

SUCCESSFUL MANAGEMENT OF AMAVATA (RHEUMATOID ARTHRITIS)
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ABSTRACT

“*Kaayortara agnimuchyate*”, showcases the importance of agni in our shareera. As Ayurveda quotes “*sarve roga api mandagno*”, the main causative factor for any impairment or vikrutavastha in the shareera is only due to the vitiation of agni. Rheumatoid arthritis is one of the auto immune disorder which is an Inflammatory Arthritis condition caused due to anti immunogens characterized by symmetrical joint pain, swelling, associated with morning stiffness and rise in local temperature. When ama and vata simultaneously get vitiated due to long term intake of virrudhahara and viruddha cheshta associated with mandagni, there will be dislodgement of the ama in the shleshma sthana, which can be mainly considered as parva and sandhi, leading to aavarana of ama by vata in the sandhi pradesha causing Amavata. Ayurveda being a holistic science, treating and managing amavata can be achieved by various shodhana and shamana chikitsa, which involves amahara and deepana pachana to correct the impaired agni followed by vatahara and shamana chikitsa. In this case series, siddha basti along with rookshana paana was adopted to manage the condition.

KEYWORDS: Amavata, Rheumatoid Arthritis, Basti, Auto Immune Disorders, Agni, Rookshana.

INTRODUCTION

Amavata is a auto immune disorder which occurs when the immune system attacks as a result of breakdown of immunological tolerance to auto reactive immune cells.^[1] It can be correlated and considered as Rheumatoid arthritis as it shares similar symptoms such as chronic symmetrical poly arthritis associated with systemic involvement. Mandagni causing ama formation with vata prakopa is the basic pathophysiology involved in the amavata. It is explained that due to *mithya vyayama, ushmanath, taikshnyat, ahitasya anavacharanat* the vitiated dosha moves from koshta to shaka associated with *maruta drutatva*^[2], that is uncontrolled movement of vata or *viloma* and *tiryak gati* of vata. This pathology causes leads to *aavarana of ama by vata dosha in trika sandhi* and does *gaatra stabdhata*.^[3]

Aamahara, deepana, pachana along with vatahara chikitsa is the basic principle of managing amavata

through Ayurveda. In the case series siddha basti^[4] in yoga basti course along with rookshana abhyantara paana^[5] was planned to manage the condition.

“*Bastih vataharanam shrestam*” encompasses the superiority of *basti* in controlling *vata*. *Rookshana chikitsa* helps in *amahara, pachana* and *deepana* based on the ingredients used. Henceforth the given *chikitsa* yielded good results in the management of *amavata* both symptomatically and serologically by reducing the inflammatory markers and proving Ayurveda to be evidence based.

MATERIALS AND METHODS

Case report

The case series includes 5 patients who visited the OPD of panchakarma at SDMIAH, Bengaluru. Cases were initially evaluated for history taking, screening, physical examination and laboratory investigations for

inflammatory markers. Treatment was planned for 8 days on IPD basis, the treatments were given and the assessment was done on the day of admission, after treatment and after follow up.

Treatment given: *siddha basti*^[4] along with *rookshana chikitsa*

1. **Table 1: Siddha basti in yoga basti course.**

Basti ingredients	Quantity
Guda	1 pala (48 grams)
Saindhava lavana	1 karsha (12 grams)
Taila	1 pala (48 grams)
Shatapushpa	1 aksha (12 grams)
Gomutra	250ml
Chincha swarasa	50ml
Dhanyamla	100ml

2. **Table 2: Rookshana – internal paana, 60ml twice daily in empty stomach.**

Ingredients	Quantity
Balamoola kashaya	25ml
Dhanymla	25ml
Gomutra	10ml
Saindhava lavana	1 pinch

Proabale mode of action of the chikitsa

Considering the *samprapti ghataka* of *amavata*, *ushna tikshna*, *amahara chikitsa* will be the basic principle to manage it. Along with this immune protective and immune promotive plays a major role in giving good results.

OBSERVATION AND RESULTS

Table 3: PAIN

	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
PATIENT 1	9	6	5
PATIENT 2	9	5	5
PATIENT 3	8	6	3
PATIENT 4	6	5	2
PATIENT 5	7	4	4

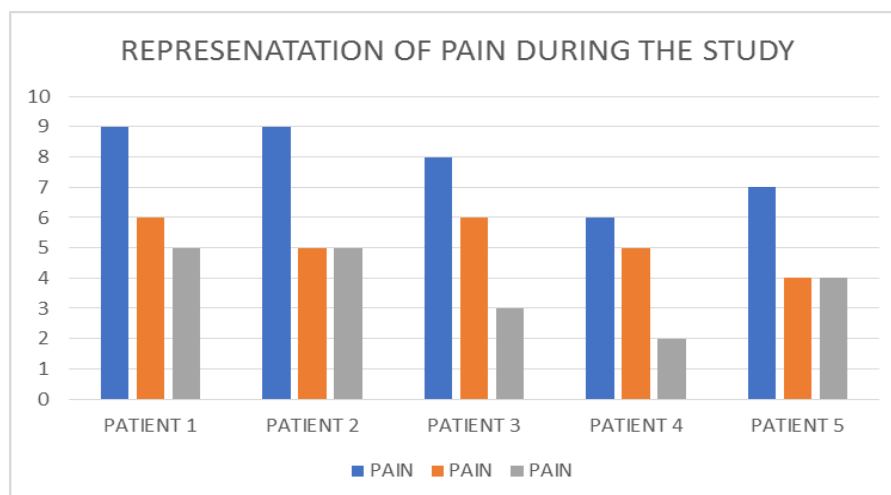


Chart 1.

Shatapusha, *dhanyamla* and *gomutra* having immunomodulating properties were used in *basti* to achieve it. *Chincha swarasa*, *dhanymla* and *gomutra* being *ushna tikshna* helped in relieving *aavarana* and in *ama pachana* also.

Importance of *dhanyamla*^[5]

According to Ayurveda it is:

- *Jeevana*
- *daha nashana*
- *Vata kaphahara*
- *Laghu*
- *Tikshna*
- *Jirnakari*

According to recent studies on *Dhanymla*^[6]

- Probiotic action of *dhanyamla* – acts on gut bacteria hence directly acts on *ama* and *inturn* helps in correcting the metabolism and *agni*
- Immune- modulatory effect of *dhanymla* and *gomutra*

Analytical parameters of *dhanyamla*, proves the pH to be 6, which is acidic and can be considered as *amla*, due to which it is *sookshma* that is capable to penetrate deep and also does *srotoshodhaka* by clearing *aavarana*.

Presence of carbohydrates and fats or oil globules in the *dhanymla* is the reason that it processes soothing and mild nourishing effect also which is *vatahara*.

Table 4: MORNING STIFFNESS.

	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
PATIENT 1	8	6	5
PATIENT 2	5	5	4
PATIENT 3	7	6	2
PATIENT 4	6	4	3
PATIENT 5	8	4	0

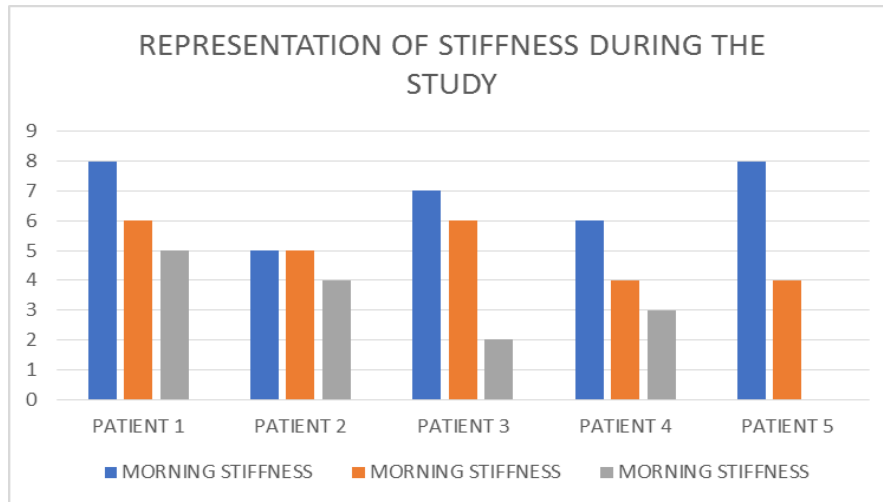


Chart 2.

Table 5: SWELLING.

	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
PATIENT 1	5	3	2
PATIENT 2	4	2	2
PATIENT 3	3	0	0
PATIENT 4	4	2	2
PATIENT 5	3	0	0

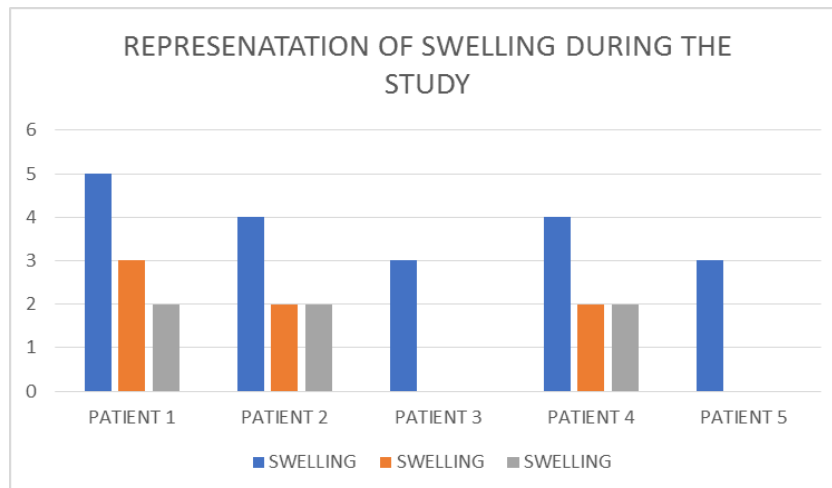


Chart 3.

Table 6: RA FACTOR.

	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
PATIENT 1	80 IU/ml	68 IU/ml	59 IU/ml
PATIENT 2	64 IU/ml	30 IU/ml	30 IU/ml
PATIENT 3	48 IU/ml	34 IU/ml	30 IU/ml
PATIENT 4	120 IU/ml	88 IU/ml	80 IU/ml
PATIENT 5	226 IU/ml	168 IU/ml	112 IU/ml

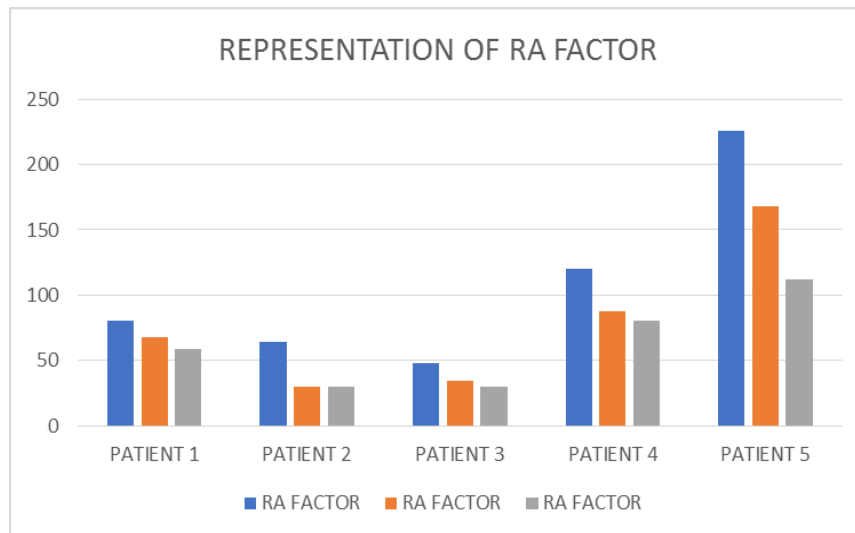


Chart 4.

Table 7: ASLO

	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
PATIENT 1	386 IU/ml	342 IU/ml	286 IU/ml
PATIENT 2	264 IU/ml	212 IU/ml	184 IU/ml
PATIENT 3	480 IU/ml	412 IU/ml	368 IU/ml
PATIENT 4	345 IU/ml	280 IU/ml	276 IU/ml
PATIENT 5	1180 IU/ml	1100 IU/ml	867 IU/ml



Chart 5.

Table 8: CRP.

	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
PATIENT 1	11.8 mg/L	8.8 mg/L	6.6 mg/L
PATIENT 2	14.8 mg/L	12.6 mg/L	9.2 mg/L
PATIENT 3	16.4 mg/L	14.8 mg/L	10.4 mg/L
PATIENT 4	13.5 mg/L	11.6 mg/L	11.2 mg/L
PATIENT 5	32.6 mg/L	30.8 mg/L	22.4 mg/L

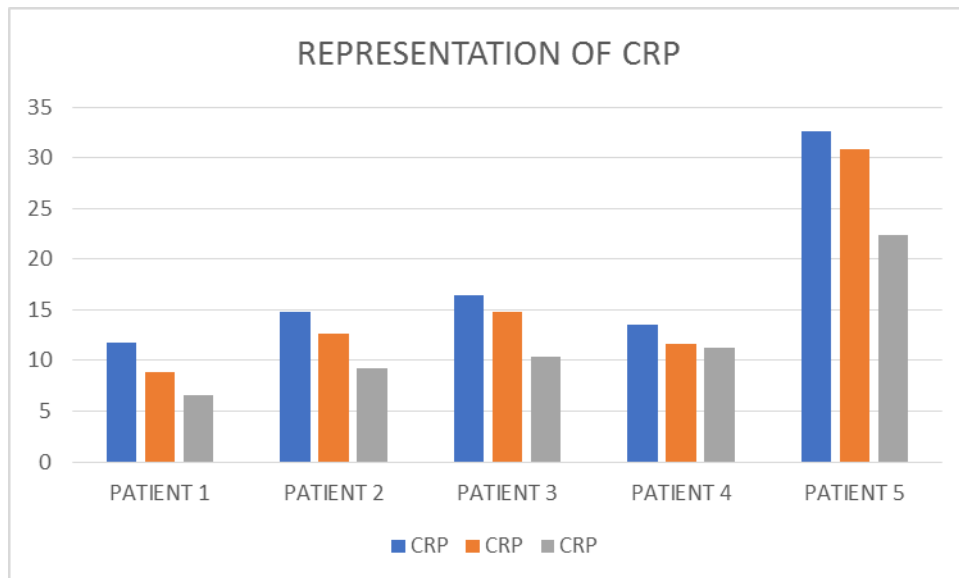


Chart 6.

DISCUSSION AND CONCLUSION

Amavata is a complex auto immune disorder which involves multiple systems of the body. The treatment principle includes basically the correction of metabolism along with the symptomatic management.

Inflammatory markers such as C-reactive protein and RA factor plays a major role. CRP is synthesized by the liver in response to factors released by macrophages, T cells and adipocytes. Which is directly related to immune cells and liver metabolism.^[7]

The pathogenesis of RA involves a complex interplay between B cells, T cells, and dendritic cells. A multitude of environmental and genetic factors leads to loss of tolerance to the proteins that have a citrulline residue, which leads to the production of autoantibodies like anti-cyclic citrullinated protein. RF involvement in the immune complex formation may lead to further complement fixation and recruitment of inflammatory cells like macrophages, neutrophils, and lymphocytes. This results in tissue damage and provides a positive feedback loop for the production of even more autoantibodies. Such a mechanism might explain an autoimmune and self-sustaining inflammatory response that ultimately causes arthritis.^[8]

Dhanyamla being a potent immunomodulator and *gomutra* having immunomodulating and immunopromoting action when given both orally and through rectal route helped in treating the condition. The gut brain mechanism of *basti* plays a major role in action of given medicines through enteric nervous system. *Dhanyamla* capable of generating probiotic properties also helped in correction of *agni* and thereby proper metabolism. Treating the *nidana*, and *lakshana* together becomes the challenge for treating *amavata*. Hence *tikshna basti* along with *rookshana chikitsa* was given

for the purpose of treating *ama*, *agni deepana*, *avarana-hara* and *vatahara*.

Among multiple modalities of *amavata chikitsa*, *siddha basti* with *rookshana chikitsa* proves to be more efficient.

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CONFLICTS OF INTREST

There are no conflicts of interest.

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