

A REVIEW STUDY ON AAMAVATA W.S.R. TO RHEUMATOID ARTHRITIS

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ABSTRACT

Amavata is the most common disease in the present era affecting a large aged population. Many people are not aware yet of this disease and its complications which are responsible for joint deformities. *Aamvata* term derived from words as “*Ama*” & “*Vata*”. *Aamvata* is a disease of *Rasavahastratasa* it is generally compared with Rheumatoid Arthritis. *Madhava* was the 1st physician who describes the disease *Aamvata*. It seems to be a simple disease but its prognosis is not so good. *Aamvata* is the outcome of *Agnidushti*, *Amotpatti*, and *Sandhivikruti*. *Ama* which is manifested due to derangement of *Agni* gets lodged in *Kapha-sthana* with the help of vitiated *VyanVayu*

producing stiffness, swelling, and tenderness, in joints. Derangement of *kapha Dosha* especially *shleshaka kapha* in *Aamvata* produces joint pain and swelling with a tenderness which can be correlated with Rheumatoid Arthritis. The described treatment procedures are *Langhan*, *Swedan*, *Tikta-katu*, *dipan*, *Virechan*, *Basti*, etc. Many herbal, as well as Ayurvedic preparations, are mentioned in the classics which are very effective remedies in *Aamvata*.^[1] So the present study deals with the systemic review of *Amvata* from all the classics of Ayurveda and its management. The present article will reveal the disease *Aamvata* in detail, its management, *Pathya –Apathya*, modern review in brief.

KEYWORDS: Ayurveda, *Aamvata*, *Aam*, *Agnimandya*, *Deepana-Pachana*, rheumatoid arthritis, *Virechanakarma*.

INTRODUCTION

Ayurveda is the science & art of life. Immense knowledge of Ayurveda includes explanations about *Dinacharya* and *Ritucharya*. The crucial homeostasis of the body is maintained by

trailing these principles. The changing lifestyle of human being through dietetic and behaviour pattern plays a major role in the manifestation of several disorders. Thus, this type of pattern may also lead to the development of the disease *Aamvata*. The Ama when combines with Vata Dosha and occupies in *Shleshma Sthana (Asthi & Sandhi)* results painful disease "*Aamvata*". The disease is characterized by various features like *Sandhishoola* like *Toda*, swelling, the inability of joint movements, etc. It is mostly the disease of *Madhyama Roga Marga* and having *Chirkari Swabhava*. Sometimes it can also be manifested as an acute case. *Aamvata* is also known as Rheumatoid Arthritis which is an autoimmune disease that causes inflammation in the joints. The disease R.A. is chronic and affects mostly the middle-aged group. The most commonly affected joints include the pelvis, low back, knees, and hips. These joints have reduced mobility with pain and stiffness. The progression of the disease shows that, the symptoms started in the digestive system reach to the joints and muscles. The common symptoms are indigestion, increased thirst, poor appetite, constant bloated feeling, vomiting, and nausea. Progressively people also experience swelling in the joints and muscles leading to pain and stiffness. Most commonly affected joints include the ankles, knees, elbows, fingers, toes, head and neck, and hips. Community prevalence study shows that females are more sufferers than males and the ratio of occurrence between them is 3:1.

MATERIALS AND METHODS

Aims and Objectives

1. To explore the *hetu* (causative factors), *Samprapti* (pathogenesis), *linga* (symptomatology) of *Aamvata*.
2. To explore the *Chikitsa* (treatment modalities) of *Aamvata*.
3. Understanding *Aamvata* with Rheumatoid arthritis and the need for Ayurveda over the conventional treatment of Rheumatoid arthritis

Classification of *aamvata*

Madhavakara has classified *Aamvata* according to predominance of *doshas* which are as follows^[2]

1. ***Ekdoshaja***: (a) *Vataja* (b) *Pittaja* (c) *Kaphaja*
2. ***Dwidoshaja***: (a) *Vata-pittaja* (b) *Pitta-kaphaja* (c) *Kapha-vataja*
3. ***Tridoshaja***: These varieties of *Aamvata* can be differentiated based on characteristic symptoms of *Dosha* involved.

Acharya Harita has classified *Aamvata* into the following four types based on clinical manifestation.^[3]

1. *Vishtambhi*

In *Vishtambhi* type of *Aamvata* *Gatra-gaurava*, *Adhmana* and *Bastishoola* are present.

2. *Gulmi*

In *Gulmi* type *Jathargarjana* (Bowel sounds), *Gulmavatapeeda*, and *Katijadata* like symptoms are present.

3. *Snehi*

Gatrasnigdhatta, *Jadya*, *Mandagni*, and Excretion of *Vijjala* and *Snigdha Ama* are the symptoms present in such type of *Aamvata*.^[4]

4. *Sarvangi*

Excretion of *Peeta*, *Shyama*, *Vijjala* and *Pakva Ama*, *Shrama*, and *Klama* are present in this type.

Again it can be classified according to

A. Severity

1. *Samanya Aamvata*
2. *Pravridha Aamvata*

The symptoms in *Samanya Aamvata*, are less severe, and not associated with *Upadrava* in compare to *Pravridha Aamvata*.

B. Chronicity

1. *Navina Aamvata*
2. *Jeerna Aamvata*

Up to one year of onset, it is said to be *Navina*, and more than one year it is called as *Jeerna Aamvata*.

Nidana

***Madhavakara* has described**

1. *Viruddhahara* (Unwholesome Diet)
2. *Viruddhacheshta* (Erroneous Habits)
3. *Mandagni* (Diminished Agni)
4. *Nishchalata* (Sedentary Life)
5. Exertion immediately after taking *Snigdha Ahara* is the causative factors for disease *Aamvata*

Pratyatma lakshana (Cardinal sign & symptoms)

These can be illustrated as follows

- A) *Sandhishoola* B) *Sandhishotha*
C) *Stabdhata* D) *Sparshasahyata*

Samanya Lakshana:- (General /Associated Features)

- A) *Angamarda* B) *Aruchi*
C) *Trishna* D) *Alasya*
E) *Gaurava* F) *Jwara*
G) *Apaka* H) *Angashoonata*

Doshanubandha lakshana

- A. *Vatanubandha - Ruka*
B. *Pittanubandha – Daha, Raga*
C. *Kaphanubandha – Staimitya, Guruta, Kandū*
D. *Vatapittanubandha – Ruka, Daha, Raga*
E. *Vatakaphanubandha –Ruka, Staimitya, Guruta, Kandū*
F. *Kaphapittanubandha –Staimitya, Guruta,Kandū, Daha, Raga*
G. *Sannipataja – Symptoms of all doshas*

Pravridhdhalakshana

- | | |
|------------------------|---|
| <i>Agnidaurbalya</i> | <i>Praseka</i> |
| <i>Aruchi</i> | <i>Gaurava</i> |
| <i>Vairasya</i> | <i>Vrishchikadanshavatavedana</i> |
| <i>Kukshikathinya</i> | <i>Kukshishoola</i> |
| <i>Vibandha</i> | <i>Antrakujana</i> |
| <i>Anaha</i> | <i>Chhardi</i> |
| <i>Hritgraha</i> | <i>Jadya</i> |
| <i>Bhrama</i> | <i>Murchaha</i> |
| <i>Nidra-viparyaya</i> | <i>Daha</i> |
| <i>Bahumutrata</i> | <i>Ruja & shotha in Hasta, Pada, Shiro, Trika, Janu, Uru Sandhi⁵</i> |

Samprapti of aamvata

As discussed earlier *Ama* is produced due to the disturbed function of *Agni* in the body. This produced *Ama* is slimy in nature, such *Ama* get together with *Dushit Vata* / *Prakopit Vata* and

circulates all over the body through *Shira* and *Dhamani* and gets lodged in *Kaphasthana* i.e. *Sandhi* because *Shleshak Kapha* is located in *Sandhi* and there after *Amvata* develops.

Samprapti ghataka

Dosha- *Vatapradhan tridosha*

Dooshya – *Rasadi dhatu; Asthigata snayu; Sira*

Agni - *Jatharagni; Rasa dhatwagni*

Ama – *Jatharagni janya & Rasadhatwagni janya*

Strotas- *Rasavaha, Asthivaha*

Udbhava Sthana - *Amashaya*

Adhishthan - *Asthisandhi*

Rogamarga - *Madhyama*

Lab tests

1. CBC (TLC, DC, Hb)
2. Acute phase reactants (ESR, CRP)
3. Rheumatoid Factor (RF).
4. Anti- CCP antibodies (most specific).

***Chikitsa sidhanta* (Available treatments)**

In Ayurveda science there are three types of *chikitsa* available

1. *Shamana*
2. *Shodhan*
3. *Nidanparivarjan*

Chakradatta was the first inventor, who described the principles of treatment for this disease, which are *langhana*, *swedana*, drugs having *Tikta katu Rasa* and *Deepana* action *virechana*, *snehapana* and *Anuvasana*^[6] as well as *ksharabasti* and *Yogaratanakara* have added *upanaha* without *sneha*, to these therapeutic measures. The details are as follows:

1. *Langhana*

Any measure, which brings in *laghuta* in the body is known as *langhana*. *Aamvat* is considered to be an *amashayottha vyadhi* and also *rasaja vikara*, *langhana* is the first line of treatment in such conditions starvation will further stop the production of *Ama*. In *Nirama Avastha* this measure may increase the *vata dosha*. So after achieving the *nirama lakshana* *langhana* should be stopped immediately.

2. *Swedana*

Swedana is sedation therapy. In this disease *swedana* is done locally on affected joints. In *Aamvata Rooksha Sweda* is recommended (Sedation without oil/fat). For the procedure of *Rooksha Sweda Baluka* (sand) is recommended. *Snehana* is contraindicated in *Aamvata*.

3. *Katu, Tikta & Pachak aahar & Aushadhi*

The drugs which are *Katu* (pungent), *Tikta* (bitter) and which act as *deepana*, *pachana* (appetizer) are recommended in *Aamvata*. These drugs, by their qualities, do *amapachana*, hence may help in relieving *shotha & shoola*.

4. *Virechana*

For *virechana*, *erendataila* and *hareetaki* are used. In *Aamvata* without any pre-operative procedure, *Virechana* is recommended directly. *Eranda* acts as *Strotoshodhaka*, *Shothahara*, *Shoolahara* and *Aamvatahara*.

5. *Bastichikitsa*

Chakradatta recommends *kshara basti* and *anuvasana basti* in *aamvata*. *Kshar basti* comprises of *Saindhav*, *Chincha*, *Guda*, *sonf*, *Gomutra Anuvasan basti* of *Prasarani taila*, *Bruhat saindhavadi taila*, *Dashmooladi taila* *Eranda taila* is used as a base in preparation of these *tailas*.

DISCUSSION

When *Ama* and *Vata* cumulatively get impaired and enters *Sandhi* (joints) finally leading to *Stabdhata* (stiffness) of the body, the condition is known as *Amavata*. The main aetiological factors responsible for the production of *Amavata* are *Viruddha Ahara* (unwholesome diet), *Viruddha Chesta* (erroneous habits), *Mandagni* (diminished Agni), *Nishchalata* (sedentary habits), any type of exertion immediately after taking *Snigdha Ahara* (unctuous food). Taking *Ushana* (hot) and *Sheeta* (cold) substances immediately after one another. The causes and prognosis of rheumatoid arthritis are very difficult to predict because of its variability.

Most of the Ayurvedic scholars correlate *Aamvata* with Rheumatism especially Rheumatoid Arthritis. Some scholars correlate it with fibromyalgia. Treatment regimen includes *Langhan Pachan* by *Amapachan* Medicines like *Vishatindukwati*, *Agnitundiwati*.

- *Doshawasechan* by *Virechan* with *Eranda Tail* taken orally with warm milk
- *Sewdan- Baluka sewdan*,
- *Rasayan Chikitsa-Vatahar Chikitsa*, *Ashwagandha* Compound, *Maharasnadi kwath*, *Aamvatari ras* etc.

- Symptomatic treatment if necessary.
- *Pathyapathya* recommendations^[7]

CONCLUSION

Virechanakarma is described for the effective management of *Amavata* as a *Shodhana* therapy. As it is the most suitable therapy for the *Pitta Dosha* impairment, it is also responsible for *Agnivardhana* and evacuation of *Ama*, which is the mainly responsible for this disease.

Virechanakarma followed by the *Vishishta Nidana Parivarjana* in the form of food and lifestyle showed remarkable symptomatic relief in the features of *Amavata*.^[8]

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