

## A CASE STUDY OF AMAVATA (RHEUMATOID ARTHRITIS) AND VATARAKTA (GOUT) BY AYURVEDIC TREATMENT

Shinde R. B.\*<sup>1</sup>, J. D. Gulhane<sup>2</sup>, Wankhede S. N.<sup>2</sup> and Deshpande P. V.<sup>3</sup>

<sup>1</sup>PG Scholar, Department of Kayachikitsa, Government Ayurved College and Hospital, 1. Nagpur.

<sup>2</sup>Guide and Asso. Prof., Department of Kayachikitsa, Government Ayurved College and Hospital, Nagpur.

<sup>2</sup>PG Scholar, Department of Kayachikitsa, Government Ayurved College and Hospital, Nagpur.

<sup>3</sup>PG Scholar, Department of Kayachikitsa, Government Ayurved College and Hospital, Nagpur.

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### \*Corresponding Author

**Shinde R. B.**

PG Scholar, Department of  
Kayachikitsa, Government  
Ayurved College and  
Hospital, 1. Nagpur.

### ABSTRACT

*Amavata* is chronic degenerative disorder of joints. *Vatarakta* Gout also a musculo skeletal disorder in which joints are affected. The sign and symptoms of rheumatoid arthritis is correlate with *Amavata* and Gout is correlate with *Vatarakta*. In modern science corticosteroids NSAIDS, DMARD's and immunosuppressive therapy are the treatment on it but these therapies have many side effects on body. As Ayurveda's aims at the reversal of the disease condition to a healthy state by removing the root cause and not merely treating the symptoms, it can be the better option for rheumatoid arthritis and gout. In *Amavata* *Vata* and *Kapha* are the main *Dosha* and in *Vatarakta* *Vata*

and *Rakta* are main *doshas*. treatment in these two is opposite because *Vata* is common in both diseases but *Rakta* and *Kapha* have Opposite *Guna*. If *Amavata* is treated *Vatarakta* is worsen and vice versa. Hence need of such treatment which simultaneously effective on both *Amavata* and *Vatarakta* and also no any side effect.

**KEYWORDS:** *Amavata, Vatarakta, Rheumatoid arthritis, Gout.*

## INTRODUCTION

A rheumatoid arthritis is the most common persistent inflammatory arthritis occurring through the world and in all ethnic groups. The prevalence is lowest in black Africans and Chinese, and highest in Pima Indians. In Caucasians, approximately 0.8-1.0% are affected, with a female to male ratio of 3:1. The prognosis of rheumatoid arthritis will improve as more effective treatment regimens are introduced in patient with early disease. In former year around 25% of patient required a large joint replacement.<sup>[1]</sup>

Gout is an inflammatory disease caused by deposition of monosodium urate monohydrate crystal in and around synovial joints. Gout has become more common over recent years in parallel with increased longevity and the higher prevalence of metabolic syndrome, of which hyperuricemia is an independent risk factor for hypertension, vascular disease renal disease and cardio vascular events, only minority of hyperuricemia people develop gout.<sup>[2]</sup>

In modern medicine management of rheumatoid arthritis and gout involve corticosteroids NSAIDS, DMARD's and immunosuppressive therapy. This regime of management has side effects like gastro intestinal bleeding, nephrotoxicity, hepatotoxicity and mental health problems. There is a need for such treatment which is effective, safe and having less or no side effects in rheumatoid arthritis and gout together. As Ayurveda's aims at the reversal of the disease condition to a healthy state by removing the root cause and not merely treating the symptoms, it can be the better option for rheumatoid arthritis and gout.

The sign and symptoms mentioned for rheumatoid arthritis such as fatigue, weakness, vague arthralgia, myalgia, joint stiffness, low grade fever<sup>[3]</sup> can be correlate to the *Amvata Lakshana* such as *Angamarda* (bodyache), *Aruchi* (loss of test), *Trishna*, *Alashya* (fatigue), *Gourava* (heaviness in body), *Jwara* (fever), *Apaktata* (indigestion), and *soonangata* (swelling).<sup>[4]</sup>

The sign and symptoms mentioned for gout such as severe pain, extreme tenderness marked swelling with overlying red shiny skin<sup>[5]</sup> can be correlate with *Vatarakta* in Ayurveda such as *Kandu*(itching), *Daha*(burning sensation), *Ruja*(pain), *Toda*(pricking pain) *Sfurana*, *bhanjana*(pain like break bone) *Asthivakrata* etc.<sup>[6]</sup>

## CASE REPORT

A 37-year-old female patient came to OPD in government Ayurvedic college and hospital, Nagpur, on dated 1 August 2018 with chief complaints of

- 1) Parvasandhi shula(phalangeal joint pain)
- 2) Manibandh sandhi shula(wrist joint pain)
- 3) Janu sandhi shula(both knee joint pain)
- 4) Swelling and redness of wrist joints
- 5) Kshudhsmandhya(loss of appetite)
- 6) Jwara(low grade fever)
- 7) Painful movement of carpometacarpal and phalangeal joint
- 8) Calf muscle pain

Patient had above complaints since 3 to 4 months

### History of present illness

The patient was normal before 4 to 5 month ago. since then patient had been suffering from *Parvasandhi*, *Manibandha Sandhi*, and *Janusandhi shula*, swelling and redness of wrist joint, restricted movement of joints, low grade fever, uninterested in any type of task, calf muscle pain, loss of appetite, *Agni mandhya*, for Ayurvedic treatment patient came to OPD in government Ayurvedic college and hospital, Nagpur, on dated 1 August 2018.

### Past history

No H/O Diabetes, hypertension of any other illness.

### Clinical findings

Physical examination-

**Table 1: Ayurvedic physical examination.**

Ayurvedic		
1	<i>Nadi</i> (pulse)	80/ minute, Sarpagati
2	<i>Mala</i> (stool)	<i>Prakrit</i> once in day
3	<i>Mutra</i> (urine)	<i>Prakrit varna gandha</i>
4	<i>Jihva</i> (tongue)	Saama
5	<i>Shabda</i> (speech)	Spashta
6	<i>Sparsha</i> (skin)	Shitoshna
7	<i>Drik</i> (eyes)	Prakrit
8	<i>Akriti</i> (body posture)	Krish
9	<i>Sarata, satva, satmya</i>	Madhyam
10	<i>Sanhanan</i>	<i>Madhyam</i>
11	<i>Vyayamshakti, Aharshakti</i>	Alpa
12	<i>Prakriti</i>	Vata Pradhan Pitta Anubandhi

**Modern physical examination****Respiratory system**

Size and shape of chest are normal, accessory muscle of respiration are working,

R/R- 18/ minute. Trachea centrally placed, tactile vocal fremitus is bilaterally equal, resonant sound all over chest, air entry bilaterally equal, crept and wheezing are absent.

**Cardio vascular system:** all findings are normal.

**Per abdomen examination:** all findings are normal.

**CNS Examination**

Patient is well oriented, pupillary reflexes are normal, Cranial nerve examination is normal.

**Table 2: Muscle power grade (MPG).**

	<b>Right</b>	<b>Left</b>
<b>Arms</b>	5/5	5/5
<b>Legs</b>	5/5	5/5

**Table 3: Reflexes.**

	<b>Right</b>	<b>Left</b>
Triceps	Normal	Normal
Biceps	Normal	Normal
Knee	Normal	Normal
Ankle	Normal	Normal
Planter	Normal	Normal

**Table 4: Treatment schedule.**

	<b>Date</b>	<b>Medicine</b>	<b>Dose</b>	<b>Aushadhi sevan kala</b>	<b>Anupana</b>
1	2/8/18- 18/9/18	Sinhanad guggula	250mg bd	Vyanodane	Koshnajala
2	2/8/18- 18/9/18	Anandbhairav rasa	250mg bd	Vyanodane	Koshnajala
3	19/9/18- 24/10/18	Haritaki Churna	5gm bd	Vyanodane	Koshnajala
4	19/9/18- 24/10/18	Guduchi Churna Quatha	40ml bd	Vyanodane	-
5	3/10/18- 23/10/18	Gokshuradi Guggulu	250mg bd	vyanodane	Koshnajala
6	19/9/18- 6/2/18	Chopchini churna	5gm bd	Vyanodane	Koshnajala
7	24/10/18- 6/2/19	Trifala Guggulu	500mg bd	Vyanodane	Koshnajala
8	19/12/18- 6/2/19	Sarivadi Vati	250mg bd	vyanodane	Koshnajala

**Pathya Apathya**

Pathya is one which is compatible to body and which is not harmful to the body. A another definition of Pathya which is a Priyam(suitable) to Manasa and Shareera is called Pathya.

**Diet schedule**

Morning breakfast: Upama, Bhallataka majja, Krishna Manuka.

Lunch: 1-2 bhakari, Sabji, Green Vegetables, cow ghee, Dal rise.

**Apathya:** *Divaswapa, Guru ahara, Oily-spicy food, junk food, Bakery products, Non veg, curd.*

**RESULT**

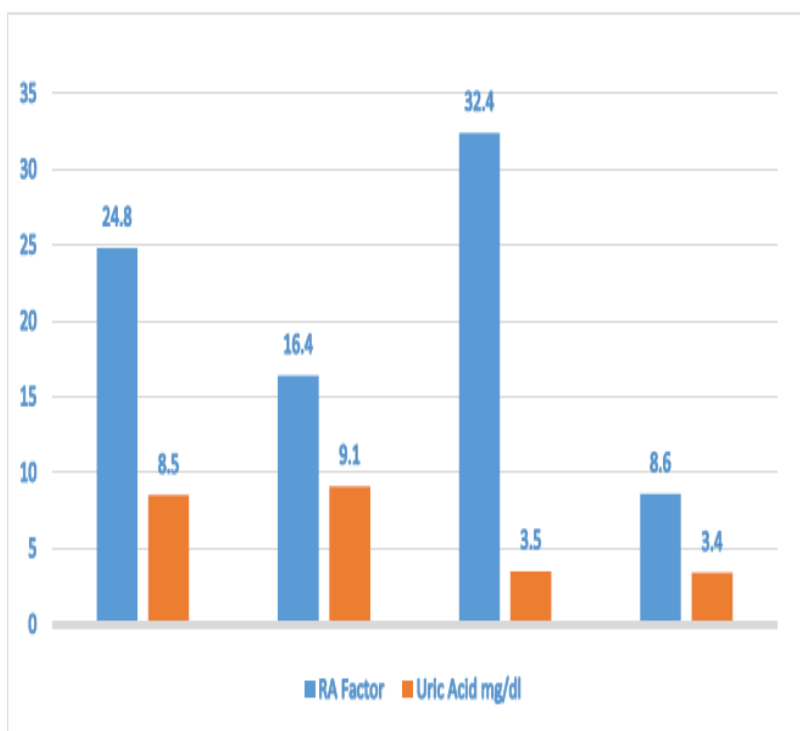
Assessment by objective criteria.

**Table 5: Rheumatoid Factor and Uric acid.**

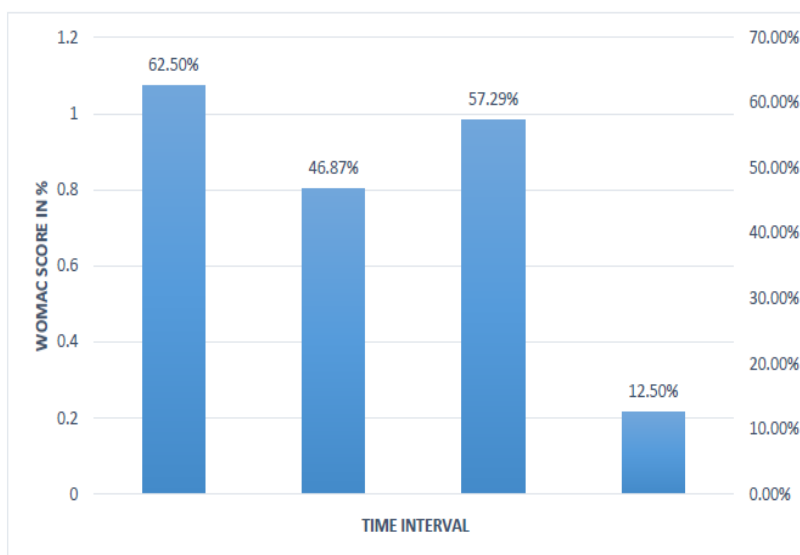
Name	2/8/2018	19/9/2018	27/11/2018	6/2/2019
Rheumatoid Factor	24.8	16.4	32.4	8.6
Uric acid	8.5	9.1	3.5	3.4

**Table 6: Assessment of subjective criteria.**

Criteria	1/8/18	29/8/18	3/10/18	2/1/19
WOMAC Score out of 96	60 (62.5%)	45 (46.87%)	55 (57.29%)	12 (12,5%)
VAS Scale	6	4	6	2



**Fig 1: Graph depicting change in rheumatoid factor and uric acid in blood.**



**Fig 2: Graph depicting change in WOMAC Score During treatment.**

## DISCUSSION

The sign and symptoms of Rheumatoid arthritis and gout can be correlate to the *Amavata* and *Vatarakta*. *Hetu* (disease causing factor) in *Vatarakta* mainly *Ativyayam* (more exertion) along with *Vidahi Diet*<sup>[7]</sup> and in *Amavata*, *Snigdha* and *Abhishandi* diet after that *Ativyayam* (more exertion).<sup>[8]</sup> In *Amavata* *Vata* and *Kapha* are the dominating *Dosha* were as in *Vatarakta* *Vata* and *Rakta(Pitta)* are the dominating *Dosha*. In both disease *Vata* is common factor but *Guna* of *Kapha Dosha* and *Pitta Dosha* are opposite to each other, so difficult to treat if patient suffering from both diseases at a time. At starting of *guggula* and *Anandbhairav rasa* are given symptoms of *Amavata* treatment if *Sinhanad* are decreases but symptoms of *Vatarakta* are aggravated because content in *Sinhanad guggula* and *Anandbhairav rasa* have *Ushna Tikshna* and *Vata Kapha Shamak* properties but it aggravates *Pitta Dosha*. Similarly, drugs having pittaghana propertiese are responsible for aggravate *Vata* and *Kapha*. If drugs having *Tridoshaghana*, *Raktashudhikar*, *Vatanulomak* properties are effective. So the *Chopchini churna*, *Trifala Guggulu*, *Bhallataka aasava*, and *Sarivadi Vati*, are more effective in both disease, they balance all three *Dosha* and purify blood and gave good result in sign and symptoms as well as objective and subjective parameter without any complication.

**Table 7: Mode of action of drugs.**

	<b>Name of drug</b>	<b>Properties</b>	<b>Mode of action</b>
1	<i>Sinhanad guggulu</i> <sup>[9]</sup>	<i>Kapha Vata Meda and Aama Nashana</i>	<i>Agni Vridhikar, Dhatu, Vaya, Bala Vridhikar</i>
2	<i>Anandbhairav rasa</i> <sup>[10]</sup>	<i>Kapha, Aama Nashana</i>	<i>Agnidipan, Abhishanda Nashana</i>
3	<i>Haritaki Churna</i> <sup>[11]</sup>	<i>Rasa Lavanvarjita Panchrasa, Virya Ushna, Vipaka Madhura.</i>	<i>Tridoshhara, Shonitsthapana, Shothahara, Dipana, Mruduvirechana</i>
4	<i>Guduchi Churna Quatha</i> <sup>[12]</sup>	<i>Rasa Tikta Kashaya, Virya Ushna, Vipak Madhur</i>	<i>Tridoshhara, Raktashodhan, Dhaprashamana.</i>
5	<i>Gokshuradi Guggul</i> <sup>[13]</sup>	<i>Vatarog Nashana</i>	<i>Vataraktanashan</i>
6	<i>Chopchini Churna</i> <sup>[14]</sup>	<i>Rasa tikta, Virya Ushna, Vipaka Katu</i>	<i>Tridoshhara, Raktashodhak, Dipana, Vatahara.</i>
7	<i>Trifala Guggulu</i> <sup>[15]</sup>	<i>Tridoshaghana</i>	<i>Kleda, Paka, Vedana Shamana</i>
8	<i>Sarivadi Vati</i> <sup>[16]</sup>	<i>Pittashamak, Raktaprasadaka</i>	<i>Raktapitta, Jwara shamak, Usefull in Female diseases.</i>

**CONCLUSION**

*Aamavata* (Rheumatoid Arthritis) and *Vatarakta*(Gout) is successfully managed by *Shamana* therapy and *Pathya Apathya* management. Oral Ayurvedic drug like *Chopchini churna*, *Trifala Guggulu*, *Bhallataka aasava*, *Haritaki Churna*, *Guduchi quatha* and *Sarivadi Vati*. These drugs were effective in relieving the sign and symptoms of *Aamavata* (Rheumatoid Arthritis) and *Vatarakta*(Gout) without any harmful effect.

**REFERENCES**

1. Brain R. Walkar, et al, ed. Davidson's Principles and Practice of Medicine, 22st ed. Publish Churchill Livigstone Elsevier, 2014; 25: 1096.
2. Brain R. Walkar, et al, ed. Davidson's Principles and Practice of Medicine, 22st ed. Publish Churchill Livigstone Elsevier, 2014; 25: 1087.
3. Alagappan R., Manual of Practical Medicine, 5th ed. Jaypee Brothers Medical Publishers (P) LTD New Delhi, 2014; 11: 850.
4. Shastri S., Upadhyay Y, *Madhavanidanam, Vidhyotini* hindi commentary, ,Choukhamba Prakashana Varanasi, 2014; 25/6-10: 511.

5. Mehata P. J., ed. Mehata S. P., Joshi R. S. et.al, *PRACTICAL MEDICINE*, 20th ed. Published by Shilpa Pradip Mehata, 64 pedder Road, Hari Bhavan, Mumbai 400 026, 2017; Chapter no 2: 35.
6. Sukla V., Tripathi R., ed. Charak Samhita, Vaidyamanorama Hindi commentary, Choukhamba Sanskrit Sansthan, Varanasi, 2013; Chikitsastan 29/16: 734.
7. Shastri A., Mehata P. M., *Ayurvedatvasandipika* a hindi commentary of *Sushrut Smhita*, Choukhamba Sanskrit Prakashana Varanasi, 2014; Nidansthan 1/41: 299.
8. Shastri S., Upadhyay Y, *Madhavanidanam*, *Vidhyotini* hindi commentary, Choukhamba Prakashana Varanasi, 2014; 25/1: 508.
9. Vaidhya L., Shastri H. et al. *Bhaishajyaratnavali*, 8th ed., Published by Motilal Banarasidas. 41 U. A. Banglo Road Javahar nagar, Delhi-110 007, 2016; 36: 390.
10. Gune G. *Ayurvediya aushadhigindharmashastra*, Choukhamba Sanskrit Prakashana Varanasi, 2014; 2, 9: 25.
11. Sharma P. V., *Drvyaguna Vigyana*, Choukhamba Bharti Academy Varanasi, 2015; 9/340: 753.
12. Sharma P. V., *Drvyaguna Vigyana*, Choukhamba Bharti Academy Varanasi, 2015; 9/342: 761.
13. Tripathi B. Dipika hindi commentary of *Sharangdharsamhita* Choukhamba Sanskrit Prakashana Varanasi, *Madhyam Khanda*, 2006; 7/84-87: 206.
14. Sharma P. V., *Drvyaguna Vigyana*, Choukhamba Bharti Academy Varanasi, 2015; 7/365: 802.
15. Vaidhya L., Shastri H. et al. *Bhaishajyaratnavali*, 8th ed., Published by Motilal Banarasidas. 41 U. A. Banglo Road Javahar nagar, Delhi-110 007, 2016; 63/46: 553.
16. Vaidhya L., Shastri H. et al. *Bhaishajyaratnavali*, 8th ed., Published by Motilal Banarasidas. 41 U. A. Banglo Road Javahar nagar, Delhi-110 007, 2016; 80/72-77: 651.