

ROLE OF ATIVISHADI YOGA IN THE MANAGEMENT OF AMAVATA

Chandurkar Vivek Srirampant

M.D, Kayachikitsa, Professor and H.O.D, Seth G.R. Ayurved Mahavidyalaya, Solapur, Maharashtra, India

ABSTRACT

Aamvata, which broadly resembles rheumatoid arthritis, is an extremely debilitating condition. It affects the quality of life to a large extent mostly affecting the middle age group. *Grahani* is the seat of Agni, so treatment of *grahani vyadhi* will alleviate *dushta agni* which should inturn reduce the *aam* production and absorption. The aim of this study was to evaluate the efficacy of *Ativishadi yoga* in the management of *aamvata*. For the present study, total 10 patients of *aamvata* were randomly selected for the trial. *Ativishadi yoga* was given for duration of one month. Pilot study showed significant improvements in the symptoms of *aamvata*.

Keywords- *aamvata*, *ativishadiyoga*, rheumatoid arthritis

INTRODUCTION

Ayurveda is a holistic medical science which focuses majorly on an individual's *agni*. Hence, *Agni* holds an elite status in the field of *Ayurveda*. In normal physiology, *Agni* is required for digestion and formation of *Poshaka Rasa* termed as '*Adhya Ahara Rasa*'. Our ancient science states that *agnimandya* leads to formation of *apakva ahara rasa* called as *Aama*. Today's fast food generation is more prone to this *aama nirmitti* due to changing life style, *Guru Ahara* (Burger, Pizza, etc), *Viruddha Ahara* (milk shakes, etc.), *Ratro jagarana*, *Divaswapa*, etc. The diagnosis of a disease depends on the vitiation of *agni* and *doshas* according to the *hetu*. Out of the many *agni-mandya* related diseases, *Aamvata* stands high as a crippling and distressing condition with high incidence among in the middle age group. It hampers the quality of life so much that it stands as a threat to human power resources. As the name suggests, its pathogenesis comprises of a condition involving both *aama* and *vata*. The *Aama*, formed in *aamashaya*,

along with *vata* lodges in *abhyantar* and *madhyam roga marga* especially *Asthi-Sandhi*, where already *Khavaigunya* is present and thus expressed as *Aamavata*. This disease includes signs and symptoms such as *Sandhi Shoola*, *Sandhi Shotha*, *Sanchari Vedana*, *Jwara*, *aruchi*, *aalasya*, *gaurav*, *klama*, etc. which affects one's day to day life.

Since symptomatic treatment with NSAIDs is insufficient to cure the disease, owing to its quick resurgence and also the long term toxicity of NSAIDs, we need to think on the basics i.e. '*Nidana Parivarjana*' and '*Shamana-Shodhana Chikitsa*'. *Aampachan* is the cardinal treatment to cut off any pathology if it to be treated from its roots. In *aamvata*, the main culprit being *aam dosha*, its treatment i.e. *aampachan* holds topmost priority. However due to its *ghor* and *darun* quality, it poses a major challenge for the clinician to eradicate *aamvata* from root level. Since *aama* is a result of *dushti agni*, its treatment demands correction of *agni* itself. Acharya

Charaka has described many combinations in chapter of *Grahani Chikitsa*, out of which *Ativishadi yoga*¹ was selected due to easy availability of all contents.

Aims and objectives: To evaluate the role of *ativishadi yoga* in the management of *aamvata*

Materials and methods: 10 Patients who fulfilled the diagnostic criteria of *aamvata* were selected randomly irrespective of sex, religion and socio-economic status.

Diagnostic criteria: Patients complaining of *jwara*, *aruchi*, *tiktaasyata*, *angamarda*, *kshudhamandya*, *shirashool*, *sthul sandhi*

shool, *sthul sandhi shotha*, *sandhi graha* etc.

Exclusion criteria

1. Chronicity of more than 1 year.
2. Presence of severe crippling deformity.
3. Presence of bone deformities.
4. Reduced joint space.
5. Pregnant women.
6. Age less than 18 years and more than 70 years.
7. Non co-operative patients.

Criteria for assessment

Table No: 1

<i>Sandhi shool</i>	Score
No pain	0
Mild pain of bearable nature, occasional	1
Moderate pain, no difficulty in joint movement	2
Slight difficulty due to pain, requires medication and may remain throughout the day	3
Severe pain, disturbing sleep and requires strong analgesic	4

Table No: 2

<i>Sandhi shotha</i>	Score
No swelling	0
Slight swelling	1
Moderate swelling	2
Severe swelling	3

Table No: 3

<i>Sandhistabdhatta</i>	Score
No stiffness or stiffness lasting for 5 mins	0
Stiffness lasting for 5mins to 2 hrs	1
Stiffness lasting for 2 hrs to 8 hrs	2
Stiffness lasting for more than 8 hrs	3

Table No: 4

<i>Sandhisparsa asahyata</i>	Score
No tenderness	0
Subjective experience of tenderness	1
Wincing of face on pressure	2
Wincing of face with withdrawal affected parts on pressure	3
Resists to touch	4

Materials: Drugs used- The raw materials - *Ativisha, Nagarmotha, Sunthi* and *Haritaki* in powder form of particle size 80-100 mesh were collected from an ISO certified company. All drugs were taken together 250 mg each.

Methods: 10 patients were selected randomly for the study. The study was a randomized prospective interventional type of study.

The drug combination (total 1 gram per dose) along with lukewarm water was given orally twice a day before meals.

Observations and Results

Out of 10 patients, 7 were females (70%) and 3 were males (30%). The drug showed efficacy w.s.r. to the chief complaints included in assessment criteria.

Table No: 5

Patient Score	Sandhi Shool			Sandhishotha			Sandhistabdhatta			Sandhisparsha asahyata		
	0	1	2	0	1	2	0	1	2	0	1	2
A	2	1	0	1	0	0	1	1	0	1	0	0
B	3	2	1	2	1	0	2	1	1	1	1	0
C	2	1	0	2	1	1	1	0	0	0	0	0
D	2	1	2	1	0	1	1	1	0	1	0	0
E	3	2	1	2	1	1	2	1	1	1	1	0
F	1	0	0	1	1	0	1	0	0	0	0	0
G	4	4	3	3	2	1	4	3	4	4	3	4
H	2	1	1	2	1	1	1	0	0	0	0	0
I	2	1	0	2	1	2	1	0	0	1	0	0
J	4	3	4	4	4	4	3	3	3	3	2	3
Total	25		12	20		11	17		9	12		7

The score of *sandhishool* was 25 before treatment which reduced upto 12 after treatment with 52% relief. In *sandhi shotha*, the score was 20 before treatment, which reduced to 11 after treatment presenting 45% relief. The score of *Sandhistabdhatta* was 17 before treatment which reduced to 9 after treatment showing a relief of 47.06%. In *Sandhisparsha asahyata*, score before treatment was 12 which reduced to 7 after treatment presenting 50% relief. Hence, it is concluded that effect of drug on chief complaints is found to be appreciable. In addition to this assessment, it was found that the drug was very effective on associated symptoms comprising of *jwara, aruchi, tiktaasyata, angamarda, kshudhamandya, shirashool*, etc.

DISCUSSION

In this study, majority of the patients were female (70%) as compared to males. Tex-

tual references also reflect the predominance of rheumatoid arthritis in females. *Ativisha* is *katu, tikta, laghu, ruksha*, and *ushna virya*.² All these qualities are favourable for metabolising *aama* without which *aamvata* cannot occur. *Nagarmotha* is *katu tikta laghu* and *ruksha*.² Pharmacological studies have shown that Sitosterol, a constituent of *Cyperus rotundus* is said to be responsible for the anti-inflammatory effect on a number of models of inflammation.³ *Shunthi* is a traditional medicine widely known for its *aampachak* effect. With its *katu ras, laghu guna* and *ushna virya*, it becomes the drug of choice for *aampachan*.² It is specifically used in conditions where predominance of *aama* in the pathology of arthritis is seen. Ginger is considered as effective as acetylsalicylic acid in reducing carrageenan induced oedema in rats. It is thought that these anti-inflammatory actions are as result of inhi-

bition of prostaglandin release and hence ginger may act in a similar manner as NSAID, which interfere with prostaglandin biosynthesis. It is found that 6-gingerol and 6-shagol have analgesic and antipyretic properties.³ *Haritaki* is not only *anulomak* but also a *rasayana*. It facilitates the expulsion of vitiated *doshas*. The complete combination is highly effective in *aamjan-ya rasavaha dushti*. Hence taking the above study and discussion into consideration, *ativishadi yoga* is very effective in the disease *Aamvata*.

CONCLUSION

Ativishadi yoga has shown significant reduction in sign and symptoms of *aamvata*. It can be considered as a promising medication for conditions requiring *aampachan*. Also it can be considered as an effective remedy in *rasavaha strotas dushti* involving *aama*.

REFERENCES

1. Agnivesha, Charaka, Dridhabala, Charaksamhita, edited by Vd. Yadhavaji Trikamaji Acharya, Chaukhamba surabharati prakshana, Varanasi, 2008.
2. Vd. V.M. Gogate, Dravyaguna vidnyana, Ayurvedic materia medica; Pimplapure & Co-publishers, Nagpur, 1997.
3. Chemistry and Pharmacology of Ayurvedic medicinal plants, Vd. Mukund Sabnis, 1st edition, Chaukhamba Amrabharati, Varanasi, 2006.

CORRESPONDING AUTHOR

Dr. Chandurkar Vivek Srirampant

Email: vivekchandurkar@gmail.com

Source of support: Nil

Conflict of interest: None Declared