OSTEOARTHRITIS: AN AYURVEDIC VIEW

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ABSTRACT

Osteoarthritis which resembles Sandhigatavata is a degenerative joint disorder characterized by degeneration of joint cartilage and adjacent bone that can cause joint pain and stiffness. Ayurvedic literature doesn’t reveal the special etiological factor for Sandhigatavata however the aggravative factors for Vata can be adopted for it. All the classics of Ayurveda describe “Sandhigata Vata” under Vatavyadhi Chikitsa adhyaya. Two predominant causes of vata prakopa have been described in texts, so Sandhigatavata occurs either as a result of Dhatukshaya or Margaavaran.

Keywords: Osteoarthritis, sandhigatvata, dhatus kshaya

INTRODUCTION

Osteoarthritis which resembles Sandhigatavata is a degenerative joint disorder characterized by degeneration of joint cartilage and adjacent bone that can cause joint pain and stiffness. It begins asymptomatically in the 2nd and 3rd decades and is extremely common by age of 70 yrs¹. Almost all persons by age 40 have some pathologic change in weight bearing joint. 25% females and 16% males have symptomatic Osteoarthritis. Till the age of 55 it occurs equally in both sexes; after 55 the incidence is higher in women². It is estimated that approximately four out of 100 people are affected. The incidence of Osteoarthritis in India is as high as 12%. The disease Arthritis causes work disability. It limits everyday activities such as walking, dressing, bathing etc., thus making individual handicapped. Osteoarthritis is a major cause of morbidity, limiting activity and impaired quality of life especially among the elderly.

According to Ayurvedic view, in old age, all Dhatus undergo Kshaya, Thus leading to Vataprapakopa and making individual prone to many disorder¹. Among them Sandhigatavata is one which commonly affects the individual of old age. The provoked Vata takes shelter in the
Sandhi (Joint) and the affected Sandhi resembles a bag filled with air. There is Shotha (edema) with difficult and painful flexion and extension. Sandhi comes under the Madhyama Roga Marga and thus, involvement of Madhyamaroga marga, Vata Dosha and Dhatu kshaya figures disease as Kashta sadhya.

AIMS AND OBJECTIVES
To study etiopathogenesis of Sandhigatavata.

AYURVEDIC VIEW
NIDANA
Ayurvedic literature doesn’t reveal the special etiological factor for Sandhigatavata however the aggravative factors for Vata can be adopted for it. All the classics of Ayurveda describe “Sandhigata Vata” under Vatavyadhi Chikitsa adhyaya. They can be compiled for the better understanding of hetu as below:\n\n(1) Aaharaja - Ruksha, Lagu, Vistambi, Sheeta, Katu Tikta, Kashaya, Annasevana, Sheetapana Adhyasana, Viruddha – asatmya – Pramita – mithya Ahara etc.
(3) Manasaja – Chinta, Krodha, Shoka, Bhaya
(4) Kalaja – Abhra (cloudy season)
Aparahna (evening)
Aparatra (end of night)
Sheeta Kala (winter)
Varsha (rainy season) etc.
Other than these, the factors which can produce Avarana of Kapha or Meda and factors which make Dhatukshaya also cause Sandhivata.

Asthikshaya can produce aggravation of vata and Kha-vaigunya in sandhisthana can lead to Sandhigatavata.
Medovriddhi can also produce Sandhigatavata because of sthaulya, weight wearing joints have over burden and may lead to Sandhigata vata.

SAMPRAPTI
No clear pathogenesis of Sandhigatavata has been described in ayurvedic text but Samprapti of Vatavyadhis has been explained in Charaka Samhita chikitsa sthana. Vitiated vata dosha fills up the empty channels of the body thereby resulting in various disorders of either one part (localized) or the whole body (generalized)
Ashtang Hridaya frames the Samprapti of Vata Vyadhi like: Dhatukshaya aggravates Vata and same is also responsible to produce Riktata of srotas. Thus the vitiated vata travels throughout the body and settles in Rikta Srotas and further vitiates the Srotas leading to the manifestation of vata vyadhi Samprapti of Sandhigatavata can be understood according to the cause of vata prakopa. Two predominant causes of vata prakopa have been described in texts, so Sandhigatavata occurs either as a result of Dhatukshaya or Margaavarana. Hence Sandhigatavata is classified into two types.
(1) Dhatukshaya Janya Sandhigatavata
(2) Marga Avaran Janya Sandhigatavata
Samprapti of both types will be discussed separately.

(1) Dhatukshaya Janya Sandhigatavata
In old age vata dosha dominates in the body. This lead to Kapha abhava, Also Jathragni and Dhatvagni gets impaired by which dhatus formed is not of good quality. Reduction of Kapha in Sandhis makes Sandhi Bandhana Shithilata. Ashraya ashrayi sambandha also leads to Asthidhatu kshaya. Asthi being the main
participant of the joint, its kshaya leads to Khavaigunya in the joints.

In this condition if Nidena Sevana is done it further produces Vata Prakopa. Vata Prakopa is not corrected by appropriate means at two stage and simultaneously if the person indulges in Asthivaha and Majjavaha stroto dushtikara nidana, the prakupita vata spreads all over the body through these strotas. In the meantime sthanasamshraya of prakupita vata take place in the Khavaigunya yukta Janu Sandhi. This localized vayu due to its Ruksha, Laghu, Kharadi Guna over power and undo all properties of Shleshmaka Kapha producing disease Sandhigatavata5.

(2) Aavarana Janya Sandhigatavata

Usually Sandhigatavata occurs in weight bearing joints in Sthoola individuals. Medodhatu is produced in excess due to Atisnehamsha of Amarasa in such individuals. The excessive Medas produce obstruction for the flow of nutritive materials to the future Dhatus i.e. Asthi, Majja and Shukra leading to their kshaya.

The excessive fat deposited all over the body produces margavarana of vata. Prakupita vata due to margavarana starts to circulate in the body. While travelling, it settles in the joint where khavaigunya already exists. After Sthanasamshraya it produces the disease Sandhigata vata6.

Thus, with the help of samanya samprapti of Vata Vyadhi, the samprapti of Sandhigatavata can be divided into Dhatukshaya Janya and Aavarana Janya7. This help in deciding the prognosis and planning the treatment of the disease.

DISCUSSION

Sandhigatavata vis-à-vis Osteoarthritis is a degenerative joint disorder. It is grouped under the Nanatmaja Vatavikara in charak samhita. It has been explained under the name of Sandhigata Anila, Sandhivata, Gulphavata or Khuddavata by different authors. Various Ahara, Viharaja, Manasa and other Vata prakopaka nidana are mentioned in detail as aetiological factors of Vatavyadhi. Sandhigatavata specially occurs in Vriddhavastha which is Parihanikala in which Dhatukshya takes place which in turn leads to Vataprakopa. Vata and Asthi have Ashrayaashrayi sambandha, which means Vata is situated in Asthi. Vriddha or increased Vata diminishes Sneha from Asthidhatu by its opposite qualities to Sneha, by which Khavaigunya (Rikta-Srotas) occurs in Asthi which is responsible for the pathogenesis of Sandhigatavata.

Symptoms of Sandhigatavata are Sandhishula, Sandhishotha, Akunchana prasarana janya vedana, Hanti sandhi gati, Stambha and Atopa described by various authors specially by acharya charka in chikitsasthan. Here, Sandhishula, Sandhishotha are due to Vata prakopa and special type of Shotha i.e. vatapurna driti sparsha or Atopa indicate Vata dominancy. Akunchana prasaranjanya vedana and Hanti sandhi gati occur due to Kaphakshya and Vataprakopa. Symptoms of Sandhigatavata are similar to that of Osteoarthritis i.e. joint pain, swelling, stiffness, disability and crepitation over joint.

CONCLUSION

Sandhigatavata is a multifactorial disease. Joints under stress and strain are affected mainly. It was observed more in people who undergo repetitive wear and tear of joint due to hard manual work. In this way, the disease San-
dhigatavata can be defined as a disease of sandhi with symptoms of sandhishula, sandhishotha and akunchana prasarana pravitti Svedana and in the later stages hanti sandhigatath.

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