

An Ayurvedic Management of Amavata with special reference to Rheumatoid Arthritis: A Case Study

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Abstract

Amavata is made up of a mixture of two words, *Ama* and *Vata*. The ailment is often due to derangement of *Agni*, like *Jatharagni*, *Dhatvagni* and *Bhutagni*, etc. Ensuing in the production of *Ama* and this *Ama* circulates in the complete body by means of the vitiated *Vata* and receives positioned in the *Shleshmasthanas* (*Amashaya*, *Asthisandhi* etc) inflicting pain, stiffness and swelling over the small and big joints making a person lame. The scientific presentation of *Amavata* closely mimics with the unique range of rheumatological issues referred to as rheumatoid arthritis in accordance with their similarities on medical features rheumatoid arthritis is a continual inflammatory, unfavourable and deforming symmetrical polyarthritis related with systemic involvement. Allopathic treatment provides symptomatic relief but the underlined pathology remains untreated due to absence of effective therapy and also giving rise to many side effects, toxic symptoms and adverse reactions. The ayurvedic treatment not only devoid such type of sick effect, but also presents a higher way by using treating *Agni* and *Ama* at its by using treating *Agni* and *Ama* at its roots. The concepts of administration of *Amavata* are *Langhana*, *Swedana*, *Dravyas* having *Tikta*, *Katu rasa*, *Deepan Pachana* as *Shamanachikitsa*. The first specified description of *Amavata* as a sickness is observed in *Madhav Nidan*, so the existing study offers with systemic assessment of *Amavata* s.r. rheumatoid arthritis from all the classics of ayurveda and its management.

Keywords: Amavata; Langhan; Swedan; Shamana Chikitsa; Virechan; Rheumatoid Arthritis.

1. Introduction

Amavata is a disease in which *Ama* with vitiated *Vata Dosha*, ^[1] accumulates *Sleshma Sthana*, which simulates rheumatoid arthritis in modern parlance. In present era changing of life style, intake of unwholesome and fast food, lack of exercises etc. Will leads to *Mandagni*, which results in the production of *Ama*. When *Ama* combines with the vitiated *Vata Dosha* in *Sleshmasthanas* leads to *Amavata* with the symptoms *Sandhi Shotha*, *Shoola*, *Sparshaasahatwa* and *Gatrastabdhatata*. Clinical features of *Amavata* resembles with rheumatoid arthritis. A chronic inflammatory disorder affecting many joints, including those in the hands and feet minor and major joints. The prevalence of rheumatoid arthritis in india in person has been mentioned to differ from 0.5 to 3.8% in women and from 0.15 to 1.35% in men. ^[2] whenever that *Ama* gets localized in the body tissue or joints,

It can lead to production of pain, stiffness, swelling, tenderness, etc., in the related joints-^[3] the features of *Amavata* are much identical to ra, an autoimmune disorder which causes chronic inflammatory and symmetrical polyarthritis-^[4] in Ayurveda, *Nidana Parivarjana* (avoidance of causative factors) is considered as the first and foremost line Of Management For Any Disease. *Virechanakarma* is a *Shodhana* process (biological purification of the body) to balance

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the Vitiated *Dosha* in general and *Pitta Dosha* in particular.^[5] Hence, this study included both the treatment modalities, *Nidana Parivarjана* and *Virechanakarma* to manage *Amavata* effectively.

2. Methodology

A female patient diagnosed with *Amavata* has been taken for the study and administered with *Shamana Chikitsa* and classical *Virechan karma*.

2.1. Case report

A 48-year-old female patient came to us with chief complaint of

- *Ubhya Parvasandhi Shool* (bilateral finger pain)
- *Ubhya Janusandhi Shool-Shotha* (bilateral knee pain & swelling).
- *Ubhya Manibandha Shool, Shotha & Sparsha-Asahatwa*.
- *Ubhya Ansa-Kurpara Sandhi Shool*.
- *Angamarda*.
- *Aruchi*.
- Morning stiffness all symptoms since 2 years

2.2. History of personal illness

The patient was normal 2 years back. Since then patient have been suffering from *Ubhya Parvasandhi Shool* (bilateral finger pain), *Ubhya Janusandhi Shool-shotha* (bilateral knee pain & swelling), *Ubhya Ansa-Kurpara Sandhi Shool*, *Ubhya Manibandha Shool, Shotha & Sparshaasahatwa*, *Angamarda*, *Aruchi*, morning stiffness. ^[6] for this patient took allopathy treatment but got temporary relief, then she decided to take ayurvedic treatment.

2.3. Examination personal history

- Occupation: Housewife.
- Diet: Mixed diet.
- Appetite: Irregular.
- Allergy: No history of any drug or food allergy.

2.4. on examination

- Afebrile
- P – 88/min
- BP- 130/80 mm of hg
- RS- B/L Clear
- CNS – Conscious Oriented

3. Material and methods

Table 1 Material for management of *Aamvata* as

Sr. No	<i>Dravya</i>	Dose	Duration	<i>Anupana</i>
1	<i>Simhanad Guggul</i>	250 Mg	2 Bd	Luke warm water
2	<i>Lakshadi Guggul</i>	250 Mg	2 Bd	Luke warm water
3	<i>Gandhrvaharitaki Churna</i>	1 Tsf	Hs	Luke warm water
4	<i>Rasnasaptakam Kwath</i>	2 Tsf	Twice A Day	Luke warm water

Table 2 Panchkarma management of *Aamvata* as

Panchakarma	
RookshaSwedana	ValukapottliSweda
Snehana	VishagharbhaTaila
Virechana	Shunthi-Siddha Eranda Tail (5ml In Morning)

Table 3 Grading of *Sandhishoola* (Pain)

Sr. No.	Severity of pain	Grade
1	No pain	0
2	Mild pain	1
3	Moderate, but no difficulty in moving	2
4	Much difficulty in moving the body parts	3

Table 4 Grading of *Sandhishotha* (Swelling)

Sr. No	Severity of swelling	Grade
1	No swelling	0
2	Slight swelling	1
3	Moderate swelling	2
4	Severe swelling	3

Table 5 Grading of *Sparshasahatwa*(Tenderness)

Sr. No	Severity of tenderness	Grade
1	No tenderness	0
2	Subjective experience of tenderness	1
3	Wincing of face on pressure	2
4	Wincing of face and withdrawal of the affected part on pressure	3

4. Discussion of *amavatahetu/ etiology of amavata*^[7]

- *Viruddha Ahara* (incompatible food) -*ViruddhaAhara* plays important role in causing *Ama*.
- *Viruddha Cheshta* (improper physical activity) - *Amavata* is produced due to *Mandagni*
- *Nischalata* (lack of physical activity) - lack of physical activity or sedentary life style is the main cause of accumulation of *Ama* in the body.
- *Snigdham Bhuktavato Annam Vyayaamam*:- performing physical exercise soon after intake of heavy food causes *ama* in the body.

4.1. Discussion on medicine (*sampraptibhnga*)

- *Langhana*:- 1st line of treatment in *Amavata* is *Langhana* which helps in digestion of *Ama*. Here *Langhana* means not complete fasting but, intake of light food. The duration of *Langhana* varies from person to person depending upon individual capacity.
- *Swedana*:- that which induces sweating and relieves *Stambha*, *Gaurava* and *Sheeta*. *Amavata* is a *VataKapha Pradhan Vyadhi* having *Stambha*, *Gaurava* and *Sheeta* as *Pradhan Lakshanas*. *Swedana* indicated here is – *Ruksha Swedana (Valukaand Pottli)*
- *Snehana*: as it aggravates *Ama* so contraindicated in *Amavata*. But to remove the *Dosa Sanga* & to pacify the *Vata Dosa Snehana* is required. *Vishagharbha Taila* is a *Vyadhi Pratyanyika Snehana* in *Amavata*.

- *AushadhiChikitsa*: ^[8]*Katu, Tikta & PachakAahar & Aushadhi*: - the drug which possess *Katu* (pungent), *Ttikta* (bitter) and which act as *Deepana, Pachana* are recommended in *Amavata*. These drugs, by virtue of their qualities does *Aapachana*, hence may help in relieving *Shotha & Shoola*.
 - *Simhanada Guggulu* is the drug of choice in *Amavata*(ra) due to its capacity to improve digestive fire (*Agni*), pacify vitiated *Vata* and *Kapha* especially in joints and improve strength of joints.
- b. *Lakshadi Guggul*: this drug mentioned under *Bhishjyaratnawali Aamvatarogadhikara*. Its contain *Laksha, Asthisamhrut, Kakubha, Ashwagandha, Nagbala, Gugul*. This drug does healing of bones which get degenerated in *Aamvata*.
 - *Rasnasaptakam Kwath*:its contain *Rasna, Amruta, Aragvadha, Devdaru, Trikantaka, Ernada, Punarnava, Shunthi*. Its act as *Shoolaghna*(analgesic), *Vata-KaphaShamaka*, immunomodulator, anti-inflammatory, carminative, appetizer
- d. *Gandharva Haritaki*: *Gandharva Haritaki* is polyherbal ayurvedic medicine. Contains of this medicine are *Erand Tail, Balharitaki, Sunthi, Sandhav* and *Savarchal Lavana*.it has purgative and laxative action. *Gandharva Haritaki* evacuates bowel and removes toxins from body.
- *Virechana - Shunthi-Siddha Eranda Tail* (5 ml at morning): *Shunthi*is best *Aampachak, Shothaghan*, and *Eranda Tail* is one of the best drug mentioned in *Aamvata*, both drug together work as *Vata-KaphaShamak*, immunomodulator, *Shothahara*(antiinflammatory)

5. Observation and result

Patient got relief in swelling and tenderness within 2 days. Rest improvement in all symptoms found within 7 days. After 28th days follow up there is nearly nil of all symptoms. After our successful treatment, we took follow up of patient till next 3 months on each 15 days. I found that there is nil of all symptoms (except occasionally little pain in knee joints, we can consider its normal, as per age of patient and chronic disease)

Table 7 Assessment of *Sandhi-Shool*

Left		Name Of Joints	Right	
Before	After		Before	After
3	0	<i>Parvasandhi</i>	3	1
3	0	<i>Janusandhi</i>	2	1
2	0	<i>Manibandha</i>	3	0
2	0	<i>Ansa Sandh</i>	3	0
1	0	<i>Kurpara Sandhi</i>	2	0

Table 8 Assessment of *Sandhi-Shoth*

Left		Name Of Joints	Right	
Before	After		Before	After
3	0	<i>Janusandhi</i>	3	1
2	0	<i>Manibandha</i>	2	0

6. Conclusion

*Amavata*is one among the most prevalent disease in the present era, and it is challenging issue for medical science. *Ama* and *Vata*have the properties on opposite pole of each other and involvement of *Uttanadhatu (Rasa)* and *Gambheradhatu (Asthi)* makes the treatment more complicated so there is necessity of a systematic treatment protocol purely based on the principles of Ayurveda, because any measure adopted will principally oppose one another so very careful approach can only ben fit the patient. Early diagnosis is key to prevent deformities with appropriate management. *Panchakarma* procedures will help in checking autoimmune mobility and elimination of *Bahudoshavastha*. This case study showing

that *Virechan Karma* is a better modality of treatment for treating *Amavata* for relieving symptoms and as well as correction in biochemical parameters.

Compliance with ethical standards

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Disclosure of conflict of interest

This work is not published anywhere. The authors declare no conflict of interest.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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