



Curing Aamvata through Ayurvedic Management-A case report

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ABSTRACT-*Ayurveda* describes *Aamvata* (RA) as a primary musculoskeletal joint condition. Swelling, discomfort, and stiffness in the arms and legs. The ankle, knee, and hip joints, as well as the wrist and elbow, are all affected. The clinical terms for neck and shoulder include *Aamvata's* manifestations. The pinnacle the beginning of RA is more common in people over the age of 25 to 60 years old, but no one is safe at any age. In the modern age *Aamvata* is the most frequent disease that affects a big number of elderly people. The phrase *Aamvata* comes from the Sanskrit word. The term *Aam* is a state in which a number of different things happen at the same time the presence of illnesses in the body has a harmful effect. When *Aam* is combined with *Vatadosha*, it creates a powerful force & resides in *Shleshmasthan*

(*Asthisandhi*). This causes a painful sickness. *Aamvata* treatment should begin with *Langhana* (fasting), and *Dipana* (improvement in digestion), *Pachana* (appetite), *Virechana* (Purgation), *Swedana* (fomentation therapy), *Basti* (medicated enema) sequentially according to *Yogaratanakara*. Here a case of 41 yr old female with *Aamvata* treated with complete *ayurvedic* modalities like *langhana*, *deepana-pachana*, *virechana* and *ayurvedic* formulations and we got uplifting results.

KEYWORDS- Rheumatoid arthritis, *aamvata*, *langhana*, *virechana*, *ayurvedic* medications.

INTRODUCTION- Musculoskeletal joint illnesses, which are marked by pain and swelling of the joints, are classified as *Aamvata Sandhivata* and *Vatarakta* in

Ayurveda. These disorders can be linked to rheumatoid arthritis (RA), osteoarthritis (OA), and gouty arthritis based on symptom similarities. *Aamvata* (RA) is a chronic illness having clinical manifestations according to *Ayurveda*. Swelling, discomfort, and stiffness in the ankle, knee, and hip joints, as well as the wrist, elbow, and shoulder. The international prevalence of RA varies between 0.3 and 1.5 percent, which is two to three times greater than the national average compared to males, girls are more attractive. Most the peak incidence of the start of RA affects people between the ages of 25 and 60 old group, yet it is also clear that this condition affects people of all ages.

RA can range in severity from a mild oligoarticular condition with little or no joint destruction to polyarthritis with significant functional impairment. Nonsteroidal anti-inflammatory medications (NSAIDs) are routinely used to treat RA (NSAIDs)¹. These medications are proven to provide symptomatic relief but do not slow disease progression. Such medicines may cause gastrointestinal side effects ranging from mild dyspepsia and heartburn to stomach and duodenal ulcers, as well as lethal consequences. *Acharya Yogaratnakara* of *Ayurveda*, on the other hand, has presented a different concept of RA management. According to this theory, RA treatment should begin with *Langhana* (fasting) and then *Dipana* (appetite stimulant), *Pachana* (improved digestion), *Swedana* (fomentation therapy), *Virechan* (purgation), and *Basti* (medicated enema) are all performed in order². The *Aamvata Chikitsa Sutra* describes these five processes in order

(principle of treatment of RA). *Ayurveda* has a few such concepts that need to be scientifically validated, hence the current study was undertaken *Aamvata Chikitsa Sutra* was supposed to be studied on a clinical level.

Aims & Objects-

- 1) To study the effect of *Anshanrupi langhana* in *Aamvata*.
- 2) To study the effect of *Virechnana* in *Aamvata*.

Case Report - A 41 years old female patients came with complaints of

- pain and stiffness of *metacarpo phalangeal* joints of both hands.
- pain and mild swelling on bilateral wrist joints
- Followed by pain and stiffness of both knee joints.
- Further involving both ankle and elbow joints
- Difficulty in Walking , performing day to day activities
- *Generalised bodyache*
- Poor appetite (*kshudhamandya*)

Since 5-6 months

History of past illness: No history of diabetes, hypertension, rheumatic heart disease, gout and any chronic disease.

- **Family history:** The mother of the patient had history of rheumatoid arthritis.

- **Menstrual history**- regular, interval-4-5 days, painful
- **Obstetric history**- G₂P₂L₂A₀D₀

O/E

- GC-Moderate
- BP-110/80 mm of hg
- Pulse-78/min
- Spo₂- 97% on Room air
- **Ayurvedic parikshana**
- Nadi-78/min
- Mala-samyak
- Mutra-samyak
- Jivha-saam
- Nidra-khandita
- Shabda-prakrit
- Sparsha-anushna
- Drika-prakrit
- Akriti-madhyam
- Udar-mrudu, sparshashatva nasti
- Urah-samanya
- Kshudha-mandya
- Bala- Alpa
- Weight-64.3kg

Material and Methods:

In the present study, a single patient of symptoms of *Aamvata* was selected from *Aarogyashala Rugnalaya, Ganeshwadi, Panchvati, Nashik.*

लंघनं स्वेदनं तिक्तदीपनातन कटुतन च। विरेचनं स्नेहपानं बस्त्यश्चाममारुते ॥

रूक्षः स्वेदो तिधािव्यो
वालुकापोटलैस्तथा। उपनाहाश्च कितव्यास्तेऽतप
स्नेहविवर्जितः॥

(योगरत्नाकर)³

The treatment regimen planned as follows-

1. *Anshanrupi langhana*(complete fast)
2. *Deepana-pachana*
3. *Virechana*
4. *Ayurvedic medications*

To begin, *Langhan chikitsa* for seven days. Abstinence from all foods

In addition to lukewarm *shunthi siddha jala*. And, in addition to *Langhan, Ruksha waluka pottali sweda* is also available. indicated. After 7 days of *anshanarupi langhana*(complete fast) clinical assessment of patient was done, *sandhishoola, sandhigrahata, kshudhamndya* this symptoms decreased significantly. Then prior to *virechana karma, deepana-pachana chikitsa* given for 3 days

2. Deepana-pachana- for 3 days

1. *Aampachak kadha* 20 ml BD before meal
2. *Hingvashtak churna* 1 gm with *Goghrtia* BD *samaanakala*
3. *Dhanyak* and *shunthi sidhha jala* for drinking

After *samyaka pachana lakshana* such as *kshudavidhi, samyak mala-mutra pravriti,*

we gave *Tikta ghrita* as a *sneha kalpa* for *virechanpurva snehapan* in increasing order, starting at 30 ml on day 1 at 6.30 am, gradually increasing the dose to 60 ml on day 2, 90 ml on day 3, and 120 on 4th day. *Sarvang snehana-swedana* is performed for 2 days with *tilataila* and *dashmoola kwatha*. *Virechana* was performed using *apathya* given.

Trivruttavaleha 25 gm and *Koshna jala*, and the patient had a total of 12 *malavegas*. After that, a three-day *samsarjana krama* was administered, which included *manda*, *mugda-yusha*, and *vilepi*. The patient was again evaluated for *agnimandya*, *daurbalya*, and *aruchi*. To pacify the remaining *doshas*, *ayurvedic* medications along with *pathya* –

Shaman chikitsa

Sr.no	Medication	Dose	Duration	Anupana
1	<i>Agnitundi vati</i>	250mg	<i>Vyanodankala</i> (after meal)	<i>Koshnajala</i> (lukewarm water)
2	<i>Sinhanaad guggul</i>	250mg	<i>Vyanodankala</i>	<i>Koshnajala</i>
3	<i>Maharasnadi kwacha</i>	15ml	<i>Vyanodankala</i>	<i>Koshnajala</i>
4	<i>Gandharva tail</i>	30ml	<i>Apaankala</i> (empty stomach)	<i>Ksheer/koshanjala</i>
5	<i>Bru.saindhavadi taila</i>	--	--	For local application over joints

OBSERVATIONS-

Before treatment- *Sandhi-parikshana*(joint examination)

<i>Sandhi</i>	<i>sparsha</i>	<i>shoola</i>	<i>grahata</i>	<i>shotha</i>	<i>Sparshashtva</i>
<i>Parvasandhi</i> (MCP)	<i>Ushna</i>	+++	+++	++	++
<i>Manibandha</i>	<i>Anushna</i>	++	++	+	+
<i>Janusandhi</i>	<i>Anushna</i>	+++	+++	++	++
<i>Gulfasandhi</i>	<i>Ushna</i>	+++	++	++	++
<i>Kurparsandhi</i>	<i>Anusha</i>	++	++	+	+

After treatment *sandhi-Parikshana*

<i>Sandhi</i>	<i>sparsha</i>	<i>shoola</i>	<i>grahata</i>	<i>Shotha</i>	<i>Sparshashtva</i>
<i>Parvasandhi</i>	<i>Anushna</i>	+	+	-	-
<i>Manibandha</i>	<i>Anushna</i>	+	+	+	-
<i>Janusandhi</i>	<i>Anushna</i>	+	+	-	-
<i>Gulfasandhi</i>	<i>Anushna</i>	+	-	-	-
<i>Kurparsandhi</i>	<i>Anushna</i>	-	-	-	-

Patient was admitted on 07/05/2021 and discharged on 25/05/2021 during this time, received above mentioned treatment. On discharge following medications given for next 10 days, Next follow-up on 10/06/2021.

Sr.no	Mediacations	Dose	Duration	Anupana
1	<i>Amruta guggul</i>	250mg	<i>Vyanodankala</i>	<i>Koshnajala</i>
2	<i>Sinhanaad guggul</i>	250mg	<i>Vyanodankala</i>	<i>Koshnajala</i>
3	<i>Hingvashtak churna</i>	500mg	<i>Samanakala</i>	<i>Goghrita</i>
4	<i>Maharasnadi kwatha</i>	15ml	<i>Vyanodankala</i>	<i>Koshnajala</i>
5	<i>Aragwadhkapila vati</i>	2tab	<i>apanakala</i>	<i>Jala</i>

It is observed that, the *Langhana* with *Ruksha valuka Sweda*, *Virechana* and *shaman chikitsa* is effective in treating *Aamvata*.

DISCUSSION- Poor digestive power, according to *Ayurveda*, is the fundamental cause of *Aam* (metabolic toxic waste materials) is a crucial aspect in Rheumatoid arthritis (RA) pathogenesis. Physically *Ama* with *Kapha* has a tendency to Place your deposit in *Kapha*-dominant areas. Specifically, the joints. When this became tainted, *ama* causes a blockage in the natural flow of blood. *Vata Dosha* is a type of *dosha* that manifests as joint swelling and soreness. pain, tenderness and recurrent fever, then the disease is termed as *Aamvata*⁴.

Langhana-It's the first thing that's been suggested for dealing with the problem.

Aamvata, which is also known as *Rasaja*, is an *Amasayotha vyadhi*.

In such cases, *vikara*, *langhana* is the first line of defense. In

Yogaratnakara langhana has been suggested as the most effective treatment for *Ama*.

It has been stated that *sama dosha* cannot be removed from the body until and unless *ama* obtains the *pakva* from, and that the best remedy for this is *langhana*. In *Vatavridhi*, *Langhana* is prohibited, although it is permitted in *Aamvata*. As soon as the *nirama vata* condition is reached, begin *langhana*. Furthermore, *Langhana* induces a hunger response in patients, resulting in increased production of internal corticosteroids, which provide comfort by reducing inflammation.

1. ***Sinhanaad guggul***⁵- *Yogratnakara* mentioned that *Aamvata* is *Rogadhikara* of *Sinhanaad guggul* its contain *Suwarnamakshika*, *Trifala*, *Shudha gandhaka*, *Shudha guggul* and *Eranda tail* which has *Laghu*, *Ruksha*, *Ushna*, *Tikshna* propertie. It's do *Ama-Pachan* (bio-toxin neutralizing), *Shothaghna* (oedema reducing), *Deepan* (enzyme activating),

Balya (energy enhancing), *Shoolghna* (analgesic). Its enhances *Agni-Bala* and alleviates the *Aam* and prevents the further formation of *Ama*. which helps in breaking the *Samprapti* (pathogenesis) of *Aamavata*

2. Rooksha – Valukapottli sweda: In *Aamavata*, we advised *Rukshasweda* in the form of *Valukapottali*. It helps in pacifying vitiated *Vata Dosha* thus leads to relieve pain and stiffness. *Swedana* have been specially indicated in the presence of *Stambha*, *Gaurava* and *Shula*. So here also we advised *valuka pottali sweda*

3. Trivrutta aveleha-It has *krumighna*, *raktashodhana*, *jwaraghna* and anti – inflammatory properties, , it has action on *yakruta* , maintaining healthy Cholesterol levels.

4. Maharasnadi kwatha⁶- It possesses antitoxin and *ama pachak* (Detoxifier) properties, which help to minimize *ama* development, eliminate *amavisha* from the channels, and speed up their removal from the body. As a result, it aids in the treatment of disorders in which *ama* or *amavisha* are involved or have a role in the underlying etiology of the disease, such as Rheumatoid Arthritis and Gout.

5. Amruta guggul⁷- In rheumatoid arthritis, it lowers joint discomfort and swelling. It helps digestion and lowers *ama*, or toxins created as a result of poor food absorption.

6. Aampachak kadha- It is our proprietary formulations, includes drugs like *punarnava*, *musta*, *raktachandan*, *patol*, *sunth*, *daruharidra*, *devdaru*, *gokhru churna*,

guduchi, *haridra*, *kiratikta*, *manjishtha* which helps to pacify the *amavisha* and stimulates *agni* by *deepana-pachana* properties.

CONCLUSION- Thus, *langhna* followed by *pachana-deepana* , *virechana* treatment along with *ayurvedic* medications and *ruksha waluka pottali swedana* is effective in curing *aamavata*.

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