

CHIKITSA SUTRA VIVECHANA OF SHOTHADr. Sreelakshmi S.*¹ and Dr. Abdul Khader²¹PG Scholar, Dept of Kayachikitsa, SKAMCH and RC, Bengaluru.²Guide and Reader, Dept of Kayachikitsa, SKAMCH and RC, Bengaluru.***Corresponding Author: Dr. Sreelakshmi S.**

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ABSTRACT

Inflammation in Ayurveda is known by different names in different contexts namely Shotha, Shopha, Svayatu, Utsedha and Samhata. Chronic inflammation is a cardinal sign of chronic degenerative disorders. Inflammation and oedema associated with it is duly recognised in Ayurveda as a pathological manifestation. While modern medicine considers inflammation as a symptom or rather as a healing response of the body in wounds. Ayurveda treats the concept of inflammation as (a) symptom of a disease (b) an independent disease and (c) a complication of diseases. Degenerative diseases share a common pathological feature of inflammation. The disturbances in micro channel circulation in inflammation are due to Sroto dushti (clogging of channels) by Aama (toxic waste of metabolism). Preventing Aama formation could hold the key to preventing chronic degenerative disorders. In present paper tried to analyse different treatment modalities as per ayurvedic classics and commonly used Kashaya and its mode of action in curing shotha.

KEYWORDS: Shotha, Oedema, Punarnavadi Kashaya, vividha prayogas.**INTRODUCTION**

Indian traditional system of medicine, Ayurveda encompasses all aspects of living-health and sickness. Like other pathological conditions inflammation has been documented in the Brihat Trayee, Charaka Samhita, Susruta Samhita and Astanga Hridaya between 1500 BC and 600 AD.^[1] Madhava Nidana, in around 700 AD,^[2] a complete book on pathogenesis in Ayurveda is influenced by all the three books in its description of inflammation. There are many potential Vyadhi which creates substantial disturbance in healthy condition. Shotha is one of such Vyadhi which has a considerable importance regarding its prevalence and its ability to show severity of disease. Approximately 4.4 million people who are exposed annually. In National Health survey (India) extrapolated prevalence of Shotha is 6.25%. Shotha is described in the Samhita as Shotha, Shwayathu, and Shopha. Charakacharya defines that which exhibits elevation on the surface of skin is called as Shotha.^[3]

Shotha is classified into two types i.e. nija (endogenous) & aganthuja (exogenous). Nija shotha manifested by aggravation of doshas, whereas aganthuja shotha is from external factors, which involves person coming in contact with harmful leaves, creepers etc. For example, drugs like kapikacchu (*Mucuna Pruriens*) are been named to exemplify this phenomenon, kapi; stands for monkey & kacchu; stands for itch. This in modern parlance considered to be contact dermatitis. In the

universe many herbs, shrubs tends to produce varied skin manifestation.

From the time Celsus (30BC-38 AD) characterized inflammation by its four cardinal signs rubor (redness) calor (increased heat), tumor (swelling) and dolor (pain) and the fifth sign function laesa (loss of function) was added by Virchow in the 19th Century modern science has come a long way.^[4] Today inflammation has been recognised as a healing response of the body in the acute stage. In response to cell injury due to trauma or infection, a complex network of molecular and cellular interactions is directed as a means to return to homeostasis mediated by cytokines.^[5] If tissue health is not restored, inflammation becomes a chronic condition that damages the surrounding tissue.^[6]

Classification**According to Charaka^[7]**

Even though all the three doshas involved in the manifestation of all the types of the Shotha, it is on the basis of the predominance of the respective doshas that vataja, pittaja and kaphaja varieties of disease are determined and therapies are prescribed accordingly. All the varieties of the Shotha are considered to be tridoshaja i.e. they are caused by the vitiation of all the three doshas even so the causes of inflammation differs from one to another according to the particular dosha which is predominantly vitiated. The physician should therefore

determine the line of treatment according to the predominance of one dosha or the other.

1) On the basis of Dosha

- a) Vataja
- b) Pittaja
- c) Kaphaja

2) On the basis of Karana

- a) Nija
- b) Agantuja
- 3) On the basis of Sthana
 - a) Ekangaja
 - b) Sarvangaja.

According to Susruta^[8]

Shotha develops from the six factors Vataja, Pittaja, kaphaja, Raktaja, Sannipataja and Agantuja. Depending upon signs, symptoms and treatment earlier six types has been explained but sarvasara that is the shotha which spread all over the body are of 5 types that is Vataja, Pittaja, kaphaja, Sannipataja and Vishaja.

According to Vagbhata & Madhavakara^[9]

Based on different causes and symptoms it is of nine types from each dosha separately, from the combination of two doshas and from the combination of all them, from trauma/injury and from the poison. Mainly, it is of two types; a) Nija, Agantuja b) Sarvanga, Ekanga It is known to be of three types a) Prthu (hard) b) Unnata (raised/elevated) c) Grathita (glandular).

Purva Rupa (Premonitory Symptoms)^[10]

Feeling of increased temperature, burning sensation in eyes etc. and dilatation of the vessels of the locality are the premonitory symptoms.

Samanya Lakshna^[11]

According to Charaka

- Gaurava (heaviness)
- Anavasthitathvam (unstability)
- Uthsedham (swelling)
- Ushma (rise in temperature)
- Sira tanuthvam (thinning of vessels)
- Lomaharsha (horripilation)
- Anga vivarnata (discolouration)

Samanya chikitsa^[12]

The physician, after ascertaining

Bala – strength of the patient,

Dosha – Doshas involved

Kala – time, season, stage of disease, should treat the ailment by administering therapies, contradicting the etiological factors, Doshas and season.

Vishesha Chikitsa^[13]

Type of Shotha

Aama janya -
Vruddha dosha janya -
Shirogata -

Treatment

Langhana
Sanshodhan
Nasya

Adhoga -	Virechana
Urdhwaj -	Vamana
Snigdhajanya -	Rookshana
Rukshyajanya -	Snehana
Vataja with Vibandha -	Niruha
Vata Pittaja -	Tikta Ghruta
Moorchha, Arati, Daha, Trushna -	Dugdha with Mootra
Kaphaja -	Kshara, Katu, Ushna, Takra with Mootra, Asava

In amaja conditions, if the shotha occurring is associated with ama, langhana in the form of upavasa, pachana with musta, kutaja, shunti and vamana, virechana, shirovirechanadi shodhana should be administered.

In Vataja shotha Shamana aushadhies like Shundi, Punarnava, Eranda, Panchamula shruta jala paana has been mentioned by Acharya charaka and ksheerapaka with danti, trivrut, trikatu and chitraka is also told beneficial in shotha where vata pradhanyata is there. Trivruth sneha or eranda taila has told 1 month or ½ a month daily for external application. 1 aksha of kalka of mayuraka, pippali, pippalimula & nagara with 1 prastha of milk to make ksheerapaka and to be given for a patient who is suffering with vataja shotha.

In Pittaja shotha Nyagrodhadi gana sadhita ghruta pana has told as a vishesha chikitsa. And also kashaya prepared out of patola, triphala, nimba, and daruharidra mixed with guggulu has been mentioned.

In Kaphaja shotha, trivrut, trikatu, and katurhini should be mixed with ayo (iron) should be given along with triphala Kashaya. Gomutra prayoga is mentioned along with haritaki, also with takrasava and it should be mixed with kshara, katu, ushna dravyas in case of kaphaja shotha. Aragwadha siddha ghruta pana, kashaya prepared out of hreebera, agaru, daru, chavya, chitraka, nagara, abhaya, pippalimula, haridra, and hingu along with gomutra for drinking. Kashaya prepared out of chitraka, aragwadha, murva, vidanga, amalaka, abhaya, pippali, sariva and padha with madhu for drinking.

In case of Sannipathaja shotha, Shilajathu with triphala Kashaya is effective. Paste of haritaki, nagara, devadaru with ushnambu can be given for lepa. Haritaki, nagara, devadaru, with punarnava along with gomutra after taking above mentioned two, patient should take snana, after the recipe digested patient should take food along with milk. Snuhi ksheera along with amla dravyas, danti, dravanthi shruta ghruta and kashaya prepared out of bilwa leaves have been mentioned.

In agantuja shotha chikitsa, Vishagna chikitsa is mentioned for agantuja shotha Vamana and its proper samsarjana karma works wonders in agantuja shotha. Churna of tapy, Suvarna, mixed with sharkara, madhu in lehya form and Ghruta is one among the best aushadhies mentioned in visha chikitsa.

Vividha Prayogas

Gomutra Prayoga^[14] Gomutra hareethaki for rechaka and it will not cause prakopa to vata also. Gomutra with goksheera equal quantity followed by ksheeranna, it will relieve the nirama avasta, baddamala and reduces shotha. In kaphaja shotha, snana with kulatha, nagara siddha gomutra and kulatha + chitraka siddha gomutra is mentioned.

Guda Nagara Prayoga^[15] Guda and ardra nagara taken in equal quantity to be given in a dose of 1 pala – 1st day, subsequent days both should be increased by ½ pala till it reaches the dose of 5 pala on 10th day it should be given for 1 month. Guda mixed with ardraka/ Guda mixed with sunti /Guda mixed with haritaki / Guda mixed with pippali should be administered increasing the dose by 10 gm daily upto 120 gm for 15 days or a month.

Shilajathu Prayoga^[16] Shilajathu along with triphala Kashaya has been mentioned to administer for patient. Shilajathu has katu, tikta, Kashaya rasa, ushna veerya and katuvipaka also having shrothovishodhaneeeya property, So it will act in vata rudha stage and in utsedha linga of samprapti and give results.

Ushtra Ksheera Prayoga^[17] The patient should avoid taking food and water but only take ushtra ksheera either for a week or for a month, depending on bala. Ushtra ksheera is slightly rukhsa, ushna veerya and lavana rasa. It is deepana and laghu, also good to mitigate vata and kapha and is directly indicated for shotha rogi.

Kamsa Hareetaki Prayoga^[18] It will act as rechaka, shrodho vishodhaka and having hareethaki as main ingredient is having laghu, rukhsa guna and ushna veerya. Which is helpful in doshanulomana, deepana and pachana, thereby helps in curing shotha.

Yavagu Prayoga:^[19] Yavagu should be prepared out of jivanthi, ajaji, shati, pushkara mula, kaaravi, chitraka, bilwa, yavakshara, and vrikshamla with ghrita and taila bhrushta. Yavagu prepared out of panchakola with ghrita, taila bhrushta will also be effective in shotha. The drugs being deepana, pachana, trishoghna, medohara will act on shotha.

Discussion w. s. r. to Punarnavadi Kashaya

In most of the shotha cases, the commonly used Kashaya is punarnavadi, we will try to analyse how the Kashaya works in shotha conditions. As Punarnavadi kashaya is having madhura, tikta, Kashaya rasa, laghu, rukhsa guna and ushna veerya. It will act as vata, kapha hara and will do shoshana of shotha.

Punarnava is a drug which is act as mutra rechaka, which will further promotes the cure of shotha. The liquid extract of this plant stimulates the urine secretion and discharge. The studies proved that it will speeds up the filtration process of kidneys and flushes out excessive fluid. Usual diuretic drug action is to increase the water/

urine output. In punarnava the chemical constituents proved that it will act as a diuretic. Punarnava roots are having phenolic glycosides, methanol will increase the osmotic pressure, thereby prevent the reabsorption of water from tubule into blood.

The golden rule of filtration is that the water tends to follow sodium and in case of swelling the sodium ions will be retained, thereby retain the water and which will leaks to interstitial spaces where it appears as oedema. Even in Ayurveda, if we are looking at the samprapti we can see the similar type of process where the bahyasiras will be filled with rakta, pitta, kapha and movement of vata will be obstructed there.

The studies have also proved that the aqueous form of drug is acting more beneficial than powder; this is probably due to better absorption of liquid form through interstitial tract. Also the leaf extract of punarnava is having analgesic properties also. The diuretic action in punarnava will help to decrease the shotha and it is a very common and good drug of choice.

CONCLUSION

Ayurveda considers inflammation either as a cause, symptom or complication of degenerative conditions. Obesity has been considered a bad prognostic feature in persons with inflammatory conditions. Hence there is a kind of shared pathology between cancers and metabolic syndrome and the common pathway is inflammation due to disturbance in micro channel circulation or rather of diffusion. The obstruction of micro channels by Aama (toxic waste of metabolism) is responsible for loss of homeostasis, inflammation and tissue damage. Accordingly Ayurveda believes that Aama is the root cause of metabolic and degenerative disease since it blocks Srotas or micro channels that nourish tissues. Aama is believed to have antigenic and pro inflammatory properties. Emphasis is laid on purificatory procedures, Panchakarma or detoxification as it is called these days is for clearing clogged channels both gross and subtle. Considering this, the scope of Ayurveda in preventive oncology and prevention of degenerative diseases and metabolic disorders is yet to be appreciated.

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