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A CASE STUDY ON *AMAVATA* W.S.R. TO RHEUMATOID ARTHRITIS

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ABSTRACT
Amavata is a mixture of two words, ama and vata. The aliment is often due to derangement of agni, like Jataragni, Dhatvagni and Bhutagni etc, ensuring the production of ama and this ama circulate in the complete body by means of the vitiated vata and receives positioned in the shleshmastana inflicting pain, stiffness and swelling over the small and big joints making a person lame.The scientific presentation of amvata closely mimics wiyh the unique range of Rheumatological issues referred to as rheumatoid arthritis in accordance with their similarities on medical features Rheumatoid arthritis is a continual inflammatory, unfavorable and deforming symmetrical polyarthritis related with systemic involvement. The prevalence of rheumatoid arthritis in India in person has been mentioned to differ from 0.5 to 3.8% in women and 0.15 to 1.35% in men.Allopathic treatment provides systematic relief but the underlined pathology remains untreated due to absence of effective therapy and also giving rise to many side effect, toxic symptoms and adverse reactions.The Ayurvedic treatment not only devoid such type of sick effect, but also presents a higher way by using treating agni and ama and its by using treating agni and ama and its roots.The concept of administration of amavata are langhana, swedana, dravyas having tikta, katu rasa, depan pachanaand shamana chikista. The first specified description of amavata as a sickness is observed in Madhava nidan, so the existing study offers with systemic assessment of Amavata w.r.t Rheumatoid arthritis from all the classics of Ayurveda and its management.
KEYWORDS: *Amavata, Ama, Langhan, Swedan, Shamana Chikista , Virechan, Rheumatoid Arthritis.*

INTRODUCTION

Amavata is a disease in which Ama with vitiated *vata dosha*, accumulates *sleshma stana* ,which stimulates Rheumatoid Arthritis in modern parlance.In present era changing of life style ,intake of unwholesome and fast food, lack of exercise etc will leads to *mandagni* ,which results in production of *ama.When ama* combines with vitiated *vatadosha* in *Sleshmastana* leeds to *amavata* with the symptoms *Sandhi Shotha*, *Shoola*, *Sparshaasahatwa* and *Gatrastabdhata*. Clinical feature of Amavata resembles with Rheumatoid arthritis. A chronic inflammatory disorder affecting ,many joints including those in hands and feet minor and major joints .The prevalence of rheumatoid arthritis in India in person has been mentioned to differ from 0.5 to 3.8% in women and from 0.15 to 1.35% in men. Whenever that ama gets localised in the body tissue or joints,it can lead to production of pain, stiffness, swelling, tenderness, etc in the related joints. The features of amavata are much identical to RA, an autoimmune disorder which causes chronic inflammatory and symmetrical polyarthritis.In Ayurveda ,Nidana parivarjana is considered as the first and foremost line of management for any disease. Virechanakarma is a Shodhana process to balance the vitiated dosha in general and pitta dosha in particular. Hence, this study included both the treatment modalities, that is nidan parivarjana and virechana karma to manage Amavata effectively.

METHODOLOGY

A male patient diagnosed with amavata has been taken for the study and and administered with Shamana chikista and classical Virechana Karma.

CASE REPORT

A 70-year-old male patient came to us with chief complaint of

S.I.NO	CHIEF COMPLIANT	DURATION
1.	Multiple joint pain radiating from lower back to lower limb	Since 2 years. Aggrivated in the past 4 months
2.	Bilateral knee joint pain	
3.	Right elbow swelling	
4.	Difficulty in walking	
5.	Weekness	

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History of Personal Illness

The patient was normal 4 months back.Since the patient have been suffering from multiple joint pain radiating from lower back to lower limb ,bilateral knee joint pain, right elbow swelling, difficulty in walking ,weakness. For this patient took allopathy treatment but got temporary relief, then he decided to Ayurvedic treatment .So for further treatment patient approached to Shri Dharmastala Manjunateshwara Ayurveda of Hospital Hassan.

Examination

Personal history
Occupation: Plumber
Diet: Vegetarian
Appetite: Irregular
Allergy: No history of any drug or food allergy.

Ashtavidh-Parikshana

1.Nadi:80/min
2.Mala:Irregular
3.Mutra: 5 to 6 times in day,3 to 4 times in night
4.Jihva: Sama
5.Shabda: Prakrut
6.Sparsha: Anushna
7.Drik: Prakrut
8.Akriti: Leena
Dashavidha –Pariksha
a. Prakruti
b. Vikruti
Dosha-Vatapradhana tridhosha
Dooshya-Rasa,Meda,Ashti
c. Satwa: Madyama
d. Sara:
e. Samhanana: Madyama
f. Pramana: Madyama
g. Satmya: Sarva rasa
h. Aharasakti: Madyama
i. Vyayamashakti: Avara
j. Vaya:70 years

MATERIALS AND METHODS

Material
Management of Amavata{Table 1 &2 }

Table 1: Showing material for management of amavata as

SI.NO	DRAVYA	DOSE	DURATION	ANUPANA
1.	Ambrutottara kashaya+ Rasnadi kashaya	15ml kashaya+45ml of water		Lukewarm water
2.	Tab.Sandhiabhaya	1 tab	BD after food	Lukewarm water
3.	Tab.Shallaki		BD after food	Lukewarm water
4.	Avipattikara churna	5gm	After food at night	Lukewarm water
5.	Syp.Renalka		BD after food	Lukewarm water
6.	Tab.Neuron		BD after food	Lukewarm water
7.	Sandhilin liament		At night	lukewarm water
8.	Syp.Manoll		Night once	lukewarm water
9.	Gokshuradi guggulu		Night	lukewarm water
10.	Chyavanprasha		Night	milk

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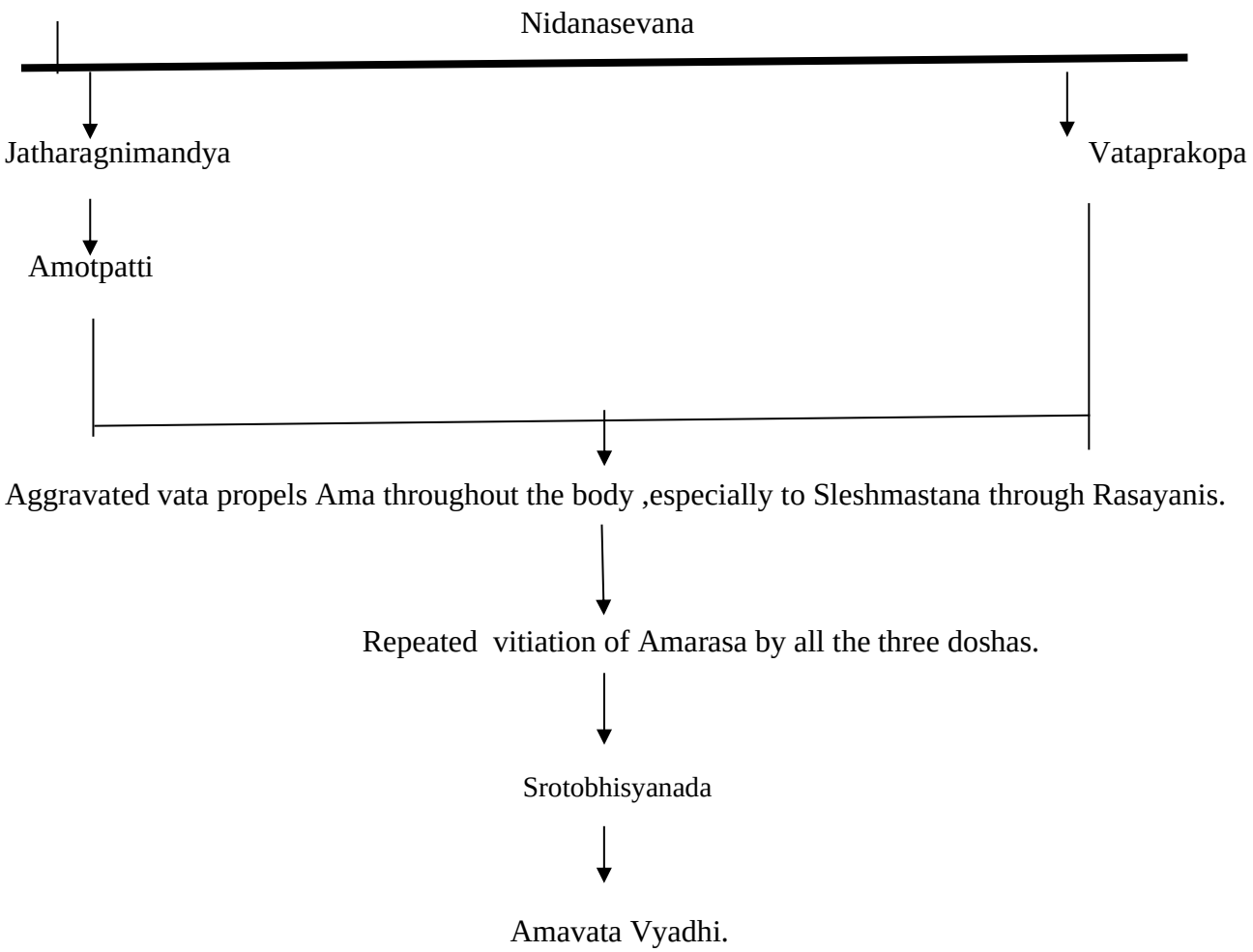
Table 2: Showing Panchkarma Management of Amavata.

Panchkarma	
Dhara	Dhanyamla dhara
Swedana	Churna pinda swead with kolakulattadi churna,rasna and bala churna.
Lepa	Jadamayadi churna mixed with dhanyamla.

DISCUSSION OF AMAVATA

1. Virudda Ahara(Incompatible food) -Virudda ahara plays an important role in causing Ama.
2. Virudda Chesta (Improper physical activity) – Amavata is produced due to Mandagni.
3. Nischalata (lack of physical activity) – Lack of physical activity or sedentary life style is the main cause of accumulation of Ama in the body.
4. Snigndham bhuktavato Annam vyayaamam- Performing physical exercise soon after intake of heavy food causes Ama in the body.

Samprapti of Amavata (Schematic representation)



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DISCUSSION ON MEDICINE

1. Langhana: First line of treatment in Amavata is langhana which helps in digestion of Ama.Here Langhana means not complete fasting out, intake of light food. The duration of Langhana varies from person to person depending upon individual capacity.
2. Swedana: That which induces sweating and relieves Stambana, Gurutwa and Sheeta. Amavata is a Vata Kapha Pradhan Vyadhi having Stambha, Gurutva and Sheeta as Pradhan Lakshanas. Swedana indicated here is Churna pinda swedana.
3. Aushadhi chikista : Katu,Tikta & Pachak Aahar & Aushadhi- The drug which possess Katu (pungent),Tikta(bitter) and which act as Deepana,pachana are recommended in Amavata.These drugs, by virtue of their qualities does Amapachana , hence may help in relieving shota & shoola.
    A. Simhanada guggulu - is the drug of choice in Amavata (RA) due to its capacity to improve digestive fire (Agni), pacify vitiated vata and kapha especially in joints and improve strength of joints.
    B. Ambrutottara kashaya – it helps in improve the digestion strength and appetite.
    C. Rasnadi kashaya –its an Ayurvedic formulation with therapeutic properties which helps in reliving pain associated with muscles and joint pain of the neck, shoulder, legs and back.
    D. Sandhiabhaya tablet – it is used to treat a variety of joint conditions, including osteoarthritis ,rheumatoid arthritis, gout and shoulder pain.
    E. Shallaki tablet – it is an herbal supplement used to manage osteoarthritis, myositis, fibrositis.
    F. Gokshuradi guggulu – it is made from a combination of herbs with diuretic and antibacterial properties.These properties helps to treat kidney and urinary tract infection(UTI) and other urinary problems like reduced urine formation or burning sensation or discomfort while urinating.

4. Virechana- Gandharvahastadi Taila- it promotes natural toxin removal by helping the body to naturally eliminate toxins.It promotes digestive health by supporting regular bowel movement.

OBSERVATION AND RESULT

Patient got relief in swelling and tenderness with in 3 days . Rest improvement in all symptoms found with in 7 days. After 28th days followup there is nearly nil of all symptoms (except occasionally little pain in knee joint , we can consider its normal ,as per age of patient and chronic disease).

CONCLUSION

Amavata is one among the most prevalent disease in the present era, and it is challenging issue for medical science. Ama and Vata have the properties on opposite pole of each other and involvement of uthanadhatu (RASA) and gambheradhatu (ASTHI) makes the treatment more complicated so there is necessity of a systemic treatment protocol purely based on the principles of Ayurveda, because any measure adopted will principally oppose one another so very careful approach can only benefit the patient.Early diagnosis is key to prevent deformities with appropriate management. Panchkarma procedure will help in checking autoimmune mobility and elimination of Bahudoshavastha. This case study showing that Virechana karma is a better modality of treatment for treating Amavata for relieving symptoms and as well as correction in biochemical parameters.

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