"EFFECT OF AYURVEDIC MANAGEMENT IN AMAVATA W.S.R TO RHEUMATOID ARTHRITIS- A CASE STUDY"

Dr Prathamesh R. Rawekar¹, Dr Suryaprakash K. Jaiswal², Dr Subhash B. Jamdhade³

- 1. PG scholar, Department of Kayachikitsa, D.M.M. Ayurved College Yavatmal
- 2. Guide & Professor, Department of Kayachikitsa, D.M.M. Ayurved College Yavatmal
- 3. HOD & Professor, Department of Kayachikitsa, D.M.M. Ayurved College Yavatmal

ABSTRACT:

Amavata is one of the most common diseases caused by Agni (indigestion) disorders. Formation of Ama (biotoxin) and distortion of Vata Dosha. Amavata is mainly formed due to the corruption of Vata along with the formation of Ama. Ama combines with Vata Dosha and occupies Slesmasthana (Astisandi), from which "Amavata" emerges. Amabata may be associated with rheumatoid arthritis due to similar clinical characteristics. Rheumatoid arthritis is an autoimmune disease that causes chronic symmetric polyarthritis with systemic involvement. Modern scientific treatment includes the use of NSAIDs (non-steroidal anti-inflammatory drugs). Long-term use of glucocorticoids, DMARDs (disease-modifying antirheumatic drugs), and immunosuppressants causes many side effects. Ayurveda treats this naturally and without any side effects. Acharya Chakradatta mentioned Chikitsa Siddhanta for the administration of Amavata, consisting of Langana, Swedana, and the use of drugs with the properties of Tikta, Katu Rasa and Deepana, Virechana, Snehapana and Basti. These methods are helpful for Amapachana, Vatashaman, Strotoshodhana and Sthana Balya. With the help of this Chikitsa Siddhanta, Amavata's case was successfully treated. After treatment, signs and symptoms improved significantly.

KEY WORDS:- amavata, bruhat Saindhvadi basti, Valuka pottali swed, kshar Basti

Corresponding Details:
Dr. Prathamesh Rawekar
At Chintamani Nagar, Near Sai Mandir, Darwha TQ Darwha Dist Yavatmal
Mobile No. 7709263996
E-Mail: rawekarprathamesh@gmail.com

How to cite article:



Dr Prathamesh R. Rawekar, Dr Suryaprakash K. Jaiswal, Dr Subhash B. Jamdhade

Effect of ayurvedic management in amavata w.s.r to rheumatoid arthritis— a case study, Sanjeevani Darshan
National Journal of Ayurveda & Yoga 2024; 2(1): 152-156: http://doi.org/10.55552/SDNJAY.2024.2120

INTRODUCTION

These days, the incidence of flax-related diseases is increasing due to modern people's lifestyles, irregular eating habits, busy daily lives, and stress. One of the most common diseases is Amavata. In Ayurveda, Madhavkar (700 AD) first mentioned Amavata as a separate disease. (1) The word Amavata has two components: Ama and Vata. These two components contribute to the illness and disease of Amavat. Amavata is a disease in which Amava is distorted by Vata Dosha. (2) The main causative factor of Amavata is formed due to disruption of digestive and metabolic mechanisms. Ama with amabata is limited to the tissues of the body and joints, causing pain, stiffness, swelling, soreness, etc., resulting in amabata disease (3).

The damaged Vata Dosha associated with Aam is called Amavata. Aamvata is one of the major diseases of Annavaha, Rasavaha and Asthivaha-srota. The basic pathophysiology of Amavata primarily involves Aam and Vata. Agnimandia is the root cause of all diseases (4).

The properties of Amabata are almost identical to those of rheumatoid arthritis. The disease is a chronic progressive autoimmune disease characterized by bilateral symmetric joint involvement with some systemic clinical symptoms. More than a million people worldwide suffer from rheumatic diseases, one in five of whom are severely disabled. The prevalence of rheumatoid arthritis in India is said to vary from 0.5 to 3.8 % in women and 0.15 to 1.35 % in men. (5) Onset of the disease is most common in people in their 40s and 50s, accounting for 80 % of cases. Patients whose disease occurred between the ages of 35 and 50. (6)

AIM AND OBJECTIVES

To study the ayurvedic management in Aamvata



MATERIALS AND METHODS

International Journal of Ayurveda & Yoga

METHOD: single case study

Type: prospective study, single case study

Place: PG department of Kayachikitsa L.K Ayurvedic Hospital, affiliated with D.M.M.

Ayurved College Yavatmal

Duration: 2 months

A CASE REPORT:

A 56 year Female patient came to the OPD of Kayachikitsa Department of L.K Ayurved Rugnalay with complaints of Both knee joint and shoulder joint pain and swelling, Multiples small joints pain and swelling, Difficulty in movement, Morning Stiffness, Feverishness,Loss of appetite, angagauravta⁽⁷⁾ since 2 years

Past History:

Hypothyridism: 10 yr's before (not on medication)

HTN: Newly detected. On Tab. Cutel C10 bd

IHD: Tab. Ecosprin Gold Od

History of Present Illness:

Patient is normal before 2 years then gradually developed above symptoms. She had consulted Rheumatologist and taken treatment but she had no relief for further management she admitted in our Hospital on 31/10/22.

Rugna Pariksha:

DARSHAN (Inspection): Akruti: Sthool ,Jivha: saam ,Netra: raktabh, Nakh: Raktabh

SPARSHAN (palpation) : P/A: soft, non tender, आधान +++

SHRAVAN (Auscultation): Heart sound: S1S2 heard. Rhythmic. No murmur

Respiratory sound : AEEBS. Chest clear.

Abdomen sound: B/S: Normal

PERCUSSION : आध्मातदृतिवत स्पर्श

Ashtvidh Pariksha:

Nadi – kaphaj hansgati, Jivha – sam, shabda – Spasht

Mal – asamyak Saam Alpa, Sparsh – ushna

Mutra - Samyak, Druk - Prakrut, aakruti - sthul

Pulse – 78/min, BP – 180/100mmhg, RR – 18/min, Weight – 70kg

Investigation:

ational Journal of Ayurveda & Yoga

ECG: 1/11/22: sinus bradycardia.

31/10/22 : sr.uric acid : 5.0 mg/dl

RA test: - Positive Titre 256

CRP test: positive.. Titre: 4:8

5/11/22 : CBC : Hb : 11.6 , WBC : 5700, Plt : 2,84,000,

Lipid profile: sr. Cholesterol: 239 mg/dl, Sr. Triglyceride: 251 mg/dl, HDL: 38, LDL:

153.2, VLDL: 47.8

Total cholesterol / HDL ratio : 6.2 , LDL /HDL ratio : 4.0

6/12/22: ANA test: Negative, HLA B27: Detected, Anti CCP: wkly positive

18/11/22 : T3 : 1.10, T4 : 6.97, TSH : 2.44

Samprapti Ghatak:

• Dosha: Kaph and vat

• Dushya: ras,Anna,Asthi, majja

• Strotas : rasavaha, Annavaha, Asthimajjavaha

• Udbhav : Amashaya

• Sanchar: Sandhi

Rogmarga : MarmasthisandhiSadhya sadhyatva : kashtasadhya

DIAGNOSIS: with above clinical presentation patient was diagnosed as Amavata (Rheumatoid Arthritis).

MATERIAL:

SHAMAN CHIKITSA:

Dravya	Dose	Duration	Anupan
A combination of Sihnad guggulu and Rasna guggulu	500 mg	Twice a	Koshanajal
	each	day	
Agnitundivati, Arogyavardhini vati, vat vidhavans ras,	250 mg	Twice a	Koshanajal
ekangveer, Amavatari ras	each	day	
A combination of Rasna, Amruta, Dashmool, shunti,	1gm each	Twice a	Koshanajal
punarnava churn		day	
Sanieevani I	121	che	111
Hingvashtak churna	1 gm	Twice a	Koshanajal
	-	day	
Gandharva Haritaki Tonal Journal of A	3/gm " V 6	Twice a	Koshanajal
		day	
Dashmool and Rasna bharad kwath	30 ml	Twice a	Koshanajal
		day	
Dashang lep (LA)			

SHODHAN CHIKITSA:

Valuka pottali swed (03/11/22 to 10/11/22) (29/11/22 to 6/12/22)

Matra Basti with bruhat Saindhvadi oil (10/11/22 to 12/11/22)

kshar Basti

Physiotherapy: 5/12/22 to 8 /12 / 22

DISCUSSION

Simhanada guggulu: The drug of choice for amavata (RA) due to its ability to improve digestive fire (agni), soothe disturbed vata and kapha especially in the joints, and improve joint strength.

Rasna guggulu: Includes Rasna, Amruta, Erand, Debdara and Vishwa. Rasna contains antiinflammatory and analgesic herbs. Ginger, Debdaru and Erand are excellent vatahar herbs that balance vata dosha.

Rasna, Amruta, Dashmul, Sunti and Punarnava Churn help in reducing pain in bones and joints. Sunti's anti-inflammatory properties accelerate healing and regeneration of the body's cells.

Gandharva Haritaki: Gandharva Haritaki is an Ayurvedic medicine of various herbs. This medicine contains erand tail, balharitaki, sunti, sandhav and savarchal lavan. It has laxative and laxative effects. Gandharvaharitaki cleanses the intestines and removes toxins from the body.

Dashmul and Rasna Bharad Kwat are used for anti-inflammatory response in joint pain and swelling. Dashang Lep is used topically for joint pain.

CONCLUSION

From the present case study, it can be concluded that the results obtained after the treatment was encouraging. Ayurvedic management in combination of Panchakarma and Herbomineral drugs as described in classical texts is helpful in giving significant relief in signs and symptoms of the disease Amavata (Rheumatoid Arthritis), thereby improving quality of life. So, this kind of approach can be taken for treating further cases of amavata.

REFERENCES Jeevani Darshan

- 1. Madhava Nidana commented by vijay rakshit & shri kanthadatta, Madhukosha teeka by Madhavkara chapter 25 Aamavata Nidana page no. 508/2009.
- 2. Agnivesa, Charaka Samhita, Acharya Jadavji Trikamji, Choukambha Publication, Varanasi, 2001; 705.
- 3. Tripathi B, editor. Madhav Nidana of Madhavkar, Vol. 1, Ch. 25, Ver. 6. Reprint ed. Varanasi: Chaukhabha Sanskrit Sanshtan, 2006; 572.
- 4. Harishastri Paradkara Vaidya Editor(s), (eighth ed.). Ashtangahridayam of Aacharya Vagbhat, Nidansthana; Udarnidan:Chapter 12, Verse 1. Varanasi: Chaukhambha Orientalia, 1998; 513.
- 5. Prevalence of Rhematoid arthritis https://www.researchgate.net, 1488.
- 6. API, Text Book of Medicine by Siddharth N. Shah, 7th edition, 2003
- 7. Tripathi Ravidatta, Charaka samhita with Vidyamanorama Hindi commentary, (Edi), Chaukhamba Sanskrit Pratishthan, Delhi, Sutra stan, Aadhya, 2009; 23(25): 319.

Source of Support : None Declared

Conflict of Interest: Nil