



ORIGINAL RESEARCH PAPER

Ayurveda

EFFICACY OF AYURVEDIC SHAMANA AND PANCHAKARMA THERAPIES IN MANAGEMENT OF AAMAVATA : A CASE STUDY.

KEY WORDS: Aamavata, Ayurveda, Shamanoushadhis, Basti, Rheumatoid arthritis.

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ABSTRACT

Aamavata is a disease which involves vitiation of vata dosha and Aama. It affects the joints and causes pain and stiffness. This hampers the quality of life of the person. Aamavata can be correlated to Rheumatoid arthritis on basis of similarities in signs and symptoms. Rheumatoid arthritis is a chronic inflammatory disease marked by symmetric peripheral polyarthritis typically involving the small joints of hands and feet. This case study is a 42 year old female, complaining of multiple joint pain, more in bilateral wrist joint, bilateral metacarpophalangeal joints pain and swelling, tenderness, bodyache, mild fever, irregular bowel habit, bloating since 9 months. She was treated with Shamanoushadhis and Basti chikitsa which proved to be effective and helped in relieving the symptoms.

INTRODUCTION:

Aamavata is a condition which involves Vata dosha and Aama. Agnimandya is the main cause for developing all diseases which leads to Aama formation. This Aama is carried by Vitiated Vata throughout the body. And gets settled in joints which are considered the sites influenced by Kapha, leading to excess pain, joint stiffness, and tenderness and swelling^[1]. On basis of symptoms, Aamavata can be correlated to Rheumatoid arthritis which is a autoimmune inflammatory condition that begins by affecting small joints, then progresses to larger ones, and eventually impacts the skin, eyes, kidneys, and lungs.^[2] it leads to chronic inflammatory and symmetrical polyarthritis.^[3] Management includes, *Nidana Parivarjana*^[4] strengthening the *Agni* and *Amapachana*, *Shodhana* and *Shamana* therapy.

The American Rheumatism Association 1987 revised criteria for the classification of rheumatoid arthritis includes^[5] - Morning stiffness in and around joints lasting at least 1 hour before maximal improvement; 2) soft tissue swelling (arthritis) of 3 or more joint areas observed by a physician; 3) swelling (arthritis) of the proximal interphalangeal, metacarpophalangeal, or wrist joints; 4) symmetric swelling (arthritis); 5) rheumatoid nodules; 6) the presence of rheumatoid factor; and 7) radiographic erosions and/or periarticular osteopenia in hand and/or wrist joints. Criteria 1 through 4 must have been present for at least 6 weeks, presence of 4 or more criteria.

Case Report:

A 42 year old female, complaining of multiple joint pain, more in bilateral wrist joint, bilateral metacarpophalangeal joints pain and swelling, tenderness, bodyache, mild fever, irregular bowel habit, bloating since 9 months came to Kayachikitsa OPD.

She was a diagnosed Rheumatoid arthritis patient and was taking Allopathic medicines for the same since 6 months but on & off and has stopped since 1 month. RA Factor on 12/05/2025 – 15 IU/ml

Medicinal History:

Tab.HCQ 200mg BD
 Tab. Methylprednisolone 4mg OD Alternate day
 Tab. Orginair OD
 Tolagin gel for local application.
 Surgical history: Operated for Piles in July 2024.
 Personal history:
 Diet :Vegetarian
 Occupation: Housewife
 No any known allergies

No addiction.

Family history: NIL

On Examination:

General Examination:

Pulse-64/min
 Blood pressure- 110/70 mm of hg
 CVS- S1 S2 heard with no added sounds
 CNS- Conscious, oriented
 RS- AEBE Clear

Local Examination:

Inspection: Swelling present in Interphalangeal joint of both joint, wrist joint of both hands.

Palpation: Temperature of interphalangeal and wrist joints of both hands raised.

Tenderness was present on both wrist and interphalangeal joints.

Ashtavidha Pariksha:

Nadi- Vatapittaja
Mala- Asamadhankarak
Mutra- Samyak Pravrutti, 4-5 times/day
Jivha- Saama
Shabda- Prakrit
Sparsha- Manibandha sandhi and Ubhay hastanguli pradeshi
Ushna sparsha
Drik-Prakrit
Akruti- Madhyam

Treatment:

Table 1: Shamana Chikitsa:

22/11/2024	9/12/2024	23/12/2024
<i>Simhanad Guggul 2 TDS</i>	<i>Simhanad Guggul 2 TDS</i>	<i>Simhanad Guggul 2 TDS</i>
<i>Vatavidhwans Rasa 2 TDS</i>	<i>Vatavidhwans Rasa 2 TDS</i>	<i>Vatavidhwans Rasa 2 TDS</i>
<i>Rasnasaptak Kwath 20ml BD</i>	<i>Rasnasaptak Kwath 20ml BD</i>	<i>Rasnasaptak Kwath 20ml BD</i>
<i>Mixture of Avipattikara Churna (1gm), Rasna, Erandmula, Shunthi, Jatamansi (500mg each)</i>	<i>Mixture of Avipattikara Churna (1gm), Rasna, Erandmula, Shunthi, Jatamansi (500mg each)</i>	<i>Mixture of Avipattikara Churna, Rasna, Erandmula, Shunthi, Jatamansi, Shatavari, Bala (500mg each)</i>
<i>Asthikalpa 1 OD</i>	<i>Asthikalpa 1 OD</i>	<i>Asthikalpa 1 OD</i>
<i>Amapachaka Vati</i>	<i>Gandharva Haritaki 5 gm HS</i>	

Panchakarma: started from 20/01/2025 for 10 days as follows:

- a. Sarvanga Snehana- Balaguduchyadi Tail
- b. Sarvanga swedana- Bashpa Peti sweda
- c. Basti- Alternate day Anuvasana and Niruha Basti for 7 days followed by Panchatikta Ksheer Basti for 3 days.

Anuvasana- Balaguduchyadi Tail+ Hingutrigun Tail+ Dashmool Tail (30ml each)

Niruhabasti- Erandamooladi 480ml

Panchatikta Ksheer Basti 230ml for 3 days.

3. Pathya- Apathya:

Pathya: Yava, Kulattha, Raktashali, Shigru, Karvellak, Patol, Aadrak, Lashoon, Jangal Mansa etc.

Apathya: Dadhi, Guda, Kshir, Viruddha Bhojan, Vishamashan, Abhishyandi and Picchila Dravya, Anup Mansa, Vegavrodh and Jagaran.

Table 2: Criteria For Assessment Of Subjective Parameter:

Sandhi Shoola (Joint Pain)	No pain	0
	Mild pain of low density causing no disturbance in routine work	1
	Moderate pain hampers the daily routine work	2
	Severe pain causing definite interruption in routine work	3
Sandhi Shotha (Swelling)	No swelling	0
	Mild swelling	1
	Moderate swelling	2
	Severe swelling	3
Angamarda (Bodyache)	No Angamarda	0
	Occasional Angamarda but patient is able to do usual work	1
	Continuous Angamarda but patient is able to do usual work	2
	Continuous Angamarda which hampers routine work	3
	Patient is unable to do any work	4
Sparsha Asahatva (Tenderness)	No pain on palpation	0
	Mild pain on palpation	1
	Moderate pain	2
	Patient does not allow palpation	3
Jadhyata (Morning Stiffness)	No morning stiffness	0
	Morning stiffness more than half an hour but less than one hour	1
	Morning stiffness more than one hour but less than six hours	2
	Stiffness all day through	3
Constipation	Present/Absent	

Table 3: Observation Of Subjective Parameter:

	Before treatment	After treatment
Sandhi Shoola (Joint Pain)	3	0
Sandhi Shotha (Swelling)	2	0
Sparshasahatva Tenderness)	2	0
Jadhyata (Morning stiffness)	2	0
Angamarda (Bodyache)	3	1
Constipation	Present	Absent

DISCUSSION:

The samprapti of Aamavata includes, Aama and vitiated Vata.

So treatment included Amapachana, Agnideepana, Vata pacifying medicines.

1. Simhnada Guggul - has Tikta Rasa, Laghu, Ruksha Guna, Ushnavirya, Katu Vipaka, Vedhnasthapana, Amapachak, Srotoshodhaka properties and helps in breaking the pathogenesis of Aamavata

2. Vatavidhwansa Rasa- it helps in relieving Joint pain, improves immunity, improves flexibility and mobility of joints.

3. Aamapachak Vati- it helps in Aama pachana

4. Rasnasaptak Kwatha- used for management of Aamavata and Vata Vyadhi [6]. It contains Rasna, Amrita, Argavadha, Devadaru, Gokshura, Eranda and Punarnava [7].

5. Avipattikara Churna [8,9,10,11]- contains Shunthi, Maricha, Pippali, Haritaki, Bibhitaki -, Amalaki, Musta , Vida lavana, Vidanga, Ela, Patra, Lavanga, Trivrut, Khanda sharkara. Majority of drugs possess katu, tikta, madhura rasa, laghu, ruksha, tikshna, snigdha guna, ushna sheeta virya, madhura and katu vipaka. khandasharkara and trivrut (nishoth) are main ingredients. Trivrita has katu, tikta rasa, laghu, tikshna, ruksha guna, ushna virya and katu vipaka. It has bhedana, rechana and shothahara properties. Lavanga by its katu, tikta rasa, tikshna guna, katu vipaka helps in vatanaulomana and shula prashamana. Khanda sharkara helps in daha and vanti shamana

6. Asthikalpa- it helps in osteoporosis, osteoarthritis, sandhishoola, balances Vata

7. Rasna is Kapha Vatashamaka, digestive, Ama pachaka, reduces inflammation, indicated in AAamavata.

8. Erandmoola balances Kapha Vata dosha, it relieves bloating, gaseous distension, it is Aamavatahara, Shothahara.

9. Shunthi- it acts as immunomodulator and anti-inflammatory [12].

10. Jatamansti improves strength and immunity, helps relief stress.

11. Shatavari is useful in treating gastritis, nourishes body tissues, relieves stress, it reduces swelling, anti inflammatory.

12. Bala balances Tridosha, increases immunity.

Erandmooladi Niruha Basti [13] contains- Madhu- 80 ml, Saindhalavana 5 gm, Tiala taila 120 ml, Kalka 40 gm, Kwath 160 ml, Gomutra 80 ml

Kalka Dravya- Shatahaba, Hapusha, Priyangu, Pippali, Madhuk, Bala, Rasanjan, Vatsaka Musta **Kwath Dravya**- Erandmool, Palash, Lagupanchmool, Rasna, Ashwagandha, Atibala, Guduchi, Punarnava, Aragwadha, Devdaru, Madanaphala.

These contents possess Ushna Veerya, Vatakaphara properties, Teekshna, Sukshma Guna which eliminate obstruction of Srotas. It is useful for treating vitiated Vata and eliminating Ama Dosha. It has Agni Deepana properties, which enhance appetite [14]. It also pacifies Kapha Dosha and reduces symptoms like Stambha and Gaurvata.

Hingutriguna Tail- it contains Hingu, Eranda Tail Saindhava and Rasona Hingu is Kapha Vataghna, digestive, analgesic, it helps decrease inflammation, it is laxative and anti-rheumatic [15], Rasona is Kapha Vataghna, gastric stimulant, oil prepared from rasona helps reduce inflammation of joints [16], Eranda Tail is SAamavatahara, Saindhava lavana helps in Deepana (Appetizer), Pachana (Digestive), regulates functioning of connective tissue and helps in ease joint movements, reduces joint inflammation, it is Tridoshagna [17]

Dashamool Tail basti is useful as anti-inflammatory. It helps pacify aggravated Vata dosha, it has Vata-Kapha-shamak properties and alleviate pain in the joints.

Balaguduchyadi Tail- It reduces inflammation, It relaxes local stiffness, reduces pain, helps in the proper gati of vata brings gatra mardavata and removes srodhorodha.

Panchatiktsa Ksheer Basti - it has five drugs- Potal, Nimba, Vasaka, Guruchi, Saptachhada. Most of drugs having tikta and

tikta kasaya rasa, ushna or sheeta virya, deepana, lekhan, rakta shodhak, tridosahara. Ksheer is Snigdha, Madhur, Vatapittaghna. Chrit is Vatapittahara and Balawardhan. Saindhav is Tikshna, Ushna, Sukshma and Vatavikarnashak, it effectively reduce intensity of Shool. It helps relieve symptoms of Aamavata.

CONCLUSION:

Aamavata affects the joints and causes pain and stiffness. It hampers quality of life of the patient. Ayurvedic treatment in this case study- *Shamanoushadhis* and *Panchakarma* therapies proved beneficial in this patient. It helped improve quality of life, reduce symptoms. Further research with larger sample size is necessary.

REFERENCES:

1. Tripathi B, editor. Madhav Nidana of Madhavkar. Reprint ed. Ch. 25, Ver. 6. Vol. 1. Varanasi: Chaukhabha Sanskrit Sanshtan; 2006. p. 572.
2. Davidson, S. (2002). Musculoskeletal disorder. In C. Haslett. Principles and Practice of Medicine (19th ed., pp.1002).
3. Boon NA, Colledge NR, Walker BR, Hunter JA. Davidson's Principles and Practice of Medicine. 20th ed. Ch. 25. Edinburgh: Churchill Livingstone-Elsevier; 2006. Musculoskeletal disorders; pp. 1101-4.
4. Chakrapani Dutta (1976) Aamavata vayadhi chikitsa Adhayaya. In B.B Acharya (Ed) Chakradutta with Bhavartha sandipini Hindi commentary (4th ed. pp.225). Choukhambha Sanskrit series office. Arnett FC, Edworthy SM, Bloch DA, McShane DJ, Fries JF, Cooper NS, Healey LA, Kaplan SR, Liang MH, Luthra HS, et al. The American Rheumatism
5. Association 1987 revised criteria for the classification of rheumatoid arthritis. Arthritis Rheum. 1988 Mar;31(3):315-24. doi: 10.1002/art.1780310302. PMID: 3358796.
6. Anonymous. Kwatha Prakarana, Rasna Saptaka Kwatha. In Ayurveda Sara Samgraha. Naini, Elhabad. Shree Baidyanath Ayurveda Bhawana Ltd. 2014. p. 815.
7. Anonymous. Kwatha Choorna, Rasnasaptaka Kwatha Churna. In The Ayurvedic Formulary of India part-II. New Delhi. Government of India, Ministry of Health & family welfare, Department of Indian Systems of Medicine and Homeopathy. 2000. p.82
8. Govind Das, Bhaishajya Ratnavali, Edition Reprint 3rd, Chaukambha Prakashan, Varanasi 2013, chapter 56 verse 25-29 Pg. no. 922. 7.
9. Pandit Hariprasad Tripathi, Vangasena Samhita, Reprint Edition 1st, Chowkambha Sanskrit Series office, Varanasi 2009, chapter 27, verse 78-83, Pg no. 362.
10. Indradeva Tripathi, Rasendra Sara sangraha, Edition 3rd, Chaukambha Orientalia, Varanasi 2003, chapter 2, verse 32-38, Pg no. 468.
11. Acharya Dundukanatha, Rasendra Chintamani, Siddhiprada Hindi translation by Prof. Siddhinandan Mishra, Reprint Edition 1st, Chowkambha Orientalia, Varanasi 2006, chapter 9, verse 34-40, Pg no. 273-274
12. Indradeva Tripathi, Rasendra Sara sangraha, Edition 3rd, Chaukambha Orientalia, Varanasi 2003, chapter 2, verse 32-38, Pg no. 468. 9. Acharya Dundukanatha, Rasendra Chintamani, Siddhiprada Hindi translation by Prof. Siddhinandan Mishra, Reprint Edition 1st, Chowkambha Orientalia, Varanasi 2006, chapter 9, verse 34-40, Pg no. 273-274.
13. Agnivesha (2007). Charaka Basti Sutra Sidhi Adhayaya In Acharaya J.T(Ed). Charaka Samhita of Agnivesha with Ayurveda Dipika Sanskrit commentary (pp.905). Chaukambha Subharti Prakashan.
14. Dr. Akshata Goni, Dr. VSKanthi. To evaluate the efficacy of Vaitharana Basti and Erandmooladi Niruha Basti in Gridhrasi.
15. Zhou Y, Xu R. Antioxidative Effect of Chinese Drugs. Hung Kuo Chung Yao Tsa Chih 1992;17:368-9,373
16. Guo P, Xu J, Xu S, Wang K. Inhibition of Hydrogen Peroxide Production in Chondrocytes Induced by Fulvic Acid by Ginger Volatile Oil. China J Chinese Materia Medica 1997;22:559-61
17. Kirtikar and Basu, Compendium of Indian Medicinal plants, 2514.