A CASE STUDY OF AMAVATA WITH THE MANAGEMENT OF AYURVEDIC TREATMENT

Archana Dachewar, Professor and HOD Kayachikitsa Dept., Shree Ayurved Mahavidyalaya, Nagpur
Dipali Pawar, PG Scholar, Kayachikitsa Dept., Shree Ayurved Mahavidyalaya, Nagpur

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Abstract: Amavata is second common joint disorder. Amavata is compared with Rheumatoid Arthritis due to its clinical appearance. Ayurveda has taken the foremost place in the management of many diseases one of them is Amavata. Here an effort was made to treat the female of age 40 yrs, using multiple Ayurvedic treatment. At the end of 16th day of treatment, Panchkarma procedures along with internal medications resulted in the improvement of overall symptoms.

Keywords: Amavata, Vaitaran Basti, Sinhnad Guggulu, Agnitundivati, Walukapottali Swedan.

Introduction

Almost all the disorders which are found now a day are mentioned in the classics of Ayurveda but Amavata is not mentioned in the Brihatrayi. Amavata is first explained in Madhavnidan. The word Amavata is made up of combination of two words Ama and Vata. Amavata which broadly resembles Rheumatoid Arthritis is an extremely debilitating condition. The major influence and causation of Amavata is related to autoimmunity which is triggered by mithya aahar- vihar, and Mandagni. The disease is mainly due to derangement of Agni like Jatharagni, Dhatvagni and Bhutagni, results in the production of Ama. This Ama circulates in the body by vitiated Vata and gets located in the sandhis causing disease Amavata. Among many diseases related with Agni madhanya, Amavata stands high as a crippling and distressing condition with high incidence among the middle age group. The disease includes signs and symptoms such as Sandhishotha, Sandhishooola, Sancharivedna, Jwara, Aruchi, Aalsya, Gaurav, which affects ones day to day life. In our Ayurveda, the management includes internal medicines and Panchkarma procedures. To avoid Analgesic drug therapy which has harmful side effects, Ayurvedic treatment protocol was followed.

Aim and objectives

Efficacy of internal Ayurvedic medicines and Panchkarma in the management of patients suffering from Amavata admitted in the Ayurvedic hospital.

Case Report

Basic information of patient
Name XYZ
Age 40 years
Sex Female
Religion Hindu
Socio –Economic status – middle class

Pradhan Vednavishesh (Chief complaints)
1. UbhayJanusandhi shoth and shool
2. Sancharivedna
3. Aruchi
4. Jwarprachiti
5. Chankraman Kashtata

Vartamanvyadhivritta (History of present illness)
Three months before the patient was all right. But after that she develops above symptoms. She took medicines in private hospital but there is no relief. So for further treatment she was shifted to Ayurvedic hospital for Ayurvedic management.

Purvavyadhivritta (History of past illness)
NAD

Kulajvrita (Family history)
NAD
Vayaktivrittana (Personal History)
Aaharja – Patient have normal and healthy food habits.
Viharaja - Patient works in the farm.
Patient has moderate exertion.
Patient does physical exercise daily.
Vyasan - No addiction

General Examination
G.C. - Fair
Febrile Pulse - 74 / min
B.P. - 130 / 70 mm hg
RS, CVS, CNS - NAD
Vitals are normal. P/A shows no deformity.

Ashtavidha Pariksha
1. Nadi - 74 / min
2. Mutra - Avishesh
3. Mala - Avishesh
4. Jivha - Saam
5. Shabda - Spasht
6. Sparsha - Ushna
7. Druk - Normal
8. Aakriti - Krush

Local examination of Janu Sandhi:
1. Redness +
2. Tenderness +++
3. Temperature ++
4. Swelling +++

Differential diagnosis

<table>
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<tr>
<th>Sr no.</th>
<th>Sancharivedna</th>
<th>Ushnasparsha</th>
<th>Sparshasahatva</th>
<th>Disease starts from</th>
<th>Amavata</th>
<th>Vatarakta</th>
<th>Sandhigat Vata</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>present</td>
<td>present</td>
<td>Present ++</td>
<td>Big Joints</td>
<td>Absent</td>
<td>Absent</td>
<td>Present or Absent</td>
</tr>
<tr>
<td>2</td>
<td>present</td>
<td>Present</td>
<td>Present</td>
<td>Parva sandhi</td>
<td>++</td>
<td>Present</td>
<td>Big Joints</td>
</tr>
<tr>
<td>3</td>
<td>Vata + Ama</td>
<td>Vata + Raka</td>
<td>Vata</td>
<td></td>
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</tbody>
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Treatment
Swedan - Walukapottali swedan
Basti - Vaitaran Basti (for 15 days)
Internal medicines
1. Sinhnad Guggulu 2 Tablet TDS
2. Shunthi Kwath 10 ml BD
3. Agnitundi vati 2 Tablets TDS

On 8th day
1. Redness +
2. Tenderness ++
3. Temperature ++
4. Swelling ++
On 16th day
1. Redness -
2. Tenderness +
3. Temperature +
4. Swelling +

Discussion
Assessment was done on the basis of local examination after treatment.

On the day of admission
1. Redness +
2. Tenderness +++
3. Temperature ++
4. Swelling +++

Conclusion
The case report shows that combined Ayurvedic treatment is potent and effective in the management of Amavata. There were no adverse effects found in combined Ayurvedic treatment.

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