

A CASE STUDY OF TAMRASHALAKA AGNIKARMA IN THE MANAGEMENT OF JANUSANDHIGATA VATA (OSTEOARTHRITIS OF KNEE)

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ABSTRACT

Janusandhigata Vata a common Condition which can be correlated with osteo-arthritis of Knee Joint. *Shula* (pain), *Shotha* (swelling), *Sparshashatva* (Tenderness), *Ankunchana* and *Prasaranajnya Vedana* (Pain during extention and flexion), *Sandhisphutan* (tenderness), *Sakasthachalan* (diffecuity during walking) are observed in number of patients. There are Variety of medical, surgical & Para surgical procedures in the management of *Janusandhigata Vata* . These treatments modalities are either expensive or not available for common people in developing countries. As the reference of *Acharya Sushruta Janusandhigata Vata* can be correlated with *Snaya* (muscle tendon) *Asthi*(bone) *Sandhi* (joints)*Aashrita*, so the patient should be kept under *Agnikarma*(therapeutic burn) therapy up to a satisfactory level of relief from *Shula* and above symptoms. **Material & Methods:** Patient was selected from the Panchakarama OPD of BVDU'S Ayurved Hospital, Pune. Tamrashalaka was purchased from Pune Market. Agnikarma was done on maxim um area of tenderness on Knee Joint for 7 days daily. Assessment was done on 0, 7th, 15th & 30th day. Gradation in signs and symptoms were recorded before and after treatment. **Conclusion:** *Agnikarma* therapy is helpful in management of local pathological diseases. Agnikarma procedure proves to be one of the easiest ways to reduce the *Janusandhigata Vata* Symptoms.

Key words : *Tamtrashalaka* → *Agnikaram* → *Janusandhigatavata* ↓

INTRODUCTION

Shula, *Ankunchana* and *Prasaranajnya Vedana*, *Sprashasahatva*, *Sakasthachalan* and *shotha* is common complaint which is often received from mostly in Female. There are various conditions causing Obesity, post menopausal condition, continues Standing Position. In patients belonging to middle-aged groups, *janusandhigata Vata* is commonly observed. The exact pathology of *Janusandhigat vata* is not known but it is more often seen in female between 40 to 70 years of age who are more post menopausal condition. There is an early morning stiff-

ness, restricted movement, pain and tenderness swelling in knee joint. To get relief from pain, injection of Hydrocortisone should be made at the most tender spot. If this fails then surgery for knee joint lastly is indicated. But all these measures have side effects, complications and are time consuming. Moreover they do not give permanent cure for the disease. It is therefore, very uneconomical for a common people to afford all these costly measures. According to *Acharya Sushruta* knee joint pain which is caused by vitiated *Vata Dosh*a due to constant standing, post meno-

pausal condition, obesity and walking on uneven surface resulting into pain in Knee joint. *Sushruta* also mentioned that the disease *Janusandhigata Vata* is *Snayu Asthi Sandhi Ashrit* and such diseases should be treated with massage, poultice, *Agnikarma*, *Bandaging* and massage up to a considerable relief from pain. Hence a case study of *Tamrashalaka Agnikarma* in management of *Janusandhigata Vata* was selected.

Case Study:

Here we shall study a case of a 48 year aged patient house wife who visited to OPD of *Panchakarma* Department of Bharati Vidyapeeth Ayurved Hospital Dhanakawadi Pune-43 on 30th September 2013 with complaints of pain, tenderness, restricted movements and early morning stiffness, *sakasthchalan*, *Shoth*, *Swelling* in the both knee joint. There was history of previous treatment for *Janusandhigata Vata* under private orthopedic surgeon since the last six months. The history suggested that she had received analgesic, anti-inflammatory, steroid and two sittings of hydrocortisone injection but without any significant and satisfactory relief, hence after. Routine Blood investigation and x-ray examination (Osteophytic, space reduction and osteoporotic changes are seen) of knee joint were done and all investigations were found normal only. After careful assessment and examinations patient was diagnosed with *Janusandhigata Vata* and it was decided that this be treated with *Tamrashalaka Agnikarma Chikitsa* continues on maximum tenderness area for seven days up to complete relief from pain and other symptoms. Patient got relief from pain, stiffness, *sakasthchalan* after completion after 3 days. After the completion 7 days sitting patient got relief from early morning stiffness whereas tenderness and

restricted movement and swelling were relieved without any adverse effects being observed throughout the entire sittings. To observe any recurrence of symptoms patient was followed up to 1 month but recurrences of symptoms were not observed. Patient was fully satisfied with *Agnikarma Chikitsa* as compared to previously treated with modern modalities.

Procedure of Agnikarma :

After taking inform written consent the affected part was cleaned with lukewarm water. It was then wiped with dry sterilized cotton gauze. Red hot *Tamra Shalaka* was used for making *Bindu Dahan Vishesh* and 6-10 *Samyak Dagdh Vrana* were made by *TamraShalaka*. It is to be noted that a proper space between two *Samyak Dagdh Vrana* should be kept after making *Samyak Dagdh Vrana*. Also, the *Goghrita* should be applied on that to get relief from burning sensation. Above procedure was repeated for 7 days at maximum area of tenderness on knee joint and patient was advised to apply the *Goghrita* at bed time up to normal appearance of skin.

DISCUSSION

Janusandhigata Vata can develop due to Obesity, Post menopause calcification of bone and continues standing, resulting Pain, Swelling, tenderness, early morning stiffness and restricted movements in knee joint. As per *Ayurvedic* concept, this condition may develop as the vitiation of *Vata* with *Anubandha of Kapha Dosha*. *Vata* and *Kapha Dosha* have been considered as the important factors for causation of *Shotha* (inflammation) and *Shoola* (pain) in the knee joint.

Agnikarma Chikitsa introduces heat in the affected area. This heat is *Ushna*, *Tikshna*, *Laghu*, *Sukshma*, *Vyavayi* and *Vikashi* in *Guna* which is helpful to break the *Kaphanubandha* thus reducing *shoth* and ultimat-

ly *Vata Dosh*a gets neutralised so that *Shool* (pain and tenderness) is relieved. To manage such a condition *Agnikarma Chikitsa* is creditable treatment.

CONCLUSION

1. *Agnikarma* therapy is OPD procedure.
2. *Agnikarma* therapy is mostly helpful in management of local pathological diseases.
3. During procedure of *Agnikarma* one should not exert excessive pressure unless it will produces *Atidagdha vran*a.
4. Scar of *Dagdha Vran* produced by *Agnikarma* disappeared within 3 weeks.
5. Number of sitting of *Agnikarma* depends upon persistent and severity of the disease.

Thus from the above study it can be concluded that *Agnikarma* procedure proves to be one of the easiest way to reduce the *Janusandhigata Vata* Symptoms.

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a) During *Agnikarama* (1st day)

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Photo (during treatment):



b) After *Agnikarama* (7th day)

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