

STUDY THE EFFICACY OF SHWADAMSHTRADI TAILA MATRA BASTI IN SANDHIGATA VATA –NIRAMA AVASTHA WITH SPECIAL REFERENCE TO JANU SANDHI

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ABSTRACT

“In Ayurveda, *Sandhigata vata* is given as a *Vatavyadhi* and it is also believed that any type of pain cannot be without presence of *Vata*. In Ayurvedic classics, our *Acharya* have given so many special therapeutic procedures for specific disease along with thousands of medicaments *Acharya Charkas* has mentioned common treatment for *Vatavyadhi* i.e. repeated use of *Snehana*, *Svedana*, *Basti* and *mrudivirechana*¹. Among these *panchakarma*, here *Matrabasti* is such a *chikitsa* that is applicable in all the *Vatavyadhi*. *Sandhigata vata* is a *vatika* disorders and *vata* is also control and regulator of other two *dosha*, *dhatu*, *mala* and also all the body activities. Therefore once *vata* is controlled by *Matrabasti* (*Snehana*) all these factors are automatically regulated and total body equilibrium is achieved. There are many *siddhataila* used for *Sandhigata vata*. *Shwadamshtadi taila* (*vangasen samhita-vatrogadhikar*) is one of them. Hence we decided to study effect of *Shwadamshtadi taila Matrabasti* in *Sandhigata vata* with special reference to *jannusandhi*. For that, having *Sandhigat Vata* was selected for the research work. Total 30 Patients were selected. Clinical trials were conducted on them. Clinical Data obtained from the trial was analyzed with paired t test & the results are presented.

Key words: *Sandhigatvata*, *shwadamshtadi tail*, *matrabasti*, *Jannusandhi*

INTRODUCTION

Today is the era of modernization and fast life. Everybody is busy and living stressful life. Changing of life style of modern human being has created several disturbances in his biological system. Advancement of busy, professional and social life, improper sitting posture in offices, continuous work in one posture and overexertion, With reference to the *Dinacharya* and *Rutu-*

charya the norms of daily routine in present day situation are quite contradictory.

With more and more use of vehicles, disturbed eating habits, unnecessary excessive traveling, improper time schedule of sleep and work all have lead to increase in the *Vata dosha*². *Sandhigat Vata* is one of the end result of above routine Faulty dietetic; habits and irregular life style is responsible for early degenerative changes in bodily tissue and

play a vital role in the manifestation of such degenerative disorder. In this way, this disease is now becoming a significant threat to the working population. The trouble of Sandhi by Prakupita Vata is the main phenomenon in Samprapti of Sandhigat Vata. Sandhis come under the Madhyama Roga Marga and thus, involvement of Madhyama Roga Marga, Vata Dosha and Dhatukshaya figures disease Kashta Sadhya. In this point of view, Ayurveda has a unique approach to cure i.e. two fold strategies comprising of 1) Samshodhana³ or Biopurification by Panchakarma therapy & related measures. 2) Samshamana or Palliation of imbalances by appropriately planned diet, drug, & life style interventions. To give the definition of Samshodhana therapy, Acharya Hemadri has said that the method by which the vitiated Doshas are eliminated out of body is known as Shodhana Chikitsa. Out of Panchkarmas, Basti Chikitsa is most important as it radically pacifies the morbid Vata⁴, the sole Dosha, responsible for the movements of all Dosha, Dhatu and Mala within the body. Basti is the only Karma, which covers Rasayana and Vajikarana in its ambit and removes Doshas out of all three Rog-Margas. Charkas apply highlighted the glorified designation of Basti⁵. Conclusively Basti, indeed, is the half of the entire management of diseases. In Ayurveda, Sandhigatavata is given as a Vatavyadhi and it is also believed that any type of pain cannot be without presence of Vata. In Ayurvedic classics, our Acharya have given so many special therapeutic procedures for specific disease along with thousands of medicaments Acharya Charka has mentioned common treatment for Vatavyadhi i.e. repeated use of

Snehana, Svedana, Basti and mruduvirechana. Among these panchakarma, here Matrabasti⁶ is such a chikitsa that is applicable in all the Vatavyadhi. Sandhigatavata is a vatika disorders and vata is also control and regulator of other two dosha, dhatu, mala and also all the body activities. Therefore once vata is controlled by Matrabasti (Snehana) all these factors are automatically regulated and total body equilibrium is achieved. There are many siddhataila used for Sandhigatavata. Shwadamshtredi taila (vangasen samhita-vatrogadhikar) is one of them. Hence we decided to study effect of Shwadamshtredi taila Matrabasti in Sandhigatavata with special reference to janusandhi.

AIM & OBJECTIVES:-

To study the efficacy of Shwadamshtredi taila matra basti in sandhigata vata –nirama avastha with special reference to janu sandhi

MATERIAL AND METHODS:-

The objective of the dissertation is to study the efficacy of Shwadamshtredi taila matra basti in sandhigata vata – nirama avastha with special reference to janu sandhi.

Clinical study –Patients having janusandhigat vata were selected for the research work. Total 30 Patients were selected. Clinical trials were conducted on them. Clinical Data obtained from the trial was analyzed with pair t -test method & the results are presented.

SELECTION OF PATIENTS: -

All patients of Janu Sandhigat Vata who will be attending OPD of tarachand hospital, Pune, will be selected irrespective

of sex, religion, economical status, education, occupation etc

INCLUSION CRITERIA: -

1) Patients having textual symptoms of *Sandhigata vata*⁷ - *nirama avastha* with special reference to *janu sandhi* will be taken as a subject to study.

- *Sandhi Shoola*
- *Sandhi Shotha*
- *Vatapurna Druti Sparsha*
- *Graha* (Restricted movement)

2) Sex: Male & Female

3) Age: 20 to 70Years.

4) Patient who will give written consent.

EXCLUSION CRITERIA:

- Patients with other joints deformities or diseases which are not related to *Janu Sandhigata vata*, such as

Amavata, Vatarakta.

- Fracture of Knee joint, and needs surgical care will be excluded.
- Auto immune diseases –Ankylosis spondylitis
- Neoplasm
- Permanent joint damage.
- Known cases of Cardiac disease, Pulmonary TB, Pregnancy, DM, Paralysis, HIV, Neurological disorder etc.
- Having severe crippling deformity.
- Age <20 yrs. & >70 yrs.

WITHDRAWAL CRITERIA:

1. Occurrence of Serious adverse events.
2. The investigator feels that the protocol has been violated or Patient has become incorporative.
3. Further continuation of the study is likely to be detrimental to health of the patients.

4. Patients absent for continuous 2 follow-ups will be considered as dropped out from this project.

5. The patients are not willing to continue the trial.

Method of administration

1. Form: *Matra Basti.*

2. Dose: 60ml.

3. Kala: Just after breakfast in the morning.

4. Duration of therapy: For 7 days

5. Follow up: 7 day, 14th & 28th days.

Procedure

Purva karma: The patient was oiled with sesame oil. Oil was applied on *Kati* (Lumber) *sphika* & *Udara pradesha* this is *sthanica Abhyanga*. Then sudation was given on the same point by *Nadisweda* called *sthanic nadisweda*

Position of patient:-

Patient was asked to lie down in left lateral position i.e. left leg was asked to keep straight and right leg flexed (knee it and hip it). This position is important because *Grahani, Pakvasaya, Guda*, lie on left side & becomes on one level.

Pradhan Karma of process of giving Basti:

Koshna (look warm) Shwadamshtadi tail was loaded in Glycerin syringe. It was then tied with rubber catheter. The column of catheter was filled with oil and thus no air was confirmed. *Shwadamshtadi taila* was applied to anal opening and catheter tip. Rubber catheter is introduced per rectum. The patient was asked to take deep inspiration as this help relax the anal opening helps facilitated the entry of catheter. Then the syringe was pressed by piston and gets pushed and oil can enter the *Pakvasaya* with equal balanced force.

Pashchatkarma:

The *tadan karma* at *pritha*, *sfika*, *nitamba* was done. The patient is kept comfortably in the lower abdominal position (prone position)

Dravyas used:-

- 1) *Gokshur swaras* (*tribulus terrestris*)
- 2) *Arrdrak swaras* (*zingibar officinalis*)
- 3) *Tila Taila* (*Sesamum indicum Linn*)
- 4) *Guda*
- 5) Cow's milk.
- 6) Water. s

PREPARATION:

Shwadamshtadi taila prepared as per described in Ayurvedic samhita, by Following methods.⁸

The essential components were taken as follows.

- A) *Gokshura swarasa*:- 1 Adhak
- B) *Godugdha* (cow's milk):- 1 Adhak
- C) *Sneha* i.e. *Tilataila*:-2 Prastha
- D) *Ardraka*:-5 pala

Guda:-20pala

Whereas,

1pala=46gm

1prastha=750gm

1adhak=3lit or 3kg.

The above mentioned drugs mixed together. *Tilataila* and *Godugdha* added, boiled and stirred well continuously so that the *kalka* will not adhere to pot.

When all the *Drava dravya* have evaporated and *samyaka sneha siddhi lakshan*⁷ observed, *Madhyama snehapaka* is done.

Methods of assessment of symptoms

Assessment of Shotha -

Shotha can be measured. So it is an objective parameter.

In this study *shootha* of *janusandhi* was measured at 3 levels in cm.

Level A – At the upper level of joint,

Level B - At the centre of joint,

Level C – At the lower level of joint

All measurements were taken. Mean calculated & Effect of a trial is calculated in terms of difference between the Shotha before treatment and after treatment.

Assessment of Graha –

It is a subjective parameter which can sometimes be objective. Because when a patient can move his leg up to a certain limit and then suddenly further movement of the joint is not possible because of the stiffness then it is easy to decide the grade of the stiffness. The angle of the joint up to which the joint moves can be measured for assessment in such condition. But when a patient feels stiffness in all positions of the joint and can move it anyhow but with difficulty then how can angle be measured? Moreover in the case of *amavata* Graha markedly varies with time to time and also in the nature. So to avoid the fallacies and to make it an objective criterion following gradation was adopted-

Grade	condition
No stiffness	0
Mild stiffness	1
Moderate stiffness	2
Severe difficulty due to stiffness	3
Severe stiffness more than 10 mins.	4

Patients were grouped accordingly before & after treatment. Proper calculations were done as per that of pain chart and assessment of efficacy was done.

Assessment of Crepitus/ Vatapura Druti Sparsha –

It is done with following gradation -

Grade	condition
0	-No Crepitus
1	- Palpable Crepitus
2	- Palpable Audible Crepitus
3	-Always audible

Patients were grouped accordingly before & after treatment. Proper calculations were done as per that of pain chart and assessment of efficacy was done.

side.'0' indicates complete relief while 10 indicate severe pain other symptoms, patient were asked to grade their severity of pain and allied complaints. Marking was defined accordingly in number.

Visual analogue scale-

There is 10 cm long scale for assessment of overall relief. There is '0' marking on left hand side and '10' marking on right hand

VAS 0 _____ 5 _____ 10

TABLE NO: 1 VISUAL ANALOG SCALE.

Observation	Visit 1	Visit 2	Visit 3	Visit 4
VAS Score				

Calculation were done according to following formula

$$\text{Percentage of relief} = \frac{\text{Ibt} - \text{Iat}}{\text{Ibt}} \times 100$$

Where, Ibt – intensity of symptom before treatment,

Iat - intensity of symptom after treatment

TABLE NO: 2 ASSESSMENT OF SHOOLA (PAIN)

Sandhishoola	Grade
None	0
Mild	1
Moderate	2
Severe	3
Extreme	4

$$\text{Percentage pain/Symptoms relief} = \frac{\text{IPo} - \text{IPL}}{\text{IPo}} \times 100$$

Where, IPo -is intensity of Symptoms before treatment

IPL - is intensity of Symptoms after treatment

OBSERVATION:

TABLE NO: 3 SYMPTOM WISE ASSESMENT BEFOR AND AFTER TRETMENT.

Symptoms	BT	AT
<i>Shool</i>	2.5	1.21
<i>Shotha</i>	2.46	1.16
<i>Vatapurnadrytisparsha</i>	1.06	0.43
<i>Graha</i>	1.66	0.78
VAS	7.7	3.06
OXFORD PAIN	2.7	1.26
Overall assessment Score	18.08	7.9

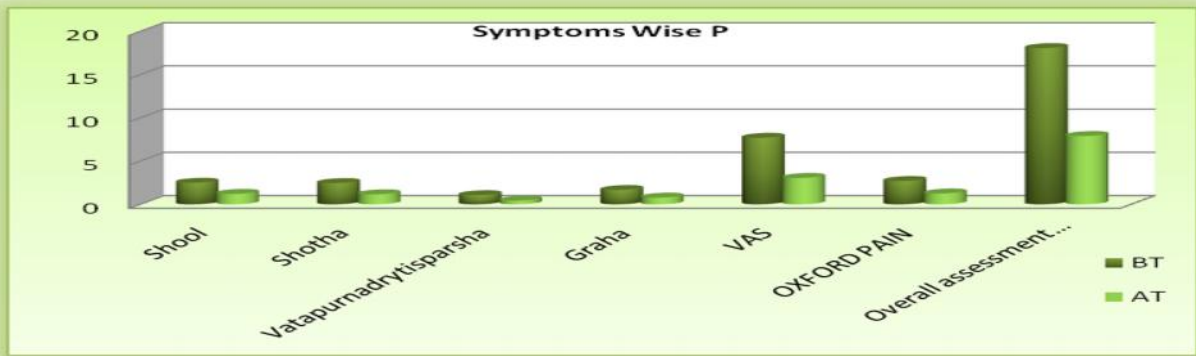
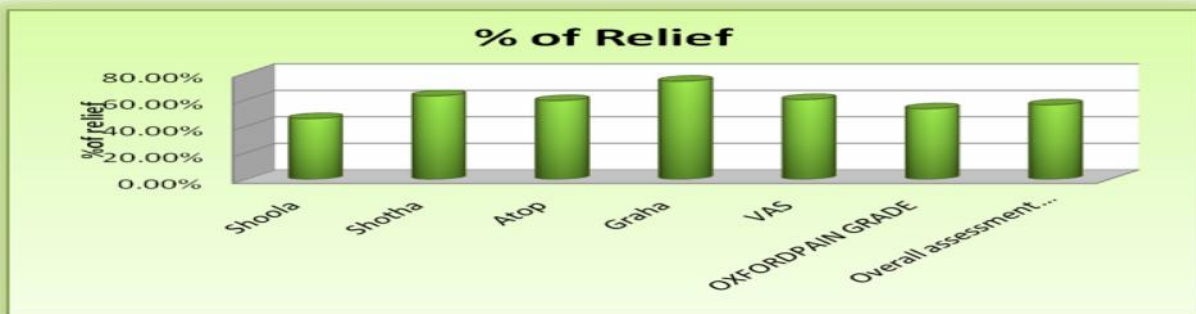


TABLE NO: 4 RELIEF IN PERCENTAGE

Symptoms	% of Relief
<i>Shoola</i>	45.90%
<i>Shotha</i>	63.03%
<i>Vatpurnadrutisparsha</i>	59.43%
<i>Graha</i>	74.09%
VAS	60.25%
Overall assessment Score	56.30%



DISCUSSION

The objective of the dissertation was to study the efficacy of *Swadamshtardi taila Matra Basti* in sandhigatvata. In this clinical study 30 patients were registered. Clinical trials were carried methodically & proper record of the observations was maintained. All the observations were observed thoroughly. The data is discussed as follows.

1. Age: - According to age, highest number of patients i.e. 13(43.33%) of were in the age group of 41-50, followed by 9(30%) in the age group of 51-60. Maximum patients were belonging to 40-60 years. It can be said that this age group correlates with "Madhyam vaya" of Hani stage (i.e. 40-70yr) according to *Sushruta*. Degenerative process starts at this age.
2. Sex: - In this study 19(66.33%) patients were female & 11 (36.66%) patients were male. According to this observation it can be said that *sandhigatavata* is most common in female.
3. Occupation: - The occupation of the patients indicate that 17(56.66%) of the patients were housewives, 13(43.33%) patients were doing some job mostly sedentary in nature. Majority of the housewives are busy in some activity or the other. Their work profile includes all most all activities related to house keeping. They may have to work in some odd postures. This excessive activity & *Vishamcheshta* may lead to *Dhatukshya* resulting in to *Vataprakopa* there by manifesting *Sandhigatvata*. In patient having sedentary jobs due to lack of activity, there by putting on weight again lead to *Dhatukshya* & then *Sandhigatvata*.
4. Diet: - Maximum number of patients i.e. 19(63.33%) were taking mixed type of diet & 11(36.66%) patients were vegetarians. This does not seem to have any important role to play as far as *sandhigatavata* is concerned because *Ahara* is responsible when it is not taken in proper *Matra, Agni, and Kala*. As the sample size is small, the observations are not capable to conclude the disease is more prone to patients taking any specific type of diet.
5. *Prakruti*: - All the patients in this study were having *Dwandwaja prakruti*. Maximum number of patients i.e. 14 (46.66%) were having *vata kaphaja* while 12(40%) having *vata pittaj prakruti*, & 4(13.34%) were having *pitta kaphaja prakruti*. Thus it can be concluded that vata dominant patients suffer more from *sandhigatavata* & prognosis may be poor in them as *prakruti* & dosha involvement is same. In patients having *kapha pittaj prakruti* prognosis may be good as *prakruti* & dosha involved are not same.
6. *Malpravartan* (Bowel Habit): 21patients (70%) were having irregular *Malpravartan*, while 9(30%) patients had regular *Malpravartan*. Irregular *Malpravartan*, constipation is considerable as factor, as it obstructs the *prakrita gati* of *apana vayu* & creates the habit of *vegadirana*, which vitiates *vayu, Agni* as well as *purishadhara kala*.
7. According to symptoms:-
 - 1) *Shoola*: According to statistics, Mean of reduction in *Shoola* was 1.29 & Percentage of relief was 45.90%.

- 2) *Shotha*: According to statistics, Mean of reduction in *Shotha* was 0.137 and Percentage of relief was 63.03%.
- 3) *Vatpurnadrutisparsha*: According to statistics, Mean of reduction in *Atopa* was 0.633. Percentage of relief was 59.43%.
- 4) *Graha*: According to statistics, Mean of reduction in *Graha* was 0.883. Percentage of relief was 74.09%.
- 5) *VAS*: According to statistics, Mean of reduction in *VAS* was 4.634. Percentage of reduction in *VAS* was 60.25%.
- 6) *OXP*: According to statistics, Mean of reduction in *OXP* was 1.44 Percentage of reduction in *OXP* was 53.33%.

CONCLUSION

- 1 *Janu Sandhigata vata* is seen more common in females.
- 2 *Shwadamshtredi taila Matra Basti* in *Janu Sandhigata vata* was found statistically highly significant.
- 3 *Janu Sandhi shoola* reduced up to 45.90% in *Shwadamshtredi taila Matra Basti*.
- 4 Overall assessment score shows 56.30% relief in all symptoms of *janusandhigata vata* by *Shwadamshtredi taila Matra Basti*.
- 5 *Shwadamshtredi taila Matra Basti* is also effective in *Graha, Shotha, and Vatapurnadrutisparsha*.
- 6 *Shwadamshtredi taila Matra Basti* is found to be good *brunhana, vatashaman, and pachana*.
- 7 No any adverse effect was found during or after treatment.

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