



EFFECT OF VAITARAN BASTI ALONG WITH BALUKA SWEDANA IN THE MANAGEMENT OF AMAVAT (RHEUMATOID ARTHRITIS) – A CASE REPORT

Ayurveda

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ABSTRACT

Amavat is most common and crippling joint disease in which vitiated VATA Dosh carries Ama to the multiple organs and joint causing pain, swelling, stiffness, fever, general debility and decreases the agni. Both the Shamana Chikitsa and Shodhana Chikitsa is advised in Ayurveda for the treatment of Amavat. On the basis of sign-symptoms Amavat closely resembles with Rheumatological disorder called as Rheumatoid arthritis.

Rheumatoid arthritis is a chronic progressive disease causes pain, inflammation, stiffness, swelling of the joints and sometimes also showing extra articular symptoms. Prevalence of the disease is approximately 0.8% of the population and about 80% of people develop this disease between the age of 35 and 50 years.(1)

Modern medicines advises NSAID'S, Steroids and DMARDS for the management of RA which has limitation for long term uses and hazardous side effects. Ayurveda treats it in a safer way with minimal side effects.

In this case female patient suffering from B/L knee joint pain associated with fever, swelling, bodyache, loss of appetite and restricted movements. The whole treatment includes Deepan Pachana, Vaitran Basti and Baluka Swedana along with some oral medication.

The assessment was made up of on the basis of laboratory investigations and relief in sign and symptoms. Assessment done after the 2 month shows ESR decreased with remarkable relief in pain, morning stiffness and marked reduction in swelling of the knee joints. Hence the above case report accentuates that Amavata can be controlled with minimum medicines when treated with the same guideline of Amavata Chikitsa as mentioned in Ayurveda text.

KEYWORDS

Amavat, Rheumatoid arthritis, Baluka Swedana, Vaitrana Basti.

INTRODUCTION

Amavat is first described as separate disease in *Madhav Nidan*. *Acharya Madhav* mentioned that *Mandagni* plays an important role in the manifestation of disease.⁽²⁾ Amavat is mainly due to *mandagni* resulting in the formation of *Ama*. Aggravated *vata* and *Ama* are major factors in the pathogenesis of *Amavat*.⁽³⁾ Vitiated *Ama* gets circulated throughout the body by *Vyana Vayu*, This then accumulates at *Shleshma Sthana* and leading to swelling, pain (like scorpion bite), stiffness in multiple joints along with loss of function.⁽⁴⁾

All above features that closely mimics with rheumatoid arthritis. Rheumatoid arthritis is chronic autoimmune inflammatory disease affecting not only the joints but also the other organs of the body.⁽⁴⁾

Prevalence of Rheumatoid arthritis is 1% worldwide and is increasing with population growth.⁽⁵⁾

There is no permanent cure of RA in modern science and treatments aims on limiting joints damage, preventing loss of function and decreasing pain.

Chakradutta mentioned *Langhana, Swedana, Basti karma, Saindhawadi Amuvasan Basti* as a line of treatment for *Amavat*. Hence these study includes *Vaitaran Basti* along with *Ruksha Baluka Potali Swedana* to manage *Amavat* effectively.

CASE REPORT-

A 54 year female patient was admitted to the hospital with complaints of Pain in bilateral knee joint, mild fever and morning stiffness that lasted throughout the day. Patient was hospitalized for two month & intervened with oral medication along with *Panchkarma* procedures.

Patient was apparently normal 6 month back than gradually pain started in knee joint & became worse. Immediately she visited nearby hospital for primary treatment. After having initial medication for one month. she got temporary relief and symptoms were under control with medication but later on pain severely increased. She stopped the medications abruptly after which the symptoms were aggravated & restricting his daily activities.

Patient was not getting much relief with allopathic medicines so he came to our hospital for *Ayurvedic* treatment.

she was admitted in Pt.Khushilal Sharma Ayurvedic hospital Bhopal, IPD no.2481. A diagnosis was confirmed on the basis of sign &

symptoms of *Amavat* and by the some laboratory investigation (RA factor, CRP, ESR etc.)

PAST HISTORY-

Medical History - On medication

Surgical history – No

Personal history – Diet = Mixed

Appetite = Normal

Addiction – No

Bowel – clear

Occupational History – Student

Psychiatric history - No

Water intake = Sufficient

No Allergies for any kind of food

Sleep – Disturbed (due to Pain)

Micturition – Normal

General Examinations:

G.C. – Fair

RS, CVS, CNS – NAD

Pulse – 68/min

P/A – Soft, non-tender

B.P. – 130/80 mmHg

Local Examinations Of Both Knee Joints:

1. Swelling presents on B/L knee joint

2. Tenderness present..

3. Local temperature – Raised.

4. Range of movements – Restricted and painful.

Samprapti Ghatak:

Dosha: Tridosha mainly Vata and Kapha

Dushya: Rasa, Mamsa, Asthi, Majja, Snayu and Kandara

Srotas: Rasavaha, Mamsavaha, Asthivaha, Majjavaha

Srotodushiti: Sanga, Vimarga-Gamana

Samuthana: Ama-Pakvashyotha

Roga Marga: Madhyama

Vyaktisthana: Sandhi

Material And Method-

Abhyantar Chikitsa-

1. *Sinhanada guggul-2BD*

2. *Mahavatvidhvansank rasa- 125mg BD*

3. *Maharasnadi kwath- 20ml BD*

4. *Vishtinduk vati- 2 BD*

5. *Dashmularishta- 20ml BD*

6. *Hingawashtak churna- 5gm BD with lukewarm water (SOS)*

BahyaChikitsa –

Ruksha ValukaPotali Sweda started & continued throughout the

treatment. It is done for 15-20 minutes in the morning.

Shodhana chikitsa –

Vaitaranbasti–1 sittings(16days) was administered. It is a kind of *Niruhabasti* and is mentioned by *Chakradutta (Niruhadhikara 73/32)* and *Vangasena*.

Preparation of VaitaranBasti–

Contents – *Guda* - ½ Pala (24 gm) *Lavana* - 1 Karsha (12 gm) *Sneha (Til Taila)* - 60-70 ml *Amlika (Chincha)* - 1 Pala (48 gm) *Gomutra* - 1 Kudava(192 ml)

Method Of Preparation:

1. Initially 25gm of *Guda* was mixed uniformly with equal quantity of lukewarm water.
2. 12gm of *Saidhavalavana* was added to the above mixture.
3. *Moorchita* 50ml *tila taila* was added till the mixture becomes homogenous.
4. *Chincha* was put first in hot water, mixed well and filtered. Then the 48 gm *Chincha Kalka* was added to the above said mixture.
5. Lastly 200ml of *Gomutra* was added slowly and mixing continued so as to have uniform *Basti Dravya*. *Basti Dravya* was filtered and made lukewarm by keeping it into hot water.

Time of Administration:

NiruhaBasti administered in the morning hours empty stomach.

Mode Of Action Of Vaitarana Basti:

In *Amavata* as disease progress, *margavarodha* (obstruction) increases, so it requires cleansing therapy which can cleanse the closed channels and restore its normal function. *Vaitaran Basti* has very potent cleansing action.

It is a type of *Mriduksharabasti*. In this *Basti* maximum quantity is of *Gomutra* (Cow's Urine) which is having *Kshara Guna* which pacify the *Kapha Dosha*. *Chincha* and *Guda* are to be taken in *VaitaranaBasti* should be in *Pakva* stage. *Chincha* have *Ruksha, Ushna, Amla, Vatakaphashamaka* properties which makes it useful for the *Aamvata*. *Purana Guda* to be used is *Laghu, Pathya, Agnivaradhaka* and *Vatapittaghna*. It along with *Saindhava* makes uniform mixture, to form a solution having properties to permeable the water easily. *Saindhava Lavana* via its *Sukshma* and *Tikshna guna* causes *Srotoshodhana* via overcoming the '*Sanga*' and helps to pass the drug molecules in the systemic circulation through mucosa. Thus it helps the *Basti Dravya* extent up to the molecular level. It also possesses irritant property, so helps in the elimination of waste material. It is capable of liquefying the viscous matter and break down them into tiny particles. As a whole, the properties of *Vaitaranabasti* can be considered as *Laghu, Ruksha, Ushna, Tikshna guna* which are opposite to *Guru-Snigdha guna* of *Kapha*.⁽⁶⁾

ASSESSMENT :

Parameters	Before	After
RA factor	Positive	Positive
CRP	Negative	Negative
ESR	72mm/hr	40mm/hr
BP	120/80mmHg	120/90mmHg
Respiratory rate	20/min	18/min
Pulse	80/min	72/min
Pain	Severe	Markedly reduced
Morning stiffness	Through the day	Up to 10-15min
Swelling	Present	Absent
Sleep	Disturbed	Normal
Analgesics	Once a daily	Not needed

DISCUSSION:

Aamvata is a disease of *MadhyamRogamarga* and mainly caused due to vitiation of *Vata Dosha* and formation of *Aam*. *Aam* and *Vata* being contradictory in nature make it difficult to plan the line of treatment. In the management of *Aamvata* the primary work is to stop the production of *Aam* in the body by potentiating the body fire. *Deepana* and *Pachana*, It cause potentiation of digestive fire and digest the *Aam*. For this *katu* and *Tikta* drugs or herbs are used.

Primarily patient was treated with *Shaman* drugs along with *Baluka Swedana*. Where *Simhanad Guggul*⁽⁶⁾ has *Vatakaphashamaka, Amapachaka, Srotoshodhaka* properties which helps in breaking the pathogenesis of *Amavata*. Specially *Tikta* and *Katu* Rasa present in

Simhanada Guggulu possess the antagonistic properties to that of *Ama* and *Kapha* which are the chief causative factors in this disease. *Maharasnadi kwath*⁽⁷⁾ helps in improving agni and digestion of *Ama*. *Vishtinduk Vati* Pacifies *Vata Dosha* aggravation associated with excess *Kapha* and it also has analgesic properties. *Mahavatvidhwansak Rasa* is a classical preparation that maintain the balance of *Vata Dosha* as well as *Agni*. But after having above medication patient did't get much relief so *Vaitaran Basti* was planned.

Vaitaran Basti having properties of *Vatakaphashamak, Vatanulomaka* and *Amapachaka*, is very effective for the eradication of *Vata Dosha* and *Aam*. As a result of *Laghu, Ushna, Tikshna* and *Ruksha Guna* of drugs of *Vaitarana Basti*, it absorbed from intestine and breaks the obstructions and expels out the morbid material from all over the body thus helps in breaking down the pathogenesis of disease. Hence it provides significant improvement in the sign and symptoms of disease.

CONCLUSION:

In this case study it can be concluded that *Aamvata* (Rheumatoid arthritis) can be efficiently and safely treated by using *Basti Chikitsa*. When treated with *Ayurvedic* treatment schedule as described in *Ayurveda* according to the condition of patient and state of the disease, we can get better results for treating many other diseases like this. But this is a single case study hence to prove its efficacy there is a need to conduct a study on large number of patients. There were no adverse effects found in *Ayurvedic* treatment.

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