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Ayurveda

EFFECT OF VAITARANA BASTI IN THE MANAGEMENT OF AMAVATA W.S.R. TO RHEUMATOID ARTHRITIS – A CASE STUDY

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ABSTRACT Aamvata, as described in Ayurveda, results from the accumulation of Ama (toxins) and an imbalance of Vata dosha. Its symptoms closely align with those of Rheumatoid Arthritis (RA) in modern medicine, showing considerable overlap. Ayurveda, with its holistic and preventive approach, not only aims to treat illnesses but also to reduce their recurrence. This case study focuses on a 61-year-old male who experienced pain in both knees and finger joints, as well as in the left elbow and shoulder, along with loss of appetite, fatigue, morning stiffness, and difficulty walking. His RA factor tested positive. The treatment included Vaitarana Basti and Vata-shamana Ayurvedic medications. Noticeable relief from pain and stiffness was achieved within five days, with significant overall improvement by day sixteen.

KEYWORDS : Amavata, Vaitarana Basti, Rheumatoid Arthritis, Panchakarma Therapy

INTRODUCTION: -

Rheumatoid Arthritis (RA) is a chronic autoimmune and inflammatory disorder where the immune system mistakenly targets the body's own healthy tissues, causing joint inflammation and painful swelling.[1] Worldwide, musculoskeletal conditions impact around 1.72 billion people. RA is a significant public health issue, with research indicating that about 35% of patients develop disabilities within three years of diagnosis. [2]

In Ayurveda, Aamvata is a condition that closely resembles Rheumatoid Arthritis (RA) in terms of symptoms and clinical features. It is more prevalent in women than in men, with an estimated ratio of 3:1. RA usually involves multiple joints at the same time, particularly targeting the hands, wrists, and knees.[3] The inflammation of the joint lining gradually leads to the deterioration of joint tissues, which can cause persistent pain, impaired mobility, and deformities in the affected joints over time.[4]

Rheumatoid Arthritis (RA) is the most prevalent type of autoimmune arthritis, arising from an immune system dysfunction that causes the body to attack its own healthy tissues. This leads to inflammation and pain, especially in the wrists and smaller joints of the hands and feet.[5]

In Ayurveda, Amavata is first described in Madhav Nidana[6], with detailed treatment guidelines later provided by Acharya Chakradatta. The condition arises due to the buildup of Ama (toxins) and the aggravation of Vata dosha. These imbalanced doshas tend to settle in areas like the gastrointestinal tract (kostha), lower back (trik), and various joints (sarva sandhi), leading to symptoms such as stiffness and pain, which are characteristic of Amavata.[7]

Modern medicine does not offer a definitive cure for Amavata and mainly focuses on symptom control using steroids and pain relievers. Classical Ayurvedic texts describe the pain of Amavata as being as intense as a scorpion sting ("Vrischik dansh vata vedana"). Inflammation and swelling severely restrict joint mobility. As a result, Ayurvedic treatment emphasizes the use of Deepana and Pachana herbs to stimulate digestion, along with fasting (Langhana) and Basti (therapeutic enemas) to eliminate Ama and restore Vata balance. In addition, Vatahara medicines are administered to calm the aggravated Vata dosha.[8]

Patient Information :-

A 61-year-old male visited the outpatient department with the following complaints:

- Pain in both knee joints (Ubhaya Jannu Shoola)
- Pain in the joints of both hands and fingers (Ubhaya Parvasandhi Shoola)
- Pain in the left elbow (Left Kurpar Sandhi Shoola)
- Pain in the left shoulder joint (Left Ansha Sandhi Shoola)
- Loss of appetite (Aruchi)
- Generalized body ache and fatigue (Angamarda)
- Difficulty walking due to intense pain and joint stiffness
- Morning stiffness affecting all involved joints

History Of Present Illness:-

The patient was in good health until about a year ago, when he developed sudden pain in both knees. Over time, the pain intensified and gradually extended to other joints, including the fingers, left elbow, and left shoulder. He also experienced increasing joint stiffness, which severely affected his ability to walk. After receiving modern medical treatment without sustained relief, he decided to pursue Ayurvedic therapy.

Personal History:-

- **Occupation:** Farmer
- **Appetite:** Decreased
- **Addictions:** None
- **Allergies:** No known allergies to food or medications
- **Gait:** Abnormal, caused by joint pain and stiffness

Ashtavidha Pariksha :-

- **Pulse (Nadi):** 68 beats per minute
- **Stool (Mala):** Constipation (Vibandha) present
- **Urine (Mutra):** Normal (Prakrut)
- **Tongue (Jihwa):** Coated (Sama)
- **Voice (Shabda):** Normal (Prakrut)
- **Eyes (Drik):** Normal (Prakrut)
- **Body Build (Akriti):** Lean and thin (Krisha)

Clinical Examination Findings:-

- Pain and tenderness were noted in both knees, all finger joints, the left elbow, and the left shoulder.
- The patient experienced morning stiffness in the affected joints, lasting around 30 minutes.
- Ongoing fatigue was present throughout the day

Laboratory Investigations:-

- **The Rheumatoid Factor (RA Factor)** :Test Result Was Positive.
- **C-Reactive Protein (CRP)** : Positive
- **Serum Uric Acid**: levels were found to be within the normal range.

MATERIALS AND METHODS:-

In this case, Vaitarana Basti was used as a Shodhana (cleansing) therapy over a period of 16 days. Simultaneously, Vatahara Aushadhi (herbal medicines aimed at balancing Vata dosha) were administered as part of the Shamana (palliative) treatment approach.

Assessment Criteria:-Acharya Charaka describes Amavata as presenting with symptoms like loss of appetite (Aruci), aversion to food (Asyavairasyata), a feeling of heaviness (Gaurava), body pain

(Angamarda), fever (Jvara), blockage or swelling of bodily channels (Srotorodha/Sotha), weight loss (Krisangata), and impaired digestion (Agnimandya). These clinical features were used as key indicators to assess the patient's condition in this case (refer to Table 3). Comprehensive clinical evaluations were conducted before and after treatment to measure the effectiveness of the therapy.

OBSERVATION AND RESULTS:-

The patient reported a noticeable reduction in pain and swelling within the first five days of treatment. Following 16 days of Vaitarana Basti therapy, there was a marked improvement in the overall signs and symptoms.

DISCUSSION:-

Amavata arises from an imbalance of Vata dosha along with the buildup of Ama (toxins) in the body. The primary contributors to this condition are poor dietary habits and a lifestyle that weakens the digestive fire (Agnimandhya).[9] When digestion is impaired, Ama forms and, along with aggravated Vata, migrates to Kapha-dominant regions such as the joints, stomach, and heart (Hridya). This leads to symptoms like heaviness, fatigue, joint stiffness, swelling, and pain, particularly in smaller joints.[10]The core aim of Ayurvedic treatment in such cases is to strengthen Jatharagni and eliminate Ama. To achieve this, Deepana-Pachana (appetite- and digestion-stimulating) and Vatahara herbs were administered to restore balance and clear toxins.[11]In addition, Basti therapy, as by Acharya Charaka, plays a vital role in managing aggravated Vata and removing Ama.[12] Vaitarana Basti, with its Laghu (light), Ruksha (dry), Ushna (hot), and Tikshna (sharp) qualities, specifically targets the Pakwashaya (colon), the primary seat of Vata, helping to expel the dosha. The therapeutic effects then circulate through the body, addressing imbalances in various areas.[13] The medicated oils used in Basti possess Sukshma (subtle) qualities that allow them to penetrate the Srotas (body channels) and reach the Grahani. This stimulates Samana Vayu—the aspect of Vata responsible for digestion—thereby enhancing Jatharagni and promoting toxin elimination. By regulating Apana Vayu, Vaitarana Basti indirectly revitalizes digestive function, tackling the root cause of Amavata.[14]

CONCLUSION:-

Ayurveda is not only focused on treating illnesses but also on preventing their recurrence. Through Shodhana Chikitsa (detoxification therapy), it aims to eliminate physical and chemical toxins from the body, converting them into beneficial biochemical substances that are easily assimilated. In this particular case, the use of Vaitarana Basti and Vatahara Aushadhi successfully cleared the accumulated Ama and imbalanced Vata, resulting in marked improvement in the patient's condition.

Contents Of Vaitarana Basti:-

Sr.no	Name	Quantity
1	Saindhav Lavan	1 Karsha (12gm)
2	Guda (Jaggery)	1 Shukti (24gm)
3	Chincha (Tamarindus)	1 Pala (48gm)
4	Gomutra (Cow's Urine)	1 Kudava (192ml)
5	Saindhavadi Tail	50 ml

Drugs Used In Shamana Aushadhi:-

Sr.no	Dravya	Dose	Duration
1	A.G Compound	4gm	Twice a day
2	Arthocare Churna	4gm	Twice a day
3	Vatahari Guggulu	2Tab	Twice a day
4	Singhanad Guggulu	2Tab	Twice a day
5	Aamvatahar Kwath	15gm	Twice a day
6	Triphala Churna	5gm	At night

Grading Of Sandhishoola (Pain) :-

Sr.no	Severity of Pain	Grade
1	No pain	0
2	Mild Pain	1
3	Moderate Pain, but no difficulty in moving	2
4	Severe Pain in moving body Part	3

Grading Of Sandhishotha (Swelling) :-

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

Sandhi Stabdhta (Stiffness Of Joints) :-

Sr.no	Severity of Stiffness	Grade
1	Free movement of joints	0
2	Mild restriction of Movement	1
3	Moderate restriction of Movement	2
4	Severe restriction of Movement	3

Objective Criteria:-

Gradation Of Foot Pressure:-

Sr.no	Foot pressure (In kg)	Grade
1	22-20 kg	0
2	18-15 kg	1
3	13-10 kg	2
4	10 kg	3

Gradation Of Walking Time:-

Sr.no	Walking time (for 25 ft in number of sec.)	Grade
1	20-25 sec	0
2	15-20 sec	1
3	31-40 sec	2
4	>40 sec	3

Observations And Results:-

Assessment Of Pain-

Left		Name of joint	Right	
B.T	A.T		B.T	A.T
3	1	Knee Joint	3	1
2	0	Elbow Joint	-	-
2	0	Shoulder Joint	-	-
3	1	Phalangeal Joint	3	1

Assessment Of Stiffness Of Joint-

Left		Name of joint	Right	
B.T	A.T		B.T	A.T
3	1	Knee Joint	3	1
1	0	Elbow Joint	-	-
1	0	Shoulder Joint	-	-
2	0	Phalangeal Joint	2	0

Assessment Of Swelling Of Joints-

Left		Name of joint	Right	
B.T	A.T		B.T	A.T
2	0	Knee Joint	2	1
-	-	Elbow Joint	-	-
1	0	Shoulder Joint	-	-
1	0	Phalangeal Joint	1	0

Assessment Of Objective Criteria-

Criteria	BT	AT
Foot pressure(In kg)	2	0
Walking time(for 25 feet in numbers of second)	2	0

Investigations:-

Showing Laboratory values before and after treatment

Investigations	B.T	A.T
Hb%	11.10 gm%	12.80 gm%
TLC	8,800/cumm	9,900/cu.mm
Neutrophils	64%	71%
Lymphocytes	27%	24%
Monocytes	3%	4%
Eosinophils	2%	1%
Total Platelet Count	2.86Lacs/cu.mm	1.45Lacs/cu.mm
ESR	118mm/hr	84mm/hr
RA Test	Positive	Negative
CRP	Positive	Negative
Uric acid	4.0mg/dl	3.8mg/dl

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