

UPASHAYTMAKA MANAGEMENT OF SANDHIGATVATA

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INTRODUCTION

Aggravated Vata residing in joints damages them leading to pain and swelling. This disorder is called as **Osteoarthritis (Sandhi Vata)**.

It is the most common form of Arthritis. It is a degenerative disease and related to ageing.

The knee and hip joints are the principle large joints affected and the principle site of significant disability.

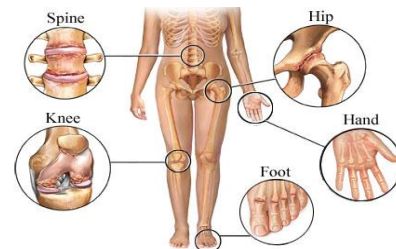
The treatment of OA in modern system of medicine is quite unsatisfactory as it produces only symptomatic relief without destroying the pathogenesis of disease.

**CORRELATION OF SANDHIVATA WITH
OSTEOARTHRITIS
SANDHIVATA**

- ✚ Hanthi Sandhigata Sandhi.
- ✚ Vata purna driti sparsha.
- ✚ Shotha.
- ✚ Shoola.
- ✚ Prasarana akunchan vedana.

**OSTEOARTHRITIS**

- ✚ Degenerative changes of articular cartilage leading to joint failure.
- ✚ Palpable audible coarse crepitus.
- ✚ Bony swelling around joint margin (periarticular swelling).
- ✚ Pain.
- ✚ Restriction of movement basically flexion and extension.

**AIMS and OBJECTIVES**

- I. To evaluate the efficacy of Abha guggulu in the management of Sandhivata (Osteoarthritis).
- II. To draw a hypothesis regarding the mode of action of drug used in the present trial on the scientific basis.

MATERIALS AND METHODS**Selection of Patients**

20 cases of well diagnosed patient of Osteoarthritis were selected from the I.P.D. and O.P.D. wing of Vikritivigyana National Institute of Ayurveda, Hospital, Jaipur in year August -September 2008

ADMINISTRATION OF DRUG

2 gram of Abha Guggulu with the anupana of Gomutra arka (4 teaspoon) mixed with equal amount of water is given twice daily for 30 days, along with Abhyanga (local massage) and Swedana (fomentation) with Dashamool taila and Dashmool kwatha respectively.

Period of trial –30 days.

CRITERIA OF ASSESSMENT

- Subjective assessment and
- Clinical evaluation, on the basis of symptom rating scale.

Sr.No.	Grade	Percentage	Number according to grade	
a.	Nil	0	0	0
b.	Mild	25	2	+
c.	Moderate	50	3	++
d.	Severe	75	4	+++
e.	Agonizing	100	5	++++

FUNCTIONAL ASSESSMENT

- Walking time (100 meters was fixed for assessment).
- Pressing power of the hand (Pressing the inflated cuff of Sphygmomanometer).
- Gripping power of the hand.
- Functional index – It is based on the following function rating scale:
 - Fit for all activities, no handicap.
 - Moderate restriction – Independent despite some restriction of joint movement.
 - Marked restriction – Limited self care, some assistant required.
 - Confined to chair or bed bound – largely incapacitated and dependent.

HEMATOLOGICAL ASSESSMENT

Following hematological changes were recorded –

- Hemoglobin in gram percentage.
- Erythrocyte count.
- Total Leucocytes count per cu mm.

- Differential Leucocytes count in percentage
- C-Reactive Protein
- RA factor
- Serum Uric acid
- Radiological changes

OBSERVATIONS AND RESULTS**SUBJECTIVE IMPROVEMENT**

Marked improvement in the feeling of well being, physical and mental fitness and joint activities.

CLINICAL IMPROVEMENT

- ❖ Joint pain – Significant improvement, 't' value = 9.37, 'p' value = < 0.001
- ❖ Swelling – Considerable reduction in periarticular swelling, 't' value = 3.7, 'p' value = < 0.001, significant
- ❖ Restriction of joint movement – Range of movement is improved in all patient, 't' value = 5.8, 'p' value = < 0.001, significant
- ❖ Stiffness – Significant improvement in feeling of stiffness, 't' value = 3.3, 'p' value = < 0.001
- ❖ Local Crepitus – Mild improvement is found in those patients who come at early stage of disease, 't' value = 4.5, 'p' value = < 0.01, Significant.

FUNCTIONAL ASSESSMENT

- ❖ Grip power – Statistical analysis of data shows no significant improvement.
- ❖ Walking time – There was statistically significant improvement.
- ❖ Function index – Statistical analysis of data shows no significant improvement.

HEMATOLOGICAL CHANGES

- ❖ No statistical significant improvement is found

PATTERN OF CLINICAL IMPROVEMENT IN 20 PATIENTS OF SANDHIVATA (OA) TREATED WITH ABHA GUGGULU

Sr.No.	Observation	B.T.	A.T.	Mean Difference	S.D.	S.E.	't'	'p'
1.	Joint Pain	2.9	1.4	1.5	0.52	0.16	9.37	< 0.001
2.	Oedema	0.9	0.3	0.6	0.51	0.16	3.75	< 0.001
3.	Restriction of joint movement	1.7	0.7	1.0	0.56	0.17	5.8	< 0.001
4.	Stiffness	1.3	0.6	0.7	0.67	0.21	3.3	< 0.001
5.	Local crepitus	1.4	1.2	0.2	0.42	0.13	1.5	< 0.01

DISCUSSION

- ✚ There is significant symptomatic relief in joint pain, edema and pain in joint movement and stiffness in all patients.
- ✚ There was no improvement in the symptoms like local crepitus, muscle wasting, joint enlargement due to osteophytes.
- ✚ Functional assessment shows only mild significant improvement in walking time.
- ✚ There was a increase in Hb% and decrease in E.S.R. level in all patients showing that drug has Anti-inflammatory effects.

- ✚ Abha guggulu help in arresting the progress of disease along with delaying the degenerative changes.
- ✚ Drug shows significant improvement if starts at early stage of disease by checking the pathogenesis of disease.

CONCLUSION

- ✓ This pilot study shows that Shamana Chikitsa in the form of Abha guggulu produces significant improvement in the patients of Sandhivata especially with the Anupana of Gomutra arka.

- ✓ It helps in arresting the progress of disease and development of complications.
- ✓ This fact is supported by various observations including laboratory investigations.

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