

Efficacy of Triphala Guggul Along With Nirgundi Sweda in The Management of Sandhigata Vata W.S.R Osteo-Arthritis

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Abstract

Sandhigata vata is a vata vitiated disease, the single most cause of locomotor disability & major challenge to health care. Joint pain is the global problem for patients with almost 70 to 80% of the world population are suffering from it.

Management of joint pain in modern science involves many problems & rarely substantial improvements are achieved. Prolonged administration of NSAIDs and steroids may suppress the symptoms but causes gastric ulcers, kidney dysfunction, and also accelerates the progression of joint pain, in future the condition is advanced & indicated for the surgery.

Operative techniques like tibial osteotomy, arthroplasty, ortho diasia are quite expensive, also better results after surgery are quite uncertain & also follows the complications like blood loss & infection, Deep venous thrombosis, etc.,

In Ayurvedic classics, acharyas have mentioned various shaman procedures, snehan, swedan, lepa, bandhan, agnikarma & raktamokshan are emphasized in Ayurveda to provide better relief from the pain & swelling to restore the mobility, in sandhigata vata, Triphala Guggul along with Nirgundi sweda is effective.

Keywords: Sandhigata vata, Osteo-Arthritis, Triphala Guggul, Nirgundi sweda.

Introduction

I bow to the lotus feet of Lord Dhanvantari who is the first God worshipped by suras & asuras, the healer of problems of old age, physical & mental disorders who is the bestower of different oushadhis (medicinal herbs & drugs)

According to Ayurved there are Tridoshas are Vata, Pitta & Kapha. They protect the body as they are Avikrit i.e. normal & make it sick or dead when they get vitiated. Though they circulate throughout the body forever, vata is mainly seated below the nabhi, pitta in-between the nabhi and hriday, while kapha is seated above the hriday.

Sandhigata vata is a condition characterized by sandhishoola, shophya, atopa & sandhigata laxanas. Sandhigata vata is the commonest form of articular disorder it is type of vata vyadhi. Which is mainly found in vrudhaavastha all dhatus under go kshay thus leading to vata prakop.

The incidence of osteoarthritis in india is as high as 12%. The sandhigata vata begin a symptomatically in the 2nd & 3rd decade & extremely

common by age 70. 25% female & 16% male have symptomatic osteoarthritis.

Today is the era of modernization & fast life every body is busy & living stressfull life changing of lifestyle of modern humanbeing has created several distrubunces with reference to Dincharya & Rutucharya play a vital role in the mainfistation of such degenerative disorders.

Vata is predominant in old age, in the evening, in the late hours of night & at the end of digestion. Pitta will be predominant in youth, middle age, in middle one third of the night, middle one third of the day & during digestion, whereas kapha will be more in childhood, early morning, early hours of night, & immediately after meals.

In modern science treatement have pain killer, NSAID & in ayurveda have snehan, swedan, basti, churna, gutika, sthanik lepan have useful treat to sandhigata vata.

Case Study - patient description in historical examination

a 67 year male patient suffering from both janusandhishula, janusandhishoth, sandivedana on

prasaran and ankunchana. and came to our kayachikitsa OPD department at R.N. LAHOTI AYURVEDIC COLLEGE AND HOSPITAL, SULTANPUR DIST. BULDHANA.

Chief Complaint -

- both janusandhishula 4 score
- janusandhishoth 3 score
- sandivedana on prasaran and ankunchana 2 score
- vata purna drutisparsha 1 score

Scoring pattern —

A) Subjective Criteria

Symptoms	Severity	Score
SANDHI SHULA (PAIN)	Severe difficulty in walking & sitting due	4
	Slightly difficulty in walking due to pain	3
	Moderate pain but no difficulty to walking	2
	Mild Pain	1
	No Pain	0
SANDHI VEDANA ON PRASARANA AKUNCHAN	Doesnt allow passive movement	4
	Present complete flexion	3
	Pain with winching of face	2
	Pain without winching of face	1
	No Pain	0
VATA PURNA DRUTI SPARSHA	On sparsha skin filled with more air	2
	On sparsha skin filled with air	1
	On sparsha skin not filled with air	0

B) Objective Criteria :

Severe swelling : No bony part are visible with severe swelling	3
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Sandhi Shoth	Moderate Swelling: joints parts are less visible with moderate swelling	2
	Mild swelling : Joints parts are visible with mild swelling	1
	No swelling : All parts of joints are visible clearly without swelling	0

Overall Assesment

Grades	Efficacy	Amount of relief
1	Excellent	100% relief in sign and symptoms
2	Marked	>75% and 75% relief in sing and symptoms
3	Moderate	>25% and <75% relief in sing and symptoms
4	Mild	>25% relief in sing and symptoms

Investigation of patient -

- body wt- 67 kg
- HR-72, RR- 18,BP-130/70 mmhg
- Hb-15.7 gm%
- TLC -6500cumm
- RA test - Negative
- Systemic examination -
- CVS-s1s2 Normal
- RS - AEBE, clear
- CNS - concious and orianted
- palpitation - swelling over both knee joint

Astavidha pariksha -

- nadi - 70 per min
- mutra- 4 to 5 time
- mala - regular one per day
- jivha - sam
- shabd - aatur
- sparsha - Ushnasparsh
- Dirk - snigdh
- Aakruti - madhyam

Samprapti - nidan sevan → vata dushti → vata prakop → datukshaya and kha vaigunya in bothjanu sandhi (knee joint) → Sandhigata vata

Treatment schedule – Triphala Guggul BD along with Nirgundi Sweda BD in duration of 30 day.

Discussion And Conclusion :

Discussion will be done on basis of observations, Statistical analysis of data and conclusion will be drawn and will be presented in final dissertation.

Result

- After completion of 1 month treatment.
- Sandhi shool = 0
- Sandhi Bhedana on prasara & ankuchan = 0
- Vat purna druti sprasha = 0
- Sandhii shodh = 0

so effect of Triphala Guggul along with Nirgundi sweda. in the management of Sandhigat Vata.

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