

A STUDY ON THE PROSPECTS OF AYURVEDIC MANAGEMENT OF AMAVATA (RHEUMATOID ARTHRITIS)

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ABSTRACT

Amavata is a Shula pradhana vyadhi in which the intensity of the pain is high. It is one of the crippling diseases, claiming the maximum loss of human power. It is not only a disorder of locomotor system but is a systemic disease and is named after its chief pathogenic constituents i.e. Ama and Vata. Kapha and Pitta are also invariably involved in its samprapti. Sandhishoola, Sandhishotha, Stabdghata and Sparshasahyata are salient feature of the disease. The disease Amavata run a chronic course and Jadya, Sankocha, Angavaikalya etc. are responsible for crippling of the patients in the long run. Chakrapani laid down the principle and line of treatment of Amavata. It includes Langhana, Svedana, drugs having Tikta, Katu Rasa and Deepana action, Virechana, Snehapana and Anuvasana as well as Kshara Basti.

Rukshasweda and Upnaha were added afterward by Bhavaprakasha and Yogaratnakar. The line of treatment denotes firstly the Pachana of Ama by Langhana, Swedana, Pachana and Deepana, then restoration of Agni by Deepana dravyas and finally control of Vata Dosha by Virechana, Snehapana and Basti. Here an attempt is being made to substantiate these principles.

KEYWORDS: Amavata Chikitsa, Basti, Snehapana, Langhana, Rheumatoid Arthritis, Virechana.

INTRODUCTION

Amavata is one of the chronic diseases mainly affecting the joints with some other constitutional symptoms which make the life of patient almost crippled and restrict the patient to the bed. It is seen most commonly in the patients due to their changing dietetic habits, social structure, environment and mental stress and strain. Ama and Vata are the two main pathognomic factors held responsible for causation of Amavata. Derangement of Agni that is Agnimandya (hypo-functioning of Agni) is a chief factor responsible for the formation of Ama, which is main pathological entity of the disease. The etiological factor for both vitiation of Vata and formation of Ama are responsible for the manifestation of the disease.

Excessive consumption of Nidana of Amavata in pre-existing stage of Mandagni leads to formation of Ama and simultaneous vitiation of Tridosha, especially the Vata Dosha. The samprapti originates initially from the Annavaha Srotasa and in due course spreads to the other Srotasa mainly Rasavaha, Asthivaha and Majjavaha Srotasa. The Dusyas mainly involved in this disease are Rasa, Mansa, Asthi and Majja. It is mostly the disease of Madhyama Roga Marga with Chirakari Swabhava.

Sandhi is the main site of Abhivyakti of Lakshana. Ama, under influence of vitiated Vata, comes in Sleshamasthana mainly in sandhis and gets lodged there. Sandhishoola, Sandhishotha, Stabdhatata and Sparshasehatva are the cardinal features of Amavata. The disease runs a chronic course of Jadya, Sankocha, Angavaikalya Mansakshaya etc. are responsible for crippling of the patients. Other constitutional symptoms like Alasya, Aruchi, Balabhransha, Vivandha, Apakti etc. are normally found in the patients of Amavata.

Due to their similar mode of presentation the term rheumatoid arthritis can be broadly grouped under heading of Amavata. General management of Amavata includes - Langhana, Swedana, drugs having Tikta, Katu Rasa and Deepana action, Virechana, Snehapana and Anuvasana as well as Kshara Basti.

CHIKITSA SIDHANTA

The first and foremost aim of the Chikitsa is to do Sampraptivighatana. Chakrapani was the pioneer of lay down the principle and line of treatment of Amavata. Rukshasweda and Upnaha were added afterward by Bhavaprakasha and Yogaratnakar to the measures mentioned by Chakrapani.

Ama and Vata are the two chief pathognomic factors in production of Amavata. Ama is Guru, Snigdha, Sthira, Sthula and Pichhila while the Vata have the properties like Laghu Ruksha, Chala, Sukshama and Vishada. The properties of Ama and Vata lie on opposite pole of each other. Only the Sheeta Guna is common to both. These are the things which come in across while treating the Amavata, because any measure adopted will principally appose one another. So a very careful approach can only benefit the patient. The line of treatment laid down by Chakrapani denotes firstly the Pachana of Ama, then restoration of Agni and finally control of Vata Dosha. Here an attempt is being made to substantiate these principles.

Langhana: Langhana is the first measure advocated for the management of Amavata, It brings Laghuta in the body. Ten types of Langhana have been said in Charaka viz. Suddhi of four types (Vamana, Virechana, Asthapana and Shirovirechana), Pipasa, Maruta, Atapa, Pachana Upavasa and Vyayama. Vagbhata mentioned Langhana similar to Apatarpana, under the heading Shodhana and Shamana which are further divided into 5 and 7 types respectively. The use of substances which possess the properties like Laghu, Ushana, Tikshana, Ruksha, Vishada, Sukshama, Khara, Sara and Kathina cause Langhana. Upavasa (no consumption of food materials) is the main type of Langhana useful in case of Amavata.

Amavata is a Amashayotha Vyadhi. The pathology originates in Amashaya due to poor digestion in presence of Mandagni, ultimately resulting in formation of Ama. So the starvation will further stop the production of Ama and it helps in digestion of Ama. The use of drugs having the Langhana properties will also benefit in Pachana of Ama and correct the Mandagni. Once the Ama is cured, and the strength of the Agni is restored the measure to control the Vata can be instituted. While doing the Langhana measure care should be taken as these measures can further vitiate the Vata Dosha. So Langhana should be stopped as soon as the Nirama Vata condition is achieved. Langhana also create hunger reflex in the patients resulting indirectly in enhanced production of internal corticosteroids which provide beneficial effect by reducing the Inflammation. On the whole due to Langhana, Amapachana takes place reducing the symptoms produced as a result of Ama.

Svedana: Svedana is the process which causes perspiration, destroys stiffness, heaviness of the body and cold. In Ayurveda different varieties of Svedana has been said viz. Sagnisveda, Niragnisveda, Rukshasveda Snigdhasveda of which Rukshasveda with Baluka (Hot sand). Snigdhasveda with some oil preparation will surely aggravate the symptoms because snigdha is a very conducive condition for Ama. So Rukshasveda has been advocated. It is beneficial

because of its Ushana Guna which digests (Pachana) the Ama present in affected area and also dilates the channel. Thus obstruction of channels (Srotorodha) is removed. Relief in obstruction results in perspiration. Other type of Svedana which is good in case of Amavata is internal administration of Ushana Jala (hot water). Ushana Jala is having Dipana, Pachana, Srotoshodhana, Jvaraghna, Balya, Ruchikara and Svedakara properties.

In chronic stage of Amavata when Rukshata is increased Snigdhasveda should also be employed. Charaka has mentioned that when Vitiated Vata is located in Sleshama Sthana, Rukshasveda followed by Snigdhasveda should be applied. Svedana has been specially advocated in case of Stambha, Gaurava, Jadya, Sheeta, and Shoola which are the predominant features of Amavata. Among others Atapasevana, and Ushana Jala (processed in Vataghna Dravyas) Snana are also helpful Svedana in Amavata.

Tikta-Katu and Deepana Dravyas: Tikta and Katu Rasa are Laghu Ushana, Tikshana in properties which are very useful for Ama Pachana. These are also Deepana and Pachana. So by means of these properties digestion of Ama, restoration of Agni (Deepana) removal of excessive Kledaka Kapha and bringing of the Pakva Dosha to the Kostha from the Shakha takes place. But care should be taken in monitoring the extent of vitiation of Vata Dosha because the Tikta-Katu and Deepana dravya increase the Vata Dosha. The drugs selected with Tikta and Katu Rasa should also possess the Vataghna properties "Shunthi has such properties. Because of its Snigdha guna and Madhura Vipaka it inhibits more vitiation of Vata. Other renowned drugs possessing these Rasa are Chitraka, Guduchi, Pippali, Maricha etc. The drugs Panchakol Churna, Ajmodadi Churna and Vaishvanar Churna were used. Various Guggulu kalpa like Sinhanad Guggulu, Rasnadi Guggulu, Trayodashanga Guggulu having Amapachana, Agnideepan and Vatanulomana in action were used.

Virechana: Virechana is a therapy which is indicated in Shodhana purpose. By virtue of it the Dosha are eliminated by Adhomarga. After Langhana, Swedana and Tikta, Katu, Deepana Dravyas, Doshas attain Niramavastha and may require elimination from the body by Shodhana. Production of Ama is the result of Avarana of Pitta Sthana by Kledaka Kapha, thus hampering the digestive activity of the Pachaka Pitta. Virechana removes the Avarana produced by Kledaka Kapha and most suited therapy for the Sthanika Dosha Pitta. It helps to normalize the Pratiloma Gati of Vata, which produces symptoms like Anaha, Vibandha, Antrakujana, Kukshishula etc. It has direct effect on Agnisthana and hampered Mandagni is one of the initiating factors in Amavata. It pacifies the vitiated Kapha and Vata Dosha and

has the quality of Srotovishodhana. Erand Sneha, Triphala, Panchasakar, Gandarva Haritaki are mentioned for Virechana Karma. Among these Erand Sneha is the best; it pacifies Vata, Amapachaka and eliminates the Mala dosha.

Snehapana: Snehapana is the process by which Snigdhatta, Vishyandata, Mriduta and Kledana in body are achieved. The properties of Sneha are Drava, Sukshama, Sara, Snigdha, Pichhila, Guru, Sheet, Manda and Mridu. Snehapana is of two types Achha Snehapana and Sidha Snehapana. The therapeutic measures so far employed are likely to cause Rukshata in the Dhatu and provocation of Vata which may result in further aggravation of disease process. This can be well controlled by administration of Sneha. A medicated Sneha processed in Ushana, Katu, tikta Rasa drugs is very effective both for Ama and Vata. Due to chronic nature of the disease remarkable Dhatukshaya and weakness develops in the body. Hence Brimhana Snehapana is recommended at this stage. Shamana Snehapana-Snehana has been stated to augment the Agni as it influence the digestion by softening food and stimulating the Agni. Snehapana is also given in case of Asthi Majjagata Vata. As the Asthi and majja Dhatus are quite involved in Amavata Snehapana will surely help the patients. Chitrakadi Ghrita, Amritaprash Ghrita and Shringaveradhya Ghrita are mentioned for Vata Shamana.

Basti: In Ayurvedic classics, Basti is advocated as Ardha Chikitsa and best procedure to control vitiated Vata Dosha. Vata is the second important pathognomic factor of Amavata. So Basti is very helpful in Amavata. The process of administration of medicated liquid materials through anus (Adhomarga) is known as Basti. As the disease attains chronicity the Vata becomes more Pravridha. Basti is very useful in this stage. In Amavata both Anuvasana as well as Asthapana Basti are recommended.

Anuvasana Basti with Sneha removes the Rukshata of the body caused by Deepana and Pachana measures to remove the Ama and control the Vata due to its Snehana properties. It maintains the function of Agni and nourishes the body. Asthapana Basti eliminates the Dosha brought to the kostha by Deepana and Pachana. Besides these it also strengthen the local function of the Kostha and remove the Anaha, Vivanadha etc.

Chakrapani has recommended Saindhavadi Taila for Anuvasana Basti and Kshara Basti for Asthapana Basti.

Pathya Ahara

Annavarga - Yava, Kulatha, Raktashali, Shayamaka, Kodrava, Purana Shashtishali,

Shaka Varga - Vastuka, Shigru, Karvelaka, Patola

Dugdhavarga - Adraka Ksheer paka

Mansa Varga - Jangala Mans

Drava - Ushna Jala, Purana Madya, Gomutra, Takra & Kanji with Shunthichurana

Drugs - Katu-Tikta Dravya-, Shunthi, Gokshuru Bhallataka, Vridhadaruka, Varuna, Lashuna.

Pathya Vihara - Rukshasveda with Baluka Potali

Apathayahara - Dadhi, Kshira, Matsya, Guda, Mansapishtaka, Viruddhahara, Sheeta Jala are Apathya in Amavata.

Apathya Vihara - Viruddha Chesta, Snigdha Abhyanga, Purvavata, Vegarodha and Jagarana.

DISCUSSION

Amavata is a Shula pradhana vyadhi. The intensity of the pain is high grade among the other diseases. It is one of the crippling diseases, claiming the maximum loss of human power. It is not only a disorder of locomotor system but is a systemic disease and is named after its chief pathogenic constituents i.e. Ama and Vata. The aetiopathogenesis of Amavata based on the disturbance of Agni and vata dominant Tridosha. The disease is initiated by the consumption of Viruddha Ahara and simultaneous indulgence in Viruddha Ahara in the pre-existence of Mandagni. Though, Ama and Vata are chiefly pathogenic factors Kapha and Pitta are also invariably involved in its samprapti. It is well known that Amavata is a disease of Madhyama rogamarga as per its disease usually starts from the kostha (Maha srotas) and Agnimandya is usually found with special inclination for Sleshma Sthana especially Sandhi. Rasa, Asthi and Majja dhatus are primarily involved Dushyas though the Mamsa Dhatu, Snayu and Kandara are also affected. Agnimandya and Ama formation denotes that Abhyantara rogamarga also involved in this disease. Sandhishoola, Sandhishotha, Stabdhata and Sparshasahyata are salient feature of the disease. The disease Amavata run a chronic course and Jadya, Sankocha, Angavaikalya etc. are responsible for crippling of the patients in the long run. The treatment principle of Amavata stands on three process–

1. **Ama pachana** – by Langhana, Swedana, Pachana, Deepana.
2. **Ama/vata Nirharana** – by Virechan, Snehapana & Basti.
3. **Agni saramkshana** – by Deepana.

The modern medicine provides temporary symptomatic relief and patient have to take medicines for long time, which may be having some unwanted side effects. Ayurveda can provide permanent cure for the disease.

CONCLUSION

It can be concluded that Ama and Vata plays a major role in causation of this disease. Thus the approach of Ayurveda in this field is essentially preventive and the medicines can be provided permanent and better cure for the disease.

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