



“A Clinical study to evaluate the effect of *Sadyovirechana* and *Vataraktahara Kashaya* in *Vatarakta* ”

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ABSTRACT

Ayurveda which is ancient and holistic medical science had mentioned that following *Apathya Ahara* and *Vihara* is the root cause for all the diseases such as *Ruksha Ahara*, *Viruddhashana*, *Veganigraha* etc have been described as “*Hetus*” of *Vatarakta* these mainly vitiate *Vata* and *Rakta*. Even though a lot of research has been done in *Vatarakta* management, there is still a vast scope to explore new avenues. Here, we tried the formulation to treat *Vatarakta* according to Ayurvedic procedure. To evaluate the combined effect of *SadyoVirechana* with *Eranda Taila* and *Vataraktahara Kashaya* in the management of *Vatarakta* .

Patients presenting with classical signs and symptoms of *Vatarakta* are selected in a single group of 30 patients and treated with the above medicine fulfilling the inclusion & exclusion criteria designed for the study for the Duration of 30 days . In this study we have seen that the treatment is effective in controlling the classical signs and symptoms of *Vatarakta* . The modalities of treatment used in this study i.e *SadyoVirechana* followed by *Vataraktahara Kashaya* is effective in the management of *Vatarakta*. the formulation have shown highly significant result in reducing subjective and objective parameters . Thus , has statistically significant outcome .

Key Words : *Vatarakta*, Gouty Arthritis , *Sadyovirechana* , *Vataraktahara Kashaya*.

INTRODUCTION

Ayurveda the science of healing is now on its sharp edge of advancement which has solution for so many dreadful diseases. The day to day growing and grooming lifestyle is inviting so many diseases. The “*VATARAKTA*” is one of them. The present dietary habits and Life style etc are the predisposing factor for establishing the disease.

Vatarakta is the disorder where in pain is predominant symptom which disturbs day to day life of the patients. It is a disorder of *Vata* associated with *Rakta*. The chief complaint of the patient is severe joint pain which is primarily seen in *Hasta, Pada, Mulagata sandhi*¹ and then migrates to other joints in a way similar to *Akhuvisha*¹.

Vatarakta is better correlated with “Gout” in the modern medical science. Out of the affected population males are more common while females of post menopausal group are on more risk. Gouty arthritis has onset of symptoms in great toe in 2/3rd of the population while remaining has in other joints. The tissues around the joints are swollen, hot, red, shiny & extremely painful especially in the night.²

The line of treatment in the modern medicine is NSAID's ,Glucocorticoids , Antihyperuremic drugs , Colchicine , and Uricosuric agents³. All these are associated with adverse effects and certain limitations which fail to modify the course of disease or unable to treat the disease. Therefore, there is a definite need to explore more efficacious , conservative and radical cure to this chronic progressive illness. So there is a need to understand the pathogenesis of disease to break down the vicious circle of *Doshas*.

In *Charaka Samhita* the difference in *Nidana* and *Visheshata* of *Dosha* and *Dushya* of *Vatarakta* has been mentioned in separate chapter . In *Sushruta Samhita* , *Vatarakta* has been described under *Vatavyadhi* , because of the dominant *Vata Dosha* . In *Ashtanga Hrudya Vatarakta* has been explained in separate chapter .

Management of *Vatarakta* is a challenge as it is a disease of severe morbidity, chronicity and incurable to certain extent with associated complications .With certain life style modifications and by *Ayurvedic* modalities like *Shodhana* and *Shamana chikitsa* it can be cured and prevented.

In the this study we have selected the *Shamana Aushadhi, Vataraktahara Kashaya*⁴ it is an age old prescription for *Vatarakta* and is found to be very effective. *Vataraktahara kashaya* ,which has been explained in *Sahasrayoga* in the management of *Vatarakta* is advised after *Sadyo Virechana* with *Eranda Taila* and *Anupana* milk .An effort is made here, to validate the economicaly, easily available formulation in the management of *Vatarakta* .

AIMS AND OBJECTIVES

1. To review and analyse the literature of *Vatarakta* .
2. To evaluate the effect of *Sadyovirechana* and *Vataraktahara Kashaya* in *Vatarakta* .

MATERIALS AND METHODS

METHODOLOGY

Sample Size : 30 patients fulfilling the diagnostic and inclusion criteria of *Vatarakta* are taken for the study.

Source of Data:

Patients attending the O.P.D. of Post Graduate Department of Kayachikitsa, Karnataka Ayurveda Medical College, Mangalore, were selected for the study.

INCLUSION CRITERIA	EXCLUSION CRITERIA
<ul style="list-style-type: none"> • <i>Pratyatma lakshana</i> of <i>Vatarakta</i> according to classics • Age group in between 16yrs to 60yrs • <i>Virechana Arha</i> patients . • Both treated and fresh cases • Serum uric acid level more than 7mg/dl . 	<ul style="list-style-type: none"> • <i>Virechana Ayogya</i> • major systemic diseases • Pregnancy and lactating mother.

DIAGNOSTIC CRITERIA:

- Diagnosis will be done strictly based on clinical features of *Vatarakta*.

PROCEDURE AND STUDY DESIGN :

Intervention	Dose	Route	Time of administration	Anupana	Duration	Follow up
Sadyovirechana With Eranda taila	15ML	Oral	Early morning	100 ml of goksheera	1day	Next day
Vataraktahara kashaya	48 ml	Oral B/F	BD	-----	30 days	1 ST , 15 TH 32 nd Day

Course of Treatment - 31 days.

ASSESSMENT CRITERIA:

- Signs and symptoms of *Vatarakta* are evaluated before and after treatment .
- Analysis of Subjective and Objective parameters as per proforma will be done.

SUBJECTIVE PARAMETER:

- *Shoola*
- *Daha*
- *Kandu*
- *Suptata*

OBJECTIVE PARAMETER:

- *Shotha*
- *Stabdhata*
- *Vakrata*
- *Vaivarnya*

ASSESSMENT OF RESULT:

Detailed proforma is prepared for the assessment of both subjective and objective parameters. The data obtained is analysed statistically with paired t test .

INVESTIGATIONS

- Serum Uric acid

STASTICAL ANALYSIS

For the statistical analysis, the data obtained in both the groups were recorded, presented in tables, diagrams and graphs. The following statistical tests are used for assessment of parameters:

- Assessment of parameters (Before treatment , Follow up and After treatment) –Paired ‘ t ’ test.

The corresponding p value was noted and obtained results were interpreted as follows:

- For p value > 0.05 – interpreted as no significant.
- For p value < 0.05 – interpreted as significant

OBSERVATIONS AND RESULTS

The observations give a detail descriptive statistical analysis about all the 30 patients suffering from *Vatarakta* according to their Age, Sex, Religion, Education, Socioeconomic status, Marital status, Occupation, Dashavidha parikshas *etc*



RESULTS

Statistical analysis of Subjective and Objective parameters .

Symptom	Measures				%	S.D (+.)	S.E (+.)	T Value	P value
	BT								
Sandhi Shoola	2.47	15 th	1.70	0.77	31.08	0.679	0.126	4.45	<0.05
		AT	0.70	1.77	71.62	1.104	0.205	8.71	<0.05
Daha	1.57	15 th	1.00	0.57	36.17	0.679	0.126	2.53	<0.05
		AT	0.40	1.17	74.47	1.020	0.189	5.27	<0.05
Kandu	1.07	15 th	0.77	0.30	28.13	0.466	0.087	1.02	>0.05
		AT	0.53	0.53	50.00	0.776	0.144	1.86	<0.05
Suptata	1.27	15 th	1.03	0.23	18.42	0.504	0.094	1.02	>0.05
		AT	0.47	0.80	63.16	0.887	0.165	3.76	<0.05
Shotha	1.93	15 th	1.47	0.47	24.14	0.571	0.106	2.09	<0.05
		AT	0.87	1.07	55.17	1.048	0.195	4.57	<0.05
Stabdhata	0.93	15 th	0.83	0.10	10.71	0.403	0.075	0.41	>0.05
		AT	0.47	0.47	50.00	0.730	0.136	2.09	<0.05
Vakrata	0.37	15 th	0.37	0.00	0.00	0.000	0.000	0.000	0.000
		AT	0.37	0.00	0.00	0.000	0.000	0.000	0.000
Vaivarnya	0.30	15 th	0.30	0.00	0.00	0.000	0.000	0.00	0.00
		AT	0.17	0.13	44.44	0.346	0.064	1.03	>0.05
Serum Uric Acid	Measures				%	S.D (+.)	S.E (+.)	T value	P value
	BT								
	7.67	AT	6.99	0.68	8.76	0.577	0.107	3.46	<0.05

Overall effect of Treatment

OVERALL EFFECT OF TREATMENT		
Grading	Relief in Percentage	Relief in Patients
No Improvement	0%	2
Mild Improvement	1-30 %	6
Moderate Improvement	31 – 60%	3
Marked Improvement	61 – 99 %	14
Complete Remission	100%	5

In the Overall effect of treatment in *Vatarakta* , out of 30 patients in this study, 2 Patients got No Improvement (7%), 6 patients got mild improvement (20%), 3patients (10%) got Moderate improvement, 14 patients (46%) got Marked Improvement and 5 patients got complete remission (17%) .

Overall effect of the treatment is 62.95%

BT	15 th	AT	SD	SE	T Value	P Value
9.9	7.47	3.97	4.126	0.766	5.02	<0.05

In the overall effect of treatment, statistical analysis showed that the mean score which was **9.9** Before treatment was **7.47** during the treatment and reduced to **3.97** After the treatment , and there is a statistically significant change ($P < 0.05$) .

DISCUSSION

Vatarakta mostly affects the extremities like *Hasta* , *Pada* and *Mulagata Sandhis* .It has been emphasized in Ayurvedic classics , that specific etiological factors leads to the morbidity of the *Vata dosha* and *Rakta dhatu*. This vitiated *vata* along with *rakta* circulates very fast all over the body due to the *Sukshma* and *Drava guna* of *Vata* and *Rakta* respectively, and undergo *Dosha Dushya Sammurchana* in *Sandhi Sthana* , specifically *Pada* and *Angula sandhi* (metatarso-phalangeal joint). The *Kapha* has *Sheeta guna* and *Sandhi* are considered to be *Sthana* of *Kapha dosha*. Thus, small joints not being straight promotes the accumulation of circulating vitiated *Vata* and *Rakta*, every time the patient indulges in *Teekshna-Ushna kshara aahara* .

Gout is an inflammatory response to the monosodium urate crystals formed secondary to hyperuricaemia the prevalence rate of gout is more in females of post menopausal group than in males .The present study has been selected on understanding the need of effective formulations to manage the *Vatarakta* .

DISCUSSION MODE OF ACTION OF DRUG:

Vatarakatahara kashaya mentioned in *Shahasrayoga* for the management of *Vatarkata* consists of two drugs i.e , *Guduchi* and *Shatavari* , where *Guduchi* is mentioned as a *Rasayana* . It has *Ushna Virya* , *Guru Snigdha Guna* and *Madhura Vipaka* . It has *Balya* , *Tridoshashamaka*, *Deepaniya*, *Shotha-hara*, *Vata-Shonitahara* (subsides gouty arthritis) properties.

It ultimately increases the functioning of immune system of the body. The Probable effect of the drug on all above symptoms could be due to the Anti inflammatory, Antioxidant, Arthritic properties of drug . Charaka mentioned *Guduchi* has *Vayah Sthapana* , *Daha Prashamana* properties by possessing above qualities it ultimately helps in relieving the features of *Vatarakta*

Shatavari, is the queen of herbs, is sanctified with *Madhura* , *Tikta Rasa* and *Guru* and *Snigdha Guna*. It inherently portrays *Sheeta Virya* and *Madhura Vipaka*. Because of *Guru* , *Snigdha Guna* , it appeases the *Pitta Doshas* and *Vata Doshas* where it helps in pacifying the *Vatarakta* . whereas having a *Madhura* and *Sheeta Guna* it aggravates the *Kapha Dosh*. Owing to the essential properties and *Doshas*, it has a positive effect on the various *Dhatus* which are *Rasa*, *Rakta*, *Mamsa*, *Asthi* and *Shukra* . where *Rakta Dhātu* is mainly involved in disease pathogenesis .

It has main properties of *Tridoshahara* , *Kshayapaha*. improves exhausted body tissues and treats chronic respiratory conditions like tuberculosis, *Kshataksheenahara* , *Pittasrahara* conditions), *Stanyada* and *Shukrala* .

Eranda taila paana with *Ksheera* helps in *Virechana* as usual .As *Rakta* and *Pitta* are *aashrya-aashryee bhava* so for *Shamana* of *Rakta* the *Virechana* is best. By all these combination of *shodhana* and *shamana chikitsa* *Doshas* subsided and brought *Dushya* to its normalcy. So , we came to conclusion that above treatment is best for *Vatarakta*

DISCUSSION ON OBSERVATIONS :

Age incidence: Among 30 patients 17% patients were in the age group 26-35 year,20 % patients were in the age group 36-45 year,37 % patients were in the age group 46-55year,27% patients were in the age group 56-65%.More patients were in group 46-55 years.i.e. 37% as disease affect the elderly people more.

Socio Economic Status : Social Economic status of *Vatarakta* in 30 patients reveals that max. no. of patients belong to rich class that is 37%, Among all 30 patients selected randomly 13 % were from poor category, 20% were from lower middle class, 30% were from upper middle class

Ahara : In the present study 87% of patients had mixed diet. Non-vegetarian diet is low in fibers and high in fat content and *Anupa Mamsa* is one of the causative factors of *Vatarakta*. As Mangalore is a coastal belt people here consume more sea food which is a primary factor for *Vatarakta* . were only 13% of people were vegetarian.

DISCUSSION ON RESULTS :

Effect on Sandhishoola : There was very effective result on *Sandhishoola* after course of whole regimen. It was noticed that after procedure there was gradual decrease in the mean score from 2.47 to 1.70 on 15th day to 0.70 after treatment showing 71.62 % improvement. The statistical analysis proved that the change occurred is highly significant as ($P < 0.05$).

Effect on Daha : The Administration of *Vataraktahara Kashaya* was found to be effective in reducing the *Daha* . The mean score of *Daha* reduced from 1.57 to 1.0 on 15th day to 0.40 after treatment and a striking improvement of 74.47 % which gave a P value of less than 0.05 which is statistically significant.

Effect on Kandu : The mean score of *Kandu* came down from 1.07 to 0.77 on 15th day to 0.53 after the course of the treatment with the P value of less than 0.05 which is statistically significant. It showed 50% improvement.

Effect of Suptata : The mean score of *Suptata* was 1.27 before treatment and it was 1.03 on 15th day which reduced to 0.47 after the course of treatment , with the P value < 0.05 which is statistically significant . There was 63.16% of improvement seen .

Effect on Shotha : The mean score of *Shotha* was 1.93 before treatment and it was 1.47 on 15th day which reduced to 0.87 after the course of treatment , with the P value < 0.05 which is statistically significant . There was 55.17% of improvement seen .

Effect on Stabdhatta : The mean score of *Stabdhatta* was 0.93 before treatment and it was 0.83 on 15th day which reduced to 0.47 after the course of treatment , with the P value < 0.05 which is statistically significant . There was 50 % of improvement seen .

Effect on Vakrata : The mean score of *Vakrata* was 0.37 before treatment and it was 0.37 same on 15th day which did not show any marked improvement even after the course of treatment , which was 0.37 only , with the P value 0.00 so, there is no statistically significant change. There was 0 % of improvement seen .

Effect on Vaivarnya : The mean score of *Vaivarnya* was 0.30 before treatment and it was 0.30 same on 15th day which reduced to 0.17 after the course of treatment , with the P value > 0.05 so , there is no statistically significant

change . there was 44.44 % of improvement seen .

DISCUSSION ON INVESTIGATION:

In this study the effect of Serum uric acid on *Vatarakta* was reduced .

The mean score was 7.67 before treatment and reduced to 6.99 after treatment with 8.76 % improvement , and there is a statistically significant change ($P<0.05$).

The therapy adopted in present study is mostly useful in reduction of Serum uric acid level also we observed that the level of Serum uric acid before treatment and after treatment reduced significantly .

CONCLUSION

It can be said that the present study shows significant remission in signs and symptoms of *Vatarakta* . Therefore, it is imperative that the selected medicines help in management of the disease. *Vatarakta* mostly affects the individuals with in the age between 46 to 65 years. Sex, marital status, religion, social status, education bear no relation in causation of this disease.

Sadyovirechana by *Eranda Taila* with *Ksheera* followed by *Vataraktahara Kashaya* is an Effective modality in the management of *Vatarakta*. Treatment Modality has shown the significant decrease in the level of Serum uric acid . Above formulation shown statistically significant improvement in controlling the symptom like on *Sandhishoola* ,*Daha* ,*Kandu* ,*Suptata* , *Sandhishotha* and *Stabdhatha*. The Treatment modality is non- invasive ,cost effective and can be conducted at O.P.D level.

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