

The Management of A Case Study Rheumatoid Arthritis (Amvata)

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Abstract: -

Rheumatoid Arthritis (R.A.) is a most common chronic immune inflammatory disease characterized by inflammation and deformity of joints. The hallmark of the disease is chronic, symmetric, polyarthritis (synovitis) that affects the joints of hands and feet although any joint lined by a synovial membrane may be involved. The disease resembling clinically to RA which is known as **Amvata** in Ayurvedic texts as Amvata. The symptoms are produced due to vitiation of vata (Conducting biophysical force in body) along with the formation of Aam (Biotoxin ie Aamdosh). Aam is carried by the aggravated vata and deposited in kaphasthanas ie particularly in multiple joints, amashaya etc. producing symptoms like Agnimandya (↓appetite), aruchi (tastelessness), Angamard (Bodyache), Alasya (Laziness), Sndhishool (pain in joints), Sandhigraha (Stiffness), Sndhishotha (Sweling) etc. Symptoms and treatment of Aamvata is described by Madhaonidankar and Acharya Chakradatta in details. The treatment of Aamvata like Langhana (low intake), Swedan (Valuka Pottali Swed ie hot sand), Deepal pachan (Digestive and appetisers), Virechan(Purgatives), Basti,(Medical Enema), and some conservative Ayurvedic Medicines etc. In the present study, I have selected a female patient having R.A. (Aamvata) who has treated with dravyas having Tikta - Katu ras, Deepan - pachan, shool prashamana (Pain killer) and Shothahara (Anti inflammatory) properties. The assessment was made on the basis of relief in symptoms and signs, serological findings ie. RA factor, ESR, IgG, IgM, CBC was found good outcome ie. significant improvement

Key Words :- Aamvata, Rheumatoid Arthritis, Valukapottali Sweda, Deepan - pachan

Introduction :-

RA is a chronic immune - inflammatory disease of unknown cause. It causes swelling of joints which results in joint pain, stiffness and progressive loss of function. In approximately two third of patient it begins insidiously with fatigue, anorexia, generalized weakness and musculoskeletal symptoms. Morning stiffness is an almost invariable factors of RA. RA affects between 0.5 to 1 percent of the adults in the developed country with 5 to 50 per 1 lack people newly developing the conditions per year.

Onset is uncommon under the age of 15 & from then on the incidence rises with age until the age of 80. Women are affected 3 to 5 times as often as men. The female to male ration is almost 3:1. The usual age at onset is 20 to 40 year although RA may begin at any age. After months to year deformities may occure, most common are - ulnar deviation of the fingers, swan - neck deformity, boutonniere deformity (Hyperextension of the distal interphalangeal joints with flexion of the proximal interphalangeal joints).

In modern system of medicine many drugs are available to reduce the symptoms of RA like joints swelling and pain such as non steroidal anti

inflammatory drugs (NSAIDS), steroids and also some disease modifying anti rheumatic drugs (DMARDS) like Hydroxychloroquine. these can give symptomatic relief but they have remarkable side effects which may cause complications in the body on chronic use. NSAIDS cause side effects like gastritis, gastric ulcers, GI bleeding and on chronic case cause HTN, renal failure when corticosteroids have all above NSAIDS side effects as well as renotoxicity, IHD, HTN, bone marrow depression , DM.

Therefore it is demand of time to find out alternative therapy which is safe, better effective and having less complications than this remedy. Even it will give symptomatic relief than compete cure rather than this bothersome and fatal side effects. Therefore, there is a much more scope in ancient Indian traditional medicinal system that is Ayurveda. Mostly Ayurveda treat the patient by removing root cause of disease completely not merely treat the symptoms only. Ayurveda includes all the treatment modalities (methods) to treat the disease which are given in modern medicine as well as Homeopathic Treatment. So Ayurveda can be the best option of RA treatment. the sign and symptoms of RA can be correlated to the Aamavata lakshanas such as

Angmarda, Aruchi, Agnimandya, Trishna (Thirst), Alasya, Gaurava (heaviness of body) , Avipak (indigestion), and local shotha (swelling) - Madhaonidan. The term Aamavata includes two words ie. - Aam (biotoxins - Aamdosha) and Vata ie. (biological force ie. impulse conducting force, flow of fluid, blood or elimination of toxic, impure material from body) which cause an acute disease mainly affecting kapha dhosha sites like joints sometimes heart.

In the acute stage of Aamvata, severe symptoms are seen like – vrishik danshavat vedana (Pain like scorpion bite), involvement of multipale joints. As the disease progresses in both abhyantar (internal) and madhyama (middle) rogmarga (Ayurvedic disease pathology of way), it becomes krichhasadhya (difficult to cure) or yappya (long lasting). Chronic progression of Aamvata leads to multiple deformities in joints. Nidanas ie. cause of Aamvata leads to the formation of Aam and vitiation of vata resulting in the symptoms of Aamvata. According to ayurvedic management of Aamvata (RA) is to break the samprapti (ie. pathology) of the disease and removed the root cause (pathogenic biotoxin) of the disease. Ayurvedic treatment modalities like langhan, swedan, virechan, basti and also use of drugs having katu, tikta ras, deepan-phan property which are effective in Aamvata management (Yogratnakar 2007)

Aims & Objectives :-

- To evaluate the effect of Ayurvedic treatment modalities in Aamvata.

Materials & Methods :-

- Literature :- The available references given in the Ayurvedic text are used in the treatment of present case study.
- Case Study :- A 45 years old female patient visited in panchakarma OPD at YCAMC & Hospital, Nippani, Aurangabad (MH) with complaints of pain, swelling, tenderness, morning stiffness in multiple joints. since 6 year
- Case Report :-
 - Name :- XYZ
 - Religion :- Hindu
 - Age :- 45 Years
 - Occupation :- House wife
 - Gender :- Female
 - Diet :- Veg & Nonveg
 - Marrital status :- Married

➤ **VartmanvyadhiVritta (H/O Present illness) :-**

Patient of absolutely fit and no any symptoms of present illness before 6 years. After which she had a gradual onset of pain, swelling and stiffness in metacarpo phalangeal joints, DIP (Distal Phalangeal Joints), PIP (Proximal Inter Phalangeal Joints), Wrist, elbow jonts in right hand and in right ankle joint. Latter on multiple joints were affected. The severe joint pain is there ie. associated with restricted joint movements, early morning stiffness and swelling of joint at present. Patient was on DMARD ie. hydroxychloroquine (HCQS) 200mg OD and also taking steroids on and off but had no satisfactory relief. Hens sea came to Ayurvedic Hospital for Ayurvedic treatment.

➤ **P/H :-** No Past H/O any major illness.

History of Treatment –

She had taken treatment for RA by Orthopaedic Surgeon and general physician. H/O taken pain killers (NSAIDS) for arthritis when required. She was also taking HCQS 200mg OD since 3 months and also taking prednisolone 10 mg on and off when was severe.

➤ **F/H :-** H/O – RA to her mother.

➤ **O/E :-** GC - Fair

- Afebrile, conscious, well oriented.

- P - 74/min RR- 18/min

- BP - 120/70 R/S, CVS, CNS - NAD

- P/A - Soft KLS - NP

Bladder - 4 to 6 time per day and 1 to 2 times at night

- Bowel – opened regularly 1 to 2 times per day.

Local Examination :-

Inspection :- Swelling present on B/L- ankle, wrist and knee joints and also metacarpophalangeal joints.

Palpation :- Tenderness of joints present on B/L on same joints. Restricted, painful movements of joints when manually done. Warm feeling on palpation of joints.

Asthvidha Pariksha :-

- 1) Nadi -(Puse)-Manda (Slow), Regular.
- 2) Malam-(Stool)-Samyak Pravrutti(Opened regularly)
- 3) Mutra-(Urine)-Samyak Pravrutti (regular)
- 4) Jivha-(Toung)- Uplepa (Coated)
- 5) Shabda-(Voice)-Vyakta-Clear
- 6) Sparsha-(Touch)- locally ushna sparsh
- 7) Drik-(Eight sight)- Prakrut(Normal)
- 8) Akrti(Built)-Madhyam(Medium)

Dashavidh Pariksha :-

“तस्माद् आतुरं परिक्षेत प्रकृतीतः च, विकृतीतः च, सारतः च, संहननतः च, प्रमाणतः च, सात्म्यतः च, सत्वतः च, आहार शक्तितः च, व्यायाम शक्तितः च, वयस्तः च, इति बलप्रमाण विशेष ग्रहण हेतोः।” (च.वि.8/94)

- 1) Prakriti (constitution of body) - vatakapha
- 2) vikruti (morbidities changing prakruti) – dosha – vata pradhan tridosha, dushya –ras
- 3) Sara (good and strong quality of every part of our body ie. organs) – madhyam sara.
- 4) Sahanana (mental, physical and immunological power) – madhyam
- 5) Pramana (measurements of organs, body parts) –
- 6) Satmya (Tolerance of habits, diet and environment) – madhyam
- 7) Satwa (Mental power – madhyam
- 8) Ahar shakti (digesting power) – madhyam
- 9) Vyayam Shakti (Workout Power) – Avara
- 10) Vaya (age) – 45 years

➤ **Strotas Parikshan**

- Rasvaha- Aam nirmiti
- Raktavaha-Prakrut
- Mansvaha-Mansa Dhatu kshaya
- Medovaha-Medadhatu Kshaya
- Asthivaha-Sandhishool,Asthidhstukshaya,Sandhishoth
- Majjavaha-Prakrut
- Annvaha-Agnimadhya

Investigations :-

CBC--TLC-7000/cumm ,HB-10.5 gm%,
RBC-4.6million/cumm
ESR - 40 mm/hr(increased) **RA- 60**
IU/ml(increased), Uric Acid-5.2mg/dl,
CRP – 15mg/L. (increased)

Diagnosis :- Aamvata (R.A.) it is diagnosed on the basis of clinical history of patient & symptomatology given in Ayurveda

Treatment :-

A) Internal medications (Abhyantar Chikitsa)

a) Tab. Sinhanad guggul 250 TDS.

Tab. Vata vidhvans ras 250 TDS.

Tab. Asthiposhak Vati 250 TDS.

Maharashnadi Kwath 4 TSF TDS + equal quantity of luke war of water

b) Tab. Ampachak vati 250 BD

before lunch and dinner

c) **Gandharva Haritaki Churna** 1 gm HS With Luke warm water .after 7 days of treatment for upto 30 days.

B) Panchkarm Treatment

- i) Local Snehan - (more on joints) - Vishgarbh Tail
- ii) Ruksha swed – waluka pottali swed
- iii) Lepa – sunthi lepa on affected joints
- iv) Then Vaitran Basti – for 7 days

Note : Abovementioned treatment given on OPD basis for total upto 30 days.

Preparation of medicines :- All medicines were used from a good manufacturing Ayurvedic Pharmacy from Ayurveda Rasashala & Dhoothpapeswar.

Criteria of selection of treatment :-

According to Ayurvedic Management of RA given in Ayurvedic text is selected for the treatment of Aamvata(RA). For local ampachan & Rukshan – used valukapottali swed (Yogratnakar 2007) and sunthi lepa is also given. For the purpose of the deepan, aampachan, strotorodhahar, shothahara, vatanulomak and vatkapha prashaman, sihnath guggule vatvidhvans ras, astiposhak vati, aampacahk vati, maharashnadi kadha, gandharvharitaki churna has given an for an ideal treatment of Aamvata

Fallow up :- After 30 days of completion of treatment.

Pathyapathya :-

Pathya :- Yava, Kulattha, Shigru, Raktashali, Patol, Karvellak, Adrak, Lahasoon, Jaangal mansa etc. (Yogratnakar 2007)

Apathya :- Dadhi, Guda, Kshir, Virudha Bhojan, Vishmashana, Abhishandi and picchila dravya, anup masa, Vegavarodh and Jagran etc. (Yogratnakar 2007)

Grading of assessment of disease :-

The final result of the treatment were assessed on the basis of clinical signs & symptoms mentioned in the Ayurvedic Samhitas as well as by blood investigations performed before and after completion of treatment. The assessment was done on the begining and end of the treatment.

Grading of Subjective criteria :- as shown in the following 1,2,3,4 tabels

Table 1 - Grading of Sandhishoola

Sr.No.	Severity of pain	Grades
1	No pain	0
2	Mild pain in joints	01
3	Moderate pain but slight difficulty in movements	02
4	Moderate restricted movements of joints due to pain	03
5	Severe restricted movements of joints due to pain	04

Table 2 - Grading of Sandhishotha

Sr.No.	Severity of Swelling of joints	Grades
1	No Swelling	0
2	Mild (Slight) Swelling	01
3	Moderate Swelling	02
4	Severe Swelling	03

Table 3 - Grading of Sandhigraha

Sr.No.	Severity of Stiffness (Graha)	Grades
1	No Stiffness	0
2	Stiffness for 5 minuts to 2 hours	01
3	Stiffness lasting for 2 to 8 hours	02
4	Stiffness lasting for more then 8 hours	03

Table 4 - Grading of Sparshasahatwa (Tenderness)

Sr.No.	Severity of Sparshasahatwa (Tenderness) of jonts	Grades
1	No Tenderness	0
2	Mild (Slight) Tenderness but bearable	01
3	Wincing of face on pressure	02
4	Wincing of face with withdrawal of affected part ie. joint	03
5	Resistance to touch	04

Observations & Results :-

The observation & results are displayed in following tables- 5,6,7,8,9,10

The results represent improvement in subjective and objective criteria of assessment of patient.

Assessment of Subjective Criteria :-

Table 05- Assessment of Sandhishoola

Name of Joints	Left		Right	
	B.T.	A.T.	B.T.	A.T.
Knee joints	02	00	01	00
Wrist Joints	04	02	03	00
Ankle joints	03	01	03	01
Metacarpophalangeal &interphaleangeal joints	03	01	03	03

Table 06- Assessment of Sandhishooth

Name of Joints	Left		Right	
	B.T.	A.T.	B.T.	A.T.
Knee joints	03	00	00	00
Wrist Joints	03	00	02	00
Ankle joints	03	00	02	00
Metacarpophalangeal &interphaleangeal joints	03	01	02	01

Table 07- Assessment of Sandhishigruh (Stiffness)

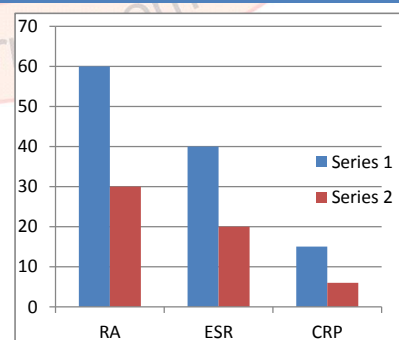
Name of Joints	Left		Right	
	B.T.	A.T.	B.T.	A.T.
Knee joints	02	00	00	00
Wrist Joints	03	01	01	00
Ankle joints	02	00	01	00
Metacarpophalangeal &interphaleangeal joints	03	01	01	00

Table 08- Assessment of Sparshasahatwa

Name of Joints	Left		Right	
	B.T.	A.T.	B.T.	A.T.
Knee joints	02	00	00	00
Wrist Joints	04	01	03	00
Ankle joints	03	01	02	00
Metacarpophalangeal &interphaleangeal joints	03	01	01	00

Assessment of Objective criteria :-

Investigation	B.T.	A.T.
RA	60 Iu/ml	30 Iu/ml
ESR	40 mm/her	20 mm/her
CRP	15 mg/ L.	6 mg/ L.



Note :- B.T. –Blue colour -Before Treatment, Red colour A.T. - After Treatment

Discussion :-

The signs & symptoms of RA are correlated to that of Aamvata. In this case the patient presented with multiple joint pain swelling along with morning stiffness. It can be compared to the Aamvata symptoms like Angamarda, Alasy, Shotha in the sandhi, sndhigraha, sandhishoola. The Ayurvedic modalities of therapy in Aamvata treatment like deppan pachan, shoth, shoolhara, and vatanulomak dravyas were used internally and was found effective. The external therapies like waluka pottali swed, lepa were also found effective. Ayurvedic treatment given in this case was found very effective and withdrawal of steroids and pain killers were completely got possible and advised to stop the used of steroids completely and follow up regularly for ayurvedic treatment.

Conclusion :-

Hence it can be calculated that the combined effect of and external Ayurvedic treatment are found to be effective in management of Aamvata. (RA)

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