

AYURVEDIC MANAGEMENT OF VATARAKTA W.S.R. GOUT: A CASE REPORT

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ABSTRACT

Vatarakta is one of the main metabolic articular diseases. It is a *Tridoshaja vyadhi* with *vata pradhanyata* and *rakta* as main *Dushya* which is characterized by severe pain, stiffness, swelling inflammation and burning sensation in the affected joint. Main etiological factor of *vatarakta* are bad food habits, consumption of non-vegetarian and highly protein diet, excessive alcohol intake and sedentary life style. The etiology and symptomology of *vatarakta* is very much similar to the gout. In gout, monosodium urate crystals deposit in joints and peri-articular tissues. Hence the present clinical study aims to evaluate the efficacy of combined effect of *Pathyadi Kashaya* in the management of *Vatarakta*.

Keywords: *Vatarakta*, metabolic, *vata*, *rakta*, gout, urate crystal, Peri-articular, *Pathyadi Kashaya*

INTRODUCTION

Ayurveda considers '*Vata*' as responsible for movements of whole body, pressure forces and impulses. "*Rakta Dhatu*" represents blood and associated metabolism. *Acharya Charak* describes *vatarakta* in *chikitsa sthan* in separate chapter¹ while *Acharya Sushruta* describe it among *Vatavyadhi*². *Vatarakta* is the major example of *Vatavyadhi*, caused due to *Avarana* pathology. Because of *Dravatva guna* of *rakta* and *charatva guna* of *vata*, *rakta* and *vata* move all over body. Because of the tourtous nature of the course in the joints, the morbid matter gets lodged there³. Being localized in joints, *kapha* and *vata dosa* get aggravated and associated with *pitta* and *kapha*. The disease produces different type of pain. The etiology and symptomology of *Vatarakta* is very much similar to the gout.

Gout is a true crystal deposition disease. It can be defined as pathological reaction of the joint or periarticular tissue due to the presence of monosodium urate monohydrate crystals. MSUM crystals deposit in peripheral connective tissue in and around synovial joint, initially favouring lower rather than upper limbs and especially targeting the first metatarsophalangeal and small joints of feet and hands⁴. Main etiological factor of gout are bad food habits, consumption of non-vegetarian and highly protein diet, excessive alcohol intake and sedentary life style. Uric acid is end product of purine metabolism. Purine is derived partly from the diet and partly from endogenous metabolism. In the liver, nucleic acid and purine nucleotides are degraded to from the purine base-xanthine and hypoxanthine. These are oxi-

dized to from uric acid by enzyme xanthine oxidase. The urate circulates in plasma to be excreted mainly by the kidney. A smaller amount is secreted into the gut. Normal plasma level of uric acid varies from 2-7 mg/dl in healthy person. The term hyperuricemia denote value above 7 mg/dl in men and 6 mg/dl in female⁵. Male is more prominent than female. High Uric Acid elevated in blood or hyperuricemia is the universal factor present in Gout. When high uric acid present in blood without causing any symptoms, it is called Silent or Asymptomatic stage. At other times, high uric acid levels in blood causes different type of problems such as severe pain, stiffness, swelling inflammation and burning sensation in the affected joint, kidney stones, gouty arthritis when urate crystals gets deposited in joints and surrounding tissue (Tophus).

CASE STUDY

A 31 year old male medical student patient came to Kayachikitsa OPD of M.M.M. Govt. Ayurveda College & Hospital, Udaipur on 14/08/2018 (OPD Number-24493).

Main Complaints: C/o suffering from mild pain, inflammation and stiffness in metatarsophalangeal joints of both lower limb. Patient has been suffering from this problem since 6 months. No other associ-

ated symptoms & other systemic diseases were noted.

History of Present illness: Pain was felt 6 months before. Later on it was observed that pain becomes severe during mid-night and gradually decreases after about 2 hours.

- Duration of pain: severe for 2 hours, mild remains for rest of the day.

Personal History: Unhealthy food habits and schedule, stressful and excessive works load, late night sleep and life style without proper exercise.

Past History: No history of osteoarthritis, Rheumatic arthritis, HTN and other systemic disorders found.

Family History: Not significant.

Past Treatment History: patient had pain in right metatarsophalangeal joint before 6 months. He went to orthopedic surgeon of the hospital he was working. He was advised to take analgesic twice a day for 3 days. Mild relief was found. After 15 days, pain in left metatarsophalangeal joint was felt. He took analgesic as self-medication. No sustainable relief was found. After taking analgesics SOS for months to get relief from the pain, he was diagnosed with gout and was advised to take *ayurvedic* medicine.

Patient came to our hospital with report of increased uric acid. For confirmation uric acid test along with some other was repeated.

Table 1: Investigation before treatment-

| | |
|-------------------|------------|
| Total cholesterol | 206 mg/dl |
| Triglycerides | 177 mg/dl |
| VLDL | 35 mg/dl |
| Uric Acid | 10.2 mg/dl |

Table 2: *Astavidha Pareeksha:*

| | |
|----------------|------------------------------|
| <i>Nadi</i> | 68/min |
| <i>Mutra</i> | 5-7 Times / Day |
| <i>Mala</i> | One Times /Day |
| <i>Sparsha</i> | Affected joits slightly warm |
| <i>Drik</i> | Normal |
| <i>Jihva</i> | Uncoated |
| <i>Sabda</i> | Normal |
| <i>Akriti</i> | Normal |

Vital Signs -BP-110/72, RR-18/Mint.

Final Diagnosis: Again increased level of uric acid was found out. So gout is confirmed.

Treatment:-

Initially he managed with dietary restrictions and increase in cholesterol level gets stopped but it did not show a major decrease of uric acid.

Patient when came to hospital, was treated on OPD basis with oral medications *Pathyadi Kashaya*⁶ for 30 days.

Method of preparation of drug-

- All the ingredients (*Haritaki, Guduchi kwatha with mix Gudda*) are collected after proper authentication of Identity.
- The useful parts and the ratio of the individual ingredients are as per classical reference. (Two *Pala* of drug (*Haritaki, Guduchi*) +16 part of water boiled and reduced to 1/8th of the original quantity)

- *Kashaya choorna* is packed into *Kashaya* packets of 25gm.
- Patients were asked to prepare fresh *Kashaya* every morning.
- Patients were advised to take 48ml *Kashaya* with mix *Gudda* daily, before food for a period of 30 days. (Self-made *Kashayam*)

Type of study: Single blind randomized clinical study

Observations: Patient was treated with above medicine from 14 August to 17 September 2018. Patient was examined before and after treatment and laboratory investigations were conducted. Results of before and after treatment is as follows:

Subjective findings: Patient suffering from foot, toe, ankle joint pain, stiffness and burning sensation complete disappears.

Objective Findings: Investigation parameters before and after treatment are as mentioned below in Table No.-3:

| Factors | Before treatment | After treatment |
|-------------------|------------------|-----------------|
| Total cholesterol | 206 mg/dl | 162 mg/dl |
| Triglycerides | 177 mg/dl | 152 mg/dl |
| VLDL | 35 mg/dl | 30.4 mg/dl |
| Uric Acid | 10.2 mg/dl | 6.4 mg/dl |

Diet and life style modifications: - Patient is advised to avoid incompatible food items, junk /fast food, excessive spicy oily-salty food. Patient is advised to avoid (*Divashayan*) day time sleep. Patient is suggested to light and easily digestive food like-*Puran Yava, Godhum, Nivara, Shali/Shastic rice and Viskar and Pratuda Mansa Ras*⁷.

DISCUSSION

Haritaki particularly use in *vata* imbalance condition and support healthy digestion. Five *Ras* are found in *hatitaki* except *Lavana Ras*. *Madhura, Lavana Ras* help remove excess *Vata*. *Madhura, Tikta Ras* pacify excess *Pitta*. *Tikta, Kashaya Ras* remove excess *Kapha*. *Haritaki* removes toxin from the body and is useful to treat other *Vyadhi*. *Guduchi, Haritaki,*

gudda all drugs are *Usna Virya* property they help remove of *Avaran* of *Vata*. *Guduchi* is the main drug of choice for *vatarakta*. *Vatarakta* being a *Raktavahasroto Vyadi, Raktavahasrotogami* property of *guduchi* may be helpful here. *Tinosporine* alkaloid is found in *guduchi* it is a natural diuretic agent which may aid in the excretion of serum uric acid. It is also analgesic and anti-inflammatory effects. *Guduchi* is having *Tikta as Pradhana Ras* and *Sheeta guna*, this property useful in relive *Raktadusti*. These herbs act together in synergistic effect and result much better than single drugs. These drugs are virtue of *deepana, pachana* and *rechana guna* which modulates metabolism at *dhatu* level by *agni deepana, amapachana, stroto shodana*.

CONCLUSION

From this study we can conclude that the disease *Vatarakta* is due to the lifestyle metabolic disorder, the patient is leading and mainly because of the bad food habits and lack of exercise. Hence we advised him to do exercises and proper diet. All the drugs we used in this particular *Kashaya* have *Vataraktahara* property and majority of drugs are *lekhana*, *rooksha*, *teekshna* in nature, thus penetrating into the deeper channels and removing *sanga* or obstruction. Combined effect of drugs gives more effective treatment.

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