

**TO STUDY THE SHOOLAHARA EFFECT OF AGNIKARMA BY
LOHA SHALAKA IN JANUSANDHIGATAVATA W.S.R TO KNEE
JOINT OSTEOARTHRITIS”: CASE STUDY**

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ABSTRACT

In Ayurveda Sandhigataavata is explained under Vatavyadhi. Patients are on long term NSAID's as well as on steroids, but comparing with its effect pain relief is not as good as compared to Ayurvedic treatment like Agnikarma or Raktamokshan. Sandhigataavata is compared to Osteoarthritis according to modern. In Osteoarthritis knee joint osteoarthritis is most commonly found, as it is weight bearing joint. It usually occurs in late 40's due to degeneration of articular joint and lifestyle. In Ayurveda different treatment procedures are explained to get rid from pain and stiffness occurring from janusandhigataavata. In which Agnikarma is one of the best parasurgical treatment modality explained in ayurvedic text which has immediate action and patient gets shoolahar effect as well.

KEYWORDS: Janusandhigataavata, Agnikarma, Knee joint Osteoarthritis.

INTRODUCTION

Ayurveda stresses at the significance in treating diseased person in addition to keeping the fitness of the healthful person. In Ayurveda, the disease Sandhigataavata is defined under Vatavyadhi. It is caused because of vatavrudhikara aahar like katu, tikta, kashay rasa pradhan dravya sevan and vihar like ativyayam(immoderate stress to the joints)or because of abhigat. Sandhigataavata has the medical functions like shoola, swelling, painful moves of joints.

Sandhigataavata is similar to modern time period referred to as Osteoarthritis. In sandhigataavata knee joint osteoarthritis is maximum not unusual place as it is far weight bearing joint. Due to the life style; Indians be afflicted by knee joint osteoarthritis. Osteoarthritis is a degenerative circumstance of the joints & the articular cartilages.

Though it's far the disorder of overdue age its prevalence in early 40's may be very not unusual place in current instances and its incidence is more. Treatment for this in current technology is NSAID, steroids and joint substitute surgery, this could cause many complications. There isn't any everlasting remedy to be had for this disorder and quantity of drugs are available in Ayurveda. So it is very much important to offer powerful in addition to having much less negative outcomes remedy on this disorder.

In Sandhigataavata, there are critical entities one is sandhi and some other is vata. As in step with present-day facts approximately 1% of general populace of India suffers from this disorder. Excessive shoola, stiffness and trouble in moves make the affected person's lifestyles miserable. Conventional remedy offers affected person shoola alleviation to certain extent. The maximum hard component approximately this disorder is that it's far a revolutionary circumstance.

हन्तिसंधिगतःसन्धीशूलशोफौकरोतिच।Su.Ni 1/28

As Vata aggrevates it creates shoola, shopha in sandhi and impacts the moves of sandhi

In Ayurveda method to the remedy of a disorder includes most important factors-

A) ShodhanChikitsa

B) Shaman Chikitsa

कुर्यात्संधिगतेवातेदाहस्वेदोपनाहनम्।'- योगरत्नाकर

In Ayurveda Agnikarma is explained under para-surgical procedure. It is said that Agnikarma is **ROGANAM APUNARBHAVA CHIKITSA** that means once the disease is treated with Agnikarma it does not occur again. It has good shoolahara effect. Due to Ushna sukshma and ashukari guna of Agnikarma it pacifies Vata-kapha dosha and strotavrodha which inturn reduces sholla and other symptoms.

MATERIALS AND METHODS

- In this paper, a case of 53 years old female patient having signs and symptoms of Janusandhigataavata is discussed with detailed history.
- It is a single arm clinical study.
- Informed consent was taken in patient's language before starting the treatment.
- Patient was treated with Agnikarma with Loha Shalaka over affected knee joint.

PATIENT INFORMATION

A 47 years female subject, with Job occupation, came to Shalyatantra OPD Bharati Ayurveda College and Hospital, Pune, with complaints of right knee joint pain with difficulty in walking and sent to Shalyatantra IPD for Agnikarma Chikitsa (OPD NO-20130300792).

HISTORY OF PRESENT ILLNESS

Patient didn't have any signs and symptoms 6 month ago. Then few days before visiting the hospital, patient noticed pain in right knee joint and difficulty in walking.

HISTORY OF PAST ILLNESS

Not K/C/O HTN/DM/TUBERCULOSIS/any other illness.

FAMILY HISTORY

There is no relevant family history contributing to the current situation of the patient.

PERSONAL HISTORY

Appetite-Normal

Bowel-Constipation

Micturation-5-6 times/DAY

Sleep-Disturbed

Diet-Mixed diet-Specially Non-veg

Addiction-No

GENERAL EXAMINATION

Built- Obese

Pallor- Absent

Icterus- Absent

Cynosis and Clubbing- Absent

Tongue- Saam

Pulse- 86/min

B.P.- 130/80mmhg

HIGHER MENTAL ACTIVITIES

Consciousness-Well Conscious

Orientation-Good

Memory-Good

Speech-Normal

DASHAVIDHA PAREEKSHA

Prakruti- Kapha-Pitta

Vikruta- Hetu- Ahara - Vihara – Avyayama

Dosha - Tridosaja

Dushya -Mamsa

Desha - Jangala

Bala - Madhayama

Sara- Madhyama

Samhanana - Madhyama

Pramana - 72 kgs

Satva- Madhyama

Saatmya- Sarva Rasa Satmya

Ahara Shakta

Jarana Shakti- Avara

Abhyavarana Shakti- Madhyama

Koshta- Krura

Vyayama Shakti- Avara

Vaya- Madhyama

On Inspection

Right Knee Joint-Crepitus-present, Minimal swelling, Range of Movements-Restricted

Diagnosis

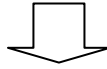
Based on the present illness, chief complain and clinical features the case was diagnosed as Janusandhigatavata(knee joint osteoarthritis)

TREATMENT SCHEDULE

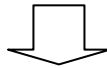
Agnikarma at affected knee joint with loha shalaka.

PROCEDURE

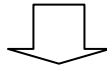
Under AAP (All Aseptic Precautions) affected knee cleaned with normal saline.



Loha shalaka made Red hot.



Most painful site marked at affected knee joint.



Agnikarma done on marked site and ghee applied

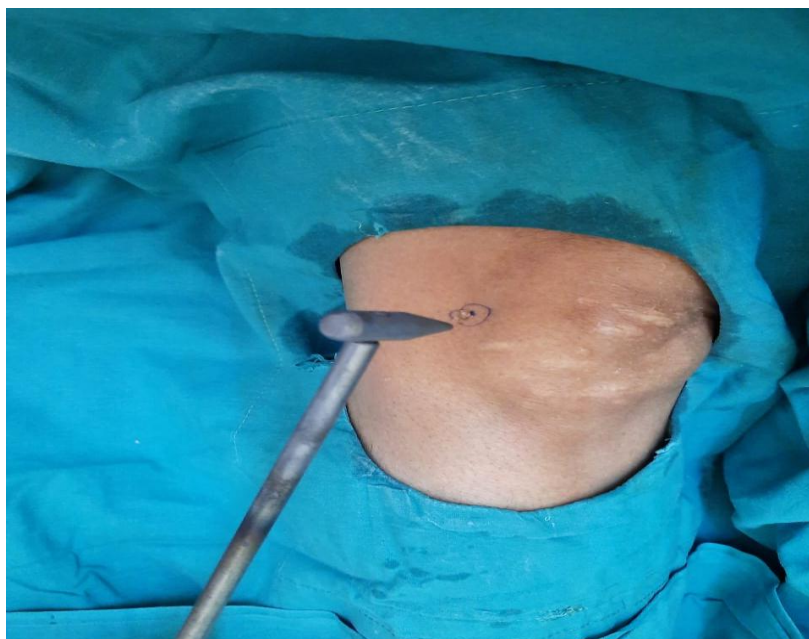


Image No.1-Agnikarma on right knee joint.

RESULT AND OBSERVATION

There was significant change after treatment.

The affected knee joint pain was reduced and patient was able to walk properly.

DISCUSSION

During the case study it was observed that Agnikarma is effective as shoolahara in Janusandhigatavata.

As Agnikarma have ushna and ashukari guna it removes aavaran and decreases the vata dosha which inturn helps to decrease pain at janu sandhi.

CONCLUSION

Agnikarma with Loha shalaka proved to be effective for pain management in Janusandhigata vata.

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