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Management of *Amavata* w.s.r to Rheumatoid Arthritis-A Case Report

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ABSTRACT:

In the classical literature *Madhavanidana*, *Madhvakara* describes *Amavata* in detail. Based on clinical similarities, we can compare *Amavata* to contemporary Rheumatoid Arthritis. Rheumatoid arthritis is the most common chronic inflammatory illness, affecting 0.5 percent of the global population and 0.65 percent to 0.75 percent of the Indian population. Ama dosha interacts directly with *Vata dosha* in *Amavata*, causing joint inflammation, deformity, and immobility in the fingers, feet, and ankles, as well as stiffness throughout the body. DMARDs and steroids are used to treat RA, however they do not totally cure disease. *Langhana*, *Swedana*, *Deepana*, *Tikta-katu rasa*, *Virechana*, *Basti*, and other aspects of *Amavata* management are described in detail in Ayurveda. The 43-year-old female in this case was treated with Ayurvedic drugs. A patient who has been diagnosed is treated with *Sinhanad Gugglu*, *Rasana Saptak Kwath*, *Sanjivani vati*, *Ajmodadi churn*, and *bala Arishta*. The end of the treatment contributed to a decrease in overall symptoms.

Keywords: *Amavata*, *Ama*, Rheumatoid arthritis, case report

INTRODUCTION

Amavata is a chronic illness induced by the production of ama (toxin) and vitiation of the *Vata* and *Kaphasthana* in the body. The *Sleshma sthana* are primarily the synovial joints.¹ The vitiated *Vata* circulates the Ama through the *Dhamanis* and lives in the *Sleshma sthana*, causing *sandhishotha*, *sandhishoola*, and *sanchari vedana* in both small and large joints.² *Amavata* is a disorder that is quite similar to rheumatoid arthritis, which is a very severe ailment. Rheumatoid arthritis is a systemic inflammatory disease that affects the synovial joints and has extra-articular symptoms.³ Joint discomfort, stiffness, tenderness, and restricted movements are the most

common symptoms. According to Ayurveda, the disease is caused by *Ama* and *Vata* vitiating the Tri-doshas. The concepts of treatment for *Amavata* have been described by Acharya Chakrapani.⁴ Some therapy procedures that are useful in *Amavata* include *Langhana*, *Swedana*, *Tikta-Katu rasa dravyas*, *Deepana dravyas*, *Virechana*, and *Anuvasana Basti*. Perhaps, despite the greatest available treatments today, the progressive condition is tough to manage. Ayurveda, on the other hand, offers a safer, more cost-effective, and more successful treatment for *Amavata*. As a result, a therapy plan was created and given to the patient, which is detailed below.



AIM AND OBJECTIVES:

Efficacy of internal ayurvedic medicines in the management of patients suffering from *Amavata* admitted to the ayurvedic hospital

MATERIAL & METHOD

The study was carried out ethically as per GCP (Good Clinical Practices) guidelines.

CASE REPORT

A Female patient of age 43 years visited the *Kayachikitsa* O.P.D. of our hospital on 08/02/2020 with O.P.D. no. 845632 with complaints of Pain in multiple joints associated with swelling and stiffness over the body. Gradually, she developed the same pain and stiffness in both the knee and wrist joints. She later suffered from *Shotha* (swelling) over affected joints on and off. Eventually, the elbow and ankle joints also began to get affected. She was temporarily relieved by the allopathic anti-inflammatory medicines and sooner begin to develop the symptoms again. Thus, the patient then approached our hospital for further treatment.

History of Past Illness: No h/o of hypertension, diabetes and any other illness.

Personal history

1. *Ahara- Samishra* (mixed diet)
2. *Vihara-Diwaswapna* (morning sleep habit)
3. *Nidra- Samyaka* (Satisfactory)
4. *Mala pravritti: Samyaka* (Satisfactory)
5. *Mutra pravritti: Samyaka* (Satisfactory)
6. *Vyasana:* Tea (2-3 times a day)

General Examination

1. Vitals: Pulse rate: 79/min
2. Blood pressure: 120/90 mm/hg
3. Respiratory rate: 16/min

Systemic examination:

On examination, the patient is conscious, RS = NAD, CVS= S1, S2 Normal

Local examination: On examination of the

musculoskeletal system, marked pitting oedema was found on bilateral wrist joints, knee joints and face. Tenderness was found on palpation in the wrist and metacarpophalangeal joints. There was no evidence of joint deformity.

Consent of patient

The patient has given his permission for her clinical data to be published in a journal. The patient is aware that his name and initials will not be published, and that all reasonable efforts will be done to keep his identity hidden. Table no 1.

Assessment Criteria(Table 2)

Observations(Table 3)

Follow-Up

The patient's condition was being monitored. The patient's pharmaceutical regimen and other associated issues were investigated briefly, and the patient was found to be in good health. The family members were given suggestions on how to keep the follow-up going. During treatment and follow-up, the patient was told to avoid hot, greasy, and salty foods and to have milk, *peya*, and *khichdi* as *pathya*.

DISCUSSION

The Chikitsa Siddhant for *Amavata* was first described by Chakradatta. ⁵ *Langhana*, *Swedana*, medicines with *Tikta*, *Katu Rasa*, and *Deepana* action, *Virechana*, *Snehapana*, and *Anuvasana*, and *Ksharabasti* are all included. *Amavata* is regarded as a *Rasaja Vikara* and an *Amashayotha vyadhi*. In such cases, *Langhana* is the first line of defence. The ideal measure for the treatment of *Ama* has been stated in *Yogaratanakar Langhana*. Due to the existence of *Ama*, *Ruksha sweda* has been supported in the form of *Valuka pottali* in the *Amavata*. It helps to balance the vitiated *Vata Dosha*, which relieves pain and stiffness.

Sinhanad Guggul -In *Bhaishjyarnavali*, *Sinhanad Guggul* is especially listed for the treatment of *Amavata*. *Simhanada Guggul* has qualities of *Laghu*, *Ruksha*, *Ushna*, and *Tikshna*. *Deepan* (enzyme activating), *Ama-Pachan* (biotoxin neutralizing), *Shothaghna* (oedema lowering), *Shoolghna* (analgesic), *Jwaraghna* (antipyretic), and *Amavatahara* (anti-rheumatic) are all qualities of *Sinhanad Guggul* medicines. This helps in the breakdown of *Amavata's Samprapti* (pathogenesis).

Rasnasaptak kwath has properties of *Tikta* and *katu rasa* drugs have *dipana* and *pachana* properties which have a

significant role in clearing ama from body. *Katu rasa* also acts as a *Vatanulomka*, which improves intestinal motility. These medications have the *gunas Laghu* (light), *ushna* (hot), and *tikshna guna*, which induce the *agnivardhaka* (digestive stimulant) quality, therefore they purge excess *kapha and vata* from the body after clearing ama. These medications also aid to unclog blocked channels, such as *srotoavarodha*, and transport *pakva dosha* from *Sakha to Kostha* for elimination from the body. The majority of RSK's constituents include *vatasleshmahara* properties, which help to lower *doshic vata and kapha* in the body, as well as *amavata* symptoms.⁶

Sanjivani vati- Except for *Amalaki*, which has *Sita virya*, the majority of the ingredients have *Usna virya*. Because of its *Usna virya* and *Dipan- Pachan* properties, *Sanjivani Vati* is best given in *Agnimandaya*. Because *Agnimandaya* is said to be the main cause of all diseases, it can be used to treat practically any ailment. In *Vatakaphaja* or *Tridosaja roga*, it is used. The ingredients of *Sanjivani Vati*, according to modern research, include antioxidant, anti-inflammatory, anti-microbial, and hepatoprotective properties.⁷

Ajmodadi Churn-Many medications in this combination have *Ushana Veerya* (*Ajmoda, Vidanga, Devdaru, Chitraka, Shatpushpa, Marich, Haritki, Vriddaruka, Shunthi*) and are *Katu* and *Tikta in Rasa*. *Mandagni's* situation may have improved as a result of these features. When a result, as *Agni* improves, the generation of *Ama* is monitored at the root level. Furthermore, the above-mentioned characteristics were extremely beneficial in the digestion of *Ama*, which is also the source of *srotavrodha* in the body. *Vata* was the second most important pathognomic component. Though all *Doshas* are vitiated, *Vata* is the most vitiated. All the drugs of the combination are *Vata and Kapha Shamak* as well. These all properties might have corrected the vitiation of *Vata* and brought it to normal position.⁸

Balarishtam contains potent analgesic and anti-inflammatory effects, which are particularly helpful in reducing joint and muscular pain, as well as minimizing the risk of chronic autoimmune inflammatory disorders like rheumatoid arthritis, which are caused by *Vata Dosha* vitiation. It's also used to treat painful muscle spasms, sore muscles, gout, and numerous arthritic disorders because it's a natural vasodilator.⁹

CONCLUSION

The case report shows that combined ayurvedic treatment is potent and effective in the management of *amavata*. The combined ayurvedic treatment has no negative side effects. As a result, *Amavata* can be efficiently and safely treated with *Ayurveda's Chikitsa Siddhant*.

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Table no 1. Treatment Procedure given in patient

Medicine	Dose	Days
Simhanada Guggul	2 tab before meal	15 days
<i>Rasnasaptak kwath</i>	30 ml before meal	15 days
<i>Sanjivani Vati</i>	1 BD	7 days
<i>Ajmodadi Churn</i>	3 gm BD	15 days
Balarishtam	20 ml BD	30 days

Table no 2. Subjective Parameters

Symptoms	0	1	2	3	4
<i>Stambhan</i> (Stiffness)	Absent	Occasional	Intermittent	Often	Always
<i>Sandhi shola</i> (Pain In multiple joints)	No pain	Mild pain, bear-able	Moderate pain	Severe pain with slight difficulty in movements	Severe pain with more difficulty in movements
<i>Sandhi shotha</i> (Swelling)	Absent	Mild, >10% increased circumference of affected joint	Moderate, >10% increased circumference of affected joint	Severe, >20%	Severe, >20% Increased Circumference of affected Joint

Table 3 OBSERVATION

Symptoms	BT	AT
<i>Stambhan</i> (Stiffness)	4	1
<i>Sandhi shola</i> (Pain in multiple joints)	3	0
<i>Sandhi shotha</i> (Swelling)	2	0