



ORIGINAL RESEARCH PAPER

Ayurveda

INSTANT ANALGESIA THROUGH VIDDDHA, A NON PHARMACOLOGICAL, COST EFFECTIVE, LOCAL THERAPY OF AYURVEDA, IN KNEE OSTEOARTHRITIS (OA): CASE SERIES

KEY WORDS: Ayurveda, Cost effective, Osteoarthritis, Pain, , Viddha,

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ABSTRACT

BACKGROUND:- Every physician deals with patients of knee pain due to osteoarthritis. Initially patient tries OTC medications which include various types of anti inflammatory analgesic drugs and experience pain relief. When they don't see any further relief over the period, they visit physician. Modern medicine offers intra articular injections, non pharmacological, surgical management other than anti inflammatory analgesic oral medicines. Though pain control is practical treatment goal, intervention which works to slow down or halt disease progression is critically needed.

Viddha, a non pharmacological, local therapy of Ayurveda, an Indian System of Medicine is an intervention to achieve analgesia immediately, which is cost effective, has no side effects with possibility of arresting the progression of disease based on Ayurveda principle.

Initially a case study was published on Analgesic Effect of Viddha, A Nonpharmacological, CostEffective Local Therapy of Ayurveda (An Indian System of Medicine) in Knee Osteoarthritis (OA): A Case Report in International Journal of Clinical and Experimental Medical Sciences in June 2018. This intervention is practiced in 20 patients of knee OA following the SOP mentioned in this case study.

METHOD AND RESULT:- A single sitting of Viddha treatment given with the help of 26 gauge half inch short, fine, brown hypodermic needle in 20 patients with knee OA. Pain assessment was done with visual analogue scale. Median VAS score of 7 before Viddha came down to 4 after Viddh which is 38.1 % pain relief.

Conclusion:- A single sitting of Viddha done in Knee joint provide instant analgesia in elderly patients of knee OA.

INTRODUCTION:

Pain is the primary symptom of persons with knee osteoarthritis. Severity of the joint pain can vary, from a minor ache to a severe and disabling pain accompanied by difficulty in walking due to instability of the knee. Pain worsens with certain activities, such as bending, kneeling, squatting, or stair climbing. Knee pain and stiffness that is worse after prolonged inactivity or rest, such as getting out of bed in the morning.[1] Due to the fact that OA is affecting millions worldwide and is often a progressive and irreversible degenerative process, functional improvement and pain control are reasonable treatment goals.[1] Also measures need to be developed to prevent early progression of the disease.

Currently the annually estimated cost per year to treat OA ranges from \$15.5 to \$26.6 billion, with some researchers estimating these figures to be much lower and the total cost is actually believed to exceed \$89.1 billion in the near future. Despite the available treatment methods, there still persist a host of inadequacies that make cost containment a real issue [2].

Viddha chikitsa, provides immediate pain relief. It is observed that Viddha practiced in patients with knee joint pain, not responding to NSAIDs and analgesics are getting immediate pain relief with increased range of motion. Moreover it is cost effective as there is requirement of very minimal resources for this treatment (26 gauge half inch short, fine, brown hypodermic needle). There are almost nil side effects with possibility of arresting the progression of disease based on Ayurveda principle.

Viddha is a non drug, local therapy indicated for analgesia described in 'Sushrut Samhita', a basic and prime script of Ayurveda, an Indian system of medicine.

It is used in various conditions for pain relief and specific sites of Viddha are described for various disease conditions.[3]

There is guidance to carry out the Viddha at fleshy or hollow

sites. It is directed that Vrihimukh, the instrument for Siravedh (type of bloodletting) should be inserted Yavamatra[4] (length of one type of rice). In case of knee joint, intra articular space is the hollow area and the 26 no half inch needle comes to be 'Yavamatra'. These principles when practiced in knee OA showed positive results in some patients.

MATERIAL AND METHOD:

Patients attending Panchakarma OPD and IPD of Chaudhary Brahmaprakash Ayurveda Charak Sansthan, Khera Dabar, New Delhi

a) Inclusion Criteria:-

- 1] Symptomatic knee osteoarthritis (**ACR Clinical Classification Criteria for Osteoarthritis of the knee:** Using history and physical examination)[5]
- 2] Age 60 to 70 yrs

b) Exclusion Criteria:-

- 1] Acute inflammation
- 2] Any other form of Arthritis
- 3] Known cases of major illnesses like Tuberculosis, AIDS, Cancer

METHOD

SOP of Viddha for knee OA [6]:-

- 1. Ask patient to lie down in supine position.
- 2. Flex the affected knee of the patient in 45 degree
- 3. Locate the lateral intra-articular space of that knee.
- 4. Clean it with spirit swab and insert the 26 gauge half inch short, fine, brown hypodermic needle gently perpendicularly to the whole length of it. One should not feel resistance while inserting the needle.
- 5. Keep it placed for 30 seconds and remove it gently
- 6. Repeat the same procedure for medial articular space.

Patient was informed about Viddha procedure. Written consent was taken. Numerical visual analogue scale (VAS) was given to patients to mark their pain on the scale. Viddha was done according to SOP mentioned above and pain was

again marked on visual analogue scale immediately after Viddha by patient. A single sitting of Viddha was given.

Table 1- Observations and Result:

S.No.	OPD No	Age	Gender	VAS	
				BV	AV
1	8368	61	F	5	3
2	8385	65	M	7	5
3	8507	65	F	9	7
4	111335	61	F	8	5
5	8345	60	F	7	4
6	7163	63	F	7	5
7	8385	65	M	4	2
8	7116	63	M	8	4
9	14080	69	M	9	5
10	10539	63	M	4	2
11	8829	60	F	7	4
12	8443	64	M	8	6
13	148181	62	F	5	3
14	23052	62	F	6	4
15	18600	65	M	8	6
16	30183	60	F	6	2
17	24479	65	M	4	3
18	32211	63	M	9	7
19	150910	60	F	6	1
20	21902	63	F	7	5

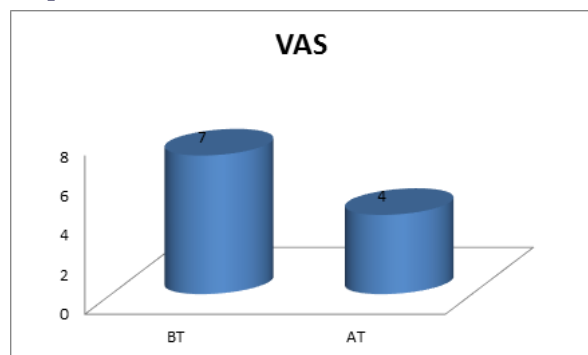
BV – Before Viddha AV – After Viddha

Table 2- Statistical Analysis:

VAS	Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
	BV	AV				
	7	4	-4.024a	0.000	38.1	Significant

BV – Before Viddha AV – After Viddha

Graph -1 Pain Relief on VAS Scale



BT- Before treatment At- After treatment

DISCUSSION:

A government Ayurveda hospital in South Delhi with average OPD of 2000 patients daily is dominated with patients of Arthritis of some form. Most of the time, these patients are chronic in condition. Many at the time of first visit already had exposure to analgesics and anti-inflammatory medications preferably NSAIDS for months or years, either OTC or through consultation of physician. Over the period analgesic and anti-inflammatory medications does not give analgesic effect. Moreover their long term use has dreadful cardiovascular, renal and gastrointestinal side effects which are confirmed with more than dozen researches. Some patients gives history of intra-articular steroid or hyaluronic acid injections which gives satisfactory results but more than 3 to 4 injections per year have potential side effects. Hyaluronic acid injections seem to reach their peak benefit 8 weeks after the shot is given. [7]. Viddha may evolve as better treatment option in this regard.

'Tridosha theory' forms the basis of Ayurvedic physiology, pathology and pharmacology.

Though, the term 'Doṣha' means 'the disturbing factor', it has got definite physiological importance in normal state. Basically three 'Doshas'- 'Vāta', 'Pitta' and 'Kapha'- are responsible for maintenance of homeostasis in the body, and health is nothing but a state of equilibrium of these 'Tridoshas'. Disease manifests as a result of disturbance in the state of equilibrium among these 'Doshas'. [8].

'Vāta' is responsible for all movements and it is the initiating and controlling factor.

'Pitta' performs the activities like digestion, metabolism, production of heat and that is why it is called 'Agni' meaning 'Fire'. 'Kapha' performs the functions like protection, strength, stability and resistance [8]. Pacification or expulsion of vitiated Doshas is basic principle for treatment of any disease condition.

There can be no pain without vitiation of Vata in the body [9]. In Knee OA there is lodging of vitiated Vata at Knee [10]. Properties of Vata like Ruksha (Dry), Laghu (light), Sheeta (cold), Vishad (unsticky), Khara (rough) [11] accounts for the wearing away of the cartilage. As the chronicity increases; the accumulated vitiated Vata progressively causes damage to the joint cartilage leading to severity of the condition. After Viddha as the Vata is expelled out, the wearing away of the cartilage may be halted resulting in checking of progression of the condition. During Viddha in knee joint Vata along with indirect Rakta from Vatavahi Sira get released outside there by reducing the built up pressure by Vata resulting in immediate pain relief.

All the patients in this case series were chronic and were having history of taking anti-inflammatory analgesic drugs intermittently as per need for quite long period and lately were not responding to these medications. Immediately after single sitting of Viddha, average initial VAS score of 7 came down to 4 which is 38.1% pain relief.

For the first time, OARSI has developed guidelines for the non-surgical treatment of osteoarthritis of the knee that are stratified to each of four patient groups: patients with knee-only OA and no comorbidities, patients with knee-only OA with comorbidities, patients with multi-joint OA and no comorbidities, and patients with multi-joint OA with comorbidities. Comorbidities included diabetes, hypertension, cardiovascular disease, renal failure, GI bleeding, depression, or a physical impairment limiting activity, including obesity [12]. Viddha can be used in all four groups for immediate pain relief. It can be done as per required. There are no side effects as it is non drug intervention. Reducing needle size reduces pain and generally increases patient acceptance [13]. As needle used for this treatment is relatively thin and small in length, it is less painful. No one likes the needle prick but the fact is, once the patient gets significant pain relief immediately, he/she himself asks for the next prick.

CONCLUSION:

A single sitting of Viddha done in Knee joint provide instant analgesia in elderly patients of knee OA. RCT on large sample size would affirm the outcome.

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