AMAVATA A CASE STUDY

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INTRODUCTION:
We describe a patient who was suffering from pain in both Upper & Lower limb from past 5 yrs. There was no H/o Diabetes, Thyroid disease, Hypertension etc. The A.S.O. Titre was +ve i.e. 400 units (Normal less than 200 units) and was treated for the same on and off from past five years, including allopathic medicaments. Even after that patient was unable to have relief and turned to Ayurvedic medicines.

O.P.D No : 4952
Date : 10.12.2015
Place : Govt. Ayurvedic College Hospital, Patna

Present History:
A Patient aged about 13 years old, student, Hindu by religion with complain of pain & tenderness in upper & lower limb, excessive thirst, early fatigue and morning stiffness. Patient approached the OPD for the above symptoms to get remedy for pain & stiffness.

General Examination:
On examination patient was having Tenderness on all joints (upper and lower limbs) along with marked swelling on the joints of hands and restriction of movements.

Pathological reports:
Hb-9.8gm/dl, E.S.R.-35 mm in 1 Hr, T.L.C - 10,400 /mm 3, D.L.C – N 67, L 23, E 0, M 0, B 0, S. Uric Acid-4.0 mg/dl, A.S.O. Titre +VE (400 unit)

Medicines advised
1. Tab. Yograj Guggulu & Tab Rumalaya – each 1 tab twice daily with luke warm water
2. Maha Rasnadi Kwath-2 tsf twice daily
3. Tab Aarogyavardhini Vati-1 tab, Kai-shore Guggulu-1 tab with Amrita Satva 250mg twice daily
4. Cap Manoll-1 cap twice daily

ABSTRACT
Amavata is a disease condition which is comparable with Rheumatoid Arthritis in modern medicine. In disease Amavata, ama dosha is being directed into joints by the vitiated Vata dosha (vyana vata) and affects the shleshma dhara kala (may be similar to synovial tissue inflammation), resulting in effusion and swelling of joints. Due to this restriction of movement and persistent unendurable pain confined patient to bed with limited working area. Approximately 0.05% of total adult population i.e. 2.5 million adults of India are victims of these ailments. A female patient aged 13 yrs suffering from the same is discussed in this article.

Key Words: Amavata, Deepan Pachan, Rasayan
5. Shallaki Liniment / Vishtinduk Taila for local Application.

RESULTS:
There were significant changes in post-treatment Symptoms of pain & tenderness in joints and joint swelling within 10 days. She was advised to repeat the test after 20 days. A.S.O. Titre was Negative (less than 200 Unit), ESR 19 mm and Hb 10.15 gm on 29.01.2016
The results showed significant decrease in post-treatment levels of ESR and ASO Titre and increase in Haemoglobin as compared to baseline levels along with significant improvement in overall activities & other symptoms.

DISCUSSION

Madhav was the first to identify Amavata as a disease in details. Amavata is complex disease to deal since there are variety of triggering factors .Due to the unpredictable therapeutic outcomes it is impossible to give accurate information, prognosis & pathogenesis of the disease. Generally virudhahara, virudhachesta, mandagni, sedentary life styles leads to accumulation of Ama, which circulates in the body (vyanvayu) & accumulates in kapha predominant places especially in large joints along with the pathogenicity or vitiation of vata leads to Amavata.

Agnimandya & Ama are mainly responsible for the disease. Improving Jathragani and removal of ama was the aim of treatment along with vatahara treatment. Hence for the improvement of Jathragani & pachan of Ama, Langhana, deepan pachana with tikt rasa predominant diet was prescribed. The Yograj Guggulu, Rumalaya, Kaishore Guggulu, Aarogyavardhini, Rasnadi kwath, Manoll were added. These drugs possess Deepana, Pachana, Kapha-Vata alleviating properties, Shothaghna and Rasayana prabhava. Yograj guggul is the best medicine for vata vikara. It has Triphala and guggul as main ingredient. It act as yogavahi rasayan dhatuposhak and jatahargani pradeepak. Rumalya tablet possesses analgesic and antiarthritic properties. By regulating the mediators of inflammation, it exerts a significant anti-inflammatory activity. Maharasnadi kwath is also best medicine for vata vikara and more useful when used with yograja gugul. Arogya-vardhini vati is having deepan pachan srotoshodhak and mala shudhhi kara properties. Amrita satva and Manoll both have rasayan properties. It acts as a immunomodulator and modulates both the humoral & cell mediated immune response to aches & pain. The medicine was found to be effective and safe treatment for patients with aamvata. The result of the present study is in concordance with several studies on Ayurvedic treatment.

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