ABSTRACT
The basic concept of Ayurveda is “Rogastudoshavaishamyamdoshasamyamamarogata”. Equilibrium of Tridosha is considered as Swastya. Among these TridoshaVata is responsible for all chesta. SandhigataVata is one among the Vatavyadhi which is explained under Gatavata in the Ayurvedic classical literature. Gatavata is a unique concept of Ayurveda where in the increased Vata gets lodged in the normal Dhatu leading to Dhatu Kshaya at that Ashaya. JanuSandhigataVata is one such disease where in increased Vata gets localized in knee joints. Clinical features of Sandhigatavata resembles with Osteoarthritis according to contemporary science. Janu Sandhi being a weight bearing joint, it is more prone for wear and tear leading to degenerative changes in the long course. Sandhi is one of the types of Marma and form a part of MadhyamaRogaMarga. Thus, involvement of Marma, MadhyamaRogaMarga, VataDosha and Dhatu kshaya make disease Yapya. SandhigataVata is one among the chronic disease. Conventional system of medicine has its own limitation in managing this disease. In such conditions the only hope of treatment could be the radical treatment through Shodhana and Rasayana therapy added to appropriate Shamaaoushadi.

Keywords: Janu SandhigataVata, Dhatukshayajanyaja, Margavarodhajanyaja, Shodhana,

INTRODUCTION
Basic principles of Ayurveda are based on Tridosha theory. Among Tridosha, Vata is given primary importance with respect to either physiological or pathological conditions. The other two dosha being inert, their equilibrium depends on Vata. The Vayu is considered being the chief motivating force behind all the activity. It is responsible for all movements, which gets disturbed when Vayu gets vitiated. Sandhigatavata is a type of Vatavayadhi which is mentioned in all Brihatrayi and Laghutr rayi. Gatavata is a unique concept,
where in increased Vata gets lodged in the otherwise normal dhatu leading to Dhatu kshaya at that ashaya. The most common presentation of this pathogenesis is seen as Janu Sandhi Gata Vata.

Janu Sandhigatavata is one of the common clinical problems in day to day Ayurvedic practice. Osteoarthritis is the 2nd most common rheumatological problem with prevalence of about 22-39% in India. Among them 29.8% people between 45-64 years of age group are diagnosed with arthritis.

Janu Sandhi being a weight bearing joint, it is more prone for wear and tear leading to degenerative changes in the long course. It limits everyday activities like walking, dressing, bathing etc., thus making patient disabled and handicapped.

Conventional system of medicine has its own limitation in managing this disease. It can provide either symptomatic, conservative management with NSAID or in severe cases surgical intervention is the last resort. Janu sandhigatavata is Yapya in nature, so repetitive use of appropriate Shodana, Shamana and Rasayana is needed for the effective management. By this treatment SampraptiVighatana of the disease can be achieved.

NIDANA: The Nidana mentioned for Vatavyadhi can be understood in terms of Janu SandhigataVata according to three classifications as 1. Vyadhihetu, Doshahetu, Udbhayahetu 2. Dhatu kshayakarahetu, Margavarodhahetu 3.Utpadaka hetu, Vyanjakahetu.

Most of the etiological factors involve like excessive or in appropriate use of the joint like excessive walking, excessive physiological exercise, traumatic causes like Abhigata, Marmaghata and Bhagna consider as Vyadhihetu. In Doshahetu involve the intake of food such as Kashaya, Katu and Tikta Rasa, Ruksha/ Shushka, Laghu and SheetagunapradhanaAhara, which cause VataDoshaPrakopa. The Aharavidhi also plays an important role in Vataprapkopa in the form of Alpa anna/ Alpaashana, Vistambhi Bhojana, Upavasa/ Abhojana, Langhana, Vishamashana, Adhya- shana, Jirnataa, Pramitashana and Kshudita Ambupana. Vega Dharana (Purishavega Dharana) can be considered as Udbhayahetu, Which cause provocation of VataDosha and have a direct effect on pathogenesis of the disease. Most of the Nidana leading to Vataprapkopa can be considered as Dhatu kshayakar- hetu as they cause VataDoshaPrakopa leading to Asthi Dhatu Kshaya. Ama can be considered as the Margavarodhahetu for SandhigataVata. Excessive walking, excessive physical exercise, trauma to the knee joint, fracture are the direct causes in the pathogenesis of Janu sandhigatavata considered as Utpadakahetu. AharajaNidana, KalajaNidana, ManasikaNidana which aggravates Vata is considered as VyanjakaNidana.

Adhishtana: Asthi-Sandhi
Rogaswanghava: Chirakari

**SAMPRAPTI:**

1. **Dhatu Kshayajanyaja:** Age factor plays an important role in precipitation of disease. In Jaraavasta there will be an Asthivahasrotadusti and Khavaigunya in Sandhi. VataVardhakaAhara leads to Vataprapakopa, which takes place in sandhi cause to ShleshakaKapha Kshaya. DushitaVyanaVataStanasamsrayi in Janusandhi causes to manifest the Disease.

2. **Margavarodhajanya:** Nidana sevana (improper diet, faulty life style) causes vitiation of Kapha and Meda which leads to AgniVashamyata and Sthoulya. Therefore Ama, MedoVriddhi causes Asthi Dhatu and Majja dhatu Kshaya. Ama, MedoVriddhi further leads to Avarana of vata, which causes Khavaigunyatain Sandhi. In this stage Nidanasevana causes VataPrakopa which takes place in Janu Sandhi leading to manifest the disease.

3. **Abhighataja:** Vata will get vitiated in the joints by Avarana of vata due to Abhighata. This vitiated Sthanikavayu produces series of changes in joint after doshadushyasamucchana and produce SandhigatavataLakshana.

In **Chaya purvakasamprapti:** Vataprapakopa due to nidanasevana for a prolonged duration results in dhatu Kshayaja or MargaAvarodhahasto undergo ChaydiKriyakakala Stages for the manifestation of the symptoms of Janusandhigatavata. In AcharyaPurvakaSampraptithi Abhigata to Janu Sandhi or Janu sandhi marma will be acute cause toVataprapakopa which is manifests before undergoing chayadi Shat kriya kala stages.

**LAKSHANA:** The disease may not show any poorvaroopa. But the clinical signs and symptoms like Prasaranaakunchanапрвruthisavedana due to Kandara, Snayu Dusti, Asthi Kshaya, Vataposnadvritisparsha type of shotha due to degeneration of cartilage of knee joint (Slesmadhara kala), Atopa due to Šroto Riktata at janu sandhi (Kleda, Slesma Kshaya).

**Hanti sandhi:** The term Hantisandhigath can be interpreted in two ways.
1. As a functional component: **Sandhi Stabdatta,** which means stiffness and hence causing restriction to the knee joint movement.
2. As a structural component: **Sandhi Vishlesha,** which means dislocation of the knee joint.

**ANALYSIS OF CHIKITSA:**

Ideal treatment of SandhigataVata should be planned by taking into consideration factors like doshic involvement and samprapti.

According to Acharya Charaka, samanyavatavyadhichikista should be followed like Vatasyaupakrama (snehana, swedana, mridusamshodhana). Shusruta mentioned specific treatment as Snehana, Upanaha, Agnikarma, Bandhana and Unmar-dana.

1) **In DHATU KSHAYAJA**-Treatment should be given for Snehana, Swedana, Mriduvirechana and Dhatu poshana. SandhindgataVata is a degenerative disorder with swelling and stiffness.

**Shodhana:**

1. **Snehana:** Sneha is antagonistic to the degeneration process caused by excessive rukshaguna and kharaguna of vitiated Vata. Tikta rasa pradhanaghririta is best for snehapana. Panchatikaghrita removes the factor of...
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2. Swedana: After administration of sneha-pana, swedana will be administered, to bring doshas from Shakha to Koshta.

3. Pradhan Karma: Virechana is one of the best treatments for Sandhigatavata. Mridu-Virechana is the line of treatment for Vatavyadhi. Trivruth-sukhavirechanadravya in Vata and pittajadosha involvement, Aragwadha- mriduvirechanadravya in kapha and pitta dosha situated in pakwashaya. Virechanadravya areprithvi and jalamahabhuta predominant having ushna, teekshna, sukshmaguna and adhobhaghahara as their prabhava. Because of these properties Vataanulomana will occur which in turn relieves pain, inflammation and stiffness of the degenerative joints in SandhigataVata.

Sneha Virechana, where in the medicines, which have a laxative property are given in low doses on a daily basis to expel doshas. Erandataila or Gandharvahastaditaila can be used on daily basis by its guna of Srotovishodhana, Vrishyam, Adhobhagadosha hara and it regulates the VataGati. Basti karma is the specific therapy for Vatadosha. In dhatukshayajanasandhitavata, Tiktaaksheera/ Rasa siddha basti should be selected. It has Brimhana property to give strength to muscles and give poshana to Asthi dhatu. Tikta rasa has vayu and akashamahabhuta. In Vatavyadhi Sneha should be in 1/4th of total and Madhu should be 1/8th of the total Basti dravya.

Shamana: 1. Bahyachikista: Shastikashalipindasweda has Brimhana property which nourishes the surrounding tissues of the knee joint as well as it relieves characteristic features of janusandhigataVata like Shula (pain), Stambha (stiffness), Gaurava (heaviness). Upanahasweda in sandhi rogas as it has Ushna and snigdhaguna and it relieves the symptoms Shoola, Stabdata of Janusandhigata Vata. Janu basti is specialized knee therapy which rejuvenates the janumarma. This procedure is done to strengthen the muscles, joints and improving the functions of knee joint thereby preventing their further degenerative changes using Balaashwangadhalakshaditaila, Masha and MahamashaTaila, KsheerabalaTaila, Balataila. Murivenna is a Anubhootayoga prepared with Karanja, Kumari, Shigru, Pandalu processed in coconut oil. It reduces the pain, swelling and Stiffness. Shothagna Lepa in sandhi shoola and shotha.

2. Abhyantarachikista: Shula prashamanadravya like Abhaguggulu, Trayodshangaguggulu, Yogarajaguggulu should be administered. Rasaoushadhis like Brihatvata Chintamani ras, Vatavidwamsini rasa, Balarista, Ashwagandharista is more helpful in degenerative conditions. Asthiposhakadravya like Godanti, Shigru, Ashwagandha, Bala and also Tiktapradhana Kashayas like Balaguduchyadi Kashaya, Guggulutiktaka Kashaya should be administered.

NaimittikaRasayana: Ashwagandhachoorana, Shatavari, Bala, Masha, Go dugda, Takra to give on a daily basis, to prevent further damage of tissue surrounding at knee joint. Ashwagandhachurna give strength to muscles and also Vayastapaka property. Masha and Bala promote strength and bulk to the weakened muscles and soft tissues and helps in recovery
(Brihmana, Balya) process and also avoid re-occurrences. YogarajaGugguluRasyanaanupana with Rasnakwatha is very beneficial to relieve pain, stiffness and alleviates Vata, kapha dosha. Kukkuntandaarawakhasma, Shankhabhasma is the supplements of calcium, which is a key for health in bone tissue.

2) In MARGAVARODHAJANYA:
Shodhana: Initially treat vitiated Kaphaand Medo dhatu by doing Rukshana therapy to remove Avarana. After Rukshana therapy Vatasyaupakramas should be followed. 1. Snehapana: GugguluTiktaghrita is best for Snehapana as it is kaphamedo hara. Here in sthoulya patient for Basti chikitsamadhu should be more than Sneha. ErandamoolaksharaBasti and Vaitaranabasti act as Srotoshodaka.

Shamana;
2. Abhyantarachikitsa: Drugs which are having Shothahara, Agnideepaka, Vedanasthapaka and Srotoshodaka properties should be selected. Eg: Punarnava, Gokshura, Shunti, Pippali, Pippalimoola, Rasnasaptaka Kashaya, Dashamooladi Kashaya, Rasnadiguggulu, Amritadadiguggulu.

NaimittikaRasayana: Shilajit is one of the best anti-ageing Remedy. It gives strength to bones, prevents depletion of calcium from the bones. This anti-oxidant and anti-inflammatory property helps to decrease and relieve joint inflammation and pain. Laghu and Rukshaguna of Shilajit helps to reduce the weight in Sthoulya. LasunaRasayana is pathya in Vatarogas. It helps to remove Avarana which is caused by Vata and the property of anti-inflammatory, antioxidant to reduce inflammation. If a person takes Lasuna with ksheera or ghee on daily basis, the person will achieve longevity. Hareetaki is useful to reduce the Sthoulya.

3) ABHIGHATAJANYA: Tikta rasa pradhanDravya, AsthiposhakaDravya, AsthisandhanakaraDravyalike Laksha, Ashishrinkhala along with Vedanastapakadravya should be selected. Dhara/seka is useful in ligament tear conditions. Manjistadilepa is useful in hairline fracture. DashangaLepa, AsthiShrinkhalalepa, LakshachurnaLepa – All these can be used in AbhigatajaSandhigataVata.

DISCUSSION
SandhigataVata is madhyamarogamargagata Vatika disorders in which vitiated Vata gets lodged in Sandhi. Nidanasevana like Bhara.harana-repetitive stressful movements may lead to excessive strain leading to erosion and joint damage. Janu Sandhi is a VaikalyakarMarma, Abhighata is direct cause for Vai-kalyata. Vardakyay: In JaraAvasta, Vatavriddi, Agni vaishamyata causes dhatukshaya. According to Acharya Sushruta, though Jara starts after 60 years, there is very specific commencement of degenerative changes after 40 years which is termed as ParihaniAvastha of Madhya Vyaya, where the individual develops the tendency to suffer from Vatavyadhi, if a person is exposed to Vataprapakaranidana and fails to take appropriate measures will lead to disease. Manasikakaranas like krodha, shoka, bhaya, chinta there will be agnimandya and formation of ama. This causes improper formation of rasadid-
hathus and leads to dhatukshaya. Sthoulya is another indirect causative factor for SandhigataVata, considered as MargavarodhajanyajanuSandhigata. Women are more prone to the disease than males due to the hormonal changes women experience during menopause (Artavakshaya).

Poorvaroopa of SandhigataVata mentioned as avyakta. Avyakta means alpatweni.e. lakshanasin milder form. Mild or occasional Sandhishoola, Sandhishotha and Atopa are considered as poorvaroopa of SandhigataVata due to weak causative factors and less avarana of dosha. “Hantisandhi” is explained as “Akunchanaprasararanayoabhayavacha” i.e. inability to do flexion and extension and “Sandhishleshas, stambha”, these symptoms are not seen in early stages.

Should treat the disease according to the Sthana, Dosh and Dushya. In case of Avruthavata, the medicine should not be Kapharakara but Snigdha and Srotoshodhaka. To treat SandhigataVata drugs acting on both Vata and Asthi should be selected. Asthipradoshajachikitsa like tiktadrayas, ghritha and ksheeraBasti should be adopted. Ghritha is Vata-pittashamaka, Balya, Agnivardhaka, VrishyaandinVayasthapaka. Ghritha also contains Vit-D which plays an important role to absorb Calcium and phosphorus. Snehana pacifies the Vata, softens the body and eliminates the accumulated malas. Swedana relieves stiffness and heaviness of the knee joint. Shodana is very much essential for resolving Srotoriktata and Srotoavarodha and doing the sampraptivighatana of Sandhigatavata. Acharya Sushruta mentioned that to nourish the Asthi and Majja dhatu eight and nine bas-
tis should be administered. Yapanabasti gives good result in Artava KshayajanyaSandhigataVata.

The Bahyachikitsa like Upanaha, Lepa, Abhyanga, Janu Basti has the combined effect of Snehana and Swedana to dilate the blood vessels, improves local circulation and reduces inflammation. Bandhana helps in relieving the pain and supports the worn-out ligaments and tendons of the knee joint. Unmardana (Trampling of the body) is advised as it may bring relief by the pressure effect. Agnikarma and Jaloukaavacharana helps in relieving pain and stiffness instantly. Agni karma alleviates Ama, stiffness, sheeta, shoola. Ushnaguna of Agni helps to remove Avarana effectively and stabilizes the movement of Vata. Raktamoksha is recommended for the treatment of Snayu SandhigataVata and for Vedanashamanart. Samshodhana therapy is considered as a poorvakarma of Rasayana therapy. NaimittikaRasayana acts as an adjuvant to cure chronic diseases like SandhigataVata, prevents wasting of muscles, delay the ageing process and keeps bones and tendons strong. Rasayana has to be administered to prevent the recurrence of disease and maintain the dhatu samyata.

CONCLUSION

JanusandhigataVata is a degenerative joint disorder which calls for an early management, progression of the disease could be stopped at the right time before it brings permanent physical impairment. Depending upon the Rogi and Rogabala, Nidana, Samprapti appropriate Shodana, Shamana and Rasayana
treatment modalities should be adopted. Samshodhana is essential before administering of Rasayana therapy for the treatment to be effective. Rasayana therapy when given along with Shamana Oushadi helps to reduce the disease in a short time. “PoorvavayasemadvevamanushyasaRasayanam” means if Rasayana is administered in the early stages we can prevent the diseases occurring in the later stages of life due to degeneration process occurring in the body. Concept of Naimittika Rasayana is a unique concept in Ayurveda, proved for its beneficial role in the patients suffering from chronic diseases in promoting vitality, and ability to withstand the devastating effects of these diseases. This concept brings a new dimension into the health-care, and promotes an integrated approach between different modalities in the field of medicine. Janu sandhigatavata is Yapya in nature, so repetitive use of appropriate Shodana, Shamana and Rasayana is needed for the effective management.

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