

**AYURVEDIC MANAGEMENT OF KAMPAVATA (PARKINSONISM)  
DUE TO CEREBELLAR ATROPHY-A CASE STUDY**

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**ABSTRACT**

*Kampavata* is one of the *vata vyadhi* according to *ayurveda*. It can be correlated with parkinsonism in modern science. Parkinsonism is disease in which there is paucity of movement (akinesia or bradykinesia) often accompanied by an increased muscle tone (rigidity) and hyperkinesia or dyskinesia, which are associated with excessive abnormal involuntary movements. *Kampavata* (parkinsonism) affects speech, gait, expression of mood and emotions and various daily routine activities of body. Major complication of the condition are progressive supranuclear palsy, multiple system atrophy, parkinsonism-dementia-amyotrophic lateral sclerosis complex; to avoid that, it is necessary to start treatment as early as possible. The

present management of Parkinsonism is oral levodopa preparations, anticholinergics, dopamine agonist etc, but respond rate to these treatments is very less. Also these therapy has its various adverse effects. In this article a case report of 50 years old male patient who came to OPD with complaints of slurred speech, postural disturbance, slowness of daily activities, tremors while walking, amnesia since approximately 2yrs; ayurvedic management of patient was done in the form of *Siravedha*, *basti*, *nasya*, *shirobasti* and *virechana*. Along with this oral medication and exercise was also advised. The clinical sign and symptoms of *Kampavata* were reduced significantly after the ayurvedic treatment.

**KEYWORDS:** Kampavata, Parkinsonism, Siravedh, Basti, Nasya, Shirobasti and Virechana.

**INTRODUCTION**

In various *Ayurvedic Samhita* and text books a very few information about *Kampavata* is described though it is a *vataja vyadhi*. *Acharya madhav* explain *Kampavata* in *vatavyadhi adhyay*. *Kampavata* is a disease causing sarvang kamp, shir kamp. *Acharya Madhav*, called it as *veputhu*. Etiological factors explain in *samhita* and texts are vardhakya, heavy work and all the other vata prakopak hetu sevan. *Vata* in its normal state is responsible for stimulation of all sense organs but in abnormal state it produces various diseases like *Kampavata*. Parkinsonism is a second most common neurodegenerative disorder after Alzheimer disease, occur in approximately 1 in 1000 in the general population and in 1% of person older than 65 yrs. men are affected more than women. Parkinsonism is disease in which there is paucity of movement (akinesia or bradykinesia) often accompanied by an increased muscle tone (rigidity) and hyperkinesia or dyskinesia, which are associated with excessive abnormal involuntary movements. The cause of parkinsonism is belived to be a variable combination of poorly understood genetic and environmental factors. Both dominant and ressesive genes can cause classic parkinsonism. Many of the features of parkinsonism are due to loss of dopamine in the neostriatum, secondary to loss of pigmented dopaminergic neurons in the SNc of the midbrain. Due to this patient may experience postural disturbunce, slowness of activities, tremors, amnesia etc. In ayurvedic classic treatment available for *Kampavata* (parkinsonism) is *all vatashamak, bruhan* etc. and in modern medicine there is oral levodopa preparations, anticholinergics, dopamine agonist etc, and physiotherapy. Keeping all these in mind and besides that the present study was done on ayurvedic management of kampvata (parkinsonism).

**CASE REPORT**

Patient Name: xyz	DOA :02 -08-2017
Age & Sex: 50 yr/ male	DOD:23 -10-2017
Reg. No.: 24440	Occupation : businessman

C/o

Slurred Speech

Postural Disturbance

Slowness of Daily Activities

Tremors While Walking

Amnesia    Since approximately.2 yrs.

No any significant past history

Addiction:

alcohol 2-3 times a week since 20 yr

O/E

G.C.Fair Afebrile

Pulse rate -80/ min

BP – 130 / 86 mm of hg

S/E

RS – AEBE Clear

CVS –S1S2 normal

CNS – Councious & oriented

pupils –normal size reacting to light

P/A – soft & non tender

### Investigations

CBC – WNL

CT -Brain – cerebellar atrophy

BT/CT - WNL

### Treatment

After the necessary investingations, ayurvedic treatment is as follows- *arogyavardhini vati* 250 mg Tds with lookwarm water *Triphala churna* 5 gram Hs with lookwarm water *Ekanngvira rasa* 250 mg Bd after proper niram avastha 1 st setting of *siravedha* done and 100 ml *matrabasti* wth *balaguguchyadi tailam* and *til tailum* in equal quantity is continued for 15 days; in between that 2nd and 3rd setting of *siravedha* was conducted. (*siravedha* was done through vain from cuboidal fossa and approximately 40 cc of blood was removed in each setting) After that patient has given - *Trutiya baladi yapana basti (cha.siddhi.-12/9)* - *Shirobasti* with *til tail* and *mahamash tail* - *Nasya* with *Panchendriyavardhan tail* for 14 days along with proper *snehana swedana*. After these treatment patient has been feeling relax, before treatment patient was hesitating to take a step due to fear of fall but after treatment patient could walk confidently, tremors while walking were disappeared. After 10 days along with proper concelling *snehapana* with *mahatikta ghrita* was started in increasing order until *samyak snehapana lakshana* after that *snehavishranti* for 2days Patient then taken for

*virechana karma* Virechana yoga – *aragwadha phalmajja + kutaki bharad +trivutta bharad kwatha* 100 ml - *earand tail* 20 ml - *trivruttavaleham* 30 grams *Virechana vega* 12 and *anuvega* 15(samyak virechana lakshyan was observed) *Pashyat karma (sansarjana kram)* for 5 day.

## RESULT

After completion of aproximatly 2 and half month 1.patient could walk confidently 2. speech of patient was markly improved (after treatment one could understand easily what patient was talking; which was difficult to understand before treatment) 3.tremors reduced markly 4. Postural disturbance reduced 5. Patient could do his routine activities quit easily.

clinical features	Grading	before treatment	after treatment
Tremors while walking	0 no tremors 1 slight 2 slight but patient could walk 3 patient could not walk due to excessive tremors	3	0
slurred speech	0-no persistant 1-persistant but do not disturb routine work 2-persistant and disturb routine work 3- constant	2	0
Postural disturbance	0-no persistant 1-persistant but do not disturb routine work 2-persistant and disturb routine work 3- constant	2	0
Slowness of daily activity	0-no persistant 1-persistant but do not disturb routine work 2-persistant and disturb routine work 3- constant	2	1
Amnesia	0-no persistant 1-persistant but do not disturb routine work 2-persistant and disturb routine work 3- constant	2	1

## DISCUSSION

In parkinsonism or *Kampavata*, nerve dysfunction (due to dopamine deficiency) leads to impairment of both sensory and motor function. These function are govern by *vata*, hence, the improvement can be expected by attaining the normal state of *vata* and its *anubandh doshas*. In this patient of *Kampavata samprapti*, *vitiated vaat & pitta dosha get sthan*

*sanshraya in vata vaha nadi*, along *laghu, ruksha tikshna guna vridhi* causes *kriya alpata, kriya hani*. Ayurveda is a safe alternative with minimum pain to the modern treatment, effective in *Kampavata*. Pachana with *arogyavardhini vati* and *triphala churna*, *snehana* with *til tail* for nourishment of *shleshak kapha* to stimulate the sensory nerve ending. *swedana* before *nasya* and *shirobasti* for increasing blood circulation to the peripheral arterioles which help for fast drug absorption. In *nasya* therapy medicated oil is administered in nostril, this medicine is reached to *shringataka marma* and spread into all *shrotasa* (vessel, nerves) and eliminate the vitiated doshas. *shirobasti* stimulate the sense organ and nerves and relax mind, decrease mental exhaustion and control the *sthanasanshray of doshas*. *Shiravedha* and *virechana* karma was used to eliminate *vikrut pitta* which associated with *vikrut vata* may caused cerebellar atrophy. In between 3 setting of *shiravedha*, *matrabasti* is used to avoid further *vata prakopa* due to *raktamokshana*.

## CONCLUSION

This case report shows that *Kampavata* (parkinsonism) can be successfully managed by *Ayurvedic treatment* with cost effective way, lesser chance of recurrence and without any side effect.

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