

## **A CONCEPTUAL STUDY OF AMAVATA (RHEUMATOID ARTHRITIS) THROUGH AYURVEDA: A REVIEW**

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### **ABSTRACT**

In the present era Amavata is the most common disease affecting a large aged population. Amavata term derived from words as Ama & Vata. The Ama when combines with Vata Dosha & occupies sleshmasthanas (Asthisandhi) results in painful disease. The clinical features of Amavata are pain, swelling and stiffness of joints, fever and general debility. These symptoms are closely related to Rheumatoid arthritis. It is a degenerative connective tissue disease that mostly affects the joints. Amotpatti and sandhivikriti are symptoms of Amavata caused by Agnimandya. As a result, Amavata treatment focuses on Agni correction and Vata management, resulting in a healthy sandhi and sandhistha shleshma, which is the most effective

treatment for this ailment. In present scenario with the globalization of Ayurveda everybody is looking with the hope towards us to overcome this challenge. There are various herbal as well as Rasa preparations mentioned in our classics which are effective remedy in Amavata.

**KEYWORDS:** Amavata, Vata, Ama, Rheumatoid arthritis, Sandhivikriti.

### **INTRODUCTION**

Amavata is a disease of Asthivaha and Rasavaha strotas. It is mostly caused by Ama and vitiation of the Vata dosha. Ama is transported by irritated Vata and deposited in

sleshmasthanas (seats of kapha such as joints), resulting in symptoms such as Angamarda (body ache), Aruchi (lack of appetite), Alasya (weakness), Sandhiruk (joint pain), and Sandhishotha (joint swelling).

Madhava kara (700AD) was the first who described the features of Amavata in Madhava Nidanawhereas the treatment of Amavata was first explained by Acharya Cakra Dutta.

According to the clinical features Amavata very closely resembles with the Rheumatoid arthritis.

Rheumatoid arthritis is a chronic systemic and symmetric inflammatory polyarthritis involving large and small joints, that may affect many tissues and organs-skin, blood vessels, heart, lungs, and muscles-but principally attacks the joints, producing a nonsuppurative proliferative and inflammatory synovitis that often progresses to destruction of the articular cartilage and ankylosis of the joints.

The prevalence of RA is ~0.8% of the population [0.3-2.1%] women are affected approximately three times more often than men. The disease usually appears in the fourth and fifth decades of life, with 80% of patient developing it between the ages of 35 and 50.

Ayurveda treats root cause of Amavata which leads to break the Samprapti of the disease. Acharya Chakradatta described the chikitsa Siddhant for Amavata. It includes Langhana, Swedana and use of drugs having Tikta, Katu Rasa with Deepana property, Virechana, Snehapana, Basti [Anuvasana, kshar].

## MATERIAL AND METHODS

Present work has been done based on critical review of classical information, published research works, modern literature and research works conducted at various institutes. The possible correlation has been made between collected information and has been presented in systematic way.

## HISTORICAL REVIEW

### 1. Vedika Period

Amavata is not mentioned in any of the four Vedas. The terms Ama and Vata, on the other hand, have been described individually. The primary pathogenic element of this condition is Vata, pitta and kapha, which is found in a haphazard manner. Some authors link the Vedic

concept of Visha to the Ayurvedic concept of Ama.

## 2. Samhita Period

**Charaka Samhita:-** It is the main Ayurvedic texts which is based on medicine. In this Samhita Amavata is not described as a complete chapter from but some features of Amavata is described in chapter called “Vata Vyadhi” in this chapter symptoms of Kaphavritta Vyan has similarity with Amavata.

The disease’s main pathogenic factors, Ama and Vata, have been scientifically defined in several chapters of the Samhita.

- The elaborate description of etiology, pathology, clinical manifestation and chikitsa regarding Ama pradoshaja Vikara gives a proper guideline to approach the disease Amavata in clinical aspect in Viman Sthana.
- Charka’s presentation of Sharirgata Ama in Grahani chikitsa is almost identical to Chakrapani’s description of Amavata chikitsa. (ch.chi.15/75)

**Sushruta Samhita:-** This Samhita is mostly concerned with surgical procedures for various ailments, although Amavata is not addressed as a chapter.

- In Sushruta Uttar Tantra 56/10, Acharya Sushruta describes Ama briefly.

Harita Samhita - The Harita Samhita features a full chapter on Amavata in which Nidana, Rupa, Bheda and Sadhyasadhyata are detailed in depth and the depiction is somewhat different from what is seen elsewhere. Madhava Nidaan mentions something similar. Anga-vaikalya is provided as lakshan in this case.

Bhela Samhita- In the Bhela Samhita, there is no direct mention of the disease Amavata, but the notion of major pathogenic factor, Ama & Vata is explained exclusively, as it is in Charaka and Sushruta. Some phrase in the 10<sup>th</sup> chapter of the sutra Sthana titled “Atha Ama pradosiya” bears resemblance to the disease Amavata. B.S.Su. (10/1-21)

Kashyapa Samhita -This Samhita does not reference Amavata, although it does employ terms like Amadosha and Amajirna. (Chapter 24 K.S.)

Anjana Nidana- In Anjana Nidana there is a detailed description of Amavata including Nidana, Purva Rupa, Rupa etc.

Astanga Samgraha- There is no reference of Amavata in Astanga Samgraha.

Astanga Hridaya- Though Amavata is not mentioned as a separate disease entity in Astanga

Hridaya, it has been mentioned when addressing the therapeutic function of Vyasad Yoga.

### 3. Medual period

Madhava Nidana - Madhava kara is the 1<sup>st</sup> author who has described Amavata a separate disease entity in his text. There is a complete chapter containing detailed description regarding etiopathogenesis, clinical manifestations, complication & prognosis of Amavata.

Yogaratrikara- Amavata is described in detail in this work. There are also a lot of aushada yogas for this text has mentioned.

Bhava Prakash- The author has detailed Amavata in great depth in this essay. In this literature, the word “Erandbija” is referenced.

### ETYMOLOGY OF WORD AMAVATA

1. “Amena sahita Vata Amavata.” The pathogenic Ama travels throughout the body, propelled by vitiated Vata doshas, causing blockage in the bodily channels, which then stations itself in the sandhi, resulting in Amavata.
2. Ajeerna produces Ama, which is combined with Vata to form Amavata.

### DEFINITION OF AMAVATA

The Aetiopathogenesis of Amavata described in Madhava and Bhavaprakasha is as follows. Acharya Madhava was the first scholar to describe the disease Amavata as a separate entity. He also gives the appropriate definition of Amavata. “When vitiated Vata and Ama simultaneously enters in the Koshta, Trika and sandhi leading to stiffness of the body and Trika sandhi vedana. This dreadful disease is known as Amavata.

**SYNONYMS** Rsamarut, Amamarut, Rheumatoid arthritis.

### ETIOLOGY

Specific etiological factors accountable for Amavata’ Aetiology have been described in Madhavanidaan.

1. Viruddhahara (indulgence in incompatible foods.)
2. Viruddh chesta (indulgence in incompatible habits)
3. Mandagni (hypofunction of the digestive capacity of the body)
4. Snigdha bhuktavato vyayama (exercising after consuming fatty foods.
5. Nischalata (lack of physical activity)

## CLASSIFICATION

The following are the doshas that Acharya Madhavakar, sharngdhar and Harita have mentioned

Madhava	Sharngdhar	Harita
Vataj	Vataj	Vishtambhi
Pitaj	Pitaj	Gulmi
Kaphaj	Kaphaj	Snehi
Vata pitta	Sannipataj	Sarvangi
Vata kapha		
Pitta kapha		

## SAMPRAPTI GHATAK (favorable things for disease)

- Dosha – Vata, kapha Pradhan tridosha
- Dushya – Rasa, Rakta, Mansha, Asthi, Sandhi, Snayu,
- Srotas (channel) – Rasavaha
- Srotodusti – sanga
- Adhithan- Sarva sandhiya
- Udhbhavasthana – Amashaya
- Rog Marga- Madhyam
- Vyadhi Shvabhava- Aashukari, kastasadhya
- Agni –Jatharagani and dhatvagnimandhya
- Vyakta Sthana- Kapha Sthana like Amashaya, Uras

## SAMPRAPTI (PATHOGENESIS)

People with different mandagni (low digestive ability) are more likely to produce amarasa(improperly digested food) in their bodies if they engage in incompatible food habits, engage in a lot of physical activity or exercise after eating fatty meals. This ama, which is related with Vata, swiftly goes to various seats of Sleshma in the body (mostly joints), filling them and the dhaminies (blood vessels) with picchila (waxy material), resulting in a terrible end product of stiffness of the body.

## PURVARUPA (PREMONITORY SYMPTOMS)

The classics make no reference of Purvarupa of Amavata. However, during the course of the sickness, we experience symptoms, which are classified as Purvarupa of Amavata. However, the lakshan that follows might be called Amavata's Purvarupa.

1. Agnimandya
2. Angamarda

3. Hridgaurava
4. Nidra naash
5. Aalasya

### RUPA (SIGN AND SYMPTOMS)

Madhavakar, Bhava Mishra and other have described the Rupa of Amavata. These can be categorized as follows-

Pratyatm	Samanya	Pravridha	Doshanubandha
Sandhishoola	Angamarda	Vrishchikvat vedana	Vata- Shoola
Sandhishotha	Aruchi	Agnidaurbalya	Pitta- Daha, Raga
Sandhi jadyata	Trishna	Praseka	Kapha- Guruta
	Alasya	Nidra viparayaya	
	Gaurav	Vairasaya	
	Jwara	Daha	
	Apaka	Bahumutrata	
	Shunta anganama		

### PROGNOSIS

Amavata is mainly the disease of Madhyam Roga Marga. –

- (i) Sadhya (Curable): - An ek- doshaja disease caused by a small number of hetus, with minimal sign and symptoms and a recent onset.
- (ii) Yapy (Palliable): - When it is Dvidoshaja, with multiple causative elements, signs and symptoms, and persistent, it becomes Yapy.
- (iii) Krucchsadya: - Sannipatika Amavata with generalized edema (Sarvanga Shotha)

### TREATMENT

Langhana, Swedana, medications with Tikta katu rasa and Deepana property, Virechana, Snehapana and Basti principles of treating Amavata. The etiology and treatment guiding concepts are described similarly in Yogaratnakara. In addition to Ruksha Sweda, Upanaha Valuka pottali have been mentioned for managing Amavata. There are numerous recipes listed in Yogaratnakara and Chakradatta in the forms of Kwatha, and lepana. The same procedures were followed in this respect by Acharya Bhavamisra as well.

- 1) Langhana: - The first and most important step that has been recommended for Amavata chikitsa is Langhana. The main initiators of Amavata, Agnimandya and Ama, are best subdued by Langhana. (C.Vi 2/13, Su.U. 39/101) Additionally, Amavata is regarded as an Amasayotha Vyadhi, and the primary course of treatment for such diseases is Langhana.

- 2) Swedana: - Due to its amapachan, Kaphahara, Shoshana etc. qualities, Ruksha Sweda has been management of Amavata in the form of Valuka pottali. Snigdha Sweda should be used in the chronic stage of the illness when ruksha occurs as a result of Vata vrddhi since it contains Mardavakara and balakara.
- 3) Tikta- Katu and Deepana drugs: - The antagonistic qualities of ama and kapha are present in Tikta and katu rasa. Because of their Agni vardhaka property, they boost the capacity of the digestive system, which breaks down amarasa and lessens the production of kapha. They also clear blockages from the channels. The same mechanism drives the effects of Deepana medicines.
- 4) Virechana: - Virechana helps to eliminate the unwanted toxin from the body.
- 5) Snehapana: - In the nirama stage of the disease, Snehapana has been suggested. As it affects digestion by softening the food and stimulating the Agni, which is the basic necessity in Amavata, shaman Sneha has been said to strengthen the Agni. (C.Ch. 15/201)
- 6) Basti: - Chakradatta advised kshar basti and Brihata Saindhavadi Anuvasana basti in Amavata.

### **PATHYAPATHYA**

Pathya: - Ushan Jala, Lasuna and Adraka, purana sastikasali yava, panchkola siddha Anupana etc.

Apathya: - Mansa, matsya, Dustajala, SitaJala, dadhi, Viruddhahara, Visamasana.

### **UPADRAVA OF AMAVATA**

An Angavaikalya (deformity) was mentioned Acharya Harita as an updrava of Amavata. Trishna, chardi, bharna, Murcha, and other items were named by Acharya Madhava as upadravas of Amavata.

### **DISCUSSION CONCLUSION**

In Ayurvedic literature, Amavata is categorized under Krichhasadhya Vyadhi and hence becoming a challenging issue for medical science. Its modern treatment consists of analgesics, anti-inflammatory and finally surgery which are not a complete and effective solution because it also has large number of side effects. The correct application of Chikitsa sutra described in our Ayurvedic literature with diet, life style intervention and continuous use of drugs have a good control of the disease and achieve improvement in quality of life. As Amavata, Ama and Vata have opposite properties of each other, so it's become

challenging to treat, so these things come in across while treating it, because any drug or procedure selected will oppose one another. Depending on the clinical symptoms present in the patient Chikitsa sutra of Amavata can be used. Hence it can be beneficial for the patients and society not only on preventive aspect but on curative aspect also. The complete Amavata chikitsa sutra can be developed as a standard protocol.

## REFERENCES

1. Madhavkara. Madhavanidana, Vimala Madhudhara Teeka by Brahmanand, Chaukhambha Surabharati Prakashana, Varanasi, ed. 2010, poorvardha, adhyaya 25.
2. Churchill Livingstone. Davidson's Principle and practice of medicine. 19th ed.
3. Chakrapani Datta. Chakradatta commentary by Indradev Tripathi, Amavatarogadhikara 25/31 -36. Varanasi Chaukhambha Sanskrit sansthan, 2010.
4. Madhava Nidana With madhukosha Sanskrit Commentary and with the Vidyotini Hindi Commentary and Part-1 Shri sudarshana shastri and Prof. Yadunandana Upadhyaya, M.Ni.25/5, Chaukhambha Sanskrit sansthan, Varanasi- 30ed.
5. Madhava Nidana With madhukosha Sanskrit Commentary and with the Vidyotini Hindi Commentary and Part-1 Shri sudarshana shastri and Prof. Yadunandana Upadhyaya, M.Ni.25/5, Chaukhambha Sanskrit sansthan, Varanasi- 30ed.
6. Madhav Nidana commented by Vijay Rakshit, Madhukosh Teeka by Madhavkara chapter 25/12 Amavata nidana pg no 512/2009.
7. Sharangdhara Samhita Purvakhand 7/41 jeevanaprada Hindi commentary pg no.80.
8. Harita Samhita Edited with Asha Hindi Commentary by Ramavatar shastri, prachya prakashan. Varanasi, 1st edition, 1985.
9. Madhava Nidana With madhukosha Sanskrit Commentary and with the Vidyotini Hindi Commentary and Part-1 Shri sudarshana shastri and Prof. Yadunandana Upadhyaya, M.Ni.25/5, Chaukhambha Sanskrit sansthan, Varanasi- 30ed.
10. Chakra Datta of Shri Chakrapani Datta with the Vaidya Prabha Hindi Commentary Editor Dr. Indradeva Tripathi, Amavata Chikitsa/1 Chaukhambha Sanskrit sansthan, Varanasi 3rd ed.