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Single Arm Study of Efficacy of Rasona Taila Matrabasti in Asthikshay

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ABSTRACT:
Osteoporosis, or Asthikshaya, is a condition that affects a lot of people. Due to an increase in Ruksha and SheetaGuna, it typically affects the elderly. Asthidhatu (osteoporosis) has somewhat decreased as a result. It manifests as stiffness, joint discomfort, etc. The CharakSamhita mentions Rasonataila as a treatment for Vatavyadhi. Matrabasti is used to treat osteoporosis patients and is evaluated using criteria such as stiffness, low back pain, and the straight leg raise test. It had a significant impact on this patient. It is also known as Vatari because it lowers the sheeta and rukshaguna of the Vatadosha. In addition to being cost-effective, this study can be conducted with a large sample size.

Keywords: Asthikshaya, Vatavyadhi, Rasona, Taila

I. INTRODUCTION:

Ayurveda is among the oldest systems of medicine, health, and life. Over the course of more than 5000 years, this body of knowledge grew and maintained an uninterrupted legacy of practice. An increasing global public health concern is osteoporosis. In their remaining years, a significant percentage of people starting in middle age are susceptible to fractures. Globally, osteoporosis affects about 200 million individuals. There are about 50 million people with osteoporosis or poor bone mass in India.[1]

In India, osteoporosis causes more than 250000 hip fractures annually and more than 4.5 million spine fractures in women over 60.[2] Bone mass and mineral density in later life are mostly determined by two factors: (1) the amount of peak bone mass in early adulthood, and (2) the pace of subsequent involutional bone loss. Age-related, lifestyle, dietary, hormonal, environmental, and genetic factors interact in intricate ways to control both determinants. Among its many highly specialized roles, bone is a dynamic tissue that is vital to maintaining mineral homeostasis and plays a basic biomechanical role in movement. Low bone mass and microarchitecture degeneration of bone tissue, which increases bone fragility and fracture risk, are the hallmarks of osteoporosis, a "systemic skeletal disease." Ayurveda offers a wide range of therapy options for various illnesses. Since osteoporosis (Asthikshaya) is a degenerative Vata condition, it requires a pioneering therapy of Vata, namely Basti. Charakaappropriately emphasized the exalted name of Basti-BastiVataharanam Shreshtha. In the CharakSamhita, LashunTaila is mentioned in relation to the treatment of Vatavyadhi.[3]Matrabasti of lashuntaila was used to treat a sample of 30 patients in this study, and the results showed significant improvement.

Aims and Objectives:

Aim

To observethe efficacy of Matrabasti of Rasonataila in Asthikshay (Osteoporosis).

Objectives

- To study the Ayurvedic Literature of Asthikshay according to AyurvedicSamhitas.
- To study Osteoporosis as per Standard Modern Texts.
- To study the AsthiSharir and Bone.
- To study the effect of RasonaTailamatrabasti in asthikshay (Osteoporosis).

II. REVIEW OF LITERATURE:

When ashti becomes porous (sarandhra), it is referred to as saushirya or kshaya of sthayiasthidhatu. Additionally, according to AcharyaCharaka, the symptoms of Asthi&Majjakshaya include a decrease in bone tissue, hair loss on the head and body, tooth weariness, mustaches, and joint loosening. Asthi starts to feel weak and light, and there's a sensation like bones breaking. Such a person is always affected by vata-dosha diseases. after a person

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reaches the age of 60 to 70, after they have lost all of their dhatus, they enter the stage of asthisaushirya. Males in jarawastha also experience asthimajjakshaya, but because they have relatively higher levels of bala and samhanana, the kshaya is less severe and frequently does not result in asthisaushirya. This confirms that women are more likely than men to get osteoporosis.[4]

Samprapti of Asthikshaya

Because of nidansevana, anytime khavaiguna occurs in the asthidhatu, vatadosha covers the entire asthidhatu and performs sthansamsharya in the entire asthidhatu or in a specific area of the body. This causes symptoms such as asthi contraction, stiffness in the joints, and fractures of the asthi&joints.[5]Low bone mass and microarchitectural alterations, especially of the cancellous bone, are hallmarks of osteoporosis, a pathologic disorder affecting the entire skeleton that makes bone more brittle at specific locations along the axial and perpendicular skeletons.

As previously mentioned, bone resorption and bone creation are closely related, and bone remodeling occurs in both cortical and trabecular bone in an ordered manner. Because osteoblasts' production of new bone for a variety of reasons does not correspond with the amount of bone resorption by osteoclast activity, osteoporosis must be understood as the result of a particular imbalance in bone remodeling that causes net bone loss.[6]

III. MATERIAL AND METHODS:

Source of data- OPD & IPD patients of Hospital of our Institute.
Study Design: Single Arm Clinical Trial

Inclusion Criteria

1. Gender - Patients of any sex will be included.
2. Age - 35 yrs to 70 yrs
3. Patients those having Lakshanas of Asthikshay.
4. Patient who shows Pain, Stiffness, Sitting Low Back Pain, Tenderness at joints and positive S.L.R. Test will be included for study.

Exclusion Criteria:

1. Patients having tuberculosis of spine.
2. Rheumatoid arthritis.
3. Ankylosingspondylosis.
4. Malignancy.
5. Hypertensive, diabetic mellitus, HIV, asthma, CVS disorder
6. Epilepsy or any other serious systemic illness.

- **Intervention:**

- Duration of study – 3 months
- Total duration of study – 21 days
- Follow up – at 21st day
- Dose: 40 ml
- 30 patient will be given RasonaTailaMatrabasti with disposable basti pouch for 15 days in this sequence.
- Kal : Paschyatbhakta

- **Preparation of RasonaTaila –**

RasonaTaila is prepared as per mentioned in SharangadharSamhitaas follows[7]

Contents-1.Rasonabulb–1part
2. Processededibletiltaila- 4part
3. Cow's Milk- 16 part

Procedure-

The first lashuna bulbs were manually crushed after being peeled. However, after boiling cow's milk, crushed lashunbalbs were added gradually and the mixture was once again heated. After that, cooked edible tiltaila was added to the boiling process. In order to obtain the optimal taila signals described in the classics, the entire formulation was continually cooked over a low flame for almost two days. After cooling and filtering, the formulation was placed in a sterile container for storage.

- **Procedure –**

Poorvakarma: The patient was placed in a prone position and given a 10-minute local massage, or abhyanga, using a tilala. After that, PindaSweda was administered locally for fifteen minutes. After ten minutes, the patient was instructed to eat a light breakfast.
Pradhankarma: After placing the patient in a left lateral position, 40 ml of Lashuntaila was poured into a 60 cc syringe, and oil was applied to the anal area and the catheter tip. Catheter was placed 3 cm in anus, the piston was steadily pushed till all the oil gets within.
The patient was instructed to sleep in a supine position for ten minutes after receiving a gentle massage for fifteen minutes on the buttock area. For 15 days, the process was followed.

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- **Parameters for Assessment:**

1.Pain :

Sign	Grade
No Pain	0
Slight Pain	1
Moderate Pain	2
Severe pain	3

2.Stiffness :

Sign	Grade
No stiffness	0
In morning, only 5-10 minutes	1
Daily 10 – 30 minutes	2
Daily in different time 30 – 60 minutes or more	3

3.Sitting LBP (Low back pain) :

Sign	Grade
Sitting in ordinary chair more than 30 minutes without	0
Patient complaining LBP while sitting in an ordinary chair after 20 minutes	1
Patient complaining LBP while sitting in an ordinary chair after 10 minutes	2
Patient complaining LBP just after sitting in an ordinary chair	3

4.S.L.R. Test :

S.L.R. Test	Grade
90 °	0
60°	1
30°	2
0°	3

5.Tenderness :

Symptoms	Grade
Patient does not feel pain during examination	0
Patient feel mild pain during examination of tender area	1
Patient feel moderate pain during examination	2
Patient does not allow to examine the tender area	3

IV. RESULTS:

Effect of RasonatailaMatrabasti on assessment criteria was as follows

Parameter	Mean		Difference in means	Paired ‘t’ test				
	BT	AT		S.D.	S.E.M.	‘t'	‘p' value	Remark
Pain	2.1	1.1	1	0.58	0.258	9.14	<0.001	S
Stiffness	2.3	1.0	1.3	1.135	0.367	6.87	<0.001	S
Sitting LBP	2.3	0.9	1.4	0.7854	0.234	9.68	<0.001	S
SLR Test	2.2	0.8	1.4	0.845	0.1244	14.2	<0.001	S
Tenderness	2.3	0.9	1.4	0.987	0.124	10.2	<0.001	S

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V. DISCUSSION AND CONCLUSION:

- The primary cause of Asthikshay is vatadosha vitiation, which leads to the disease's appearance.
- In asthikshay, asthidhatu is impacted.
- The symptoms of AsthikshayVyadhi include discomfort, stiffness, low back pain while sitting, tenderness, and SLR test results.
- In the present day, Asthikshay deals with osteoporosis.
- Low bone mass and microarchitecture degeneration of bone tissue are hallmarks of osteoporosis, a progressive systemic skeletal disease that increases bone fragility and fracture susceptibility. The mean ratings for each of the evaluation parameters—pain, stiffness, sitting low back discomfort, SLR test, and tenderness—were significantly lower.
- The Matrabasti with LashunTaila have demonstrated to be quiet successful in the treatment of Osteoporosis without having negative side effects.
- Along with main line of treatment nutritious diet must also be administered to the all malnourished patients.

BIBLIOGRAPHY:

[1]. Orthopaedic issue in osteoporosis Edited by Yuehuei.H.An. 2003 CRCpress,BocaRatonLondon New York Washingto nD.C

[2]. OrthopaedicissueinosteoporosisEditedbyYuehuei.H.An.2003CRCpress,BocaRaton London New York WashingtonD.C

[3]. CharaksamhitaofAgnivesabyAcharyaVidyadharShuklaandDrRavidduttaTripathi,ChaukhambhaSanskritPratishthan,Delhi,Reprint edition2010, pgno.714.

[4]. CharakSanhita, Vd. Ya. Go. Joshi, Part I, VaidyamitraPrakashan ,Pune, 7th Edition 2020, pg no. 238.

[5]. CharakSanhita, Vd. Ya. Go. Joshi, Part II, VaidyamitraPrakashan ,Pune, 7th Edition 2020, pg no. 634

[6]. Orthopedic issue in osteoporosis, edited by YuehueiHo An, CRC press, New York Washington, 2003,page9

[7]. Sharangadhara, SharangadharaSamhita, English T by ShrikanthaMurthi, ChaukhambhaOrientallia, Varanasi, MadhyamaKhandaa 9/58 – 60.