

A CASE STUDY OF MUSTADI YAPAN BASTI AND PANCHATIKTA GHRUT GUGGULU IN THE MANAGEMENT OF JANUSANDHIGATAVAT W.R.S. TO KNEE OSTEOARTHRITIS

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ABSTRACT

Aging is the process in which body undergoes degenerative changes making the individual prone to many diseases among those *Janu sandhigata Vata* i.e. Knee Osteoarthritis is most commonly occurring disease in both male and female. Modern medicine have limitation in treating osteoarthritis and have many adverse effect with the prolong use. *Sandhigata vata* is a type of *vata vyadhi* which mainly occurs in old age due to *Dhatu kshaya* thus making the individual disable for activity of daily living. *Janu sandhi shoola* is the cardinal symptom of disease along with *shotha, vata purna druti sparsha and akunchan prasaran vedana*. To overcome above problem *ayurveda* suggest very effective and safe treatment which includes *snehan swedan and basti*. In this case study a 60 yrs old male patient having symptom of bilateral knee joint pain, restricted movement, crackling sound in both knee, bilateral knee joint swelling is treated with *Mustadi Yapan Basti, panchtikta ghrut guggula vati*, which help in relieving the symptom of *Sandhigata vata* in the patient. In this case study patient get good relief. Thus, *Mustadi Yapan Basti* and *Panchtikta Ghrut Guggula vati* are useful in *Vata Dosha Shaman* in *Sandhigata Vata*.

Keywords: *Sandhigatavat, Vatvyadhi, Basti, Snehan, Swedan*

INTRODUCTION

In *Vruddha avastha dhatukshay janya vata prakop* make the individual prone to many diseases in which *sandhigata vata* stands top in the list. In India 3.8% of the population are older than 65yrs of age. Osteoarthritis is second most common in Rheumatic disease having prevalence of 22 to 39% i.e. 1.25 billion of total population. Knee O.A is more common in female than in male. 45% Women over the age of 65 yrs have the symptom. Osteoarthritis is most preva-

lent form of Arthritis in India affecting over 15 million adult every year.

Sandhi is one of the various *marmas* and form a part of *madhyam roga marga (cha.su.11/48)*. In *Charak samhita* two types of *vata vyadhi* are mentioned (*cha.chi28*) *Nirupasthambit vatavyadhi* and *upasthambit vata vyadhi* in which *nirupasthambit vata vyadhi* develops due to *dhatu kshaya*.

Charakacharya has mentioned *mustadi yapan basti* in *siddhithana (Cha.si.12/15)* In *Janu shoola* and

also mentioned the use of *tikta rasa* in *asthi dhatu dushti*(*Cha.su.28/27*) This case study is carried out in SMBT Ayurved Hospital the patient of *Janu sandhigata vata* was given *Mustadi Yapan Basti* and *Panchatikta Ghruta Guggula* (orally) for 14 days.

CASE STUDY

A 60 years old male patient come to SMBT Ayurved Hospital having complaining of *Ubhay Janu Sandhi shoola*, *Akunchan prsaranyo shoola*, *Vaata poorna*

druti sparsha since 2-3yrs. Patient has taken allopathic medication before coming to Ayurved hospital but didn't get satisfactory relief.

O/E

Gc – Fair, Afeb

Pulse – 70/min

B.P – 130/90mmhg

I went through the thorough medical checkup and history of the patient and there were no any major medical or surgical illness in past few years.

Table 1: Local Examination of Knee Joint of the Patient:

	Rt. Knee	Lt. Knee
1. <i>Vatapurna Druti Sparsha</i> (Crepitation)	Present	Present
2. <i>Shotha</i> (Swelling)	Present	Present
3. <i>Pidana asahtva</i> (Tenderness)	Present	Present
4. <i>AkunchanaPrasaranayoShoola</i> (Restriction Of Movement)	Present	Present
5. <i>Shoola</i> (Resting Pain)	Present	Present

Investigations –

Routine Investigation like CBC, Urine (Routine and Microscopic), RBS were within in normal range.

Serum Calcium, Serum Uric Acid, RA test were within normal range

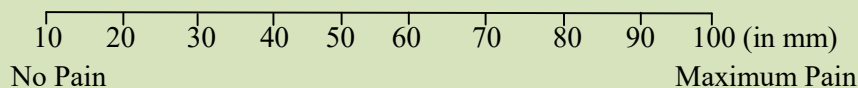
X ray of bilateral knee joint (AP view and Lateral view) reveal bilateral knee joint intra articular space reduction, presence of osteophytes and osteoarthritic changes.

Diagnosis –

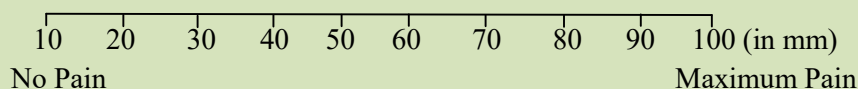
In Charak Samhita (Cha.chi.28/37) it is mentioned that *vata purna druti sparsha, shotha sandhigate-anile prasaran ankunchanayo pravrutishcha savedana*. Hence the diagnosis *sandhigata vata* is made.

Assessment Criteria –

1. Assessment of *Shula* (Resting Pain)
10cm visual analog scale (VAS)



2. Assessment of *Akunchan Prasaran Shula* (Pain on movement)
10cm visual analog scale (VAS)



3. **Table 2:** Distance walked by patient in 15mins

90ft	0
60ft	1
30ft	2
<30ft	3

4. **Table 3:** Assesment of *Pidan Asahatva*

No tenderness	0
Patient says tenderness	1
Wincing face	2
Wincing face and withdrawal Of affecting part	3

5. **Table 4** Assessment of *shohta*

No swelling	0
Slight swelling	1
Moderate swelling	2
Severe swelling	3

Treatment

Pt. is given *mustadi yapan basti* and *panchatikta ghrut guggulu vati* for 14 days

1. *Mustadi yapan basti*-

A) *Kwath* conent of *basti* are as follows

Musta - *Cypers rotundas*

Vala - *Vitiveria zizanioidis*

Argwadh- *Casia fistula*

Bala- *Sida Cardiafolia*

Rasna - *Plucheo lanceolata*

Manjistha – *Rubia Cardifolia*

Kutaki – *Picrorizha Kurro*

Trayamanu – *Gentia Kurroa*

Punarnava – *Boerhavia Diffusa*

Bibhitak – *Terminali belerica*

Guduchi – *Tonispora Cardifolia*

Shaliparni – *Desmodium Gangeticum*

Prushnaparni – *Uraria Picta*

Gokshur – *Trivilus Terestris*

Kanthkari – *Solanum Indicum*

B) Kalka Drugs used are

Shathpushpa – *Foenicum Vulgare*

Madhuyashti – *Glycyrrhiza Glabra*

Kutaj – *Holarrhena Antidysentrica*

Rasanjan – *Berberis Aristata*

Priyangu – *Prunus Mahaleb*

Saindhav

C) Cow Milk

D) *Madhu*

E) *GoGhruta*

F) *MansRasa*

Preparation of *Basti* (*cha.si.12/15*)

All *Kwath* content were taken *1pal* each i.e. 40gms each and *1adhak* i.e. 2560ml water is added into that and heated upto the water remaining 1/4th. Then, 2 *prasth* i.e. 320 ml milk added to it and heated till only milk remained. Then 2 *prastha Mansrasa*, 2 *prastha Madhu* and *Ghrut* each i.e.320ml added into it then the *prakshep* drugs are added and mixed well. This lukewarm *Basti* is given to the patient. This *Basti* was given 14 days.

2. *Panchtikta Ghrut Guggulu vati* –

Panchtikta ghrut guggulu vati – 500gm x BiD x before meal with luke warm water was given to the patient.

4) **Table 5:** Observation – Observation in present case was

Sign & Symptom	B.T	A.T	Relief
1. <i>Shoola</i>	80mm	20mm	60%
2. <i>Akunchan Prasaranyo vedana</i>	90mm	30mm	60%
3. Distance walk in 50mins	2	1	50%
4. <i>Shohta</i>	2	1	50%
5. <i>Pidana Asahatva</i>	1	0	100%

Radiological Investigation i.e. X ray Bilateral knee joint was repeated after 14 days of treatment and no any significant change is observed in X ray.

RESULT AND DISCUSSION –

Patient got 64% relief in above case study. Patient was having symptoms like *janu sandhi shoola*, *akunchan prasaranyo shoola*, *shoth* which were similar to osteoarthritis. So the line of treatment was *basti* and *vedana shaman*.

Probable action of *Mustadi basti*.

According to *Charkacharya basti* is very important in regulation of *vata dosha*. After introducing the *basti*, the content reach upto the large intestine [which is one of the places of *vata dosha* (*vaa.su.12/1*)] regulates the *vata dosha*. *Basti* have content like *ghruta* which with its *anupravan bhava* gets spread easily thus *sneha* along with milk *mansarasa* and *saindhav* get absorbed and according to *Sushrut* on the basis of *virya* (*su.chi35/24,25*) *basti* spreads in the whole body. This *basti* lessen the *kha vaigunya* and regulates vitiated *vata dosha* and also nourishes *strotas* and *dhatu*s.

- Probable action of *panchatikta ghrut guggul vati* According to *Charkacharya* (*cha.su28/12*) in *asthi dhatu dushti* line of treatment should be *tikta dravya ghrut* and *khsir*. *Pancha tikta ghrut guggul* has pre-dominance of *tikta rasa* which increases *dhatvagni* so nutritioun of *asthi majja dhatu* will increase thus it slows down degeneration procedure.

CONCLUSION

Sandhigata vata is one of the *vata vyadhi*. *Sandhigata vata* vis-à-vis is multifactorial degenerative joint disorder. In present case study, *Mustadi Yapan basti* and *Panchatikta ghrut guggulu vati* provide good relief to the patient.

Source of Support: Nil

Conflict Of Interest: None Declared

How to cite this URL: Anushri Vasant Netke: A Case Study Of Mustadi Yapan Basti And Panchatikta Ghrut Guggulu In The Management Of Janusandhigatavat W.R.S. To Knee Osteoarthritis. International Ayurvedic Medical Journal {online} 2018 {cited November, 2018} Available from: http://www.iamj.in/posts/images/upload/2574_2577.pdf