

MANAGEMENT OF AMAVAT[RHEUMOTOID ARTHRITIS] THROUGH BALUKA SWEDANA AND KALA BASTI -A SINGLE CASE STUDY

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ABSTRACT

Rheumatoid arthritis is a chronic inflammatory disease of joints characterized by symmetrical replacing ankylosing polyarthritis affecting mainly the peripheral small joints associated with varied constitutional symptoms and serological evidence of outo-reactivity. In ayurveda it is correlated with amavat. In amavat, ama doshais being directed into joints by the vitiated vata dosha and affect the sheshma dhara kala resulting in effusion and swelling of joints. The symptoms are produced due to the vitiation of vata along with the formation of Ama. Ayurveda acharaya Madhavakara in his book Madhav Nidana described the features of Amavat for the first time whereas the treatment of Amavat was first explained by Acharaya Cakradatta.

KEYWORDS: Amavat, Rheumatoid arthritis, ankloying polyarthritis.

INTRODUCTION

Amavat is a chronic disorder that has both skeleton and extra skeletal manifestation. The cheif pathogenic constituents are Ama and vata which simultaneously affect the joints and causes stiffness of the body. Amavat is one such kind of a condition mention in Ayurveda that arises due to the constant use of incompatible combition of food articles and regimens. Acharya Madvakara has given a delaited description regarding the Nidana, Samprapti and

clinical features of Amavat. The symptoms are produced due to the vitiation of vata along with the formation of Ama. The Ama is carried by the aggravated vata and deposited in Sleshmasthan producing features like Angamarda, aruchi Alasya, sandhiruk and sandhisospha etc. In modern Amavat is correlated with rheumatoid arthritis. The treatment principles of Amavat includes removing Ama through Srotoshodhana by procedures like Langhana, Swedana, Agnivardhana by adopting deepana drugs and basti karma, Saindhavadi Anuvasana basti. Hence this study includes Ruksha swedana, janu basti, matra basti and Vaitarana basti along with Brihatsaindhavadi tail Anuvasana to manage the Amavat effectively.

Present Complaints

42 yr old female patient got admitted in panchkarma department of dr sarvpalli radhakarshana rajasthan ayurvedic university jodhpur. with complaint of pain in multiple joints since 4yr and swelling of several joints specially wrist, ankle, knee and feet since 2yr and constipation since 1 yr along with morning stiffness. 1 week after the onset of disease she suffered from fever with edema and pain in the joints; the rt elbow, rt and lt knee, wrist joints, rt and lt shoulder joints. She took allopathy treatment but did not get relief so she came in hospital for ayurvedic treatment.

Present History

Opd-8671	Blood pressure - 110/70 mmof hg
IPD no- 326	Age- 42 yr
Name Ladu devi	Pulse rate - 76/minute
Sex-Female	Respiratory rate -17 min
Occupation-housewife	Appetite - impaired appetite at the onset of the disease
Bladder-d/n- 3-4 times,	Bowel - constipation
colour-pale,	Sleep –Disturbed due to pain
odour-normal	

Past History

She did not have history of DM/HTN/TB and any major surgical procedure and no history of any trauma.

General Examination

- Pallor- Absent Clubbing-Absent
- Tongue-uncoated. Icterus –Absent

- Body build- normal Cyanosis- Absent
- Lymphadenopathy-absent
- Edema-bilateral, non pitting tenderness present
- Consciousness-Conscious.

Investigations-Crp-positive

Positive

RA factor-positive

CBC-normal

ESR- 69mm1st hr

Uric acid-3.3 mg %

Dasha Vihad Pariksha

1. Prakrit - vata pitta
2. Vikriti- Dosha-vatapradhana tridosha, Dooshaya-Rasa
3. Satva - Madhyam
4. Sara - Asthi
5. Sanhanana - Madhyam samhata
6. Pramana - Madhyam
7. Satmaya - Madhyam
8. Ahara shakti - Abyavarana shakti
9. Vyayamashakti - Madhyam
10. Vayah - Madhyam

Astvidha Pariksha

1. **Nadi** -Vata -kaphja (74/min)
2. **Mala** - Baddha
3. **Mutra** –Bahumutrata
4. **Jihva** -Malavaritta
5. **Shabda** –Kshin (low tone of speech)
6. **Sparsha**-Ruksha (dry, rough)
7. **Drik** -Samanya 8. **Akrti** -Madhyama

Locomotory Examination

- Gati [range of movements]

Left shoulder joints- abduction, adduction, rotation and elevation- limited due to edema and pain

Left wrist joint- flexion; extension and rotation -limited due to edema and pain

- Sandhi sputana [joint crepitus]-present in both knee joints
- Sparsha asahyata [joint tenderness]-presented in affected joints
- Sandhi shota [joint swelling]-present in affected joints
- Rakta varnata [redness]-present in affected joints
- Ushnata [heat]- present in affected joints
- Mamsa kshaya / shosha [muscle wasting]-NAD

Gals

- Gait-slow and painful gait
- Arms- difficulty in pronation and supination [painful] in lt wrist joint power grip-reduced [difficulty in holding]
- Legs- sandhi sputana both knee joints shota in both knee
- Spine

Thoracic spine - internal rotation and External rotation normal

Lumber spine - flexion normal

Extension - normal

Lateral blending -normal

Cervical spine - rotation normal flexion, extension and lateral blending normal

1. JOINTS

- **Inspection**

Swelling -present

Redness -present

Deformities –NAD

- Palpation -Tenderness and warmth Stiffness of the joints

2. CADIOVASCULAR SYSTEM –s1 s2 clear, no thrills or murmurs

3. RESPIRATORY SYSTEM -no added sounds

4. GIT - P/A-no tenderness no organomegaly

5. CNS - Higher functions-NAD

Sensory functions- NAD

Cranial nerves-NAD

Motor functions-NAD

Panchkarma Treatment

1-Baluka sweda- for 16 days and 45 min every day

2-Janu basti –Dhasmool taila for 16 days and 45 min every day

3-Matra basti-dasmool taila +sheerbala tail

4-kala basti - Anuvasan - sandhwaadi tail

Niruhbasti - Vaitarana basti

Table (1): Ingredients for Vaitarana Basti.

Dravya	Matra
Saidhava lavana	1 Karsha[12 gms]
Guda	1/2 pala[24 gms]
Tila tail	Eeshat[60- 70 ml]
Amleeka	1 pala[48 gms]
Gomutra	1 kudava[192gms]

Table (2): Kala Basti Shedule.

1st day	Anuasana basti	9day	Vaitarana basti
2nd day	Anuasana basti	10 day	Anuasana basti
3rd day	Vaitarana basti	11 day	Vaitarana basti
4 day	Anuasana basti	12 day	Anvasana basti
5 day	Vaitarana basti	13 day	Vaitarana basti
6 day	Anuasana basti	14 day	Anuasana basti
7 day	Vaitarana basti	15 day	Anuasana basti
8 day	Anuasana basti	16 day	Anuasana basti
TOTAL	16 BASTI- 10 ANUASANA+ 6 Vaitarana basti		

RESULT

During the treatment course expressed gradual relief her complaints. Symptoms of pain and tenderness in joints and joint swelling within 16 days. Before starting the treatment patient was presented with all the symptoms but there was improvement in stiffness, swelling, pain etc. The subjective parameter show improvement in clinical symptoms. Patient shows RA test negative, CRP negative and changes in ESR value.

Table (3): Showing Signs and Symptoms [Subjective Parameter].

Sr no	symptoms	Before treatment	After treatment
1	sandhishotha	Severe	moderate
2	Morning stiffness	More than 1 hr	50 mins
3	Ushnata	severe	moderate
4	Tenderness	severe	moderate

Table 4: Objective Parameter.

Sr no	Test	Before treatment	After treatment
1	CRP	positive	negative
2	ESR value	69 mm Ist hr	50 mmIst hr
3	RA factor	positive	negative

DISSCUSSION

Amavat is a santarpanjanya roga. In this case patient was in acute condition. Shula and shotha are the major symptoms. So rukahana swedana [baluka swedana] was applied. It helps in pacifying vitiated vata dosha thus leads to relief in pain and stiffness. Basti plays a prime role in treatment of vitiated vata. Vata is only responsible for all the functions of the body and also for the production of the disease. The given basti enters the Pakvasya, which is the main seat of vata dosha and destroy the vitiated vata dosha, which is the originator of the disease.

CONCLUSION

Rheumatoid arthritis diseases can be clinically compared with Amavat described in ayurvedic classics. The treatment given Baluka swedana 7 day, janubasti 5 days, matra basti and yog basti schedule proved to be effective of the treatment in the management of these disease. The main aim of treatment Amavata to improve the quality of life further preventing deformity. Patient was symptomatically improved with tenderness in joints, pain and joint swelling, pain and improved in her sleep.

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