

## Ayurvedic Management of Sandhigata Vata (Osteo Arthritis) - A Case Study

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### Abstract: -

*Sandhigatvata (Janu Sandhigatvata), it is called as a Osteo Arthritis (O.A.) in modern science it is a chronic degenerative disease mostly affecting knee joints. There is a pain in joints, swelling, restricted movements, crepts in joints, difficulty in walking or joints movements and tenderness may be present.*

*Ayurvedic treatment modalities of sandhigat vata (O.A.) are a set of various medicines, external local application like Lepa, Agnikarma, Leech Application, Local Basti (Janu Basti), Sghan (Massage), Swedan, Bandhan, Pottali Swed, Upnaha and Internal Medications like basti (Gudagata) and internal medicines like Yograj, Mahayograj guggul, Vatvidhvans ras, Ampachak Vati, Dashmularishta, Astiposhak vati. In this trial, a single case study of (O.A.) was treated as per above said treatment modalities has given significant improvement in (O.A.).*

**Key Words :-** Janu sandhigata vata, Sandhigata vata, Janu Basti, Basti, Snehana, pindaswed.

### Introduction :-

**S**andhigata vata (O.A.) is a chronic painful degenerative condition of knee joints. In Ayurveda, it can be compared with a O.A. in modern science due to similarity of symptoms. In the old advancing of age along with some etiological factors like heavy work, intake of hot, spicy, cold and dried substances in daily diet as well as lack of asthiposhak ahar (diet like milk, calcium containing substances, vitamin D3) which leads to aggravation of Vatadhosha which affects to joints causing degenerative changes in that areas. When these changes occur in knee joints (Janu Sandhi) it is called as janu sandhigata vata in Ayurveda. Both knee Joints are usually more prone to affect as they are weight bearing joints. Most of time in obese patient it is called as a Weight Bearing O.A. in modern science. In sandhigata vata, there is swelling of joints, pain during activity which subsides by rest, warm feeling of joints, restricted movements of joints, stiffness in early morning, crepitation in knee joints are the cardinal symptoms of this disease.

In modern science O.A. is defined as condition of synovial joints characterized by focal loss of articular hyaline cartilage bone with proliferation of new bone and remodeling of joint counter. NSAIDS & Steroids are the main drugs for O.A. in modern science having multiple side effects.

Ayurveda gives good effect or improvement in Sandhigata Vata without side effects with the combination, internal as well as external medication. Treatment modalities of external application includes- Janu Basti, Abhyang ( Local as well as Sarvang) that is oleation therapy, Lepa (External application), Upanaha, Pindaswed (Fomentation by medicated dravya), Agnikarma where as internal medication includes basti (Anuvasan, Matra, Niruha basti), Vatashamak, Shaman Aushadhi (Ayurvedic Medicines). Although patient of sandhigata vata are usually successfully treated in daily practice but the clinical trialed cases are less published. In this case study a single case of Sandhigatavata was treated and effect were observed as per the Ayurvedic parameters and treatment modalities before and after the treatment given in this article.

### Aims & Objectives :-

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

### Materials & Methods :-

- Literature :- The available references given in the Ayurvedic text are used in the treatment of present case study.
- Case Study :- A single case of Sandhigatavata is studied and treated in the department of Panchkarma OPD at YCAMC & Hospital Auragabad.

➤ **Case Report :-**

Name :- XYZ

Religion :- Hindu

Age :- 58 Years

Occupation :- Farmer

Gender :- Male

Diet :- Veg & Nonveg

➤ **Vartmanvyadhi Vritta (H/O Present illness) :-**

A 58 Years male patient complaining of pain in both knee joints since 4r months. He had taken treatment for the same at private hospitals bus had not got relief. So he came at YCAMC & Hospitals Aurangabad in Panchkarma OPD for the Ayurvedic treatment.

➤ **Chief Complaints :-**

- Severe pain in right knee joints since 4 months.
- Crepitation on palpation in right knee joints.
- Mild pain in left knee joint since 4 month.
- Restricted movements in both knee joints since 4 month.
- Difficulty in walking since 4 month.
- mild swelling on both knee joints since 1 month

➤ **P/H :-** Patient is k/c/o HTN since 2 years Taking tab. Telvas 40 mg. OD. No other P/H of other major diseases.

➤ **F/H :- H/O -** HTN to father.

➤ **O/E :- GC -** Fair

- Afebrile, conscious, well oriented.
- P - 80/min PR- 20/min
- BP - 120/80 R/S, CVS, CNS - NAD
- P/A - Soft KLS - NP
- Bladder and Bowel - Opened Regularly.

➤ **Asthvidha Pariksha :-**

- Nadi -(Puse)-Manda (Slow)
- Malam-(Stool)-Samyak Pravrutti(Opened regularly)
- Mutra-(Urine)-Samyak Pravrutti(regular)
- Jivha-(Toung)-Niram(Prakrut)
- Shabda-(Voice)-Vyakta-Clear
- Sparsha-(Touch)-Sadharan(Normal)
- Drik-(Eight sight)-Prakrut(Normal)
- Akrti(Built)-Madhyam(Medium)

➤ **Strotas Parikshan**

- Rasvaha-Prakrut
- Raktavaha-Prakrut
- Mansvaha-Mansa Dhatu kshaya
- Medovaha-Medadhatu Kshaya

○ Asthivaha-

Sandhishool,Asthidhstukshaya,Sand hishoth

○ Majjavaha-Prakrut

○ Annvaha-Prakrut

**Investigations :-** CBC--TLC-9000/cumm ,HB-11.9 gm%, RBC-4.6million/cumm

**RA-** Negative, Uric Acid-4.1mg/dl, Serum Calcium-8.1mg/dl.

**Diagnosis :-** Sandhigat Vata (O.A.) it is diagnosed on the basis of clinical history of patient & symptomatology given in Ayurveda

**Treatment :-**

A)

➤ **Internal medications (Abhyantar Chikitsa)**

**a) Tab. Yograj guggul 250 TDS.**

Tab. Vata vidhvans ras 250 TDS.

Tab. Asthiposhak Vati 250 TDS.

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Dashamoolarishta 4 TSF TDS + equal quantity of luke war of water

**b) Tab. Ampachak vati 250 BD**

before lunch and dinner

**c) Panchkarm Treatment**

i) Local Janu Basti :- Bala tail for half an hour.

ii) Sarvang Snehan (more on both knee joints) - Bala Tail

iii) Then Nadiswaed (Nirgundi + Dashmool)

iv) Then Matra Basti - Tila tail 60 ml.

Abovementioned treatment given on OPD basis for first 15 days.

**B) For next 15 days.**

➤ **Internal medications ( Abhyantar Chikitsa)**

Tab. Mahayograj Guggul 250 mg TDS

Tab. Vata vidhvans ras 250 TDS.

Tab. Asthiposhak Vati 250 TDS.

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Dashamoolarishta 4 TSF TDS + equal quantity of luke war of water

➤ **Panchkarma Treatment :-**

i) Local Janu Basti :- Bala tail for half an hour.

ii) Sarvang Snehan(more on both knee joints) Bala Tail for half an hour.

iii) Then Pindaswaed (Shashtishalic) for half an hour.

iv) Then Matra Basti - Tila tail 120 ml.

Abovementioned treatment given on OPD basis for next first 15 days.

On the first and last day of treatment symptoms ware recorded.

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

**Grading of Assessment of disease of Ayurvedic version :-**

The result of the therapy were assessed on the basis of clinical signs & symptoms mentioned in the Ayurvedic Sanhita as well as by blood investigations performed before and after completion of treatment. The assessment was done on the first day of initiation of treatment.

**Grading of Subjective criteria :-** as shown in the following 1,2,3,4 and 5 tables

**Table 1 - Grading of Sandhishoola**

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

**Table 2 - Grading of Sandhishotha**

Sr.No.	Severity of Swelling	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	Mild (Slight) Stiffness for upto 1-2 hours	01
3	Moderate Stiffness lasting for upto 8 hours	02
4	Severe Stiffness lasting for more than 8 hours	03

**Table 4 - Grading of Sparshasahatwa (Tenderness)**

Sr.No.	Severity of Sparshasahatwa (Tenderness)	Grades
1	No Tenderness	0
2	Mild (Slight) Tenderness but bearable	01
3	Moderate Tenderness with wincing of face on pressure	02
4	Severe Tenderness withdrawal of the affected part & resist to touch.	03

**Table 5 - Grading of Crepitation (Vatadruti sparsha) of joints**

Sr.No.	Severity of Crepitation of joints	Grades
1	No Crepitation of joints	0
2	Mild (Slight) Crepitation feel on palpation	01
3	Moderate Crepitation easily feel on palpation	02
4	Severe, coarse Crepitation with very easily feel on palpation	03

**Observations & Results :-**

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

**Table 06 - Assessment of Sandhishoola**

Name of Joints	Right		Left	
	B.T.	A.T.	B.T.	A.T.
Knee joints	03	01	01	00

**Table 07 - Assessment of Sandhishotha**

Name of Joints	Right		Left	
	B.T.	A.T.	B.T.	A.T.
Knee joints	02	00	01	00

**Table 08 - Assessment of Sandhigraha (Stiffness)**

Name of Joints	Right		Left	
	B.T.	A.T.	B.T.	A.T.
Knee joints	03	01	01	00

**Table 09 - Assessment of Sparshasahatwa (Tenderness)**

Name of Joints	Right		Left	
	B.T.	A.T.	B.T.	A.T.
Knee joints	02	00	02	00

**Table 10 - Assessment of Crepitations (Vatadruti sparsha)**

Name of Joints	Right		Left	
	B.T.	A.T.	B.T.	A.T.
Knee joints	03	02	01	00



**Assessment of Objective Criteria**

Criteria	B.T.	A.T.
<b>CBC</b>	9000/Cumm	7500/Cumm
<b>Sr. Calcium</b>	8.1 mg/ dl	9.8 mg/ dl

Note :- B.T. - Before Treatment, A.T. - After Treatment

**Discussion :-**

The signs & symptoms of Sandhigatvata related to O.A. in modern science. In this place study, the patient was presented with pain, swelling, mild tenderness, stiffness and crepitation of both knee joints. The Ayurvedic classical treatment has given to the patient upto 1 month in different modalities of Ayurvedic treatment. Before treatment patient was taking NSAID or some steroidal drugs was completely stopped after this treatment. patient has got nearby 90 % relief in this case study and advised to follow up the repeated treatment at Panchkarma OPD.

**Conclusion :-**

Ultimately it can be calculated that the combined treatment of conservative medicines (internal medicines) and Panchkarma treatment are found to be significantly effective in the management of Sandhigatavata (O.A.).

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