

## Efficacy of Shodhana Chikitsa and Shamanoushadis in Amavata W.S.R to Rheumatoid Arthritis: A Case Report

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### Abstract

*Amavata* is disease of *Rasavaha srotasa* commonly associated with pain in the multiple joints, stiffness and swelling over the joints. It is considered as a progressive illness that has the possibility of causing joint destruction and functional disability. In contemporary science, this condition can be correlated with Rheumatoid arthritis (RA), an autoimmune disease that causes chronic inflammation and deformity of the joints. And the medical management has got a better result to overcome pain through NSAIDs. Non-steroidal anti-inflammatory drugs decrease the inflammation, but tend to create gastrointestinal disturbance and disease-modifying anti-rheumatic drugs cause renal, bone and hepatic side effects. So the management of this disease by other systems of Medicine is not that much satisfactory or cannot control the further progression of disease.

Hence to overcome from this problem, different treatment protocols can be adopted based on the different stages of RA. Like treatment of *Amavastha* and *Niramavastha* with medicines and *shodhana chikitsa*. Clinical observation has shown effectiveness of Ayurvedic treatment protocol in the management of Amavata. A case report of 38-year old female who presented with complaints of *Hasta sandhi shotha*, *shoola* and *Stabdghata* (Inflammation, severe pain and stiffness (particularly observed in morning hours) in metacarpo-phalangeal joints & proximal inter phalangeal joints), Paad sandhi shotha and *shoola* (Inflammation & severe pain in metatarso phalangeal joints), *Mandagni* (poor appetite), *Angagourav* (Feeling of heaviness in the body) and *Angamarda* (myalgia) has been presented here.

**Keywords:** *Amavata*; Rheumatoid arthritis; *Shodhana*; *Agni*; *Shamanoushadi*.

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### Introduction

Rheumatoid arthritis is an autoimmune chronic inflammatory disorder, with worldwide prevalence of approximately 0.5% to 1% among adults [1]. Women are about two to three times

more prone to get RA than men. It is most likely to strike people 30-50 years of age, but it can occur in children, teenagers, and elderly people. A similar disease affecting young people is known as juvenile rheumatoid arthritis. It involves inflammation and possible weakening of the lining of different body

joints. Technically, arthritis means inflammation of one or more joints. For some people, rheumatoid arthritis can affect more than just the joints; even blood, lungs or heart can be affected. Inflammation of joints brings in a lot of pain, stiffness, and even swelling. The affected joints may lose their shape that leads to loss of normal mobility. Rheumatoid arthritis can last a long time and the person is able to do little or no activity. Because it can affect multiple other organs of the body, rheumatoid arthritis is referred to as a systemic illness and is sometimes called rheumatoid disease & is a progressive illness that has the potential to cause joint destruction and functional disability. Anti-inflammatory, analgesics, steroids, and disease-modifying antirheumatic drugs are required for its management as per modern medicine, which are not free from serious side effects.

In ayurvedic classics it is considered as *Amavata*. *Madhavakara* was the 1<sup>st</sup> physician who described the disease *Amavata* in detail in *Madava Nidana* [2] It is a disease of *Rasavaha strotasa*, [3] caused due to *Agnidushti*, *Amotpatti* and leads to *Sandhivikruti*. The main causative factor, *Ama*, is caused due to malfunctioning of the digestive and metabolic mechanisms. *Mandagni* (Decreased digestive power), *Viruddha Ahara* (Incompatible food), *Viruddha Cheshta* (Improper physical activity), *Nischalata* (Lack of physical activity or sedentary life style), *Snignidham bhuktavato vyayaamam* (Performing physical exercise soon after intake of heavy food) [4] are considered as main aetiological factors leading to formation and accumulation of *Ama* in the body. Thus the produced *Ama* which is slimy in nature, gets associated with vitiated *Vata* and circulates all over the body through *Sira* and *Dhamani* and gets lodged in *Kaphasthana* i.e. *Sandhi* because *Shleshak Kapha* is located in *Sandhi* and *Amavata* is developed. And results in *Sandhi shotha* (Swelling in multiple joints), *Sandhi shoola* (pain in joints) and *Gatra stabdhata* (Stiffness in the body). The pain in the affected joints resembles the pain of a "scorpion's sting". (*Vrischik damshavat vedana*).

Hence to treat *Ama* *Langhan*, *swedana*, *Katu*, *Tikta* & *Deepak*, *Pachak ahara* & *aushadhi* should planned followed by shodhana in the form of *Virechana* and *Basti chikitsa* and *shamanoushadhis*. Here the drugs used for *deepana* and *pachana* are having the properties like *katu*, *tikta rasa*, *ushna veerya* etc, hence by virtue of their properties, does *agni deepana*, *amapachana*, *vata shamana*. Thus help in relieving *shotha* & *shoola*. *Virechana* and *Basti* acts as *srotoshodhaka*, *shothahara*, *shoolahara* and *amavatahara*. *Shamanoushadhis* like *Rasna erandadi kashaya*, *Rasna panchak kwatha*, *Dashmooladi yoga*, *Rasonadi kashaya*, *Amrutadi choorna*, *Pippalyadi*

*choorna*, *Simhanada Guggulu*, *Yogaraja Guggulu*, *Amavatarirasa*, *Amavatadri vajra rasa*, *Suvarna bhasma*, *Vishgarbha taila*, *Panchaguna taila* and *Prasarini taila* etc. are acts like *agni deepana*, *pachana*, *vedana sthapana*, *shothahara*, *shulahara*, *bhagnasandhankara*, and some drugs due *prabhava* act as *amavataghna*.

Hence considering these points it is assumed that, use of this type of treatment protocol can be an effective solution in the management of *Amavata* w.s.r. to Rheumatoid arthritis. This case showed good results.

### Case Report

A 38-year-old female presented with the complaints of pain in both Upper and Lower limb, *Hasta sandhi shotha*, *shoola* and *Stabdhata* (Inflammation, severe pain and stiffness (particularly observed in early morning hours) in metacarpophalangeal joints and proximal inter phalangeal joints), *Paad sandhi shotha* and *shoola* (Inflammation & severe pain in metatarso phalangeal joints), *Mandagni* (poor appetite), *Angagourav* (Feeling of heaviness in the body), constipated bowels, *Angamarda* (myalgia), and mild fever on/off since from last 2 yrs. The symptoms were exacerbating during rainy and winter seasons. There was no H/o Diabetes, Hypertension and Thyroid disease. The A.S.O. Titre was +ve i.e. 400 units (Normal less than 200 units) and was treated for the same on and off from past two years, including allopathic medicaments. But there was no relief of symptoms.

#### On examination:

Vital data - pulse (84/min), respiration (18/min), and temperature (98F) were normal with clear respiratory and cardiac observations. No signs of the urinary tract or ENT lesions were found. The abdomen was clear with no signs of tenderness or organomegaly.

Table 1: Local examination

S. No	Signs	Severity
01	Joint swelling	+++ , present in metacarpophalangeal joints, proximal inter phalangeal joints, ankle joints and metatarso phalangeal joints)
02	Pain in the joints	++++
03	Tenderness	+++
04	Restricted movements	Seen in metacarpophalangeal joints, proximal inter phalangeal joints and left side ankle joint
05	Morning stiffness & time	++, For 30 minutes to 60minutes
06	Grip strength	Reduced

**Table 2:** Pathological reports

Haemoglobin %	8.6 gm/dl
E.S.R.	45 mm in 1 Hr
T.L.C	10,800 /mm <sup>3</sup> ,
A.S.O. Titre	+VE (400 unit)

**Table 3:** Treatment administered to the patient

Treatment protocol	Drugs	Dose
Deepana and Ama Pachana	Chitrakadi vati	1 vati twice for 1 week
	Pippalyadi + Guduchi satwa	½ tsf twice a day with warm water
	Arogyavardhini vati	1 tab twice a day
Vatanulomana and Vedana	Rasna Erandadi Kashaya	2 tsf thrice a day
	Simhanada Guggulu	1 tab twice a day
Sthanik chikitsa	Valuka (sand) sweda	Twice a day for 10-15 minutes
Virechana	Eranda taila + Hareetaki churna	60 ml + 10 gms
Shamanoushadhi	Rasna Erandadi Kashaya	2tsf twice a day
	Simhanada Guggulu	1 tab twice a day
	Amavatari Rasa	1 tab thrice a day

## Results

The significant changes were observed in post treatment Symptoms of pain & tenderness in joints and joint swelling within 20 days. She was advised to repeat the test after 30 days.

A.S.O. Titre was Negative (less than 200 Unit), ESR 10 mm and Hb 11 gm on after 1 month.

The results showed significant decrease in post-treatment levels of ESR and ASO Titre and increase in Haemoglobin as compared to baseline levels along with significant improvement in overall activities & other symptoms.

### Follow Up

The patient was advised to follow up for once in a month for 3 months.

## Discussion

AMAVATA is a disease caused due to the vitiated Vayu associated with Ama. Vitiated Vayu circulates the Ama all over the body through siras

and Dhamanis, takes shelter in the Kapha Sthana i.e joints producing symptoms such as stiffness, swelling, and tenderness in small and big joints.

Marked relief were observed in Sandhi shula, Sandhi shotha, Stabdhatta, Angamarda and Gaurava at the end of the treatment. Bowels were clear. Appetite was normal. Dipana and Pachana properties of Chitraka, Pippalyadi + Guduchi satwa and Dipana property of Guggulu, and vatanulomana property of Eranda taila may be helpful in correcting deranged digestive functions that further helps in eliminating circulating Ama from systemic levels accumulated in Sandhi, thus causing reduction in Shotha and sthabdata. snighdha guna, ushna veerya and vatanulomaka properties of Eranda taila pacifies the vitiated vata and helps in reduction of sandhi shula. Guggulu acts as bhagnasandhankara hence prevents the erosion of bone, osteoporosis and deformity of joints. It also acts shothahara hence reduces the inflammation of synovial membrane, connective tissue and ligaments of affected joints. Virechanakarma is described as one of the effective treatment for Amavata as a Shodhana therapy. As it is considered as the most appropriate therapy for the Sthanika Pitta Dosh, and acts as srotovishodaka, doshaharana, Agnivardhaka and helps in removal of Ama, which is the main culprit of this disease. Thus the above said treatment helps in the management of Amavata.

## Conclusion

As per the available treatment modalities of Amavata, if proper treatment protocol is adopted according to the stages like amavastha and niramavastha, and severity of signs and symptoms gives the better results.

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