



# A Comprehensive Approach to *Amavata* Management : A Case Study

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**Abstract :** *Amavata* is a condition marked by the vitiation of *Vata dosha*, leading to an accumulation of *Ama* in the joints resulting in the inflammation and pain. Madhava nidana exclusively explain about the *Nidana*, *lakshana* and *Chikitsa* of *Amavata*. In contemporary science Rheumatoid arthritis share similar clinical symptoms as that of *Amavata*. RA is a chronic autoimmune disease characterized by pain and inflammation in multiple joints associated with morning stiffness. In the present case study, patient came with symptoms of pain in multiple small joints, swelling and pain over bilateral knee joint associated with morning sickness. Patient underwent a comprehensive Ayurvedic treatment regimen consisting of *Sarvanga Dhanyamla Parisheka*, *Churna pinda sweda*, *Valuka sweda*, *Jatamayadi churna lepa* along with *Sadyovirechana* with *Eranda taila* and *ksheera*. A marked reduction in the *Amavata* symptoms was observed, leading to enhanced patient comfort and overall wellbeing. Based on the findings Ayurvedic medicinal intervention can be advised for the prevention and management of future *Amavata* cases.

**IndexTerms -** *Amavata*, RA, *Langhana*

## INTRODUCTION

The modern lifestyle, marked by poor dietary choices, lack of physical activity and high levels of stress has led to a surge in *Ama* related health issues<sup>1</sup>. *Amavata* is a condition caused by weakened digestive fire leading to the *Ama utpatti* in the *Sleshmastana* and *Prakopa* of *Vata dosha* resulting in pain, stiffness and swelling of joints which closely resembles the chronic inflammatory autoimmune disease called rheumatoid arthritis<sup>2</sup>. The disease is characterized by chronic symmetrical polyarthritis with systemic involvement affecting approximately 0.8% of the total population in which women are three times more prone to develop the condition. RA typically affects patient's lives beyond physical symptoms, influencing their social interactions, work capacity, self perception, emotional state and mental health. The conventional treatment for RA includes NSAIDs, DMARDs, and immunosuppressive therapies where the long term use can leads to numerous side effects which highlights the need for the alternative treatment strategies. Ayurvedic medicine offers a holistic approach to treating *Amavata* by targeting the underlying cause of the disease<sup>3</sup>. According to Acharya Chakradatta the treatment principles involved are *Langhana*, *Swedana*, Administration of *Tikta* and *katu rasa dravya* with *Deepana* property, *Virechana* and *Basti*<sup>4</sup>. In the present study a case of *Amavata* was treated by using *Shamana chikitsa*.

## CASE REPORT

A female patient aged 60years complaints of pain in bilateral knee joint and multiple small joint since 8 years came to Jara OPD of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital Hassan. The pain is accompanied by morning stiffness that lasts for 2 hours and worsens at night, characterized by severe pricking sensation. The patient also complaints of swelling in bilateral knee joint, blackish discoloration of bilateral lower limbs, deformity in metatarsophalangeal joint and generalized weakness. Initially pain was experienced in bilateral shoulder joint and elbow joint and had taken analgesics to manage it. Later the pain progressed to involve the bilateral wrist joint, metacarpophalangeal joint, ankle joint and metatarsophalangeal joint which severely impacted patient's daily activities. The pain was aggravated on cold exposure and relieved by hot fomentation. Gradually patient observed blackish discoloration of lower limbs and deformity over bilateral metatarsophalangeal joint. In the past 6 months patient experienced pain and swelling over bilateral knee joint along with generalized body weakness. So the patient decided to take Ayurvedic medication and admitted for 13 days. The patient was informed about the treatment protocols and consent was obtained prior to proceeding. The patient is being medicated for hypertension and hypothyroidism since 8 years.

**Dasha vidhpariksha***Prakriti : Vatakapha prakriti**Vikriti : Dosha – Vata pradhanatridosha, Dushya – Rasa, Meda, Asthi**Sara : Madhyama**Samhanana : Madhyama**Satwa : Avara**Pramana : Madhyama**Satmya : Madhyama**Aharashakti : Madhyama**Vyayama Shakti : Avara**Vaya : Vrudha (60)***Vital signs**

Temperature : 98.8F

Blood pressure : 130/90mmhg

Heart rate : 70 bpm

Respiratory rate : 20 cpm

**General examination**

Higher mental function : Patient was alert, cooperative and fully oriented

Built : Moderately built

Skin : blackish discoloration over bilateral lower limbs and deformity in metatarsophalangeal joint

Deformity : deformity in bilateral metatarsophalangeal joints

Systemic examination of respiratory, cardiovascular, CNS and G.I.T. system revealed no abnormality detected.

**Local examination****[Table 1]**

	Upper limb	Lower limb
Joint involved	Bilateral elbow joint, wrist joint, metacarpophalangeal joint	Bilateral knee joint, ankle joint, metatarsophalangeal joint
Movement	Difficulty in range of movements	Difficulty in range of movements
Symmetry	Symmetrical	Symmetrical
Swelling	Bilateral elbow joint	Bilateral knee joint
Deformity	No deformity	Deformity in bilateral metatarsophalangeal joint
Discoloration	Absent	Present
Temperature	Not raised	Raised in bilateral knee joint
Joint crepitus	Absent	Present
Nodules	Absent	Absent

According to American Rheumatology Association 1998

**[Table 2]**

Criteria	Score
Joint affected	
4-10 small joint	5
Serology	
Positive RF or ACPA	3
Duration of symptoms	
More than 6 weeks	1
Acute phase reactants	
Abnormal CRP and ESR	1

Score – 10 (&gt; 6 = Rheumatoid arthritis )

**Investigation done****Hb -8.4gm%**

TLC – 6,900cells/cmm

PLT – 3.68 lakhs/cmm

**ESR -100mm/hr**

FBS -84.0mg/dl

Serum creatinine -1.1mg/dl

Blood urea-30.0mg/dl

Serum uric acid – 5.2 mg/dl

**Anti CCP - >80 AU/ml****RA factor – 134 IU/ml****ASLO - 40.75 IU/ml****CRP – 19.21 mg/L****Treatment advised****[Table 3]**

DAY	TREATMENT	RESULT
Day 1- Day 3	<ol style="list-style-type: none"> <li>1. <i>Dhanyamla parisheka</i> all over the body except head region</li> <li>2. <i>Lepa</i> of <i>Jatamayadi churna</i> mixed with <i>dhanyamla</i> over elbow joint, palm region, knee joint and sole region</li> </ol>	<ul style="list-style-type: none"> <li>• Marked reduction in blackish discoloration</li> <li>• Slight reduction in pain and swelling</li> </ul>
Day 4- Day 7	<ol style="list-style-type: none"> <li>1. <i>Churna pinda sweda</i> with <i>Kolakulathadi churna</i> and <i>dhanyamla</i> all over the body</li> <li>2. <i>Lepa</i> of <i>Jatamayadi churna</i> mixed with <i>dhanyamla</i> over elbow joint, palm region, knee joint and sole region</li> </ol>	<ul style="list-style-type: none"> <li>• Blackish discoloration and swelling reduced completely</li> <li>• Stiffness reduced by 50%</li> <li>• Pain reduced by 60%</li> </ul>
Day 7 –Day12	<ol style="list-style-type: none"> <li>1. <i>Valuka sweda</i> all over the body</li> <li>2. <i>Lepa</i> of <i>Jatamayadi churna</i> mixed with <i>dhanyamla</i> over elbow joint, palm region, knee joint and sole region</li> <li>3. Physiotherapy</li> </ol>	<ul style="list-style-type: none"> <li>• Stiffness and pain reduced completely</li> </ul>
Day 13	<ol style="list-style-type: none"> <li>1. <i>Virechana</i> with <i>Eranda taila</i> 30 ml along with <i>Ksheera</i></li> </ol>	

**Shamana yoga****[Table 4]**

Medication	Dosage
<i>Drakshadi kashaya</i>	15ml <i>Kashaya</i> + 45 ml of luke warm water b/f at morning
<i>Rasnaerandadi kashaya</i>	15 ml <i>Kashaya</i> + 45 ml of luke warm water b/f at evening
Cap. <i>Balamoola</i>	1-1-1 a/f
Tab. <i>Yogaraja guggulu</i>	1-0-1 a/f
Tab. <i>Anuloma DS</i>	0-0-1 a/f
<i>Shaddharana churna</i>	1tsp-0-1 tsp along with luke warm water
Flexofen MR	1-1-1 a/f
Flexi linament	E/A

**Advice on discharge**

- Avoid curd at night, have freshly prepared warm food and follow *pathya*
- Avoid day sleep, cold breeze and wind and follow exercises as instructed
- Discharge medicine :

[Table 5]

Medication	Dosage
1. <i>Vasaguluchaydi Kashaya</i>	15ml <i>Kashaya</i> +45 ml luke warm water b/f BD
2. <i>Tab Shallaki</i>	1-1-1 a/f
3. <i>Tab Anuloma DS</i>	0-0-1 a/f
4. <i>Tab Balamoola</i>	1-0-1 a/f
5. <i>Tab Haemo up</i>	1-0-1 a/f
6. <i>Shaddharana churna</i>	1tsp-0-1tsp along with luke warm water

**Discussion**

*Virudha ahara*(incompatible food), *Virudha cheshta*(improper physical activity), *Nischalatwa*(lack of physical activity) and *Snigdham bhuktavato annam* (performing physical exercise soon after intake of heavy food) causes *Jataragni mandya* and results in *Ama utpatti*. Aggravated *Vata* propels *Ama* throughout the body especially *Sleshmastana* which leads to *Srotoabhishtyanda* and results in *Angamarda*, *Aruchi*, *Trushna*, *Gourava*, *Alasya*, *Angashoonata*, *Apakiand Jwara*.

*Langhana* is the first line of treatment in *Amavata* which does the digestion of *Ama*. *Ruksha Swedana* is advised as it relieves the *Stambha*, *Gourava* and *Sheeta*. *Deepanadravyas* are indicated for *Agnisandhukshana*. For *Shodhanartha*, *Virechana* is advised in case of *Amavata*<sup>5</sup>.

First 3 days patient underwent *Parisheka* with *Dhanyamla* all over the body except head. *Dhanyamla* possesses *amla rasa*, *teekshna*, *ashukari*, *vikasi*, *sukshma* property does the mitigation of *vata* and *kapha dosha*. It has *Deepana* and *Pachana* actions. It increases the digestive fire and digests the *Ama* present in the body<sup>6</sup>. The patient observed slight reduction in pain and swelling.

For the next 4 days *Churna pinda sweda* with *Kolakulathadi churna* is advised. *Kola*, *Kulatha*, *Suradaru*, *Rasna* etc drugs in the *churna* balances the vitiated *vata dosha* and helps to relieve pain and inflammation. *Churna pinda sweda* increases peripheral blood supply and reduces inflammation and joint stiffness<sup>7</sup>. The patient experienced slight relief from stiffness and pain.

*Valuka sweda* is advised for next 6 days which expels morbid *Ama* and relieves pain and stiffness<sup>8</sup>. The patient also advised for physiotherapy.

*Jatamayadi churna* is advised for all the 12 days, contains *Jata*, *Amaya*, *chandana*, *Kunurushka*, *Nata*, *Ashwagandha* etc which is made into a paste with *dhanyamla* over the elbow region, palm region, knee region and sole region and is mainly indicated in acute inflammatory diseases<sup>9</sup>. The patient observed marked reduction in the blackish discoloration

*Virechana* with *Eranda taila* (30ml) along with milk is given on the 13<sup>th</sup> day. *Eranda taila* is *katu rasa* and *ushna virya* in nature which pacifies *vata* and *kapha*. *Virechana karma* helps in the detoxification of the body so that the *Dhatu samya* can be achieved<sup>10</sup>.

*Drakshadi kashaya* contains *Draksha*, *Madhuka*, *Yashtimadhu*, *Lodhra* etc which helps to treat the *Vata Pitta Dosha* and relieves tiredness and also helps to boost hemoglobin level<sup>11</sup>. *Rasna*, *Eranda*, *Bala*, *Sahachara* are the ingredients of *Rasnaerandadi Kashaya* which is *Vatahara* in nature mainly indicated to relieve pain and swelling<sup>12</sup>. *Balamoola* capsules are *Tridosahara* and are *Balya*, *Ojovardhaka* and *Brimhana* in action<sup>13</sup>. *Yogarajaguggulu* tablet contains *Chitraka*, *Pippalimoola*, *Yavani*, *Vidanga*, *Guggulu* etc helps in mitigation of *vata dosha* and indicated in *Vataroga*<sup>14</sup>. *Flexofen MR* contains *Chitraka*, *Langali*, *Rasna*, *Shudha Kupilu*, *Abhraka Bhasma* etc which reduces inflammation and pain and helps to strengthen the muscle and joints<sup>15</sup>. *Anuloma DS* tablet acts as laxative as it contains *Ajamoda*, *Jeeraka*, *Swarnaksheeri* etc<sup>16</sup>. *Flexi linament* is advised for its immediate pain relief action<sup>17</sup>. *Shaddharana churna* is advised for its *deepana* and *pachana* action<sup>18</sup>

**Conclusion**

This case study demonstrates promising results, highlighting the efficacy of Ayurvedic management in alleviating symptoms and improving quality of life of patients with *Amavata*. The patient experienced marked reduction in the symptoms and advised with discharge medicine, *pathyas* as well as brief exercises. This approach shows potential for successful treatment for future *Amavata* cases.

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