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SIGNIFICANCE OF SHATAVARI TAILA MATRA BASTI IN MANAGEMENT OF SANDHIGATA VATA WSR TO OSTEOARTHRITIS

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ABSTRACT

Sandhigata Vata can be correlated with Osteoarthritis in modern medical science certain extent. The disease Osteoarthritis is the most common form of chronic disorder of synovial joints. It is characterized by progressive degenerative changes in the articular cartilages over the years, mostly involving the weight bearing joints. An estimated 10% to 15% of all adults aged over 60 have some degree of Osteoarthritis, with prevalence higher among females than males. In Ayurveda Basti (medicated enema) is considered the best treatment for Vata Vyadhi, and Shatavari Taila has the distinct property of Vata Shamana and Snehana. In this article, a detailed review of Shatavari Tail, its content and mode of action as Matra Basti has been presented to achieve effective relief in various symptoms of osteoarthritis.

Keywords: *Matrabasti*, *Shatavari Taila*, *Sandhigata Vata*, Osteoarthritis.

INTRODUCTION

Osteoarthritis (OA) arises as the most prevalent joint disease associated with pain and disability in past few years. According to the Global Burden of Disease 2010 study, osteoarthritis of the hip and knee

joint was ranked as the 11th highest contributor to global disability. Incidence of the disease increasing continuously due to the practice of erratic lifestyle and unwholesome food habits. As it is a degenerative

disorder the prevalence of the disease is set to increase in parallel with the increase in the number of people aged 60 years and older and the rise in obesity across the world. However, the detailed molecular mechanisms of initiation and progression of OA remain poorly understood many anatomical studies demonstrated that OA is not exclusively a disorder of articular cartilage but also affects adversely the whole joint specially peri-articular bone, synovial joint lining, and adjacent supporting connective tissue elements. Being a degenerative disease OA worsens over time, resulting in chronic pain and stiffness in joints, and can become severe enough to make it difficult in performing daily tasks. Disability due to pain and other symptoms of OA leads to depression and sleep disturbances in the affected person, therefore, reducing productivity. Currently, apart from surgery or joint replacement, there are no interventions available to restore the degraded joint structure. So, it becomes essential to develop more effective treatment strategies for OA, and measures that can prevent or slow down the degenerative progression of the disease. In Ayurveda, it can be correlated with Sandhigata Vata described under the heading of VataVyadhi and can be effectively managed with the treatment principles of Ayurveda.

Aims & Objectives:

The aim of this concise-review paper is

- 1. To understand the Pathophysiological aspect of *Sandhigata Vata*.
- 2. To evaluate the effectiveness of *Shatavari Taila Matra Basti* as a measure in the management of *Sandhigata Vata*.

Material & Methods:

The review of various *Ayurvedic Samhitas* and their commentaries had been performed and an online database was searched using the keywords '*Sandhigata Vata*, osteoarthritis, and *Matrabasti*'.

Sandhigata Vata (Vitiated Vata seated in Joints):

When aggravated *Vata* gets accumulated in joints and causes destruction and damage to different components of joints such as articular cartilage, subchondral bone, synovial tissue, and meniscus resulting in pain, swelling, and difficulty in

movement, the condition is known as *Sandhigata Vata* (compared to osteoarthritis in modern medicine).² In Ayurveda it is firstly described by *Acharya Charaka* under *Vatavyadhi* as *Sandhigata Anila* manifest as *Shotha* (swelling) which on palpation feels like a bag filled with air and *Shula* during *Prasarana* and *Akunchana* (pain during flexion and extension of the joints).³ *Acharya Sushruta* also mentioned *Shula* and *Shotha* as symptoms of the disease leading to the reduction of the movement of the affected joint (*Hanti*).⁴ *Madhavakara* adds *Atopa* (crepitus in joint) as an additional feature of *Sandhigata-vata*.⁵

The US Centers for Disease Control and Prevention and the Mayo Clinic listed modifiable and non-modifiable risk factors for osteoarthritis, which are comparable to the etiological factors of *Vata Vyadhi* in Ayurveda. The most important OA risk factors are age, gender, obesity, joint trauma/sports injuries, certain occupations that brought repetitive stress on a particular joint, genetics, bone deformities, metabolic disease (i.e. diabetes), endocrine disorders, and having previously rheumatic diseases such as RA and gout.⁶

The risk of developing *Vata Vyadhi* increases, the same as incidences of most types of arthritis increase with age, and OA is certainly no exception. Females are significantly at higher risk of developing OA. Aging, Gender, Metabolic disorders, and endocrine disorders vitiate the *Vata Dosha* following the pathogenesis of diminution of nourishment of tissues i.e., *Dhatukshayajanya Vata prakopa*, whereas overweight, bone deformities, injuries, repetitive stress on a particular joint, having a history of rheumatic diseases such as RA and gout vitiates the *Vata Dosha* by damaging the structure of the joint.

The pathologic underpinnings of this disease are attributed to the vitiation of *Vata* and *Kapha Dosha*, affecting the *Asthi* (bone), *Sandhi* (joint), *Mamsa* (muscle), and *Snayu* (ligament). The pathogenesis of *Sandhigata Vata* can be summarized under the headings of *Nirupastambhita Vata* and *Upastambhita Vata*. When the *Vata* gets vitiated because of its causative factors without the

involvement of Avarana of Kapha dosha it is known as Nirupstambhita Vata, and when it accumulates in the Sandhi manifest as Nirupastambhita Sandhigata Vata. Whereas when there is an involvement of Avarana of Kapha Dosha in vitiation of Vata it is known as Upstambhita Vata, and when it accumulates in the Sandhi manifest as Upastambhita Sandhigata Vata. Acharya Charaka has followed the treatment principle of Vatavyadhi (repeated use of snehana, svedana, basti, and mrudu virechana) for the management of Sandhigatavata, whereas Acharya Sushruta has described specific treatment i.e. snehana, upanaha, agnikarma, bandhana, and Sandhigata *Vata*. 7,8 unmardana for comprehensive management of this condition in Ayurveda comprises a judicious combination of Bahya chikitsa (external therapies such as Janu Basti, Abhyanga, Agnikarma, Jalaukavacharana, Basti etc.) and Abhyantara Chikitsa (internal medication include Churna, Kashaya, Vati, etc.). Active lifestyle, maintaining healthy body weight, exercise, yogasana may help to slow down the progression of Sandhigata-vata and thus may help to improve pain and joint function.9

To find the various effective measures for Sandhigata Vata, Matra Basti can be an imperative choice, as Acharya Charaka has mentioned in Agradravyas "Basti Vata Haranam Shrestham" Matra Basti is a svariant of Anuvasana Basti, administered in small doses regularly. It is a much more economical and convenient as well as safest and uncomplicated form of Basti compared to Sneha Basti and Anuvasana Basti.

Matra Basti –

Amount: According to Acharya Chakrapani, Sneha Basti contains 6 Pala of Sneha, Anuvasana Basti contains 3 Pala of Sneha, and Matra Basti contains 1½ Pala of Sneha. From the above references, it can be said that the dose of Matra Basti is approximately 60 ml.

Elimination Time: The normal *Pratyagamana Kala* of *Sneha Basti* is 3 *Yama* i.e., 9 hours. As *Matra Basti* is the type of *Sneha Basti*, its *Pratyagamana Kala* (time for elimination) is also 3 *Yama* i.e., 9 hours.

There is no harm if *Matra Basti* is retained in the body, because while discussing *Anuvasana Basti*, *Acharya* has explained that it does not injure the body, even in the event of its being retained in the body for a whole day. Also, the dose of *Sneha* in *Matra Basti* is very small which can get easily absorbed in the body without coming out. It is believed that *Sneha Basti* should retain in the body. If *Basti* returns much earlier, it cannot produce the described *Sneha* effect in the body. ¹⁰

Restrictions: The *Matra Basti* does not demand any regimen of diet or behavior. It can be given at any time and in all seasons without any restriction. Whereas, *Acharya Vriddha Vagbhata* has restricted the day sleep after being treated with *Matra Basti*. ¹¹

Matra basti in Sandhigata Vata:

Numerous research works have been carried out to study the effect of different treatment strategies for Sandhigata Vata. According to a scientific review on Janu Sandhigata Vata and osteoarthritis, in which all research work recorded under the AYUSH Portal System, Ministry of AYUSH, Government of India, and PubMed conducted till January 2016 were reviewed, reported that out of all, 13 articles were of Ayurveda medical system. Out of these 13, in 12 Panchakarma is taken as a treatment, in which 4 studies included Matra Basti.12 According to an inference of one more clinical study on Sandhigata Vata "Sarvang Abhyanga-Swedana and Matra Basti serve all the needs which are required for the Shamana of Sandhigatavata". 13 Another clinical trial on Karpasasthyadi Taila Matra Basti in Janu Sandhigata Vata showed highly significant results. 14 According to various reviews it can be concluded that Matra Basti is beneficial for joints as it lubricates the joints and strengthens the structures. In the case of Sandhigata Vata it relieves pain and associated conditions. It also helps in preventing the progression of the disease process and degeneration. 15,16,17 Basti Chikitsa is considered the most potent treatment of Vata Vyadhi. Matra Basti has a special place among all the Bastis and is highly praised because of its extensive and multi-dimensional use. It can be administered at any time. It doesn't cause any

complications. There are no restrictions identified for the administration of *Matra Basti*. It can be administered in small doses daily until the pain and associated symptoms related to osteoarthritis get relieved.¹⁸

Shatavari Taila: Shatavari Taila has the great property of Vata Shamana and Snehana, it applies to all types of Vata Vyadhi. The Aushadha dravyas used in Shatavari Taila are easily available and less costly. Acharya Yogaratnakara & in Bhaishjyaratnavali it is indicated that Shatavari Taila Sneha Basti produces a significant effect in Sandhigata Vata. 19

Table 1: Contents of *Shatavari Taila*:²⁰

S.No.	Drug	Botanical Name	Amount
1	Kushtha (Indian Costus tree)	Desmostachya bipinnata Stapf	40 grams
2	Devadaru (Heartwood)	Cedrus deodara (Roxb.)	40 grams
3	Ela (Cardamom)	Elettaria Cardamomum	40 grams
4	Priyangu (Perfumed cherry)	Callicarpa macrophylla Yahl	40 grams
5	Tagara (Indian Valerian)	Valeriana wallichii	40 grams
6	Dalachini (Cinnamomum bark)	Cinnamomum zeylanicum Blume.	40 grams
7	Tejapatra (Indian bay leaf)	Cinnamomum tamala	40 grams
8	Renuka (Chaste tree)	Vitex negundo Linn.	40 grams
9	Nakhi (Creeping fig)	Capparis zeylanica	40 grams
10	Jatamansi (Spikenard)	Nardostachys jatamansi DC.	40 grams
11	Sarja (Rala)	Vateria indica Linn.	40 grams
12	Sugandhbala (Indian Valerian)	Valeriana wallichii	40 grams
13	Raktachandana (Red Sandl wood)	Pterocarpus santalinus Linn.	40 grams
14	Vacha (Sweet flag)	Acorus Calamus	40 grams
15	Shailaiya/Chharilla (Stone Flower)	Parmelia perlata Huds.	40 grams
16	Ushira (Khus)	Vetiveria zizanioides (Linn.)	40 grams
17	Manjishtha (Indian Madder)	Rubia cordifolia Linn.	40 grams
18	Sarala (Chir pine)	Pinus roxburghii	40 grams
19	Agaru (Eagle wood0	Aquilaria agallocha	40 grams
20	Nagabala (Country Mallow)	Grewia Hirsuta	40 grams
21	Rasna (Pluchia)	Pluchea lanceolata	40 grams
22	Asvagandha (Winter cherry)	Withania somnifera	40 grams
23	Shatavari (Wild carrot)	Asparagus racemosus	40 grams
24	Punarnava (Spreding hogweed)	Boerhaavia diffusa Linn.	40 grams
25	Mishreya (Fennel fruit)	Foeniculum vulgare Mill	40 grams
26	Saindhava Lavana (Rock salt)	Sodium Chloride	40 grams
27	Tila taila (Sesame oil)	Sesamum indicum Linn.	4 litres
28	Shatavari Kwath (Decoction)	Asparagus racemosus	4 litres
29	Godugdha (Cow milk)	-	4 litres

Table 2: Properties of Contents of Shatavari Taila:21

Drug	Rasa	Guna	Virya	Vipaka
Kushtha	Madhura, Kashaya	Laghu	Shita	Madhura
Devadaru	Tikta	Laghu, Snigdha	Ushna	Katu
Ela	Madhura, Katu	Laghu, Ruksha	Shita	Katu
Priyangu	Tikta, Kashaya	Ruksha	Shita	Katu
Tagara	Katu, Tikta, Kashaya	Laghu, Snigdha	Ushna	Katu
Dalachini	Madhura, Katu, Tikta	Laghu, Rukshna, Tikshna	Ushna	Katu
Tejapatra	Madhura, Katu, Tikta	Laghu, Ruksha, Tikshna	Ushna	Katu
Renuka	Katu, Tikta	Laghu	Shita	Katu
Nakhi ²²	Kashaya, Katu, Madhura	Laghu, Ruksha	Ushna	Katu
Jatamansi	Tikta, Kashaya	Laghu	Shita	Katu
Sarja (Rala)	Katu, Tikta, Kashaya	Snigdha, Ushna	Ushna	Katu
Sugandhbala	Katu, Tikta, Kashaya	Snigdha, Ushna	Ushna	Katu
Raktachandana	Madhura, Tikta	Guru, Ruksha	Shita	Katu
Vacha	Katu, Tikta	Laghu, Tikshana	Ushna	Katu
Ushira	Madhura, Tikta	Laghu, Snigdha	Shita	Madhura
Manjishtha	Madhura, Tikta, Kashaya	Guru	Ushna	Katu
Sarala	Madhura, Katu, Tikta	Laghu, Snigdha, Tikshna	Ushna	Katu
Agaru	Katu, Tikta	Laghu, Tikshna	Ushna	Katu
Nagabala	Madhura, Kashaya	Guru, Snigdha	Shita	Madhura
Rasna	Tikta	Guru	Ushna	Katu
Asvagandha	Tikta, Kashaya	Laghu	Ushna	Madhura
Shatavari	Madhura, Tikta	Guru, Snigdha	Shita	Madhura
Punarnava	Madhura, Tikta, Kashaya	Rukshna	Ushna	Madhura
Mishreya	Madhura, Katu, tikta	Laghu, Ruksha	Shita	Madhura
Saindhava ²³	Lavana, Madhura	Guru, Snigdha	Shita	Madhura
Tila taila ²⁴	Madhura	Suksma, Guru, Sara	Ushna	Madhura
Shatavari ²⁵	Madhura, Tikta	Guru, Snigdha	Shita	Madhura
Godugdha ²⁶	Madhura	Guru, Snigdha	Shita	Madhura

DISCUSSION

In *Vriddhavastha*, all *Dhatus* undergo the process of *Kshaya*, thus resulting in vitiation of *Vata Dosha* and individuals become prone to many diseases especially the disease due to *Vata Dosha*. *Sandhigata Vata* is the most common degenerative disorder of the elderly, as *Sandhi* is also accepted as the natural site of *Vata Dosha*, vitiated *Vata* depletes the strength of the joint and due to *Dhatu Kshaya* i.e., depletion of *Asthi Dhatu* damage also occurs in joints. *Sandhigatavata* manifests with its classical sign and symptoms such as *Shula*, *Shotha*, *Stambha*, *Akunchana Prasarana Vedana*, *Sparsha-asahyata*, *Sphutana*, etc. at the joints. Modern medical science has its limitation in managing this progressive

degenerative disease. It can provide conservative or surgical treatment, which is highly symptomatic and has various troublesome side effects. In Ayurveda, different treatment modalities such as *Snehana* (oleation), *Swedana* (fomentation), *Mridu Samshodhana*, *Basti* (medicated enema), *Vatahara Aushadha* are mentioned for such types of conditions which are quite effective in treating the symptoms and delaying the further damage of joint.²⁷

The administration of *Matra Basti* with medicated oil is one of the best effective treatments for *Sandhigata Vata*. When the *Basti* (medicated oil) is administered through the anus, it reaches first to the *Pakvashaya* (large intestine) which is the main site of *Vata Dosha*, and then it pacifies *Vata Dosha*. According to *Dalhana*

Pakvashava is the site of Purishadharakala which is accepted the same as Asthidhara Kala.²⁸ It means the Basti acts directly on Asthidhara Kala. Acharya Sushruta has mentioned that 6th Basti nourishes Mamsa Dhatu, 7th Basti nourishes Meda Dhatu, 8th Basti nourishes Asthi Dhatu and 9th Basti nourishes Majja Dhatu.²⁹ Thus, through Basti, we achieve pacification of Vata Dosha and nourishment of Asthi Dhatu, and by this accomplish the pacification of the symptoms of Sandhigatavata by breaking the Samprapti. According to modern medical science, as Basti is concerned, in the trans rectal route, the rectum has a rich blood and lymph supply, and the drug can cross the rectal mucosa like other lipid membranes. Thus, by entering general circulation, Basti drugs act on the full body.³⁰

Mode of Action: Madhura Rasa, Snigdha-Guru Guna, Ushna Virya, and Madhura Vipaka of contents of Shatavari Taila work on Vata Dosha which has acquired *Upashaya* of *Nirupastambhita* Sandhigata Vata whereas Katu-Tikta-Kashaya Rasa, Laghu-Ruksha-Tikshana Guna, Ushna Virya and Katu Vipaka of contents of Shatavari Taila work on Kapha Dosha which removes the Strotorodha results in Vata Shamana and has acquired Upashaya of Upastambhita Sandhigata Vata. Contents of Shatavari taila hold properties like Vedanasthapana (analgesic), Shothahara (anti-inflammatory), Balya, Rasayan, Sandhaniya, etc. Most of the contents show pharmacological activities such inflammatory, analgesic, antioxidant, immune modulator, etc. By these properties, Shatavari Taila produces beneficial effects on Sandhigata Vata.

Mode of action in Nirupastambhita Sandhigata Vata Prakopaka Nidana Sevana ↓ Vata Dosha Prakopa ↓ Sthana Samshraya of Vata dosha in Sandhi ↓ Sandhi, Snayu, Kandara Vikriti ↓ Lakshana utpatti of Nirupastambhita Sandhigata Vata ↓ Administration of Shatavri Taila Matra Basti ↓ Madhura Rasa, Snigdha-Guru Guna, Ushna Virya and Madhura Vipaka works as Shamaka of Vata ↓ Nirupastambhita SandhigataVata Upashaya

Mode of action in Upastambhita Sandhigata Vata

Guru Shita Guna, Abhishyandi, Amla Rasa Prasdhana etc. Nidana Sevana results in Kaphaprakopa / Amotpatti

> ↓ Strotorodha

Vimargagamana of Vata Dosha

Sthana Samshraya of Sama Vayu in Sandhisthana

Lakshana utpatti of Upastambhita Sandhigata Vata

Administration of Shatavri Taila Matra Basti

Katu-Tikta-Kashaya Rasa, Laghu-Ruksha-Tikshana Guna, Ushna Virya and Katu Vipaka of contents of Shatavari Taila

Upastambhita Sandhigata Vata Upashaya

CONCLUSION

Ayurveda has emphasized various modalities of treatment of *Sandhigata Vata* including *Shamana* (palliative), *Shodhana* (detoxification), local treatments like *Upanaha* (poultice application), and *Agnikarma* (cautery), etc., showing satisfactory relief, but due to stubborn nature of the disease it does not pacifies. So, a multi-arm treatment provides a better

approach to managing the condition at different stages. In cases, where degeneration of joint tissues starts to occur administration of *Matra Basti* with medicated oil such as *Shatavari Taila* can be a better choice for treatment of *Sandhigata Vata*, as it is easy to administer, cost-effective, without any side effects, and produces prolong relief of symptoms.

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