

CONCEPTUAL STUDY ON SHUNTHI IN THE MANAGEMENT OF AMAVATA

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ABSTRACT

Amavata has got its origin from two words i.e. *Ama* and *Vata*. The *Ama* is by product of indigestion, may be in the form of improperly digested *rasa*, stagnant *mala* or *doshas*. This results because of Indigestion due to *mandagni*. Meanwhile the *Vata* is vitiated due to *nidana sevana* that travels along with *Ama* in the body and produces local and generalized features. Modern day being does not care for digestive power and uptakes junk foods at improper times which lead to the said ailments. The treatment advised here is *Ruksha swedana*, *Saindhavaadi anuvasana vasti*, *Kshar vasti*, *Pachana karma*. The common *Pachana* drugs are *Shunthi* etc. The Thus, this drug should be evaluated pharmacologically to know possible mode of action.

Keywords: *Amavata*, *Mandagni*, *Shunthi*, Ginger rhizome, *Pachana*

INTRODUCTION

The modern world is following the busy lifestyle without giving any importance to the ancient day regimens, seasonal regimens, *pathya-apathya*, *satmya-asatmya* concepts. As a result of following junk lifestyle, the people are easily caught by several ailments. One of the very basic factors for disease manifestation is *Ama* which results when digestive fire suffers from improper foods and lifestyle along with few mental factors associated. It is mentioned that the *Agni* is a responsible factor for longevity of age, proper complexion, strength of body, health, normal integrity of body tissues, skin glow etc. If there is damage to the *Agni*, there is damage to the life and the proper *Agni* leads to long lifespan¹. This *Ama* further gives rise to several ailments amongst which, one important is *Amavata*- A clinical condition characterized by gener-

alized and local features. The disease has not been explained by the *Bruhat-trayi* while the later authors have thrown good light over the concept.

AIMS: To study literary aspect of *Amavata* and possible action of the drug *Shunthi* in management of *Amavata*.

DISEASE DESCRIPTION:

Almost all diseases result from *mandagni*, amongst them *Udara rogas* are mainly caused due to *mandagni*². When *Ama* and *Vata dosha* get vitiated and spread in *koshta*, *trika* and joints resulting in *Shotha*, *Shoola* and *Stabhdata*, it is termed as *Amavata*³. When the digestive fire is weak, there is no proper digestion and the improperly digested *rasa* lies in *Amashaya* which is called as *Ama*. Even the mixture of vitiated *doshas* is also termed as *Ama*⁴. This

Amadosha is sometimes dragged by the *Vata* to the *Sleshma sthana*, along with involvement of *Dhamani* and thus generating the ailment⁵.

NIDANA OF AMAVATA:

Viruddha Ahara (unwholesome diet), *Viruddha Chesta* (erroneous habits) *Mandagni* (diminished Agni) *Nishchalata* (sedentary habits), any type of exertion immediately after taking *Snigdha Ahara* are the main aetiological factors responsible for production of *Amavata*⁶.

SAMPRAPTI OF AMAVATA:

All the three *Doshas* are involved in the pathogenesis of *Amavata* but it is the *Vata Dosha* which plays important role. *Agnimandya* is the result of vitiated *Samana Vayu*, *Pachaka Pitta* and *Kledaka Kapha*. It is the *Vyana Vayu* which propels the *Ama* into body particularly *Shleshma Sthanas* producing symptoms like *Gatrastabhata*, *Sandhiruja*, *Sandhi Shotha* etc. *Bhrama*, *Murcha*, *Praseka*, *Nidraviparya* indicates the involvement of vitiated *Prana Vayu*. Due to *Apana Vayu Dusti* symptoms like *Vid-Vibandhta*, *Kukshishoola*, *Kukshikathinya*, *Antrakunjana* etc. are produced. So far as the *Kapha Dosha* is concerned *Kledaka*, *Bodhaka* and *Sleshaka Kapha* are involved. *Kledaka Kapha*, as discussed causes *Agnimandya*. Due to *Bodhaka Kaphadusti*, symptoms like *Asyavairasya*, *Aruchi*, *Praseka* etc. are produced. Involvement of joints indicates vitiation of *Sleshaka Kapha*. *Sandhidaha*, *Sandhiraga* are the symptoms produced due to Vitiation of *Pitta*⁷.

RUPA OF AMAVATA (SIGNS & SYMPTOMS):

A. *Pratayatama Rupa*:

Sthabdata in body {Due to vitiation of *koshta*, *trika*, *sandhi* by *Ama* associated with *Vata*}⁸

B. *Samanya Rupa*:

Acharya Madhavakara has mentioned *Angamarda*, *Aruchi*, *Trishana*, *Alasya*, *Gaurava*, *Jvara*, *Apaka*, *Angasunnata* as *Samanya Rupa* of *Amavata*⁹.

c. *Doshanubandha Rupa*: If *Vata* is dominant *dosha*, then *Shool* is observed. In case of *pitta* dominance, *daha* and *raga* are felt. While in *kapha* condition, *staimitya*, *guruta* and *kandu* are predominant¹⁰

D. *Pravriddha Rupa* of *Amavata*:

Saruja Sandhi Shotha in *hasta*, *pada*, *shir*, *gulpha*, *trika*, *janu*, *uru*. There is *Vrishik dansh vat vedana*. Others are *Agnimandya*, *Prasek*, *Aruchi*, *Gourava*, *Uthsahahani*, *Vairasya*, *Daha*, *Bahumutrata*, *Kuksho kathintha*, *Shoolam*, *Nidra-viparyaya*, *Trishna*, *Chardi*, *Bhrama*, *Murcha*, *Hritgraha*, *Vidh-vibaddhata*, *Jadya*, *Antrakujana*, *Anaha*¹¹.

AMAVATA CHIKITSA:

Chakrapani was the pioneer to lay down the principle and line of treatment of *Amavata*. He has described *Langhana*, *Swedana*, *Tikta-Katu* and *Deepana Dravyas*, *Virechan Karma*, *Snehapana*, *Saindhavaadi anuvasana* and *Ksharvasti* etc. measures in his text *Chakradatta*¹². Later, *Yogarajnanakar* has added *Ruksha-sveda* and *Upnaha* to the above said measures¹³. *Ama* and *Vata* are the two chief pathognomic factors in production of *Amavata*. *Ama* is *Guru*, *Snigdha*, *Sthira*, *Sthula* and *Pichhila* while the *Vata* has the properties like *Laghu Ruksha*, *Chala*, *Sukshama* and *Vishada*. The *guna* of *Ama* and *Vata* are different except the *Sheeta Guna* which is common to both. These are the things which we come across while treating the *Amavata*, because any measure adopted will principally oppose one another. So, a very careful approach can benefit the patient. The line of treatment laid down by *Chakrapani* denotes firstly the *pachana* of *Ama*.

DRUG DESCRIPTION:

SHUNTHI:

Gana:

Charaka- *Triptighna*, *Arshoghna*, *Deepaniya*, *Shoolprashmana*, *Trishnanigrahana*¹⁴.

Sushruta- *Pippalyadi*, *Trikatu*¹⁵.

Samprapti Vighatan: As the *doshik* involvement here is *Vata* with *Kapha* and *Ama*. The drug *Sunthi* will act on the *Vata* by its *Madhur vipaka*, *Ushna virya* and *Snigdha guna*. The *Amapachana* will also be carried out by *Katu rasa*, *Ushna veerya* and *Laghu guna*. The *Ama pachaka* qualities will also do the *Kapha shamana*¹⁶.

ACTIVE CONSTITUENTS –

It contains essential oil, pungent constituents (gingerol and shogaol), resinous matter and starch¹⁷.

PHARMACOLOGICAL AND BIOLOGICAL ACTIVITIES:

6-Shogaol is one of the major compounds in the ginger rhizome that may contribute to its anti-inflammatory properties. Confirmation of this contribution was sought in this study in Sprague-Dawley rats (200–250 g) treated with a single injection (0.5 ml of 1 mg/ml) of a commercial preparation of complete Freund's Adjuvant (CFA) to induce monoarthritis in the right knee over a period of 28 days. During this development of arthritis, each rat received a daily oral dose of either peanut oil (0.2 ml-control) or 6-shogaol (6.2 mg/Kg in 0.2 ml peanut oil). From the results, it was concluded that 6-shogaol reduced the inflammatory response and protected the femoral cartilage from damage produced in a CFA monoarthritic model of the knee joint of rats¹⁸.

In the separate study, we investigated the effects of 6-shogaol on the production of inflammatory mediators from lipopolysaccharide (LPS) activated RAW 264.7 macrophages. These mediators (TNF- α , IL-1 and NO) and their output from macrophages are involved in various pathophysiological events of chronic inflammation and arthritis. Effects of 6-shogaol were investigated on the production of the mediators TNF- α , IL-1 and NO (measured as nitrate) from macrophages. Lipopolysaccharide activated RAW 264.7 macrophages were cultured in the presence and absence of 6-shogaol (2 M, 10 M and 20 μ M) and ELISA was used to quantify the output of the mediators. The results showed that 6-shogaol (2 M, 10 M and 20 M) significantly inhibited the production of nitric oxide (NO), IL-1 and TNF- α from the LPS activated RAW264.7 macrophages¹⁹.

Therefore, the ability of a well-characterized crude ginger extract to inhibit joint swelling in an animal model of rheumatoid arthritis, streptococcal cell wall-induced arthritis, was compared to that of a fraction containing only gingerols and their derivatives. Both extracts were efficacious in preventing joint inflammation. In conclusion, these data document a very significant joint-protective effect of these ginger samples²⁰

CONTRAINDICATION:

Kushta, Pandu, Mutrakricchra, Raktapitta, Vrana and *Jwara*, also not indicated in *Grishma* and *Sharad ritu*²¹.

CONCLUSION

The Shunthi also called as Mahoushadh bears the necessary ingredients for efficacious action. The various international level studies have shown the potent active principles present in it to serve its function. The treatment of Amavata in other system of medicines is not very effective so an attempt was made to do the pharmacological study on effect of Shunthi on Amavata which showed a good result principally. Further, clinical studies are required for complete evaluation.

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