AYURVEDIC MANAGEMENT OF AMAVATA A CASE STUDY

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Abstract- Amavata is a chronic immune-inflammatory systemic disorder mainly affecting synovial joints, caused due to formation of Ama and its association with vitiated Vata dosha and deposition in Shleshma sthana i.e., (joints) On the basis of clinical presentation, it is close to an entity described as Amavata in Ayurvedic texts. In this condition usually lining of the joints are involved causing bone erosion and joint deformity. Acharya Chakradatta mentioned Chikitsa Siddhanta for management of Amavata, which consists Langhana, Swedana, use of drugs having Tikta, Katu Rasa and Deepana property, Virechana, Snehapana and Vasti. These modalities help in Amapachana, Vatashamana, Strotoshodhana and Sthana Balya. In present case 43 year old male who was suffering from Polyarticular joint pain of wrist joints, metacarpophalangeal joints and proximal interphalangeal joints of both hands and knee joints along with swelling and stiffness, raised temperature in all polyarticular joints, severe morning stiffness, restricted movements, reduced grip strength, low grade fever associated symptoms constipation since 6 month, visited the hospital for Ayurvedic treatment. The patient was diagnosed as a case of Amavata on the basis of the clinical signs and symptoms and investigations. Both internal and external Ayurvedic treatment plan was used. He was treated with Ayurvedic medicines, which gives effective results within 30 days of Ayurvedic treatment.

Keyword : Amavata, Ama, pachana, deepan, baaluka swedan.

INTRODUCTION

In present time unhealthy food practices, life changes and surroundings makes human beings a victim of many deadful sicknesses confronted by way of the mankind these days. Amavata is one such sort of a situation point out in Ayurveda that arises because of the constant use of incompatible combination of food articles and regimens. Amavata is a disease of Asthivaha and Rasavaha Strotas. It is specifically produced due to Ama and vitiation of Vata Dosha. The Ama is carried by the aggravated Vata and deposited in Sleshmasthanas. The signs and symptoms referred to for R.A. May be correlated to the Amavata lakshanas inclusive of Angamarda, Aruchi, Trishna (feeling of thirst), Alasya, Gourava (heaviness of the frame), Jwara (fever), Apakata (indigestion) and Soonangata (swelling).^[1] The nidanas (causes) lead to the formation of Ama and vitiation of Vata ensuing in the signs of Amavata. Ayurvedic approach to Amavata (RA) leads to break in the Samprapti (pathogenesis) of the sickness and thereby eliminating the root purpose of the disorder. Ayurvedic treatment modalities like Langhana, Swedana, use of medication having Tikta, Katu rasa and Deepana belongings, Virechana, Snehapana, Vasti and many others are stated to be carried out in Amavata.^[2]

CASE PRESENTATION

This is the case presentation of a 43 year old male patient with O.P.D no. 14993 dated 02.08.2023 visited kaya chikitsa O.P.D of Sri ganaganagar College of Ayurvedic Science & Hospital, Tantia University Sri ganganagar with complaint of Polyarticular joint pain, metacarpophalangeal joints and proximal interphalangeal joints of both hands and knee joints along with swelling and stiffness, raised temperature in all polyarticular joints, severe morning stiffness, restricted movements, reduced grip strength, low grade fever associated symptoms mild constipation, since 6 month. The sleep was also disturbed as pain and stiffness was increasing at night. Sometimes, the patient was unable to her daily routine activity due to increased symptoms. There was no significant family history related to this disease and there no other past illness.

Ayurved parikshan

- Nadi- Vat-Kaphaj
- Mala- Mala vibbadhata
- Mutra-5-6 vega/day
- * * * * * * Jivha- Saam
- Shabd prakrut
- Sparsh- ushana
- Drik prakrut
- Aakriti Madhyanya
- Kshudha- Mandya
- Agni- Mandagni
- Nidra- Alpanidra

• Srotodushti- rasavaha, annavaha, asthimajjavaha.

Investigation

- CBC with ESR
- C-reactive protein(CRP)
- RA factor.

General examination Vitals

- Blood Pressure-130/80 mmHg
- Pulse Rate -78 /min
- Respiratory Rate- 20/min
- Temperature mild raised

On Systemic Examination

Patient was having Tenderness & stiffness on all joints (upper and lower limbs) along with marked swelling presents on both wrist and knee joints, Raised temperature in all polyarticular joints, Restricted and painful movement of both knee and wrist joints. Before coming to this hospital, patient had consultation another physician with a treatment and she had some essential blood investigation like RA Factor, Serum C- Reactive protein (SCRP) done. In those reports, the RA Factor and SCRP both were reactive. She had undergone allopathic treatment-NSAIDS but got only temporary relief. With these complaints, patient approached to our hospital for further Ayurvedic treatment.

The patient was diagnosed as a case of Amavata (Rheumatoid arthritis) on the basis of the clinical signs and symptoms and investigations. The Ayurvedic diagnosis on this condition is Amavat can be correlated with rheumatoid arthritis.

TREATMENT

Sr.No.	Medicine	Dose	Time	Anupana	Duration
1.	Shadangpaniya kshaya	20 ml BD	Before	Koshna jala	2 month
	+		meal		
	Dashmool kwath				
2.	Ajmodadi churna	3 gm BD	After meal	Koshna jala	2 month
3.	Simhanada Guggulu	2 tab. BD	After meal	Koshna jala	2 month
4.	Castor oil	10 ml	At night	Hot Milk	45 days

Table-1 Showing Abhyantar Chikitsa- (Internal Medication) used in case study

Table -2 Bahya Chikitsa - (External Treatment) used in case study

Sr.No.	Procedure	Duration
1.	Saindhvadi Tail -	30 day
2.	Baluka Pottali Swedana	30 day

Oberservation And Result

The patient was given a above mention treatment for 15 days in the beginning. On first follow up after 15 days all minor complaints were abolished. During treatment, morning stiffness & Fever totally subside raised temperature in all Poly articular joints was normal associated symptoms were reduced. There was mild reduction in pain, swelling, tenderness and stiffness of joints. After reduction of swelling, mild pain was there hence above medication continued baluka swedan and saindhavadi tail for local application in all joints was given for next 30 days. After next 30 days follow up, General functionality, gripping power and walking time was markedly improved. Then same treatment was continued till her for next 15 days. After completion of whole treatment, all the complaints of patient were relieved. Patient gradually recovered with the treatment. There was significant improvement in symptoms.

Tuble 6 investigation before and after treatment					
Investigation	Before treatment	After treatment			
Hb%	14.2g/dl	13.6g/dl			
TLC	8300cu/mm	7700cu/mm			
Platelet count	1.95	2.15			
ESR	24mm/hr	10mm/hr			
CRP	13.6mg/l	1.8mg/l			
RA Factor	62 IU/ml.	12 IU/ml			

DISCUSSION

In this case, patient who became tormented by Amavata was cured with the aid of Ayurvedic chikitsa. Amavata is complex ailment to deal since there are sort of triggering factors. Due to the unpredictable therapeutic effects it's miles not possible to give correct facts, prognosis & pathogenesis of the disorder. Pathogenesis of which lies in technology of Ama after Mandagni. Ama and vata are the critical components inside the pathogenesis of Amavata. As no disorder takes place without impairment of agni. The aim of the treatment in Amavata is to reduce Ama via its metabolism (Amapachana) and to normalise the vitiated Vata and Kapha dosha.

The critical trouble in chikitsa is deepana and Amapachana. Here is a likely clarification of the mode of action of the medicine used:

1. Shadangpaniya kshaya – it is best for detoxification and quenching the increased and aggravated pitta dosha and reducing Ama (toxic undigested food particles) and Amavisha (toxins). It also acts on kapha dosha, so it help to treat pitta-kapha disorders including fever.^[3]

2. Dashmool kwath - Dashmool is include in Sothahara mahakashay. by reducing inflammation. it helps to decrease Shool in patients. Dashmool mainly act on vata dosha and reduce its aggravation.^[4]

3. Ajmodadi churna – It is a drug of choice for Amavat. It prevent Ama formation, stimulates its digestive function & reduces already accumulated Amavish in the body. it reduces pain, inflammation, swelling of joints & stiffness.^[5]

4. Simhanada Guggulu - As an entire the characteristics of medicine in Simhanada Guggulu can be taken into consideration as laghu, ruksha, ushna, tikshna . Majority of the medication are having vata-kapha shamaka quality. Owing to this property, antagonism to kapha and Ama it brings extensive improvement in sign and symptom of disease.^[6]

5. Castor oil – It is vatashamak, malashodhak . It is Katu, Ushna and Vataghna. Due to its Sukshma Guna, it reaches Sandhi and breaks Doshasanghata. Ushna property also acts as deepana and potentiates digestive fire and consequently checking Ama formation. It's natural anti-inflammatory agent.^[7,8]

6. Saindhavadi oil – it is miles Amapachana & Javaraghana, helps in Srotosodhana, Saindhava due to its Sukshma, Usna, Arukshya, Vyavahi, clears minute channels, allows in Ama Pachana.^[9]

7. Baluka Sweda - It is a type of Ruksha sweda which relieves the stiffness, pain and heaviness in the body and induces sweating. It is often utilized in Kaphaja issues and ailment originated out of Ama, specially in Amavata. It enables in Shoshan (digestion and drying) of Ama present in Kapha sthana (joints) consequently lowering stiffness of the joint and assuaging the pain. Swedana also increases the Dhatwagni at the component worried thereby enhancing its feature and mobility, mainly the joints in this case.^[10,11]

After crowning glory of remedy patient gets comfort from all the symptoms and high-quality of life improved significant

CONCLUSION

From this case examine it could be concluded that Amavata may be successfully and effectively handled by using the usage of Ayurvedic chikitsa. Ayurvedic method helped in restoring the high-quality of life of this patient. During the evaluation, after of entirety of remedy, it has been observed that affected person was given large development in related signs and symptoms of Amavata and Though the result changed into encouraging, it's miles locating on a single affected person, and want extra studies to verify impact of Ayurvedic treatment in Amavata. Ayurveda can provide a strategy to the everyday increasing issue approximately this sickness. When treated with Ayurvedic remedy agenda as defined in Ayurvedic literature according to the circumstance of patient and state of the disorder, we will get fine results for treating many different diseases like this.

REFERENCES:

- 1. Madhavakara, Madhavanidana, Vimala Madhudhara Teeka by Tripathi Brahmanand, Chaukhambha Surabharati Prakashana, Varanasi, ed. 2010, poorvardha, adhyaya 25, (Page.571-577).
- 2. Tripathi Ravidatta, Charaka samhita with Vidya manoharma Hindi commentary, Chaukhamba Sanskrit Pratishthan, Delhi, 2009. Ni 8/31 (Pg.542)
- 3. Acharya Vagbhata Astanga hridaya, by dr.brahmanand tripathi., Chaukamba Sanskrit pratisthan, delhi, jwarchikitsa,1/15 page no.555
- 4. Prof. Sidhdhi Nandan Mishra, Bhaishajya Ratnavali, Chukambha Surbharati Prakashan, Varanasi, chapter 5, page no. 105
- 5. Acharya Sharangadhara Sharangadhara Samhita, Hindi connentary by P.D Sharma. Chaukhamba Sanskrit sansthan ,madhyam khand 6/113-117.
- 6. Sri Govindadas, BhaishajyaRatnavali, Hindi commentary by Shri AmbikadattaShastri, ChaukhambhaPrakashana, Varanasi, Edition2014, Amavatachikitsa, 29/181-189, page no.628
- 7. Sri Govindadas, Bhaishajya Ratnavali, Hindi commentary by Shri Ambikadatta Shastri, Chaukhambha Prakashana, Varanasi, Edition2014, Amavatachikitsa, 29/20, page no.615.
- 8. Agnivesha, Charakasamhita, Charaka Chandrika Hindi commentary by Tripathi Brahmanand, Chaukhambha Surabharati Prakashan, Varanasi, 2006, sutrasthana 13/12/1, page no.164.
- 9. Kabiraj Govind Das Sen's Bhaisajya Ratnavali, edited with Siddhiprada Hindi Commentary by Prof.Siddhi Nandan Mishra, Varanasi, Chaukambha Surbharati Prakashan, edition 2011, Chapter 29, Amavatarogadhikar, Page 612-613.
- 10. Shastri Kashinath & Gorakhnath Chaturvedi, Charaka Samhita of Agnivesha elaborated Vidyotini Hindi commentary, Sutra Sthana 14th chapter Swedadhyay, Chaukhambha Bharati Sansthan, Varanasi, reprint edition; 2005. p. 283.
- 11. Shastri Ambikadutt, Susruta Samhita edited with Ayurveda tatva sandipika Hindi Commentary, Chikitsa Sthana 32nd chapter, Swedavcharniya

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