



AN AYURVEDIC MANAGEMENT OF GAMBHIR VATARAKTA W.S.R. TO RHEUMATOID ARTHRITIS – A CASE STUDY

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ABSTRACT Rheumatoid arthritis[1] (RA) is an autoimmune chronic inflammatory disorder. As the disease progresses, the inflamed synovium invades and damages the cartilage and bone of the joint. The potential of the synovial inflammation to cause cartilage destruction is the hallmark of the disease. In Ayurveda, Vatarakta is a disease caused by vitiated Vata and Rakta, where the aggravated Vayu gets obstructed in its course by the vitiated Rakta and the Vayu vitiates the entire blood. This vitiated Rakta in long term involves mansadi dhatu. Vatarakta is an illness where both vata and rakta are afflicted by distinct etiological factors as described in Gambhir Vatarakta by Acharya Charaka, the symptoms are, swelling(shotha), stiffness(stabdhatta), pain(shula), burning sensation(daha) etc. RA was observed that clinicians use the protocols for management of Vatasonita in different stages of RA. It can consider by the management with medicines and Panchakarma procedures. Hence, utilising the same protocol, a remarkable decrease in the severity of symptoms and improvement of wellbeing.

KEYWORDS : Rheumatoid arthritis, Panchkarma, shaman chikitsa, ayurveda.

INTRODUCTION-

Rheumatoid arthritis is a chronic inflammatory disease of unknown aetiology marked by a symmetric, peripheral polyarthritis. The incidence of RA increases between 25 and 55 years of age, after which it plateaus until the age of 75 and then decreases. It is the most common form of chronic inflammatory arthritis and often results in joint damage and physical disability. Patients often complain of early morning joint stiffness and pain that eases with physical activity. The earliest involved joints are typically the small joints of the hands and feet.

Vaatrakta^[2], the nomenclature is coined on the basis of the dosha and the dhatu involved in the disease. As per the name suggests there is the dushti in the physiological functions and composition of Rakta dhatu with the vitiation Vata dosha. vitiated doshas within the raktamarga is the basic pathology. On the contrary, the etiological factors here also contribute to the aggravation of kapha dosha. The involvement of deeper dhatus like asthi, majja and sandhi signifies Gambhir Vaatrakta of kaphaj type. The symptoms of Gambhir Vatarakta as described by Acharya Charak are swelling(shyavathu), stiffness(stabdhatta), pain(arati), burning sensation(daha), tingling sensation(sphuran).

Vatarakta is at its roots by the vitiation of the doshas and its circulation throughout the body through the dhmani and the strotasas. Vatarakta is a madhyammargatvyadhi. Considering all the clinical features and pathogenesis of the disease, Acharya Charaka and Vagbhata mentioned "Na Hi Vasti Samam Kinchit Vatarakta Chikitsitam" There is no other therapeutic measures equivalent to Basti in treating Vatarakta. Basti is considered as Agrya Aushada for Vata. But along with Basti, langhana, deepan, paanchana, rukshswedana, anulomana followed by shaman, bruhana should be done. Still Basti plays a vital role in the line of treatment, as it functions at a cellular(molecular)level.

MATERIALS AND METHODS:

1. This study deals with management of Rheumatoid arthritis with special reference to Gambhir Vatarakta.
2. Here we present case of Rheumatoid arthritis where given Basti and shaman chikitsa showed significant results.
3. The course of the treatment throughout the hospital stay Included ayurvedic panchkarma therapies such as Swedana and basti along with ayurvedic medications such as Simhanada guggul, mahavata vidhwansha rasa, anulomana like Gandharva haritaki churna etc. according to Prakriti of patient.
4. Before starting the treatment, patient was observed for every sign and symptoms as well as investigation and examination were done as per criteria of assessment. Total treatment therapy was of approximate 25days for the purpose assessment of symptomatic improvement. Some investigation CBC, ESR, LFT, RFT, URINE ROUTINE and MICROSCOPY were done before treatment to

5. rule out any other pathology. The result and observations obtained
5. Pathyapathya was explained to the patient and instructed to follow strictly.

Case Reports

A 34-year-female patient, ASHA WORKER by occupation visited the OPD of Kayachikitsa dept of M. A. Podar Ayurvedic College Worli (Maharashtra) with presenting complaints as follows

Main complaints

- Morning stiffness more than 1 hour.
- Bilateral knee joint pain.
- Bilateral wrist joint pain.
- Heaviness of the body
- Difficulty and pain while walking.
- Constipation

1 YEAR

Other complaints -No any associated complain seen.

Drug history – Patient taking NSAIDs occasionally but didn't relive.

Family history- No any family history

Past history -No any past illness.

Surgical history – No any surgical history

N/K/C/O – DM/HTN/PTB/BA

N/K/H/O – malaria / typhoid/ chikungunya / dengue.

General examination

General condition	FAIR
Blood pressure	110/70mmhg
Pulse rate	82/min
Respiratory rate	24/min
Temperature	97 F
Built	Medium built

Astavidha pariksha

Mutra – Samyaka	Mala – Asamyaka (Malbadhta)
Jivha - Saam	Shabda – Prakruta
Sparsha – Prakruta	Druk - Prakruta
Akriti – Madhyama	Nidra – Asamyaka (atinidra)

Systemic Examination

Respiratory system	Air entry bilateral equal clear
Cardio Vascular system	S1 S2 normal No added sounds

Central Nervous System	Conscious, co-operative, oriented
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Lab Investigation -
Rheumatoid Arthritis factor – Positive
Score – 726 IU/ML
C – Reactive protein – 23 mg/L
CBC - WNL
ESR – 24 mm/hr
LFT – WNL
RFT – WNL
LIPID PROFILE –
 T. Cholesterol – 176 mg/dl
 Triglyceride – 180 mg/dl
 HDL – 100 mg/dl
 LDL – 98 mg/dl

HETU SEVANA^[9]

RAKTA DUSHTIKAR HETU	VATA DUSHTIKAR HETU	KAPHA DUSHTIKAR HETU
1. Virudhha ahara (like Tea + chapati, milk shakes, cold coffee)-vishvata (dushivisha) ↓ Suktapaka – Vidagdha , amla, lavan – rakta dushti	1. Atichankramana – chal , vishama guna vrudhhi. 2. Legumes like green peas, chickpeas, corn etc. – ruksha , vishama guna vrudhhi. 3. Bakery product like cake, toast, biscuits – ruksha , parush, vishama guna vrudhhi.	1. Excessive drink water at morning in empty stomach abhishyandhi → mandagni ↓ aam nirmatti + kapha vidagdha dushti
2. Fermented food – Ushna , vidagdha, vishambhi , guru , amla – rakta dushti.		2. Milk product like yogurt, curd – guru , snigdha , pichhil guna vrudhhi – kapha dushti
3. Spicy food – katu, ushna , Tikshna , vidagdha . – rakta dushti		3. Virudhha ahara like cold coffee – shita, snigdha , guru guna vrudhhi.
4. Atap sevana – ushna tiksha - pitta and rakta dushti.		

CRITERIA OF ASSESSMENT:- MORNING STIFFNESS^[14]

GRADE	SYMPTOMS
0	No stiffness
1	Early morning stiffness up to 30 minutes
2	Early morning stiffness more than 30 minutes and less than 45 minutes.
3	Early morning stiffness more than 45 minutes.

JOINT PAIN^[5]

Score	Symptoms
0	No pain
1	Pain occasional, can be managed without drug.
2	Pain frequent and can be managed with some drugs
3	Pain persistent and unmanageable even with drugs

SWELLING^[6]

Score	Condition
0	Focal redness with no joint swelling
1	Swelled finger joints
2	Slight swelled wrist, ankle, and other joints
3	Severe inflammation of whole paw, abscess, formation and angiogenesis.
4	Severe accession, joint deformity, rheumatic nodules, ankylosis.

CHANKRAMAN KASHTATA

Present
Absent

Treatment Given:-

Panchakarma therapy and shaman aushadhi was given with following kalpa, approximate quantity of each drug was as follows:-

Procedure	Dravya	Duration
Swedan[7]	Nadi swedana	1 to 25th days

Patrapotali wedana[8]	Erand, arka, nirgundi, vasa	1 to 25th days
Valuka potali swedana[9]	Valu	1 to 25th day

BASTI KARMA^[10]

1. KALA BASTI:- for 14 days
 Comprising of
 Erandamooladi Niruha Basti- 350ml.
 Anuvasana Basti with sahachar Taila-60ml.

Contents of Niruha Basti:

- Makshika, Saindhava lavana ,Sneha (Tila Taila)
 - Kalka (Shatapushpa, Hribera, Priyangu, Pippali, Yashtimadhu, Bala, Rasanjana, Indrayava, Musta)
 - Kashaya (Eranda, Palasha, Rasna, Ashwagandha, Atibala, Guduchi, Punarnava,
 - Aaragwadha, Devadaru, Madanaphala, Laghu Panchamoola) –
 - Aavapa- Gomutra
- Given 7 niruha basti and 7 anuvasan basti in alternate days.

2. Yoga Basti:- After yoga basti karma for 8 days.

Comprising of – Panchatikta khseer basti with panchtikta ghruta – 60ml
 Contents of ksheer basti-

- Godugdha
- Panchtikta Kashaya (guduchi , patol, vasa , nimba , kantakari)
- Panchtikta ghruta.

Shamana Chikitsa -

DRUG	QUANTITY	DOSE	TIME
Simhanad guggul [11]	500mg	Twice a day	After meal
Mahavata vidhwansh rasa[12]	250mg	Thrice a day	After meal
Gandharva haritaki churna [13]	3gm	At night	After meal

BAHYA CHIKITSA – Atasyadi Upnaha^[14] local application at bilateral knee and wrist joint.

OBSERVATION -

GRADE	BEFORE TREATMENT	AFTER TREATMENT
Morning stiffness	3	1
Pain	1	0
Swelling	3	0
Chankraman Kashtata	Present	Absent

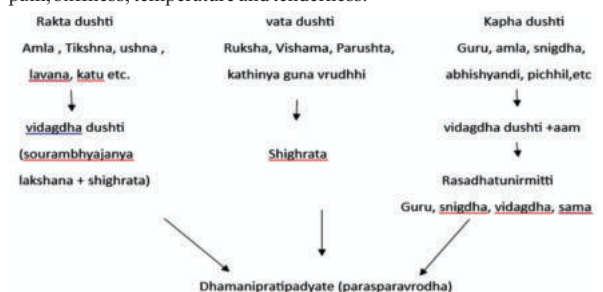
RESULTS-

The line of treatment mentioned above showed a significant improvement in these patients. The morning stiffness decreased, walking speed improved, swelling, pain, stiffness etc. decreased significantly. The patients were able to do their household chores like they did before and back to their occupation. Here, Basti specifically was the main line therapy.

DISCUSSION –

Pathophysiology And Mode Of Action-

As per samprapti^[15] mentioned, the vidagdha Rasa-Rakta (aam) circulates in rest of the strotasas via dhamani ('Dhamanipratipadyate') causing Raktadushti. Due to indulgence in specific etiological factors, there occurs simultaneous vitiation of vaat doshaas well as kapha dosha which in turn gradually stiffening the whole body. The vitiated vaatdosha circulates in the whole via dhamni and localizes in different sthanas of kapha causing various joint related symptoms like swelling, pain, stiffness, temperature and tenderness.



Hetu sevam like Viruddhara causes mandagni which leads to aamnirmittii. shukt, pichil and vidhagda rasa nirmitti. This dhamanianusaari visha dosha causes various avastha of doshas like, dhatvanusaari, dhatwashrayi and dhatugata. This aam gets stagnant at various sandhi causing stambh, Vedana and shotha. As it involves madhyammarga, this illness possesses difficulties in the curative approach.

SWEDANA:

Ushnaguna of Swedana does Srothoshuddi and Ama pachana, so it relieves stiffness. Due to elimination of Kelda, lightness is achieved. , it facilitates joint mobility, clearing the microchannels that increase the blood circulation, and removes the blockage (excess Vata & Kapha) In between the channels.

PATRA PINDASWEDA:

its most often recommended in condition like chronic pain, stiffness of the joints and even muscle pain. In Patra Pinda Sweda, vata, kaphahara patra and vatahara tail helping to remove pain and stiffness and increasing blood circulation to the affected area, gets rid of dosha imbalances, Strengthens the muscles in the area.

VALUKASWEDA:

mostly used in the disease originated out of Ama, especially in Amavata. Being dry in nature it does digestion of Ama and clean the micro channels. It removes stiffness of the joint and alleviates the pain.

ERANDMULADI BASTI:

This Basti contains drugs in which most of the drugs are having Ushna Veerya and are Vatakaphahara in nature. Drugs are also possessing Ushna, Tikshna and Sukshma Guna which helps in the elimination of obstruction of Srotas (channels) which further helps in the formation of Prakrita Dhatu. It is also indicated in Kaphavrita condition, by which it played major role in pacifying the Kapha Dosha and reducing the symptoms like Stambha (stiffness) and Gaurava (heaviness). Most of the drugs are Agni Deepaka which helped to improve the Agni (digestive fire) of the patient, thereby increase in appetite was observed.

In Anuvasana Basti Sneha is used. Nothing is as superior as Taila in destroying Vata as Taila with its Snigdha Guna destroys Rukshata and with its Guru and Usna guna destroys Laghu and Sheeta Guna of Vata respectively.

PANCHTIKTA KSHEER BASTI :-

Individual drug properties of panchatikta kshir are as follows :- Guduchi is vayasthapana, rasayana, balya agnidipana and tridoshghna. Patola is ruchikar, dipana, kaphapittaghna. Vasa are shosh-har, kaphapittaghna. Nimba is dipana, vatakaphaghna. Kantakari is dipana, pachana, kaphavatahar, shothhar, angamardprashmana. Kshir is jivniya, rasayaniya, sarvarognashana. It is rich source of calcium and is a complete food.

SIMHNAD GUGGULE:

RASAPANCHAK-

Rasa - Katu, Tikta, Guna- Laghu, Ruksha, Virya – Ushna, Vipakakatu, Vedanasthapana, Deepana-Pachana, Rasayana and Medhya Karma hence, it has Vatakaphashamaka, Amapachaka, Srotoshodhaka properties which helps in breaking the pathogenesis, 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. Because of their Agnivridhikara property, they increase digestive power, which also digests Ama rasa and reduces the excessive production of Kapha and also removes the obstruction of the Srotas. Because of Ushna Virya, it also alleviates vitiated Vata. Katu Rasa helps in Agni Deepana Pachana.

MAHAVATAVIDHWANSHARASA-

the contents of mahavata vidhwansha rasa are sudhha parada, gandhaka, naag, vanga, loha Bhasma, tamra Bhasma, abhraka Bhasma, trikatu and tankana. Above contents of these drug acts as Shighra, Sukshma srotogaami, pachana (aampachana) and sourambhanashaka. Loha Bhasma and abhraka Bhasma provides the strength and integrity to the shleshmal kala.

GANDHARVA HARITAKI CHURNA-

It was given for Mrudu Anuloman. This formulation relieves vata from kati pradesha and pakvashaya . It clears the Apana Vata which is the main factor of vata vyadhi. The ailment reside in the Kati Pradesh, which is the sthan of Vata dosha. Mrudu virechana is line of treatment of Vatavyadhi. This formulation has Vatahara and Snigdha Virechaka properties.

ATASYADI UPNAAH-

The ingredients of atasyadi upnaha are ushna veerya and teekshna , snigdha , guru, kapha vata shamaka , sothhara , and Vedanasthapaka properties. Its snigdha, guru and ushna guna counteract the ruksha laghu and sheeta guna of vata respectively because of its bruhana nature it corrects the diminished shleshmaka kapha. Mode of action of upnaha is going through the arteriol vasodilation.

CONCLUSION:

Since therapy for Gambhir Vatarakta and its complications has limitations in other patients, Ayurvedic management of Gambhir Vatarakta can be effective therapy. On understanding proper Nidan, Lakshana and Samprapti of Vatarakta one can very well keep it under the heading of Vata Vyadhi and treat it successfully with Panchkarma treatment. With proper understanding of Dosha, Dushya and Vyadhi Awastha we can manage Vatarakta.

The medicines given to the patient mainly fall under the categories of Tikta kashay rasa, Laghu rooksha guna, Ushna veerya and either Kaphavata hara mainly used for Deepan paachan and Rakta prasadana with Shoola and Shothagna karma.

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