



Conservative Management of Osteoarthritis through Ayurveda – A case study

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ABSTRACT

A 70 year old male patient with severe knee joint pain and diagnosed with osteoarthritis was treated with Panchkarma therapies. Patient presented with severe pain in bilateral knee joint and difficulty in walking without support. Gait was limping and unstable with weakness and crackling sound from both knees was audible when patient walked. Management was done with various Panchkarma therapies over four admissions in seven months. Ayurveda explains this disease as Sandhigatavata under Vatavyadhi. Snehana and svedana formed the first line of treatment to pacify the vitiated vata while Shalishashtikapindasveda and Matravasti Januvasti and Janudhara worked as balya for mansa-asthidhatu. Patient was advised Knee replacement surgery which was avoided by following the ayurvedic treatment.

KEYWORDS

Osteoarthritis, Panchakarma, Janudhara, Januvasti

INTRODUCTION

These days joint pain is a very commonly occurring problem. Earlier it was detected mainly in older patients but in last few years' patients as young as in age group of 25 to 30 to have also started presenting with these complaints. Degenerative changes of joints include various types of joints diseases like Osteoarthritis, Rheumatoid arthritis etc. Amongst these, Osteoarthritis is the most common joint disease.

Osteoarthritis[1] is the most common form of chronic disorder of synovial joints. It is characterized by degeneration of cartilage and its underlying bone within a joint as well as bony overgrowth. It is also known as degenerative joint disease. The breakdown of these tissues eventually leads to pain and joint stiffness. Joints appear larger, stiff and painful; usually feel worse with increased use throughout the day. The tissue that lines the joint can become inflamed, the ligaments can loosen, and the muscles around the joint can weaken. The patient feels pain and movement limitations when using the joint. It is the most common form of arthritis. It can occur in any joint especially weight bearing joints like knees i.e. Janu sandhi.

Osteoarthritis can be correlated to sandhigatavata[2] described in Ayurveda under the heading of vatavyadhi[3] and vata kapha dosha imbalance disorders. Snehana[4], Svedana[5] and basti[6] chikitsa are the primary treatment for all types of vatavyadhi and specifically in the conditions which are referred to as Nirupstambhita[7] vatavyadhi. As there is pronounced degeneration of asthi and majja dhatu along with decreased strength of mansa dhatu, balya and yogavahi chikitsa is a treatment of choice which can be achieved through proper panchakarma treatment along with oral medicine of choice.

CASE REPORT:

A 70 years old Male patient from Kapoorthala, Punjab visited the OPD of Chaudhary Brahm Prakash Ayurved Charak Sansthan, Khera Dabar, Najafgarh, New Delhi on 3rd March 2014

with the following chief complaints:

Patient name: ABC

Age and sex: 70 years Male

Built: Medium

Date of first visit: 18 March 2014

OPD & IPD No. 16086/937

Address: Kapoorthala, Punjab

Chief complaints:

- 1) Pain in both knee joints
- 2) Difficulty in walking
- 3) Stiffness in both knee joints
- 4) Swelling in both knee joints
- 5) Crepitus in both knee joints

H/O present illness:

Patient was asymptomatic 2 years ago. Gradually he developed pain in his knees, with stiffness and swelling on the joints and increasing difficulty in walking, for which he took treatment locally but without any relief. On taking opinions of specialists in various hospitals he was advised to undergo knee replacement surgery which he wanted to avoid and came to our hospital's OPD.

Diagnosis

The patient is a pre-diagnosed case of Osteoarthritis. According to ayurveda patient was diagnosed as a case of nirupstambhita sandhigatavata.

Date of 1st admission: 18/03/14 to 05/04/14

Date of 2nd admission: 10/05/14 to 27/05/14

Date of 3rd admission: 21/06/14 to 07/07/2014

Date of 4th admission: 07/10/14 to 20/10/2014

TOTAL TREATMENT SCHEDULE

Panchkarma chikitsa:

Phase I

1. **Patrapindasveda** – Sahacharadi taila
2. **Nadi sveda** – Dashmula kvath

Phase II

1. **Shalishashtikapinda Sveda** – Balaguduchyadi taila + Dashmula taila
2. **Nadi Sveda** - Dashmula kvath
3. **Januvasti** – Balashwaganda taila + sahacharadi taila

Phase III

1. **Patrapinda sveda** – Sahacharadi taila
2. **Janu Vasti** – Dhanvantara taila + sahacharadi taila
3. **Matra Vasti** – 60 ml balaguduchyadi taila

Phase IV

1. **Patrapinda sveda** – Sahacharadi taila + Balashwagandha taila
2. **Januvasti** – Dhanvantara taila + Sahacharadi taila
3. **Janudhara** – Balashwagandha tail + Dashmula taila

Shaman chikitsa:

1. Yogaraj Guggulu 2 tab BD.
2. Dashmula Kvath 40 ml BD.
3. Vatavidhwansa Rasa 1 tab TDS

ASSESSMENT CRITERIA:

Table 1: Criteria of assessment for knee joint pain

	SCORE
Pain	
A. No Pain	0
B. Mild Pain after Exercise	1
C. Severe Pain after Exercise	2
D. Pain at rest present with interferes	3
E. Pain at rest present interferes with Sleep	4
Oedema	
A. No oedema	0
B. Mild Oedema	1
C. Moderate Oedema	2
D. Severe oedema	3
Crepitus	
A. No Crepitus	0
B. Only Palpable	1
C. Always palpable something audible	2
D. Always audible crepitus	3
Stiffness	
A. No Stiffness	0
B. In between 180° -160° (<45°) stiffness	1
C. In between 160°-120° (45°-90°) stiffness	2
D. More than 90° stiffness	3
Tenderness	
A. No pain on pressure	0
B. Pain on pressure	1

C. Winces with pain	2
D. Winces & withdraws affected part	3
E. Does not allow to touch the affected part	4
Walking distance	
A. Walks without pain up to 1 km	0
B. Walks without pain up to 500 meters	1
C. Walks without pain up to 250 meters	2
D. Feels pain on standing	3
E. Cannot stand	4
Movement of the knee joint	
A. 0 -130 degree	0
B. 129 -90 degree	1
C. 89 -60 degree	2
D. 59 -30 degree	3
E. 30-0 degree	4
Maximum score	46

OBSERVATIONS

Table 2: Observations acc to criteria of assessment

Symptom	Admission	After 1 st Phase	After 2 nd Phase	After 3 rd Phase	After 4 th Phase	
Pain	Rt	4	3	3	2	1
	Lt	4	3	2	1	1
Oedema	Rt	2	2	2	1	0
	Lt	2	2	1	0	0
Crepitus	Rt	3	3	3	2	2
	Lt	3	3	2	2	2
Stiffness	Rt	2	2	2	1	1
	Lt	2	1	1	1	1
Tenderness	Rt	3	3	2	2	1
	Lt	3	2	1	1	1
Walking distance		3	3	2	2	1
Movement of the joint	Rt	3	4	3	2	1
	Lt	4	3	2	1	
Total		38	34	26	18	13

DISCUSSION

General principle of treatment[8] of vata dosha is adopted in case of Sandhigatavata. Also specific treatment[9] of sandhigatavata was included in the treatment line. Snehana and svedana form the first line of treatment of vatavyadhi. Asthi and Majja are majorly affected dhatu in this condition. Vitiated vata dosha is pacified by snehana, svedana and basti karma.

Patrapindasveda and Nadisveda locally for 10days initially in stiffness of knees reduced and pain when resting was reduced, patient also stopped taking analgesics. In second round Shalishashtikapindasveda and Nadisveda were given for 10days followed by Januvasti for 10days, in which patient was able to stand without support and also walk for short distance. In third round Patrapindasveda and Matravasti were given for 10days followed by Januvasti for 10days, this increased the power in legs and patient was able to walk for small distances without support without fear of losing balance. In fourth round, Patrapindasveda was given for 7days followed by Januvasti for 7days and Janudhara for 15days resulting reduced crepitus in both knees and patient being able to walk without pain.

Patrapindasveda[10] is a type of snigdha sankara sveda which pacifies vata and also opens the channels thereby improving

circulation in the stiff muscles and joints. Vatanulomana is also achieved by this treatment and it reduces pain. Shalishastika-pindasveda [11, 12] is balya and poshana for asthi and Majja dhatu also pacifying the vata, giving strength to asthi and also improving muscle tone and reducing muscle stiffness.

Sahacharadi taila[13] is anulomana vata-kaphaghna and srotoshodhana in nature resulting in pacification of vata and opening the constricted channels in neuromuscular system. Balashvagandha (lakshadi) taila[14] is vataghna with properties of mansadhatuposhana and balaguduchyadi taila[15] is also vataghna with pittashamana and raktaposhaka qualities which help in improving the strength of muscles. Dashmula taila[16] is vata-kaphaghna in nature and also proves useful in increasing strength of the tissues. Januvasti[17] is also a type of sthanika-vasti which is snigdha svedana in nature, reduces inflammation and provides nourishment to underlying bone and cartilage by improving circulation. Janudhara[18, 19] imparts strength to all the dhatus, delays ageing, reduces pain and promotes healing of bone.

At the end of the final treatment patient had improved significantly with 75% relief in pain and associated symptoms and reduced crepitus in both the knees, all the major complaints were reduced and over 66% relief in all the associated symptoms. Patients overall quality of life improved as he was able to carry on his day to day work without needing support from others. The knee score system adopted also showed promising results with reduction in pain score to 13 from original 38.

CONCLUSION

According to the observations in the present study, this can be safely concluded that Osteoarthritis can be compared with sandhigatavata on the basis of symptoms. The results replicate the original texts and showed substantial improvement for the patient as he improved his function (Table no. 1 and 2) Hence, Ayurveda management used is effective on the disease. However, further work should be done by conducting clinical trials on large samples to draw the final conclusion.

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