-	+	+
	Supti (Numbness)	-	-	+	+	+	-	+	+
	Shosha (Wasting)	-	+	-	-	-	+	-	-
	Vaivarnya (Discolouration)	-	-	-	-	-	+	-	-
	Mandaloutpatti	-	-	-	-	-	+	-	-
	SparshaAsahyata (Tenderness)	-	-	+	-	-	-	-	-
	Sparshajanya Harsha	-	-	+	-	-	-	-	-
2.	**Pittaja vatarakta**								
	Vidaha	+	+	+	+	+	+	+	+
	Vedana	+	+	+	+	+	-	+	+
	Murchha	+	-	+	+	+	-	+	+
	SvedaAdhikya (Excessive sweating)	+	-	+	+	+	-	+	+
	TrishnaAdhikya	+	-	+	+	+	-	+	+
	Mada (Narcosis)	+	-	+	+	+	-	+	+
	Bhrama (Giddiness)	-	+	-	-	-	-	-	-
	Raga (Redness)	+	+	-	-	-	-	+	+
	Paka	+	+	+	+	+	-	+	+
	Bheda	+	-	-	-	-	-	+	+
	Shosha	+	-	+	+	-	-	-	-
	Osha	-	+	-	-	-	-	+	+
	Sammoha	-	-	+	+	+	-	+	+
	SparshaAkshmatvama	-	+	+	+	+	-	+	+
	Ubhaya Pada Mriduta	-	+	-	-	-	-	-	-
3.	**Kaphaja vatarakta**								
	Staimitya	+	-	+	+	+	-	+	+
	Gauravama	+	-	+	+	+	-	+	+
	Sneha Snigdhata	+	-	+	+	+	-	+	+
	Supti	+	-	+	+	+	-	+	+
	Manda Vedana	+	-	+	+	+	-	+	-
	Shitalta	+	+	+	+	-	-	+	+
	Kandu	+	+	+	+	+	+	+	+

	Shwetata	+	-	-	-	-	-	-	-
	Stabdhata	+	-	-	-	-	-	-	-
4.	**Raktaja vatarakta**								
	Shwayathu	-	+	-	-	+	+	+	+
	Atiruka	-	+	+	+	+	+	+	+
	Toda	-	+	+	+	+	+	+	+
	Tamra Varna	-	+	+	+	+	+	+	+
	Chimchimayata	+	+	+	+	+	-	+	+
	Snigdha Ruksha Sama Abhava	+	-	+	+	+	-	+	+
	Kandu	+	-	+	+	+	-	+	+
	Kledata	+	-	+	+	+	-	+	+
5.	**Dvandaja vatarakta**								
	I. Vata-Pittaja	+	-	+	+	+	-	+	+
	II. Pitta-Kaphaja	+	-	+	+	+	-	+	+
	III. Vata-Kaphaja	+	-	+	+	+	-	+	+
6.	SannipatajaVatarakta	+	-	+	+	+	-	+	+

CHIKITSA Treatment:

Two types of Management of Vatarakta are:

1) Samanya Chikitsa (General management)

2) Vishishtha Chikitsa (Specific management according to classification)

Samanya Chikitsa

a) Shodhana Chikitsa — Antahparimarjana Chikitsa

b) Shamana Chikitsa

c) Rakta-mokshana Karma

d) Lepa, Avgahana, Seka Chikitsa --- Bahiparimarjana Chikitsa

Shodhana Chikitsa

- Snehan karma
- Virechan karma
- Basti

Snehana should be performed prior to shodhana in the beginning. After that, Virechana should be performed with either Ruksha Virechana or Sneh Dravyas. Virechana should be administered gently and naturally. Then, Anuvasana Basti and Niruha Basti should be

recommended frequently. The management of patients with uttana or ubhayasrita Vatarakta includes Seka (affusion), Aghyanaga (massage), Pradeha (the use of thick ointments), unctuousness and nourishment substances that do not produce a burning feeling.

Initially, settle for those with abundant Vata and strong and worn-out parts. Blood tainted by a blocked passage should be regularly drained in a smaller quantity to prevent Vata from worsening.

Rakta-Mokshana:[14]

Vatarakta is thought of as Raktapradoshaja vyadhi; Prakupitha Rakta causes Vata to Margavarodha. In this, the condition Raktamokshana is crucial.

function in alleviating Margavarodha and provides quick pain relief. As a result, in patients who don't experience issues such as Pranamamsakshaya, Pipasa, Jwara, Moorcha, We can choose Raktamokshana for conditions like Swasa and Kasa, depending on the Doshas in question.

Raktamokshana should be performed. in little amounts, following appropriate oleation With appropriate regard for Bala and Dosha to stop Vata from getting worse. It shouldn't be. completed under the conditions of Roukshya, Angaglani, and Vata predominance, because of The worsened Vayu causes blood depletion. Gambira shyavathu, Sthamba, Kampa, Sankocha, Glani, and Snayusiramaya.

Virechana:[15]

Patients with Vatarakta are subjected to oleation or snehana. treatment before Shodhana and Shamana Chikitsa. Prior to Virechana, patients receive Vatarakta and Snehana. Snehana is known as Vatarakta, which is categorised as referencing both. Ruksha Virechana and Snigdha. If the patient possesses Snigdha, Virechana is suggested for Ruksha Sharira. Patients with Snigadha Sharira are advised to take Ruksha Mridu Virechana Dravya. As Tikshna Virechana vitiates the Vata Dosha. Therefore, Mridu Virechana is indicated for patients with Vatarakta and always warranted.

Basti

Basti Karma is the most effective therapy for individuals with Vatarakta, as described in the Charaka Samhita. I apologise, but it seems the text you wanted to be rephrased was incomplete. Please provide the full text, and I will assist you by rephrasing it in formal language as requested. Types of Karma, Kala, and Yoga Basti, Basti Karma

includes both Asthapana and Anuvasana Basti. Following the administration of Virechana, the application of Basti Chikitsa is recommended. and is regarded as the best for balancing Vata.

Pathya – Apathya[16]

Pathya	Apathya
AAHARA - Cereals like the old Barley, Saali as well as shashtika Rice, leafy vegetables like – Kakamachi, Vastuka, Upodika Perwal, Soup of adhaki, Chanaka, Masura, Mudga added with Ghrita, Pratuda and Vishkira Mamarasa. Milk of cow, buffalo and goat. VIHARA – Use of soft pillows and bed. Warm poultices.	AAHARA- Masha, Kuluttha, curd, sugarcane, Brinjal, Dadhi, Ikshu, Panasa, meat, seafood, high purine vegetables such as asparagus, spinach, peas, cauliflower or mushrooms and alcohol. VIHARA – Avoid sleep during day time. Exposure to heat, Intercourse. Excessive exercises.

DISCUSSION

Vatarakta is a chronic inflammatory joint disorder characterised by the interplay of vitiated Vata and Rakta, leading to symptoms akin to gouty arthritis. The condition manifests as acute pain, swelling, redness, and burning sensations in joints, particularly affecting the lower limbs.

Modern lifestyle factors such as excessive purine-rich diets, alcohol consumption, and sedentary habits contribute to the exacerbation of Vatarakta. These factors lead to hyperuricemia, which is central to the pathogenesis of the disease.

CONCLUSION

Vatarakta, akin to gouty arthritis, is a multifactorial disorder that benefits from a comprehensive Ayurvedic approach. Early diagnosis and individualised treatment plans, incorporating both Shodhana and Shamana therapies, along with lifestyle modifications, are essential for effective management. Continued research and clinical trials are necessary to validate and refine these Ayurvedic interventions.

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