

Ayurvedic Management of Amavata- A Case Report

Case Report

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Abstract

Amavata is defined as the state in which simultaneously *Vata* and *Ama* gets aggravate and localizes in the *Trik Sandhis* and produces stiffness all over the body. *Madhava* emphasizes that it is a systemic disorder where digestive and metabolic mechanism are involved. In modern science, it is been correlated to Rheumatoid arthritis. It is the most common form of chronic inflammation potentially crippling with multisystem involvement affecting approximately 1 % of adult population. Onset is between 30 and 50 years but can occur at any age and females are more prone. In present case study, 42 years female came with the complaints of multiple joint pain especially in major joints, on and off swelling over ankle and wrist joint since a year, morning stiffness for 1 hour, loss of appetite and constipation since 6 months, able to walk with the help of walker since 1 month, difficulty in performing the daily routine activity. Assessment was done based on subjective parameters and the investigations. In the treatment intervention we advised oral medications and *Panchakarma* therapy for 21 days duration. After the treatment marked result were obtained in the symptoms and patient was able to walk without walker and can perform her routine activities. Before treatment, walking time with walker for 20 feet was 40 second which got reduced to 10 second without walker. Hence *Ayurvedic* intervention provided good results and enhanced the quality of life.

Key Words: *Amadosha*, Rheumatoid arthritis, *Sandhigraha*, *Simhanad Guggul*, *Trik Sandhi*, *Vaitaran Basti*.

Introduction

Amavata is the chronic disease which can occur to any age group of people. *Amavata* is derived from two words i.e. *Ama* and *Vata*. In *Amavata*, bio toxins (*Amadosha*) is the main causative factor which in turn occurring due to hampered digestive fire (*Agni*). *Amavata* as separate disease was explained by *Acharya Madhava* in *Rukvinishchaya* book. *Madhava* emphasizes that it is a systemic disorder where digestive and metabolic mechanism are involved. Bio toxins (*Ama*), in its abnormal form circulates throughout the body and vitiated by three of the *Doshas*, leading to considerable impairment of body movements (1). *Amavata* is defined as the state in which simultaneously *Vata* and *Ama* gets aggravate and localizes in the *Trik Sandhis* and produces stiffness all over the body. The cardinal features of *Amavata* are fatigue, heaviness in the body, fever, body ache, anorexia, excess thirst, indigestion, oedema, low back ache (2). There are 4 types of *Amavata* according to *Madhavakara* i.e. *Vataja Amavata* have severe type of pain, *Pittaja Amavata* has burning sensation, inflammation and excess thirst and in *Kaphaja Amavata*, there is heaviness and itching all over the body and there is the feeling of wet cloth is been

covered by the body (3). In severe stages of *Amavata*, pain is like scorpion sting which mainly affects legs, hands, ankles, thighs, sacrum and knee and other features including poor appetite, polyuria, vomiting, vertigo, constipation, stiffness in cardiac region, etc. In chronic condition deformity of the joints takes place. Treatment modality of *Amavata* includes fasting, dry fomentation and intake of digestive medicines, purgation and administering enema for certain duration. In modern science, it is been correlated to Rheumatoid arthritis. It is the most common form of chronic inflammation potentially crippling with multisystem involvement affecting approximately 1 % of adult population. Onset is between 30 and 50 years but can occur at any age and female are more prone than male (4). The cause is multifactorial and genetic, epigenetic and environmental factors plays a part in the pathogenesis of RA. The presenting symptoms result from inflammation of the joints, tendons and bursa. There may be slow and insidious onset which presents with malaise, fatigue, anorexia, weakness and generalized musculoskeletal pain, sometimes RA may be acute in onset with morning stiffness, polyarthritis and pitting oedema. RA can affect any of the synovial joints and involvement is usually in a symmetric distribution. Pain, swelling and stiffness are the main symptoms. Stiffness dominating in the mornings lasting more than 1 hour is characteristic feature. Routine activities are hampered. There is spindling of fingers and in chronic condition destruction of the joints and soft tissue may lead to chronic irreversible deformities like ulnar deviation, swan neck deformity, boutonniere, Z deformity, etc. While treating RA, the early recognition of inflammatory arthritis is the most important element in the effective management. Three types of medical therapies

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are used in treatment of RA i.e. NSAIDs, glucocorticoids, DMARDs. And other general measures include rest and splinting, physiotherapy, cessation of smoke, control of cardiovascular risks.

Aims and Objectives of the study is to evaluate the effectiveness of simple ayurvedic herbo- mineral formulations and *Panchakarma therapy* for the treatment of complicated metabolic and systemic disease *Amavata*.

Materials and methods

Single arm case report of 42 years female patient having signs and symptoms of *Amavata* for 5 years is discussed with detail history taking.

Written consent was taken from patient

Assessment criteria which mainly include subjective parameter and the investigations were done before and after the treatment.

Treatment was given to the patient which majorly includes the pacification method i.e. ayurvedic herbal-mineral formulations and *Panchakarma* therapy including Sand Sudation therapy, hot fomentation and *Vaitaran Basti*.

Case report

A 42 years female patient came with the complaints of multiple joint pain especially in both ankle, knee, wrist joints since 5 years, on and off swelling over ankle and wrist joint since a year, morning stiffness for 1 hour, loss of appetite and constipation since 6 months, able to walk with the help of walker since 1 month, difficulty in performing the daily routine activity.

Past medical/ surgical/ family history: Patient had no history of DM/ HTN/ Surgical history/ Family history

Menstrual and obstetric history: Regular menstrual cycle, patient was first gravida with one male child of 16 years age FTND.

Personal history-

- Diet- Vegetarian food, Spicy food
- Appetite- Irregular
- Bowel- Constipated
- Bladder- Normal
- Sleep- less
- Addictions- No any

Eight-fold examination

- Pulse- *Vata* dominant
- Urine- normal
- Motion- constipation
- Tongue- coated
- Speech-clear
- Eyes- normal
- Built- moderate built

Systemic Examination: Systemic examination and all vital signs were normal.

On examination

- Severe bony tenderness

- Bilateral pitting oedema over legs
- Restricted movements of affected joints due to pain
- Walking time with walker for 20 feet was 40 second

Investigation

- RA factor- positive
- CRP- negative
- Hb- 9.4 gm/dl
- BSL ® - 90 mg/dl
- Sr. Uric acid- 2.5 mg/dl
- Sr. calcium -8.6 mg/dl

Differential Diagnosis

Sandhigata Vata

It is degenerative joint disease mainly affecting major joints. Bony crepitus, pain and swelling is the chief complaints. Patients' gets relief after doing body massage and rest, but in case of *Amavata* no relief found after doing massage and symptoms will be aggravated.

Vatarakta

It is metabolic joint disease mainly affecting the minor joints. Pain, burning sensation, itching and discoloration over joints are the features. Patient feels better after rest. Pain is like a mice bite. Gets relief after doing bloodletting therapy, purgation and enema. But in case of *Amavata* large joints involvement is present and severe stiffness and pain like scorpion bite is present.

Diagnosis

Amavata is the diagnosis which is confirmed after assessment of Subjective parameter (Table no. 1 and 2), investigations and the etiopathogenesis (Table no. 3).

Table no. 1: Subjective Parameters helpful for assessing the severity of the disease

1	Joint pain (<i>Sandhi Shoola</i>)	
	No pain (VAS 0)	0
	Occasional bearable pain. (VAS 1-3)	1
	Moderate pain with difficulty in joint movement, appears frequently and requires some measures for pain relief. (VAS 4-6)	2
	Daily / severe pain may awake at night/ more difficulty in moving the joint. (VAS 7-10)	3
2	Affected Joints (REF-ACR 2010) (5)	
	One large joint (shoulder, elbow, hip, knee, ankle)	0
	Two to ten large joints	1
	One to three small joints	2
	Four to ten small joints	3
	>Ten joints	4
3	Joint stiffness (<i>Sandhi Graha</i>) (REF-ACR 2010) (5)	
	No stiffness or stiffness lasting for 5 min	0
	Stiffness lasting for 5 min to 2 hrs.	1
	Stiffness lasting for 2 hrs. To 8 hrs.	2
	Stiffness lasting > 8 hrs.	3
4	Joint tenderness (<i>Sparshasahatwa</i>) (REF-ACR 2010) (5)	
	No tenderness	0
	The patient says, joint is tender	1
	Winching of face on pressure	2
	Winching of face and withdrawal of affected part	3
	Resist to touch	4

Table no. 2: Score of Subjective parameter before the treatment

Sr no.	Sign and Symptom	Score before treatment
1	Joint pain (<i>Sandhi Shoola</i>)	3
2	Affected Joints (REF-ACR 2010)	1
3	Joint stiffness (<i>Sandhi Graha</i>) (REF-ACR 2010)	1
4	Joint tenderness (<i>Sparshasahatwa</i>) (REF-ACR 2010)	2

Table no. 3: Major components for the pathogenesis of Amavata

1	<i>Dosha</i>	<i>Vata Kapha</i> predominant <i>Tridosha</i>
2	<i>Dushya</i>	<i>Rasa, Rakta, Mamsa, Snayu, Asthi, Sandhi, Kandara</i>
3	<i>Srotas</i>	<i>Rasavaha</i>
4	<i>Srotodushti</i>	<i>Sanga</i>
5	<i>Adhishtana</i>	<i>All joints</i>
6	<i>Udbhavasthana</i>	<i>Amashayoktha</i>
7	<i>Rogamarga</i>	<i>Madhyam</i>
8	<i>Vyadhi Swabhav</i>	<i>Ashukari</i>
9	<i>Agni</i>	<i>Jatharagnimandya, Dhatwagnimandya</i>
10	<i>Sadhyasadyata</i>	<i>Yapya</i>

Treatment advised

After considering the etiopathogenesis (*Samprapti*) of *Amavata*, following treatment plan was advised in the form of pacification treatment, *Panchakarma* and wholesome diet. For 5 days light food was advised for increasing the digestive fire. Later on, patient was admitted in female ward for the duration of 21 days.

Table no. 4: Ayurvedic oral medication

Sr no.	Drugs	Dose	Time of administration	Medium	Duration
1	<i>Agnitundi Vati</i> 250mg	1BD	Before meal	Warm water	5 days
2	<i>Simhanad Guggul</i> 250mg	2BD	Before meal	Warm water	21 days
3	<i>Yogaraj Guggul</i> 250mg	2BD	Before meal	Warm water	21 days
4	<i>Anulomak vati</i> 250mg	3HS	Before meal	Warm water	21 days
5	<i>Rasna, Devdaru, Guduchi, Shunthi, Erandamoola</i> each 3 gm.	40 ml	Before meal	-	21 days

(BD- 2 times a day)

In *Panchakarma*, Sand sudation therapy (*Sarvanga Valuka Pottali Sweda*) in all joints followed by hot fomentation (*Sarvanga Peti Sweda*) for 21 days and *Vaitaran Basti* for 16 days.

Bloodletting therapy with leech was used in treating the swelling of the joints for 2 times with the gap of 7 days.

Contents of *Vaitaran Basti* (6):

- 1) Tamarind puree- 50 gm.
- 2) Jaggery- 100 gm
- 3) Rock salt- 10 gm.
- 4) Cows urine- 250 ml
- 5) *Bala* oil- 40 ml

Observations and results

21 days treatment had shown better results to the patient. Patient was able to perform daily activities, stiffness and pain was profoundly reduced, digestive fire got increased and constipation was relieved. Patient was able to walk without walker and cover 20 feet distance in 10 seconds. Restricted movements and bilateral pitting oedema over legs was markedly reduced.

Table no.5: Subjective parameters before and after treatment

Sr no.	Sign and Symptom	Before treatment	After treatment
1	Joint pain (<i>Sandhi Shoola</i>)	3	1
2	Affected Joints (REF-ACR 2010)	1	0
3	Joint stiffness (<i>Sandhi Graha</i>) (REF-ACR 2010)	1	0
4	Joint tenderness (<i>Sparshasahatwa</i>) (REF-ACR 2010)	2	1

Discussion

In present study, patient got relief from the pain, stiffness, constipation and able to perform the daily routine activities without the support of walker. The main mode of treatment is to relieve the bio toxins (*Ama Dosha*) which in turn relieves the stiffness and pain, digestive fire was increased and constipation was relieved. Treatment modality acts as *Vatakapha* pacifying which in turn acts as barrier in the etiopathogenesis of *Amavata*. The probable mode of action can be as follows:

Mode of action of Oral medication:

Mode of action of decoction:

The decoction of *Rasna* (*Alpinia calcerata* Roscoe), *Guduchi* (*Tinospora cordifolia* Miers), *Eranda* (*Ricinus communis* Linn.), *Devdaru* (*Cedrus deodara* Roxb.) and *Shunthi* (*Zingiber officinale* Roscoe.) each 3gm are taken and decoction is prepared. The reference of decoction was in *Vrinda Madhava* specifically indicated in case of *Amavata* (7).

- *Rasna*- It is bitter taste dominant, digestive, helpful in pacification of *Vata* and *Kapha*, relieves swelling (8).
- *Guduchi*- It is bitter and astringent in taste, digestive, relieves bio toxins (*Ama*), relieves *Tridosha*, diuretic in nature hence relieves swelling (8).
- *Eranda*- It pacifies all *Doshas*, pain, swelling, digestive in nature, relieves constipation (8).
- *Devdaru*- It is bitter, pungent and astringent in taste, relieves constipation, swelling and pain (8).
- *Shunthi*- It is pungent in taste, digestive in nature, relieves constipation and pain (8).

Mode of action of other oral medications:

- *Agnitundi Vati*- It is pungent, bitter in taste, digestive and carminative in nature hence relieves bio toxins (*Ama*) (9).
- *Simhanad Guggul*- It has properties to reduce swelling, stiffness, inflammation. It has purgative action and balances all *Doshas* (10). Compositions of the *Simhanada Guggulu* were containing enzyme activating (*Deepan*), neutralizing bio toxin (*Ama Pachan*), reducing oedema (*Shothaghna*), analgesic (*Vedanasthapaka*), energy enhancing (*Balya*) and antirheumatic (*Amavatahara*) etc. Actions which helped to enhance the digestive & metabolic capacity and to mitigate the bio toxins as well as to prevent the bio toxins formation into the body, as a result *Simhanada Guggulu* helped to reduce the clinical manifestations of *Amavata* (Rheumatoid arthritis) and also to break down the pathogenesis (*Samprapti*) of *Amavata*. (11).
- *Yogaraj guggul*- increases digestive fire, indicated in *Vata* related disorders, it has anti-inflammatory, analgesic and regenerating properties (10)
- *Anulomak Vati*- drugs are purgative in nature, relieves constipation.

Mode of action of Panchakarma:

- Sand Sudation Therapy (*Valuka Pottali Sweda*) helps to reduce swelling, pain and stiffness.
- Hot Fomentation (*Sarvanga Sweda*)- hot fomentation all over body does downward movement of *Vata*, reduces stiffness and heaviness from body.
- *Vaitaran Basti* pacifies *Vata*, pain and reduces abdominal distention.

Conclusion

Amavata is the chronic, joint inflammatory condition with multisystem involvement which requires early recognition and effective long-term treatment. Through Ayurvedic medicines the patient's quality of life can be improved with the less side effects. Present study is the case report which had shown marked results in the symptoms and patient had reduction in recurrence of symptoms. As it is a case study, the oral medications

and *Panchakarma* therapy can be tried over large population for seeing the marked results.

Conflict of interest- None

Source of funding- None declared

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