EFFECT OF VALUKA SWEDANA AND VAITARANA BASTI IN THE MANAGEMENT OF AMAVATA WITH SPECIAL REFERENCE TO RHEUMATOID ARTHRITIS: A CASE REPORT

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ABSTRACT

Amavata is one of the common and most crippling disorder of joints. It is a chronic, degenerative disease of the connective tissue mainly involving the joints. Ama associated with aggravated Vata plays dominant role in the pathogenesis of Amavata. The clinical features of Amavata such as pain, swelling, stiffness of joints, fever and general debility closely resembles the rheumatological disorder called as Rheumatoid Arthritis. Prevalence of RA is approximately 1% worldwide and seen more in developing countries. Modern medicine advises NSAID’S, anti-inflammatory drugs, steroids and disease modifying anti rheumatic drugs for the management of RA, which has limitations for long term uses and sometimes having severe side effects. A 53 year old male patient was diagnosed with Amavata / RA and was treated with the classical treatment advised by Acharya Yogaratnakar i.e Langhana, Valuka Swedana, Deepana, Amapachana, Shodhana, Shamana and Basti Chikitsa for 15 days. Acharya Chakradatta has indicated Vaitarana basti in Amavata as it brings Doshas from shakha to koshtha and removes them out of the body via Gudamarg (Anus) and gives relief. The clinical assessment was made on the basis of relief in the symptoms of pain, swelling and stiffness of joints. Thus this study emphasizes that Amavata / RA can be controlled effectively using the guidelines mentioned by Ayurveda.

KEYWORDS: Amavata, Rheumatoid Arthritis, Valuka Swedana, Vaitarana basti.
INTRODUCTION
Amavata is the most common crippling and disabling disorder in the world as well as in India. The word Ama + Vata indicates the prime components of the disease. Vitiated Vata dosha carries Ama to the multiple organs and joints, causing swelling, pain, stiffness, loss of appetite and decreases the agni. These clinical features of Amavata closely resembles the rheumatological disorder called as Rheumatoid arthritis (RA).

Prevalence of RA is approximately 1% world wide and seen more in developing countries. Modern medicine advises NSAIDs, Anti inflammatory drugs, Steroids and disease modifying Anti rheumatic drugs for the management of RA, which has limitation for long term use and sometimes having severe side effects.

Since the main cause for Amavata includes improper food habits, physical inactivity and wrong body posture. Incomplete digestion of Rasaadi dhatu leads to the formation of Ama. Acharya Chakradatta has mentioned Langhana, Valuka Swedana and Vaitarana Basti as a line of treatment for Amavata. Hence, this study includes Langhana – Pachana, ruksha Valuka Swedana and Vaitarana Basti in the management of Amavata.

CASE DESCRIPTION
A 53 year old male patient came to our institute (2/1/19) with c/o – Pain and swelling over right wrist joint Pain and swelling over right knee joint Early morning stiffness of multiple joints Backache Loss of Appetite since 6 months N/K/C/O – DM/HTN/EPILEPSY/BA/IHD/PTB
N/H/O – Any Medical illness or Surgery H/O – Tobacco chewing since 30 years O/E – GC – Fair, Afebrile
Vitals Stable
INVESTIGATION:- (1/1/19) ESR – HIGH (42mm/hr)
RA – POSITIVE

TREATMENT
- Deepana Pachana treatment with Panchakola Churna 3g twice a day before meals
- Tab Sinhanad Guggulu (500mg) twice a day
- Maharasnaadi Kadha 40ml twice day
- Eranda Taila 10ml at night
- Ruksha Valuka Swedana (Hot Fomentation with Sand tied in a Cotton Cloth) applied
over multiple joints for 15-20 mins, 2-3 times in a day and
- Vaitarana Basti.

**Table 1: Ingredients for Vaitarana Basti.**

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<tbody>
<tr>
<td>Saindhava lavana</td>
<td>10gm</td>
</tr>
<tr>
<td>Guda (Jaggery)</td>
<td>50gm</td>
</tr>
<tr>
<td>Tamarind</td>
<td>50gm</td>
</tr>
<tr>
<td>Tila taila</td>
<td>60ml</td>
</tr>
<tr>
<td>Gomutra</td>
<td>40ml</td>
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Equal quantity of Guda and Tamarind are taken in lukewarm water initially. Mixed uniformly with each other and soaked overnight. In the morning, Saindhav, Til taila and Gomutra is added in the mixture. Obtained kadha is then filtered out and used for giving basti on a daily basis. This is called as Vaitarana basti, and it was continued for a period of 15 days, till the patient was admitted in the hospital. After completion of basti, patient felt almost 50% relief in pain and swelling around right wrist, right knee joint, backache, morning stiffness of multiple joint and increase in appetite.

Patient was discharged on the conservative treatment of Sinhanad Guggulu 2 tab(500mg) thrice a day, Maharasnaadi Kadha 40ml twice a day, Eranda Taila 10ml at night and Valuka Swedana was asked to be continued at home.

Assessment was made after 3 months on the basis of signs and symptoms, and laboratory investigation. Before Basti karma, RA factor was positive, which was found negative after three months of treatment. ESR came to within range. Pain and morning stiffness were markedly reduced, swelling was subsided, appetite was improved and backache was mild. The above case was successfully managed with Ayurvedic treatment of Amavata.

**Table 2: Assessment before and after treatment.**

<table>
<thead>
<tr>
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<th>Before</th>
<th>After</th>
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<tbody>
<tr>
<td>RA Factor</td>
<td>Positive</td>
<td>Negative</td>
</tr>
<tr>
<td>ESR</td>
<td>High(42mm/hr)</td>
<td>Within range(7mm/hr)</td>
</tr>
<tr>
<td>Morning Stiffness</td>
<td>Present</td>
<td>Markedly reduced</td>
</tr>
<tr>
<td>Pain</td>
<td>Present</td>
<td>Markedly reduced</td>
</tr>
<tr>
<td>Swelling</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td>Anorexia</td>
<td>Present</td>
<td>Absent</td>
</tr>
</tbody>
</table>
DISCUSSION

Panchakol Churna acts as Deepana – Pachana drug as amapachana is mentioned as the first line of treatment for Ama. Panchakol Churna having Laghu, Ruksha, Sukshma Guna and being Ushna Virya helps in Pachana and Agnideepana, thus corrects Agnimandya and maintains Dhatwagni too.

Vaitarana Basti advised by Acharya Chakradutta, having Laghu, Ushna, Ruksha, Tikshna Guna, helps in overcoming strotodushti due to sanga (obstruction due to Ama) and thus helps in breaking down the pathogenesis of the disease.

Valuka Swedana having Ruksh, Ushna, Laghu Guna helps in relieving stiffness, pain and swelling. Sinhanad Guggulu, and Maharasnaadi Kadha works as Amapachana, Anti inflammatory and Pain killer in Amavata and is mentioned as Rogaadhikar of Amavata. Eranda tail has been mentioned as an important drug for Amavata due to its Vataanulomana action.

CONCLUSION

Valuka Swedana and Vaitarana Basti along with Deepana – Pachana treatment shows remarkable symptomatic relief in the features of Amavata/RA. The case indicates that when treatment is done on the base of Ayurveda guidelines Amavata/RA can be effectively managed. The results need to be studied in more numbers of populations for the better assessment.

REFERENCES

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