

EFFECT OF DHANYAMLA DHARA AND PATRA POTTALI SWEDA IN AMAVATA WITH SPECIAL REFERENCE TO RHEUMATOID ARTHRITIS: A CASE STUDY

Dr. Aishwarya Santosh Sagwekar^{1*}, Dr. Shankar Mane², Dr. Sheetal Mane³

¹PG Final Year Scholar Department of Panchakarma.

²Associate Professor, Department of Panchakarma.

³Assistant Professor, Department of Roga Nidana.

Hon. Shr. Annasaheb Dange Ayurved Medical College & Post Graduate Research Centre, Ashta. Tal- Walwa, District- Sangli.

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*Corresponding Author

Dr. Aishwarya Santosh
Sagwekar

PG Final Year Scholar

Department of Panchakarma,

Hon. Shr. Annasaheb Dange

Ayurved Medical College & Post

Graduate Research Centre, Ashta.

Tal- Walwa, District- Sangli.

ABSTRACT

Amavata is one of the commonest disorder caused by Agnimandya which results into Aamotpatti and Vata prakopa. The Saam Vata circulates all over the body and takes place in Kaphasthana and shows clinical features such as Sthambh, Shoth, Alasya, Dourbalya, Jwara, etc. Amavata can be correlated with Rheumatoid Arthritis (RA) due to similarities of clinical features. Rheumatoid Arthritis is an auto-immune disease causing chronic symmetrical polyarthritis with systemic involvement mainly affecting synovial joints. It is the most common problem due to change of lifestyle, food habits and lack of physical activity. The management in modern science includes NSAIDs, Glucocorticoids, long term use of steroids which leads to many side-effects. In Ayurveda Acharya Chakradatta mentioned Chikitsa Siddhant for Amavata consists Langhan, Swedan, Katu-Tikta rasa and Deepan guna dravya, Virechana, Snehan and Basti, helps in Aampachan, Vatashaman, Strotoshodhan and Balya. In Amavata Bahudoshavastha is present, which indicates need of Shodhan Karma marked improvement in signs and symptoms by using this chikitsa siddhanta. No any complications were found during the treatment.

KEYWORDS: - Amavata, Rheumatoid Arthritis, Dhanyamla Dhara, Patrapottali, Swedan, Ama, case study.

INTRODUCTION

In present era due to change of lifestyle, intake of fast food, lack of physical exercise, etc. leads to Mandagni which results in Aamotpatti and Vata prakopa. When Ama combines with prakupit Vata, gets sthanshanshray in Kaphasthana producing clinical features like Agnimandya, Jwara, Aruchi, Angamarda, Sparshasatwa, Sthambh, Twak vaivaranya, etc. leads to Amavata.^[1] Madhavkara was first acharya who described about Amavata & treatment was explained by Chakradatta & Yogratnakar. The clinical features of Amavata are very closely resembles with Rheumatoid Arthritis. Rheumatoid Arthritis is chronic progressive autoimmune disorder & characterised by bilateral symmetrical involvement of joints and some systemic clinical features mainly affecting synovial joints.^[2]

Amavata is of Madhyam Rogamarga vyadhi, hence it is said to be krichrasadhya/Yapya.^[3] Patients gets affected physically as well as mentally due to bad prognosis of disease. The prevalence rate is 0.8% of population and women are mostly affected. There are limitations in Modern medicine due to bad prognosis and side-effects of medicines. In Ayurveda it mostly cures by sampraptivighatan which includes Langhan, Swedan,

Katu-Tikta rasa & Deepan guna dravya, Virechana, Snehan and Basti.^[4] Here, a case of Amavata was treated by using shodhan chikitsa given in chikitsa sutra.

CASE REPORT

A 29yrs old female patient with K/C/O RA since 2020 visited in Panchakarma OPD of Hon. Shri. Anna Saheb Dange Ayurved Medical College Post Graduate and Research Centre, Ashta, Dist.- Sangli, Maharashtra with complaining of Sarva sandhi Shool (pain), Sarva sandhi Graha (stiffness) for 2-3 hrs especially in morning, Angamarda, Jwara, Sarva sandhi Shoth (swelling) since 4yrs. Gradually she started developing Shool (pain) & Shoth (swelling) over wrist joint, knee joint, ankle joint and restricted movement of left wrist joint, which were progressive in nature. She consulted many allopathy hospitals, taken steroid therapy but was having symptomatic relief followed by relapse after taking off steroid therapy. Pain & Swelling started worsening which hampers her daily activity & household stuffs. Started getting repeated episodes of Jwara (Fever) and Daurbalya (Generalised weakness). Patient was on steroid dependent. Patient is housewife and not able to take rest and follow Apathya Aahra-Vihar, was lean structured and having Alpa Kshudha.

On Examination

Vitals are within normal limit Temperature: Afebrile

Pulse: 78/min Respiratory rate: 22/min Bp: 120/80 mmHg Spo2: 98 % on RA.

Table no 1: examination of wrist joint.

wrist joint	Right wrist	Left wrist
Pain	+	++
Swelling	+	+
Temperature	+	+
Stiffness	+	+
Restricted movement	+	++

Table no 2: examination of knee joint.

Knee joint	Right knee	Left knee
Pain	+	+
Swelling	+	+
Temperature	+	+
Crepitation	+	+
Stiffness	+	+
Restricted movement	+	+

Table no 3: examination of Ankle joint.

Ankle joint	Right ankle	Left ankle
Pain	+	+
Swelling	+	+
Temperature	+	+

Investigation

Investigations done outside on 27/01/2020 before treatment RA Test= Positive (182.0)

S. Uric acid= 2.9

C – Reactive Protein= 35.4 Anti – CCP= >200

Investigations done outside on 09/05/2022 before treatment RA Test= 57 (Patient on Steroids)

Done on 14/11/22 @ ADAMC Lab Hb= 10.2gm%
WBC= 9400/cmm PLt= 313000/cmm ESR= 110mm

BSL= 107mg/dl Blood Urea= 23mg/dl

S. Creatinine= 0.7 mg/dl SGPT= 10.2 u/l

Urine R/M= Pus cell= 3-4, Epithelial cell= 2-3, crystal= absent.

Investigations done outside on 01/03/2023 after treatment RA Test= 75 (Patient Not on Steroids)

Hb= 8.6 gm% WBC= 9200/cmm PLT= 2,67,000/cmm
ESR= 80mm

BSL(R)= 80 mg/dl Blood Urea= 25 mg/dl

S. Creatinine= 1.0 mg/dl

Treatment Protocol**Table no 4: Abhyantar Chikitsa.**

Sr No	Medicine	Dose	Frequency	Anupana	Duration
1	Praval Pishti + Mandur Bhasma 1+ Shatavari Churna	10 gm + 5 gm + 15 gm	5 gm BD (Before Food)	Koshna Jala	25 days
2	Sanshmani Vati	250 mg	1 BD	Koshna Jala	10 days & then SOS
3	Rasna Erandadi Kwath	10 ml	TDS	Koshna Jala	25 days
4	Tab. Predmet	-	1 OD	Koshna Jala	10 days (Alternate days)
5	Erand Taila + Sunthi Churna	5 ml + 1 tsp	1 HS	Koshna Jala	19 days
6	Sutshekar Rasa	125 mg	1 BD	Koshna Jala	17 days
7	Jatamansi Phanta	1 cup	@ 7pm	Koshna Jala	15 days
8	Sinhanad Guggul	250 mg	1 BD	Koshna Jala	17 days

Bahya Chikitsa

1. Dhanyamla + Dashmool Dhara (Sarvang) for 15 days

2. Lepa with Vednashamak Churna + Rasna + Sunthi + Aadrak + Rasona over Ubhay Manibandha, Janu & Dakshin Kurpar for 25 days

3. Patra Pottali Sweda with Erand + Shigru + Nirgundi Patra + Sunthi Churna 5 gm, do Bharjan with Chinchlavan Taila & then Deep Pottali in Eranda Taila, apply it to bilateral wrist joint (Manibandh) & Ubhay Janu for 7 days
4. Aadrak Swarasa Abhyanga over Dakshin Hastanguli for 16 days

Assessment Criteria**Subjective Criteria****Table no 5: Grading of Sandhishool (Pain).**

Criteria	Grade	Before treatment	After treatment
No Pain	0		
Mild Pain	1		
Moderate Pain	2		2
Severe Pain	3	3	

Table no 6: Grading of Sandhishotha (Swelling).

Criteria	Grade	Before treatment	After treatment
No Swelling	0		
Mild Swelling	1		1
Moderate Swelling	2		
Severe Swelling	3	3	

Table no 7: Grading of Sparshashatva (Tenderness).

Criteria	Grade	Before treatment	After treatment
No	0		
Yes	1		1
Face expression on pressure	2		
Face expression & withdrawal of affected part on pressure	3	3	

Objective Criteria**Table no 8:**

Walking time	Grade	Before treatment	After treatment
15 – 20 mins	0		
21 – 30 mins	1	1	
31 – 40 mins	2		2
>40 mins	3		

Table no 9:

Grip Strength	Before treatment	After treatment
Yes		+
No	++	

DISCUSSION

- Aamvata is a chronic inflammatory, Auto-immune disorder having symptoms like Jwara, Agnimandya, Shoola, Shoth, Aruchi, Alasya, etc. mentioned in Madhav Nidan.
- It can be treated by chikitsa Siddhant which includes Langhan, Swedan, Virechana, Snehapan, Katu-Tikta rasa and Deepan guna dravya.
- For Abhyantar Chikitsa:
- As Mandagni is the main hetu for Jwara due to which Dourbalya is also seen, so to mitigate Jwara Sanshamani Vati 250mg 1 BD with Koshna jala for 10 days. The main content of Sanshamani Vati is Guduchi, having Katu, Tikta, Kashaya rasa, Ushna veerya and acts as Deepan and Amapachan. It has anti-inflammatory action. Due to its Rasayan property it acts on micro-cellular level which is one of the reasons of immunomodulator.^[5]
- Sutshekar rasa 125mg BD with Koshna jala for 17 days is given for Pachan along with Ura Daha as it has Vatapittashamak properties.^[6]
- As Vata dosha gets aggravated, patient started complaining of Shool and Shoth to eliminate vitiated Vata and to reduces Shool and Shoth, Rasna Erandadi Kashaya 10ml TDS given for 25 days, which has Vatahara, Shothahara, Deepan, Pachan and Anulomak properties. It is mainly indicated in Sandhishool and Sandhishotha.^[7]
- To increase the Bala & Dhatu Agni, though due to Rasakshaya Twak vaivarnya lakshan is seen Praval pishti 10gm + Mandur Bhasma 5gm + Shatavari churn 15gm is given in combination 5gm BD with

Koshna jala for 25 days. Praval pishti is more effective and has properties like Madhur amla rasa, alleviates disease caused by kapha, pitta doshas; provide strength and complexion.^[8] Mandur Bhasma has properties of Loha (iron) which helps the patient haemodynamically stable by increasing haemoglobin level.^[9] Shatavari churn is Balya and Rasayan, has properties like Madhur rasa, sheet veerya, Tridoshahara.^[10]

- Sinhanad Guggul 250mg BD with Koshna jala for 17 days. In Bhaisajya ratnavali, Sinhanad Guggul is specially indicated in Amavata.^[11] It has Deepan, Amapachak, Shothaghna, Shoolaghna, Balya & Amavatahar properties, it also acts as Rasayan.^[12] Guggul is Shothahara and vednasthapak and also helps to heal deranged connective tissue.^[13]
- Has patient gets mentally disturbed due to which they suffer from Insomnia so Jatamansi phanta 1 cup at 7pm for 15 days is given. Jatamansi has Madhur, Tikta, Kashay rasa Madhur vipaka sheet virya Laghu, Snigdha guna & manas doshahara. It acts has Hrudya, vataprashman, Vednshamak & Nidrajanan.^[14]
- Eranda taila 5ml + Sunthi churn 5gm HS for 19 days is given. Eranda plays an important role in Amavata, it has properties like Madhur, Kashay rasa, Sheet veerya, Madhur vipaka; Snigdha, Sukshma, Tikshna guna, Vatakaphanashak. Sunthi has properties like Katu rasa, Ushna veerya, Madhur vipaka; Laghu, Snigda guna. Eranda and Sunthi both are Kaphavatashamak, Shoolprashman, shothprashman, Hrudya which prevents from updrav like Hrudayroga. Intake of Eranda taila and Sunthi churn is useful in curing Shool of Kukshi (pelvic region), Basti (region of urinary bladder) and Kati (lumbar region).^[15] Amavata disorder is like an elephant which causes damage to our forest-like body. Only a lion can check this menace. We can find character of lion in Eranda taila. To be precise, Eranda taila eradicates Amavata very effectively.^[16]
- Tab Predmet is steroid medicine. Patient was on steroid dependent before treatment, so we started tapering the dose of steroid gradually and take it off. Patient was getting relief without steroid therapy; has earlier she been not supposed to bare symptoms without steroid therapy.
- For Panchakarma/Bahya chikitsa:
- Dhanyamla + Dashmool Kwath Dhara for 12 days Dhara is poured all over body. Dhanyamla having Amla rasa, Ushna veerya, Laghu, Tikshna and Vyavayi guna & consist of Deepan, Preenan, Rechana properties; has Vata anulomana, Shoolaprashmana, Vedanasthapan, Shothagna, Shramaklamhara and Sheetaprashmana action and as Jwara is the main causative factor, Dhanyamla also has Jwaraghna and Pachana properties.^[17] Hence, Dhanyamladhara is effective in Amavata. Dashmool Kwath is Amapachak and Tridoshahara, relieves Gauravta and Sthambh, it consists of Dravya which is Vatahara, Shoolaprashmana, Shothagna.^[18] Dhara

is a type of Drava Sweda, plays an important role in Swedan karma due to its Vatashaman and Amadoshahara action.

- Lepa with Vednashamak churn + Rasna + Sunthi + Adrak + Rasona over ubhay manibandha, Janu & Dakshin Kurpar for 25 days has they act as Swedan karma & has Vatakaphahara, Shothaghna, Vednasthapan properties, helps to reduce local pain, swelling, stiffness of joints. When Lepa is applied to affected joints, the active ingredients of lepa enter the skin through Romkupa and gets absorbed by swedvahi strotas and siramukha, cutaneous biotransformation pacifies doshas and helps in sampraptivighatana.
- Patra – Pottali Sweda with Erand + Shigru + Nirgundi Patra + Sunthi churn 5gm, Bharjan with Chinchlavan taila and then Deep pottali in Eranda taila and applied it to bilateral manibandh (wrist) and ubhay Janu for 7 days. Patra (Medicinal leaves) used here has ushna virya; Laghu, Ruksha, Tikshna guna which helps to pacify vitiated Vata and Kapha doshas also has analgesic and anti-inflammatory action. Patra – Pottali Sweda acts as Sthambaghna, Gauravghna, Kaphahara, as it has Snigdha properties of Sweda, it is mainly effective in alleviation of Vata dosha. It is highly effective in pain related to arthritis, helps in increasing blood circulation to affected joints, gets rid of dosha imbalance, strengthens muscle, release toxins and reduces inflammation and also helps to tone muscles.^[19]
- Aadrak Swaras Abhyanga over Dakshin Hastanguli for 16 days is given as it has Ushna Tikshna guna, Vedanashamka and Shothprashman properties.
- Swedan is the main line of treatment for Vatakaphaja vyadhi. It relieves Gauravta, Sthambh, Sheetat. In Swedan karma, due to ushna guna, there is stimulation of nervous system which leads to vasodilation (srotovispharana). The vitiated dosha liquifies in body and excreat through sweat gland. Vasodilation helps to increase Rasa and Rakta which leads to revascularization.

CONCLUSION

Rheumatoid Arthritis requires long term medication, as it is in auto-immune condition. From this case study, it concludes Amavata can be effectively & safely treated by using Yogratnakar Chikitsa Siddhanth. Panchakarma helps for autoimmune mobility and elimination of Bahudoshavastha. This study shows that Swedan karma is an important and effective karma in Amavata for relieving symptoms. Hence, to prove its efficacy there is need to conduct a study on large number of patients. Patient who are steroid dependent can also be treated easily by tapering the dose of steroid followed by taking off the steroid therapy.

DIAGNOSIS

Aamvata (RA) was diagnosed on basis of symptoms described in Samhita & Rheumatoid Arthritis factor.

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