

## Ayurvedic Management of Osteoarthritis (Janu Sandhigata Vata): A Case Report

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**ABSTRACT:**A 53year old female patient of Janu Sandhigata Vata came to hospital with complaints of bilateral knee joint pain, difficulty in walking with swelling, crackle sounds of the joints and restricted movement since 2 years. Patient was treated as indoor patient for 16 days with internal medicine including LakshaGugguluand Matra Vasti of Panchtikta Guggulu Ghrita along with Snehana and Swedana. Patient responded to Ayurvedic treatment. After the treatment patient felt improvement.

**Keywords**: Sandhigata Vata, osteoarthritis, MatraVasti, Snehana, Swedana.

## I. INTRODUCTION:

Clinically the description of SandhigataVata explained in the classical texts is similar to the condition Osteoarthritis in modern science. In old age, all Dhatus undergo Kshaya(degeneration), Thus leading to Vataprakopa and making individual prone to many diseases. Among them SandhigataVatastands top in the list. SandhigataVatais one of such disease, which needs a specific target of therapeutic intervention to check or slow down the process of "DhatuKshaya" and to pacify Vata. It limits everyday activities such as walking, dressing, bathing etc., thus making individual handicapped.

Dosh DushyaSammurchhanatakes place which leads to destructive changes in Asthi and diminish of ShleshakaKapha, further leading to appearance of symptoms of Sandhigatavata like on palpation revealed as air filled bag (Vatapurna dritisparsha) and pain during flexion and extension (Akunchana Prasarana Pravriti Savedana).

We can correlate SandhigataVata with osteoarthritis (OA) on the basis of clinical features. OA is defined as a chronic joint disorder with progressive softening and disintegration of articular cartilage and bone at joint margin called osteophytes and capsular fibrosis. Osteoarthritis (OA) is a degenerative non-inflammatory joint disease that results in pain and restricted movement of affected joints. It is a condition involving the breakdown of the protective cushion of the cartilage covering the ends of the bones where two bones meet to form a joint. OA is accompanied by increasing thickness and sclerosis of the subchondral bony plate, by outgrowth of osteophytes at the joint margin, by stretching of the articular capsule, by mild synovitis in many affected joint and by weakness of muscles bridging the joint.

Community survey data in rural and urban areas of India show the prevalence of OA to be in the range of 17%- 60.6%.Osteoarthritis is the single most common cause of disability in older adult. The Global Burden of Disease Study reports that the burden of musculoskeletal disorders is much larger than estimated in previous assessments and accounts for 6.8% of DALYs worldwide.

In present clinical trial we used MatraVastiof PanchtiktaGugguluGhrita with Snehana and Swedana for 16 days in a Group. In another Group we use LakshaGuggulu. Acharya Vagbhatta mentioned PanchtiktaGugguluGhrita in Vatavyadhichikitsaprakarana which is effective in Sandhi, Asthi, andMajjagataVata. In BhaishajyaRatnavali, LakshaGuggulumentioned in BhagnaRogadhikara.

## II. CASE REPORT

A 53 year old female patient OPD No.113585, IPD No. 23145 and Bed no. 131 presenting with following complaints was admitted in our hospital on  $2^{nd}$  September 2019 for 16 days and discharged on  $18^{th}$  September 2019.

Patient was suffering with bilateral knee joint pain along with swelling since 2 years. She is a housewife and has the history of long standing



also patient is overweight too. Initially she felt mild pain, which later increased when she was use the stairs, her pain increased and noticed swelling around the joints.

She found mild crepitus while walking for long. Her daily activities like long standing, cleaning, washing clothes etc. made to increase the symptoms.

She consulted a doctor in army hospital and started taking some pain killers as per doctor's advice. This gave her only temporary relief. She also advised to take an X-ray of both knee joint in standing view by her doctor, which showed osteoarthritis of both knees.

**STUDY CENTRE**: Chaudhary Brahm Prakash AyurvedCharakSansthan, KheraDabar, New Delhi.

#### ASHTA STHANA PAREEKSHA:

- 1. NADI:VataKapha, Pulse:- 76/minutes
- 2. MOOTRAM: 5-6 times / day
- 3. MALAM:1 time
- 4. SPARSHA:normal
- 5. **DRIK:**normal
- 6. **JIHVA:**uncoated
- 7. SABDA:normal
- 8. AKRITI:normal

#### 1. Pain in knee joints:-

## **III. CLINICAL FINDINGS:**

## Subjective Finding:

Patient was having severe pain , restricted movement and swelling in both knee joint with swelling .

### **Objective Finding:**

X-ray of both knee joints in standing view AP and Lateral view. Blood report:

Hb%:- 13.2gm/dl RBS:- 5.78million/mm RA factor:- Nagetive Platelet Count:- 1.83lakh/mm<sup>3</sup> ESR:- 100 mm/1<sup>st</sup> hour S. uric acid:- 5.8mg/dl **Urine Routine:**Normal

## IV. METERIALS AND METHODS

Patient was admitted in IPD where she was treated with oral medication and internal treatment for 16 days.

#### Assessment criteria:-

Scoring pattern was adopted to assess the relief in each symptom as follows-

Severity of	<b>Before Treatment</b>	;	After Treatment		
Pain	Rt. knee joint	Lt.knee joint	Rt. knee joint	Lt. knee Joint	
Absent	0	0	0	0	
Mild	1	1	1	1	
Moderate	2	2	2	2	
Severe	3	3	3	3	

#### 2. Movement of knee joints:-

Table no.2:- Assessment criteria for movement of knee joints-

Severity of	<b>Before Treatment</b>	ţ	After Treatment		
symptoms	Rt. knee joint	Lt. knee joint	Rt.knee joint	Lt.knee joint	
Free	0	0	0	0	
Mildly restricted	1	1	1	1	
Moderately restricted	2	2	2	2	
Severely restricted	3	3	3	3	



## 3. Swelling of the joint:-

Table no.3:- Assessment criteria for Swelling of the joint-

Severity of	<b>Before Treatment</b>		After Treatment	
Swelling	Rt. kneejoint	Lt. knee joint	Rt.knee joint	Lt.knee joint
No swelling	0	0	0	0
Slight swelling	1	1	1	1
Moderate swelling	2	2	2	2
Severe swelling	3	3	3	3

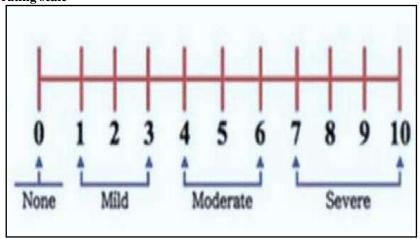
## 4. 90 feet distance walked by patient with time duration(sec.):-

Table no. 4:- Assessment criteria for90 feet distance walked by patient with time duration-

90 feet distance walked by patients	ed Time			
by patients	Before Treatment	After Treatment		
90 Feet				

### \* Pain scoring:-

Pain scoring was done on the basis of numerical pain score. Numerical pain rating scale –



## ✤ Swelling scoring criteria :-

Table no. 5:- Showing parameters for swelling scoring

Grade	Description	Score
0	No edema	0
1	2mm or less: slight pitting, no visible distortion, disappears reapidly	1
2	2-4 mm indent: somewhat deeper pit, no disappears in 10-25 sec.	2
3	4-6mm: pit is noticeably deep. May last more than a minute. Dependent extremity looks swollen and fuller	3
4	6-8mm: pit is very deep. Lasts for 2-5 min. Dependent extremity is grossly distorted	4



### **\*** Movement of knee joint :-

Normal range of movement (ROM) at the knee is considered to be 0 degree to extension (completely straight knee joint) to 135 degree of flexion (fully bent knee joint).

	Table no.6:- Showing grading of movement of knee joint.			
Grade	Knee flexion by goniometer			
0	Up to 130 flexion and above(normal)			
1	Up to 120 flexion (mild)			
2	Up to 100 flexion (moderate)			
3	No improvement in knee flexion and above			

#### Drug and dosage:

Table no. 7. Showing drug and dosage given to patient.

S.N	Drugs	Dose	Route	Time	Anupana
1.	LakshaGuggulu	2tab TDS	Oral	Thrice a day	Luke warm
2.	PanchtiktaGuggul uGhrita	(250mg/tab) 50ml MatraVasti	Anal	Once a day	water

#### • Duration: 16 days

#### 1. Panchtikta Guggulu Ghrita:-

#### Table no.8. Showing all ingredients with ratio used in formation of PanchtiktaGugguluGhrita.

S.	Ingredients	Ratio used in drug		
1	Nimba	1 Part		
2	Guduchi	1 Part		
3	Vasa	1 Part		
4	Patola	1 Part		
5	Nidigdhika	1 Part		
6	Guggulu	1/2 Part		
7	Vidanga	1/40 part		
8	Haridra	1/40 part		
9	Pippali	1/40 part		
10	Rasna	1/40 part		
11	Vacha	1/40 part		
12	Maricha	1/40 part		
13	Arushkara	1/40 part		
14	Ativisha	1/40 part		
15	Manjishtha	1/40 part		
16	Patha	1/40 part		
17	Rohini	1/40 part		
18	Yavani	1/40 part		
19	Gajpippali	1/40 part		
20	Kushtha	1/40 part		
21	Chavya	1/40 part		
22	Tejovati	1/40 part		
23	Kutaja	1/40 part		
24	Surdaru	1/40 part		



## 2. LAKSHA GUGGULU:-

Table no. 9. Showing all ingredients with ratio used in formation of LakshaGuggulu.

<b>S.</b>	Ingredients	Ratio used in drug	
1.	Laksha	1 Part	
2.	Asthisumhrta	1 Part	
3.	Arjuna	1 Part	
4.	Ashwagandha	1 Part	
5.	Nagbala	1 Part	
6.	Guggulu	5 Part	



In Vastiwe are saying patient to lie in the

left lateral position. We give Snehana and Swedana

on back region with fingers. Then we slowly enter

the Vasti Netra to anal region and press the

medicine in the Vasti Netra. We take blood

DIET: Patient was advised to take light diet before

MatraVasti. Special diet is not mentioned for

pressure before and after Vasti.

Figure no. 1:- Picture of medicines used in this case study.

Sandhigatavata. But as being a VataVyadhi we can adopt the same diet of the general VataVyadhi. Foods are recommended Vegetarian diet with less spicy and oily foods.

#### **OBSERVATIONS:**

Patient was treated with above treatment from 3<sup>rd</sup> September to 18<sup>th</sup>September.

Knee examination	Before treatment		After treatment		
	Rt. knee joint	Lt. knee joint	Rt. knee joint	Lt. knee joint	
Pain	3	2	1	0	
Movement	2	1	1	0	
Swelling	1	0	0	0	
90 feet distance walked by patient with time duration (sec.)	52 Sec.		45 sec.		

Table no. 10:- Showing results before and after treatment.



## V. DISCUSSION:

In this study the scoring of assessment symptoms was noticeable in comparison of before and after treatment. There was improvement in symptoms and general condition of patient. According to severity Rt. Knee joint showed more severe symptoms as compare to Lt. Knee joint.

**In Right side-** it was observed that before treatment pain was scored 3 which improves and convert in1 after treatment. In movement, grade 2 converts in grade 1 after treatment and swelling also improves from grade 1 to 0.

In Left side-it was observed that before treatment pain was scored 2which improves and convert in0 after treatment. In movement, grade 1 converts in grade 0 after treatment.

Before treatment patient was able to cover 90 feet distance without any difficulty in 52 sec. but after treatment patient covered this distance in 45sec.

Vata vitiates due to Avaranaand VataVardhakaAhara, Vihara leads to the aggravation of disease. In modern texts, it can be correlate to osteoarthritis. Vyana Vayu circulates in the body and controls motor function like flexion, and extension of musculoskeletal system. It prevails on Sandhis for its purpose. So Sandhi may be considered as the site of VyanaVaya. Thus the Vyana Vavu has close relationship to ShleshakaKapha because of its site in bones and Sandhis. ShleshakaKapha is situated in Sandhi and its function is lubrication of Sandhi for smooth movement. It keeps the bones firmly united, protect their articulation, and oppose their separation as well as dislocation. So ShleshakaKapha can be correlate with synovial fluid in modern concept because physical quality and function of ShleshakaKapha is closely resembled to synovial fluid. Being present in Asthi-Sandhi, it nourishes, lubricates and protects them. ShleshakaKapha have Snigdha, Guru, Pichchila, which are opposite to VataVardhakaAhara, Vihara like Ruksha&LaghuAahara etc. Ultimately qualitative and quantitative property of ShleshakaKapha diminished and developing symptoms like crepitation in joint.

# Probable mode of action of MatraVasti of PanchtiktaGugguluGhrita:-

As MatraVasti is the form of SnehaVasti, it simultaneously helps in pacification of VataDosha and nourishment of SleshakaKaphaat the level of joint. As rectum has a rich blood and lymph supply so, the Veerya of VastiDravya first absorbs through intestinal mucosa and corrects the vitiation of Apana Vayu, Samana Vayu and then Vyana Vayu, then enters in general circulation and reaches at the site of pathology (corrects AsthimajjavahaSrotodusti) and gradually it helps in breaking the Samprapti.

Sandhigatavata is MadhyamaRogaMargag ataVatika disorders in which vitiated Vata gets lodged in Sandhi. Hence to treat Sandhigata Vata drugs acting on both Vata and Asthi should be selected. According to Charaka, in Asthi Dhatu Dushti the treatment should be given TiktaDravyaGhrita and Kshir. Panchatikta Guggulu Grita fulfills all the criteria as mentioned by Acharya Charaka except that milk is not used in preparing this medicine. But on the other hand it contains Guggulu (Commiphoramukul) which enhance the efficacy of this medicine by its antiinflammatory and Srotoshodhaka property.

PanchatiktaGugguluGhrita have Tikta Rasa. UshnaVirya, Madhura – KatuVipaka and SnigdhaGuna. Due to Tikta Rasa it will remove obstruction in flow of nutrients in the body channels due predominance to of AkashaMahabhuta. KatuVipakaandUshnaVirya of ingredients will promote the Dhatvagni (Metabolic functions). MadhuraVipaka and SnigdhaGuna of the medicine will provide nutrition of all the Dhatus including Asthi and MajjaDhatu which AsthiDhatu. MaijaDhatu will stabilize and ultimately compensate the AsthiDhatu and MajjaDhatuKshaya.

Tikta Rasa has got Deepana, Pachana and Rochana properties. So it helps in the improvement of the general condition of health and thus strengthens the whole body as well as joints. Tikta Rasa possess Lekhana property also, therefore it helps in the weight reduction of the patients and reducing physical stress on weight bearing joints.

Ghritais Vata-pittashamaka, Balya, Agnivardhaka, Snigdha, Madhura, Saumya, SheetaVirya, Shulahara, Jwarahara, Vrishya and Vayahsthapaka . Thus, it pacifies Vata, improves the general condition of the body and acts as a rejuvenator of the body. Thus, helps in the SampraptiVighatana of

the SandhigataVata. Ghrita also contains vitamin D and facilitate the absorption of fat soluble vitamins including vitamin D which plays an important role to utilize calcium and phosphorous in blood and bone building



Ghee is rich in Antioxidants including Vitamin A, Vitamin E and carotenoids which may be helpful in preventing lipid peroxidation.

#### Probable mode of action of Laksha Guggulu:-

The content of LakshaGuggulu include purified Guggulu, Laksha, Asthisanharaka, Arjun, Ashwagandha and Nagbala, most of these drugs have properties like - Vatakaphanashaka, Deepana, Balya, Rasayan, Tridoshanashaka, Pachana, Shothaghna, Vednashamaka and Shoolaprashamaka. A compound preparation having these properties is likely to check the etiopathogenesis of the disease Sandhigatavata and arrest its progress.

Guggulu:-Guggulupresents in both drugs which were used in treatment. It is well known for it's Vata pacifying, anti-inflammatory and Lekhanaeffect.Duetoits Ruksha,Tikshanaand Visha da Guna it acts as a Medohara. According to Sushruta, Purana Guggulu has got Apakarshan property, which helps in removing the obstruction in flow of Rasa and RaktaDhatu by cleaning the body channels thus facilitate proper supply of oxygen and nutrition to the affected joint and removal of endogenous waste products from the joint area. It also reduces the body weight resulting in reduction in physical stress on weight bearing joints. Due to its Katu Rasa and UshnaVirvait acts as a Deepana, therefore improves the metabolic functions thus helps in the improvement of general condition of the patient. Guggulu also acts as a Rasayana thus promotes regeneration of damaged tissue and prevents further degeneration. Pharmacologically Guggulu has got the properties of anti-inflammatory, immunomodulatory and antilipidaemic action.

## **VI. CONCLUSION:**

In this study, we can conclude that the use of MatraVasti of PanchtiktaGugguluGhrita along with LakshaGuggulu is very effective in SandhigataVata. This treatment reduces the pain, swelling in knee joint and helps in free movement of knee joint. Patient also able to walk for long distance without pain after treatment.

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