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To study the efficacy of *Murchit Til Taila* in management of Sandhigata Vata - a single case study

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ABSTRACT:-

described Sandhigatavata is under vatavyadhi in all ayurvedic classical texts. Sandhigatavata is defined as a disease of sandhi (joint) with symptoms of joint pain, swelling in joints, pain during movement and in the later stage restricted movements of joints. In Allopathic science, the similar condition of joint is explained as osteoarthritis. Treatment provides symptomatic relief, but the underlying pathology remains unchecked due to the absence of effective drugs. In the management of Sandhigata Vata, all the Acharyas have described the employment of Bahya snehana, Swedana, Abhyantara Tikta snehapan Vasti treatment.

In this study, a female patient aged 57 years was admitted to the ipd of panchakarma department with complaints of bilateral knee joint pain, crepitus, restricted movement, swelling and general weakness since three years. She was diagnosed dhatukshaya as janya sandhigata vata also known as nirupstambhit sandhigata vata sthansansharya at janu sandhi. Murchit til

taila has vatashamak and vedanasthapan & balya property. Hence in this case murchit til tail was used in the patient for matra vasti, sarvang snehan swedan, as well as sthanik vasti for a period 15 days and the patient was assessed on bases of relief in symptoms at end of treatment. Significant result was found symptoms of sandhi shoola(b/l knee joint pain), sandhishotha(swelling in joints) vata purna druti sparsha (crepitus), Graha(restricted movement).

Keywords: sandhigata vata, matra vasti, sarvang snehan swedan, murchit til taila

INTRODUCTION:-

Pain is an unfavorable sensation that brings an individual to the physician due to a halt from his routine works. The condition is more painful when mobile joints such as Janusandhi (knee joint) of the body are involved due to Sandhigata Vata. The disease Sandhigata Vata is more prone to be affected to knee joint because it is most frequently involved joint in daily routine

work, weight bearing joint of the body, and more prone to develop in overweight patients. In the pathogenesis of Sandhigata Vata, Vata Dosha dominant with symptoms such as Vedana (pain during joint movement) and Shotha (swelling).

The joint stiffness and crepitus (specific sound during joint movement) symptoms that may be co-related in modern parlance with osteoarthritis (OA) of the knee joint. OA is the second most common rheumatologic problem and is the most frequent joint disease having prevalence of about 22-39% in India. Among them, 29.8% persons between 45 and 64 years of age group report diagnosed arthritis.^[1] OA of the knee joint is seen most common in the clinical practice of elderly population. Below 45 years of age, this disease is common in men and involves one or two joints, while in female, 55 years of age, usually involving multiple joints.^[2] OA is the most common form of arthritis and leading cause of chronic disability mostly in all the population. For the management of OA, patients need to take analgesics for daily and lifelong. In OA, surgical therapy-like knee joint replacement is very costly and even after surgery patient has to continue some medicine for a long duration. The use of analgesics and steroids in old age may produce adverse effects such as gastritis, hyperacidity, and sometimes renal failure.[3]

In Allopathy science, mainly analgesics, anti inflammatory drugs or surgery are the options for the treatment of osteoarthritis. These do not give satisfactory relief and also cause great adverse effect.

In ayurveda Acharya Charaka has mentioned repeated use of snehana,

svedana, Vasti and mrudu virechana for the treatment of Vatavyadhi^{-[4]} He has not mentioned the treatment of Sandhigatavata separately. Acharya Sushruta has described specific treatment for the Sandhigata vata firstsnehana, upanaha, agnikarma, ban dhana and unmardana.^[5]

Charaka refers to taila as 'marutaghana'. Taila is mentioned to reduce vata without increasing kapha. [6] It also stabilizes the mansa dhatu. Acharya Sushruta mentions snehana (outer/internal) for management of Sandhigatava. Murchit til taila, has til taila as the base content along with drugs like Haritaki bhibitaki amlaki musta lodhra manjistha kevada which has vataghna along with balya properties. All the above factors inspired me to study the effect of murchit til taila matra vasti in sandhigata vata.

Vasti Chikitsa is considered the best management of vitiated vata. The panchkarma procedure of Vasti has been hailed as 'ardha chikitsa' by acharyas that Is, half of the whole treatment.^[7]

Matra Vasti is a type of Anuvasana Vasti that can be given to almost everybody, in all the seasons, without any strict regime of ahara and vihara and it is nishpariharya i.e, it can be given with maximum ease and has no complication thereafter.^[8]

CASE REPORT:

Single case study.

A female patient aged 57 years came to opd of panchakarma department having complaints of Bilateral knee joint pain, swelling, stiffness, restricted movement, since last 3 years.

Associated complaints:- sandhishaithilya, sarvang gaurav, shrama, vibandham (constipation) since 1-2 years

k/c/o :- nil

no past surgical history

no past history of trauma.

ON EXAMINATION:

pulse ;- 68/min

bp :- 130/90 mmhg

temp ;- afebrile

jiva :- niram

agni :- visham

Hb- 12.4gms%

RBS-112mgs%

S.URIC ACID - 4.16mgs%

CRP – negative

RA – negative

ASSESSEMENT CRITERIA:-

Sarvang Gaurav:-

	Grade
No feeling of heaviness	0
occasional feeling of heaviness not affecting daily routine	1
Frequent feeling of heaviness mildly affecting daily routine	
feeling of heaviness throughtout the daymoderately affecting daily routine	
feeling of heaviness throughout the day daily routine totally hampered	4

kosta :- krur

prakruti :- vaat kaphaj

FAMILY HISTORY:

Not significant

MENSTRUAL HISTORY:

Menopause – since 5 years

SYSTEMIC EXAMINATION:

N.A.D.

RESPIRATORY EXAMINATION:

N.A.D.

PER ABDOMEN:

N.A.D.

Pathological investigations:-

x- ray of both knee joint in standing view:

degenerative changes seen in both knee joints.

Blood report:

Platelet count – 1.9 lakhs cells/ cumm

ESR - 4/10 MM

Urine Routine – Normal

Sr.calcium:-7.9

Shool (joint pain)

	Grade
No pain	0
Pain in joints routine movements normal	1
Pain in joint, slight limitation of movements	2
Pain in joint, limitations of movement with very reduced activity	3

Shrama-fatigue

	grade
No fatigue	0
Fatigue on doing work	1
Fatigue in carrying out routine work	2
Even without doing work	3

Vibhandam

	Grade
1time/day	0
1time/ 2days	1
1time/ 3 days	2
1time/ 4 days	3
1time/ 5 days	4
1time/ 6 days	5
1time/7 days	6

Asthi sandhi baddhata (stiffness in bones and joints)

	grade
No stiffness	0
Stiffness for few minutes relieved by mild movements	1
Stiffness lasting $1-2$ hrs routinue works are not disturbed	2
Stiffness lasting for more than 2 hours mildly affecting the daily routine	3
Episodes of stiffness lasting for 2 – 6 hours daily routine are hampered	4

Sandhi shaithailya – weakness of joints

	Grade
No feeling of weakness in joints	0
Mild feeling of weakness in joints patient can stand/ walk independently without	1
difficulty	
Moderate feeling of weakness in joints patient can stand/walk independently with	2
difficulty	
Severe feeling of weakness in joints patient can stand/ walk only with support	3
Severe feeling of weakness in joints. patient unable stand/ walk with support	4

MATERIALS AND METHODS:-

The procedure for murchit oil [9] is as follows:-

The followings herbs, Haritaki bhibitaki amlaki musta lodhra manjistha ketakipushpa, kumari were taken in powdered form in equal quantity. Four parts of the til oil was taken. The oil was heated on a low flame till it started bubbling and continued till all the bubbles disapppear. After cooling the above powder and 16 parts decotion of same drugs were added. The entire mixture was heated on a low flame till all the water content in it is evaporated. The oil thus

prepared was used for various panchkarma procedure.

TREATMENT PROTOCOL:-

- 1. Sarvang snehan with murchit til oil for 35 mins
- 2. Sarvang basph swedan for 20 mins
- 3. Stanik upnaha of dasang + sunti \times 2 days
- 4. Followed by ubhya janu vasti with murchit til oil \times 10 days
- 5. Matra vasti of murchit til oil -60 ml \times 15 days

OBSERVATION AND RESULT:

SYMPTOMS	Before Treatment	After treatment
sarvang gaurav	1	0
Shool joint pain	3	1
Shrama – fatigue		
	3	1
Asthi sandhi baddhata (stiffness in bones and joints)	2	1
Sandhi shaithailya – weakness of joints	2	1
Vibhandam	1	0

It is observed that murchit tila was very much beneficial to reduce the intensity of vatapurna drutisparsha, shotha, shula, akunchan prasarna vedana. The effect was long lasting after follow up also.

DISCUSSION:

Sandhigata vata specially occurs in vriddha avastha in which dhatukshaya takes place which leads to vata prakopa. vata and asthi have ashraya ashrayi sambandha. [10] In

vriddha avastha increased vata diminishes the sneha from its asthi dhatu. Due to dimination of sneha, kha vaigunya occurs in asthi which is responsible for the cause of sandhigata vata in the weight bearing joints especially in janusandhi.

Murchit til taila contains manjishta which is vatashamak, shothgna sulhara and guru guna. Haridra and vibhitaki have vedanasthapana property. Joint stiffness is due to ruksha, sheeta guna of vata which in

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turn causes the kharatva of mansa, snayu, kandara of asthi leading to stiffness. this is reduced by ushna veerya dravya like manjistha, vibitaki, ketakipushpa. drug like haritaki & aamalaki are brimhan, rasayan which are responsible for asthi poshan. Thus by giving strength to mansa, asthi dhatu & kandra it increases stability of janu sandhi Murchit til taila has vatashamak, vedanasthapan & balya property because of these properties of murchit til taila upashaya occurs.

Action of Matra Vasti is possibly by Anupravaranbhav of vastidravya i.e. sneha moves easily up to grahani, nabhi, katipradesh &kukshi.It spreads all over body to drain out the morbid dosha .Veerya of sneha enters in systemic circulation &may show their action in Mastishka may help in arresting disease process. Snehan mainly acts against ruksha guna caused by vata and due to its guru guna treats laghu guna of vayu and ushna guna takes care of the sheetala guna of vayu.

CONCLUSION:-

From the above case it is concluded that murchit til taila is significantly effective in management of sandhigata vata and also useful in symptoms associated with sandhigata vata. No any adverse effect was found during or after treatment.

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