

ROLE OF PANCHAKARMA IN JANUSANDHIGATAVATA- A CRITICAL APPROACH

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ABSTRACT

Panchakarma is the five treatment modalities explained in Ayurveda under the purview of *Shodhana*. *Janusandhigataavata* is the term coined due to the localization of pathology in knee joint. The disease where the progression is slow but seen in late forty's. *Janusandhigataavata* can be correlated with Osteoarthritis of the knee in contemporary system of medicine. Crepitus is the hall mark of the disease. It is characterized by pain, swelling, difficulty in flexion and extension and morning stiffness of the affected knee joint.

KEYWORDS: Janusandhigataavata, Osteoarthritis of knee, Panchakarma, Shodhana.

INTRODUCTION

Panchakarma (Penta biopurification) includes *Vamana* (Emesis), *Virechana* (Purgation), *Sneha Vasti* (Fat enema), *Kashaya Vasthi* (Decoction enema) and *Nasya karma* (Errhine therapy). The disease conquered in terms of *Shodhana* will have no chance of recurrence.^[1] *Janusandhigataavata* is the term used due to pathology lying in the knee joint. It is one of the *gataavata* types of disorder. We will come across with *sandhigataavata* in classical books of Ayurveda. *Janubheda* was seen instead of *janusandhigataavata* in *Vataja nanatmaja vikaras* of Charaka Samhita.^[2] The disease where the progression is slow but seen in late forty's. In the advanced stage of the disease person will become handicapped. *Janusandhigataavata* is the disease of *asthi vaha srotogata vikara*.^[3] It will come under the *asthi majjagata vata vikara*.^[4] It is even coming under *sandhigata vata vikara*. *Janusandhigataavata* can be correlated with Osteoarthritis of the knee in contemporary system of medicine. Crepitus is the hall mark of the disease. It is characterized by pain, swelling, difficulty in flexion and extension and morning stiffness of the affected knee joint.^[5]

INCIDENCE AND PREVALENCE

Though the prevalence rate of Osteoarthritis is 80% at the age of 65, but symptomatic OA will be 25 to 30%.^[6] 5.78% is the prevalence of OA in rural India according to the report^[7] 9.6% in men and 18% in women are the global prevalence of symptomatic OA.^[8]

TREATMENTS OF JANUSANDHIGATAVATA

Acharya Charaka highlighted only *samana vatavyadhi chikitsa* in the context of *Janusandhigataavata*. Further he has emphasized that *tikta rasa dravya sadhita ksheera basti* (enema prepared of bitter drugs processed in milk and addition of ghee) in diseases of *asthivaha srotas* (Channels carrying nourishment to bone tissue).^[9] Acharya Sushruta^[10] and Vagbhata^[11] have mentioned specific treatment modalities for *sandhigataavata*. It includes *Snehana* (internal and external oleation therapy), *Upanaha* (application of hot poultice), *Agni karma* (thermal cauterization), *bandhana* (tying the area with leaves, medicinal paste etc) and *Unmardana* (massage on the affected knee in upward direction). Almost all the Acharyas have opined that, *bahya* and *abhyantara sneha* (internal and external oleation) *chikitsa* in *asthi-majjagata vata vikaras* (diseases of morbid vata residing in bone and bone marrow).^[12,13] Here *bahya sneha* (external oleation) includes *abhyanga* (oil massage), *januvasti* (retaining medicated liquids on the knee joint), *janu seka* (pouring of medicated oil on the knee joint), *janupichu* (keeping cotton soaked in oil over the knee) and *janu lepa* (application of medicinal paste on the knee). Internally *snehapana* (oral intake of fatty material) and *vasti karma* (*sneha vasti/ anuvasana vasti/ matravasti*-administration of fatty materials).

SADHYASADHYATA

All disorders caused due to morbid *vata* (one among the three humoral factors) are difficult to cure. Physician should make an effort to get rid of the ailment. God's grace may help in getting rid of the ailment. Especially *janusandhigataavata* is *madhyama roga margagata, gambheera dhatu samashrita vata vikara* (deep tissue seated ailment). Hence it is difficult to cure.

DISCUSSION

SNEHAPANA: (INTERNAL OLEATION)

Medicated oils like *Ksheerabala taila, Sahacharadi taila, Gandha taila, Maharaja Prasarini taila* etc are used. Here *snehapana* can be done in *shamana* dose along with *ksheera* as *anupana*. Acharya Charaka clearly mentioned in *Siddhisthana* that, *taila* (medicated oil) is

the best medicine to curb *vata* (one among the three humoral factors)^[14] *Taila* (medicated oil) have exactly opposite quality to that of *vata dosha* (one among the three humoral factors).

UPANAHA: (POULTICE)

A special kind of sudation method where in medicinal paste made up of *Vata* (one among the three humoral factors) mitigating herbs are applied on the affected knee. Initially medicated oil is made luke warm and applied on the knee. Knee is tied with the castor leaves after the application of hot poultice. The potency of the medicine used is hot in nature, causing irritation in the area, resulting in absorption of medicaments. There by helps in reduction of symptoms like swelling, pain etc.

JANU VASTI: (RETAINING MEDICATED LIQUIDS)

It is an example for external oleation method. It can be considered under the category of *drava sweda* (Sudation with medicated liquids). Here black gram powder is made in to a thick paste and applied like a rim or ring over the knee joint. Medicated oil is poured inside the ring after making luke warm. Procedure is repeated for 30 to 45 minutes. It can be done for 07 or 14 days. This will help in absorption of fatty material there by resulting in easy movement of the joint. It reduces friction in the joint. Symptoms like pain, tenderness and crepitus of the affected knee will come down.

JANU SEKA/DHARA: (POURING OF MEDICATED LIQUID)

This comes under the category of *drava sweda* or *parisheka sweda* (Sudation with medicated liquids). Here medicated liquids such as *dhanyamla* (liquid obtained after fermenting cereals/grains), *taila* (medicated oil), *kashaya* (medicated decoction) etc were used. Above mentioned medicated liquids are poured in a continuous stream for a stipulated period after the body being anointed with medicated *tailas* (medicated oil). This procedure can be done for 07 or 14 or 21 days. This procedure helps to overcome the pain, tenderness and crepitus of the knee joint. The *tailas* (medicated oil) used in the procedure having exactly opposite qualities to that of *vata* (one among the three humoral factors).

SNEHA /ANUVASANA/MATRA VASTI: (FAT ENEMA)

Here medicated fatty materials like ghee or oil can be administered through rectal route. It is having swift action by directly linked with the circulation. Best medicines like *Panchatikta ghrita*, *ketakimooladi taila* etc can be used. *Tikta rasa* will have impact on the bone tissue. Which is processed with *ghrita* does the mitigation of *vata* (one among the three humoral

factors). Even it corrects the *meda* and *asthi dhatwagni* there by proper formation of bone tissue will take place.

TIKTA KSHEERA VASTI

Acharya Charaka mentioned, while explaining the *asthivaha sroto chikitsa* that, *tikta rasa dravya sadhita ksheera vasti* is the ideal therapy to be administered. Here daily usage of *ksheera* and *ghrita* act as *rasayana*. *Khara guna* present in the *tikta rasa* responsible for the formation of *asthi dhatu*, which is mixed with *ksheera* and *ghrita* does the shaman of *Vata* (one among the three humoral factors). *Vasti karma* is considered as *ardha chikitsa* or complete *chikitsa* due to its main action on *Vata dosha* (one among the three humoral factors).

CONCLUSION

Janusandhigatavata is the term coined due to pathology lies in the knee joint. It can be compared with *Osteoarthritis* of the knee in contemporary system of medicine. It is *madhyama rogamargagata asthi* and *majja dhatu pradohaja vikara*. Treatment includes *bahya* and *abhyantara sneha* along with *Panchakarma* therapies. *Panchakarma* therapies will bring ray of hope for *Osteoarthritis* patients. It will improve the quality of life of *Osteoarthritis* patients.

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