



ORIGINAL RESEARCH PAPER

Ayurveda

AYURVEDIC APPROACH FOR MANAGEMENT OF ANKYLOSING SPONDYLITIS : A CASE REPORT

KEY WORDS: Ankylosing spondylitis, Asthimajagata vata, Ayurveda.

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ABSTRACT

Ankylosing spondylitis is a chronic inflammatory disorder that primarily involves the sacroiliac joints and axial skeleton. No satisfactory treatment is available in modern medicine for this disorder. Various panchakarma procedures and ayurvedic drugs have been proved useful for these manifestations. We present a case of ankylosing spondylitis which was treated for two months with combination of Panchakarma procedure & Ayurvedic drugs. Ayurvedic treatments, in this case, was directed toward alleviating symptoms and to reduce severe disability. The patient was considered suffering from Ashtimajja gata vata and was treated with sarvanga abhyanga by mulakadya taila, nadi sweda, pinda sweda, niruha basti of rasnadi kwatha, anuvasana basti by mulakadya taila and yapana basti of guduchi, kiratattika, ashwagandha and shunthi as per schedule along with oral ayurvedic drugs for two months. Patient's condition was assessed for symptoms of Astimajagata vata and Ankylosing spondylitis showed substantial improvement. This study shows the cases of ankylosing spondylitis may be successfully managed with Ayurvedic treatment.

INTRODUCTION:

Ankylosing spondylitis belongs to a group spondyloarthritis. It is characterized by a chronic inflammatory arthritis predominantly affects the axial skeleton, peripheral joints & extra-articular structures are also frequently involved. Prevalence of AS in India is 0.03% as per surveys conducted by Bone and Joint Decade India from 2004 to 2010¹. The disease more often manifests in young males than in females with the ratio of approximately 3:1².

Inflammation of the spine primarily causes pain and stiffness in and around the spine, including neck, middle back, lower back as well as the buttock. In the due course of time, chronic inflammation of the spine (spondylitis) can lead to a complete fusion of the vertebrae, a process referred as ankylosis, which leads to marked axial immobility and deformities like Kyphosis of the thoracic spine. There is also involvement of the peripheral joints and articular structures. Musculoskeletal pain, stiffness as well as immobility of spine due to AS, is the major burden. NSAIDs, corticosteroids and DMARDs are used to treat/manage AS. However, these treatments are of limited benefit. It is a need of the hour to explore satisfactory treatment modalities available in other medical system for the benefit of those affected.

Ayurvedic intervention in the early stages of the illness reported to be highly beneficial, in managing the symptoms as well as preventing further progression. Ayurveda interprets these changes as due to altered Vata dosha resulting from the pathological factors that affects mainly the Asthi as well as the majja dhatu. Selected panchakarma procedures are mentioned for the management in such conditions by the Ayurvedic scholars. Here we are reporting a case of AS diagnosed as 'Asthi-majja gata vata'³ according to Ayurveda.

CASE DESCRIPTION

A 31 yr old male patient came to our care (5/7/18) with the complaints of katishtula (which is dull in character and felt deep in the lower lumbar region), prushthashula, manyashula (neck pain with deformity stooping forward of neck) accompanied by pratah kati, prushtha, manyagraha (early morning stiffness). The pain was insidious in onset which aggravates during night, early mornings and after exposure to cold or in cold seasons. Morning stiffness lasts for few hours and gradually improves with activity. The pain became persistent, bilateral and gradually progressive since last 5 years (2013). Patient has been taking 'Non-steroidal anti-

inflammatory drugs' (NSAID), corticosteroids and various 'Disease modifying anti-rheumatic drugs' (DMARDs) for AS. Patient didn't get satisfactory and sustained relief with these medicines and came for Ayurvedic treatment. Patient has also complained of knee joint pain (bilateral), sleep disturbances due to severe pain (Aswapna santata ruk), functional disability. All these factors affected the patient's general well being.

Physical findings such as loss of spinal mobility, with restriction of flexion and extension of the lumbar spine and neck were found. Restriction in expansion of the chest was also found. Patient's posture undergone characteristic changes such as, exaggeration of thoracic kyphosis, stooping forward of neck (restricted neck movement up to 40°) and loss of lumbar lordosis were present. There were no extra articular manifestations in present case.

In present case, HLA-B27 was positive with increased levels of C reactive protein (CRP) and a raised Erythrocyte sedimentation rate (ESR). Radiographic sacroiliitis was also detected. All other hematological, biochemical investigations, renal function tests, thyroid profile and urine (routine & microscopic) examination reports were normal

DIAGNOSTIC FOCUS AND ASSESSMENT

The patient had complained of continuous joint pain, Kyphoscoliosis, fatigue and severely disturbed sleep resulting from pain. These symptoms point towards the condition of Asthimajagata Vata³ as Asthibheda (stabbing pain in the bones), Parvabheda and sandhi soola (pain in sacroiliac joint and cervical region). Bala kshaya (decreased vitality and strength), Aswapana (sleeplessness) and Santataruk (continuous pain) are the manifestation of the same. Adhyasthi (Fusion of inter vertebral disc) is the manifestation of Asthipradoshavikara⁴ (diseases of bones). Vinamata (kyphoscoliosis) is the manifestation of Majjavritta Vata⁵. The patient was in Niramaavastha condition.

TABLE NO. 1: THERAPEUTIC FOCUS AND ASSESSMENT

Treatment	No of days	Medicine	Rationale	Remarks
Sansarjan krama (madhyam shuddhi)	30	Madhyam shuddhi sansarjan karma	Deepan, 6 pachan	Agni improved
Snehana (bahya)	25	Mulakadya taila	Vata - kaphahara	Pain & stiffness reduced

Swedana (Nadi sweda)	25	Dashamula Nirgundi	For attaining vilayana or draveekaran a of dhatugata doshas	Pain reduced
Sthanik Pinda sweda	25	Devdar, Ashwagandha, Bala, Vidari	Vata – kaphahara Stambha har balya , bruhan	Pain & stiffness reduced Balavardhan
Anuvasana basti	24	Mulakadya Taila	Vata-kaphahara	Pain reduced
Niruha basti	14	Rasnadi kwath	Vataghna	Pain reduced
Yapana basti	21	Guduchi, kiratatikta, shunthi, ashwagandha	Shesha dosha pachanarth, Bruhan, Asthi – majja poshak	Pain & stiffness reduced Balavardhan

TABLE NO.2 : ABHYANTAR CHIKITSA

NO.	MEDICINE	DOSE	ANUPANA	TIME
1	Shataputi abhrak bhasma	50 Mg		
2	Vaikrant bhasma	20 mg	Ardrak swaras with madhu	7 am & 5 pm
3	Chopchinyadi churna	1 gm		
4	Guduchi+ shunthi+ devdar + gokshura + punarnava + renukebeeja kwath	50 ml		Twice a day after food

ASSESSMENT

Assessment of effect of the therapy was done on the basis of changes observed at the clinical level. Numerical score was assigned for each of the signs and symptoms by using Visual analogue scale (VAS).

Table no. 3: Bath Ankylosing Spondylitis Disease Activity Index (Basdai)

SYMPTOMS	BT 1st day	AT 1st week	AT 2nd week	AT 3rd week	AT 4th week
Fatigue	More	Less	Less	Less	Less
Neck pain, backpain, hip pain (VAS)	100	90	70	60	40
Pain or swelling in other joints	Nil	Nil	Nil	Nil	Nil
Morning stiffness-intensity (VAS)	100	90	60	40	30
Morning stiffness –duration (Approx)	1 ½ hrs	1 ¼ hr	1 hr	50 min	40 min

Table No. 4: Bath Ankylosing Spondylitis Functional Index (BASFI)

DAILY ACTIVITIES	BT 1 st Day	AT 1 st week	AT 2 nd week	AT 3 rd week	AT 4 th week
Brushing	95	90	80	60	50
Washing face	75	75	70	60	50
Washing plates	75	70	65	65	60
Holding vessels filled with water	100	95	85	85	80
Combing hair	75	70	60	60	60

BATH ANKYLOSING SPONDILITIS GLOBAL SCORE (BASGS)

Well being of the patient based on VAS

BT (0th week) – 100

AT (4th week) – 40

On assessing the condition of patient after 28 days of treatment by using the scales – Bath Ankylosing Spondylitis Disease Activity Index (BASDAI), Bath Ankylosing Spondylitis Functional Index (BASFI), Bath Ankylosing Spondylitis global score (BASGS) showed that there is marked relief in pain, stiffness and fatigue; also patient was comfortable on doing his daily activities.

CONCLUSION

The *Ayurvedic* diagnosis of '*Asthi-majja gata vata*' is made for '*Ankylosing spondylitis*' in present case. Various *Ayurvedic panchakarma* procedures and internal medicines have provided promising results especially in reducing the pain, decreasing the severity of deformities and also improving quality of life within short time and without causing any adverse effects in present case. Present study findings can't be generalized and further long term follow up studies with large sample are required to substantiate these claims.

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